Investigation on Work-Life Balance of a Nurse: Antecedent and Consequence

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Background: Emotional Intelligence (EI) is required in maintaining work-life balance (WLB). The ability to recognise both   through emotions or feelings, as well as the joy felt during working would encourage nurses to remain working in the hospital and feel happy as they are working. **Purpose:** This research investigates antecedent and consequence emerged by WLB within the live of nurses in Indonesia. **Methods:** The study was conducted on 5 private hospitals in Greater Malang, East Java. The selection of those hospitals was done using the multi-stage sampling technique. The sample size was 253 nurses with a response rate of 63%. Data analysis used was the Statistical Package for Social Sciences (SPSS). **Result:** The result of the research shows that EI influences positively on WLB and work satisfaction. WLB also becomes the mediating variable between emotional intelligence and work satisfaction. **Conclusion/Implication for Practise:** This finding is in line with Social Exchange Theory, as when an employee believes that their organisation has a commitment to them, they on the contrary also have a commitment to the organisation. The limitation of this research focuses more on the internal side of a nurse, while the focus of WLB is a balance between work and personal life. Therefore, further research needs to input some external factors such as: support from the organisation; the quality of nurse's work; or the work-life quality of a nurse so that it will be able to describe clearly the concept of WLB.

Key words: *Emotional Intelligence, Work-Life Balance, Job Satisfaction, Nurse.*

Introduction

Work-life balance (WLB) has been a hot topic for discussion among researchers lately (Gulbahar et al., 2014). The survey carried out by Nielsen (2012) shows that WLB has become the second biggest issue after financial stability, of 24% out of 500 employees in Indonesia (Jakarta Post, 2012). Study YouGov found evidence that bad WLB could have an important effect on the employees (YouGov, 2017). They tend to be more detached from their lives in general than most people, they envy their friends' lifestyle (34%) and they feel isolated by modern life (46%). Besides, the finding also shows that 25-34 year olds are unhappy with their work-life balance (YouGov, 2017).

WLB is described as harmony and comprehensive integration between the work and non-work, so that it can reach the potential throughout the domain and play their roles well (Benito, Muñoz & Villar, C., 2015). WLB is about how to help employees maintain a healthy and useful lifestyle which influences an increase in their working performance (Grimm, 2017). Byrne (2005) states that when talking about WLB, there are five components that link to each other and how the employees combine these five components to become one. These components are work, family, friends, health and self-motivation.

In the nursing profession, the concept of WLB is a strategic issue (Thew, 2019), despite that WLB for nurses is very hard to achieve (Mullen, 2015). It is even considered as a myth (Thew, 2019). It is caused by a high working demand, uncertain schedules and basically their altruistic characteristic so that it is hard to say "no" when someone needs a help (Mullen, 2015). A low level of WLB often causes exhaustion and work dissatisfaction (Ang et al., 2016). However, the study carried out by Vredenburgh & Trinkaus (1983) states that most nurses feel happier when they have achievement and satisfaction with their work rather than to trying to get a balance between work and life. Integration of achievement and the joy of a satisfying role produce a positive emotional state known as WLB (Winefield, Boyd & Winefield, 2014).

In Indonesia, the composition of nurses has reached the highest number (49%) compared to other health forces (Department of Health, 2017). According to the research from National Institute for Occupational Safety and Health (NIOSH) and National Board for Work Safety and Health, nurses are one of the professions with a high risk due to stress (Fuada, Wahyuni & Kurniawan, 2017). The study carried out by the survey of Persatuan Perawat National Indonesia (PPNI) (National Nurses Union) (2006) shows that 50.9% of the nurses working in four provinces in Indonesia suffered from stress because of work (Sasanti & Shaluhiyah, 2016) and it causes unbalanced work and family. Such unbalance may be harmful for the organisation (Kumarasamy, 2016). Therefore in this research, there is a need to carry out a

thorough study on WLB of nurses, especially the influencing variable and the consequence of the WLB.

Theoretical Overview and Hypotheses

Social Exchange Theory suggested by John Thibaut and Harold Kelley (1959) shows that someone will expect something equivalent in return for the sacrifice contributed.

Such condition is aligned with the concept of WLB, since someone with a good personal life would contribute with an increasing performance (Hughes & Bozioneles, 2007). However, the fact is that work life and personal life of someone could provide conflicting demand on each other and the demands from both domains are equally important (Krishnan & Raj, 2016).

Parkes and Langford (2008) show that WLB is maintaining a balance between the responsibility in the workplace and at their home. The balance could be achieved by someone with EI (Krishnan & Raj, 2016; Kumarasamy, 2016; Vasumathi & Sagaya, 2017). EI had been acknowledged as one of the most important factors determining the professional success and social adaptation from personality within modern society (Jakupov et al., 2014). Goleman (1998) states that EI plays a very important role in maintaining the quality of human relation in the professional world. Especially for nurse professions, EI is an important thing since there are interactions with the patients, which becomes the pulse in the practice of nursing (Krishnan & Raj, 2016). A nurse who has good self-awareness would able to direct her feelings. This ability is useful in making decisions, either ones related to personal or work issues, so that it could maintain the WLB (Krishnan & Raj, 2016). EI involves the ability which could be categorised as self-awareness, empathy, emotional maintenance, self-motivation and handling relationships with other people (Goleman, 1995), and all this is needed in maintaining WLB (Sharma, 2014). Therefore, it could be said that El is the significant predictor (antecedent) of WLB (Kumarasamy, 2016).

The ability to recognise either emotions or feelings well, as well as the joy felt during the working hours would encourage employees to keep working in the organisation and feel happy working (Khani & Lalardi, 2012). Such positive emotion is a satisfactory experience achieved in all domains of life (Kirchmeyer, 2000). WLB facilitate the life balance in work of each individual and is an important factor capable of supporting an increased work satisfaction (Hutcheson, 2012). Maintaining WLB well will bring the consequence of achieving good satisfaction in the working environment as well as non-working environment (Aamir et al., 2016, Shankar et al., 2016, dan Yadav & Dabhade, 2014).

Hypotheses

Emotional Intelligence as Antecedent of Work-Life Balance

Salovey & Mayer (1990) were the first researchers to suggest the name 'emotional intelligence' to represent the ability in handling emotion. EI was defined as an ability to understand access and produce emotion so that it could help with thinking, emotional knowledge and maintaining emotional reflectively to increase emotional and intellectual growth (Mayer & Salovey, 1997). Three EI conceptualisations are used in this research adopted from Salovey & Mayer (1990), they are self-emotional appraisal, others emotional appraisal and the use of emotion. The use of these three dimensions is considered as very precise for nurses, since they have loyalty to their patients and their partners. They often put others' need above their own needs and sometimes even before their family needs (Mullen, 2015). The occupation as a nurse is a very great responsibility (Mullen, 2015).

Understanding emotional needs would encourage WLB, which means that nurses with higher EI would have higher WLB (Kumarasamy, 2016; Shylaja & Prasad, 2017). Nurses with high EI (self-emotional appraisal, others emotional appraisal and use of emotion) would be able to influence other people's emotion, so that they would be able to balance the time spent and the involvement psychology in fulfilling the demands either from family or work (Krishnan & Raj, 2016; Kumarasamy, 2016; Shylaja & Prasad, 2017; Vasumathi & Sagaya, 2017). Many researchers have tested the influence of EI with work-life balance, however research independently testing each dimension of EI and WLB is still rare. The objective is to recognise the dimension of EI that is the most influencing predictor towards WLB, therefore the hypotheses proposed are:

Hypothesis 1a, 1b and 1c: self-emotional appraisal, others emotional appraisal and the use of emotion would influence nurse's time balance.
Hypothesis 1d, 1e and 1f: self-emotional appraisal, others emotional appraisal and the use of emotion would influence the involvement of nurse's balance.

Nurses with high EI would increase positive interpersonal relationships (Schutte et al., 2001) for their personal lives (Lopes, Salovey & Straus, 2003; Zeidner & Kaluda, 2008) and it is also important for the quality of relationships in the workplace (Jordan & Troth, 2011). Jordan & Troth (2011) found that emotional awareness felt by a nurse and the ability to maintain the emotion predicted the exchange between the leader and employee, when the quality is increased it leads to work satisfaction (Brunetto, Teo, Shacklock & Farrwharton, 2012). The research by Sy et al., (2006) found that someone with a higher EI tends to have higher work satisfaction, since such employee performs better in assessing and maintaining

their feelings and with others in the workplace, which eventually would affect positively on moral and work satisfaction. Therefore, the hypothesis is:

Hypothesis 2a, 2b and 2c: Nurses with high self-emotional appraisal, other high emotional appraisal and the high use of emotion tend to have high work satisfaction.

Work Satisfaction as a Consequence of Work-Life Balance

WLB is a condition of someone who is able to balance between work demands and the life outside of work (Mariati, 2013). For a nurse, maintaining WLB (time and involvement balance) well is an important thing that might be able to help achieve work satisfaction as well as satisfaction outside of work (Aamir, Hamid, Haider & Akhtar, 2016; Krishnan, 2016). The research conducted by Shadab & Arif, (2016) who observed the working hours, WLB and work satisfaction, found evidence that there had been positive influences between WLB on work satisfaction. When someone has WLB, they would feel more positive and prouder of the organisation that hires them leading to an increase in their work satisfaction (Mas-Machuca et al., 2016). The study carried out by Brandt & Orkibi (2015) discovered that WLB was defined as the main mediator between the employee and their view on positive work satisfaction. Therefore the hypothesis would be:

Hypothesis 3a and 3b: Nurses with good time balance and good involvement balance would tend to have high work satisfaction.

WLB as Mediation from EI and Work Satisfaction

WLB is an important issue faced everyday especially by nurses (Krishnan & Raj, 2016; Thew, 2019). Good EI provides good WLB (Krishnan & Raj, 2016; Kumarasamy, 2016). Likewise a nurse with high emotional intelligence would affect their high WLB (Krishnan & Raj, 2016; Kumarasamy, 2016; Shylaja & Prasad, 2017; Vasumathi & Sagaya, 2017), which would encourage work satisfaction since they feel more positive and proud of their organisation. (Aamir et al., 2016; Ganapathi, 2016; Shankar et al., 2016; Yadav & Dabhade, 2014; Kumari, 2012; Shujat, 2011). Various studies have found evidence that the variable WLB is mediator variable from many relationship channels (Nasrudin & O'Driscoll, 2012; Brandt & Orkibi, 2015). Therefore the hypothesis developed is:

Hypothesis 4a and 4b: Time balance and involvement balance moderate the influence of EI for work satisfaction.

Social Demography as Controlling Variable

Various research shows that social-demographic factors have positive effects towards work satisfaction, gender and the age of the employee (Dormann dan Zapf, 2001; Ho & Au, 2006), the working experience and the level of education (Fairbrother & Warn, 2003) as well as the level of income (Coomber & Barriball, 2007; Singh et al., 2016; Pugh & Subramony, 2016). The study carried out by Leiter and Maslach (2003) discovered the presence of a significant positive relationship between work life quality with work experience and the age of the industrial employee in Bangladesh, followed by a positive association between the income and the quality of work life among hospital employees (Singh, 2006; Hussain et al., 2017). Therefore, the hypothesis would be:

Hypothesis 5a and 5b: There are some influences between variable socio-demography (age, gender, education and tenure) towards nurse's work satisfaction and WLB.

Research Method

This research is survey-based quantitative research, using a questionnaire delivered to the respondents. The research was carried out for three months (October-December 2018) using a cross-sectional technique. Ethical approval was obtained from Panti Waluyo Sawahan Hospital, Malang No. 2214/1750/Sckr.OO/RSPW/IX/2018, on September 22, 2018.

Participants

The research was carried out in 5 private hospitals in Greater Malang, East Java. The selection of those hospitals was done using a multi-stage sampling technique. Firstly by determining private hospitals in Malang that had been operating for at least five years (Neir & Tankha, 2015). The second stage was nurses who had at least three years of tenure. 400 questionnaires were distributed. In order to ensure a high level of response the questionnaires were distributed directly to the respondents through officers on duty in each hospital. Brief instructions were given on how to fill out the questionnaire correctly. All respondents in each hospital were given 1 month to fill out the questionnaires. One month after the distribution of questionnaires, a reminder was sent to the officer in charge. The completed questionnaires were received from all representatives in two months. Of the 305 questionnaires received, only 253 were fully completed and could further be processed, therefore the response level was 63%.

Measures

Emotional Intelligence. The measurement of EI adopted by Wong & Law (2002) used the 5 point Likert scale. The dimension established consisted of 3 factors: self-emotional appraisal,

other emotional appraisal and use of emotion of 9 items. Validity test (> 0.70) and reliability (0.853) showed a valid and reliable result.

Work-Life Balance. WLB is measured using the 5 point Likert scale (from the scale of (1) "very balanced" to (5) "very unbalanced), adopting McDonald et al., (2005), and using 2 factors: time balance and involvement balance. The test result of 6 items showed a valid and reliable result with validity test (> 0.57) and reliability (0.825).

Work Satisfaction. The five point Likert Scale was used to measure 10 question items, adopted from Luthans (2006). It consisted of 5 factors: the occupation itself, salary, promotion opportunities, monitoring and work mates. Validity test (> 0.60) and reliability (0.803) showed a valid and reliable result.

Control Variables. Control variables consisted of age, gender, education and tenure.

Data Analysis

The data collected from the questionnaires were analysed using the Statistical Package for Social Sciences (SPSS) for its statistical analysis. Pearson correlation coefficient was used to establish the relation between variables and hierarchical regression analysis to test the influence of independent variable towards dependent variable as well as to test the influence of WLB moderation variable on the relation between EI and work satisfaction.

Results

Descriptive statistics showed that the majority of nurses were female (82.6%) and in the range of age of 31-40 years old (52.9%). Most of the respondents (33.7%) had more than ten years of tenure. Marital status of (91.7%) was married. Most of the nurses' education was a diploma (70.9%). The Pearson correlation analysis was used to test the relationship among the research variables. Table 1 shows the matrix of Pearson correlation of Social-demography EI, WLB and work satisfaction.

Table 1: Correlation matrix

	Variables	M	SD	1	2	3	4	5	6	7	8	9	10
1	Age	32.08	6.14	1									
2	Gender	1.82	0.38	0.17*	1								
3	Education	2.47	0.91	0.07	-0.03	1							
4	Tenure	9.13	6.01	0.89**	0.21**	0.02	1						
5	Self-Emotional Appraisal	4.24	0.44	-0.01	-0.06	0.09	-0.04	1					
6	Others Emotional Appraisal	0.41	0.47	0.06	0.04	0.17*	0.06	0.61**	1				
7	Use of Emotion	4.18	0.37	0.07	0.12	0.11	0.08	0.34**	0.37**	1			
8	Time Balance	4.08	0.56	0.14	-0.02	0.01	0.14	0.30**	0.34**	0.35**	1		
9	Involvement Balance	4.28	0.52	0.00	0.05	-0.02	0.01	0.40**	0.35**	0.23**	0.54**	1	
10	Work satisfaction	4.14	0.35	0.11	0.01	0.16*	0.07	0.69**	0.70**	0.36**	0.19*	0.23**	1

* Correlation is significant at the 0.05 level (2-tailed).

** Correlation is significant at the 0.01 level (2-tailed).

Table 1 shows that age has a very strong correlation towards the tenure ($r = 0.89$, $\rho = 0.00$). Strong correlation is shown on self-emotional appraisal towards others emotional appraisal ($r = 0.61$, $\rho = 0.00$) and work satisfaction ($r = 0.69$, $\rho = 0.00$). On the dimension of others emotional appraisal, a strong correlation is seen on relationship channels with work satisfaction ($r = 0.70$, $\rho = 0.00$). Use emotion has a medium correlation on time balance ($r = 0.35$, $\rho = 0.00$) and tenure ($r = 0.36$, $\rho = 0.00$), and so is the relationship between time balance towards involvement balance ($r = 0.54$, $\rho = 0.00$) which shows a strong relationship. Age is a social demographic factor with the determinant value of (M = 32.08) in explaining WLB and work satisfaction and tenure has also become another important factor in explaining WLB and work satisfaction (M = 9.13).

Table 2: Results of Hierarchical Regression Analyses

Independent Variables	Model 1	Model 2		Model 3
	Work satisfaction	Time Balance	Involvement Balance	Work satisfaction
Step 1. Control-Demographic Variables				
Age	0.17**	0.19**	-0.01	0.18**
Gender	0.00	-0.05	0.05	-0.05
Education	0.15**	0.00	-0.02	0.15**
Tenure	0.18**	0.07	0.01	0.18**
R^2	0.04	0.02	0.00	0.04
F	0.15	0.41	0.98	0.15
Step 2. Antecedentt-Emotional Intelligence				
Self-Emotional Appraisal	0.39**	0.27**	0.28**	0.42**
Others Emotional Appraisal	0.42**	0.23**	0.26**	0.46**
Use of Emotion	0.11**	0.18**	0.12**	0.15**
R^2	0.62	0.21	0.20	0.67
ΔR^2	0.58	0.19	0.19	0.58
F	0.00**	0.00**	0.00**	0.00**
Step 3. Mediator-Work Live Balance				
Time Balance				0.13**
Involvement Balance				0.15**
R^2				0.64
ΔR^2				0.02
F				0.00**

[a] All standardised regression coefficients are from the final step in the analysis. n = 253.
*p < 0.001; ** p < 0.05

From this research, three models were developed using three stages as mentioned by Baron & Kenny (1986), in order to check the influence of WLB mediation using hierarchical regression analysis.

The analysis result in Table 2, shows that the value of ρ out of χ^2 either self-emotional appraisal ($\rho = 0.00$) others emotional appraisal ($\rho = 0.01$) and use of emotion ($\rho = 0.041$) was under the value of significant level expected (0.05), therefore supporting H.1a, H.1b and H.1c. On the track of the influence between emotional intelligence towards WLB, the

analysis result shows emotional appraisal ($\rho = 0.01$), others emotional appraisal ($\rho = 0.02$) and the use of emotion ($\rho = 0.04$) has significant influences towards involvement balance; this finding proves the support of H.1d, H.1e and H.1f. The results analysis shows that a nurse with high EI would be able to maintain self-emotion and others positively so that they would be able to balance the amount of time spent and their involvement psychologically in fulfilling their role in the workplace and the family. The result of hierarchical regression analysis reveals support for Hypothesis 2a, 2b and 2c (see Table 2). Self-emotional appraisal, others emotional appraisal and the use of emotion significantly influence work satisfaction ($\rho = 0.00$, $\rho = 0.00$, $\rho = 0.00$; respectively).

Hypothesis 3a and 3b testing, found evidence of support towards H.3a and H3b, with the value of $\rho = 0.00$ and $\rho = 0.02$. To test the mediation effect on hypothesis 4a and 4b, the analysis of traditional mediation from Baron & Kenny (1986) was used. The results analysis shows that either time balance and involvement balance (WLB) is a mediator between the relationship of EI and work satisfactory, therefore supporting hypothesis of 4a and 4b. Table 2 shows that the regression coefficient on model 1 from emotional appraisal is from 0.39 to 0.42 on model 3. Likewise, other emotional appraisal also has a regression coefficient value on model 1 and 3 (0.42 - 0.46). In the use emotion the regression coefficient value is 0.11 on model 1 and 0.15 on model 3.

The results in Table 2 show that the age ($p = 0.048$), education ($p = 0.046$) and tenure ($p = 0.049$) are less than the level of significance expected (0.05). It confirms their influence on work satisfaction, where the respondents agree that movement within such variable demographic influence work satisfaction. While on the gender ($p = 0.881$) influence insignificantly towards work satisfaction. Therefore, it could be concluded that H.5a is partly supported, where the result of such research is aligned with the Dhamija, Gupta & Bag (2018).

However the analysis of WLB shows that only age, which has significance of value under 0.05 ($p = 0.04$) towards time balance, while involvement balance of demographic social factor does not have any significant influence. Therefore, it does not support Hypothesis 5b, since most of the factors is not proven significantly towards WLB.

Discussion

The main contribution in this research is to prove that EI is an antecedent of WLB, while work satisfaction is the consequence caused by the presence of good maintenance of WLB. This study also explains the role of WLB as a mediation variable of EI and work satisfaction. The findings reveal that EI is a significant predictor of WLB and confirms the research from Sharma (2014); Kumarasamy, (2016); Krishnan & Raj, (2016). Besides, significantly good

maintenance of WLB would increase work satisfaction as the consequence caused, along with Aamir et al., (2016), Shankar et al., (2016); Yadav & Dabhade (2014); Kumari (2012); Shujat (2011).

Based on the findings EI is an important factor that is able to influence WLB of nurses. To use EI someone must be able to process emotional information produced by others, as well as by themselves and use it to navigate the social environment (Salovey & Mayer, 1990). When someone exploits EI they must be able to maintain their emotions, must have a good understanding about their emotions (self-emotional appraisal) and become a good decision maker and control themselves to reach the objectives (Gross, 1988; Wong & Law, 2002). According to Wong & Law (2002), most of our emotional response is also stimulated by other people's emotions, therefore an understanding about our own emotions is needed and related to the ability to understand others (others emotional appraisal). Through such self-understanding someone could develop their capacity to use their emotions by directing them to constructive activities and personal performance (use of emotion).

The researcher's highlights that the practice of WLB adopted by the organisation helps in increasing work satisfaction (Aamir et al., 2016; Shankar et al., 2016; Yadav & Dabhade, 2014; Kumari, 2012; Shujat, 2011). Kofodimos (1993) states that an unbalance in life and work produce a low level of life quality and decrease in work effectiveness. Creating WLB may produce a huge satisfaction at home and in the workplace, which would produce a higher performance of the employee and reduce turnover. Konrad & Mangel (2000) have highlighted that the policy of WLB could decrease the conflict of work and family which caused the increase on the work satisfaction. The satisfied employees are found to have more commitment (Pryce et al., 2006) which eventually could influence the profit (Comfort et al., 2003). Therefore, the practice of WLB would increase work satisfaction.

It also applies to nurses when they could exploit EI, then they also know how to: enjoy their team work; reduce stress; find themselves; feel motivated; develop empathy; communicate with their workmates; maintain time with family members which could fulfil the need of their family members; and also build a good relationship with their spouse. Good understanding about themselves made the nurse understand how to influence other people and be able to balance their personal life and work. Furthermore, what is felt by the nurse and how they express their emotions influences their performance and such skill helps them solving problems in the workplace or within their family. The point is, the nurse who could use EI has the ability to understand and to maintain other people's attitude, and also is able to do better in their work and their personal life.

Mediation analysis results show that WLB is a mediation variable influencing EI and work satisfaction. Good management of WLB will trigger EI which eventually increases work

satisfaction. In line with the research carried out by Greenhause & Allen, 2011; Ferguson et al., 2012; Mansour & Tremblay, 2016, the individual with good WLB would possibly be satisfied with their work and life. The result also emphasised the importance of increasing the work support in terms of organisation intervention initiative, in order to increase the dimension of WLB nurse and the work satisfaction (Sudarsan, 2017).

Based on the analysis of social demography, it is proven that age and the tenure have become the significant predictor of WLB and work satisfaction. This is because older nurses have the skills in making adjustments to the environment where they work, compared to the younger ones (Shah et al., 2004). Besides, the younger nurses tend to not be satisfied since they have high expectation and less adjustment (Davis & Newstroom, 2004). It means that the more experienced nurses enable the addition of knowledge and competence of the nurse, likewise an understanding related to their work.

These findings are in line with the Social Exchange Theory (Harlod Kelley, 1959), where the basic theory is the bonding relationship from time to time becomes a relationship where they trust each other, are loyal and commit to each other as long as both parties follow the rule of exchange (Cropanzano dan Mictchell, 2005). Eisenbergr (1986) states that the approach of social exchange includes the belief of employees about how they are treated by the organisation and how the organisation is committed to them. When the employees believe that the organisation is committed to them, they would in return also commit to the organisation. It also applies to WLB, when the employees feel that their personal life is fulfilled then they would contribute well by increasing their performance. A balanced condition would affect employees' satisfaction.

Conclusion

The research shows that there is a positive relationship between EI towards WLB and work satisfaction. On the mediation effect, the results show the significant influence of the WLB dimension on emotional intelligence to increase work satisfaction especially on health. An increasing EI would increase WLB. The nurse who could maintain their personal emotion could develop their skill on such constructive tasks and could maintain their personal life along with their work. The balanced maintenance would bring work satisfaction since the proportional composition between personal life and work. The research study shows that EI is a determinant variable that could increase work satisfaction, however, when WLB became the mediation variable, then the value of EI increases. This shows that EI is very needed especially by the nurse, since the profession of nursing demands emotional balance. "Do not ever let your emotion take over your intelligence power, learn to control your emotion for a better life"(Krishnan & Raj, 2016).

Managerial Implication

Based on the findings there are two managerial findings offered. Firstly the finding show that EI is a determinant factor. Therefore, nurses need to develop their self-love more. When the nurse has a positive feeling for herself, then there would have empathy towards other people. Positive affirmation towards nurses could be done through fun activities through training building character. When the nurse has a strong character then the EI would be at the maximum position, so that they would reach WLB.

Secondly WLB is a factor of mediation from the relation of EI and work satisfaction. Therefore, the organisation needs to be aware about the importance of WLB. The organisation needs to understand that sometimes they need to reduce the nurse's work in order to meet WLB. Therefore, organisations must make sure that they have the program availability or a policy that tolerates the nurses to prioritise their personal life when needed. Besides, it is important for the employee to know that they were not sentenced for using the program or policy (Batt & Valcour, 2003). An organisation must provide support in terms of training and development so that the nurse would have the skills needed to accomplish their duties or their work under low pressure. Autonomy could wildly be given to the nurse so that they have the authority to make decisions to finish their work.

Limitation and Future Research

There are two limitations in this study; firstly the research performed focused more on the internal side of a nurse, while the focus of WLB is a balance between work and personal life. Therefore, this research could not really describe external support towards the balance of work and personal life. External support is needed to describe the current condition, so that it could explain more comprehensively the concept of WLB. Secondly the research was carried out cross-sectionally, while EI could not be separated from the individual development.

For further researchers, first they need to include external factors, such as organisational supports or the quality of nurse's work life so that it will be able to describe clearly the concept of WLB. Secondly a longitudinal study needs to be carried out in order to understand the development of EI which will influence WLB.

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