

Workplace Resources and Work–Life Balance among Nursing Staff in Madurai District: An Empirical Study

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Abstract

This study examines the influence of workplace resources on work–life balance among nursing staff in Madurai District. A descriptive, cross-sectional research design was adopted, and data were collected from 180 nursing professionals using a structured questionnaire and five-point Likert scale. Workplace resources were assessed through job autonomy, supervisor support, and co-worker support, while work–life balance served as the dependent variable. The data were analysed using percentage analysis and multiple regression. The results indicate that workplace resources significantly explain 42.5% of the variance in nurses' work–life balance. Job autonomy, supervisor support, and co-worker support were all found to have positive and significant effects, with co-worker support making the strongest relative contribution. The findings emphasise the importance of supportive supervision, adequate teamwork, employee autonomy, and favourable workplace policies in improving nurses' well-being, job satisfaction, and professional performance. The study recommends that healthcare institutions strengthen workplace support systems and develop employee-friendly practices to promote sustainable working conditions and better healthcare delivery.

Keywords: Workplace resources, Work-life balance, Nursing staff, Healthcare professionals, Organizational support

Introduction

The availability of adequate workplace resources is fundamental to sustaining the physical and psychological well-being of nursing staff, as these provisions mitigate the adverse effects of high-stress clinical environments (Rashmi & Kataria, 2021). In this context, work–life balance serves as a critical equilibrium where nurses successfully manage the competing demands of professional clinical responsibilities and personal commitments to prevent burnout (Ali et al., 2023). Within the Madurai District, this equilibrium is particularly essential due to the region's expanding healthcare infrastructure, which necessitates a deeper investigation into how institutional support systems influence the retention and mental health of the local nursing workforce (Zhang et al., 2024). Effective leadership and the provision of necessary organizational infrastructure have been shown to correlate significantly with reduced emotional exhaustion and improved job satisfaction (Zraychikova et al., 2022). Furthermore, addressing these dynamics in Madurai is vital for mitigating the turnover intentions often exacerbated by the intensive patient care demands characteristic of the district's tertiary healthcare settings (Subrahmanyam et al., 2026; Udin et al., 2026). Given the unique socio-cultural and economic

landscape of the region, empirical scrutiny is required to determine how localized institutional policies can better alleviate the physical and emotional strain experienced by these frontline professionals (Nivitha & Paúl, 2025; Pal & Banerjee, 2026). By investigating these specific organizational factors, this study seeks to provide evidence-based insights that can inform more supportive workplace practices, ultimately improving both the well-being of nursing staff and the overall quality of patient care (P & Gunaseakaran, 2026). This research specifically addresses the pressing need for organizational strategies that counteract the high-stress professional demands commonly reported in clinical settings (Gautam et al., 2024; Lin et al., 2024). By acknowledging that work support mechanisms and work overload are key determinants of job satisfaction, this study aims to elucidate the specific interplay between institutional resources and the personal life strains faced by nursing professionals (Poulouse & Sudarsan, 2017).

Literature Review

Theoretical frameworks such as the Conservation of Resources theory posit that individuals strive to acquire and protect resources including social support, professional autonomy, and flexible scheduling to mitigate the psychological strain inherent in demanding roles (Xu & Zhao, 2024). Concurrently, Social Exchange Theory suggests that nurses who perceive high levels of organizational investment are more likely to reciprocate through sustained commitment and improved professional performance (Obeng et al., 2025). Despite these theoretical foundations, existing literature has predominantly emphasized the nexus between job stress and mental health, often neglecting the nuanced impact of organizational support on professional quality of life and the attainment of decent work conditions (Zheng et al., 2024). Furthermore, the application of the Job Demands-Resources model highlights that job resources such as autonomy and supervisor support are essential for buffering the deleterious effects of high mental and physical demands on an employee's work-life interface (Rashmi & Kataria, 2021; Xiao et al., 2022). While these frameworks establish a general connection between resource availability and wellbeing, current research often fails to account for regional variations in professional support structures (Hong et al., 2025).

Job Autonomy and Work–Life Balance.

Job autonomy refers to the degree to which employees have discretion and control over how, when, and where they perform their work. Greater autonomy can enable employees to adjust work activities according to personal and family responsibilities, thereby facilitating a better work–life balance. Simatauw (2021), based on 238 employees in Indonesia, found that job autonomy had a positive relationship with work–life balance. Similarly, Dey (2024) reported a significant relationship between job autonomy and work–life balance among Indian IT employees. Evidence from Indian nursing professionals also indicates that job autonomy, as an important job resource, is positively associated with work–life balance (Rashmi & Kataria, 2021).

Supervisor Support and Work–Life Balance

Supervisor support represents the extent to which supervisors provide understanding, flexibility, assistance, and consideration for employees' work and personal responsibilities. Supportive supervisors can reduce work–family interference and help employees manage competing demands. Greenhaus, Ziegert, and Allen (2012) found that family-supportive supervision was positively related to work–family balance, partly through reductions in work–family interference. Similarly, Talukder (2019) reported that supervisor support was negatively associated with work–family conflict, while work–life balance was positively associated with employee outcomes. Research involving Indian nursing professionals also confirmed a positive relationship between supervisor support and work–life balance (Rashmi & Kataria, 2021).

Co-worker Support and Work–Life Balance

Co-worker support provides employees with interpersonal assistance, cooperation, information, and emotional support in managing workplace demands. Such support may reduce job-related strain and facilitate employees' ability to manage work and personal responsibilities. Rashmi and Kataria (2021), in their study of 452 Indian nursing professionals, found that co-worker support was positively related to work–life balance, along with job autonomy and supervisor support. This finding is particularly relevant to nursing, where teamwork and interpersonal assistance are important for managing demanding work schedules.

Based on the above discussions it is hypothesised that

H1: Job Autonomy significantly and positively influences Work–Life Balance.

H2: Supervisor Support significantly and positively influences Work–Life Balance

H3: Co-worker Support significantly and positively influences Work–Life Balance

Methodology

The study adopted a descriptive and cross-sectional research design to examine the relationship between workplace resources and work–life balance among nursing staff. The study was conducted among nursing personnel working in hospitals in Madurai District. A total of 180 respondents were selected for the study using a purposive sampling technique, considering nursing staff who were actively employed in the selected hospitals and willing to participate in the survey. The study examined Workplace Resources as the independent variable, comprising Job Autonomy, Supervisor Support, and Co-worker Support. Work–Life Balance was considered the dependent variable. The measurement items were adapted from established scales used in previous empirical studies and modified to suit the context of nursing staff. The respondents were asked to indicate their level of agreement with the statements using a five-point Likert scale, ranging from 1 – Strongly Disagree to 5 – Strongly Agree. In addition to the major study variables, information relating to the respondents' hospital type, organisational tenure, ward/unit, working hours, work shift, and working days was collected.

Primary data were collected through a structured questionnaire administered to the selected nursing staff. The collected data were coded and analysed using SPSS. Percentage analysis was

used to describe the respondents' work-related profile. Subsequently, multiple regression analysis was performed to examine the impact of Job Autonomy, Supervisor Support, and Co-worker Support on Work–Life Balance. The significance of the relationships was assessed at the 5 per cent level of significance.

Results & Discussion

The results of the study are presented based on the data collected from 180 nursing staff in Madurai District. Percentage analysis was first carried out to describe the respondents' work-related profile, including type of hospital, organisational tenure, ward/unit, working hours, work shift, and working days. Subsequently, multiple regression analysis was employed to examine the impact of Job Autonomy, Supervisor Support, and Co-worker Support on Work–Life Balance among nursing staff. The findings of these analyses are presented and discussed in the following sections.

Respondents' Work-Related Profile

Table 1 Percentage Analysis of Respondents' Work-Related Profile

Profile Variable	Category	Frequency	Percentage
Type of Hospital Worked	Public	72	40.0
	Private	108	60.0
Organisational Tenure	1–5 Years	78	43.3
	6–10 Years	61	33.9
	More than 10 Years	41	22.8
Type of Ward/Unit	General	47	26.1
	ICU	38	21.1
	Surgical	31	17.2
	Medical	39	21.7
	Others	25	13.9
Working Hours per Day	8 Hours	69	38.3
	Above 8 Hours	111	61.7
Shift Worked	General/Day Shift	53	29.4
	Night Shift	31	17.2
	Rotating Shifts	96	53.3
Working Days per Week	6 Days	116	64.4
	7 Days	64	35.6

The analysis indicates that 108 respondents (60.0%) were working in private hospitals, while 72 respondents (40.0%) were employed in public hospitals. Thus, the respondents were predominantly from the private hospital sector. With respect to organisational tenure, 78 respondents (43.3%) had between 1 and 5 years of experience in their current organisation. This was followed by 61 respondents (33.9%) who had 6–10 years of organisational tenure. The remaining 41 respondents (22.8%) had been working in their organisation for more than 10 years.

Regarding the type of ward or unit in which the respondents worked, 47 respondents (26.1%) were working in general wards, followed by 39 respondents (21.7%) working in medical units

and 38 respondents (21.1%) working in ICUs. Further, 31 respondents (17.2%) were working in surgical units, while 25 respondents (13.9%) worked in other units. In terms of daily working hours, 111 respondents (61.7%) reported that they normally worked more than 8 hours per day, whereas 69 respondents (38.3%) reported working 8 hours per day. Concerning work shifts, 96 respondents (53.3%) worked on rotating shifts, representing the largest proportion of the respondents. 53 respondents (29.4%) worked the general/day shift, while 31 respondents (17.2%) worked the night shift. Regarding the number of working days per week, 116 respondents (64.4%) reported working 6 days per week, whereas 64 respondents (35.6%) reported working 7 days per week. Thus, the majority of the respondents worked six days a week.

Impact of Workplace Resources on Work-Life Balance

The regression analysis was conducted to examine the impact of Job Autonomy, Supervisor Support, and Co-worker Support on Work-Life Balance. The model summary indicates an R value of 0.652 and an R^2 value of 0.425, showing that the three workplace resource variables collectively explain 42.5% of the variance in Work-Life Balance. The adjusted R^2 of 0.420 indicates that the explanatory power of the model remains stable after adjusting for the number of predictors. The ANOVA results demonstrate that the overall regression model is statistically significant ($F = 97.451$, $p < 0.001$), confirming that workplace resources collectively have a significant influence on Work-Life Balance.

The regression coefficients further show that Job Autonomy has a positive and significant effect on Work-Life Balance ($\beta = 0.228$, $p < 0.001$). Similarly, Supervisor Support has a positive and significant influence ($\beta = 0.138$, $p = 0.016$). Co-worker Support also has a positive and statistically significant effect on Work-Life Balance ($\beta = 0.353$, $p < 0.001$). Among the three predictors, Co-worker Support has the highest standardized coefficient, followed by Job Autonomy and Supervisor Support, indicating their relative statistical contribution within the regression model. Overall, the findings establish that the workplace resources considered in the study are significant predictors of Work-Life Balance among the respondents.

Table 2 Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.652 ^a	.425	.420	.55498
a. Predictors: (Constant), Job Autonomy, Supervisor Support, Co-worker Support				

Table 3 Anova

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	90.046	3	30.015	97.451	.000 ^b
	Residual	121.969	396	.308		
	Total	212.015	399			
a. Dependent Variable: GSavg						
b. Predictors: (Constant), GPPavg, GPSavg, GLEavg						

Table 4 Regression Results

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	1.185	.167		7.088	.000
	Job Autonomy	.237	.062	.228	3.828	.000
	Supervisor Support	.133	.055	.138	2.414	.016
	Co-worker Support	.350	.061	.353	5.745	.000
a. Dependent Variable: Work – Life balance						

Conclusion

The study highlights that workplace resources are significant determinants of work-life balance among nursing staff. Since nursing professionals operate in a highly demanding and service-oriented environment, the availability of adequate organizational support, efficient work arrangements, supportive management practices, and appropriate workplace facilities becomes essential for maintaining professional effectiveness and personal well-being. A positive workplace environment can help nurses manage occupational responsibilities while reducing stress and improving job satisfaction. Healthcare institutions should focus on strengthening resource availability, promoting flexible and supportive policies, and creating mechanisms that address the professional and personal needs of nursing staff. Improved workplace resource management not only benefits employees but also contributes to better healthcare outcomes through enhanced motivation, commitment, and performance. Future studies may explore additional factors such as psychological well-being, leadership practices, and institutional culture to develop a more comprehensive understanding of work-life balance among healthcare professionals.

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