Work-Life factors that affect the Job’s productivity of the working females in health sector of Pakistan

Syed Husnain Raza
Master of Philosophy in Management Science
Lahore Business School, The University of Lahore, Islamabad Campus, Pakistan

Abstract

Purpose—The objective of the study is to evaluate the role of flexible benefits as moderator between work-life conflicts and Organizational Commitment, Knowledge Sharing Behavior and Organizational Citizenship Behavior.

Design/Methodology/Approach—This study is descriptive in nature and based on primary data. SPSS is used to investigate the frequencies, descriptive statistics, reliability analysis, correlations analysis, regression analysis and moderation analysis of the theoretical model. The achieved sample for the current study consisted of 168 nurses and 72 female doctors working in the hospitals operating in Gujranwala City.

Findings—Overall finding of the quantitative analysis proved that the entire three moderation hypotheses proved true and are significant. It means that flexible benefits play a vital role as moderator between the effect of work-life conflicts on Organizational commitment, Knowledge sharing behavior and Organizational Citizenship behavior of females working in the hospitals operating in Gujranwala.

Limitations—There are two main limitations of the current research study, first is time and second one is in the form of cost which should be taken into consideration if any generalization or conclusions are to be drawn from the research findings.

Practical Implications—This research study is very helpful for human resource department in planning and decision making process. The study was conducted to establish the work-life factors i.e. Flexible benefits, work-life conflicts are affecting the jobs productivity of the working females in order to attract and retain professional women within hospital environment and to moderate the impact of work-life conflicts on organization citizenship behavior, knowledge sharing behavior and organizational commitment.

Originality/value—This is the first study in Pakistan on Health Sector which demonstrates that the flexible benefits plays vital role in moderating the impact of work life conflicts on employee commitment, knowledge sharing behavior and citizenship behavior.

Keywords—Work-life conflicts, Jobs productivity, Flexible benefits, Human Resource Development, Organizational citizenship behavior, Knowledge sharing behavior, Organization commitment.

1. Introduction

Balancing job work, house life work and child care responsibilities can become strenuous which can result in work-life conflicts. And these conflicts affects both the organization and employees (M. & j., 2004). There exist some balances in job work and house (family) work life and these balances are described as the equilibrium between job responsibilities at organization and personal work at home. Work life and family work life at home are the two sides of the same coin. And these based on reality that work life of a person and personal life of the person are interrelated with each other and these two aspects of life are mutually dependent. It is important to organize our job work commitments with future goals and our responsibilities of house life. Recent research says that more than 60% respondents are unable to find a balance between their job life which can be called professional life of a person and house life is known as personal life of the person (jones, November,2002).

Work life benefits are very fruitful for working females in the hospital sector in building their job’s productivity. Females are facing these problems when they are performing job at the hospitals as their family especially children get neglected due to their job life and due to this work-life conflict females are not in the position to give quality time to their families. Due to this work-life conflicts their minds will remain absent on the job and cannot pay full attention to their job work. And this conflicts result in poor job productivity in sense of organization citizenship behavior, knowledge sharing behavior and organizational commitment.

A strong planning is needed to plan work life benefits. And these benefits play vital role for a hospital organizations to attract and retain more capable and qualified female doctors, paramedical staff and nurse. These work life benefits can be very helpful to improve satisfaction, efficiency at
job, strengthening workplace learning of female doctors and paramedical staff. And these benefits can also prove very effective in helping employees to manage change within the hospital staff. Work life conflict is the problem of every employee in these days due to tense job life. Work life conflict problems, can affect almost all employee’s life, regardless of their position or status in the organization (Dr. K. Jawahar Rani, 2012). Issues related to work stress, pressure, long working hours, anxiety, harassment etc. can be reduced by doing effective planning and introducing flexi-timing, job rotation, career growth, family get-together, children school funds, child care centers etc., which results in motivating employee to perform well at job’s work and to give full attention to their job (Jones, November, 2002). When work life benefits will be provided by the health organizations to the doctors, nurses and paramedical staff, there will be increase in job’s productivity of the working females, fruitful team work and communication, high morale, low organizational stress (Erin L. Kelly, 2014). This study can be very helpful to health care professionals to find the relationship among Flexible benefits, Work-life conflicts, Organizational behavior, Knowledge sharing behavior and Organization citizenship behavior of working females in hospitals organizations. These result of the study results are applicable on hospitals and these results are very much useful for the formulation of polices for the future and taking Human Resource Development decisions for the betterment of working females in hospitals.

2. Literature Review

2.1 Introductory Literature Review

The hospital management needs to evaluate the reasons for improper work-life balance and lay down strategies to overcome the hurdles and make the doctors, nurses and paramedical staff productive (E. G. Lambert, N. L., 2010). The encouragement of the proper balance between the work and life is one of the greatest challenges of the 21st century. Working females now face the problem of caring their parents in addition to their children, while the organizations demand for the increase hours and improved performance from the doctors and the paramedical staff. Due to these drawbacks the working females are attracted towards the hospitals that can help them to balance their jobs as well as their work life (Flexiabe Working Practices, August 2001). Due to the economic constrains today in the world, women continue their career which mean that most females return to their jobs on their workplaces in their child first year (Braske.s, November 2002). Some experts believe that workers should reduce their own stress by simplifying their lives and making a better effort to care for their health but most experts feel that the chief responsibility for reducing stress should be management (M. L. Griffin N. L.-G., 2010). When the hospital administration provides healthy practices on work-life balance, the outcome of health care provided is also healthy (Parker, 2010.). The organization support is also an indicator for positive treatment, patient satisfaction, employee’s satisfaction and long term success of the hospital. Availability of good work life balance leads to increased intake of skilled doctors, nurses and paramedical staff, reduces turnover, increases job satisfaction level, commitment, dedication and positive health care provisions at large (Corporate Reporting System., 2010). Activities like training & development programs, health awareness programs, soft skill programs like stress management, conflict management, leadership skills, workshops on talent technologies in medicine, work-life balance workshops can be introduced (Wilkerson, 2010.).

(M. L. Griffin N. L.-G., 2010) Defined job stress "as a worker’s feelings of job-related tension, anxiety, frustration, worry, emotional exhaustion, and distress" (E. G. Lambert, 2010) defined burnout as a "syndrome where the worker experiences emotional exhaustion, depersonalization, and a reduced sense of personal accomplishment. According to (Jones, November, 2002) pressures from the job and family domains are often incompatible, giving rise to imbalance. Work-family conflict is defined as “a form of inter-role conflict in which work and family demands are mutually incompatible, meeting demands of both the domains is difficult” (Higgins, 2007). Empirical evidence confirms that work-family conflict is often a severe stress factor at work leading to various negative outcomes including impaired well-being (Karatepe O.M., 2006). “Stress is defined as a non-specific response of the body to a stimulus or event”, (Kavanagh, 2005). In English, stress is defined as the “pressure or anguish resulting from difficult situations” (Parayitam, 2008) (Alves, 2004) “Stress refers to workers not being able to adapt to work and therefore involves some Biological and psychological reaction” (Hsieh, 2004). Employee performance is the level of productivity of an individual employee, relative to his or her peers on numerous jobs with related behaviors and outcomes. Work life enhancement involves three main categories the work and family, life satisfaction and job satisfaction. (Babin J., 1998). This triangle is of great importance in achieving the personal and professional objectives effectively and efficiently. (D. Head, April 30, 2010.). Factors that
have the greater impact on the job satisfaction are improper work-life balance, work pressure, improper working environment, growth pressure, and salary and job security. The job satisfaction of the doctors, nurse and paramedical staff are absolutely important for the smooth functioning and successful upcoming of the health care industry (A. Day, 2010.). Due to the economic constrains today in the world women continue their career which mean that most females return to their jobs on their work places in their child first year (Braske.s, November 2002). (NR, 2008) conducted a staff survey of employees, which provided a brief overview of the link between HRM practices, employee well-being at work and performance. In an increasingly busy world, a work life strategy is an attempt to achieve a balance between work and home. There is a saying that clearly explains this idea: "Work to live. Don't live to work" (Lakshmipriya, 2008, April 22)

The benefits can increase the work life productivity of the working females are listed below. (Jones, November, 2002)

- job sharing
- working shifts to accommodate child care
- working part-time
- Paid family leave for parental responsibility
- Day care facilities
- Maternity leave
- Extra-ordinary leave (EOL)
- Child birth gifts/allowances
- Sick leaves
- Study leave
- Infant at work program
- Phase back Policies

2.4 Flexible/Fringe Benefits

Indirect financial and non-financial compensation honored to an employee or group of employees as a part of organization is termed as flexible benefits (Mathis and Jackson, 2003).

2.5 Organization Citizenship Behavior

Dennis Organ is generally considered the father of OCB. Organ (1988) defines OCB as “individual behavior that is discretionary, not directly or openly recognized by the formal reward system, and that in the aggregate supports the effective functioning of the organization”. Organ’s definition of OCB includes three critical aspects that are central to this construct. First, OCBs are supposed of as discretionary behaviors, which are not part of the job description, and are performed by the employee as a result of individual choice. Second, OCBs go above and beyond that which is an enforceable condition of the job description. Finally, OCBs contribute positively to overall organizational effectiveness. At the same time, Organ's (1988) definition of OCB has generated a great deal of criticism. The very nature of the concept makes it hard to operationally define. Critics started questioning whether or not OCBs, as defined by Organ, were discretionary in nature. Organ (1997), in response to criticisms, notes that since his original definition, jobs have moved away from a clearly defined set of tasks and responsibilities and have advanced into much more vague roles. Without a defined role, it swiftly becomes difficult to define what is discretionary.

2.6 Knowledge Sharing Behavior

Knowledge sharing behavior means how much employees are interested or motivated to share their job knowledge with others. (Serban, 2002) define as Knowledge sharing is an action through which knowledge (namely, information, skills, or expertise) is exchanged among people, friends, families, communities, or organizations. Organizations have recognized that knowledge creates a valuable intangible asset for creating and sustaining competitive advantages. Knowledge sharing activities are mostly promoted by knowledge management systems. However, technology founds only one of the many factors that affect the sharing of knowledge in organizations, such as organizational culture, trust, and incentives. The sharing of knowledge creates a major challenge in the field of knowledge management because certain employees tend to resist sharing their knowledge with the rest of the employees.
2.7 Organizational Commitment

Gibson et. al. (2009) defined commitment as a behavior of employee sense of identification, loyalty and involvement towards the organization where the employee is working. Researchers also define organizational commitment as the employees’ feeling of responsibility to stay with the organization (Allen and Meyer, 1990). In the current study organizational commitment is dependent variable. A well-known model proposed by Allen and Meyer (1990) described that there are three components of organizational commitment, namely, affective, continuous and normative commitment. Allen and Meyer described that the affective commitment refers to the employee’s emotional affection to, identification with, and involvement in the organization. The continuous commitment refers to commitment based on the costs that the employee links with leaving the organization. The normative commitment mentions to the employee’s feeling of responsibility to stay with the organization.

3. Theoretical Framework

3.1 Independent Variable

On the basis of extensive literature review, the researcher selected work-life conflict as an independent variable in order to assess its impact and relationship on dependent variables that are given below (yasmin 2011).

3.2 Dependent Variables

Researcher select three dependent variables i.e. Organizational commitment, Knowledge sharing behavior and Organizational citizenship behavior after reviewing the extensive literature review on these variables (yasmin 2011, Riagama, 2010).

3.3 Modifying Variable

Researcher selects flexible benefits as a moderator between work-life conflicts and organizational commitment, knowledge sharing behavior and organizational citizenship behavior of employee.

3.4 Schematic Diagram

There were six sections in the research questionnaire. In first section, personal information of the respondents was collected. In second section, respondents rated 10 questions on a 5-point Likert scale (1= strongly disagree through 5= strongly agree) about work-life Conflicts. In third section, respondents rated 14 questions on a 5-point Likert scale (1= strongly disagree through 5= strongly agree) about Flexible benefits. In forth section, respondents rated 10 questions on a 5-point Likert scale (1= strongly disagree through 5= strongly agree) about Organizational commitment. In fifth section, respondents rated 11 questions on a 5-point Likert scale (1= strongly disagree through 5= strongly agree) about Knowledge sharing behavior. In last section, respondents rated 12 questions on a 5-point Likert scale (1= strongly disagree through 5= strongly agree) about Organizational citizenship behavior of working females in Health sector. A questionnaire was designed to collect the data form Hospital organizations.

4. Research Methodology

4.1 Research Approach

Based on the nature of the study depth quantitative research approaches were employed.

4.2 Research Questionnaire
behavior. All respondents were asked to take their current Hospital organization into consideration while completing the questionnaire.

4.3 Response Rate

The data for this study include responses from 32 Hospitals operating in Gujranwala City. The achieved sample for the current study consisted of 168 nurses and 72 female doctors working in the hospitals operating in Gujranwala City. The data was collected through 275 survey questionnaires in which 240 resulted in completed responses.

4.4 Statistical techniques

Descriptive statistics techniques such as frequency distribution, arithmetic mean, Skewness, Kurtosis and standard deviation were applied to disclose the general pattern of responses. These techniques are used early in the analysis process and become bases for later analysis (Burns & Bush, 2001).

4.5 Statistical software

Computer software “Statistical Package for Social Sciences” (SPSS) 22th edition was used for descriptives and statistics techniques. In descriptives like frequencies, mean, skewness, kurtosis, standard deviation was calculated and Statistical techniques like reliability test, correlations and regression analysis and moderation analysis was used.

5 Result and Findings

5.1 Description of Personal Characteristics

It is evident from the analysis of frequency distributions that the most subjects were nurses (70%). And the majority of the subjects are married (60%). The majority of the subjects were of 21-30 years age group that is representing the total of (55%). Subjects predominantly have Diploma (65%). The majority of the subjects have the tenure of service 1-3 years (60%). Most subjects belong to private sector banks (75%).

5.2 First Hypothesis Verification

First hypothesis of the research study is derived from First research objective and the research question which is: Is the effect of work-life conflicts on organizational commitment of working females in hospital organizations moderated by Flexible benefits? And First hypothesis of the research study is ‘Flexible benefits moderate the relationship between Work-life conflicts and Organizational Commitment of working female in hospital organizations’.

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Outcome: Organizational Commitment

Product terms key:

Interaction 1 Work-Life Conflicts X Flexible Benefits

Overall model: F (3, 236) = 21.37, P<.001, R²=.20

Predictors:
- Flexible Benefits b=.57, t(236)=7.30, p=.00 – significant
- Work-life conflicts, b=.24, t (236)=4.3, p=.00 – significant
- Interaction b = -.06, t(236)=4.14, p=.00 - significant
R-square increase due to interaction(s):

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Conditional effect of X on Y at values of the moderator(s):

Slopes for Work-life conflicts predicting organizational commitment at each level of Flexible benefits

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</table>

Y = constant + .57(Flexible benefits)+.24(Work-life conflicts)+ (-.06) (Work-life conflicts*Flexible benefits)
Y= constant + 0 + .24 (Work-life conflicts) + 0

5.2.1 Interpretation of H1 hypothesis results

Overall moderation model is significant because p = .0000. Model summary show that there is a significant role of moderator i.e. Flexible benefits between the effect of work-life conflicts on Organizational Commitment because p <.001. For low Flexible benefits Work life conflicts b = .4570, t (236) = 5.55, p= .00 = significant, it shows that for low Flexible benefits there is moderate positive relationship between Work-life conflict and Organizational Commitment. And for average Flexible Benefits, Work life conflicts b = .2403, t (236) = 4.310, p=.00 = significant, it shows that for average Flexible benefits there is low positive relationship between Work-life conflict and Organizational Commitment. And for high Flexible Benefits, Work life conflicts b = .0236, t (236) = .3373, p=.7362 = Not significant, it shows that for high Flexible benefits there is a no relationship between Work-life conflict and Organizational Commitment.

Result shows that the effect of work-life conflicts on organizational commitment of working females in hospital organizations moderated by Flexible benefits. So, First research hypothesis H1 proves true that ‘Flexible benefits moderate the relationship between Work-life conflicts and Organizational Commitment of working female in hospital organizations’.

5.3 Second Hypothesis Verification

Second hypothesis of the research study is derived from Second research objective and the research question which is: Is the effect of work-life conflicts on Knowledge sharing behavior of working females in hospital organizations moderated by Flexible benefits? And Second hypothesis of the research study is ‘Flexible benefits moderate the relationship between Work-life conflicts and Knowledge sharing behavior of working female in hospital organizations’. 

**************************************************************************

Model = 2

Y = Knowledge Sharing Behavior (KSB)
X = Work-Life Conflicts (WLC)
M = Flexible Benefits (FB)
Sample size 240

**************************************************************************

Outcome: Knowledge Sharing Behavior

Model Summary

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**************************************************************************
Product terms key:

Interaction_2 Work-Life Conflicts X Flexible Benefits

Overall model: F (3, 236) = 21.37, P<.001, R²=.28

Predictors:
- Flexible Benefits b=.50 , t(236) =10.47 , p=.00 – significant
- Work-life conflicts, b=.06 , t (236)=1.39 , p=.16 – NOT significant
- Interaction b = -.04 , t(236)= -4.23, p=.00 - significant

R-square increase due to interaction(s):

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Conditional effect of X on Y at values of the moderator(s):

Slopes for Work-life conflicts predicting Knowledge sharing Behavior at each level of Flexible benefits

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<th>Effect(Slope)</th>
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</table>

Y = constant + .50(Flexible benefits) +.06(Work-life conflicts) + (-.04) (Work-life conflicts*Flexible benefits)
Y= constant + 0 + .06 (Work-life conflicts) + 0

5.3.1 Interpretation of H2 hypothesis results

Overall moderation model is significant because p = .0000. Model summary show that there is a significant role of moderator i.e. Flexible benefits between the effect of work-life conflicts on Knowledge sharing behavior because p <.001. For Low Flexible Benefits, Work life conflicts b = .2295, t (236) = 6.49, p=.00 = significant, it shows that for low Flexible benefits there is low positive relationship between Work-life conflict and Knowledge sharing behavior. And for average Flexible Benefits, Work life conflicts b = .06, t (236) = 1.39, p= .139 = Not significant, it shows that for average Flexible benefits there is no relationship between Work-life conflict and Knowledge sharing behavior. And for high Flexible Benefits, Work life conflicts b = -.1001, t (236) = - 1.28, p= .1196 = Not significant, it shows that for high Flexible benefits there is a no relationship between Work-life conflict and Knowledge sharing behavior.

Result shows that the effect of work-life conflicts on Knowledge sharing behavior of working females in hospital organizations moderated by Flexible benefits. So, Second research hypothesis H2 proves true that ‘Flexible benefits moderate the relationship between Work-life conflicts and Knowledge sharing behavior of working female in hospital organizations’.

5.4 Third Hypothesis verification

Third hypothesis of the research study is derived from Third research objective and the research question which is: Is the effect of work-life conflicts on Organizational Citizenship behavior of working females in hospital organizations moderated by Flexible benefits? And third hypothesis of the research study is ‘Flexible benefits moderate the relationship between Work-life conflicts and Organizational Citizenship behavior of working female in hospital organizations’.

**************************************************************************
Model = 3
Y = Organizational Citizenship Behavior (OCB)
X = Work-Life Conflicts (WLC)
M = Flexible Benefits (FB)
Sample size    240
**************************************************************************
Outcome: Organizational Citizenship Behavior
Model Summary

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Model

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Product terms key:

Interaction_3  Work-Life Conflicts  X  Flexible Benefits

Overall model: F (3, 236) = 106.18, P<.001, R^2=.36

Predictors:

- Flexible Benefits b= -.01 , t(236) =-.27 , p= -.78 –NOT significant
- Work-life conflicts, b=.05 , t (236)=1.2 , p=.22 – NOT significant
- Interaction b = -.10 , t(236)= -9.2, p=.00 - significant

R-square increase due to interaction(s):

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Conditional effect of X on Y at values of the moderator(s):

Slopes for Work-life conflicts predicting Organizational Commitment Behavior at each level of Flexible benefits

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</tbody>
</table>

Y = constant + (-.01)(Flexible benefits) +.05(Work-life conflicts) + (-.10) (Work-life conflicts*Flexible benefits)

Y= constant + 0 + .05 (Work-life conflicts) + 0

5.4.1 Interpretation of H3 hypothesis results

Overall moderation model is significant because p = .0000. Model summary show that there is a significant role of moderator i.e. Flexible benefits between the effect of work-life conflicts on Organizational Citizenship behavior because p <.001. For Low Flexible Benefits, Work life conflicts b = .4264, t (236) = 15.41, p=.00 = significant, it shows that for low Flexible benefits there is moderate positive relationship between Work-life conflict and Organizational Citizenship behavior. And for average Flexible Benefits, Work life conflicts b = .0568, t (236) = 1.21, p=.22 = Not significant, it shows that for average Flexible benefits there is no relationship between Work-life conflict and Organizational Citizenship behavior. And for high Flexible Benefits, Work life conflicts b = -.3128, t (236) = -3.78, p= .00 = significant, it shows that for high Flexible benefits there is a moderate weak relationship between Work-life conflict and Organizational Citizenship behavior. Result shows that the effect of work-life conflicts on Organizational Citizenship behavior of working females in hospital organizations moderated by Flexible benefits. So, third research hypothesis H3 proves true that ‘Flexible benefits moderate the relationship between Work-life conflicts and Organizational Citizenship behavior of working female in hospital organizations’.

7. Conclusion

Results show that Flexible benefits have significant impact as moderator between the work-life conflicts impact on Organizational Commitment,
Knowledge sharing behavior and Organizational citizenship behavior. To gain the organizational goals top management have to seriously focus on their employee productivity. They should realize critical aspects of work-life conflicts on their employees organizational commitment, knowledge sharing behavior and organization citizenship behavior and top management should enhance the level of benefits that they are providing to their employee in order to enhance the job productivity of their employee in sense of organization commitment, knowledge sharing behavior and organizational citizenship behavior.

8. Limitations
There are two main limitations of the current research study, first is time and second one is in the form of cost which should be taken into consideration if any generalization or conclusions are to be drawn from the research findings. Generalization of the study is limited, as this study was conducted within one industry setting. The model of work-life factors impact on job productivity to be further tested in other industries of country like, education sector, telecommunication companies etc.

9. Implications
This research study is very helpful for human resource department in planning and decision making process. This study is helpful for the hospital organizations to increase organization citizenship behavior, knowledge sharing behavior and organizational commitment by providing Flexible benefits and minimizing the impact of work-life conflicts. By offering benefits organization can retain existing workforce and this will be result in low recruitment and training cost of the organization.

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