

Work-life Balance Practices and Workplace Attitudes in Private Hospitals in Jordan

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Abstract

The main aim of this research is to contribute to the body of literature revolving around work-life balance (WLB) and its causal relationship with desired workplace outcomes. Particularly, the interest was directed towards investigating the linkage between WLB practices and workplace attitudes of job satisfaction and organizational commitment along with the mediation effect of work-life conflict. The research also sought to differentiate between formal and informal WLB practices in order to examine the more influential of the two.

This research was applied to the context of private hospitals in Jordan targeting medical-staff. With 450 questionnaires randomly distributed to medical-staff working in private hospitals in Jordan, 363 responses were obtained and analyzed yielding a response rate of 81 percent. Fitness-of-measure tests (reliability and validity) were first carried out to assess the suitability and generalizability of the obtained sample. Subsequently, data was analyzed and the research hypotheses were tested for possibility of rejection.

Results revealed the rejection of all hypotheses implying a statistically significant relationship between WLB practices and workplace attitudes of job satisfaction and organizational commitment with the former being more affected by the relationship than the latter. The findings also confirmed the mediation effect of work-life conflict. Furthermore, informal WLB practices were found to be superior to formal practices in terms of attaining desirable organizational outcomes. Finally, the research disclosed the fact that physicians—of all the segments under study—had the most conflict between work and life responsibilities.

Keywords: job satisfaction, organizational commitment, work-life balance, work-life conflict, workplace attitudes

1. Introduction

After the industrial revolution, the introduction of mass production and fast-forwarding to the 1970s, workforce demographic characteristics dramatically changed with women increasingly joining the labor force. In addition, features of the traditional breadwinner model started to reconfigure being replaced by the contemporary dual-earner household combination model where professional and family duties are divided between men and women in a more equal manner (Agarwal & Lenka, 2015). Further, single parents and dual careers were also additional features of the late 20th century. These changes brought about the potential to affect the quality of work and family life (Higgins, Duxbury & Irving, 1992) and sparked the realization for a coping mechanism with clashes between work and personal life and hence, the concept of Work-Life Balance (WLB) emerged.

It can be argued that Generation Y places greater emphasis on personal life than former generations did with research proving that employees today value the quality of life more than the salary they earn (Vloeberghs, 2002). Further, they have started to appreciate the non-standard work arrangements that WLB introduces and supports such as flexible work arrangements (Becker & Moen, 1999).

On the other hand, WLB can also be viewed as a win-win situation in which both employees and the organization benefit from a better equilibrium and balance between work and family life (Vloeberghs, 2002). As a matter of fact, countless benefits can be reaped from adopting WLB with many studies dedicated to investigate WLB's antecedents and outcomes (Mas-Machuca, Berbegal-Mirabent & Alegre, 2016).

Though there are many advantages of employing WLB practices at the workplace, these advantages may differ by industry (Konrad & Mangel, 2000). This could be attributed to the fact that not all WLB practices (such as certain flexible work options) can be offered by all industries (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).

Evidence suggests that WLB has gained vast popularity in the literature during the last two decades (Muna & Mansour, 2009; Koubova & Buchko, 2013). In fact, WLB is considered one of the most powerful tools that have been adopted and implemented by leading business enterprise giants such as Microsoft, Hewlett Packard (HP) and Shell (Dunne, 2007). Earlier studies such as Anderson, Coffey and Byerly (2002) stated that "few studies have incorporated a broad set of outcome variables, including attitudinal ones". A more recent research study by Waumsley (2010) called for extending research regarding conflict between work and personal life to employees without care-giving responsibilities. This is where this research comes into play where it sheds light on a topic that is virtually untapped in developing countries—not least in the MENA region. This research also attempts to investigate the relationship between WLB practices and a set of workplace attitudes; job satisfaction and organizational commitment—which has been called for in the literature.

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. In addition, the research reveals the practices (the independent variable in this research) that have the most influence on the different workplace attitudes (the dependent variable in this case) in order to draw conclusions specific to a developing country like Jordan which, in turn, could be compared to other countries.

One can argue that the healthcare sector is one of the largest and fastest-growing sectors worldwide with expenditure exceeding 10 percent of most developed countries' gross domestic product (GDP). Specifically, Jordan's healthcare expenditure was 7.7 percent of total GDP (World Bank, 2013). In fact, Jordan has a reputable record in this field as it has been regarded as a popular medical tourism destination with a ranking of first in the region and fifth globally (Oxford Business Group, 2009). And while western countries have dominated WLB research studies (Yildirim & Aycan, 2008), many research studies are calling out for conducting such studies in a non-western contexts (Roberts, 2007).

2. Literature Review

2.1 WLB Concept Development

It has been stated that the term work-family conflict was replaced in the literature with WLB 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 & Mansour, 2009; Jain & Nair, 2013).

Work-life conflict was described by Becker and Huselid (1998) as a lack of fit between work and life responsibilities and the goals of their organization. This lack of fit was due to the numerous problems encountered by employees working during unsocial hours and on long, tiring shifts.

After the introduction of WLB, outbursts of studies were published examining antecedents and consequences of WLB (Zhao & Namasivayam, 2012; Koubova & Buchko, 2013; Mas-Machuca et al., 2016) with strong correlations drawn between WLB and psychological and physical health (Felstead, Jewson, Phizacklea & Walter, 2002; Karatepe, 2012). As a result, employers started to introduce workplace policies conducive to WLB (Burke 2000).

2.2 WLB in Practice

At the beginning, WLB was exclusively linked to women's issues (Moore, 2007; Mas-Machuca et al., 2016). This narrow view has mainly restricted WLB to pertain to family obligations that the every-day working woman faces (Parasuraman & Simmers, 2001). Therefore, initially, the concept of WLB was not exploited and mostly oriented towards family-friendly policies (Wise & Bond, 2003; Mas-Machuca et al., 2016). Soon after, studies started to extend WLB to include a diverse range of the workforce including men who face distress attempting to balance between their work and personal life (Burke 2000). In addition, Waumsley (2010) was able to demonstrate that not only employees with family obligations were facing WLB challenges, but single employees face such struggles as well.

In particular, one concept that has gained spotlight in WLB literature is flexible-work (Dunne, 2007; Beauregard & Henry, 2009). Though flexible-work has been extensively explored in the literature, it's considered a poorly understood and ambiguous term (Hill et al., 2008) without a particular scale measuring it. In Smith and Carroll's (2002) research, flexible-work hours were the preferred method of utilizing WLB.

In light of the above, WLB can be described as a multi-dimensional concept. Some researchers such as Anderson et al. (2002) have segmented WLB into formal and informal practices with claims that the importance of informal support needs to be realized at the workplace (Ahmad & Omar, 2012). Others have even argued that informal practices surpass formal ones in positively impacting employees' ability at WLB (Allen 2001; Hammer, Neal, Newsom, Brockwood & Colton, 2005).

2.3 WLB Practice Advantages

Research has proved that implementing WLB practices results in a win-win situation where both employees and the employer reap numerous benefits (Vloeberghs, 2002). For employees, WLB practices mean more flexibility to fit in family and personal needs, increased autonomy, empowerment, greater motivation, reduced stress and increased opportunities to pursue career aspirations whilst balancing domestic responsibilities (Dunne, 2007; Helmle, Botero & Seibold, 2014). However, not only are the outcomes beneficial to employees, employers gain from the advantages enjoyed by employees, too. In the simplest form, companies implementing WLB practices, especially those related to flexible-work options, save on overheads (e.g. employees working from home), attract higher skilled employees, retain morale and motivation among staff which will—down the road—trigger a chain of reactions leading to increased efficiency, improved customer satisfaction, improved competitiveness as well as lower absenteeism and turnover (Dunne, 2007).

2.4 Linking WLB to Workplace Attitudes

Some researchers took on specific WLB practices and investigated their relationship with certain attitudes and behaviors. For example, Mas-Machuca et al. (2016) studied the linkage between WLB and organizational pride. Organizations are realizing the benefits of utilizing WLB practices thanks to the vast amount of research studies in the last decade that have uncovered the importance of such practices (Deery & Jago, 2015).

Adding to the above, it has been proven that WLB practices have a positive relationship with organizational commitment (Thompson, Beauvais & Lyness, 1999; Deery & Jago, 2015). Employers choosing to discard this important factor will lead to unfavorable outcomes such as lower employee morale and decreased organizational commitment (Hughes & Bozionelos, 2007). Specifically, flexible work schedules, flexible work hours, parental leaves, financial assistance and family-supportive services have a direct relationship with organizational commitment and loyalty (Beauregard & Henry, 2009).

Job satisfaction is another important workplace attitude that has been thoroughly studied in relation to WLB practices (Deery & Jago, 2015; Mas-Machuca et al., 2016). For instance, Beauregard and Henry (2009) arrived at a positive relationship between the two and so did Mas-Machuca et al. (2016). Moreover, many studies have mostly shed light on the negative relationship between job satisfaction and work-family conflict (Anderson et al., 2002; Lu, Kao, Chang, Wu & Cooper, 2008). On the other hand, Moore (2007) claimed that there is no real relationship between the WLB practices and job satisfaction.

Several studies have argued that formal WLB practices alone do not produce a significant effect on workplace behaviors and attitudes (Ahmad & Omar, 2012) but informal practices should also be taken into consideration. In fact, informal WLB practices affect workplace attitudes such as job satisfaction on a higher level than formal ones (Anderson et al., 2002; Ahmad & Omar, 2012). Brummelhuis and van der Lippe (2010) described these informal WLB practices as an organization's positive culture that is family-responsive and WLB-friendly.

A popular mediator that has gained spotlight in WLB literature is work-life conflict where researchers attempted to discover practices that mitigate the conflict employees undergo balancing the demands of their work and personal life (Helmle et al., 2014). Zheng, Molineux, Mirshekary and Scarparo (2015) defined work-family conflict as the opposite of WLB in which the pressures from work and family domains are conflicting with each other. Moreover, evidence points towards work-life conflict having negative relationships with turnover intentions (Waumsley, 2010) and job satisfaction (Helmle et al., 2014).

Earlier studies in this regard have split views with some the likes of Thompson et al. (1999) and Frye and Breugh (2004) reporting a significant negative relationship between WLB practices and work-life conflict while, on the other hand, Blum, Fields and Goodman (1994) and Premeaux, Adkins and Mossholder (2007) reported the exact opposite with no effects of WLB practices on work-life conflict levels indicating that offering WLB practices will not necessarily result in lower work-life conflict levels (Beauregard & Henry, 2009).

This is where this research comes into play contributing to filling the gap in the literature when it comes to examining WLB practices in developing countries. This is accomplished through investigating WLB in a highly demanding 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. Method

3.1 Measures

- Schedule Flexibility (formal WLB practice): Schedule flexibility refers to the flexibility granted to employees in choosing their start and finish times usually around a band of core hours where each employee must be present

(Anderson et al., 2002; Hill et al., 2008). To measure this, the scale used by Shockley and Allen (2007) based on the measure developed by Hyland (2000) was utilized. The five-point scale has been found to have a Cronbach's alpha of 0.84. The researchers also added two items bringing the overall Cronbach's alpha to 0.743.

- Manger Support and Job Autonomy (informal WLB practices): While manager support was measured using a six-item scale derived from Anderson et al.'s (2002) study with a Cronbach's alpha of 0.89, job autonomy—which 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 & Oldham, 1976)—was measured using a three-item scale developed by Thompson and Prottas (2005) with a Cronbach's alpha of 0.71.

- Job satisfaction (workplace attitude): According to Yang and Hwang (2014), the direct way to measure this construct is through asking employees about their self-assessed satisfaction level. Here, job satisfaction is measured using an eight-item scale developed by de Menezes (2012) with a Cronbach's alpha of 0.85.

- Organizational commitment (workplace attitude): Reflects the extent to which workers feel part of the organization they work for and are devoted to its success (Meyer & Allen, 1997). Here organizational commitment is measured combining de Menezes' (2012) three-scale items having a Cronbach's alpha of 0.85 with three items from Allen and Meyer's (1990) scale with a reported Cronbach's alpha of 0.85.

- Work-Life Conflict: In particular the well-known Netemeyer, Boles and McMurrian's (1996) scale was used with a reliability coefficient of 0.89 (Boyar, Carson, Mosley Jr, Maertz Jr and Pearson, 2006). Because the scale was mainly developed to measure work-family conflict, it focused on work and family issues, therefore this research used the scale with the word adaptations introduced by Waumsley (2010) in order to include all aspects of life, hence the term work-life conflict.

3.2 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 in a direct or indirect manner (such as physicians, nurses, pharmacists, lab technicians, midwives, etc.).

Numbers of medical staff in private hospitals amount to 35,689 (Jordanian Ministry of Health [MOH], 2014) which constitute the population of this research. The collected research sample was 363 and was extracted based on simple random sampling. Questionnaires were distributed to medical-staff currently working for private hospitals in Jordan. Worthy of mentioning is that there are 61 private hospitals in Jordan to date (MOH, 2014).

3.3 Research Hypotheses

The main hypothesis of this research concerns the relationship between the set of WLB practices and set of workplace attitudes mediated by the mediating variable as follows:

H₀: There is no statistically significant relationship between WLB practices and workplace attitudes mediated by work-life conflict.

Based on this, the following sub-hypotheses and sub sub-hypotheses were derived:

H₀₁: There is no statistically significant relationship between WLB practices and job satisfaction.

H₀₁₁: There is no statistically significant relationship between schedule flexibility and job satisfaction.

H₀₁₂: There is no statistically significant relationship between manager support and job satisfaction.

H₀₁₃: There is no statistically significant relationship between job autonomy and job satisfaction.

H₀₂: There is no statistically significant relationship between WLB practices and organizational commitment.

H₀₂₁: There is no statistically significant relationship between schedule flexibility and organizational commitment.

H₀₂₂: There is no statistically significant relationship between manager support and organizational commitment.

H₀₂₃: There is no statistically significant relationship between job autonomy and organizational commitment.

3.4 Research Model

Based on the discussion, the model was built and its framework is presented in Figure 1.

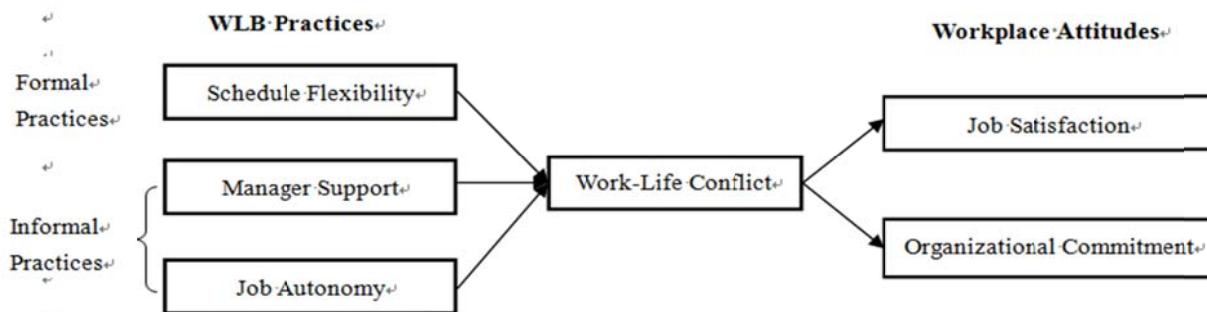


Figure 1. Research Model

3.5 Validity

A simple form of content validity that was utilized in this research is face validity, where the questionnaire—in the design phase—was presented to several educational experts in the field of business to gain from their input and relevant expertise. Their input, feedback and recommendations were taken into account before finalizing the final questionnaire.

To test for construct validity, factor analysis was performed and for the purpose of this research, exploratory factor analysis (EFA) was selected as the preferred analysis method. Reasons behind this choice of EFA include its ability to detect and assess the uni-dimensionality of a theoretical construct, prove an underlying theory and evaluate the construct validity of a measure or a scale (Williams, Massey Grajales & Kurkiewicz, 2013).

After confirming the adequacy of the sample size, analysis revealed a KMO index of 0.917 which is considered a high value and indicating that the data is thus adequate. In addition, the Bartlett's Test of Sphericity was significant (Sig.=0.00) which verifies, once again, the suitability of the data.

After demonstrating the suitability of the sample data, the next step in EFA is factor extraction. To produce a more interpretable solution, promax rotation was performed to produce factors that are correlated. A pattern matrix is generated and all items were loaded onto one of the three factors. The six items of manager support loaded onto factor 1 while the four items of job autonomy loaded onto factor 2. Loaded on factor 3 were the four items of job satisfaction.

In addition, the correlation coefficients between the independent variables were calculated and none of these exceeded the cut-off point of 0.70. This implies that there are no inter-dependencies between the variables and, therefore, are free from multicollinearity.

3.6 Reliability

The reliability of the questionnaire was obtained by calculating the Cronbach's alpha for each scale. Results disclosed that all variables exceeded the cut-off point Cronbach's alpha of 0.70 indicating a high internal reliability and consistency. These findings were important to defend the reliability of the used scales and the overall research.

4. Results

The analysis was conducted using SPSS Statistics 22.00 and Microsoft Excel 2010. Descriptive statistics of the research variables were first analyzed.

Table 1. Descriptive Statistics of the Research Variables

Variable	Mean	Std. Deviation	Coefficient of Variance (CV)	Level of Agreement
<i>Independent Variables</i>				
Schedule Flexibility	3.1364	0.8730	0.2783	Relatively Positive
Manager Support	3.5689	0.8975	0.2515	Relatively Positive
Work Autonomy	3.1439	0.9030	0.2872	Relatively Positive
<i>Mediating Variable</i>				
Work-Life Conflict	3.3052	0.8999	0.2722	Relatively Positive
<i>Dependent Variables</i>				
Job Satisfaction	3.3571	0.6794	0.2023	Relatively Positive
Organizational Commitment	3.6165	0.8631	0.2387	Relatively Positive

Table 1 reveals important information about the descriptive statistics of the variables under study. Since each variable was measured on a 5-point Likert scale, the mean outcome was explained with respect to the scale's interpretation. This implies that a mean outcome over a value of (3) points to a high level of agreement, while values below (3) imply a lower level of agreement.

It can be argued that because values are slightly over 3 then, on average, respondents agree that both schedule flexibility and job autonomy were implemented at their work to a moderate extent. At the same time, respondents rated manager support implemented at their work somewhat high.

As for the dependent variables, the means were 3.36 and 3.62 for job satisfaction and organizational commitment, respectively. As seen, there is quite a difference between the variables with organizational commitment rating higher (with the value of 3.62) than job satisfaction (with the value of 3.36).

Finally, for the mediating variable (work-life conflict), the mean was 3.31 and the coefficient of variance was 0.27 and so it is concluded that respondents rated work-life conflict they experience quite high with low variability between responses.

4.1 Sub-Hypotheses Testing

To test the sub-hypotheses, the data was first tested for fitness-of-use to be analyzed by linear regression analysis. After confirming adequacy of data, linear regression analysis was carried out to test each sub-hypothesis as well as the sub sub-hypotheses.

The first sub-hypothesis (H_{01}) assumes the following:

H₀₁: There is no statistically significant relationship between WLB practices and job satisfaction.

Testing out the hypothesis through multiple regression analysis revealed a Pearson's coefficient of correlation ($R=0.526$) which is an indication of a strong positive relationship between WLB practices and job satisfaction. Further, the coefficient of determination ($R^2=0.277$) suggests that 27.7 percent of the variation in job satisfaction is attributed to WLB practices. Further, ANOVA results concluded that the significance level is less than 0.05 leading to the rejection of the hypothesis.

Breaking down and testing the sub-hypothesis to examine what each WLB practice contributes to the dependent variable (job satisfaction) resulted in the following analyses:

H₀₁₁: There is no statistically significant relationship between schedule flexibility and job satisfaction.

Testing the above hypothesis through regression analysis resulted in a Pearson correlation coefficient of 0.418 implying a positive relationship between schedule flexibility and job satisfaction. In fact, based on the coefficient of determination (R^2), schedule flexibility explains 17.5 percent of job satisfaction. Further, ANOVA results revealed a significance level below 0.05 leading to the rejection of the null hypothesis.

To test the relationship between manager support and job satisfaction, again regression analysis was performed on the following hypothesis:

H₀₁₂: There is no statistically significant relationship between manager support and job satisfaction.

Results of the analysis showed that the significance level was below 0.05 leading to yet another rejection of the null hypothesis. Here, the correlation coefficient's value ($R=0.461$) suggests quite a strong positive association between manager support and job satisfaction. In fact, 21.2 percent of variance in job satisfaction is explained by manager support.

Now for the last WLB practice; job autonomy, regression analysis was conducted on the last hypothesis in this category (the effects of WLB practices on *job satisfaction*):

H₀₁₃: There is no statistically significant relationship between job autonomy and job satisfaction.

Analysis outcomes confirm a relationship between job autonomy and job satisfaction. The significance level was less than 0.05 and the correlation coefficient ($R=0.442$) suggests a positive relationship between the two variables. However, it can be observed that the coefficient of determination ($R^2=0.196$) was slightly lower than the coefficients calculated in the previous two sub sub-hypotheses suggesting that 19.6 percent of variance in job satisfaction is explained by job autonomy.

The second sub-hypothesis to be tested involves WLB practices and *organization commitment* and is stated as follows:

H₀₂: There is no statistically significant relationship between WLB practices and organizational commitment.

Pearson's coefficient of correlation was calculated ($R=0.386$) and implies a strong positive relationship between WLB practices and organizational commitment. Exploring the coefficient of determination ($R^2=0.149$) uncovered that

approximately 15 percent of the variation in organizational commitment is attributed to WLB practices. One can also deduce that though there is a positive relationship between WLB practices and job commitment, it is not as strong as with job satisfaction. Further, ANOVA results showed the significance level to be less than 0.05 leading to a rejection of the hypothesis and hence accepting the alternative hypothesis of a relationship between WLB practices and organizational commitment.

Similar to the analysis conducted on the first sub-hypothesis, the researcher sought to examine the relationships between different practices of WLB with organizational commitment. The first sub sub-hypothesis examined was the relationship between job satisfaction and organizational commitment.

H₀₂₁: There is no statistically significant relationship between schedule flexibility and organizational commitment.

Running the regression analysis, results led to the rejection of the null hypothesis. Moreover, the correlation coefficient suggests a positive relationship between the two variables. The coefficient of determination, on the other hand, was not much higher ($R^2=0.105$) with only 10.5 percent of the variance in organizational commitments attributed to schedule flexibility.

As for the relationship between manager support and its relationship with organizational commitment, the following hypothesis was analyzed.

H₀₂₂: There is no statistically significant relationship between manager support and organizational commitment.

The significance level was less than 0.05 and the null hypothesis was, therefore, rejected. It can also be observed that there is a positive relationship taking into account Pearson's correlation coefficient. Also, taking a look at the coefficient of determination, it can be concluded that 12.1 percent of variance in organizational commitment is attributed to manager support.

The final hypothesis to be analyzed examined the relationship between job autonomy and organizational commitment:

H₀₂₃: There is no statistically significant relationship between job autonomy and organizational commitment.

Results here also revealed significance and, as a result, the null hypothesis was rejected. Nonetheless, the coefficient of correlation showed a positive relationship between job autonomy and organizational commitment—though not a very strong one. Finally, taking a look at the coefficient of determination ($R^2=0.081$), it's concluded that job autonomy only contributes to 8.10 percent to the variance of organizational commitment.

4.2 Main Hypothesis Testing

The main aim of this study is to investigate the relationship between WLB practices and two workplace attitudes mediated by work-life conflict. The main hypothesis statement is as follows:

H₀: There is no statistically significant relationship between WLB practices and workplace attitudes mediated by work-life conflict.

Results carried evidence to reject the null hypothesis. This is due to the fact that the significance levels were below the critical value of 0.05 establishing a relationship between WLB practices and the two workplace attitudes.

As for the amount of variance in the dependent variables explained by the independent variables, the coefficient of determination comes into play with the analysis revealing ($R^2=0.275$) for job satisfaction. This implies that WLB practices altogether explain 27.5 percent of variance in job satisfaction. The coefficient of determination for organizational commitment, on the other hand, had a value of ($R^2=0.144$) suggesting that 14.4 percent of variance in organizational commitment is attributed to WLB practices.

To pinpoint which WLB practice contributed the most to the model and thus had the most effect on the dependent variable (job satisfaction), a look at the previous analysis reveals that the WLB practice with the highest correlation coefficient is manager support explaining over 21 percent of the variance in job satisfaction.

Finally, to investigate which WLB practice had the most significant effect on the model and thus on organizational commitment, it is evident that, once again, manager support is the variable with the highest coefficient of determination followed by job satisfaction and job autonomy, respectively. As a matter of fact, manager support accounts for approximately 12 percent of variance in organizational commitment.

4.3 Testing the Mediating Effect of Work-life Conflict

To test the mediating effect of work-life conflict between the established relationship between WLB practices and workplace attitudes, Sobel's test was conducted (Sobel, 1982). Two analyses were conducted here; one where the dependent variable was job satisfaction and the other where the dependent variable was organizational commitment.

1. First considering job satisfaction as the dependent variable (where $a=-0.275$, $b_1=-0.115$, $s_a=0.062$ and $s_{b1}=0.039$), the test was run and resulted in a significance value ($p\text{-value}=0.014$) less than 0.05 revealing that work-life conflict does indeed play a mediating role between WLB practices and job satisfaction. In other words, though WLB practices have a positive effect on job satisfaction, their relationship is mediated by work-life conflict.
2. Secondly, when organizational commitment was set as the dependent variable. The values were ($a=-0.275$, $b_2=-0.148$, $s_a=0.062$ and $s_{b2}=0.050$). Entering these values into the Sobel test calculator uncovered significance (since the $p\text{-value}$ is less than 0.05) and the role of the mediating variable is thus confirmed.

In conclusion, the previous results confirm what former studies have proven; a relationship between WLB practices and workplace attitudes (job satisfaction and organizational commitment) mediated by work-life conflict.

5. Discussion

Perhaps the most important deduction from the analysis is the evidence of a positive relationship between the main independent and dependent variables of the study which coincides with former studies (such as Anderson et al., 2002).

For starters, of the workplace attitudes, job satisfaction was the most affected variable by WLB practices among the dependent variables. This shows that implementing WLB practices serves well and medical-staff working in hospitals, which offer a combination of schedule flexibility, manager support and job autonomy actually do feel greater satisfaction towards their jobs. And while WLB practices exercise more impact on job satisfaction, organizational commitment is also positively affected by WLB practices.

Examining the relationship in more detail unravels the role of work-life conflict mediating the relationship between WLB practices and workplace attitudes. In fact, the sampled medical-staff who struggled with work-life conflict felt less satisfaction towards their jobs and were less committed to the hospital they worked at. This places the spotlight right on WLB practices as the initiator of the whole chain of relationships which coincides with both Hughes and Bozionelos (2005) and Anderson et al.'s (2002) findings.

Though all WLB practices had a profound effect on job satisfaction, manager support was the most influential followed by job autonomy and schedule flexibility, respectively. These results are quite expected from employees (such as nurses, physicians, etc.) working in such highly stressful environments, and who are in need of management support (Kramer, Maguire, Schmalenberg, Brewer & Burke, 2007). Moreover, job autonomy is also high on the respondents' list with nearly 20 percent of variability explained by this WLB practice. One justification for schedule flexibility having the lowest relationship with job satisfaction might be due to the fact that there isn't much flexibility to play around with in medical-staff's schedules, or perhaps medical-staff are more appreciative of the informal practices of manager support and job autonomy than formal ones.

As for organizational commitment, similar to job satisfaction, medical-staff perceived manager support the most influential. This finding is expected because medical-staff working in a highly stressful work environment will need managerial support which will naturally result in reciprocal feelings of loyalty towards the hospital they work at. The second most influential WLB practice was flexible scheduling followed by job autonomy, respectively.

From the above, one can draw an inference that informal WLB practices (manager support and job autonomy) were perceived of higher value to medical-staff than the formal WLB practice (schedule flexibility). This conclusion is in agreement with previous studies that encourage the implementation of informal WLB practices being most favorable amongst employees to be implemented at the workplace. Informal practices even surpass formal policies and lead to higher levels of job satisfaction and organizational commitment (Allen 2001; Hammer et al., 2005).

Drawing conclusions that are specific to Jordan and taking into account the occupational differences between the sample's medical-staff, pharmacists seemed to enjoy schedule flexibility the most. For manager support, nurses, lab and radiology technicians and pharmacists rated manager support quite high, while physicians did not hold the same opinion. It's also of importance to take into account that physicians were the segment who admitted struggling with WLB the most. This is expected as there have been many studies dedicated to investigate the struggles physicians face in balancing their work and life (Shanafelt et al., 2012). When it comes to physicians' work-life conflict, this study exhibited outcomes similar to former studies which is the norm since the majority of physicians (77 percent—to be exact) who completed this study are young physicians with less than 10 years of work experience. The statistics here imply that these young physicians are either general practitioners (GP) or resident doctors and it's a known fact that these two segments are highly vulnerable to get trapped in the work-life conflict dilemma.

5.1 Practical Implications

For many years, the healthcare industry has been concerned with the extremely high levels of stress and work-life conflict medical-staff face that lead to burnout among other possible dreadful outcomes (Vahey, Aiken, Sloane, Clarke & Vargas, 2004). Therefore, having the knowledge of how to mitigate the perceptions of work-life conflict and foster an

environment of WLB could improve the situation by leaps and bounds.

To do so, management must first raise awareness of such a vital matter and then start introducing WLB policies and practices. A look at the previous discussion shows the profound effect of manager support on both job satisfaction and organizational commitment. Manager support could take the form of having a superior who is fair, caring and understanding of the WLB needs of his/her subordinates. This could be implemented by raising awareness among superiors and nurture an environment conducive to WLB as well as embed strategies and set-out policies to increase manager support to medical-staff.

Another positive outcome from the study is that hospital management needn't invest in formal WLB practices that could incur substantial cost and effort. In fact, the study has proven that informal WLB practices are superior to formal ones and this coincides with former studies such as Anderson et al.'s (2002). This means that informal WLB practices—though often ignored—could not only save management the burden of introducing formal WLB practices but also have an essential role in achieving the desired outcomes of positively influencing employees' attitudes towards their jobs (Ahmad & Omar, 2012).

Finally, it can be noted that, in terms of work-life conflict, it is physicians who are struggling the most—according to their perception. Therefore, an action point from management's part could be to offer extra support to those physicians.

5.2 Recommendations and Future Research

Due to the fact that the vast majority of studies concerning WLB have been mainly conducted in western countries, and because part this study's mission was to fill the gap in the literature when it came to studies tapping the WLB concept in developing countries, one study will not be sufficient to cover all aspects of WLB. Accordingly, this study calls out researchers to carry out similar studies in developing countries. Furthermore, the study could be expanded to include more WLB practices.

Add to the above, this study included all medical staff regardless of occupation, gender, age, years of experience, etc. and since the findings concluded that physicians are among the most struggling segment in terms of work-life conflict, future studies could be dedicated to study WLB for a specific segment. Alternatively, the study could be applied to a whole other sector all-together to see if the study yields similar results between various sectors.

6. Conclusion

Among the numerous studies that were dedicated to investigate antecedents and outcomes of WLB (Koubova & Buchko, 2013), this study stands out as one of the few that took an established concept as WLB and applied to a highly demanding field (i.e. healthcare) in the context of a developing country such as Jordan. The study added to the body of literature the confirmation of a significantly statistical relationship between WLB practices and workplace attitudes (job satisfaction and organizational commitment) mediated by work-life conflict for medical-staff working in private hospitals in Jordan. This coincides with outcomes of similar studies conducted in western settings such as Anderson et al.'s (2002).

The study also highlighted manager support as the most contributing factor among all WLB practices under investigation towards workplace attitudes. In fact, in this casualty relationship, about third of the variance in job satisfaction was attributed to manager support.

Another key revelation is that informal WLB practices played a much substantial part in explaining the dependent variables than formal practices did. This outcome agrees with former studies that drew similar conclusions (Anderson et al., 2002; Ahmad & Omar, 2012). Moreover, the role of work-life conflict plays as the mediator in the study's model is confirmed. This finding points to the importance of WLB practices in mitigating struggles arising from conflicting work and life demands.

The above discussion praises WLB for being a concept that not only alleviates conflicts between employees' work-life issues, but also has a significant influence on increasing job satisfaction and organizational commitment. Also, the study portrays WLB as a multi-dimensional concept that could be approached from different angles—making research about its multi-dimensionality not only intriguing but also imperative.

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