



**ADDIS ABABA UNIVERSITY SCHOOL OF COMMERCE
DEPARTMENT OF HUMAN RESOURCE MANAGEMENT GRADUATE
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**THE EFFECT OF WORK LIFE BALANCE ON EMPLOYEE RETENTION
IN SELECTED PUBLIC HEALTH INSTITUTIONS**

**A Thesis Submitted in Partial Fulfillment for the Degree of Master
(M.A) in Human Resource Management**

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Selected Public Health Institutions**

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**A Thesis Submitted to Department of HRM in Partial Fulfillment of
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This is to certify that a thesis prepared by Tegegn Assefa entitled the effect of work life balance on employee retention in selected public health institutions is submitted in partial fulfillment for the Degree of Master in Human Resource Management complies with the regulation of the University and meets the accepted standard with respect to originality and quality.

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LIST OF ACRONYMS/ABBREVIATIONS

AAHB	Addis Ababa Health Bureau
ERTN	Employee Retention
FWA.....	Flexible Work Arrangement
FSC	Family Supportive Culture
HR	Human Resource
HRM	Human Resource Management
HO.....	Health Officer
UNDP.....	United Nations Human Development Report
UNECA	United Nations Human Development Report
WHO	World Health Organization
WLB.....	Work Life Balance
WLBP.....	Work Life Balance Policies

ABSTRACT

The major challenge by most of the organization today is not only managing their workforce but also retaining them. It is therefore imperative for organizations to institute appropriate measures to retain adroit employees. Effectual HRM practices can help organizations to retain their valued employees. Work-life balance is one of the factors as it has become an increasingly important for retaining employees. It is a widely accepted fact that Africa, where Ethiopia is a part, retention of skilled employees has been of serious concern to managers in the face of ever increasing high rate of employee turnover. The health sector in Ethiopia particularly suffers the risk of employee turnover. This study examined the effects of work life balance on employees' retention in selected public health institutions under AAHB, Ethiopia. The study followed a concurrent mixed approach by combining both descriptive and explanatory design. It was carried out in 2 out of the 6 public hospitals under AAHB. A referral (Menilik II) and one general (Yekatit 12) hospitals were included in the sample. Purposive sampling was used to select a sample size of 145 health professionals' employees from both hospitals. In this study structured questionnaire both close and open-ended were used to collect data from the respondents. Descriptive statistical and qualitative techniques were used to analyze the data. The method analysis used to analyze the data includes correlation and regression analysis. The findings of this study highlight the fact that work life balance is significantly related with employee retention and indeed affects employee retention in public health institution. The results of this study may contribute to health sector especially for hospitals in Addis Ababa by preparing them for successful employee retention strategies while simultaneously positioning health professionals to attain optimum balance between work and life responsibilities.

Keywords: *Work life balance; employee retention; work life balance policies; flexible work arrangement; family supportive culture*

CHAPTER ONE

INTRODUCTION

1.1 Background of the Study

Human Resource is the most important asset for any organization and it is the source of achieving competitive advantage. Without having adequate human resource, any organization will be unable to achieve its established goals and objectives; hence managing human resource is the key role of success for any organization. Even if organizations are endowed with advanced technology and artificial intelligence which substitute human labor, they will still need Human Resource to run the technology. Therefore, securing and retention of skilled workforce plays a vital role for any organization since the knowledge and skills of the employees are central to the institution's ability to be competitive and achieve their various goals (Jehanzeb, K., Rasheed, A., & Rasheed, M. F. (2013)).

In an era where skills and knowledge of employees are amongst the main competitive enablers, organizations cannot ignore the significance of attracting and retaining talented people (Minchington, 2010). However, the major challenge for most organizations is not only managing their work force but also retaining them. Thus, employee retention is one of the most critical issues facing organizational managers as a result of the shortage of skilled manpower, economic growth and high employee turnover (Michael, 2008). Minchington, (2010) defined retention as the converse of turnover i.e. voluntary and/or involuntary. Retention activities may be defined as a sum of all those activities aimed at continuation, holding, maintaining, preventing from leaving, and securing employees in an organization (Yamamoto, 2011).

Retention and turnover are two sides of a coin. The factors leading to employee retention are the opposite of the factors on turnover. This demonstrates the importance of employee retention and turnover in an organization. If an employee is happy about their organization their tendency to stay becomes higher, allowing the organization to achieve competitive advantage. However, Employee turnover is a major problem for an organization because it costs a lot on employee turnover (Lucas et al., 1987; Soon et al., 2005). Organizations failing to retain high performers

will be left with an understaffed, less qualified workforce that ultimately hinders their ability to remain competitive (Rappaport et al., 2003). Therefore, worldwide, retention of skilled employees has been of serious concern for organizations in the face of ever increasing high rate of employee turnover (Samuel & Chipunza, 2009). Globally, managers admit that one of the most difficult aspects of their jobs is the retention of key employees in their organizations (Litheko, 2008).

The issue of retention was not simply losing a key member of your organization; there is also the hassle-and cost-of replacement. It is obvious that employee's retention is one of the most pressing issues that Human Resource Professionals face today. This problem becomes critical when the employee is unable to maintain the balance between work and life. The concept of work-life balance does not imply achieving some impossible definition of the perfect life. Instead, it means perceiving that employee have achieved a realistic, personally satisfying balance among the different main factors in their life, namely family, work, and leisure (Amram, 2004). Similarly, Vikas Shrotriya (2009) stated that work life balance entails attaining equilibrium between professional work and other activities, so that it reduces friction between official and domestic/personal life and thus enhances efficiency and productivity of employees with increase in commitment and contentment.

The strength of any nation depends to a large extend on its productivity which in turn depends on the well-being of the population (Misau, Al-Sadat & Gerei, 2010). Health workers are vitally important for the effective functioning of healthcare systems (Ndetei, Khasakhala & Omolo, 2008). Health care is one of the sectors highly affected by turnover. And an inadequate health workforce (with a high population-to-health worker ratio) contributes to the general deterioration of health indicators (Dolvo, 2003). Studies show that loss of clinical staff from low and middle-income countries is crippling already fragile health care systems (Blaauw & Ditlopo, 2008). Health worker retention is critical for health system performance and a key problem is how best to motivate and retain health workers (ibid).

Despite the efforts of the Ethiopian government had trained and deployed health officers between 2005 and 2010, the shortage of and migration by high-level health workers has significantly compromised the health care delivery system, especially at higher delivery points.

In addition even though various endeavors have been made at national level to increase the number of physicians in the country, what has been gained during five years (2005-2010) has also been lost.

Retention has been a major issue compounding this acute deficit, with up to one-quarter of doctors (as measured over the first 50 years of medical education in Ethiopia) leaving the profession or the country (Jim Campbell & Dykki Settle,2009). There is a substantial brain drain, especially of doctors (in the range of 15–30 per cent, and around 20 per cent for nurses). This has in turn affected the health system in many ways, including service delivery and recruitment cost (AHWO, 2010).

Recent studies argue that it is more important to identify the organizational characteristics that make people stay with their organizations than to constantly identify the organizational characteristics that make them leave. Cascio (2003) describes retention as initiatives taken by management to keep employees from leaving the organization, such as rewarding employees for performing their jobs effectively; ensuring harmonious working relations between employees and managers; and maintaining a safe, healthy work environment.

Several factors that situated on both organizational and employee levels have an influence on retention have been identified by previous research (Kyndt, E., Dochy, F., Michielsen, M. & Moeyaert, B., 2009). Hytter (2007) demonstrated that workplace factors such as rewards, leadership style, career opportunities, training and development of skills, physical working conditions, and work-life balance, have an influence on retention. The high cost that comes with turnover has highlighted the need for organizations to make retention of staff their number one priority. This is not only the case in medical field but also applies to other careers and industries where shortage of skilled staff is experienced (ibid)

Work-life balance is one of the main factors that have become increasingly recognized as an important factor for retaining staffs or workers. Work-life balance is described as the ability of employees to meet their work and family commitments as well as other non-work responsibilities and activities (Parkers & Langford, 2008). The balance between work and other life domains means that some workers will sacrifice some degree of their work-life to allow

more time for other areas of life. Employees will feel more attached to the organization as they get a lot of autonomy for both work and family. Employees regard work-life balance policies as organizational care and positively influence employees' psychological attachment to their organizations (Döckel, 2003). Hence, work life balance as any other human resource policy- can be seen as a main challenge for organizational leaders, while also as a source of competitive advantage (Mc Carthy.A (2008).

Traditionally, Work-life balance has been defined in the framework of organization as what organizations do for the individuals (organizational approach). Joshi et al (2002), however, emphasize that work-life balance is a two dimensional approach i.e. organizational approach and individual approach. The second dimension (i.e. individual approach) gives emphasis to what individuals want for themselves. Clarke, Koch, & Hill, (2004) state that Work and Life Balance Management could be achieved if policies related to Organizational Work Balance Dimensions and Individual/Personal Life Balance Dimensions are present in the organization.

In a holistic sense, work-life balance is the match that a person achieves in multiple facets of life. As the name indicates, Work-Life Balance is to achieve a level of equilibrium, symmetry or stability which thus creates harmony and synchronization in a person's overall life. However, Work Life Conflict phenomenon exists when the pressures from one role makes it difficult to comply with the demands of the other. This means that if employees feel that they are not able to manage a good mix and integration of work and non-work roles, then they may experience negative or conflicting outcomes (Frone, Yardley& Markel, 1997). This implies a bi-directional relationship where work can interfere with non-work responsibilities and vice versa (Frone & Carlson, 1999). Employees who experience increased stress due to work life conflict and decreased perceptions of control over their work and non-work demands are less productive, less committed to, and satisfied with, their organization and more likely to be absent or leave the organization (Frye & Breaugh, 2004).

Work-life balance is a function of both individual and organizational actions. From an organizational perspective, work-life balance may be a part of good performance, and from an employee perspective work-life balance programs may be a positive factor in deciding to work for or remain with a particular organization (Mayerhofer et al., 2011). Research has suggested

that organizational work-life benefits and a supportive work climate are linked positively to employee well-being and retention (Allen, 2001). For companies expecting to attract and retain highly motivated and committed personnel, work-life balance can also help to retain skillful employees in the organization (Huselid, 1995), and achieving a higher return on investment (Yamamoto & Matsura, 2012).

Despite the popularity of work-life balance, research on the organizational effects of such practices is not well integrated. Competing demands between work and home have assumed increased relevance for employees in recent years, due in large part to demographic and workplace changes such as rising numbers of women in the labor force, an ageing population, longer working hours and more sophisticated communications technology enabling near constant contact with the workplace (Kersley et al., 2005, 2007). In response to these changes and the conflict they generate among the multiple roles that individuals occupy, organizations are increasingly pressured to implement work practices intended to facilitate employees' efforts to fulfill both their employment-related and their personal responsibilities (Rapoport, Bailyn, Fletcher, & Pruitt, 2002).

In this context, the effect of work-life balance practices on the retention of staff is worth consideration. Hence, this study attempts to examine and analyze the effects of work life balance practices on employee retention in public health care institutions to provide a better insight into the WLB that lead employees to stay in the organization as well as the factors that lead employees to leave the organization. The study also intends to contribute to human resource literature, which stands as one of the biggest challenges organizations must cope with.

1.2 Statement of the Problem

Retaining efficient and experienced workers in health institutions is very essential in the overall performance of the institution. Today, however, retention of valuable employees is a global challenge. There is a wealth of evidence that worldwide, retention of skilled employees has been of serious concern to managers in the face of ever increasing high rate of employee turnover (Armstrong 2010).

The increasing movement of staff has thus become a problem which is worth consideration because turnover effects can have direct and indirect costs and loss of capital, which may impact on the organizational success (Dess & Shaw, 2001). Such costs include repetitive recruitment, selection and training of new employees and also product or service quality problems. Thus, the challenge of retaining such critical employees causes poor service delivery in hospitals and even medical students enrolled in such areas may lack guidance in their studies, which in turn incapacitates building of future intellectual capacity (Oni, 2000). Like other countries with limited resources, Ethiopia has been suffering from an HRH crisis (African Health workforce Observatory, 2010). Medical staffs are moving from one hospital to another, from one county hospital to another and some are even moving out to work in other countries(ibid).

It is a widely accepted fact that Africa, where Ethiopia is a part, takes the largest burden of most of the diseases in the world and contrary to this Africa has the smallest share of health workers compared to its population. The same is true with Ethiopia whereby the number of health workers has been extremely limited for many years, with estimated 100–200 medical doctors and 25–30 midwives deployed annually. In addition to the prevailing low rate of physicians per population, the problem is further compounded by inequitable geographic distribution of these physicians (FMOH, 2010).

Shortage of staff in Ethiopia has always been critical. Health worker/population ratios, for example are 3 to 4 times lower than even East African standards (Girma et al. 2008). On the other hand, Odumasi (2003) stated that over the past 10-15 years, about 50% of Ethiopians who went abroad for training did not return after completing their studies. Furthermore, anIOM report (cited in Odumasi, 2003) shows that Ethiopia lost about 74.6% of its human capital from various institutions between 1980 and1991. The problem of brain drain has reached quite disturbing proportions in certain African countries, with Ethiopia ranked as first in the continent in terms of rate of loss of human capital, followed by Nigeria and Ghana (Mutume, 2003).And in the last fifty years, one third of Ethiopian medical doctors have left the country. In this regard, the literature also shows that brain drain of medical professionals is threatening the very existence of the country's health service (ibid).

However, there is continuous change in the organizations as well as individuals' life. The challenge of work-life balance is rising to the top of many employees and employers consciousness as a result of societal changes, new communications technologies, lifestyle changes and a move to a more 24 hour global culture that requires flexible working practices to name a few. These changes create work-life conflicts that have implication for both employee and organization because work life conflict spillover creates disturbance in both domains (work and family). So if family and work life of an employee is disturbed or he has conflicting roles to be performed, then ultimate performance of the employee and organization is affected (Breugh & Frye, 2007). Meeting all these changes is difficult for both employees and organizations, so there are increasing issues for both employees and organizations as they have to reconcile these matters.

Most persistent work related challenges in healthcare is the extremely high level of employee work life imbalance that resulted in stress, burnout and turnover. The consequences for employees who are faced with many demands at the same time are seen too often resulting in those employees being lacking in concentration or suffering from ill-health” (Torun, 2004:2). Work life imbalance has also been shown to be connected to employees suffering from depression, rigidity, and lack of spare time to meet personal and family needs that increases stress levels in individuals, reducing disposition, affecting creativity at work and hampering concentration. The more conflict that arises between work and personal life, the more employees will struggle maintaining a balance and, therefore, eventually quit their jobs. This also holds true for medical professional staff without care-giving duties. Regardless, the consequences could be costly to organizations who neglect such practices.

In this sense, work-life balance policies are helpful to get rid of individual stress, increase retention and productivity as well as reduce turnover of employees. However, most of the work practices studied is often not directly designed to deal with these problems, and the effects of WLB are often neglected. As a result, research on this area has a number of empirical and theoretical limitations. Moreover, the overwhelming number of these studies has been done in western countries, and conducted outside the healthcare setting, especially as it pertains to the

linkage between WLB and employee retention. So this issue is of great importance for both medical professional employees and health sector as a whole.

As has been detailed above, studies have been conducted on the effects of WLB in other countries mostly western countries. The majority of those researches conducted on the effects of WLB have focused on work-family conflicts and their effects on individuals' wellbeing, but only a handful of researches have been done on work life balance from an organizational dimension in public sector. Moreover, there seems to be insufficient research, if any, conducted on work life balance and its effects on employees' retention in Ethiopian public health institutions.

In an effort to address these limitations, this paper examines the effects of WLB practices in 2 selected public hospitals under AAHB on employee retention. In doing so, this study seeks to extend existing research in a number of ways by focuses on a set of practices that has not received much attention in the healthcare setting. Hence, this study aims to bridge this gap in the Ethiopian context. Furthermore, this study tries to expand existing knowledge on the effects of work life balance on employee retention from an organization perspective as opposed to the mainstream focus on work- family conflicts and their effects on individuals' wellbeing.

1.3 Research Questions

To meet the objectives, this study sought to answer the following research questions; the following research questions will be answered.

1. What does work life balance in public health sector look like?
2. What is the level of employee retention in public health institutions?
3. What is the relationship between work life balance and employee retention?
4. What are the effects of WLB practices on retention of employees in public health institutions?

1.4 Objectives of the Study

The general objective is to assess the effect of work life balance on employees' retention in selected public health institutions in Ethiopia.

Specifically the study sought:

- i. To identify the role of work life balance in public health sector.
- ii. To identify the level of employee retention in selected public health institutions
- iii. To find out the relationship between work life balance and employee retention in public health institutions
- iv. To analyze the effects of work life balance on employee retention in public health institutions

1.5 Significance of the Study

The strength of any nation depends to a large extent on its productivity which in turn depends on the well-being of the population. Universal health coverage depends on having the necessary human resources to deliver health care services (Kiambati, Kio&Toweett, 2013). Together with the above mentioned facts when there is no effective human resource retention system in the health institutions, one can imagine the level of crises the country may face in relation to health workers. The findings of this study will therefore be significant to provide insight in to the practices of work life balance and its effect on employee's retention.

The research also aims at providing information and guidance to the employer (government) on the effect of HR practices on the retention of health care professionals. As a result, the employer will understand the effects of work life balance practices on retention of employees hence be in a position to use practices that will balance work and employees life hence retention. Thus this study provides an understanding of work life balance factors that affect the retention of health workers, in order to provide a basis for developing effective HR retention polices in public heath institutions that can contribute to retention hence progress towards universal health care coverage.

The findings of the study also act as a yardstick against which the governments as employers can gauge themselves on their provision of conducive conditions that enhance employees work life balances hence retention. Finally, this research paper can be useful for researcher and other readers who would like to know about effects of HRM practices on employee retention for future research and the recommendation will be given to implement accordingly.

1.6 Scope of the study

This study has been carried out in selected public health institutions in Addis Ababa city, in Ethiopia. The choice of these public Hospitals as cases is justified because they are considered to represent Public health institutions in the country. The study is only limited to health professionals and other technical people such as doctors, clinical officers, nurses, pharmacists, lab technicians and radiologists who are directly concerned with provision of health care. It does not cover the support staff at the hospitals for they are not directly involved in the provision of medical care. The HR practices that influence retention of employees in organization are many and varied such as remuneration, supervisor support, recognition, feedback and support, communication, leadership, job design, career advancement, organizational climate, work-life balance, nature of work among others.

Even thou work-life balance has three main dimensions (i.e individual, societal and organizational) this study is limited to the study of the effect of work life balance practices from organizational dimension since literature shows that it is this factorthat seems to mainly influence staff retention in organizations.

1.7 Limitations of the Study

As has been indicated in the previous section, this study is limited to the technical health care staff in public hospitals in Addis Abeba from where a sample has been drawn. Although there are many HRM practices that affect employee retention, this research limits itself only to work life balance. This might constrain the production of a comprehensive perspective with regards to the entire issue at hand.

Similarly, it is impossible to cover the whole public sectors in Addis Abeba because of time constraints. Therefore, it will not give the full picture of the effects of HRM practices in the public sector. Moreover, since little research has been done in this area, it mainly depends on primary data and secondary office documents which might be helpful in producing original findings but is problematic because of time and resource limitations.

1.8 Organization of the paper

The research paper is organized in five chapters. The first chapter i.e. the proposal gives the background information, stipulates the statement of the problem, sets out the relevance and justification, objectives and research questions, the scope of the study, the definitions of key terms, the organization of the entire paper and its limitations. Chapter 2 discusses the key concepts and empirical review of WLB research that are used in the paper to place the problem in a broader perspective of literature. Chapter 3 explains and justifies the methodology of the study. And the fourth chapter presents and discusses the findings of the study. Finally, chapter 5 summarizes the main findings, give conclusion and recommendations.

1.9 Definitions of terms

Employee Retention - is a voluntary move by an organization to create an environment which engages employees for long term (Chaminade, 2007).

Turnover - is viewed as a voluntary separation of an individual from an organization.

Work life balance - perceiving that employee have achieved a realistic, personally satisfying balance among the different main factors in their life, namely family, work, and leisure (Amram, 2004).

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

The term literature refers to the works the researcher consulted in order to understand and investigate the research problem. A literature review therefore is an account of what has been published on a topic by accredited scholars and researchers (Kombo& Tromp, 2006). Therefore the study presents a review of literature based on the research topic and the study objectives. This chapter therefore, provides literature review of the study discussing the concepts and empirical review of work-life balance, and employee retention. The chapter begins with section (2.1) the concept of work life balance along with definitions and followed by section (2.2) of employee retention. Section (2.3) explains the link between work-life practices and employee retention. Section (2.4) presents empirical review of WLB and its dimensions such as such WLB policies, flexible work arrangement, and family supportive culture. Finally, conceptual framework of the study is presented.

2.2 Work Life Balance

In the last few decades, there has been a dramatic increase in the amount of research devoted to understanding the linkages between work and family and/or personal life. The term ‘Work-life Balance’ was first coined in 1986 in reaction to the unhealthy choices that many Americans were making in favor of the work place, as they opted to neglect family, friends and leisure activities in the pursuit of corporate / work goals. A balanced life is one where we spread our energy and effort - emotional, intellectual, imaginative, spiritual and physical – between key areas of importance. The neglect of one or more areas, or anchor points, may threaten the vitality of the whole (Aravid S. Kumar et al, 2011).

Work-life balance is a term used in both the research and the popular literature to conceptualize the idea of balance in individuals’ lives. The concept of work-life balance does not imply achieving some impossible definition of the perfect life. Instead, it means perceiving that

employee have achieved a realistic, personally satisfying balance among the different main factors in their life, namely family, work, and leisure (Amram, 2004). Work Life Balance Practices are those institutionalized structural and procedural arrangements as well as formal and informal practices that enable individuals to easily manage the conflicting worlds of work and family leaves (Osterman, 1995). Vikas Shrotriya (2009) stated that work life balance entails attaining equilibrium between professional work and other activities, so that it reduces friction between official and domestic/personal life and thus enhances efficiency and productivity of employees with increase in commitment and contentment. Similarly, Dockel (2003) define Work–life balance as perceiving a satisfactory balance between one’s personal life and work schedule, and minimal conflict between the multiple roles one has to fulfill in terms of one’s personal and work lives.

WLB initiatives include a wide range of individual practices or bundles of practices that are intended to provide employees with greater control and the ability to integrate work and family responsibilities. Furthermore, there is a great deal of variation in the specific practices adopted across different organizational and industry settings. Nevertheless, the dominant types of policies associated with work-life balance are family leave, flexible work-time, childcare support (such as subsidies or on-site childcare), compressed working weeks, telecommuting and job-sharing (Glass and Estes, 1997). It is also important to note that organizations have been shown to vary with regards to their strategic objective guiding the adoption of WLB practices, a source of variation in associated outcomes (for a discussion of different underlying motivations for the adoption of WLB practices see Dex and Scheibl, 2001; for distinction between employee friendly and employer friendly flexible practices, see Fleetwood, 2007).

Interest in the ability of WLB practices to deliver positive gains to both employees and their organizations has been increasingly growing (Gregory and Milner, 2009; Dex and Scheibl, 2001; Osterman, 1995). WLB scholars have tended to focus on a set or bundle of workplace practices associated with “family friendliness” or “work-life balance” (see for example Batt and Valcour, 2003; Dex and Scheibl, 2001). Early WLB bundles were primarily designed to accommodate the needs of working parents, but have more recently evolved to also focus on more general flexibility and stress-reduction for all employees (Fleetwood, 2007). Thus, in addition to

reducing work family conflict, these organizational practices are also designed to reduce stress, turnover and burnout, increase employee satisfaction, and lead to improved organizational performance.

Current studies from diverse professions have shown the positive and negative results of work-life balance and imbalance. The work-life balance positive result is related to employee's job satisfaction, commitment to the organization, retention and family functioning. Whereas, the negative imbalance results in work-life is correlated to employees' stress, lower commitment with organization, job dissatisfaction, turnover, domestic violence and lower productivity (Ollier- Malaterre, 2010).

WLB research outside the healthcare arena has established a link between practices promoting work-life balance and certain employer and employee outcomes (for a review see Yasbek, 2004; Batt and Valcour, 2003). More specifically, research has provided empirical support for a positive relationship between the adoption of WLB practices and both employee level outcomes and organizational performance. With regards to individual level outcomes, a large body of research has supported the relationship between WLB practices and variables such as job satisfaction, turnover intentions, and stress levels (for a review see Yasbek, 2004).

With regards to organizational outcomes, existing research has supported a relationship between the existence of WLB practices and improved recruitment and retention capabilities (Yasbek, 2004; Batt and Valcour, 2003; Evans, 2001), higher returns on investment in employee human capital (Yasbek, 2004; Dex and Scheibl, 1999); increased employee loyalty and commitment and organizational citizenship behavior (Thompson and Prottas, 2005; Yasbek, 2004; Dex and Scheibl, 2001; Lambert, 2000); and improved productivity (Eaton, 2001; Galinsky and Johnson, 1998).

Beauregard & Henry (2009) stated that numerous organizations are paying significant attention to provide work-life balance practices to facilitate their employees. Having work-life balance practices, they are attracting worker to themselves and are enhancing their employees' performance. Thus, work life issues are about achieving a better balance between the requirements of employees and achievement of organizational goals.

Kelly et al. (2008) have categorized the work-life balance into time, involvement and satisfaction balance that refers to a particular balance in each factor both in work and family roles. So, all of the previous discussions is around a person subjective opinion that both job and family make real demands which are not possible to effectively fulfilled with available resources (Moen et al., 2011). Hence as a result, the perception of work-life imbalance causes tension escalation within the person as either work or family demands become unsatisfied. These unsatisfied interferences and demands potentially affect employees' work and social life and become a serious cause of psychological discomfort for organization's and families (Greenhaus and Beutell, 1985).

Consequently, work life conflict phenomenon exists when the pressures from one role make it difficult to comply with the demands of the other. This means that if employees feel that they are not able to manage a good mix and integration of work and non-work roles, then they may experience negative or conflicting outcomes. (Frone, Yardley & Markel, 1997). This implies a bi-directional relationship where work can interfere with non-work responsibilities and vice versa (Frone & Carlson, 1999).

To avoid the negative results of conflict between employee's work and family, organizations can introduce WLB policies and practices. As Cascio (2000) define WLB as "any employer sponsored benefit or working condition that helps an employee to balance work and non-work demands". The objective of WLB policies should be to permit employees to increase their quality of life by giving more time to different activities such as leisure, family care duties, training courses, resting or social life (Hughes and Bozionelos, 2007).

Work-life balance has relevance for all individuals (Sturges & Guest, 2004). Sturges and Guest (2004) suggest that work-life balance denotes not only a balance between work and family, but a balance between work and the rest of life activities. Researchers found work-life balance to be positively related to both individual and organizational outcomes – for instance, improved financial performance, employee satisfaction and productivity, organizational commitment and attachment, and organizational behavior (Shankar & Bhatnagar, 2010).

According to Burke (2000), there has been a worldwide movement of companies towards understanding and supporting the importance of a balance between work and life for all levels of

employees in recent years. Frone (2003) suggests that helping employees attain work-life balance in useful ways leads to a more motivated workforce, which results in increased productivity, improved recruitment and retention, reduced absenteeism and improved customer experiences as a result of a more motivated workforce.

Work-life balance involves effectively managing the juggling act between paid work and all other activities that are important to people, including family, community activities, voluntary work, personal development, leisure and recreation (Noor, 2011). Work-family balance is a vague concept where work and family life are integrated or harmonious in some way or where work-family balance is seen as a lack of conflict or interference in work and family roles (Jacobs, Mostert, & Pienaar, 2008).

Kalliath and Brough (2008) posit that work-life balance is the individual perception that work and non-work activities are compatible and promote growth in accordance with an individual's current life priorities. According to Virick et al. (2007), employees who experience high work-life balance are those who exhibit similar investment of time and commitment, to work and non-work domains.

2.3 Employee Retention

Employee retention is recognized as an important subject of inquiry by researchers. Minchington (2010) defined retention as the converse of turnover being voluntary and involuntary. Retention activities may be defined as a sum of all those activities aimed at increasing organizational commitment of employees, giving them an overall ambitious and myriad of opportunities where they can grow by outperforming others (Bogdanowicz & Bailey, 2002). It is a voluntary move by an organization to create an environment which engages employees for a long term (Chaminade, 2007).

In the retention concept, employers are the important players and retention is a specific administrative management issue (Yamamoto, 2011). The success or failure of an organization greatly depends on its human capital (Kehoe & Wright, 2013). In this sense, an organization's human capital is the stock of expertise, knowledge, and innovative capacity, which is the driving

force behind remaining competitive and creating financial stability within the business environment (Jehanzeb, Rasheed, & Rasheed, 2013). Therefore, to retain skillful workers, employers should be mindful about the organizational commitment and retention of their employees (Jehanze et al., 2013). Numerous employers have made the mistake of thinking that employees are merely looking for economic benefits from their jobs. This perception ignores the high importance that many employees reside on the essential advantages of their careers (Jehanzeb et al., 2013).

Previous research has identified several factors relating to employee retention, situated on both organizational and employee levels (Birt, Wallis, & Winternitz, 2004). Finally, Hytter (2007) demonstrated that workplace factors such as rewards, leadership style, career opportunities, training and development of skills, physical working conditions, and work-life balance, have an indirect influence on retention. The high cost that comes with turnover has highlighted the need for organizations to make retention of staff their number one priority. This is not the case in medical field only but also applies to other careers and industries where shortage of staff is experienced.

C. Janki (2009) in his article “Employee Retention” discussed that most challenging issue faced by today’s global organization, is to retain their employees and provided insights into employee retention strategies, measures and techniques to minimize the rate of attrition. He said for retaining valuable employees the strategies of proper attention should be given to every employee, get the right people at right time, provide training and coaching plan for succession and acceleration pool, offer better career visibility, use explicit ranking systems tied to incentive and differentiate the organization with unique culture, can be adopted.

Moseley, Jeffers and Paterson (2008) state that employee retention is important to organizations, as increased turnover creates instability and puts additional workload and stress on remaining staff, increasing job dissatisfaction and therefore potentiating the turnover cycle.

Research examined the relationship between employee turnover intention and organization support such as supervisor support, flex time work family culture and co-worker support and

they conclude that organization support reduced the employee turnover intention (Thompson & Prottas, 2005).

2.4 The Relationship between Work Life Balance and Employee Retention

Work-life balance and employee retention become the growing concerns nowadays since the work place changing into fast faced work environment as the economy is growing globally. The researcher proved that there is a relationship between work-life balance and employee retention. The neglect of organization's work-life balance among the employees could lead to negative consequences towards the employees in which directly affect the organization itself. Thus, it is important to manage the organization work-life balance and to retain employees as the employees are the backbone of the organization.

There are enough sources of evidence to justify the positive relationship between HRM practices and employee retention. Irshad (2011) carries out a literature study on factors affecting employee retention. He summarized the findings of many researchers and highlighted their suggestions in terms of the management practices that can be helpful to improve absenteeism, employee retention and better quality of work.

Dawley, Andrews & Bucklew (2010) in their study indicated that employee turnover increases if there is mismatch between management and employees. Employees can't enjoy their job if they are working with tactless and inflexible manager (Muhammad Sajjad et. al, 2013). Workplace flexibility helps to improve overall employee flexibility and empowerment to have work-life balance which reduces turnover. (Emerald article, Human Resource Management International Digest, Vol.16 Iss: 6, 2008). Researchers found that —against the odds; a public sector organization can attract and retain a high quality workforce in a highly competitive market (Curson J.Y., and Skidmore T., 2010). However, as far as professional women and their quitting from the jobs are concerned Balasubramanian L. further quotes that another important reason for professionals, especially women quitting their job is relocation after marriage, or the call of being a mother.¶

The role of work life balance has a direct relation in employee's decision to stay or leave the organization (Deery, 2008). Job attitudes such as job satisfaction and commitment, personal reasons such as positive and negative feelings, the role of work-life balance proved to lessen high turnover rates. Thompson and Prottas (2006), who investigate the relationships between organizational support for family requirements and turnover levels, find a link between informal organizational support and turnover intention. In more recent studies examine the way in which Japanese firms implement policies that support work-family balance, and find significant links between the employee support policies in place and the levels of female employee turnover (Yanadoria & Katob, 2010).

Work-life balance is increasingly important for engagement and affects retention. Hyman et al., (2003) in their empirical research in the UK found that interventions of work demands into personal life (e.g. working during the week-end) resulted into heightened stress and emotional exhaustion among the employees. In a study conducted by the Australian Telework Advisory Committee (2006) [43] it was found that 70% of businesses that incorporated telework options reported a number of positive benefits, such as increased business productivity and reduced costs, improved employee flexibility and work life balance, and increased workforce participation. Therefore, Work-life balance has the potential to significantly improve employee morale, reduce absenteeism and retain organizational knowledge. It also offers a win-win situation for employers and employees (Lockwood, 2003; Landaur, 1997).

Another issue with the existing research is that availability of work-life practices is often measured, as opposed to actual use of such practices. This, however, brings us to another potential explanation for the link between work-life practices and employee retention. Even when the practices are not used and therefore no reduction in work-life conflict is achieved, the mere presence of such practices can affect a number of beneficial outcomes to the organization in the form of positive job-related attitudes. Availability of work-life balance practices has also been related to increased affective commitment and decreased turnover intentions (Chiu & Ng, 1999; Thompson, Beauvais & Lyness, 1999; Wood & de Menezes, 2008). Grover and Crooker (1995) found that parental leave; childcare information and referral, flexible work hours, and financial assistance with childcare predicted both increased affective commitment to the

organization and decreased turnover intentions among all employees, not just users of the practices.

2.5 Review of Work Life Balance Research

WLB initiatives include a wide range of individual practices or bundles of practices that are intended to provide employees with greater control and the ability to integrate work and family responsibilities. Furthermore, there is a great deal of variation in the specific practices adopted across different organizational and industry settings. Nevertheless, the dominant types of policies associated with work-life balance are family leave, flexible work-time, childcare support (such as subsidies or on-site childcare), compressed working weeks, telecommuting and job-sharing (Glass and Estes, 1997). It is also important to note that organizations have been shown to vary with regards to their strategic objective guiding the adoption of WLB practices, a source of variation in associated outcomes (for a discussion of different underlying motivations for the adoption of WLB practices (see Dex and Scheibl, 2001); for distinction between employee friendly and employer friendly flexible practices(see Fleetwood, 2007).

As noted above, the healthcare setting is notorious for fatigue, stress, burnout and high turnover. A recent report, commissioned by the UK government, examined the extremely high levels of absence due to sickness in the National Health Service. Indeed, absence rates in the NHS are significantly higher than at workplaces in the rest of the public or private sectors (Boorman, 2009 sec 1.13). For example, after musculoskeletal problems, the second highest cause of absences in the NHS was “stress/depression/anxiety”, which is likely to be influenced, at least in part, by work life balance issues (Burke and Greenglass, 2001).

It is not surprising then that a great deal of research in the healthcare setting has focused on antecedents to and the effects of work life balance. Thus for example, Aiken et al (2002) found a relationship between staffing levels, burnout and health outcomes in hospitals. Specifically, the authors looked at nurse-patient ratios and found that higher ratios caused poorer clinical outcomes, higher rates of burnout, and job dissatisfaction among nurses (Hall et al., 2003). Nevertheless, during a period characterized by a dramatic shortage of health professionals, it is essential not only to focus on the effects of the long hours and high pressure associated with

healthcare work, but also to examine the effects of organizational efforts, such as WLB practices, to mitigate these challenges and to enhance employee retention.

Keeton et al (2007) explored the factors influencing career satisfaction, work life balance, and burnout among physicians. They observed that both women and men to be highly satisfied with their careers while only moderately satisfied with work life balance and emotional resilience. The findings of the study revealed that work life balance was significantly associated with career satisfaction and the relationship is mediated by key factors namely, control over schedule, total work hours, marital status, and having child dependents in the household. In addition, generational and gender shifts also strongly and significantly contribute to career satisfaction, work–life balance, and burnout, while, older age was consistently associated with more work–life balance and less burnout.

Smith K. T (2010) in his study on work-life balance perspectives of Millennial (those who born between 1980 and 1995) job candidates observed that work-life balance to have higher priority for current generation of workers in comparison to previous generation. Results of the study indicated that the incumbents consider healthy work-life balance as a vital source for person's quality of work, job performance, ethical decision making, and long-term services and generally declined extra pay in lieu of vacation and flex time.

Noor (2011) identified the relationship between perceived work-life balance and the intentions to leave among academia in Malaysian public higher education institutions. The results indicated that perceived satisfaction with work life balance was negatively correlated to intention to leave the organization partially mediated by job satisfaction and organizational commitment.

Shankar & Bhatnagar (2010) examined the literature in the field of Work-Life Balance and proposed a conceptual model. The model focused on the correlation of Work- Life Balance construct with other variables namely employee engagement, emotional consonance/dissonance and turnover intention. The study demonstrated that higher work life balance leads to high employee engagement, and low intention to quit.

Srivastava (2013) conducted a survey on call center employees in Gurgaon, in India and identified that organizations could benefit in terms of reduction in absenteeism and turnover,

improvement of productivity and image, and assured loyalty and retention, while, employees perceived increased job satisfaction, job security, autonomy, reduced stress and improved health out of WLB. However, correlation analysis indicated that while organizational perspective of WLB benefits significantly correlated with absenteeism, employee perspective of WLB benefits exhibited significant correlation with job satisfaction and autonomy.

Shanafelt et al (2012) conducted study on burnout and satisfaction with work life balance among large sample of US physicians in all specialty disciplines relative to the general US population. The results indicated that burnout was more common among physicians as they tend to work longer hours and have greater struggles with work-life integration. Physicians in general surgery, general surgery subspecialties, and obstetrics/ gynecology were identified to suffer from low levels work life balance.

Lakshmi, Ramachandran and Boohene (2012) identified the issues connected with work life balance of female nurses in government and private hospitals in Tamil Nadu, India and the results also indicated that both government and private hospital nurse's work life balance is a challengeable one. The study suggested that government and private hospital management need to be conscious of the status of female nurses and periodically review their work and personal life satisfaction.

Empirical studies on the subject of work-life balance assumes that improving an organization's work-life balance leads not only to greater productivity, but also to greater company loyalty and low level of intent to leave the organization (Moore, 2007). Noor and Maad (2008) found that work-life conflict has a significant positive relationship with turnover intentions. Work-life balance plays a significant role in alleviating high levels of intention to leave and decreases actual turnover rates (Noor, 2011), while work-life balance initiatives facilitate improved productivity, increased employee loyalty and decreased employee turnover (Malik et al., 2010). Research by Nierras (2012) found that employees who were more sympathetic towards their organization's efforts to support work-life balance exhibit a much lower intention to leave the organization, have pride in their organization and are willing to recommend the organization as a place to work with high overall satisfaction.

Research by Mallol et al (2007) describes that the greater the sacrifice perceived in leaving the less likely the intent of the employee to actually leave. Further research by Newman et al. (2002) states that improvements in work-life balance are one of the prerequisites to increasing the numbers recruited and retained within the health profession. Russo and Buoncore (2012) also found in their research that nurses who experienced work-family enrichment had less intent to leave.

WLB practices address a clear and increasingly important issue for employees, namely their ability to balance between their work and family commitments. Put simply, WLB practices are intended to enhance employee well-being by addressing common tension, and to the extent that they are able to deliver on this objective, they will be positively related to employee satisfaction with work and their intentions to stay with the organization. A large body of general WLB literature has supported a negative relationship between work family conflict and job satisfaction and turnover intentions (Thompson and Prottas, 2005). Balancing work and family is likely to be important to employees in most work settings, but the healthcare arena is one in which the tensions between work and family are dramatic. Unresolved, these tensions will likely lead to employee decisions or intentions to leave the organization (Anderson et al., 2002).

Many of the hospitality studies on WLB focus on the components of WLB in the industry or the impact that specific variables have on WLB. The exploratory research by Wong and Koi (2009), for example, provides a basis for understanding the key factors that constitute WLB. These authors found that factors relating to having enough time off, allegiance to work, flexibility and work support for WLB were the basis for employee perceptions of WLB

Roehling, Roehling, and Moen (2001) found in a representative sample of 3,381 American workers that the presence of flexible time policies, family support such as childcare assistance was associated with employee loyalty and increased retention for those with family responsibilities.

In their study on employee attraction and retention, Hutchings, De Cieri and Shea (2011) identified a need for employers to give greater attention to work-life balance issues. The majority of the responses from the study were from large to medium firms, which have large HR

departments and HR managers with a strategic role, which could be expected to have more progressive HR practices around attraction and retention.

In a survey of 448 employees by Dibble (1999), flexible working hours was the third most frequently mentioned reason why employees remain with their current employer. Also, in a survey of 1,862 employees in the U.S., cited in Ashby and Pell (2001) most workers wanted a job with flexible hours that allowed them to take care of personal concerns, while a substantial number cited similar reasons for their preference for working from home. A sample of 1,862 employees is large and to get over 50 percent preferring WLB means that it is important to a lot of employees and employers must therefore take note of this. A study by Maxwell (2005) also indicated that WLB policies such as the introduction of flexible working hours and arrangements, provision of better training, breaks from work and better work support do not only address WLB issues but also enhance employee retention.

Many studies have been devoted in search of antecedents influencing of work life balance. The following sections present empirical review of work life balance dimensions

2.5.1 Work Life Balance Policies

Bloom & Van Reenen (2006) assert that firms adopting better WLB policies are the ones who enjoy the benefits accruing to the concept. Paryani (2014) opined that work life policies can improve the level of job satisfaction and increase organizational commitment among their employees

The presence of work-life balance policies can lead to the organization being identified as an employer of choice, ensuring that the company will continuously attract employees. Currently, organizations in the public and large private sector with a significant female workforce are most likely to have introduced flexible working policies (Work-life Balance Network, 2004), although both implementation and take-up vary greatly according to the type of sector.

WLB policies are usually referred to in practice as ‘flexible working’ having different forms of operations such as: part-time working, job sharing, term-time working, shift working, annualized hours, compressed hours, teleworking/e-working, home working, career breaks, study leave, zero

hours contracts and V-Time (Paryani, 2014). The essence of the work life policies is to ensure there is a balance between employment and non-work duties that are beneficial to both the employer and employee with the most effective policies being those established after a dialogue between the employer and employee (Ojo, Falola & Mordi, 2014).

Work-life balance policies are often implemented by organizations as a result of external drivers, internal drivers and social drivers, which often interact simultaneously to motivate policy directed at achieving work-life balance. Research shows that some companies have adopted work-life balance policies in inventive ways and had positive results from doing so. The study undertaken by the Work in America Institute, *Holding a Job, Having a Life* (2000), highlights innovative companies that have extended their work-life balance policies to become part of the organizational structure. This has been done in order to achieve improvements in employees' work-life balance and to improve business performance. These organizations have achieved this by redesigning work, changing the organizational culture, improving HR systems, and integrating work-life balance goals with core business goals (in *Work-life Balance Network* 2004). This confirms that structural change can precede cultural change if it is approached with consistency and determination.

Glass & Finley (2002) named three classifications of the WLB policies as: parental leave, alternative work arrangements and employer supported child care. The successful formulation, execution and implementation of WLB policies usually rely on the awareness of top management and the organization's culture. In recent times, there has been a concise and encompassing view of the WLB initiative. Oludayo, Gberevbie, Popoola & Omonijo (2015) broadly mentioned the initiatives according to the challenges employees face which include: Time usage policies as expressed by flextime, telecommuting, job sharing and part-time work; Leave policies in organizations to cover paid and unpaid leaves for childbirth, the care of young and other matters of importance requiring personal attention; Dependent care policies which covers resource and referral services to support child or elder care and; Counseling and Wellness initiative which include assistance programmes (EAP), wellness programmes, financial counseling, relocation counseling, educational seminars at the workplace on balancing work and family life, peer support groups, training for supervisors to help them be more attuned to the

work-family problems of employees. Similarly, an analysis of the 1998 Workplace Employee Relations Survey by Dex, Smith, and Winter (2001) found that organizations offering parental leave enjoyed above average labour productivity, and that the provision of flexible work hours and telework was associated with reduced turnover and increased retention.

Induru and Pathan (2011) reviewed possible alternatives for employers and employees in the pharmaceutical sector to link work life balance practices for organizational and personal performance. Rajadhyaksha (2012) observed that commonly practiced work-life interventions by Indian companies have been mainly oriented towards addressing issues such as gender equality, flexibility, stress reduction, health awareness and childcare

Lieva et al (2012) explored the impact of the availability of work life balance practices on organizational outcomes in Southeast Spain. The results showed that a WLB supportive culture mediates the availability of WLB practices. Straub C (2007) had investigated the contribution of work life balance practices and policies in 14 European countries. The study identified that only the payment of additional emoluments during maternity leave had a positive impact on WLB. Hyman & Summers (2007) demonstrated that employees in financial service sector of Scotland were prone to work-life balance issues and emphasized the need for organizations and unions to develop a focus on work-life balance policies and programmes.

Miryala & Chiluka (2012) highlighted the importance of designing work life balance policies and programs at different levels with respect to government and private institutions in India. Purohit (2013) had carried out a study among employees of leading corporate entities representing, health, educational and banking sectors in Pune region, on organizational policies & provisions for work-life balance and emphasized the importance of effective work-life programs for maintaining symbiotic relationship between the employee and employer to achieve mutual benefits.

Cross-national studies also highlight positive experiences as a result of the implementation of work-life balance policies. The OECD points out that the flexible policies introduced by Austria, Japan and Ireland have been seen to “motivate and increase productivity of the existing workforce, increase workforce flexibility to meet peak-time demand, attract and retain qualified

staff” (2003: 20). However, they point to the fact that take-up of such policies is gendered, and workplace cultures are key sites of promotion or prohibition of such policies.

Availability of work-life balance practices has also been related to increased affective commitment and decreased turnover intentions (Chiu & Ng, 1999; Thompson, Beauvais & Lyness, 1999; Wood & de Menezes, 2008). Grover and Crooker (1995) found that parental leaves, childcare information and referral, flexible work hours, and financial assistance with childcare predicted both increased affective commitment to the organization and decreased turnover intentions among all employees, not just users of the practices. Another proposition given by the authors is that employees using flexible work hours may increase their work effort, because the costs of losing a job that offers desired flexibility would be higher than those of losing a job without the option of flexible hours.

It seems logical that there should be a lot of research on the relationship between the provisions of specific or combinations of work-life policies. What can be concluded from the existing studies is that there are no universalistic policies that have been found to be beneficial in reducing conflict between work and non-work domain (Eby, L.T et al., 2005). In a study among male executives, (Bretz, R.D. and Judge, T.A., 1994) found that the more the organizations provided comprehensive policies to accommodate work and family issues the less work-family conflict was experienced by these employees.

2.5.2 Flexible Work Arrangements

One concept that has gained spotlight in WLB literature is flexible work options (Beauregard and Henry, 2009). Prior research studies have shown flexible working arrangements to be the most important factor that improves WLB. Nevertheless, because there is no particular scale that measure this concept it is considered as an ambiguous term (Hill et al., 2008). Flexible work options (also referred to as smarter working by Dunne (2007)) includes flexible work hours (flextime) or schedule flexibility (Carlson, et al., 2010), which allows employees to work a certain number of hours varying their start and finish time to their convenience in addition to compressed weeks (i.e. reducing a standard workweek by working longer hours) (Dunne, 2007;

Beauregard and Henry, 2009). In Smith and Carroll's (2002) study, flexible hours were the preferred method of utilizing WLB.

In recent days, most of international studies have laid higher emphasis on flexible work arrangements and new working conditions compared to other work life balance initiatives (Frone MR 2003 & Carlos DS, Grywacz, Kacmar K 2010). For instance, many studies have suggested that flexible work arrangements would help the employees to attain a better blend between work and non-work activities and help the organizations to recruit, retain and motivate their employees (Beckmann K, 2000 & Kaur Amarjit 2004). Christensen and Staines (1990) identified that flexitime work arrangement reduced late comings, absenteeism, and turnover. The study concluded that flexible time strategy improved employee productivity by minimizing absenteeism, turnover and work family conflict.

The significant relationship between WLB practices and turnover has been explored in early WLB research studies. Perhaps one of these early studies is Dalton and Mesch's (1990) who showed that flexible scheduling minimizes absenteeism. Moreover, more recent studies have also been dedicated to investigate the relationship between WLB practices and turnover intentions (Wilkinson, 2008; Koubova and Buchko, 2013).

Hill et al (2001) conducted a study on 6,451 employees of IBM in USA and the study empirically suggested the importance of flexible work timings and location of work place to reduce employee's work life imbalance. The study demonstrated that individual with the perceived job flexibility have the benefit of good work life balance and were capable of working longer hours. Wayne et al (2004) suggested that limiting work hours may benefit workers to increase the level of work family balance because fewer work hours may contribute to reduction in work family conflict. Flexi time helps employees to manage their work and family responsibilities effectively there by allowing them to minimize work family conflict and to improve the performance at work & home (et al).

Julien, Somerville and Culp (2011) had examined the role of alternative work arrangements that helps to reduce work life conflict in the public sector. The Results revealed that a compressed work week is considered as an alternative work life arrangement that reduces work-life conflict

and helps to enhance work-life balance. High levels of management & superior support of flexible work arrangements such as flexible hours and compressed work week were positively related with the ability to balance personal, family and work demands.

Madipelli, Sarma & Chinnappaiah (2013) investigating on factors influencing work life balance at work place observed that, organizations having ineffective work arrangements, poor working conditions, long working hours, lower income, pressurized work environment etc., may be responsible for monotony, frustration and stress towards work and home among employees, which leads to work life imbalance.

Hartel et al (2007) in his study on Medical and Testing Reference Laboratory with 1,789 employees in Salt Lake City, has reported that offering flexible scheduling has the organization to more than double their employee base from 700 in 1992 to 1,700 employees in 2004, whilst reducing turnover from 22% to 11%. It is also notable that a variety of 'best employer' surveys regularly use availability of work-life balance policies as an evaluation criterion.

Bradley and Shakespeare-Finch's (2005) qualitative study of employed women with dependent children, several of the participants stated that without access to flexible working hours, they would not continue to work full-time. Availability of flexible work hours predicted retention among employed new mothers in Glass and Riley's (1998) study, and Hofferth (1996) found that availability of flexible spending accounts to pay for child care predicted reduced turnover among working mothers. Studies have also shown that as levels of flexibility in terms of working hours decrease, turnover intentions are raised (Pierce & Newstrom, 1982; Rothausen, 1994).

In the healthcare setting, where work demands are extremely variable and organizational certainty regarding staffing and other workforce planning issues is low, the ability to attain greater flexibility through the use of WLB practices is likely to have clear positive implications for employee retention.

2.5.3 Family supportive Culture

Family supportive culture was observed to have an impact on work life balance of individuals. Warner and Hausdorf (2009) conducted a study on work life issues among health care workers in

Canada. The results indicated that a positive relationship exists between the organization family support for work-life issues and reduction of work-to-family conflict. Similarly, Tremblay, Genin & Loreto (2011) illustrated the importance of organizational support to work-life balance in a demanding work environment among police officers and agents in Québec using case study methodology involving a questionnaire and in-depth interviews. The findings substantiated the importance for organizations to offer formal and informal support to employees in the work environment to balance their work and family aspects.

Mathew & Panchanatham (2011) in their study demonstrated the important factors influencing work life balance of women in India. The study had observed that dependent care issues, quality of health, and lack of appropriate social support as some of the major factors influencing the WLB among women. Ross and Mirowsky (1998) showed that employed mothers finding difficulties in child-care arrangements experienced high depression.

Nathani and Jha (2009) had identified various family related factors such as, increasing participation of women, child bearing women and dual career women in workforce, increasing single-parent/ single person households and increased child-care/ elder care burden to be significantly influencing WLB of employees. Various studies had also suggested that family related factors such as number of children and childcare responsibilities lead to imbalance in work and family roles. Fathers experienced stress in child caring during the absence of employed wives from home (Gerson K, 1993).

The provision of onsite childcare centres has been associated with lower turnover intentions among employees, as has access to family-responsive policies in general (Grover & Crooker, 1995). In a study examining the effects of an onsite organizational childcare centre, Kossek and Nichol (1992) found that users of the childcare centre had been with the organization longer and held more positive attitudes regarding the centre's influence on recruitment and retention than did employees who were on the waiting list. In another study related to onsite childcare centres, Rothausen, Gonzalez, Clarke and O'Dell's (1998) findings indicated that childcare provision had a positive effect on job-related attitudes only for current users, past users, and future users of the childcare centre. A study of the childcare program at an American hospital found that parents using the on-site childcare centre exhibited lower turnover rates than other employees (24%

compared to 33%), and much lower turnover rates than those of parents prior to the implementation of the childcare centre, which averaged 40% (Auerbach, 1990).

Thompson & Prottas, (2005) examined the relationship between employee turnover intention and organization support such as supervisor support, flex time work, family culture and co-worker support and they conclude that organization support reduced the employee turnover intention. In more recent studies examine the way in which Japanese firms implement policies that support work–family balance, and find significant links between the employee support policies in place and the levels of employee turnover (Yanadoria & Katob, 2010).

2.5.4 Summary of Empirical Review and Research Gap

Both literature and empirical review relevant to the study has been reviewed in this chapter focused on previous studies on WLB and its dimensions as well as on employee retention and its relationship with WLB practices. The review showed that, research on what influences employee retention have been conducted by several researchers.

In discussing the rationale for effects of WLB on employee retention, the literature pointed to the fact that, retaining employee is an important issue for organizations because turnover is very costly in terms of the economic impact, time, money and other resources especially when critical and knowledgeable employees leave the organization. To minimize these potential problems forward-thinking organizations must strive to create work life balance and positive organizational climate through various WLB initiatives to retain valuable employees. However, previous studies on WLB have been fragmented and researchers have not arrived at an effective blend of practices that could improve employee retention. Also most of the studies on the effects of WLB on employee retention were conducted mainly in Western World. Hence, there is a limited empirical study on employee retention in Africa and particularly in Ethiopia. Besides a specific research examining the effect of work life balance practices on retention of employees in the health sector in Ethiopia could not be found. This suggests that, there is limited empirical evidence on employee retention in the developing countries like Ethiopia hence there is a research gap.

Accordingly, this study seeks to fill this research gap by examining the effects of work life balance in selected public health institutions on employee retention in Ethiopia. The health sector has been chosen because it's a very important sector for the effective functioning of a nation and it is also one of the most highly affected sectors by employee turnover especially in Ethiopia. This is where this research comes to play contributing to filling the gap of lack of research on WLB in developing countries by examining the effects of WLB in a highly demanding profession context (i.e. healthcare) in order to raise awareness about this critical concept and its potential benefits for organizations, employees and society as a whole.

Fig 2.1 Conceptual Frame work

Based on the overall review of the related literatures, the following conceptual frame work in which this specific study governed is developed. In this study employee retention is taken as a dependent variable while work life balance as an independent variable. The independent variable, WLB, has three dimensions: work life balance policies, flexible work arrangement, and family supportive culture. The relationship of the variables for this study is presented as follows.

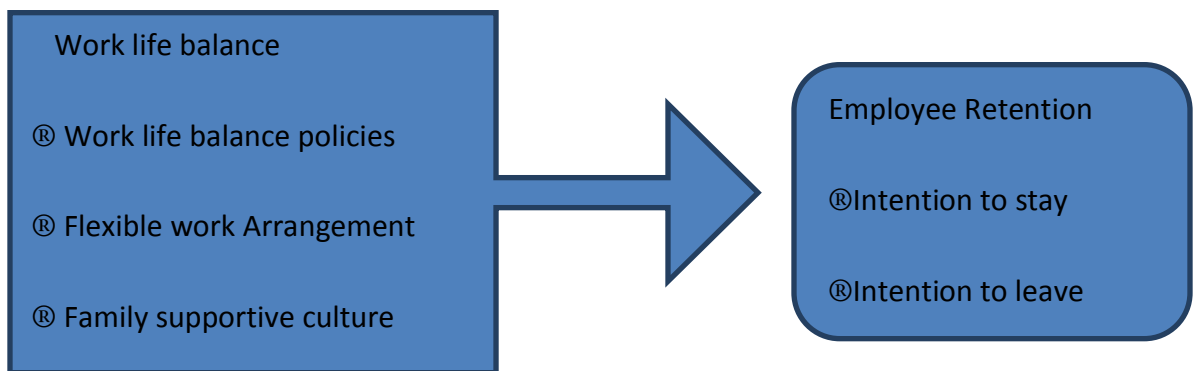


Figure 2.1: Conceptual framework illustrating the relationship between work life balance practices and employee retention

Source: Jacinta Munyiva Kinyili (2015) Machakos, Kenya, and Rebecca Dei Mensah (2014) University of Cape Coast, Ghana

CHAPTER THREE

METHODOLOGY

3.1. Introduction

This chapter discusses the research design, data and variables, source of data, sampling frame, sampling techniques, data capturing instruments, and method of data analysis.

3.2 Research Design

It is generally accepted that the selection and application of a research design is dictated by the problem at hand. In this sense, selecting the right research design provides the appropriate strategies for implementation of the research method. In this study, a mixed methods research design (quantitative and qualitative) has been adopted to investigate the effects of work life balance practices on the retention of staff in public health institution in Ethiopia. According to Creswell (2008) this design is used when both quantitative and qualitative data, together, provide a better understanding of the research problem than either type by itself, when one type of research (qualitative or quantitative) is not enough to address the research problem or answer the research questions. Therefore, by using a mixed approach it is able to capitalize the strength of quantitative and qualitative approach and remove any biases that exist in any single research approach (ibid).

In this study concurrent triangulation design is applied. The purpose of this concurrent mixed methods study is to better understand a research problem by converging both quantitative and qualitative data (Creswell, 2012; Martens, 2011). Questionnaires are both open ended and closed ended questions are used to establish the relationship between work-life balance practices and employee retention.

3.3 Variables

Accordingly, in this study both quantitative and qualitative data collection methodologies such as questionnaires and document analysis are utilized. Quantitative helps enumerate statistical data

and the qualitative approach allows for an in-depth exploration of the views, opinions, and experiences of employees that will be collected in the study.

The dependent variable i.e retention is measured through the employee's expression of intent to leave or continue working for the organization, and satisfaction with the work life balance practices. The independent variable i.e work-life balance is measured through existence of work life balance policies that enable employees to easily pursue more balanced lives such as leaves, flexible work schedules such as paid time off policies, day-off, flexible schedule, and supportive organizational culture.

For the independent variable WLB scale respondents were asked to make a '√' mark on their response to each statement according to the five-point scale labeled at each statement that reflect their own agreement and disagreement of the statement ranging from 1 up to 5 points in each dimension. Similarly, for the dependent variable employee retention scale respondents were asked to make a '√' mark on their response to each statement according to the five-point scale labeled at each statement that reflect their own agreement and disagreement of the statement, ranging from 1 to 5 points. Besides respondents' opinion about their organizations WLB were collected through open ended questions.

3.4 Sources of Data

In this study, both primary and secondary data sources are utilized to address the research objectives. The techniques used to elicit primary data are questioners distributed to and collected from doctors, dentist, HO, nurses, midwifery, laboratory technicians and other health professionals within selected public hospitals. The questions used in the research study are structured as both close-ended and open-ended. The advantage of using both open-ended and close-ended questions is to allow for a wide range of responses and to allow the person answering to include more information including feelings, attitudes, and understanding of the subject (Denzin, 2005) than a simple yes or no answer. In addition, the design of the questionnaire questions is guided by the objectives of the study and the literature.

The secondary data is more or less collected from published and unpublished documents, books, and journal articles, organizational documents from the hospitals, Addis Ababa health bureau, and ministry of health. Other magazines, internet sources including access to electronic scientific articles such as Google's scholar search facilities, as well as hard copies or reports and other studies are also utilized in the process of data gathering.

3.5 Sample Frame and Sampling Technique

The population of the study was all medical professionals in selected public owned hospitals under Addis Ababa health bureau (AAHB). There were 12 public hospitals in Addis Ababa. Six of the public hospitals Zewuditu Memorial Hospital, Ras-desta Damtew Memorial Hospital, Gandhi Memorial Hospital, Minillik II Hospital, Tirunesh Beging, and Yekatit 12 Hospital are owned by the AAHB (Asemahagn, 2014). Accordingly, two of them were purposively selected depending on facility type, one referral (Minillik II Referral Hospital), and one among the five general hospitals (Yekatit 12) to include those hospitals that might have different patient loads, additional HR practices, specialized services, and more importantly to constitute all kind of medical professionals. The sample size for each hospital was determined proportionally based on the total number of health professionals in each hospital. During the study period, there were a total of 968 healthcare professionals working in different departments of the two selected hospitals.

On the other hand, the target population of the study includes doctors, pharmacists, HO, nurses, midwifery, laboratory technicians and other health professionals within selected public hospitals. These health care professionals have been targeted because each plays critical role in the provision of health care hence the loss of any has a very significant effect in health care delivery. Since the study population is homogeneous (all are government employed medical professionals) 15% (detail of sample size is presented in table 3.1 below) medical professionals are purposively selected as a sample to fill the questionnaires. Hence, a sample size of 10 to 30% is a good representative of the target population (La Pointe, 2013).The utilization of purposeful random sampling is appropriate in a mixed research strategies as involves combining quantitative and qualitative sampling. In addition, using purposeful sampling helps to select participants who can address the goals and objectives of the study. Overall, utilization of purposeful sampling leads to

the development of a greater and clearer understanding of a research study (McCabe et al., 2013).

Table 3.1 Sample Size

Category of Staff	Target Population	Sample size
Doctors	154	28
Nurses	575	76
Health Officer	38	10
Anesthesia	39	19
Pharmacist	65	5
Laboratories	62	2
Others	35	5
Total	968	145

Source: HR offices and Own survey

3.6 Data Capturing Instruments

Structured questionnaires with both open ended and closed ended questions were used. The structured questions provide a set of answers from which the respondents chose the appropriate answers. Questionnaires are also more efficient as they require less time, less expensive and permit collection of data from a much larger sample. Bryman and Bell (2003), explains that a self-administered questionnaire is the only way to elicit self-report on people’s opinion, attitudes, beliefs and values. Additionally, the questions are on paper and standardized hence no opportunity for the researcher to be biased.

The questionnaire is divided into various sections to adequately cover the objectives of the study. It consists of a section on demographic information of the respondents and a set of items to measure the role of the selected human resource management practices on the retention of staff. A five point Likert Scale questionnaire is used to measure variables of the study. The questionnaire item is adapted from past researches; (Kabare Karanja, 2015) which are better to describe the variables under study and the test items were highly reliable. A five- point Likert scale anchor by strongly disagrees and strongly agrees is used to measure the effect of work life

balance practices on employee retention. The Likert scale is chosen because it's relatively easy to construct, it facilitates quantifications of the responses, enables ranking of items thus tendencies can be identified, and respondents are more likely to respond to all the statements in the instrument and can best help capture people opinions (Kothari and Garg, 2014).

The questionnaire further includes an information sheet explaining the reason for this research, emphasizing confidentiality and anonymity of the survey, and the voluntary nature of participation. Accordingly, it is distributed to cover different categories of health professionals as it is given to doctors (all types), nurses and midwife, pharmacists, health officers, laboratory technologists, and radiologists. The questionnaire has been distributed through drop and picks later method with an endorsed self-addressed return envelope to help increase response rate.

3.7 Validity and Reliability

For every research project, it is of great importance for the researcher to clearly manifest validity and reliability. Reliability refers to the “extent to which your data collection techniques or analysis procedures will yield consistent findings” (Saunders et al., 2009, p158). Validity on the other hand is “concerned with whether the findings are really about what they appear to be about” (Saunders et al., 2009:158).

Reliability basically means that the results can be duplicated in the future if the same study is conducted under the prevailing conditions and parameters (Golafshani, 2003). The researcher must prove that these results adequately address the research question and that even if another study was to be conducted, the same results would be deduced. Validity on the other hand, pertains to the integrity of the results and conclusions drawn by the researcher (Golafshani, 2003). They must be ethical and display high moral standards.

The questionnaire used in this study was derived from formally tested questionnaires used by past researches; (Kabare Karanja, 2015) which are better to describe the variables under study and the test items were highly reliable. The individual Cronbach's alpha values for 18 work life balance items were all above 0.8 while the overall was above 0.806 while that of the dependent variable retention was 0.763 which are good and excellent respectively according to George & Mallery, (2003). Cronbach's alpha reliability coefficient normally ranges between 0 and 1. The

closer Cronbach's alpha coefficient is to 1.0 the greater the internal consistency of the items in the scale. This meant that the instrument is reliable and can be used to collect data for the study. In addition, triangulation is also used to increase reliability, validity and interpretation of data. Moreover, the validity of the research instruments was established by seeking opinions of experts in the field of study especially from my advisor. Finally, all conclusions made were drawn on factual data derived from the data collected through the methods described earlier without bias whatsoever (Hom, Mitchell, Lee and Griffeth, 2012).

3.8 Method of Data Analysis

According to Kerlinger and Lee (2012), data analysis means the categorizing, ordering, manipulating, and summarizing of data to obtain answers and inferential to research questions. The purpose of analysis is to reduce data to intelligible and interpretable form so that relationships of research problems can be studied. In this study both qualitative and quantitative (Mixed method) data analysis techniques will be employed.

Data that is collected by using questionnaires will be organized, coded and then analyzed. The data that is collected from different sources is analyzed and interpreted. Specifically, the quantitative data is analyzed by the use of descriptive statistics Microsoft office excel. Descriptive statistics that include mean, standard deviation, percentages and frequencies, tabulation and graph are used in order to analyze the data which will be obtained from the closed ended questions. Additionally, correlation analysis more specifically Pearson correlation coefficient are used to measure the degree of association and influence between selected work life balance factors and employee retention. On the other hand, information that is gained through key open ended questions is described and analyzed qualitatively.

Finally, the results of the analysis are presented using tables and the findings are discussed using qualitative narrations in order to draw conclusions and recommendations.

3.9 Ethical Consideration

Research ethics and values form an important part of the research study. As the study involves sensitive information about organizational practices it takes utmost care to carry out research with great moral and sentiment. Adding to this, the entire research process will be conducted in a legal and ethical manner. Moreover, all the respondents have been informed about the purpose and nature of the study and all the questions have been framed in a clear, precise and professional manner without hurting anyone's feelings or sentiments. Every participant has been assured at most privacy and confidentiality. Furthermore, all the participants have been informed about the purpose of the research study with clear assurance that the data collected would be used for only academic purposes.

CHAPTER FOUR

FINDINGS AND DISCUSSIONS

4.1 Introduction

This chapter discusses the results and findings of the study. Among the issues discussed are the socio-demographic characteristics of respondents and HRM practices namely work-life balance and retention of employees. Additionally, factors of independent variable such as existence of work life balance policies, flexible work arrangement, and family supportive work environment are also analyzed. And finally the results and the findings of the study are presented.

4.2 Response Rate

A total of 145 sets of questionnaires were distributed to the respondents from the two selected public health institutions (Minilik Referral Hospital and Yekatit 12 Hospitals) in Addis Ababa. 134 sets of questionnaires were returned, making the response rate 92.41% and results of completed be analyzed. There are no any rejected questionnaires and the data obtained was analyzed with the aid of Microsoft Office excel.

4.3 Demographic Characteristics of Respondents

The demographic characteristics of the 134 respondents are detailed below on the basis of their age, gender, marital status, family status (with and without dependent children), level and field of education. It is tabulated and presented follows.

Table 4.1 Demographic Characteristics of Respondents

Respondents' characteristics	Categories	Frequency	Percent
Gender	Male	56	42
	Female	78	58
Age	20-30	53	40
	31-40	46	34
	41-50	17	13
	51-60	13	10
	61-70	5	4
	Above 70	0	0
Marital Status	Married	85	63
	Not Married	49	37
Family Status	With Children	77	57
	Without Children	57	43
Status of Children	Dependents	64	48
	Non-Dependents	70	52
Level of Education	Certificate	0	0
	Diploma	24	18
	Bachelor	71	53
	Masters	11	8
	Doctorate	28	21
	Others	0	0
Field of Education	Medical Doctors	28	21
	Nurses	65	49
	Health Officer	10	7
	Anesthesia	19	14
	Pharmacist	5	4
	Laboratories	2	1
	Others	5	4

Source Own Survey (2018)

The above table shows that 58% of the respondents were female while 42% were males. This means the sample is representative since the target population 53% and 47% was female and male respectively which indicates the representative character of the respondents. It also shows that there are slightly more female employees in public hospitals in Addis Ababa than the male.

The data show that majority of the respondents are aged between 20-30 years (40%) followed by those aged between 30-40 years (34%) then 41- 60 years (23%) with the minority having been aged above 60 years (4%). Here the respondents profile presents a varied workforce comprising mostly a category of people who are young and who have newly started their professional career. This is also in consistent with the population as the majority of the Ethiopian population is at the younger stage.

The information on the respondents 'marital status indicated that a majority (63%) was married and 37% was unmarried. From the 63 percent married people it was found out those 57 per cent respondents have children while the rest 43 per cent did not have children. Among these 48% of the respondents who had children had dependents while the rest 52% have children who were non dependents on their families.

The study also sorts to find out the academic qualification of the respondents. The level of education for majority of the respondents (53%) was first degree, while the education level of 21% respondents was Doctorate degree, 18% were diploma holders while the minority representing 8% had master's degree qualifications, and there are no respondents below diploma qualification. These shows the levels of education of the respondents are also consistent and almost representative of the sample.

The majority of the medical professionals' level of education was first degree and diploma which both accounts 67% of the target population. This indicates that the academic and professional background of the respondents minimize the possibility of higher degree of misunderstanding of the questions asked and thereof the reliability and validity of their responses to individual questions.

On the other hand, the fields of education of the large majority of the respondents (33%) were Professional nurses, while 21% were Medical doctors, followed by 16% who are Midwives, while Anesthetists and Pharmacists were 14% and 4 % respectively. The rest (5%) (Physiotherapists, Imaging, and Environmental health) were 5% and all represent 1% each. This representation of different field of medical professionals has been believed to maximize the degree of inclusion and representativeness of the sample.

In summary, the biographical profile obtained from the sample shows that the main sample characteristics were as follows: The majority of the respondents were between the ages of 20 and 30(40%); female represented 52% of the sample. Out of the total sample, 52 per cent were female respondents and 48 per cent comprises of male respondents and among the total 63 percent were

married and 37 per cent were unmarried. 53% had first degree; 33% were professional nurses; and 48% of participants had dependent children. The level of education of respondents was mostly Bachelor Degree (54.3%).

4.4 The Role of Work life Balance

As is clearly stated in the first chapter, the first objective of this study is to analyze the role of work life balance practices on employee’s retention in public health institutions under AAHB. To meet this objective, the study sought to get the respondents ‘views about WLB practices in their institutions. The respondents were requested to react by ticking whichever was applicable at their hospitals on a five point Likert scale of Strongly Agree (SA), Agree (A), Undecided (UN), and Disagree (DA) and Strongly Disagree (SDA). The closer the responses are to five, the higher their satisfaction with the practices. A score of 3 would indicate indecisiveness while scores significantly below 3 shows dissatisfaction with work life balance practices. The responses obtained were quantified using mean and standard deviation for each independent variable factors and tabulated as follows:-

4.5 The Role of Work life balance policies

Table 4.2 The Role of Work life balance policies

Item	Details	Descriptive Statistics				
		N	min	max	mean	Standard Deviation
Work Life Balance Policies	Retention is enhanced because. . .					
	There is provision of annual leave	134	1	5	3.67	1.15
	There is provision of sick leave	134	1	5	3.67	1.15
	Sabbatical leave is granted	134	1	5	3.5	1.42
	Employees are given study leaves	134	1	5	2.07	1.35
	Staff are given freedom to vary their work schedule	134	1	5	2.7	1.34
	Provision of family- friendly initiative and support	134	1	5	2.63	1.02
Item mean	WLBP	134	2.07	3.67	3.04	1.23

Source: Own Survey (2018)

The above table shows that most of the respondents in each case either strongly agreed or agreed that retention got enhanced because there was provision of annual leave, sick leave, and sabbatical leave. This is indicated by the average mean of 3.67, 3.67, and 3.5 respectively. However, respondents were strongly disagreed or disagreed on the freedom to vary their work schedule and provision of family friendly initiative and support which are indicated by the mean of 2.7 and 2.63 respectively.

The implication of this is that when employees have access to quality and effective work life policies such as different kinds of leave programmes, it is likely to affect employees 'work life balance and retention of employees. Being perceived as having good work-life balance practices allows organizations to enhance their reputation in the public domain. This means that they are also well-positioned to attract and retain greater numbers of job applicants from which a larger pool of better qualified employees can be selected. The finding correlates with the findings of Oludayo et al. (2015) who noted that work life balance policies such as parental leave, medical leave, annual leave, and study leave, among others will make employees to be loyal and committed to the organization.

Additionally, as Bloom & Van Reenen (2006) asserts that firms adopting better WLB policies are the ones who enjoy the benefits accruing to the concept. Grover and Crooker (1995) also found that parental leaves, childcare information and referral, flexible work hours, and financial assistance with childcare predicted both increased affective commitment to the organization and decreased turnover intentions among all employees, not just users of the practices.

4.6 The Role of Flexible Work Arrangement

Table 4.3 the Role of Flexible Work Arrangement

Item	Details	Descriptive Statistics				
		N	min	max	mean	Standard Deviation
Flexible Work Arrangement	Retention is enhanced because. . .					
	Staff are given their off-days as required	134	1	5	3.36	1.10
	Availability of part-time working arrangements	134	1	5	3.28	1.24
	Work schedules are flexible enough	134	1	5	3.2	1.05
	Employees attend to personal issues whenever they are in need	134	1	5	3.17	1.24
Item Mean	FWA	134	3.17	3.36	3.25	1.15

Source: Own Survey (2018)

As per the response of the respondents in table 4.3 the rating on provision off-days as required, availability of part-time working arrangements, and work schedules flexibility were more than average with a mean of 3.36 and 3.2 respectively which indicate that the greater part of the participant's shows agreeability on the statements that their hospitals off-days and work schedules flexibility had enhanced employee retention. While the mean of employees attendance to personal issue when the need arise shows the respondents were almost neutral on the statement.

Therefore, organizations' readiness to make work arrangement more flexible will likely affect rub-off on the employees' WLB. This corroborates the findings of Nuesch (2017) who noted that flexible work practices is fundamental in building acceptable and appropriate workplace attitudes that will culminate in achieving the organizational strategic goals particularly in the highly competitive environment. Meanwhile, the implication of the findings is that any public health institutions that are more sensitive to the new trend of work life balance initiatives in the sector are more likely to increase medical professionals WLB and retain their employees with

distinctive capabilities. This also correlates with the findings of Sheppard (2016) who posited that flexible work arrangement enhances employees' commitment which will invariably increase the level of employee retention.

4.7 The Role of Family Supportive Culture

Table 4.4 the role of family supportive culture

Item	Details	Descriptive Statistics				
		N	min	max	mean	Standard Deviation
Family-Supportive Culture	Retention is enhanced because. . .					
	Provision of onsite childcare services	134	1	5	2.18	1.3
	The supervisors are supportive and caring whenever someone needs such support	134	1	5	3.17	1.05
	There is provision for social and family events	134	1	5	2.85	1.38
	Availability of gyms and mental relaxation programmes	134	1	5	2.57	1.43
	Provision of children education schemes	134	1	5	2.14	1.4
	Availability of health and well-being programmes like health insurance for self and dependents	134	1	5	3.14	1.38
Item Mean		134	2.75	3.18	3.03	1.32

Source: Own Survey (2018)

It is indicated with a mean of 2.18, 2.85, 2.57, 2.14 that respondents disagreed or strongly disagreed that retention was enhanced because of the provision of onsite childcare services, provision of social and family events, , and availability of gyms mental relaxation programmes, and provision of children education scheme. It is also shown that respondents were neutral about the supervisors support and availability of health and wellbeing programmes in their institutions.

The implication of this is that, public health institutions should be expected to work and invest on family supportive policies particularly on provision of onsite childcare services, enhance culture that supports social and family events in order to increase the employees' level of work life balance and their satisfaction which will invariably enhance retention. This finding is in line with the submission of (Bhandari & Soni, 2015; Osibanjo et al., 2016) who noted that the family

care initiative and work life stress management reflects the importance of nurturing supportive culture in terms of embracing the work-life balance initiatives. Moreover, public health institutions that want to tap from the reservoir of its employee’s potentials and earn their engagements would need to look at what to be done to ensure that occasionally, employees have time out and relaxed. This would likely make them refreshed and balance between their work and life.

Table 4.5 Summary Item Statistics on the Work Life Balance practices

Items Mean	Mean	Min	Max	Standard Deviation	N of Items
Work life balance policies	3.04	2.07	3.67	1.23	6
Work Arrangement	3.25	3.17	3.36	1.15	4
Family-Supportive Culture	3.03	2.75	3.18	1.32	6

Source: Own Survey (2018)

The above table represents the summary of descriptive statistics data on the role of WLB practices on employees’ retention in public health institutions. The average mean of work life balance policies (3.04) indicate that, respondents were almost neutral on their hospitals WLB policies on enhancing employees’ retention. Similarly, the average mean (3.03) of family-supportive culture shows that the respondents neutrality where the minimum and maximum mean of 2.75 and 3.18 represent the item with the least agreements and the item with the most agreements respectively. While the mean of work arrangement (3.25) shows the rating more than average and that indicate the greater part of the participant’s agreeability on the practice of flexible work arrangement.

4.8 Employees' Intention to stay or leave

In addition to examining the HRM practices that influence employee retention, the study also sought to find out the respondents' tendency to be retained. Accordingly, employees' intention to stay/leave which is another indicator of retention, the responses were as tabulated in the following table:

Table 4.6 Intention to stay or leave

Descriptive Statistics					
Details	N	min	max	mean	sd
I plan to work in this organization for as long as possible	134	1	5	3.39	1.29
I will most certainly look for a new job in the near future	134	1	5	3.57	1.23
Given an opportunity I would look for a transfer to another station near bigger town.	134	1	5	3.14	1.04
Given an opportunity I would rather be working in a smaller facility	134	1	5	2.59	1.23
I plan to stay on this job for the shortest time possible	134	1	5	3.29	1.24
I would hate to quite this job	134	1	5	3.11	1.42
One of the major reasons I continue to work for this organization is that another organization may not match the overall benefits I have here.	134	1	5	2.39	1.34
Item Mean	134	2.39	3.57	3.06	1.25

Source: Own Survey (2018)

From the table it is clear that the respondents were agreed on whether they planned to work for the organization as long as possible. This is indicated by a mean of 3.39. However, the reason they would continue to work for the institution is not that another organization may not match the overall benefits gained as indicated above by a mean of 2.39. On the other hand, the respondents were either strongly disagreed or disagreed that given an opportunity they would

rather be working in a smaller facility as indicated by a mean of 2.59. Similarly, they were either strongly disagreed or disagreed that they would certainly look for another job in the near future (3.57). However, most of the respondents were neutral if given an opportunity they would look for transfer to stations near bigger towns, and hate to quite their job that represented by a mean of 3.14, 3.11 respectively. A summary of intention to stay is presented in table 4.12 below.

Generally, these responses indicate that despite the poor WLB practices, employees' tendency to leave was low. Because the overall mean of 3.11 indicates that most respondents were neutral. This could have been due to a number of reasons. First the fact that they are already trained in a particular field in this case health care makes it difficult to fit in jobs in other fields. Secondly, the level of unemployment is high in the country with a number of health care trained professionals still out in the labor market and looking for employment. Quitting would thus be treated cautiously. Third, a number of them have dependent children that they would be hesitant to disrupt their livelihoods.

4.9 The Relationship of Work Life-Balance and Employee Retention

The Pearson Correlation Coefficient which is represented by letter r is a number between -1.00 and 1.00 and it is used to measure the degree of relationship between independent and dependent variable. As a result, the higher value of correlation coefficient indicates the stronger the level of relationship between two variables. Positive value of correlation coefficient indicates a positive relationship and in other hand, negative value of correlation coefficient indicates a negative relationship (Osterman, P. (1995). The following table shows the correlation among studying variables:

Table 4.7 Correlation Matrix

	WLB	FWA	FSC	RTN
WLBP	1			
FWA	0.709078341	1		
FSC	0.345532248	-0.123052331	1	
RTN	0.804263013	0.786019449	0.521515061	1

The variable work life balance policy and employee retention has a value of correlation $r=.709^{**}$ as shown in table above, demonstrate that these two variables has a strong positive relationship. Hence, it is concluded that work life balance policies have an impact on the public health sector as it shows a strong relationship with employee retention. This finding is also consistent with previous finding which stated that the accessibility of work-life balance practices has been related to increased affective commitment and decreased turnover intentions (Wood & de Menezes, 2008).

The variable flexible work arrangement has a value of correlation $r = .786^{**}$ which demonstrate that flexible work arrangement and employee retention have a positive relationship. Hence, it is concluded that flexible work arrangement has an impact on health sector employee retention as it shows a strong relationship with employee intention. This finding is consistent with Julien, Somerville and Culp (2011) finding which stated that superior support of flexible work arrangements such as flexible hours and compressed work week were positively related with the ability to balance personal, family and work demands.

Finally, the variable family supportive culture has a value of correlation $r= .0521^{**}$ which indicate that this variable has positive relationship with employee retention. Hence, it is concluded that family supportive culture has significant impact on employee retention in public health institutions. This result is consistent with the finding of a research by Warner and Hausdorf (2009) conducted on work life issues among health care workers in Canada. The results indicated that a positive relationship exists between the organization family support for work-life issues and reduction of work-to-family conflict.

To sum up, according to the findings, the three WLB factors are related to employee retention. This result is consistent with previous literature that highlights the importance of organizational support for WLB in order to achieve high levels of organizational and employee performance (Allen, 2001). Hence, in order to increase employees' retention and reduce their turnover intentions it is necessary to develop and properly implement these WLB practices.

4.10 Effect of Work Life Balance on Employee Retention

The last objective of the study has been determining the effect of WLB on employee retention in selected public Hospitals. The effect of WLB practices on employee retention perceived value was analyzed using simple linear regression model. In this case, employee retention perceived value is the dependent variable whereas work life balance is the independent variable.

Table 4.8 Regression; Coefficients

Model 1	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
Constant	1				
WLBP	3.67	0.35	0.625	1.75	0.05
FWA	3.36	0.30	0.658	2.19	0.05
FSC	2.18	0.40	-0.315	-0.75	0.05

Dependent Variable: Employee Retention

Table 4.9: Regression; Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.996	.993	.655	.355

Source: Own Survey (2018)

As shown in table 4.14 above, a value of $R=0.996$, indicates a positive prediction of the independent variables on the dependent variable, ERTN. The R^2 value of 0.993 indicates that the independent variable explain 99.3% of the variability of the dependent variable. This demonstrates that the 99.3% of employee retentions (dependent variable) can be explained by its three independent variables factors i.e; work life balance policies, flexible work arrangement,

and family supportive culture. While the rest i.e; 1% (100% - 99%) of employee retention is explained by some other variables.

The results also show that the F statistics 144 was significant at ≤ 0.05 % level of significance. Therefore, work life balance has strong power to predict employee retention (i.e., the regression model is a good fit of the data).

The adjusted R-square coefficient indicates 0.655 % of variation in retention was explained by the regression model. The P-values of the t-tests were at .05 % level of significance for the independent variable. In the regression model, the standardization coefficients of work life balance show the effect on retention.

The above table 4.15 shows that the Coefficients, the Beta value demonstrates the involvement of predictors toward its dependent variable. Accordingly, the value of β can be interpreted as, an increasing 1 unit of work life balance policy, increases employee retention by (.62) times. Similarly an increasing 1 unit of flexible work arrangement, increases employee retention by (.65) times. Also, 1 unit loss in family supportive culture, may cause (.31) units of retention to decrease. This was also observed by Sheppard (2016) who noted that employees are more likely to be satisfied and productively engaged if they perceived that there is opportunity for official social support.

Hence it can be concluded that among the three WLB factors for the dependent variable retention, WLB policy and flexible work arrangement are the most contributing variable and having a strongest influence on employee retention in public health institutions. However FSC is a significant but weak predictor of ERTN.

On the other hand, the study also sought to find out if in the respondents' opinion, work-life practices affected staff retention. Accordingly, 68 % out of the 134 respondents either agreed or strongly agreed that retention is influenced by work-life balance practices (as indicated in table below) while (32%) felt that it did not affect the staff retention. This finding is related to a study by (Huang et al, 2007) the influence of work life balance on the turnover intention which proved that an improved work-life balance reduces intention of turnover of employees and thus improve the organizations retention ability.

Table 4.10: Response on the effect of WLB

Items	Response	Frequency	Percent
Valid	Yes	91.0	68
	No	39.0	29
	N	4.0	3
	Total	134	100

Source: Own Survey (2018)

4.11 Other WLB Practices that Influence Employees Retention

The study also sought to find out other WLB practices which might have affected employees' retention. The respondents cited provision of means of transport, cafeteria service, comfortable housing, and provision of motivation, reward and incentives, promotion and recognition, supportive management, good communication culture with the staff, insurance schemes and friendly working hours as factors that play a significant role in employees retention in their hospitals.

When asked the work life balance practices that needed to be put in place to enhance employees' retention in their institutions, the respondents said that employees should be provided with child care services (onsite child care services). They also suggested that length of maternity leave should be increased, and all types of leaves should be provided properly as required. They said that paternity leave days should also be increased because often the fathers reported back for duty when the mothers still needed their assistant most. Others suggested that the number of off days should be increased.

They also suggested that there should be flexible working arrangements such as compressed week, flexible hours, and part- time working arrangements to enable employees attend to personal issues. Others suggested that there should be good working environment including harmonious relationship among employees, supervisors, and management of the hospitals in general. They also suggested that provisions for retreats and recreational opportunities with facilities such as social clubs which will provide avenues for relaxation and good working environment. This finding is similar with earlier study by Dockel (2003); Netswera, Rankhumiasse, and Mavundila (2005) as they put it that retention factors (such as compensation,

training and development opportunities, supervisor support, career opportunities and work–life balance have been shown to facilitate employees’ decisions to leave or stay.

To sum up the respondents felt that if the above mentioned practices were embraced, the health professionals’ WLB would improve, and their tendency to stay would increase hence retention would be improved.

CHAPTER FIVE

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.1. Introduction

This final chapter presents the summary of the study. It also discusses the major findings and conclusions are then drawn based on the findings of the study. Recommendations are also made based on the findings and conclusions of the study. Finally, the chapter ends with suggested future directions for further study in which research can be undertaken.

5.2 Summary of Main Findings

The empirical findings provided statistically significant evidence to support the relationships between the various dimensions of work-life balance (WLB policies, flexible work arrangement and family supportive culture) and employee retention.

WLB policies and employee retention has a strong positive relationship that demonstrated by a correlation value of $r=.709$

Flexible work arrangement has a value of correlation $r = .786$ which demonstrated that flexible work arrangement and employee retention has a strong positive relationship.

Family supportive culture has a value of correlation $r= .0521^{**}$ which indicated that this variable has significant positive relationship with employee retention. However FSC is a significant but weak predictor of employee retention.

On the other hand, an increasing 1 unit of work life balance policy, increases employee retention by (.62) times. Similarly an increasing 1 unit of flexible work arrangement, increases employee retention by (.65) times. Also, 1 unit loss in family supportive culture, results in (.31) retention to decrease. The less family support medical staff provided, the more they think about quitting their jobs.

The effect of family supportive culture on employee retention was however weak according to the statistical result. However, the qualitative result shows that family supportive programmes strongly influence employee retention.

It is found that some WLB policies and practices were more effective than others in affecting employee retention of medical-staff. In particular, annual leave, sick leave, sabbatical leave, day-off and per-time work had a direct effect on enhancing employee retention. WLB practices such as study leave, staff's freedom to vary their work schedule, provision of onsite childcare services, provision of social and family events, availability of gyms mental relaxation programmes, and provision of children education scheme on the other hand, almost had not contributed to enhance WLB of medical professionals in these hospitals.

Beside WLB practices there were other HRM practices such as compensation, work environment, motivation, reward, career development, training and development that had also affect employee retention.

5.3 Conclusions

The study sought to examine the effects of HRM practices specifically effects of work life balance practice on retention of employees and has identified some practices that significantly affect retention and others that do not. The study also sought to determine the relationship between work life balance and employee retention as well as the effects of work life balance on retention. The conclusions drawn from the study are discussed below.

Firstly, it is concluded that employees working in public health care institutions have faced the problems to accomplish the demands between work and life, so there is a need to found the ways to create balance between work and life. Hence there should be some interventions to improve WLB to the desired or maximum level.

Secondly, conclusions from the study point to the fact that work life policies and flexible work arrangement are important and indeed influence employee retention in public health institutions.

Thirdly, this study provides evidence that work life balance had an effect on employee retention in public hospitals. However, some WLB practices such as WLB policies and flexible work arrangement were more effective than others (i.e family supportive culture) in affecting turnover intentions of medical professionals hence retention.

Fourthly, despite the poor WLB practices the employees' tendency to leave was still low. This could have been due to a number of reasons. Therefore it is concluded that retention in public health institution were fairly good.

Fifth, from the results, it is also concluded that besides work life balance, other HRM practices such as compensation, work environment, incentive, career development, training and development, motivation and reward among other also play significant role in enhancing employee retention and should therefore not be ignored.

Finally, there is need for the AAHB to look into the aspects of working life balance practices including other HRM practices and put in place mechanisms that would address these practices and thus minimize their negative effects on employees' retention in public health institutions.

5.4 Recommendations

The findings of the study have some valuable implications for practitioners and organizations alike. It will be particularly useful for health institutions to understand how they can improve their employee retention strategy. Similarly this study holds some vital lessons for HRM practitioners and provides valuable solutions to the problem of employee turnover.

Firstly, to improve employee retention public health institutions should improve and provide employees with comprehensive WLB practices such as child care services (onsite child care services), flexible work arrangements (compressed week, flexible hours and part- time working), family supportive programmes and be introduced to enable employees attend to personal issues.

Secondly, health institutions must vary and increase the kind of WLB practices they initiate from time to time. This is because needs of the employees may change over time. Also the increase in WLB policies has found to enhance retention in these hospitals. Similarly, in designing the WLB

policies, the demands of employees must be taken in to consideration. This means policies must be designed by targeting or considering all dimensions of WLB i.e individual, and organizational aspects in order to be more effective.

Thirdly, WLB practices such as study leave, staff's freedom to vary their work schedule, provision of onsite childcare services, provision of social and family events, availability of gyms mental relaxation programmes, and provision of children education scheme need to be strengthened and implemented properly in order to improve medical professionals in these hospitals.

Fourth, as the current WLB interventions already available in these public hospitals are not good enough to bring the WLB of the employees to the desired level, alternative WLB intervention policies should be considered or put in place. For example practices such as parental leave, study leave, family support, and also provisions of facilities such as work place child care centers, gymnasium, recreation and mental relaxation centers might be very helpful.

Finally, to increase WLB and enhance retention these public hospitals should create a work environment that supports medical professionals' family, introduce new WLB policies and implement it properly, and create more flexible work arrangements.

5.5 Suggestion for Further Research

This study was done in selected public hospitals in Addis Ababa over a period of four months. A longitudinal study should be carried out to monitor the relationship between demographic factors such as the age, marital status, family status, educational level and experience of employees and their intention to stay with the institutions.

This study only examines the effect of WLB practices on employees' retention in public health institutions namely Menilik II referral hospital and Yekatitin 12 memorial hospitals in Addis Ababa. For a better insight into the effects of HRM practices in the public health sector, similar studies should also be done in other public health care institutions such as health centers, health posts and other health institutions in Addis Ababa, and the rest of the country in order to

generalize the findings to all public health care institutions in Ethiopia. Additionally, similar studies should also be done in the private health care institutions.

Moreover, other studies should also be done on the effects of WLB from individual and societal dimension since this study focused on the effect of WLB on employee retention only from organizational dimension.

Further research in this area should focus on the role and effect of motivation, compensation and reward, career development, training and development among others on retention of medical professionals.

Furthermore, this study will assist employers especially HR managers of Menelik II and Yekatit 12 hospitals to make informative decisions regarding HRM practices particularly on WLB and employee retention. Thus the study will assist these health institutions in formulating appropriate retention policies, making informed decisions and adopting strategies that will boost WLB hence retention and productivity in the health sector.

Finally, the research on HRM practices and its effect on retaining employees is a very significant area due to the importance of human resources. However, most of the studies are carried out in the Western world particularly in Europe which partly necessitated this study. It is therefore important that more researchers especially those in Ethiopia continue to explore the area empirically.

5.6 Study Limitations

Since this study aimed to examine WLB practices and their effects on employee retention at public hospitals under AAHB, the drawn results and conclusions from this study might not apply to all public hospitals in Addis Ababa (including other hospitals under AAHB). Because of this, results cannot be generalized. Additionally, though the sample size of this study was adequate to a certain extent, however, a bigger sample size could have boosted the reliability and validity of the data to higher levels. In relation to the literature review there was a lack of research in the Ethiopian context in terms of the relationship between work-life balance and employee retention. This also limited the study.

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Appendix A

INTRODUCTION LETTER

TegegnAssefa

E-mail. tegegnche@gmail.com

Mobile No. 0912042247

Addis Ababa, Ethiopia

January, 2018.

Dear Respondent,

RE: EFFECT OF WORK LIFE BALANCE ON EMPLOYEE RETENTION IN SELECTED PUBLIC HEALTH INSTITUTIONS

I am a post graduate student at Addis Ababa University pursuing a MA in Human Resource Management. In this regard, I am carrying out a research on the above topic, in partial fulfillment for the requirement for the award of the degree. I kindly request you to assist me by filling the attached questionnaire to the best of your knowledge. The information provided will be treated with utmost confidentiality and will only be used for the above indicated purpose.

Yours sincerely,

Tegegn Assefa

Appendix B

Section I

Background information

Please tick (✓) the appropriate response where applicable.

1. Gender

a) Female [] b) Male []

2. Age in years:

a) 20-30 [] d) 51-60 []
b) 31-40 [] e) 61-70 []
c) 41-50 [] f) above 70 []

3. Marital status:

a) Married [] b) Unmarried []

4. Family status:

a) With children [] b) Without children []

5. If with children state if:

a) Dependents [] b) Not dependents []

6. Level of education:

a) Certificate [] d) Masters []
b) Diploma [] e) Doctorate []
c) Bachelors []

7. State the Department in which you work_____

8. Field of education

a) Doctor [] (e) Pharmacist []
b) Radiographer [] f) Dentist []
c) Clinical officer [] (g) Lab technician []
d) Nurse [] h) Physiotherapist []
i) Any other (specify).....

9. Designation

10. Year of attainment of qualification

Section II: work-life balance

1. In your own opinion, do you think work-life balance affect employee retention?

a) Yes []

b) No []

2. The following are statements about work-life balance practices that enhance employee retention in organizations. Please react to them on a five point scale in the levels of Strongly Agree (SA)-1, Agree (A)-2, Undecided (UN)-3, Disagree (DA)-4 or Strongly Disagree (SDA)-5 regarding their applicability in your organization.

Statement	Response				
	SA 1	A 2	UN 3	DA 4	SDA 5
Retention is enhanced due to/because:					
Annual leave is given					
There is provision of sick leave					
Sabbatical leave is provided					
Employees are given study leaves					
Staff are given their off-days as required					
Whenever an employee has a personal issue to attend do they are given time away					
Provision of family- friendly initiative and support					
Availability of part-time working arrangements					
Provision of onsite childcare services					
Work schedules are flexible enough to allow					
employees are given freedom to vary their work schedule					
The supervisors are supportive and caring whenever someone is needs such support					
There is provision for social and family events					
Availability of gyms and mental relaxation programmes					
Provision of children education schemes					
Availability of health and well-being programmes like health insurance for self and dependants					

3. Please mention other aspects of the work-life balance practices not mentioned above that enhance employee retention in your organization

- i.
- ii.
- iii.

4. Suggest work-life balance practices that you feel should be put in place to enhance employees 'retention

- i.
- ii.
- iii.

1. Other than work-life balance practices stated above please state in the spaces below other human resource management practices that you think influence the retention of employees in your institution.

.....

Section III: Intention to stay

Statement	Response				
	A 1	2	N 3	A 4	DA 5
I plan to work in this organization for as long as possible					
I will most certainly look for a new job in the near future					
Given an opportunity I would look for a transfer to another station near bigger town.					
Given an opportunity I would rather be working in a smaller facility					
I plan to stay on this job for the shortest time possible					
I would hate to quite this job					
One of the major reasons I continue to work for this organization is that another organization may not match the overall benefits I have here.					

I sincerely appreciate your time and cooperation. Please check to make sure that you have not skipped any questions inadvertently

Thank you.

Appendix C:

Detail Demographic Characteristics of Respondents

1. Gender of respondents

Items		Frequency	Percent
Valid	Male	56	42
	Female	78	58
		134	100

2. Age of Respondents in Years

Item		Frequency	Percent
Valid	20-30	53	40
	31-40	46	34
	41-50	17	13
	51-60	13	10
	61-70	5	4
	>71	0	
		134	100

Source: Own Survey (2018)

3. Marital Status of the Respondents

Items		Frequency	Percent
Valid	Married	85	63
	Not Married	49	37
		134	100

4. Family Status of the Respondents

Items		Frequency	Percent
Valid	With Children	77	57
	Without Children	57	43
		134	100

Source: Own Survey (2018)

5. Status of Children in the Family

	Items	Frequency	Percent
Valid	Dependents	64	48
	None-Dependents	70	52
		134	100

Source: Own Survey (2018)

6. Level of Education

	Item	Frequency	Percent
Valid	Certificate	0	0
	Diploma	24	18
	Bachelor	71	53
	Masters	11	8
	Doctorate	28	21
	Others	0	
		134	100

Source: Own Survey (2018)

7. Field of Education

No.	Job position	Frequency	Percent
1	Medical doctors	28	21
2	Professional nurse	43	33
3	Midwifery	22	16
4	Health officers(HO)	10	7
5	Anesthesia	19	14
6	Pharmacists	5	4
7	Laboratories	2	1
8	Physiotherapists	1	1
9	Imaging	1	1
10	Environmental health	1	1
11	Psychiatric nurse	2	1
	Total	134	100

Source: Own Survey (2018)