

The Influence of Work Life Balance on Turnover Intention in Private Hospitals: The Mediating Role of Work Life Conflict

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Abstract

This research aims to investigate the effects of work-life balance (WLB) practices (schedule flexibility, manager support and job autonomy) on work-life conflict and turnover intentions. The mediating effect of work-life conflict on the relationship between WLB practices and turnover intentions is also investigated. This research was applied to the context of private hospitals in Jordan targeting medical-staff. Questionnaires were randomly distributed to medical-staff and yielded a response rate of 80.6 percent. Reliability and validity tests were first carried out, then data was analyzed using structural equation modeling (SEM). Results revealed that manager support was the only WLB practice that had a significant negative direct effect on turnover intentions. Job autonomy had a negative indirect effect on turnover intentions through work-life conflict. Meanwhile, schedule flexibility had insignificant effect on turnover intentions. Therefore, it was clear that the informal WLB practices (manager support and job autonomy) had the most significant effect and are the determinants of turnover intentions. The mediating role of work-life conflict was only significant with job autonomy. Additionally, the effect of work-life conflict on turnover intentions was positive and significant.

Keywords: Work-life balance, Turnover intentions, Work-life conflict, Private hospitals, Jordan.

1. Introduction

The quest to prioritize one's activities and tasks in a balanced way has long been considered a merit. In fact, this ability has been linked to productivity, time-management as well as to work-life balance (WLB) (Adams and Jex, 1999).

It is evident that WLB has gained vast popularity in the literature during the last two decades (Muna and Mansour, 2009; Koubova and Buchko, 2013). In fact, WLB is considered one of the most powerful human resource tools that have been adopted and implemented by leading business enterprise giants such as Microsoft, Hewlett Packard (HP) and Shell (Dunne, 2007).

WLB is best viewed as a win-win situation in which both employees (along with their families) and the company benefit from a better equilibrium and balance between work and family life (Vloeberghs, 2002). The literature is abundant with evidences that positively correlate WLB to positive outcomes such as profit returns (Beauregard and Henry, 2009), increased shareholder returns (Arthur, 2003), productivity, workplace attitudes and lower turnover intentions (Wilkinson, 2008; Koubova and Buchko, 2013). As a matter of fact, countless benefits can be reaped from adopting WLB and so many studies have been dedicated to investigate WLB's antecedents and consequences (Mas-Machuca, 2016).

Though there are various advantages to employ WLB practices at the workplace, however, these advantages may differ according to industry (Konrad and Mangel, 2000). This could be attributed to the fact that not all WLB practices (such as certain flexible work options) can be a possibility for all industries to offer (Dunne, 2007). And while most studies have been devoted to investigate the role of gender and culture in WLB, little attention has been given to occupational differences (Moore, 2007).

This is where this research comes into play shedding light on a topic that is virtually untapped in developing countries—not least in the MENA region—in the context of healthcare. This is in response to the callings in the literature to further examine WLB and organizational outcomes, especially in the context of developing countries (Roberts, 2007).

It could be argued that it's essential to study WLB in the healthcare context for the theoretical and practical implications given the stressful context that the field exerts on its employees (Yildirim and Aycan, 2008). Regional research studies conducted in the healthcare sector in Jordan have also highlighted the job stressors medical-staff face in Jordan (Abdalahim, 2013).

Additionally, this research is conducted with the intention of igniting a discussion about the importance of WLB practices to be implemented in the private sector in Jordan, especially in Jordanian private hospitals. The research will also reveal the most influential WLB practices on turnover intentions mediated by work-life

conflict in order to draw conclusions specific to a developing country like Jordan.

2. Literature Review and Theoretical Background

2.1 WLB Conceptualization

WLB could be considered as the renovated term for what was initially known as work-family conflict (WFC) (Boswell and Olson-Buchanan, 2007). WFC emerged when increased attention was given by researchers seeking to investigate the clash that can arise when an individual's work interferes (or conflict—hence the term) with his/her family role and vice versa (Adams and Jex, 1999).

Early talk about work and family clashes gained legitimacy when women started to flood into the workforce following World War II (Roberts, 2007). The discussion was further ignited with women struggling to balance their dual roles of wives and mothers on one hand and as professional career women on the other (Konrad and Mangel, 2000; Roberts, 2007; Moore, 2007; Agarwal and Lenka, 2015). At first glance, WLB was seen as women's issue (Moore, 2007). However, not only did the dual family and work responsibilities take a toll on women, men too were suffering when work and career aspirations took priority over family, friends, social affairs and leisure activities (Roberts, 2007; Muna and Mansour, 2009).

The term work-family conflict was later replaced in the literature with work-life balance to imply that personal life and work should not necessarily be seen as mutually exclusive. Instead, the two can co-exist in a balanced and complementary manner (Muna and Mansour, 2009).

After the introduction of WLB, outbursts of studies were published examining antecedents and consequences of WLB (e.g. Koubova and Buchko, 2013; Mas-Machuca, 2016).

However, some researchers (e.g. Lyness and Judiesch, 2008) attempted to define balance between work and life as being more involved in family role than in work duties. Nevertheless, this contradicting and competing view hinders the balanced perspective of having harmonious interfaces between different life domains (Abendroth and den Dulk, 2011). Though this view seems simplistic, it actually isn't if you take into account a person's limited resources (time, energy, money, etc.) (Koubova and Buchko, 2013).

Back to viewing work and life in a complementary fashion, Graves et al. (2007) suggested a positive correlation between work and personal life as they viewed WLB in light of role accumulation and conservation of resources theories where one's resources are seen as expandable rather than fixed. Thus having a successful personal life pours into positive behaviors and attitudes in the work domain such as job satisfaction as well as overall life satisfaction (Koubova and Buchko, 2013). Another definition of WLB was suggested by Frame and Hartog (2003) who directly linked positive WLB with the ability of employees to freely utilize flexible working hours arrangements to balance work and other personal commitments (family, friends, hobbies, studies, etc.) rather than work consuming other dimensions of life. In conclusion, WLB is subjective differing from one person to another and depends on the individual's perception of their personal capability of balancing work and non-work responsibilities, and, for the most part, do so (Moore, 2007).

2.2 WLB Dimensions

One concept that has gained spotlight in WLB literature is flexible work options (Beauregard and Henry, 2009). Prior research studies have shown flexible working policies to be the most important factor that improves WLB. Nevertheless, because there is no particular scale that measure this concept it is considered as an ambiguous term (Hill et al., 2008). Flexible work options (also referred to as smarter working by Dunne (2007)) includes flexible work hours (flextime) or schedule flexibility (Carlson, et al., 2010), which allows employees to work a certain number of hours varying their start and finish time to their convenience in addition to compressed weeks (i.e. reducing a standard workweek by working longer hours) (Dunne, 2007; Beauregard and Henry, 2009). In Smith and Carroll's (2002) study, flexible hours were the preferred method of utilizing WLB. Moreover, flexible work options can take on other forms such as job-sharing between two people, Time Off In Lieu (TOIL), part-time work (Ahmad and Omar, 2012) in addition to flexible work arrangements (Dunne, 2007; Koubova and Buchko, 2013). In fact, technology has paved the way to facilitate flexible work arrangements and thus increased possibilities for working remotely from home via internet or intranet, smart phones, etc. (Vloeberghs, 2002) and for that particular reason, Muna and Mansour (2009) stated that the virtual workforce is the phenomenon of twenty-first century. Though there's a consensus that technology in general has facilitated our lives in ways beyond imagination, one can argue that bringing work into homes via technology may hinder the balance that it initially attempted to achieve (Check, 1996). In Vloeberghs' (2002) study, WLB practices could also include initiatives to provide employees with materials such as computers for use at home, cultural, sporting and leisure facilities, breastfeeding rooms for new mothers, in addition to financial arrangements as insurance, allowances for the care of a sick family member or a subsidy for holiday activities.

In order to cater for different employee WLB needs, companies must have WLB practices locked in place within company policy in order to support employees. According to Wilkinson (2008), employers' commitment to the well being of its employees is demonstrated by offering WLB practices—not least flexible

work options.

Therefore, WLB can be regarded as multi-dimensional. In fact, Anderson et al. (2002) have categorized WLB into formal and informal practices and Ahmad and Omar (2012) have emphasized informal practices to be superior to formal WLB practices. This argument also coincides with Hammer et al. (2005) who claim that informal practices surpass formal ones in helping employees better balance between different aspects of their life.

Informal support means employers offer support in the form of granting employees greater autonomy to manage their work (Behson, 2005), supporting employees who wish to leave work early for personal or family matters (Roehling et al., 2001) in addition to psychological support such as advice about the combination of family and professional life (Vloeberghs, 2002). Practically speaking, informal support could be a good alternative if a company cannot afford the resources to deploy formal WLB practices (Anderson et al. 2002).

Nonetheless, these WLB practices should be properly reflected in Human Resources (HR) strategies which in turn are formulated into WLB-supportive policies. It is essential that HR professionals become responsive to employees who favor flexibility through designing creative work systems, job structures, compensation packages and supportive organizational cultures (Muna and Mansou, 2009) accommodating more conducive systems for those who wish to create more balance in their lives (Todd, 2004). And while these new changes that cater for WLB practices present new challenges for human resource management (Muna and Mansour, 2009), these changes are positively perceived by employees and thus lead to greater mutual commitment between employers and employees (Vloeberghs, 2002).

Based on this review, WLB is classified into the following dimensions in this study:

2.2.1 Schedule Flexibility

Schedule flexibility (also known as 'flextime') represents a formal WLB dimension and refers to the flexibility granted to employees in choosing their starting and finishing times usually around a band of core hours where each employee must be present (Anderson, et al. 2002; Hill et al., 2008). It was preferred over other forms of flexibility arrangements such as flexplace (telecommuting) has the potential to impede WLB because it removes the physical boundary between work and personal life (Shockley and Allen, 2007). Furthermore, schedule flexibility has been described as quick wins to implement WLB practices because they have minimal cost implications (Dunne, 2007).

2.2.2 Job Autonomy

Job autonomy represents a key informal WLB practice and refers to the degree of freedom and discretion provided to employees to schedule work and choose the appropriate procedures to use in carrying out the job (Hackman and Oldham, 1976).

2.2.3 Manager Support

Manager support represents another key informal WLB practice and refers to the degree managers support and understand their subordinates with regard to personal and family life issues. Manager's support is expected to considerably improve satisfaction among employees (Abdallah et al., 2016)

2.3 WLB Implementation Challenges

After probing the literature, it becomes evident that WLB practices do not necessarily yield the desired outcomes they were set out to achieve (Beauregard and Henry, 2009). This could be due to a couple of reasons. For example, lack of support by management to continuously implement such practices (Anderson, et al. 2002). According to Thompson et al. (1999), employees are reluctant to fully take advantage of such practices depending on managerial support they receive. This concern is based on the fear that utilizing such practices will reduce advancement opportunities and may be perceived as a lack of commitment (Beauregard and Henry, 2009). This view, however, may hold true as studies have shown that the use of WLB practices—in fact—is negatively perceived by colleagues as a sign of lack of organizational commitment (Allen and Russell, 1999). Specifically, those who make use of flexible work schedules are least likely to get promoted and most likely to quit their jobs as a result (Cohen and Single, 2001; Houston and Waumsley, 2003). For example, telework leads to feelings of isolation from colleagues and could impede professional advancement opportunities (Cooper and Kurland, 2002). These unfavorable outcomes could be attributed to the over-work culture promoting work for long hours in favor of recognition and career development opportunities. This culture where over-working employees rewarded with a "badge of honor" hinders WLB practices (De Cieri et al., 2002; Gershuny, 2005). There's also the culture that encourages working during unsocial hours which adds to the average employee's burden of struggling to fit time for his/her personal life (De Cieri et al., 2002; Vloeberghs, 2002). Therefore, it's of extreme importance to foster a culture supportive of WLB practices; one that does not cheer on employees who work overtime and one that does not penalize employees who do take advantage of WLB practices. One challenge of having such a culture is persuading middle management to set a good example which has been proven in the literature to be a challenge (Spinks, 2004).

2.4 Work-Life Conflict

Work-life conflict refers to the conflict between work and life roles (e.g. family, study, free time, etc) (Greenhaus and Beutell, 1985). It was also described as dares, stresses and trade-offs related to the reconciliation of work and other personal domains such as family (McGinnity and Whelan, 2009). Work-life conflict research is mainly based on conflict theory (e.g. ten Brummelhuis and van der Lippe, 2010) and role scarcity theory (Goode, 1960). Both theories indicate that the usage of one's time and energy in one domain reduces the time and energy left for other domains, thereby reducing performance in that domain (ten Brummelhuis and van der Lippe, 2010; Jin et al. 2014).

Three main sources of conflict have been proposed in the literature: strain, time, and behavior based (Greenhaus and Beutell, 1985). Strain-based conflict takes place when the pressures of one domain extends into the other, rising emotional intrusion (Sav et al., 2013). For instance, a fatigued husband may not be able to give sufficient attention to his spouse and family after getting off work (Engle and Dimitriadi, 2007). Time-based conflict takes place when the time used up in one domain cannot be spent in other domains (Greenhaus and Beutell, 1985). For example, excessive time spent for work duties may impede workers from taking care of their young children or unwell parents (Ramasundaram and Ramasundaram, 2011). Behavior-based conflict occurs when there is inconsistency between the behavior presumptions of the work and life roles (Sav et al., 2013). For example, an authoritative and tough manager at work may not be able to adapt into the role of a loving parent and caring spouse at home (Shen et al., 2015).

Negative work conditions such as, job demands, inflexible and long working hours, insufficient use of skills, job ambiguity, job intensity and insecurity, shift work and inappropriateness of working conditions have been widely highlighted in the literature (Michel et al., 2010; Sav et al., 2013). However, working time has been regarded as the vital aspect concerning work-life conflict. Work time includes two sides: the amount of work assigned and the level to control workers have over their job (Huws, 2003).

Greenhaus and Beutell (1985, p. 77) indicated that work-life conflict emerges from concurrent pressures caused by work and family which are in most cases alternatively incompatible. They further differentiated between two types of such conflicts: "work-to-family conflict" which refers to the intervention of work with the family role, and "family-to-work conflict" which refers to the intervention of family duties with work requirements.

2.5 Turnover Intentions

Turnover intentions is defined as an employee's estimated probability that he or she intends to leave the job permanently in the near future (Kerlinger, 1973).

Turnover of employees is a common challenge faced by all organizations. Direct and indirect costs incurred by organizations to replace leaving employees are relatively high. Dess and shaw (2001) described two types of turnover: voluntary turnover, when an employee leaves the job by his or her willingness; and involuntary turnover, when an employee is fired by the employer. The former type is adopted in this study.

2.6 The Effects of WLB on Work-Life Conflict and Turnover Intentions

It is presumed that having great relations on a family and personal level will lead to greater life satisfaction and contentment, which in turn will lead to higher performance at the workplace (Koubova and Buchko, 2013). In general, employees exhibit positive attitudes towards work when employers commit to maintain a good WLB (Moore, 2007). In fact, countless benefits are gained from employing WLB policies and practices for both employees and employers (Phan et al., 2011; Abdallah and Phan, 2007). These benefits were reported by various research studies that were dedicated to exploring the relationship between WLB and certain workplace attitudes and behaviors. Some took on a specific WLB practice and investigated the relationship with certain attitudes and behaviors. For example, Chow and Keng-Howe's (2006) reported positive relationship between flexible work schedules with self-reported productivity. On another level, Roberts (2007) studied academic literature probing international evidence on the relationship between number of working hours and employees attitudes regarding those hours.

A lack of WLB practices will impede employee motivation causing them to disclose withdrawal symptoms such as absenteeism and turnover (Hughes and Bozionelos, 2005). The more conflict that arises between work and personal life, the more employees will struggle maintaining a balance and, therefore, eventually quit their jobs (Houston and Waumsley, 2003). This also holds true for staff without care-giving duties (Waumsley, 2010). Regardless, the consequences could be costly to organizations who neglect such practices (Hughes and Bozionelos, 2005).

On a more positive note and on the contrary, work-life friendly arrangements are rewarded with direct financial benefits having lower turnover ratios, better recruitment options though employing highly skilled employees who cherish flexibility. The significant relationship between WLB practices and turnover has been explored in early WLB research studies. Perhaps one of these early studies is Dalton and Mesch's (1990) who

showed that flexible scheduling minimizes absenteeism. Moreover, more recent studies have also been dedicated to investigate the relationship between WLB practices and turnover intentions (Wilkinson, 2008; Koubova and Buchko, 2013).

The reason for the negative relationship between WLB practices and both turnover and absenteeism could be due to the fact that WLB practices offer alternative work arrangements replacing the traditional fixed-hours and fixed-place arrangements granting current and prospective employees greater flexibility (Thomas and Ganster, 1995).

Certain WLB practices have also been found to reduce absenteeism and turnover. Halpern's (2005) study confirmed what former studies had previously reported; that the use of flexible work hours resulted in lower absenteeism.

Not only is it necessary to have WLB practices within company policy, it's also crucial for employees to see the management's commitment to these practices through consistent and continuous implementation and improvement. This was proven a strong determinant of turnover ratio as it reflects the sincerity of the employer (Lingard and Francis, 2005).

Moreover, work-life conflict has been tested out as a mediator in WLB research studies for quite some time now (Helmle et al., 2014). In fact, according to Beaugard and Henry (2009), holding work-life conflict in between WLB practices and attitude outcomes is a way of differentiating between practice availability and use which needs to be further tested in WLB research studies. However, there has been conflicting findings regarding the link between WLB practices and work-life conflict. For example, Thompson, et al. (1999) and Frye and Breugh (2004) both reported a significant negative relationship between WLB practices and work-life conflict. On the other hand, Premeaux, et al. (2007) found the exact opposite to be true with no effects of WLB practices on work-life conflict. This leads to the conclusion that it is not necessary for WLB practices to minimize work-life conflict (Beaugard and Henry, 2009) and so, this needs to be further investigated.

This is where this research comes to play contributing to filling the gap of lack of research on WLB in developing countries by investigating WLB in a highly demanding profession context (i.e. healthcare) in Jordan in order to raise awareness about this critical concept and its potential benefits for organizations, employees and society as a whole.

3. Methodology

3.1 Framework and Research Hypotheses

Based on the discussion above, the research model was developed and is presented in Figure 1 below.

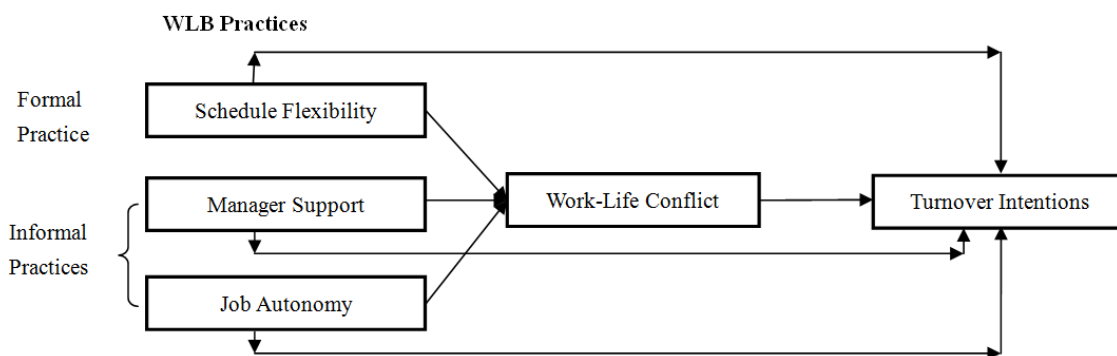


Figure 1. Research model

Based on the developed research model, the WLB practices were segmented into schedule flexibility, manager support and job autonomy and 10 hypotheses were thus derived between each independent variable (WLB practice) and the mediating variable (work-life conflict) [H₁, H₂ and H₃], between each independent variable (WLB practice) and the dependent variable (turnover intentions) [H₄, H₅ and H₆] and finally between the mediating variable (work-life conflict) and the dependent variable (turnover intentions) [H₇]. The last three hypotheses were developed to test the mediation effect of work-life conflict between each independent variable (WLB practice) and the dependent variable (turnover intentions) [H₈, H₉ and H₁₀] as follows:

- H₁: There is a significant effect of schedule flexibility on work-life conflict.
- H₂: There is a significant effect of manager support on work-life conflict.
- H₃: There is a significant effect of job autonomy on work-life conflict.
- H₄: There is a significant effect of schedule flexibility on turnover intentions.
- H₅: There is a significant effect of manager support on turnover intentions.
- H₆: There is a significant effect of job autonomy on turnover intentions.
- H₇: There is a significant effect of work-life conflict on turnover intentions.

H₈: Work-life conflict significantly mediates the relationship between schedule flexibility and turnover intentions.

H₉: Work-life conflict significantly mediates the relationship between manager support and turnover intentions.

H₁₀: Work-life conflict significantly mediates the relationship between job autonomy and turnover intentions.

3.2 Questionnaire

The questionnaire was designed through selecting readily-established scales of high reliability from the literature. This resulted in a three-part questionnaire with the first part being a cover letter introducing the researchers and research study, the second part collecting basic demographic information and the third part being the main questionnaire comprising of 24 items assessed on a 5-point Likert Scale. It's worthy of mentioning that the questionnaire was first developed in the English language and then translated into Jordan's native language; Arabic.

In the design phase, the questionnaire was presented to five professors in the Faculty of Business, University of Jordan to gain from their input and relevant expertise. Their input, feedback and recommendations were all taken into account before finalizing the questionnaire design.

Further, the questionnaire was pre-tested by five medical-staff in order to ensure the comprehension of the content.

3.3 Population and Sample

The targeted population in this research is medical-staff working in private hospitals in Jordan. Medical-staff include all personnel who professionally provide care to patients (such as physicians, nurses, pharmacists, lab technicians, midwives, etc.). Numbers of medical staff in private hospitals amount to 35,689 (Jordanian Ministry of Health, 2014) which constitutes the population of this research.

According to Sekaran and Bougie (2013), the appropriate sample size for a population of 35,689 is 380; therefore, the authors decided to distribute 450 questionnaires. Of the 450 distributed questionnaires, the returned questionnaires were 382. The sample was extracted from the population based on simple random sampling and questionnaires were distributed to medical-staff currently working in private hospitals in Jordan which, according to the Jordanian Ministry of Health, are 61 private hospitals to date. It's worthy of mentioning that of the 382 returned questionnaires, 19 of them were incomplete and were, therefore, discarded with the remaining 363 entering calculations. This yields a final response rate of approximately 80.6 percent. This response rate is relatively high and might be explained by the personal visits by the authors to the hospitals, which usually increase the response rate. Previous empirical studies in Jordan showed less response rate. For example, Abdallah (2013) showed a response rate of 59.5%, Abdallah et al. (2014) showed a response rate of 57.7%, Obeidat et al. (2014) got 52% and Suifan et al. (2015) got a response rate of 64.3%

Non-response bias was evaluated using t-test by comparing early and late responses (Armstrong and Overton, 1977). The results revealed no significant differences between the groups implying the absence of non-response bias effect in this research.

Common method variance (CMV) was assessed by applying Harmon's single factor test (Harman, 1976). This test requires the simultaneous entry of all question items into a factor analysis using principal components and no rotation method. The results revealed five factors with eigenvalues greater than 1.0. The five factors accounted for 65.70% of the variance and the first factor (the largest) accounted for 30.07% indicating that CMV is not a problem in our study.

3.4 Measures

The constructs used in this study were adopted from the published literature. Schedule flexibility was adopted from Shockley and Allen (2007) based on the measure developed by Hyland (2000). It's worthy of mentioning that the researchers added another two items to this scale. For manager support and job autonomy, Anderson et al.'s (2002) scale and Thompson and Protas's (2005) scale were used, respectively.

As for work-life conflict, the scale was adopted from Netemeyer *et al.* (1996). Nonetheless, Waumsley's (2010) version of the scale was used. Finally, turnover intentions was developed combining Mobley et al.'s (1978) and Ganesan and Weitz's (1996) scales.

Construct validity was assessed through exploratory and confirmatory factor analyses beginning with EFA with principal component analysis and promax rotation method. All the question items were entered simultaneously and the pattern matrix revealed five distinct factors as was initially expected. Some items loaded onto two factors or showed factor loadings less than 0.40 and were thus deleted. Moreover, eigenvalues for all the resulted factors were greater than 1.0.

Cronbach's α -coefficient indicated high reliability of the measurement scales with $\alpha > 0.70$ implying satisfactory internal consistency (Hair et al., 2010).

Next, confirmatory factor analysis (CFA) based on EFA results was applied using Amos 20. Some

question items were further deleted in order to improve model fit indices. The final model fit indices fitted the data reasonably well ($X^2 = 241.20$; d.f. = 125; $X^2/d.f. = 1.92$; CFI = 0.963; GFI = 0.935; NNFI = 0.954; NFI = 0.926; RMSEA = 0.050 and RMR = 0.064). The normed chi-square of 1.92 was below the maximum value of 3.0 (Bollen, 1989). Comparative fit index (CFI), goodness-of-fit index (GFI), normed-fit index (NFI) and non-normed fit index (NNFI) were greater than the suggested minimum value of 0.90 (Garver and Mentzer, 1999). Root mean square error of approximation (RMSEA) was 0.50 and root mean square residual (RMR) was 0.064 indicating acceptable values (Garver and Mentzer, 1999; Hu and Bentler, 1999). These indices indicated a sufficient level of unidimensionality and convergent validity. Moreover, the standardized coefficients for all the items were greater than twice of their standard errors, indicating additional support for convergent validity (Anderson and Gerbing, 1988). Furthermore, all the factor loadings were greater than 0.50. Similarly, average variance extracted (AVE) values for all the measurement scales exceeded 0.50 providing additional evidence of convergent validity (Fornell and Larcker, 1981). The composite reliability for all the scales exceeded 0.70 indicating a satisfactory level of reliability (Garver and Mentzer, 1999; Fornell and Larcker, 1981). Table 1 shows the standardized factor loadings of EFA and CFA, Cronbach's alpha values and composite reliability for the measurement scales. Additionally, the initial scale items used in the study questionnaire are presented in Table 2.

Table 1. Reliability and validity of the constructs

Construct	Item number	Loadings EFA	Loadings CFA	Cronbach's alpha	Composite reliability
Schedule Flexibility	1-1	0.811	0.724	0.743	0.742
	1-2	0.841	0.607		
	1-3	0.617	0.616		
Manager Support	2-1	0.678	0.695	0.875	0.879
	2-4	0.965	0.831		
	2-5	0.922	0.817		
	2-6	0.869	0.863		
Job Autonomy	3-1	0.537	0.809	0.724	0.746
	3-2	0.612	0.748		
	3-4	1.005	0.540		
Work-Life Conflict	4-1	0.891	0.650	0.839	0.838
	4-2	0.800	0.828		
	4-3	0.803	0.861		
	4-4	0.781	0.649		
Turnover intentions	5-2	0.841	0.838	0.875	0.882
	5-3	0.886	0.863		
	5-5	0.930	0.852		
	5-6	0.735	0.661		

Table 2. Measurement items

Item number	Item descriptions (References)
Schedule Flexibility (Hyland, 2000)	
1-1	I have the freedom to vary my work schedule (or the shift I work on).
1-2	I can change the start and finish time (or the shift)—if needed.
1-3	I can easily switch shifts with my colleagues.
1-4	I have a say when it comes to my work schedule (deleted).
Manager Support (Anderson et al., 2002)	
2-1	My manager is supportive when I have a work problem.
2-2	My manager is fair and doesn't show favoritism in responding to employees' personal or family needs (deleted).
2-3	My manager accommodates me when I have family or personal business to take care of (deleted).
2-4	My manager is understanding when I talk about personal or family issues that affect my work.
2-5	I feel comfortable bringing up personal or family issues with my manager.
2-6	My manager really cares about the effects that work demands have on my personal and family life.
Job Autonomy (Thompson and Prottas, 2005)	
3-1	I have the freedom to decide what I do on my job.
3-2	I have a lot of say about what happens on my job.
3-3	I decide when I take breaks (deleted).
3-4	It is basically my own responsibility to decide how my job gets done.
Work-Life Conflict (Waumsley, 2010)	
4-1	The demands of my work interfere with my life away from work.
4-2	The amount of time my job takes up makes it difficult to fulfill other interests.
4-3	My job produces strain that makes it difficult to fulfill other responsibilities and duties.
4-4	Due to work, I have to make changes to my plans for activities away from work.
Turnover Intentions (Ganesan and Weitz's, 1996; Mobley et al., 1978)	
5-1	As soon as it is possible, I will leave the hospital I work at (deleted).
5-2	I think a lot about leaving the the hospital I work at.
5-3	I am actively searching for alternatives to the hospital I work at.
5-4	If I do not get promoted soon, I will look for a job elsewhere (deleted).
5-5	I intend to leave this hospital within a short period of time.
5-6	I do not think I will spend my entire career with this hospital.

Discriminant validity was evaluated by ensuring that the square root of each AVE value is greater than the absolute correlation value between that scale and other scales. All the measurement scales met this criterion indicating strong support of discriminant validity (Fornell and Larcker, 1981) as shown in Table 3. Additionally, The AVE value for each measurement scale exceeded maximum shared squared variance (MSV) and average shared squared variance (ASV) values providing further support of discriminant validity (Hair et al., 2010).

Table 3. AVE, MSV, ASV and correlation matrix

Construct	AVE	MSV	ASV	1	2	3	4	5
1. SF	0.646	0.421	0.326	0.803	-	-	-	-
2. MS	0.647	0.506	0.294	0.524**	0.804	-	-	-
3. JA	0.584	0.502	0.343	0.594**	0.566**	0.764	-	-
4. WLC	0.568	0.155	0.100	-0.216**	-0.170**	-0.232**	0.754	-
5. TI	0.653	0.192	0.151	-0.319**	-0.401**	-0.273**	0.344**	0.808

Notes: **p < 0.001; Square root of AVE is on the diagonal

4. Results

The research hypotheses were tested using structural equation modeling (SEM) with maximum likelihood estimation using Amos 20. SEM allows testing the direct and indirect effects simultaneously. The results showed that the effect of job autonomy on work-life conflict was negative and significant ($\beta = -0.364$, $p = 0.010$). The effects of schedule flexibility and manager support on work-life conflict were not significant ($\beta = 0.071$, $p > 0.05$ for SF; $\beta = -0.012$, $p > 0.05$ for MS). Therefore, hypotheses H₁ and H₂ were rejected and hypothesis H₃ was supported.

As for the direct effects on turnover intentions, results revealed a negative and significant effect of

manager support ($\beta = -0.391, p < 0.001$), while the effects of schedule flexibility and job autonomy on turnover intentions were not significant ($\beta = -0.182, p = 0.089$ for SF; $\beta = 0.188, p > 0.10$ for JA). Therefore, hypothesis H₅ was supported and hypotheses H₄ and H₆ were not.

As for hypothesis H₇ concerning the effect of work-life conflict on turnover intentions, the effect was positive and significant ($\beta = 0.329, p < 0.001$); Therefore, hypothesis H₇ was supported.

The mediation effects were tested using the bootstrapping method (Shrout and Bolger, 2002). This method is more accurate than the method proposed by Baron and Kenny (1986) (MacKinnon, 2008; Mallinckrodt et al., 2006). The main advantages of bootstrapping re-sampling approach are its appropriateness for large and small samples alike and the un-necessity of normal distribution assumption for the indirect effect (Hayes, 2009). We selected 5,000 bootstrap samples with 95% bias-corrected confidence intervals (Hayes, 2013). To accept or reject the hypothesis regarding the indirect effect, lower and upper bounds of confidence intervals should be checked. If these two bounds include zero, then the alternate hypothesis is rejected because this means that the indirect effect is zero with 95% confidence level. On the other hand, if the two bounds do not include zero, then the alternate hypothesis is accepted.

The results showed that work-life conflict negatively and significantly mediated the relationship between job autonomy and turnover intentions (confidence intervals are between -0.281 and -0.025, $p < 0.05$). The mediating effect of work life conflict on schedule flexibility-turnover intentions was not significant (confidence intervals are between -0.055 and 0.133, $p > 0.05$). Similarly, the mediating effect of work-life conflict on manager support-turnover intentions was not significant (confidence intervals are between -0.073 and 0.076, $p > 0.05$). Therefore, hypothesis H₁₀ was supported while hypotheses H₈ and H₉ were rejected.

Figure 2 illustrates direct effects and Table 4 provides summary of the tested hypotheses.

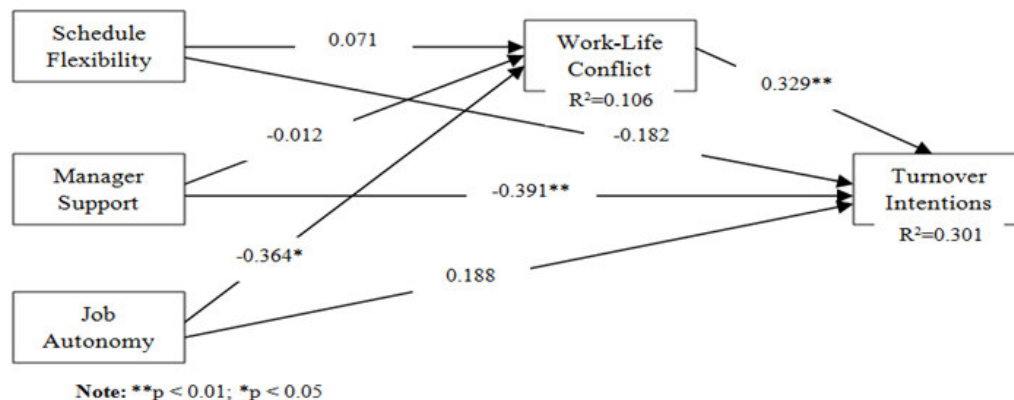


Figure 2. Coefficients for the hypothesized direct effects

Table 4. Summary of results

H	Path	Direct effect	Indirect effect	Bias corrected bootstrap 95% confidence interval		Result
				Lower	Upper	
H ₁	SF → WLC	0.071				Rejected
H ₂	MS → WLC	-0.012				Rejected
H ₃	JA → WLC	-0.364*				Supported
H ₄	SF → TI	-0.182				Rejected
H ₅	MS → TI	-0.391**				Supported
H ₆	JA → TI	0.188				Rejected
H ₇	WLC → TI	0.329**				Supported
H ₈	SF → WLC → TI		0.023	-0.055	0.133	Rejected
H ₉	MS → WLC → TI		-0.004	-0.073	0.076	Rejected
H ₁₀	JA → WLC → TI		-0.120*	-0.281	-0.025	Supported

Notes: **p < 0.01; *p < 0.05

5. Discussion, Conclusions, Limitations and Future Research Directions

5.1 Discussion

Several conclusions can be drawn from the abovementioned results. Perhaps one of the most important is regarding the negative and significant relationship between manager support and turnover intentions. This points to the sheer importance medical-staff weigh on management's support. These results come as no surprise since

the high stresses that accompany such work understandably requires support from management. Apparently, this could be a deal breaker for medical-staff. And if gone uncared for, could result in them quitting their jobs.

On the other hand, results disclosed that neither job autonomy nor schedule flexibility affect turnover intentions in a direct manner. This, however, does not agree with Halpern (2005) who concluded that the use of flexible work hours result in lower absenteeism. This proves that hospital management (not least in the private sector) needn't invest in installing schedule flexibility options for its medical staff as much as they should invest in providing as much support and care from the top-down.

Furthermore, results in this study revealed that there is a significant relationship between work-life conflict and turnover intentions; the more work-life conflict medical staff struggle with, the more they think about quitting their jobs. This linkage was important to take into consideration in order to investigate significant antecedents that affect work-life conflict. From the results, it is revealed that job autonomy was the only WLB practice that had a negative and significant effect on work-life conflict. This suggests that in order for the management to alleviate work-life conflict and in turn to reduce turnover, they must employ autonomy in the workplace.

With both informal WLB having an effect on turnover intentions; manager support having a direct effect on turnover intentions and job autonomy having an indirect effect through work-life conflict, while the formal WLB practice (schedule flexibility) had no effect at all (direct nor indirect) on turnover intentions suggests that informal WLB practices are superior to formal ones. This inference coincides with Anderson et al.'s (2002) and Ahmad and Omar's (2012) studies who argued in favor of informal WLB practices. In fact, it could be seen that these informal practices encompass the hospital's positive culture that is conducive to support WLB practices (Brummelhuis and van der Lippe, 2010).

Moreover, this study is also in alignment with other former studies (Frye and Breugh, 2004) proving that WLB practices do indeed have a significant effect on work-life conflict. Thus, providing WLB practices does in fact alleviate the conflicts that medical-staff endure rising between their work and personal life.

Perhaps one of the suggestions for future studies is to test out the research model adding more WLB practices and differentiating them into formal and informal in order to draw more concrete conclusions regarding the comparison between the two sets.

5.2 Practical Implications

The talk about stress in the healthcare industry has been gaining importance for many years now and how it has been the result of work-life conflict (Vahey et al., 2004; Laschinger and Leiter, 2006). It is thus crucial to know how to mitigate this dilemma of work-life conflict and how to create an environment of WLB.

The fact that the hypothesis concerning the effect of manager support on turnover intentions and the hypothesis concerning the mediating effect of work life conflict on the job autonomy-turnover intentions were supported carries significant weight and implications extracted from the analysis results could be profound to both private hospital management and medical staff in Jordan. Statistical confirmation of these significant effects of informal WLB practices is an extremely beneficial piece of information for healthcare officials (especially those in private hospital management) who are keen on keeping satisfied, well-committed employees, not least medical staff.

To accomplish this, management could start by first raising awareness of the importance of WLB and introduce WLB policies and practices. Applying WLB practices in a local context (i.e. private hospitals in Jordan), it can be concluded from the previous discussion of results that manager support has a profound effect in reducing turnover intentions. This practice can take many forms such as having a superior who is fair, caring and understanding of the WLB needs of his/her subordinates. Again, this could be accomplished by raising awareness, fostering a WLB-friendly environment and embedding strategies and set-out policies to increase superior (manager) support to employees.

Furthermore, the agreement of this study's outcomes regarding the superiority of informal WLB practices with previous studies such as Anderson et al. (2002) implies that hospitals seeking to adopt WLB practices don't need to make massive investments in formal practices (such as setting up on-site childcare, aiding with financial support, etc.). In fact, all they need to do is to focus their efforts on informal WLB practices especially manager support as this has proven to achieve the desired outcomes of positively influencing employees' attitudes towards their work (Ahmad and Omar, 2012).

Additionally, it would be worthy and beneficial to help practitioners in the field of healthcare set their strategies and design workplace innovations taking into account job autonomy and its critical effect to reduce work life conflict directly and turnover intentions indirectly.

5.3 Conclusions

This study was successful in drawing conclusions that were, to an extent, in agreement with previous studies. First, it proved that some WLB practices were more effective than others in affecting turnover intentions of

medical-staff. In particular, manager support had a direct effect on reducing turnover intentions, job autonomy, on the other hand, had an indirect effect while schedule flexibility had no effect at all. This suggests that informal WLB practices are vital to reduce turnover intentions and are more influential than formal WLB practices.

Second, the mediation role of work-life conflict between job autonomy and turnover intentions had been confirmed which is in agreement with Waumsley (2010).

Third, the study provided evidence of a significant relationship between work-life conflict and turnover intentions.

5.4 Research Limitations

Since this study revolved around WLB and aimed to investigate WLB practices and their effects on WLC and turnover intentions at private hospitals in Jordan, the drawn results and conclusions from this study might not apply to all hospitals in the country (including hospitals under the Ministry of Health (MoH)). It could be argued that because of this, results cannot be generalized especially that hospitals under the umbrella of the MoE differ quite a lot from private hospitals in Jordan in terms of strategies, structure and culture.

Another issue that is ought to be pointed out is the fact that when approached some hospitals agreed to participate with the condition that they administer the survey distribution process. Though a minority of the hospitals imposed this, the researchers were not able to present at those hospitals to personally oversee the survey administration process, explain the purpose of the study and answer questions respondents might have. In addition, there's the fear of hospitals solely administering the survey process might have jeopardized the authenticity of the respondents' answers as they could have been inclined to rate positively on a particular scale because of the concern confidentiality.

Finally, though the sample size of this study was adequate to a certain extent as it was on the minimum threshold recommended by Sekaran and Bougie (2013). However, a bigger sample size could have boosted the reliability and validity of the data to higher levels.

5.5 Future Research Directions

Capitalizing on the strengths of the study and addressing the inadequacies and limitation that were previously discussed, many recommendations emerge to be employed in future studies.

Because most studies related to this topic have been conducted in western countries (Vloeberghs, 2002), this study aimed to apply the WLB concept in a non-western (developing) context. However, more studies need to be dedicated to this topic in order to draw a better picture of WLB in developing countries. Furthermore, the study could be expanded to include more WLB practices (either formal WLB practices, informal WLB practices or both). Similarly, the study could be extended to incorporate more dependent variables such as job satisfaction, productivity and performance, etc. As a result, many configurations could be adapted.

In addition, this study was applied to a broad segment of medical-staff working in private hospitals in Jordan from different genders and of various age and years of experience. Therefore, future studies could be applied to study WLB for a specific segment (e.g. female medical-staff).

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