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The Influence of Work-Life Balance on the Physical Health Outcome of University Academics: A Study Conducted at the University of Delta, Agbor

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ABSTRACT

This study investigates the influence of work-life balance on the physical health outcomes of university academics at the University of Delta, Agbor. Work-life balance has become an increasingly important factor in ensuring the physical and mental well-being of individuals, particularly in high-stress professions like academia. The study employed the Work-Life Balance Scale (WLBS) and the Physical Health Questionnaire (PHQ) to examine how aspects of work-life balance correlate with specific physical health outcomes, such as sleep disturbances, headaches, gastrointestinal problems, and respiratory infections. The findings reveal that poor work-life balance is significantly correlated with increased occurrences of sleep disturbances and headaches. No significant relationship was found between work-life balance and gastrointestinal or respiratory problems. These findings underline the importance of creating supportive work environments that help academics achieve better work-life balance, thereby improving their physical health outcomes.

Introduction

With the increasing job performance pressure facing employees in the workplace, it has become increasingly difficult to achieve a balance between work domain and life domain. Employees find themselves, choosing a domain at the expense of the other domain just to meet up with certain targets and demands. Work-life balance is an important factor influencing both the productivity and well-being of employees. With so many administrative, teaching and other responsibilities confronting academia, lecturers find themselves swamped with their job roles, research demands without compensating for family time.

Work-life balance is defined as a balanced relationship between the social roles of occupational demands and life outside of work (family domain) as determined by the employee to be harmonious and satisfying, giving the employee ample time opportunity for family and work with the least role conflict (Borwicz & Drygas, 2022). Work-life balance refers to adjusting working patterns irrespective of age, gender or race to help employees find a platform in combining work with other responsibilities and demands of life (Nwagbara, 2020). Work-life balance therefore cuts across all gender, work sector, status, level or rank at work, socioeconomic status and other features of the day to day functioning of employees both at work and outside work.

Work-life balance is the good functioning at work and outside of work coupled with every other life demands outside of work with the least role conflict (Puspitasari & Darwin, 2021). Work-life balance has become popular in the workplace because of its benefits for the organisation and individual employees. For employees to function at their best with their job roles, they have to experience a significant balance between their job roles and life roles. This precedes physical, psychological and physical health of employees. There are several benefits associated with work-life balance. Work-life balance increases employee involvement and job performance output at work, increased organisational productivity in achieving their set goals, reduced employee turnover rate (Wood, et al 2020). The factors that contribute to work-life balance in the workplace are inclusion and diversity of the work force, advancement technologically, career prospects

and growth, organisational culture and practices, leadership style of management, work flexibility (Nwagbara, 2020).

Work-life balance has been conceptualised as how much control over working conditions an employee has in determining their working hours and working conditions. Working time refers to the official hours an employee has to carry out official duties as it relates to their job description. Studies have reported that organisations who adopt work-life balance practices create flexibility for their employees through job rotation, shift, part-time working, scheduling working hours, access to overtime work with pay as well as creating a platform for employees to decide which department of the organisation they are more trained and equipped to function (Wood, et al 2020).

When employees experience imbalance between work and life domains, the organisation experiences a high rate of absenteeism, higher turnover rates, physical health challenges of employees, mental health challenges, lesser feelings of job satisfaction which translates to lower levels of employee engagement and performance. This is especially so in academia. Lecturers overwhelmed with preparing results, preparing lecture notes, conducting research to creatively contribute to the general body of knowledge, holding administrative offices may have little or no time to attend to demands of the family. When a lecturer teaches five courses and has to prepare notes for all courses alongside assessing students, such responsibilities spill over into night time hence interfering with other of life's responsibilities. There is therefore an urgency for a balance between work and life on account of the physical health of academics.

Physical health can be defined as the body functioning normally. Physical well-being refers to how the body is cared for and nurtured, feels and functions. Tinana, (2024) opined that good physical health decreases the risk of developing health conditions such as cancer, stroke as well as cardiovascular diseases. Physical well-being, equips individuals to better handle the challenges of life by creating a buffer against illnesses, injury and fatigue. Benefits of physical health is that it improves physical fitness, high immunity against illnesses, improves quality of life and the list goes on. The lifestyle of academics is piqued with excessive

deadlines hence rushing around and sleep deprivation (insomnia). Most academics suffer from high degree of stress. This leads to heightened anxiety as they invest time into their job without it necessarily translating to the possibility of increase in financial outcomes or remunerations (Casimiro-Andujar, et al 2023).

Due to living a fast paced lifestyle, several academics are burdened with chronic anxiety as a result of unhealthy and toxic competition in the workplace, economic hardship and fear of tomorrow. Anxiety has been related to stress and burnout. This is especially triggered by the demands of the job exceeding the human and natural capacity to regulate the self in creating a balance (Casimiro-Andujar, et al 2023). This leads to sleep disturbances and nervousness (tension) (Bataineh, 2019). Intense stress creates harmful effects on health as it also affects the social functioning and relationship of employees (Casimiro-Andujar, 2023).

For university academics, managing a balance between professional duties—such as teaching, research, and administrative responsibilities—and personal life can be particularly challenging. Given the increasing demands in academia, a lack of work-life balance can lead to significant stress and physical health issues. The University of Delta, Agbor, serves as a case study to explore the influence of work-life balance on physical health outcomes among university academics.

Research Questions

The following research questions guided the study;

1. Will work-life balance have a positively significant relationship with sleep disturbance dimension of physical health outcomes of academics?
2. Will work-life balance have a positively significant relationship with headache dimension of physical health outcomes of academics?
3. Will work-life balance have a positively significant relationship with gastrointestinal problems dimension of physical health outcomes academics?
4. Will work-life balance have a positively significant relationship with respiratory problems dimension of physical health outcomes of academics?

Purpose of the study

This study aims to examine whether work-life imbalance contributes to negative health outcomes, such as sleep disturbances, headaches, gastrointestinal problems, and respiratory infections. By understanding the specific health risks associated with poor work-life balance, this research can help university administrators and policymakers formulate strategies to improve the working conditions of academics.

Specifically, the study has the following purposes

1. To ascertain the relationship between work-life balance and sleep disturbance dimension of physical health outcome of academics.
2. To ascertain the relationship between work-life balance and headache dimension of physical health outcome of academics.
3. To ascertain the relationship between work-life balance and gastrointestinal problems of physical health outcome dimensions of academic.
4. To ascertain the relationship between work-life balance and respiratory problem of physical health outcome dimension.

Literature Review

Work-life balance and dimensions of physical health outcomes

Boroweic & Drygas, (2022) aimed to answer the questions of whether the lower Work-life balance among Warsaw's middle class correlates with poorer mental and physical health, and what life orientations and values typical of the middle class are related to work-life balance. Two surveys were conducted in the years 2003 and 2013 on the quota samples of 500 members of the Warsaw middle class: specialists, managers, and entrepreneurs. The analysis indicated a connection between a lower level of Work-life balance and worse mental and physical health. Some middle-class life orientations are connected with a high Work-life balance. The relationship between Work-life balance and health was stronger in 2013 than in 2003. It can be considered a result of mentality and lifestyle changes and generational renewal.

Khan Rony, et al (2023) investigated the interrelationship of work-life imbalance, employee dissatisfaction, the impact of work on the family as well as the influence of family on work. The cross-

sectional study was conducted among 656 nurses employed in various healthcare settings in Dhaka, Bangladesh using a convenient sampling technique. Face-to-face interviews were conducted between June 2 and December 15, 2022. Data were analyzed for descriptive and inferential statistics using STATA. The study adhered to Enhancing the Quality and Transparency of Health Research (EQUATOR) criteria. The probability of an event occurring and the correlations between predictive and outcome variables were determined using multivariate logistic regression. Multinomial logistic regression revealed the highly influential parameters to work-life imbalance levels. The Pearson correlation showed the positive association between employees' unhappiness, family's negative impact on career, work's negative impact on family, and work-life imbalance. Maintaining nurses' work-life balance is critical in improving healthcare organizations' productivity, delivery of quality patient care and ensuring positive clinical outcomes.

Okeya, et al (2020) examined the relationship between work-life balance and employee health and well being in the Nigerian banking industry. The study was based exclusively on primary data obtained by administering well-structured questionnaire and conducted at the headquarters of the banks located in the state of Lagos. The random sampling technique used to select banks and bank employees was deliberately selected because they are the focus of the study. Yamane's formula was used to determine the sample size of 50 employees. The multiple regression analysis showed that all the stated predictors significantly affected employee's health and wellbeing in the Nigerian banking industry, where $R^2 = 0.996$, $F = (4, 45) = 2590.451$, $P < 0.01$. Thus, there is a significant relationship between work-life balance and employee health and wellbeing in the Nigerian banking industry. The study, therefore,

Methodology

Participants

The study was conducted among university academics at the University of Delta, Agbor. A total of 89 participants were included, comprising both male and female academics across different educational levels, ranks, and marital statuses. 43 (48.3%) males and 46 (51.7%) females. Marital status revealed that 50 (56.2%) were married, 26 (29.2%) while 13 (14.6%) were separated. The rankings of the respondents revealed that 13 (14.6%) were professors, 17 (19.1%) were associate professors, 17 (19.1%) were senior lecturers, 16 (17.9%) were lecturer 1, 18 (20.2%) were lecturer 11, and 8 (8.9%) were assistant lecturers. Data revealed that 63 (70.8%) and 26 (29.2%) had M.Sc. The demographics of the participants are summarised below.

recommends that there is a need for the banking sector and corporate bodies in Nigeria to improve the working conditions of employees. Also, the negative relationship from welfare facilities suggests a state of neglect on the part of management; thus, more attention needs to be given to the welfare package of newly recruited employees in the Nigerian banking industry.

Previous studies have shown that poor work-life balance can lead to various physical health problems. For instance, the negative impact of work-life imbalance on sleep quality has been widely documented, as sleep is a critical factor for maintaining good health and cognitive function (Kim, 2014). Similarly, constant exposure to work-related stress can manifest in the form of headaches and other physical symptoms, further highlighting the importance of addressing work-life balance in the workplace.

Hypotheses

The following hypotheses guided the study:

1. Work life balance will have positive significant relationship with sleep disturbance dimension of physical health outcome.
2. Work life balance will have positive significant relationship with headaches dimension of physical health outcome.
3. Work life balance will have no relationship with gastrointestinal problem dimension of physical health outcome.
4. Work life balance will have no relationship with respiratory problem dimension of physical health outcome.

Statistics	Age	Gender	Educational Level	Marital Status	Rank
N Valid	89	89	89	89	89
Missing	0	0	0	0	0
Mean	42.19	1.52	1.29	1.58	3.27
Std.Deviation	9.56	0.50	0.46	0.73	1.62

Work-life balance scale

Work-life balance was measured with the work-life balance scale (WLBS) which is a 10-item instrument developed by Dex and Bond (2005) to measure adjustment of working patterns regardless of age, race or gender to seamlessly combine work with other life responsibilities, challenges or aspirations. The WLBS is measured on a 5-point Likert scale with the scoring as follows; fully disagree (1), disagree (2) undecided (3) agree (4) and fully agree (5). Some sample items of the scale include: “Finding time for hobbies, leisure activities, or to maintain friendships and extended family relationships is difficult,” “My family are missing out on my input,” and “Relaxing and forgetting about work issues is hard to do.” The scale has a score range of 10 and 50. The scale is measured such that the higher the score, the more the imbalance of employees. The authors obtained internal consistency of .82 for the work-life balance scale and has shown a good divergent validity with an average correlation with other scales of $r = 0.25$ (compared to an average inter-correlation between climate scales of 0.41) (Parkes & Langford, 2008). Dex and Bond (2005) found that the scale is proper to predict employees’ work-life balance score regardless of their age, gender, work position and working hours (Kim, 2014).

However, Pichler, (2009) reported that the scale has been criticized for use for a large sample size that work-related aspects has the largest explanation of the variation in work-life balance. Also, that the wordings of the work-life balance indicators already include their most probable explanations and so there is a danger of concluding on the effect other than work-related aspects of work-life balance. Despite the criticisms of the scale, Ayam and Darlane (2019) adapted the scale to the Nigerian sample in studying the work-life balance of bank employees in the south-south area of Nigeria and obtained the Cronbach alpha of .75 for the work-life balance scale of Dex and Bond (2005). Tatham (2006) stated that as a result with a coefficient of less than 0.6 shows a marginally low internal consistency, while a result with a value of 0.60 or more indicates satisfactory internal consistency reliability, hence the suitability of the work-life balance scale in measuring employee work engagement in Nigeria.

Physical Health Questionnaire

PHQ, a modified version of Spence et al.’s (1987) measure of health. The scale consisted of 14 items pertaining to the frequency with which respondents experience sleep disturbances, headaches, respiratory infections, and gastrointestinal problems. Items 1–11 were rated on a 7-point frequency scale, ranging from 1 (not at all) to 7 (all of the time). Items 12–14 had different frequency-related response options. Internal consistency analyses of the four PHQ sub-scales revealed the following Cronbach’s alpha values for Samples 1 and 2, respectively: .84 and .86 for the Gastrointestinal Problems subscale, .84 and .86 for the Headaches subscale, .79 and .84 for the Sleep Disturbance subscale, and .66 and .61 for the Respiratory Infections subscale.

Results

Table: Pearson Product Moment Statistics of Work life balance and Physical Health Outcome Dimensions

Variables	Mean	Std. D	WLB	SD	H	GIP	RP
Work life Balance	17.56	2.19	1.00				

Sleep Disturbance	6.60	1.61	.44**	1.00			
Headaches	6.28	2.18	.49**	.22*	1.00		
Gastro-Intestinal Problem	7.04	1.67	.03	-.19	.29**	1.00	
Respiratory Problem	6.82	1.43	-.14	.01	-.34**	-.39**	1.00

Results showed that work life balance had positive significant relationship with sleep disturbance dimension of physical health outcome at $r(N=89) = .44, p < .01$ (M: 6.60, SD: 1.61). Work life balance had positive significant relationship with headaches dimension of physical health outcome at $r(N=89) = .49, p < .01$ (M: 6.28, SD: 2.18). Work life balance had no relationship with gastro-intestinal problem dimension of physical health outcome at $r(N=89) = .03, p > .01$ (M: 7.04, SD: 1.67). Work life balance had no relationship with respiratory problem dimension of physical health outcome at $r(N=89) = -.14, p < .01$ (M: 6.82, SD: 1.43).

Summary of the Findings

1. Work life balance had positive significant relationship with sleep disturbance dimension of physical health outcome.
2. Work life balance had positive significant relationship with headaches dimension of physical health outcome.
3. Work life balance had no relationship with gastro-intestinal problem dimension of physical health outcome.
4. Work life balance had no relationship with respiratory problem dimension of physical health outcome.

Discussion

Poor work-life balance was found to be significantly associated with increased occurrences of sleep disturbances. Sleep disturbances have long been recognised as a consequence of excessive stress and imbalance between work and personal life. Therefore the first hypothesis that states that work-life balance will have positive significant relationship with sleep disturbance dimension of physical health was accepted. This means that academics are often under pressure due to teaching loads, research deadlines, and administrative tasks, which can prevent them from maintaining a regular sleep schedule. This disruption in sleep patterns can affect their cognitive function and overall productivity, which could ultimately impact both their professional and personal lives.

The results of this study highlight the significant impact of work-life balance on certain physical health outcomes for university academics at the University of Delta, Agbor. Specifically, work-life balance

showed a positive correlation with sleep disturbances and headaches, indicating that academics who struggle to balance their professional and personal lives are more likely to experience these health issues. These findings align with previous research indicating that high job demands and inadequate work-life balance can lead to sleep problems and chronic headaches. This shows that hypothesis one which states that work-life balance will have positive significant relationship with sleep disturbance of academics was accepted. This means that academics who struggle with balancing their work with other of life's responsibilities will have physical health challenges of constant headaches. This is in line with the findings of Borowic & Drygas (2022), Khan Rony, et al (2023) and Okeya, et al (2020) who found in their study that work-life balance leads to poor physical health for employees across different fields and ranks within Nigeria and outside Nigeria. This reveals that, for academics to have challenges with balancing their work and life domains they will always have challenges with headaches. Constant and incessant headaches is a precursor to more severe health challenges. Headaches are a common symptom of stress, and the findings suggest that the inability to manage work and personal responsibilities can contribute to the occurrence of stress-induced headaches. This may be particularly true for academics, whose work environment often demands multitasking and meeting tight deadlines.

On the other hand, the study found no significant relationship between work-life balance and gastrointestinal problems or respiratory issues. This suggests that while work-life imbalance can have a significant effect on mental and neurological health, it may not directly contribute to issues like gastrointestinal or respiratory health problems. This aligns with the findings of Pichler (2009), who

suggested that work-related stressors have varying degrees of influence on different physical health outcomes. Gastrointestinal and respiratory problems may be influenced by other factors such as diet, genetics, environmental factors, or exposure to pathogens, rather than work-life balance alone.

The results underscore the importance of creating supportive work environments that can help academics achieve better work-life balance. University leadership should consider strategies such as flexible work hours, reducing administrative burdens, and providing wellness programs that specifically target sleep and stress management. The findings also suggest that interventions aimed at promoting work-life balance may be effective in reducing the prevalence of sleep disturbances and headaches, ultimately contributing to improved health outcomes and higher levels of productivity.

Implications

The findings of this study have several practical implications for university management and policymakers. The positive correlation between poor work-life balance and both sleep disturbances and headaches highlights the need for targeted interventions. Implementing flexible work policies can provide academics with greater autonomy over their schedules, enabling them to better balance work and life responsibilities. Moreover, providing resources such as counselling services, mental health support, and stress management workshops could further help academics cope with work-related stress and reduce its impact on their physical health.

University administrators should also consider workload management strategies. The findings indicate that high job demands are linked to poor physical health outcomes; therefore, reducing teaching loads or delegating administrative tasks could alleviate stress and improve work-life balance. Additionally, promoting a culture of supportive leadership is critical, as transformational leadership styles have been shown to foster a positive work environment that supports employee well-being.

Future Research

Future research should consider exploring the long-term effects of work-life balance interventions on

physical health outcomes. Longitudinal studies could provide more in-depth insights into how changes in work-life balance over time impact health. Additionally, expanding the sample size and including academics from multiple universities could improve the generalisability of the findings. The present study did not find significant relationships between work-life balance and gastrointestinal or respiratory problems, but future research could explore whether other factors might mediate these relationships.

Limitations of the Study

The study has some limitations that should be acknowledged. First, the cross-sectional design does not allow for causal inferences. The associations found between work-life balance and physical health outcomes indicate correlations but cannot confirm causality. Second, the study relied on self-reported data, which can introduce biases such as social desirability bias. Participants might have under reported health issues or overestimated their ability to maintain work-life balance.

Conclusion

This study provides valuable insights into the relationship between work-life balance and physical health outcomes among university academics. The findings indicate that poor work-life balance significantly correlates with increased occurrences of sleep disturbances and headaches but does not significantly relate to gastrointestinal or respiratory problems. These results highlight the need for university administrators to implement supportive measures aimed at improving work-life balance, which could lead to better health outcomes and increased productivity among academic staff.

Recommendations

1. Flexible Work Arrangements: University management should introduce flexible work hours and telecommuting options to help academics better balance their professional and personal responsibilities.
2. Wellness Programs: Institutions should establish wellness programs that include stress management and sleep improvement strategies.
3. Workload Management: Reducing administrative tasks and providing adequate support for teaching

and research activities can alleviate stress and contribute to a better work-life balance.

4. Counselling Services: Universities should offer counselling services that focus on helping academics manage stress and improve their overall well-being.

5. Leadership Training: Training programs for university leaders should emphasise the importance of work-life balance and the role of supportive leadership in reducing employee stress.

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