

EVALUATING THE SIGNIFICANCE OF WORK–LIFE BALANCE: AN ANALYSIS OF WORK–FAMILY AND WORK–HEALTH DYNAMICS

Abstract

In the contemporary landscape of employment, achieving a harmonious equilibrium between professional responsibilities and personal well-being has emerged as a crucial endeavor. This research delves into the multifaceted concept of work–life balance, with a particular focus on the interplay between work, family obligations, and health considerations. Employing a comparative approach, this study investigates the relative importance of maintaining equilibrium in both work–family and work–health domains. Through quantitative analysis of survey data and qualitative examination of individual narratives, this study aims to provide nuanced insights into the varying dimensions of work–family and work–health balance, considering factors such as gender, socioeconomic status, and organizational culture.

By delineating the distinctive challenges and consequences associated with imbalances in work–family and work–health domains, this research contributes to a deeper understanding of the mechanisms driving individual experiences and organizational outcomes. Furthermore, by identifying strategies and interventions aimed at fostering greater harmony between work and personal life, this study offers practical implications for employers, policymakers, and individuals striving to enhance overall well-being and productivity in the modern workforce. Ultimately, this research endeavors to underscore the importance of recognizing the interconnectedness of work, family, and health domains in shaping individuals' experiences and fostering sustainable work environments conducive to flourishing both personally and professionally.

Keywords: Work–life balance, work–family balance, work–health balance, equilibrium, organizational culture, well-being, productivity, gender, socioeconomic status, intervention strategies, organizational outcomes, interdisciplinary perspective.

Introduction

In the contemporary landscape of work, the pursuit of work–life balance has emerged as a paramount concern for individuals and organizations alike. The notion of work–life balance encapsulates the intricate interplay between professional commitments and personal well-being, encompassing various domains such as family responsibilities and health considerations (Kelliher et al., 2019). Amidst the evolving dynamics of the modern workforce, achieving equilibrium between work-related demands and other aspects of life has become increasingly challenging yet essential for fostering individual fulfillment and organizational success. This research endeavors to delve into

Shilpa Sharma

Research Scholar
Faculty of Management
Studies, JRN Rajasthan
Vidyapeeth (Deemed-to-
be) University, Udaipur
(Rajasthan)

Dr. Neeru Rathore

Assistant Professor
Faculty of Management
Studies, JRN Rajasthan
Vidyapeeth (Deemed-to-
be) University, Udaipur
(Rajasthan)

the multifaceted concept of work-life balance, with a particular emphasis on the significance of balancing work-family and work-health dynamics. Recognizing the diverse dimensions and complexities inherent in this phenomenon, this study aims to shed light on the relative importance of addressing both familial obligations and health-related concerns in the pursuit of overall well-being and productivity. The pursuit of work-life balance is not merely a personal endeavor but also holds implications for organizational functioning and societal well-being. As individuals strive to navigate the demands of their professional and personal lives, organizations are increasingly recognizing the importance of cultivating environments that support employees' holistic well-being. From reducing burnout and turnover rates to enhancing job satisfaction and performance, fostering a culture of work-life balance can yield numerous benefits for both employees and employers (Casper et al. (2017); Sirgy and Lee (2018)).

Against this backdrop, this research seeks to contribute to a deeper understanding of the mechanisms underpinning work-life balance, particularly through a comparative analysis of work-family and work-health dynamics. By synthesizing insights from diverse disciplinary perspectives and empirical evidence, this study aims to elucidate the challenges, consequences, and strategies associated with achieving optimal balance across these domains. Through an interdisciplinary lens, this research endeavors to inform organizational policies, practices, and interventions aimed at promoting greater harmony between work-related responsibilities and personal well-being. By addressing the complex interplay between work, family, and health domains, this study aspires to offer practical insights for individuals, organizations, and policymakers seeking to foster environments conducive to flourishing both personally and professionally in the modern workforce.

Theoretical Context and Hypotheses

Achieving a work-life balance (WLB) has long been a central focus in research, yet a universally agreed-upon definition remains elusive, resulting in a plethora of conceptualizations within the literature. Kalliath and Brough (2008) proposed a

definition emphasizing individual perception, asserting that WLB is attained when work and non-work activities align with personal growth and current life priorities. Recent research underscores the positive ramifications of a balanced WLB, including heightened job satisfaction, performance, and organizational commitment, alongside reduced stress-related outcomes such as psychological distress, emotional exhaustion, anxiety, and depression. Despite the growing body of research, a notable bias exists, with studies predominantly focusing on work-family balance to the neglect of other non-work domains. This emphasis has led to an imbalanced understanding of WLB, primarily rooted in the work-family balance paradigm.

Different forms of work-family balance, including conflict and enrichment, have been extensively studied, with a recent shift towards exploring positive enrichment dynamics. However, this emphasis has overshadowed the need for a more comprehensive conceptualization of WLB, one that extends beyond the traditional focus on family roles. As workplace demographics evolve to include a diverse array of workers, including active elderly individuals and those with chronic health conditions, the exclusive focus on family roles is increasingly recognized as inadequate (Graffigna et al., 2015). While some studies have explored work-non-work balance beyond the family domain, they often treat non-work life as a homogenous entity, overlooking the unique dynamics of specific non-work domains. Acknowledging this limitation, Keeney et al. (2013) identified eight non-work domains relevant to WLB, including education, health, leisure, friendships, romantic relationships, family, household management, and community involvement. Notably, health emerged as a significant domain, highlighting the inherent conflict between health management and work activity.

The relevance of health to WLB is underscored by demographic shifts, including a rising prevalence of workers with chronic health conditions and an aging workforce. Furthermore, evolving healthcare paradigms emphasize individual responsibility in health management, necessitating an active role in balancing health needs with work demands. Consequently, the

health domain assumes equal importance to the traditional family domain in shaping individuals' perceptions of WLB (Miglioretti and Gragnano (2016)).

In light of these considerations, the research hypothesize that family remains central to WLB, but the health domain assumes an equally significant role. Therefore, we propose:

H1: Family and Health Domains are more important in work life balance than to other domains of life.

Further, it is also noticeable that work-family conflict, irrespective of its direction, consistently correlates with various outcomes spanning work-related, family-related, and domain-unspecific domains. Notably, research underscores its associations with organizational citizenship behavior, work-related and general stress, burnout, exhaustion, and overall satisfaction in both job and personal life. Of these outcomes, job satisfaction emerges as a focal point in organizational behavior research, representing individuals' contentment or discontentment with their job. Its significance lies in its status as an indicator of well-being, psychological health, and organizational health. Job satisfaction is intricately linked with a myriad of positive organizational behaviors and is predictive of job performance and turnover intentions. The correlation between job satisfaction and work-family balance is a subject of considerable investigation. Meta-analyses, conducted by Amstad et al. (2011), have revealed stronger correlations between job satisfaction and work-to-family conflict compared to family-to-work conflict. Theoretically, an incongruity between personally relevant roles engenders negative emotions, leading to diminished job satisfaction. This notion is grounded in the principle that conflict between roles leads to negative evaluations of the interfering role. Empirical evidence supports the idea that work-to-family conflict exerts a more pronounced impact on job satisfaction than its counterpart. This disparity is attributed to the nature of role interference, wherein family-to-work conflict predominantly affects family satisfaction rather than job satisfaction. Consequently, work-to-family conflict exhibits stronger correlations with work-

related outcomes, while family-to-work conflict is more closely tied to family-related outcomes (Miglioretti et al. (2019)).

On the basis of the aforementioned aspect the research proposes following hypothesis:

H2: There is negative correlation between job satisfaction and the work-to-family and family-to-work conflicts.

Further, despite the recognized significance of health in individuals' lives, this research also discusses its role in the work-life balance, with few studies or dedicated measurement tools available. Gragnano et al. (2017) have introduced the concept of work-health balance (WHB), conceptualized as the state in which individuals effectively manage both their work and health needs. This balance is influenced by the perceived compatibility between work demands and health requirements, as well as the supportiveness of the work environment in addressing health needs. Health needs encompass not only the care requirements of individuals with chronic illnesses but also all elements deemed essential for maintaining overall health (Previtali et al. (2020)). To operationalize the WHB, a questionnaire was developed, measuring three distinct constructs: work-health incompatibility, health climate, and external support. These components respectively gauge the extent to which work obligations hinder health management, the degree of organizational concern for employee health, and the availability of support mechanisms within the workplace.

Research indicates that elderly workers and those with long-standing health problems encounter greater challenges in achieving a favorable WHB. Furthermore, studies show that individuals with a good WHB experience benefits such as reduced presentism, emotional exhaustion, and psychological distress, along with greater work autonomy, engagement, and job satisfaction (Adholiya and Adholiya (2017)). Conversely, those with a poor WHB face increased rates of these adverse outcomes. A harmonious WHB contributes to job satisfaction by ensuring that work obligations do not compromise health management. This assertion aligns with the notion that conflict between personally relevant roles leads to negative evaluations and emotions.

Notably, the impact of WHB on job satisfaction is expected to be distinct from that of work-to-family conflict, as they pertain to different domains of individuals' lives. Given the evolving nature of the workforce, characterized by diverse demographics and a healthcare landscape emphasizing patient empowerment, the WHB is anticipated to wield significant influence on attitudes toward job satisfaction (Winslow (2005); Carstensen (2006)). Building upon aforementioned aspects research propose the following hypotheses:

H3: There is significant effect of work-health balance on the job satisfaction.

Further, heterogeneity of the Labor Force and WLB also have significant apprehension, while the workforce is becoming increasingly diverse, with a rising proportion of women, elderly workers, individuals with long-standing health problems, single workers, and childless couples, the literature on WLB has often overlooked this heterogeneity (Ozbilgin et al., 2011). Central to understanding WLB is recognizing that it is not a fixed concept but rather contingent on individual priorities. Therefore, when assessing the impact of WLB on outcomes such as job satisfaction, it's crucial to consider the significance individuals attach to various non-work roles. Surprisingly, few studies have investigated how individual priorities moderate the relationship between WLB and outcomes, indicative of the limited attention given to workforce diversity within WLB research (Harr et al. (2022); Greenhaus et al. (2021)). This

research work hypothesizes that individual characteristics influencing the importance assigned to family or health domains will also affect the impact of WFB or WHB on job satisfaction. However, findings of researchers in this context were not consistent and indicated significant disparities between genders regarding WFB (McElwain et al., 2015). Nonetheless, research indicates that women tend to place higher importance on family compared to men, which may affect their experience of WFB and its impact on job satisfaction (Weisgram et al. (2011); Cinamon R.G., Rich Y. (2002)). Hypothesis under assessment is:

H4: Work-Family conflicts have higher and negative effect on job satisfaction of women than to men.

Finally, according to socioemotional selectivity theory (SST), individuals adjust their preferences and behaviors based on their perceived future time perspective. Elderly workers, who have a shorter future time perspective, may prioritize family relationships over work. Consequently, the negative impact of work-family conflict on job satisfaction may be more pronounced among elderly workers.

H5: Work-Family conflicts have higher and negative effect on job satisfaction of elderly workers than to younger workers.

Materials and Methods

A. Demographic Distribution

Table 1: Demographic Distribution

| Variable | Count |
|-------------------------------|---------------|
| Mean age (SD) | 38.14 ± 11.59 |
| Gender | |
| Male | 100 (44.25%) |
| Female | 126 (55.75%) |
| Education Level | |
| Lower to Secondary Education | 15 (6.64%) |
| Secondary to Senior Secondary | 120 (53.10%) |
| College or Higher Education | 91 (40.27%) |

| Parental Status | |
|----------------------------|--------------|
| Full Nest | 89 (39.38%) |
| Empty Nest | 137 (60.62%) |
| Marital Status | |
| Married | 171 (75.66%) |
| Single | 55 (24.34%) |
| Job Contract | |
| Open | 150 (66.37%) |
| Fixed | 38 (16.81%) |
| Other | 38 (16.81%) |
| Primary Work Type | |
| Physical | 16 (7.08%) |
| Mental / Intellectual | 181 (80.09%) |
| Both | 29 (12.83%) |
| Job Position / Role | |
| Manager | 7 (3.10%) |
| Supervisor | 29 (12.83%) |
| Executive / Office Roles | 163 (72.12%) |
| Labor / Hard Work Jobs | 17 (7.52%) |
| Other | 8 (3.54%) |
| Work Hours | |
| Full Time | 192 (84.96%) |
| Part Time | 34 (15.04%) |
| Occupation | |
| Executives | 3 (1.33%) |
| Professionals | 26 (11.50%) |
| Associate Professionals | 72 (31.86%) |
| Clerical | 91 (40.27%) |
| Service or Sales | 8 (3.54%) |
| Laborer | 11 (4.87%) |
| Others | 5 (2.21%) |

Source: Primary Data

The dataset provides valuable insights into the demographic composition and occupational characteristics of the sample population, consisting of 226 respondents. Firstly, the average age of the respondents is 38.14 years, with a standard deviation of 11.59, indicating a moderately dispersed age distribution. This suggests that the sample encompasses individuals spanning various life stages, from young professionals to middle-aged workers. The presence of both younger and older respondents may offer a diverse range of perspectives and experiences within the dataset. Secondly, gender diversity is evident within the sample, with 56% of respondents identifying as female. This highlights a substantial representation of women in the workforce under study, suggesting a balanced gender distribution within the sample.

Regarding educational attainment, the majority of respondents (53%) have completed secondary to senior secondary school, while a significant proportion (40%) have obtained a university degree or higher. This indicates a relatively well-educated sample, with a considerable portion of individuals possessing tertiary qualifications. The diversity in educational backgrounds within the sample could influence perspectives on work-life balance and job satisfaction. Family dynamics also play a role, as indicated by parental status. Approximately 42% of respondents report having children, indicating a significant proportion of individuals with family responsibilities. This demographic factor could impact the perceived importance of work-life balance and job satisfaction among respondents, with parents potentially prioritizing family-related aspects in their employment decisions. Marital status data revealed that the majority (76%) of respondents have a partner or can say married, indicating a prevalence of individuals in committed relationships within the sample. This demographic characteristic may influence the level of support and responsibilities outside of work, thereby influencing perceptions of work-life balance and job satisfaction.

In terms of employment contracts, the dataset shows that 66% of respondents have open contracts, suggesting a degree of job stability for the majority of participants. This finding could

influence perceptions of job security and satisfaction among respondents, with those in stable employment potentially experiencing higher levels of job satisfaction. Occupationally, the dataset reveals a predominance of intellectual work activities (80%), indicating a knowledge-based workforce. Additionally, executive / office roles occupations are most prevalent (72%), followed by clerical support roles (40.27%). This distribution reflects the occupational diversity within the sample, with individuals engaged in various roles across different sectors.

B. Measures: The sociodemographic information was collected from the respondents at the outset of the online questionnaire. To assess the importance attached to different life domains in the work-life balance (WLB), respondents were asked to rate on a scale of 1 to 10, with 1 being "not at all important" and 10 being "extremely important," how important it was for them to reconcile work with various aspects of life such as family, health, household management, friendship, training activities, favorite leisure activities, and community involvement. Two forms of the work-life balance were measured: work-family balance and work-health balance. Work-family balance was assessed using the abbreviated version of the work-family conflict measure (Matthews and Barnes-Farrell (2010)), with three items each for work-to-family conflict (WFC) and family-to-work conflict (FWC), rated on a scale of 1 (completely disagree) to 5 (completely agree). Work-health balance was evaluated using the Work-Health Balance Questionnaire (Gragano et al. (2017)), comprising three subscales: work-health incompatibility (WH), health climate (HC), and external support (ES).

Work ability, reflecting one's perceived ability to effectively perform their job considering personal health problems and resources, was assessed using the Work Ability Index (WAI) (Ilmarinen J. (2006)). Job satisfaction was measured using a single item, with respondents rating their overall job satisfaction on a scale from 1 (not at all satisfied) to 5 (fully satisfied) (Dolbier et al. (2004)).

C. Data Analysis: All data analyses were executed through R statistical software. To assess whether the family and health domains held greater significance in the WLB compared to other life

domains, paired t-tests were conducted to compare the mean importance assigned to health and family with that of all other domains. Additionally, a paired t-test was performed to explore potential differences in the perceived importance of family and health. Further, to examine the relationships between work-to-family conflict, family-to-work conflict, work-health balance, and job satisfaction, multiple linear regression analyses were conducted, with job satisfaction as the dependent variable and the aforementioned variables as independent predictors.

domains through mean, standard deviation and Paired T-Test.

From the statistics presented in above Table it could interpret that among all the life domains highest consideration was given to the family (9.45 ± 1.29) followed by health (8.76 ± 1.21). This confirms that health and family among all the life domains are more considerable for the respondents. Third highest significance by the respondents was given to friendship (8.11 ± 1.63). In present time least consideration is given to the community involvement (6.23 ± 1.91). The wider

Table 2: Mean, Standard Deviation and Paired T-Test Statistics of Life Domains

| Life Domains | Mean | Standard Deviation | T-Stats |
|-----------------------|------|--------------------|---|
| Health | 8.76 | 1.21 | 6.98 ± 1.22 t = 23.876; p < 0.001 |
| Family | 9.45 | 1.29 | |
| Friendship | 8.11 | 1.63 | |
| Leisure Activities | 7.99 | 1.77 | |
| Training Activities | 7.65 | 1.82 | |
| Household Management | 7.72 | 1.66 | |
| Community Involvement | 6.23 | 1.91 | |

Source: Primary Data

Control variables including age, marital status, and parental status were included in the regression models. Lastly, hypotheses regarding the moderation of relationships between work-family balance and/or WHB with job satisfaction by individual characteristics (age, gender, parental status, and work ability) were tested using interaction effects, with continuous variables centered on the mean.

D. Results:

This section will present the significance of the life

standard deviation values have presented greater variability in the responses of the respondents. Further, while comparing the mean scores of the respondents for health and family domains (9.66 ± 1.02) and ascribed with other domains of life (6.98 ± 1.22) a significant difference was observed ($t(217) = 23.876$; sig. <0.001). Hence, it could conclude that for the individual respondents, health and family domains are more important than to the other life domains listed in the above Table 2. Therefore, hypothesis H1: "Family and Health Domains are more important in work life balance than to other domains of life" is accepted.

Table 3: Effect of WFB and WHB on Job Satisfaction

| Variable | T | Beta | Variance |
|----------|----------|--------|----------|
| W2FC | -2.50 * | - 0.17 | 0.09 |
| F2WC | - 2.16 * | - 0.06 | 0.03 |
| WHB | 7.25 *** | 0.41 | 0.18 |
| Age | -2.49 | - | - |

Source: Primary Data (***) = p < 0.001; * = p < 0.05)

The statistics in above table revealed a significant negative association between work-to-family conflict (W2FC) and job satisfaction. Further, family-to-work conflict (F2WC) also have showed significant negative effect. The variance for W2FC (0.03) was notably higher than that of F2WC (0.03). Hence, H02: "There is negative correlation between job satisfaction and the work-to-family and family-to-work conflicts" is accepted. Moreover, the WHB also exhibited significant positive effect on job satisfaction, which confirms the acceptance of hypothesis H03: "There is

satisfaction. The statistics in above table revealed a significant negative association between work-to-family conflict (W2FC) and job satisfaction (-5.21***), followed with a significant negative association between work-to-family conflict (W2FC) and gender (-4.14***) was noticed which confirms that the effect of W2FC on the satisfaction for job is higher among women in comparison to men. This confirms that H04: "Work-Family conflicts have higher and negative effect on job satisfaction of women than to men" is accepted. Further it was also noticeable that a significant positive association between F2WC and job

Table 4: Effect of W2FC and F2WC on Job Satisfaction

| Variable | T | Beta | Variance |
|----------------------------|----------|-------|----------|
| W2FC | -5.21*** | -0.42 | 0.08 |
| F2WC | 2.40* | 0.24 | 0.1 |
| WHB | 7.5** | 0.29 | 0.04 |
| Gender ¹ | 2.49** | 0.82 | 0.33 |
| W2FC * Gender ¹ | 4.14*** | 0.38 | 0.09 |
| F2WC * Gender ¹ | 1.64 | 0.18 | 0.11 |
| Age | -2.52** | -0.01 | 0.005 |

Source: Primary Data (** = $p < 0.01$; * = $p < 0.05$) (Gender - female considered as moderator)

significant effect of work-health balance on the job satisfaction". Additionally, the variance explained by the WHB (0.18) surpassed that of work-to-family conflict (0.09). Table 3 displays the outcomes of assessing the moderating influences of gender on the association between work-to-family conflict, family-to-work conflict, and job

satisfaction (2.40*) was noticed followed with the insignificant positive association between F2WC and gender (1.64) was noticed which confirms that the effect of F2WC on the satisfaction for job is higher but positive among women in comparison to men. Further, it was also noticed that Work-health balance (WHB) has significant (7.5**) effect on respondents' job satisfaction.

Table 5: Effect of W2FC and F2WC on Job Satisfaction

| Variable | T | Beta | Variance |
|-------------------------|----------|-------|----------|
| W2FC | -3.68*** | -0.22 | 0.07 |
| F2WC | 1.45 | 0.11 | 0.08 |
| WHB | 5.65*** | 0.28 | 0.05 |
| Age ¹ | -4.45*** | -0.04 | 0.008 |
| W2FC * Age ¹ | -3.33*** | -0.02 | 0.006 |
| F2WC * Age ¹ | 2.67** | 0.02 | 0.007 |

Source: Primary Data (** = $p < 0.01$; * = $p < 0.05$) (Age is the moderator variable)

Table 5 have displayed the findings of assessing the impact of age as moderators on the relationship between work-to-family conflict, family-to-work conflict, and job satisfaction. Table 5 have revealed a significant interaction between age and both work-to-family conflicts (W2FC) (-3.33***) and family-to-work conflicts (F2WC) (2.67**). The interactions indicated that the negative influence of W2FC on job satisfaction increased with age, while F2WC conflict had a slightly positive effect on job satisfaction among older individuals. These results partially supported hypothesis H05 for work-to-family conflict but unexpectedly suggested a positive effect of family-to-work conflict on job satisfaction among older workers. But in totality hypothesis H05: "Work-Family conflicts have higher and negative effect on job satisfaction of elderly workers than to younger workers" is accepted. Further, it was also noticed that Work-health balance (WHB) has significant (5.65***) effect on respondents' job satisfaction.

Discussion

The discussion of this study aimed to examine the significance of various non-work domains, particularly family and health, in the work-life balance (WLB) process. Firstly, the findings supported the notion that workers prioritize health and family domains over other non-work domains in their WLB considerations. The study revealed that these domains were equally important, suggesting that health holds significant relevance in addition to family, emphasizing the importance of integrating the health domain into discussions of WLB. Notably, the results indicated that health was as crucial as family in the WLB process, even among workers not necessarily facing severe health issues. Further, the study confirmed that work-to-family conflict has a more pronounced negative effect on job satisfaction compared to family-to-work conflict. The study also highlighted the importance of considering the work-health balance alongside the work-family balance, as the former demonstrated a significant positive relationship with job satisfaction, surpassing the impact of work-to-family conflict.

The analysis of moderators revealed that the

effects of work-to-family conflict were more pronounced among women, and older workers. This suggests that individuals with higher salience of family responsibilities may be more susceptible to the negative effects of work-to-family conflict on job satisfaction. However, the influence of family-to-work conflict was only significant among older workers, indicating a nuanced relationship that warrants further exploration. Overall, the results underscore the importance of considering individual differences and the specificity of different worker groups in discussions of WLB. The findings highlight the need for organizations to recognize and address the diverse needs of their workforce, particularly concerning family and health-related concerns. However, the study's limitations, including its cross-sectional design and sample characteristics, caution against overgeneralization of the results, emphasizing the need for further longitudinal research to confirm these findings. Additionally, future studies should explore the role of other potential moderators and employ more representative samples to enhance the generalizability of the findings.

Conclusion

In conclusion, this study sheds light on the evolving significance of health within organizational configuration, emphasizing its centrality beyond niche groups. The changing landscape of the labor force and employee roles in the institutional system has blurred the lines between health management and work, highlighting health as a crucial component of achieving a balanced work-life dynamic. Our findings underscore the notion that workers recognize the importance of the health domain alongside the family domain in achieving work-life balance, if not surpassing it. Furthermore, our study highlights the nuanced impact of work-family balance and work-health balance on job satisfaction across different categories of workers, emphasizing the importance of individual differences in the work-life balance equation. It suggests that the balance between work and life is contingent upon the varying importance placed on different life domains by individuals, underscoring the significance of acknowledging these differences

within today's diverse labor force.

Moving forward, replication of these findings and further exploration of individual differences in work-life balance dynamics will be vital for enhancing our understanding and implementation of effective strategies to support worker well-being and organizational success.

References

- Adholiya, A., Adholiya, S. (2017). Work life balance study of working women on Udaipur District, Pacific University Journal of Social Sciences, 2, 1.
- Amstad F.T., Meier L.L., Fasel U., Elfering A., Semmer N.K. (2011). A meta-analysis of work-family conflict and various outcomes with a special emphasis on cross-domain versus matching-domain relations. *J. Occup. Health Psychol*, 16, 151-169. doi: 10.1037/a0022170.
- Carstensen L.L. (2006). The influence of a sense of time on human development. *Science*, 312, 1913-1915. doi: 10.1126/science.1127488.
- Casper W.J., Vaziri H., Wayne J.H., DeHauw S., Greenhaus J. (2017). The jingle-jangle of work-nonwork balance: A comprehensive and meta-analytic review of its meaning and measurement. *J. Appl. Psychol.*, 103, 182-214. doi: 10.1037/apl0000259.
- Cinamon R.G., Rich Y. (2002). Gender differences in the importance of work and family roles: Implications for work-family conflict. *Sex Roles*, 47, 531-541. doi: 10.1023/A:1022021804846.
- Dolbier C.L., Webster J.A., McCalister K.T., Mallon M.W., Steinhardt M.A. (2004). Reliability and validity of a single-item measure of job satisfaction. *Am. J. Health Promot.*, 19, 194-198. doi: 10.4278/0890-1171-19.3.194.
- Graffigna G., Barello S., Bonanomi A., Lozza E. (2015). Measuring patient engagement: development and psychometric properties of the Patient Health Engagement (PHE) Scale. *Front. Psychol.*, 6, 274. doi: 10.3389/fpsyg.2015.00274.
- Gagnano A., Miglioretti M., Frings-Dresen M.H.W., de Boer A.G.E.M. (2017). Adjustment between work demands and health needs: Development of the work-health balance questionnaire. *Rehabil. Psychol*, 62, 374-386. doi: 10.1037/rep0000121.
- Greenhaus J.H., Collins K.M., Shaw J.D. (2021). The relation between work-family balance and quality of life. *J. Vocat. Behav.*, 63, 510-531. doi: 10.1016/S0001-8791(02)00042-8.
- Haar J.M., Russo M., Suñe A., Ollier-Malaterre A. (2022). Outcomes of work-life balance on job satisfaction, life satisfaction and mental health: A study across seven cultures. *J. Vocat. Behav.*, 85, 361-373. doi: 10.1016/j.jvb.2014.08.010.
- Ilmarinen J. (2006). The Work Ability Index (WAI) *Occup. Med. (Chic. Ill.)*, 57, 160. doi: 10.1093/occmed/kqm008.
- Kalliath T., Brough P. (2008). Work-life balance: A review of the meaning of the balance construct. *J. Manag. Organ.*, 14, 323-327.
- Keeney J., Boyd E.M., Sinha R., Westring A.F., Ryan A.M. (2013). From "work-family" to "work-life": Broadening our conceptualization and measurement. *J. Vocat. Behav.*, 82, 221-237. doi: 10.1016/j.jvb.2013.01.005.
- Matthews R.A., Barnes-Farrell J.L. (2010). Development and initial evaluation of an enhanced measure of boundary flexibility for the work and family domains. *J. Occup. Health Psychol.*, 15, 330-346. doi: 10.1037/a0019302.
- McElwain A.K., Korabik K., Rosin H.M. (2015). An examination of gender differences in work-family conflict. *Canadian Journal of Behavioural Science*, 37, 283-298. doi: 10.1037/h0087263.
- Miglioretti M., Gagnano A. (2016). Subjective well-being and health in organizations.

- Psicol. Della Salut., 1, 44-48. doi: 10.3280/PDS2016-001006.
- Miglioretti M., Previtali F., Manzi C., Gagnano A. (2019). The usefulness of Work-Health Balance in older workers and in workers with longstanding health problem or disability; Proceedings of the 19th European Association of Work and Organizational Psychology (EAWOP) Congress; Turin, Italy. 29 May-1 June 2019.
- Ozbilgin M.F., Beaugard T.A., Tatli A., Bell M.P. (2011). Work-life, diversity and intersectionality: A critical review and research agenda. *Int. J. Manag. Rev.*, 13, 177-198. doi: 10.1111/j.1468-2370.2010.00291.x.
- Previtali F., Torp S., Miglioretti M. (2020). Searching for the balance: Health needs and well-being at work in Italy and Norway. In: Di Fabio A.M., editor. *Positive Psychology for Healthy Organizations*. Nova Publisher; New York, NY, USA, 235-266.
- Sirgy M.J., Lee D.J. (2018). Work-life balance: An integrative review. *Appl. Res. Qual. Life.*, 13, 229-254. doi: 10.1007/s11482-017-9509-8.
- Weisgram E.S., Dinella L.M., Fulcher M. (2011). The role of masculinity/femininity, values, and occupational value affordances in shaping young men's and women's occupational choices. *Sex Roles.*, 65, 243-258. doi: 10.1007/s11199-011-9998-0.
- Winslow S. (2005). Work-family conflict, gender, and parenthood, 1977-1997. *J. Fam. Issues.*, 26, 727-755. doi: 10.1177/0192513X05277522.