

## Relation between Perceived Organizational Support and Work-Life Balance among Nurses

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### Abstract:

**Background:** Supporting nurses in health care sectors is very important, as nurses are the backbone of the hospital, perceived organizational supportive practices play an important role in improving nurses' work-life balance. **Aim:** to assess the relation between perceived organizational support and work-life balance among nurses. **Subjects and Method:** A descriptive correlational design was utilized in this study. **Setting:** The study was conducted at Al Mabara Hospital for Health Insurance - El Zagazig, Alsharaqia, Egypt. **Subjects:** Convenience sample (410) staff nurses. **Tools:** Data were collected using two tools: The perceived organizational support scale and the Work-life balance survey. **Results:** 97.6% of studied nursing staff had a low perception level of organizational support and 90.2% of them had a moderate level of work-life balance. **Conclusion:** There was a positive significant correlation between work-life balance and organizational support. **Recommendations:** Hospital management should create strategies that promote a supportive work environment such as rewards, flexible work schedules, fair pay and benefits, safe working conditions, and training should be made available for nurses to improve the balance between work and life which in turn will give satisfaction in their personal life.

**Keywords:** Perceived Organizational Support, Work-Life Balance, Nurses.

### Introduction:

In a contemporary work atmosphere, every organization can be competitive by having the best human resources, and to attain this competition, organizations need to support their nurses and help them to cope and overcome their stress. Organizations can support their nurses either directly or through supervisors but, direct support counts more in promoting nurses' work-related outcomes. When nurses perceive support from their organizations, they respond to it with improved job performance<sup>(1)</sup>.

Organizational support is required by all healthcare staff through their hospitals, to recognize how much their hospital cares about satisfying nurses' needs as well as nurses' wellbeing. Organizational support can create a positive and productive work environment which helps nurses to manage workplace-related stressors and exhaustion. Support is required by nurses at all hospital levels. When nurses perceive organizational support,

this can enhance their sense of well-being, raise positive work behaviors, improve their autonomy in patient care, and do their best to increase productivity<sup>(2)</sup>.

Perceived organizational support (POS) is an important concept about the extent to which an organization provides support for the contributions of its employees and about how the organization cares for the welfare of its employees. Perceived organizational support is an employee's belief in an organization's commitment to them in the form of appreciation and organizational attention to their contributions and lives. Perceived organizational support is the experience of the good or bad of an organization's policies, norms, procedures, and behaviors because it affects employees. The organization will get a good level of employee performance if the organization provides support that is assessed sufficiently by its employees. An organization that does not pay attention to the employee will

result in a low level of perceived organizational support for the employee<sup>(3)</sup>.

Organizational support refers to an employee's belief that his or her contributions are valued, his or her well-being is considered and his or her needs are met. This support can be appreciation, moral support, provision of information, training, development, and other tools used by employers<sup>(4)</sup>.

Organizational support is used as a tool to help leaders understand the emotional commitment that employees develop toward the organization. If organizational leadership cannot effectively understand employees' internal intentions, it is wise to at least pay attention to conversations about employee focus, which aids in recognizing factors that form psychological connections to both organizations and individuals<sup>(5)</sup>.

Perceived organizational support is interpreted by employees as a form or desire of the organization to assist employees in managing their work life and family. This is marked by the organization's policy of providing flexible working time for employees. Organizational support received by employees will make employees feel cared for so they have no difficulty in balancing the demands of work and family roles<sup>(6)</sup>.

Work and family are different but closely related. An employee needs a balance in completing work responsibilities but has quality time for personal and family. Work-life balance is primarily concerned with maintaining a balance between personal life and professional life. Studies show that individuals must be able to manage time, and find priorities by balancing time for work, family, vacation, and health<sup>(7)</sup>.

In this competitive world, it is vital for any organization to create an environment that will help nurses

manage their personal and professional lives because people are left with less time for themselves. Nurses' working conditions often challenge the attainment of a healthy work-life balance. Commonly cited issues include shift work, staff shortages, time pressure, and physical strain. However, work-life balance is crucial both for nurses and for the institutions that employ them. For individuals, an imbalance may lead to health problems such as poor sleep quality, stress reactions (behavioral and cognitive stress symptoms), or burnout. For organizations and their employees, job dissatisfaction and turnover intentions count as negative consequences of a lack of work-life balance<sup>(8)</sup>.

Work-life balance refers to the degree to which nurses are able to engage themselves equally and fairly to satisfy his/her job and family position. Therefore, work-life balance would allow nurses to properly control the areas of life and work and would help the organization to produce more engaged and more satisfied nurses. In addition, nurses should develop appropriate working environments that encourage nurses' emotional connection to their organizations, thereby impacting job satisfaction. While unbalanced jobs and lives of nurses lead to less organizational involvement. Nurses also need to be aware of policies that maintain work-life balance and workflow<sup>(9)</sup>.

Work-life balance is considered one of the key factors affecting the influence of perceived organizational support over the quality of work life of employees, meaning that all employees need a good quality of life and health, not sick from work. The personnel's quality of work life is there crucial concern for the organization. Employees' satisfaction can result in the continuity of work, which can make the organization in its stability and loyalty<sup>(10)</sup>.

Perceived organizational support and perceived leaders' support are essential in maintaining a balance between work and personal life. When employees feel supported at work, they are less likely to carry the stresses of their job home with them at the end of their work. The more positive the perceived organizational support, the higher the work-life balance and vice versa. The perceived organizational support has an influence on work-life balance. So that in order to increase the work-life balance of employees, an organization must provide support that is in accordance with the needs of its employees<sup>(11)</sup>.

### **The theoretical framework of the study:**

The idea of organizational support is derived from the social exchange theory (SET) and the Norm of Reciprocity Theory (NRT). According to these two theories, employees who are offered a favor by their organizations will not harm these organizations and will show positive feelings and behaviors toward them. Perceived organizational support is regarded as a social exchange connection that stems from interactions between an employee and his or her organization. It is described as a psychological contract that the employee makes with the enterprise. It also refers to individuals' "global beliefs concerning the extent to which the organization values their contribution and cares about their well-being"<sup>(12)</sup>.

Organizational support theory – OST Eisenberger et al,<sup>(13)</sup> suggests that an employee develops a positive attitude when they observe that the organization values their contributions and cares for their quality of life.

### **Significance of the study:**

Organizational support has been found to be crucial for a successful work-family interface for nurses. Individuals who cannot balance the demands of work and personal life are less

committed, less productive, and less satisfied with their work and eventually leave the organization<sup>(11)</sup>.

Up to our knowledge, there are no previous studies that examine the relationship between organizational support, and work-life balance among nurses at Al Mabara Hospital for Health Insurance - El Zagazig, Alsharaqia, Egypt. To deal with this gap this work is contributing to the body of research by assessing the relation between perceived organizational support and work-life balance among nurses.

### **Aim of the study:**

This study aim was to assess the relation between perceived organizational support and work-life balance among nurses at Al Mabara Hospital for Health Insurance - El Zagazig , Alsharaqia, Egypt.

### **Research Questions:**

- What is the level of organizational support among nurses at Al Mabara Hospital for Health Insurance - El Zagazig, Alsharaqia, Egypt?
- What is the level of work life balance among nurses at Al Mabara Hospital for Health Insurance - El Zagazig, Alsharaqia, Egypt?
- Is there a relation between perceived organizational support and work-life balance among nurses at Al Mabara Hospital for Health Insurance - El Zagazig, Alsharaqia, Egypt?

### **Subjects and methods:**

#### **Research design:**

A descriptive correlational study design was used to achieve the aim of this study.

#### **Study Setting:**

This study was conducted at Al Mabara Hospital for Health Insurance - El Zagazig, Alsharaqia Governorate, Egypt.

#### **Subjects:**

The total number of staff nurses at Al Mabara Hospital (450). Convenience

sample at the time of data collection (410).

**Tools of data collection:**

Two tools were used to collect the necessary data.

**Tool I: Perceived organizational support scale:** It consists of two parts as follows

**Part one:** Personal and job characteristics of nurses, which include the data about characteristics of the nurses such as age, gender, years of experience, and educational qualifications.

**Part two:** It was developed by **Kraimer and Wayne**,<sup>(14)</sup> to assess perceived organizational support among nurses. This scale includes 12 items that are categorized into three domains namely; career domain (4 items), financial domain (4 items) and adjustment domain (4 items).

**Scoring System:** The answer to the scale was rated on a five-point Likert scale as (1= strongly disagree, 2= disagree, 3= neutral, 4= agree and 5= strongly agree). The total score was categorized by cutoff point factor into three levels;

- Low <50% (12-29)
- Moderate 50 - 75% (30-45)
- High >75% (46-60)<sup>(9)</sup>.

**Tool II: Work-life balance survey:**

It was developed by **Sogo**<sup>(15)</sup> to assess how nurses seek to balance their professional lives with their personal lives. It includes 26 items categorized under nine dimensions namely: happiness (3 items), work satisfaction (3 items), work environment satisfaction (2 items), personal life satisfaction (3 items), balance (3 items), stress (3 items), work brought home (3 items), time to de-stress (3 items) and loyalty (3 items).

**Scoring system:** Response to items was measured on a five-point Likert

scale (1= strongly disagree, 2= disagree, 3=neutral, 4= agree and 5= strongly agree). The total score was categorized by cutoff point factor into three levels as follows;

- Low <50% (26-64)
- Moderate 50 - 75% (65-97)
- High >75% (98-130)<sup>(9)</sup>.

**Content Validity and Reliability:**

The questionnaire was translated into Arabic, and then content and face validity were established by a panel of five experts from the nursing administration department at The Faculty of Nursing, Zagazig University. Experts were requested to express their opinions and comments on the tool and provide any suggestions for any additions or omissions of items. According to their opinions, all recommended modifications were performed by the researcher. The reliability of this questionnaire was tested by the Cronbach alpha test; it was (0.89) for the perceived organizational support scale and it was (0.862) for the work-life balance scale.

**Fieldwork**

Data collection was carried out from September to December 2022. The researcher met both the medical and nursing directors of each hospital to explain the purpose of the study and obtained official permission. The questionnaire was distributed to participants and instructed about how to fill it out. The participants were asked to fill up the tools during the morning and afternoon shifts. the questionnaire took from 15 to 20 minutes to be filled. Before distributing the questionnaire the purpose of the study and components of the tools were explained to the participants in the study setting. The researcher was available at the time of collection for any clarification and checked each tool after completed by staff nurses to ensure the completion of all information. The researcher visited the selected setting four days per week and collected data by herself.

### Pilot study:

A pilot study was carried out one week before starting actual data collection. The results of the pilot sample were excluded from the results and the necessary modifications were done. The purpose of the pilot study was to ensure the clarity and applicability of the tool and to identify the obstacles and problems that may encountered during data collection. It also helped to estimate the time needed to fill the forms. It was carried out on 10% of the study subjects (41 staff nurses).

### Administrative and ethical considerations:

The study proposal was approved by the ethical committee in the faculty of nursing at Zagazig University. The researcher met the hospital directors (medical and nursing) to clarify the aim of the study and seek their support and approval. The researcher met the study subjects to explain the purpose of the study and obtain their approval to participate in it. They are assured about the anonymity and confidentiality of the data collected, and used only for the purpose of scientific research. The subject's right to withdraw from the study at any time was assured.

Before any attempts to collect data, an official approval to conduct the study was submitted to the medical and nursing director of Al Mabara Hospital for Health Insurance - El Zagazig, Alsharaqia to collect data from study subjects. Letters were issued from the faculty of nursing at Zagazig University. The letters contained the study title, the aim of the study, and photocopy from data collection tools in order to get permission and help for the collection of data.

### Statistical analysis:

The data were organized, categorized, tabulated, and statistically analyzed by using SPSS, (Statistical Package for Social Sciences), software program version 17. Data were

presented using descriptive statistics in the form of frequency, percentage, mean, and standard deviation; correlation coefficient, and chi-square were also used to examine the relation between the study variables. A significant level value was considered when  $p < 0.05$  and a highly significant level value was considered when  $p < 0.001$ .

### Results:

The personal and job characteristics of the nurses in the study sample

**Table 1** illustrates that more than half of the studied nursing staff aged from 20 to less than 30 years (52.9%), the majority of them have a nursing diploma (86.6%), and almost all of them are females (99.8%). In addition, (68.3%) of them had five to ten years of experience.

**Figure 1** notifies that 97.6% of staff nurses had a low perception level of organizational support, while, 2.4% of them had a moderate perception level of organizational support.

**Table 2** concerning the mean and standard deviation of the organizational support dimensions among studied nursing staff, the table illustrates that the mean percentage of overall staff nurses' perception toward their organizational support was  $\text{mean} \pm \text{SD}$  ( $5.6954 \pm 1.04580$ ), and the highest mean percentage of organizational support was related to financial domain ( $2.0575 \pm 0.79199$ ), while the lowest mean percentage was related to career domain ( $1.7701 \pm 0.42443$ ).

**Figure 2** notifies that 90.2% of studied staff nurses had a moderate level of work-life balance, while 9.8% of them had a low level of work-life balance.

**Table 3** concerning the mean and standard deviation of work-life balance domains among studied nursing staff, the table shows that total mean score of all

work-life balance domains as reported by nurses was (7.143±068), and the highest mean percentage of work-life balance was related to the work brought home domain (6.83845 ± 0.82). While the lowest mean percentage was related to time to de-stress domains (1.20 ± 0.65).

**Table 4** concerning the relationship between organizational support and work-life balance of studied nursing staff, the table presents that there was a positive significant relation between organizational support percentage and its domains and work-life balance percentage and its domains (r=0.10 & p=0.03).

**Table 5** regarding the relation between the organizational support level of studied nursing staff and their personal and job characteristics the table reports that there was no statistically significant relation between personal and job characteristics of nurses and the total mean percentage of organizational support (P= >0.05).

**Table 6** regarding the relation between the work-life balance level of studied nursing staff and their personal and job characteristics the table portrays that there was no statistically significant relation between the total mean percentage of work-life balance and personal and job characteristics of nurses (P= >0.05).

### Discussion:

Hospitals have undergone immense modifications that are more challenging. These challenges are affecting the nurses and their family life. That's why; they face many stressors in balancing career, family, social obligations, and work expectations. Due to the rapid changes in technology and the workforce, organizations are obliged to be continuously looking for practical solutions to meet these changes. So, organizations are required to present high support for nurses to satisfy their entire professional and family life by adopting work-life balance policies which

are continuously developed and implemented to ensure the higher-level work-life balance, job satisfaction, and commitment of their nurses<sup>(9)</sup>.

Regarding the nurses' perception level of organizational support, the findings of the present study indicated that the highest percentage of nurses had low levels of organizational support. This may be due to the organization doesn't provide nurses with opportunities for development by continuing education training and didn't give them adequate information to accomplish their job. Moreover, the organization has not provided many opportunities to ease the transition to work in another country. Also, the organization did not show interest in nurses' families' well-being such as (health insurance, participation in trips, and summer vacations.) in addition, the staff nurses didn't feel enough support from managers and hospital administration in the distribution of work.

This result goes in the same line with a study by **Moghadam et al.**<sup>(16)</sup> who concluded that nurses had a low level of perceived organizational support and was contradicted by **Abdel Azize et al.**<sup>(17)</sup> in Egypt who reported that the nurses' perception level of organizational support was moderate and disagree also with **Rader**<sup>(18)</sup> in the USA who showed respondents with high perceived organizational support.

As regards the dimensions of perceived organizational support, the finding of the present study indicated that the highest mean score was related to the financial dimension while the low mean score was related to the career dimension. This could be due to that the organization provides financial incentives and allowances, and nurses feel supported when the organization provides them with more salaries, resources, and awards. Also, the organization takes care of them financially as a tool to get high-quality of health care.

Regarding the nurses' work-life balance level, the finding of the current study stated that the highest percentage of nurses had a moderate level of work-life balance. This might be due to that the organization provides nurses with too many duties in a short time to do them which results in the nurses sacrificing sleep for work so they feel overwhelmed. They sacrifice to make up time with their families. Moreover, the leaders and the supervisors do not positively contribute to the work environment.

This result was consistent with those studies carried out by **Delmo and Dequito** <sup>(19)</sup> who confirmed the moderate level of work-life balance among the studied sample, and **Abo Habieb and El-Wkeel** <sup>(9)</sup> study to explore the influence of perceived organizational support, and work-life balance on staff nurses' workflow which showed that nurses are at a moderate level of work-life balance.

These results were incongruent with **Tanaka et al.** <sup>(20)</sup> who described the current situation of the work-life balance gap among acute care ward nurses and assessed its association with quality of life confirmed that most nurses perceived the presence of lower work-life balance was among nurses living with family than among nurses living alone because nurses living with family played a relatively important role in their family.

As regards the dimensions of work-life balance, the findings of this study revealed that the higher mean score of work-life balance was related to work brought home, while the lowest mean score was related to time to de-stress. This might be due to the nurses always leave some of their duties and work tasks without completing and leave the work. Thus they sometimes bring this uncompleted work to home and complete it beyond work hours. It may be also because nurses often go to work on weekends or during irregular work hours. Consistent with this result, the study

conducted by **Abo Habieb and El-Wkeel** <sup>(9)</sup> reported that the highest mean score for work-life balance related to stress.

Concerning the relationship between organizational support and work-life balance, the present study proved that there is a positive statistically significant relation between the total score of work-life balance and organizational support score. This may be due to when nurses realize that the organization supports them and pays attention to their life welfare; they are more probably to grow a sense of motivation belonging, and adjustment. In addition, when nursing managers provide greater support to staff nurses, they feel involved and committed. Also when the organization has flexible work arrangements as organizational support, they tend to have a high work-life balance. Moreover, positive organizational responses to illness and family needs also tend to increase the level of nurses' work-life balance.

This result correspondent with **Sheikh** <sup>(21)</sup> study who indicated that a positive influence of perceived organizational support on work-life balance. Also, **Dubey and Riasudeen** <sup>(22)</sup> studied the mediating influence of work-life balance in the relationship between perceived organizational support and job satisfaction for female nurses in the Indian healthcare ecosystem and found that Perceived organizational support and work-life balance have a significant and positive relationship between them.

Contradictory with this, a study conducted by **Fitria and Linda** <sup>(23)</sup> who studied about "Perceived Organizational Support and Work-Life Balance on Employee Turnover Intention" indicated that negative correlation between perceived organizational support and work-life balance.

Regarding the relation between the personal characteristics of nurses and the total mean score of

organizational support, the present study showed that there was no statistically significant relation between the personal and job characteristics of nurses and the total mean score of organizational support.

This was supported by the study of **Zhang et al.** <sup>(24)</sup> who indicated that none of the demographic variables except gender and marriage status were correlated with dependent variables. In the same line, a study by **Al-Hamdan and Issa** <sup>(25)</sup> indicated that the years of experience were not significantly correlated with perceived organizational support.

Inconsistent with this result, the study of **Abdel Azize et al.** <sup>(17)</sup> found that there was a highly statistically significant relation between the perception level of organizational support among the studied staff nurses and their age, educational level, salary, current position, and past experience.

Concerning the relation between the personal and job characteristics of nurses and the total mean score of work life balance, the present study revealed that there was no statistically significant relation between the total mean score of work life balance and personal and job characteristics of nurses.

This result is supported by **Karunagaran et al.** <sup>(26)</sup> who studied the work-life balance of nurses during the pandemic and indicated that there was not a significant relationship between age, marital status and the experience of the nurses.

### Conclusion:

In light of the main study results; it can be concluded that most of studied nursing staff had a low perception level of organizational support and a moderate level of work life balance. Additionally, there was a positive significant relation between the total level of nurses' work-life balance and their organizational support perception.

### Recommendations:

In view of the main results of the study, the following recommendations were derived and suggested:

- Continually assess the level of perceived organizational support.
- Hospital management should create strategies that promote a supportive work environment and reduce workplace deviance behaviors such as rewards, flexible work schedules, fair pay and benefits, safe working conditions, enough resources and training programs.
- Providing an attractive system of recognition and rewards that increase the sense of achievement, and personal growth.
- Create an equitable work environment by maintaining open clear communication with all nurses.
- Hospitals should closely monitor the level of all factors regarding workplace and other benefits such as childcare facilities and convenient working hours should be made available for nurses to improve the balance between work and life.
- Provide training programs for occupational stress techniques for nurses to overcome their stress and balance professional and family environments.

### Further Research:

- Examining the effect of organizational support on organizational outcomes.
- Investigating the effect of head nurses' authentic leadership on staff nurses' productivity and identify the strategies that help nurses to develop resilience and innovative behavior.



Table (1): Distribution of personal and job characteristics of the studied nurses (n=410).

Personal Characteristics	Nurse students (N = 410)	
	N	%
<b>1) Age per years:</b>		
• < 20	104	25.4
• 20-<30	217	<b>52.9</b>
• ≥30	89	21.7
Mean ±SD	20.56±1.314	
<b>2) Marital status:</b>		
• Married	380	<b>89.2</b>
• Single	30	10.8
<b>3) Gender:</b>		
• Males	1	0.2
• Females	409	<b>99.8</b>
<b>4) Educational Qualification:</b>		
• Bachelor of nursing degree	42	10.3
• Diploma of technical institute of nursing	10	2.4
• Diploma of technical institute of health	3	0.7
• Nursing diploma	355	<b>86.6</b>
<b>5) Years of experience:</b>		
• less than 5	50	12.2
• -5 - 10	280	<b>68.3</b>
• More than 10	80	19.5

Figure (1): Total Perception levels of organizational support among staff nurses

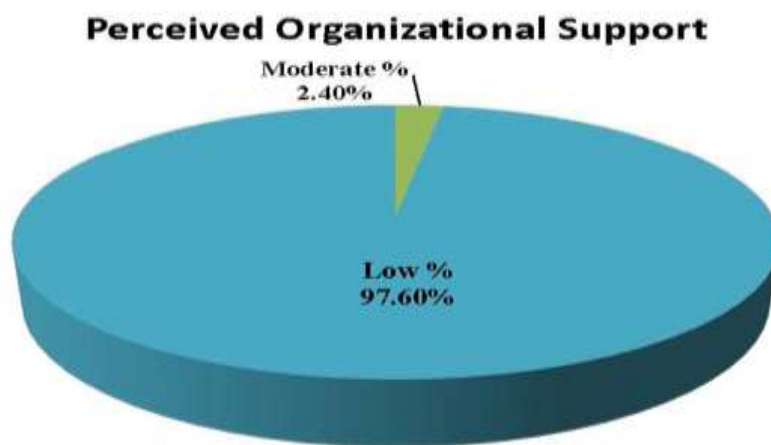


Table (2): Mean scores of organizational support domains as perceived by studied nurses (n=410)

Domains of Perceived Organizational Support	Mean	Std. Deviation
Career	1.7701	.42443
Financial	2.0575	.79199
Adjustment	1.8678	.44999
Total Score	5.6954	1.04580

Figure (2): Total levels work-life balance as reported by studied staff nurses

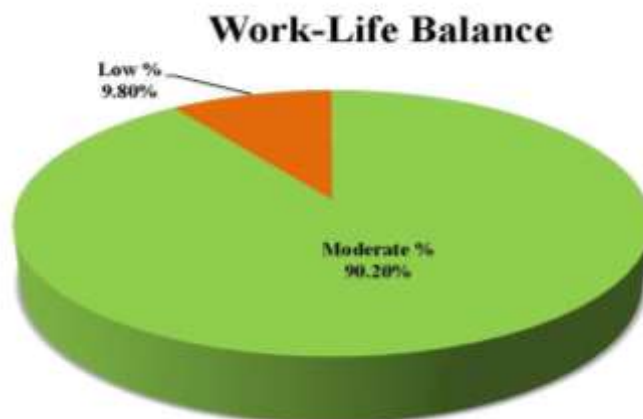


Table (3): Mean scores of work-life balance domains as reported by studied nurses (n=410)

Sub domains	Mean	Std. Deviation
Happiness	5.96	±1.20
Work Satisfaction	3.77	±4.83
Work Environment Satisfaction	4.45	±5.143
Personal Life Satisfaction	5.90133	±0.80
Balance	6.63450	±0.75
Stress	4.15782	±0.77
Work Brought Home	6.83845	±0.82
Time to De-stress	1.20	±0.65
Loyalty	4.83	±0.62
Total	7.143	±0.68

Table (4): Correlation between total level of nurses' work-life balance and nurses perception of organizational support (n=410).

Variables	Total work-life balance score r	P - value
Total score of organizational support	0.10*	0.03

Table (5): Relation between personal and job characteristics of nurses and their perception of organizational support (n=410)

Personal Characteristics	Mean ±SD	F/Independent t-test	P value
<b>1) Age per years:</b>			
• < 20	84.76 ± 7.43		
• 20-<30	84.16 ± 9.16	0.380	>0.05
• ≥30	83.68 ± 9.84		
<b>2) Marital status:</b>			
• Married	84.05 ± 8.76		
• Single	85.36 ±10.27	0.831	>0.05
<b>3) Educational Qualification:</b>			
• Bachelor of nursing degree	84.65 ±7.21		
• Diploma of technical institute of nursing	83.46 ±7.51		
• Diploma of technical institute of health	85.27±9.96	1.34	>0.05
• Nursing diploma	83.21±10.04		
<b>4) Years of experience:</b>			
• less than 5	71.64 ± 8.81		
• -5 - 10	84.31 ± 8.97	0.602	>0.05
• More than 10	80.63 ± 8.16		
F: ANOVA		>0.05: Non statistically significant	

Table (6): Relation between personal and characteristics of nurses and their levels of work life balance (n=410).

Personal Characteristics	Mean ±SD	F/Independent t-test	P value
<b>5) Age per years:</b>			
• < 20	73.05 ± 17.42		
• 20-<30	73.51 ± 18.87	0.918	>0.05
• ≥30	71.51 ± 15.4		
<b>6) Marital status:</b>			
• Married	76.24 ± 15.36		
• Single	75.54 ± 14.15	0.818	>0.05
<b>7) Educational Qualification:</b>			
• Bachelor of nursing degree	70.45 ± 17.03		
• Diploma of technical institute of nursing	71.66 ± 14.56		
• Diploma of technical institute of health	69.26 ± 12.75	1.57	>0.05
• Nursing diploma	78.40 ± 19.10		
<b>8) Years of experience:</b>			
• less than 5	73.57 ± 15.62		
• -5 - 10	72.49 ± 12.19	0.069	>0.05
• More than 10	70.32 ± 13.38		
F: ANOVA		>0.05: Non statistically significant	

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