

The Effect of Work-Life Balance, Work-Family Conflict, and Family-Work Conflict Moderated by Work Stress on Midwives' Performance at Bahteramas Regional General Hospital, Southeast Sulawesi

Indri Muliasari¹, Dedy Takdir Syaifuddin², Sudirman Zaid³, Juharsah⁴

¹ Student, Program Doctoral in Management Science, Halu Oleo University, Indonesia

^{2,3,4,5} Lecturer, Program Doctoral in Management Science, Halu Oleo University, Indonesia

Corresponding Author: **Indri Muliasari**

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Abstract:

The purpose of this study was to examine the effect of work-life balance, work-family conflict, and family-work conflict, moderated by job stress, on midwife performance at Bahteramas General Hospital, Southeast Sulawesi. Another objective was to analyze the impact of Work-Life Balance, Work-Family Conflict, and Family-Work Conflict, moderated by Job Stress, on midwife performance at Bahteramas General Hospital, Southeast Sulawesi. The population in this study was all 56 midwives working at Bahteramas General Hospital, Southeast Sulawesi, using a saturated sampling technique, which included the entire population as a sample. Data from the research variables were analyzed using structural equation modeling (SEM) with the Smart PLS program. The results of the study indicate that work-life balance has a positive but insignificant effect on midwife performance, work-family conflict has a negative but significant effect on midwife performance, family-work conflict has a positive but insignificant effect on midwife performance, work stress has a positive but insignificant effect on midwife performance, work-life balance, moderated by work stress, has no significant effect on midwife performance, work-family conflict, moderated by work stress, has no significant effect on midwife performance, and family-work conflict, moderated by work stress, has no significant effect on midwife performance at Bahteramas Hospital, Southeast Sulawesi.

Keywords: *Work Life Balance, Work Family Conflict, Family Work Conflict, Stress, Performance, Midwife.*

Introduction

Human resources are a vital asset for any organization, particularly in the public service sector, such as hospitals. The success of an institution is largely determined by the ability of its human resources to optimally carry out their roles. Therefore, the quality of employee performance is a primary concern in organizational management. In the modern workplace, institutions need to recognize the importance of investing in employees, particularly in creating a conducive work environment that supports efficiency and effectiveness (Rohmah et al., 2022). The midwifery profession, as part of the healthcare workforce, plays a strategic role in ensuring the safety of mothers and babies. Midwives not only perform technical midwifery functions but also bear significant social responsibilities, both as professionals and as family members. The success of midwifery services depends not only on technical competence but also on the midwife's psychological well-being and work-life balance.

One of the issues midwives frequently face in carrying out their duties is Work-Life Balance (WLB). WLB is a condition in which a person is able to balance responsibilities between work and personal life, without causing excessive stress or role conflict (Clark, 2000). However, in the context of working in a hospital, achieving work-life balance is a challenge. Midwives are required to work shifts, including nights and weekends, deal with emergencies, and still fulfill their roles at home as mothers, wives, and family members. This imbalance can cause physical and mental exhaustion, and affect the quality of midwives' performance and psychological health (Shobitha & Sudarsan, 2014). Conversely, with good time management and family support, midwives who have WLB tend to be able to carry out their dual roles more effectively.

Furthermore, in relation to role balance, the phenomenon of Work-Family Conflict (WFC) is inevitable. WFC is a form of role conflict in which work demands interfere with an individual's role in family life. For example, when midwives have to work overtime or treat patients in emergency situations, this can disrupt family activities such as taking children to school or attending family events (Rasheed et al., 2018). Work pressures carried over to the home can disrupt harmonious family relationships and create additional stress. Persistent WFC can reduce job satisfaction and increase the desire to resign. According to Soomro et al. (2017), WFC is bidirectional and can have a significant impact on work performance and mental health.

In contrast, Family Work Conflict (FWC) occurs when family responsibilities interfere with an individual's performance at work. For example, a midwife may have to leave or postpone work due to a sick child or family event. FWC can reduce work focus and increase the risk of errors in care, particularly in the delivery room, which requires high levels of

concentration. FWC is often experienced by female healthcare workers due to social expectations that still place women primarily responsible for domestic matters (Mahavianpoor & Mirjafari, 2018). Several studies have shown that FWC is closely linked to decreased performance and increased absenteeism (Ngek, 2018; Wang et al., 2019). However, not all studies agree on the effect of FWC on performance, as personality factors and organizational support also influence the dynamics of this conflict.

One of the impacts of an imbalance in professional and personal roles is work stress. Work stress is a state of psychological distress experienced by individuals due to work demands exceeding their capacity or personal resources (Lumban Gaol, 2016). Work stress can arise from various factors, such as heavy workloads, role conflict, an unsupportive work environment, and poor interpersonal relationships (Nasution, 2017). In the context of midwives, work stress can arise when faced with difficult deliveries, infant or maternal mortality, or high administrative demands. Several studies have shown that work stress has a significant impact on employee performance, both positively and negatively. If managed properly, stress can be a trigger for work motivation. However, if excessive, stress can lead to burnout, decreased productivity, and even depression (Putri & Rahyuda, 2019; Farha et al., 2021).

Midwife performance, as an outcome of role balance and stress management, is a key indicator of successful healthcare services. Midwife performance significantly determines the quality of obstetric and neonatal care, as well as the safety of mothers and infants (Ministry of Health, 2007; IBU, 2003). In reality, midwives who are able to effectively manage their dual roles and manage work stress tend to have high performance. Conversely, role imbalance and uncontrolled stress can reduce the quality of care provided. Therefore, a more in-depth study is needed to determine the relationship between WFC, FWC, work stress, and midwife performance.

This research is also based on role theory proposed by Kahn (1964). This theory states that each individual has different social roles, each with different expectations, responsibilities, and demands. When these roles are incongruent or even contradictory, role conflict arises, which can impact an individual's well-being and performance. In this context, midwives have multiple roles, including as professionals, family members, and members of the community. An imbalance between these roles can cause psychological stress and reduce performance.

Previous research has yielded mixed results. Most studies found that WFC and FWC significantly influence employee performance (Azlia et al., 2021; Rohmah et al., 2023; Zain & Setiawati, 2019), but some studies showed no significant effect (Aminah Ahmad, 2008; Warokka et al., 2015; Muhareni et al.,

2022). These discrepancies in results create a research gap that needs to be addressed, particularly by considering job stress as a mediating variable. Research by Farha et al. (2021) and Putri & Rahyuda (2019) demonstrated that job stress can mediate the relationship between role conflict and performance, thus explaining how the pressure from role conflict can translate into a tangible impact on work performance.

This study replicates and expands on Yuwanti's (2023) study, which examined the influence of work-life balance, work-family conflict, and family-work conflict on the performance of coordinator midwives, with job satisfaction as a moderator. However, unlike that study, this study eliminated the work-life balance variable because no significant relationship was found, and instead focused on the role of work stress as a mediator of the influence of WFC and FWC on performance. The subjects of this study were midwives at Bahteramas General Hospital, most of whom are married and work in shifts. The phenomenon of role conflict and work stress is very real and relevant to study in order to improve the work quality and overall well-being of healthcare workers.

Literature Review

Work Life Balance

A popular work-life balance theory was put forward by Clark (2000), who defined work-life balance as how an individual manages and negotiates the boundaries between work and family, thus achieving balance between the two. At the heart of this theory is the idea that "work" and "family" are distinct entities that can influence each other. Furthermore, Lazar, Osoian, and Ratiu (2010) argue that it is crucial to understand that work-life balance does not mean devoting equal amounts of time to paid work and unpaid roles. Rather, more broadly, work-life balance is defined as a satisfactory level of engagement or "congruence" between the various roles in one's life. Another explanation is offered by Hudson (2005), who defines work-life balance as the level of satisfaction or compatibility between the roles an individual holds in their life. This aligns with the definition put forward by Greenhaus, Collins, and Shaw (2003), who define work-life balance as the extent to which an individual is harmoniously engaged and satisfied in their work and non-work roles. Greenhaus, Collins, and Shaw (2003) argue that work-life balance is a degree and continuum that stops at a point due to an imbalance of support between one role and another. Individuals who devote more time and energy to one role than another will relatively cause an imbalance. The same thing was also expressed by Fisher, Bulger, and Smith (2009) that work-life balance is an effort made by an individual to balance the roles they play in their life. Based

on the opinions of several experts above, it can be concluded that work-life balance is a state of low conflict between personal life and work demands that is attempted by individuals so that the roles they play can run in balance or harmony.

Work Family Conflict

Work family conflict is typically conceptualized as a type of stress within conservation of resources theory (Hobfoll, 1989). When individuals attempt to balance work and family demands, they may experience or be threatened with loss of resources such as time and energy, leading to resource pressures such as time and energy, which lead to stress, which is a form of work-family conflict (Grandley & Cropanzano, 1999). Interrole conflict is a form of role conflict in which stress arises from participation in other roles. Khan et al. (1964) provide an example of interrole conflict, namely work that exceeds working hours or taking home work, which then gives rise to pressure from the spouse (husband) at home for more attention, and then this conflict arises between roles as a vocal person. Khan et al. (1964) added that interrole conflict is experienced when increased stress in one role conflicts with another role. Khan et al. (1964) emphasized that this stress incompatibility arises when participation in one role makes the other role difficult. Greenhaus and Beutell (1985) define work-family conflict as a form of role conflict where the demands of work and family roles are mutually incompatible in some respects. Frone (2000) defines work-family conflict as a form of role conflict where the demands of work and family roles are incompatible in some respects. Work-family conflict occurs in various forms (Greenhaus and Beutell, 1985). Work-family conflict according to Frone, Russel, and Cooper, (2012) in Darmawati (2020) is defined as an unpleasant situation that occurs due to role conflict that occurs in employees, on the one hand employees have to do work in the office and on the other hand have to pay attention to the family as a whole, making it difficult to distinguish between work interfering with family and family interfering with work. Work interfering with family means that most of the time and attention is devoted to doing work so that time for family is reduced. Conversely, family interfering with work means that most of the time and attention is used to resolve family matters interfering with work. According to Foley and Yu (2005) as quoted by Mayasari (2018), conflict between work and family can originate in the work domain which can interfere with family or family can interfere with work responsibilities. According to Gregson & Auno in Winanta (2019) defines role conflict as a mismatch of expectations related to roles. Work-family conflict is one form of inter-role conflict, which arises due to pressure or role imbalance between roles at work and roles in the family. In

other words, work-family conflict is a form of role conflict where the demands of work and family roles are mutually incompatible in some respects. In meeting the demands of his family, the person is influenced by the ability to meet the demands of his work, or vice versa, in meeting the demands of his work role is influenced by the ability to meet the demands of his family. Based on several definitions of work-family conflict above, it can be concluded that work-family conflict is a conflict that occurs in individuals who have dual roles between roles in work and roles in the family.

Family Work Conflict (FWC)

Family-work conflict (FWC) is defined as a form of inter-role conflict where the pressures of work and family roles conflict, that is, carrying out work roles becomes more difficult because of also carrying out family roles, and vice versa, carrying out family roles becomes more difficult because of also carrying out work roles (Greenhaus and Beutell, 1985). Family-work conflict is explained as a form of inter-role conflict where the pressures of work and family roles conflict, that is, carrying out work tasks becomes more difficult because of also carrying out family tasks, and vice versa, carrying out family roles becomes more difficult because of also carrying out work roles (Elahi et al., 2022). Measurement of work-family conflict according to Netemeyer et al. (1996) there are five indicators of family-work conflict, namely: family demands interfere with work, family results in job loss, family interferes with work desires, family interferes with work responsibilities, family busyness interferes with coworkers. Family-work conflict (FWC) occurs because of a mismatch between existing and expected things. Women tend to report work being interfered with by family. Family-work conflict (FWC) can lead to stress at work because it forces individuals to engage in behaviors that conflict with differing authority levels, such as spending extended time with family and working long hours (Failasuffuddin, 2003). Family work interference means that a significant portion of time and attention is devoted to family matters, disrupting work (Murtiningrum, 2005). For example, when a family member is seriously ill or a child has a high fever, this can be a mental burden and prevent them from performing optimally at work. It can even lead to serious mistakes that could result in termination of employment. Family-work conflict (FWC) occurs when there is a discrepancy between what is available and what is expected. Women are more likely to report that their work is disrupted by family. Family-work conflict (FWC) can lead to stress at work because it forces individuals to engage in behaviors that conflict with differing authority levels, such as spending extended time with family and working long hours (Failasuffuddin, 2003). Family work interference means that a significant

portion of time and attention is devoted to family matters, disrupting work (Murtiningrum, 2005). For example, when a family member is seriously ill or a child has a high fever, this can be a mental burden and prevent them from performing optimally at work. It can even lead to serious mistakes that could result in termination of employment.

Work Stress

Job stress is a state of tension that affects a person's emotions, thought processes, and physical condition. Work stress experienced by employees can help improve performance, but conversely, it can also hinder performance. This depends on the level of stress experienced by employees. Job stress results in low performance if there is no effort to face work challenges. Conversely, job stress results in high performance if it helps employees direct all their abilities to meet various job requirements or needs (Handoko, 2021). Job stress is a dynamic state that a person faces when forced to face opportunities, obstacles, or demands related to what they want, while at the same time the outcome is considered uncertain but very important (Robbins and Timothy, 2020). Stress is a state of tension that affects a person's emotions, thought processes, and physical condition (Davis et al., 2021). From these two definitions, it is concluded that job stress is a state of imbalance between a person's personality characteristics and the characteristics of aspects of the job, and can occur in all work conditions. Occupational stress is an adaptive response, linked to individual characteristics and/or psychological processes, which is a consequence of any external action, situation, or event that places specific psychological and/or physical demands on a person. Stress experienced by workers as a result or other consequence of the work process can develop into physical and mental illness, so that workers are no longer able to work optimally.

Midwife Performance

Law No. 36 of 2014 concerning health workers defines health practitioners as individuals dedicated to the health sector and possessing knowledge and skills from specific health sciences that enable them to perform legitimate health actions. The performance of health workers is a crucial element in ensuring adequate health services to achieve optimal health. The existence of health workers and health human resource management are two interrelated elements in the management of human resources in the health sector. Health human resource management encompasses various disciplines working in the health sector. Health workers themselves consist of doctors, nurses, pharmacists, midwives, laboratory personnel, administrative staff, and

accountants. Performance is the result of work achieved by an individual in carrying out their assigned tasks based on their skills, experience, sincerity, and time. Performance is a combination of three important factors: the ability and interest of an employee, acceptance of explanations, delegation of tasks and roles, and the level of motivation of an employee. The higher the level of the above factors, the greater the employee's performance. The work results achieved by an employee must be able to provide an important contribution to the company seen from the quality and quantity aspects felt by the company and are very beneficial for the company's interests in the present and future (Irwanda, 2020). Performance is the achievement of individual or group work achievements in a job with goals that have been determined together beforehand (Dinahaji, 2022). Employee performance is the work results achieved by employees in an organization in accordance with the authority and responsibility given by the organization in an effort to achieve the vision, mission, and goals of the organization concerned legally, without violating the law and in accordance with morals and ethics (Maulizar, 2012). Performance is the result or level of success of a person as a whole during a certain period in carrying out tasks compared to work result standards, targets or goals that have been determined in advance and have been mutually agreed upon (Rivai, 2004 in Maharani, 2013).

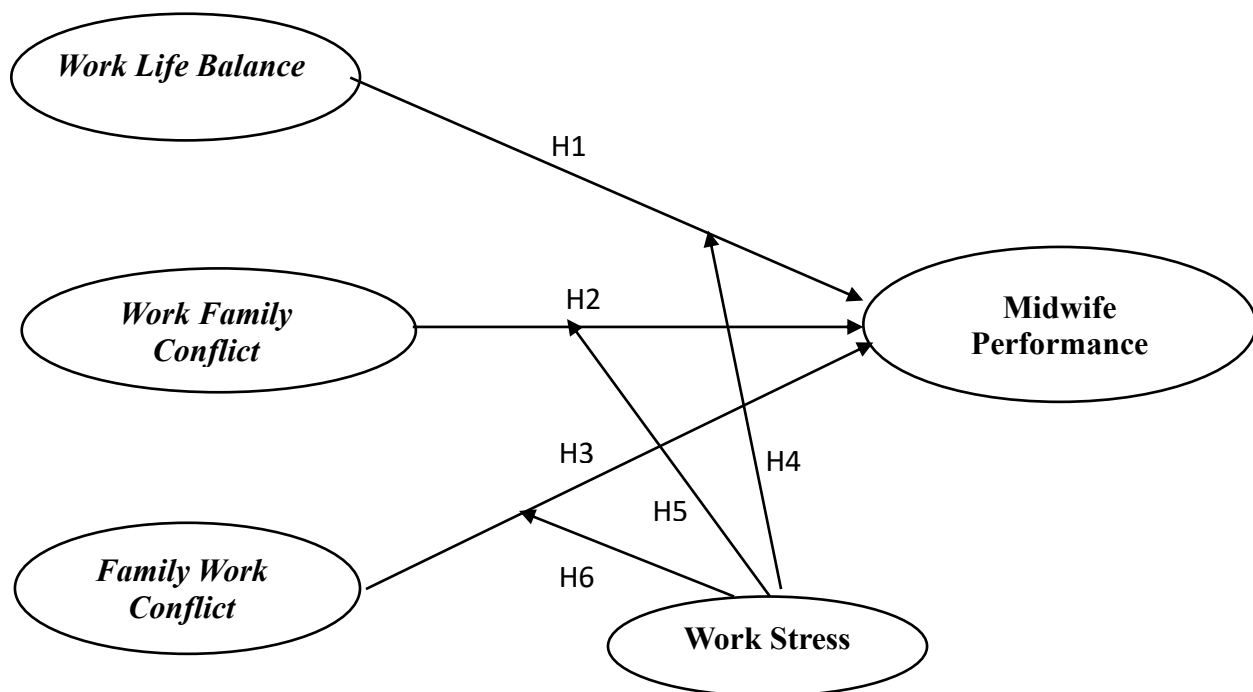


Figure 1 Conceptual Framework

Research Hypothesis

- H1:** Work-life balance has a significant impact on the performance of midwives at Bahteramas Hospital, Southeast Sulawesi.
- H2:** Work Family Conflict has a significant impact on the performance of midwives at Bahteramas Hospital, Southeast Sulawesi.
- H3:** Family Work Conflict has a significant impact on the performance of Midwives at Bahteramas Hospital, Southeast Sulawesi.
- H4:** Work stress has a significant effect on the performance of midwives at Bahteramas Hospital, Southeast Sulawesi.
- H5:** Work Life Balance moderated by work stress has a significant effect on the performance of midwives at Bahteramas Hospital, Southeast Sulawesi.
- H6:** Work Family Conflict moderated by work stress has an impact on the performance of midwives at Bahteramas Hospital, Southeast Sulawesi.
- H7:** Family Work Conflict moderated by work stress has an impact on the performance of midwives at Bahteramas Hospital, Southeast Sulawesi.

Research Methods

The research will be conducted at Bahteramas General Hospital in Southeast Sulawesi Province. The population in this study will be all 56 midwives working at Bahteramas General Hospital, Southeast Sulawesi. According to Sugiyono (2021), a sample size is a subset of the population's size and characteristics. In this study, the researcher determined the sample size to be 56 midwives working at Bahteramas General Hospital, Southeast Sulawesi. Meanwhile, the research approach used is SmartPLS. The SmartPLS approach is a development of PLS (Partial Least Square) analysis.

Research Result

Evaluation of Measurement Model (Outer Model)

The work-life balance variable indicators consist of Work Interference with Personal Life, Personal Life Interference with Work, and Work-Personal Life Enhancement. The factor loading values for each work-life balance indicator can be seen in the following table:

Table 1 Evaluation of Work Life Balance Variable Model

Indicator	Outer Loadings	t-statistic	p-value
Work Interference with Personal Life (X1.1)	0,802	4,159	0,000
Personal Life Interference With Work (X1.2)	0,442	1,603	0,110
Work Personal Life Enhancement (X1.3)	0,628	3,395	0,001

Source: Smart PLS 3 Data Processing, 2025

Based on table 1 above, it appears that of the five indicators that reflect the work-life balance variable (X1), namely work interference with personal life, personal life interference with work, work-personal life enhancement. Two of the three indicators have an outer loading value greater than 0.5 and are statistically significant because the calculated t value is greater than the t table (1.98) or the p value is smaller than 0.05, namely work interference with personal life and work-personal life enhancement. Based on the outer loading value, it is known that the two indicators are dominant in forming the work-life balance variable.

The work-family conflict variable consists of six indicators. The factor loading values for each workload indicator can be seen in Table 2 below:

Table 2 Evaluation of Work Family Conflict Variable Model

Indicators	Outer Loadings	t-statistic	p-value
Time Based Work Interference With Family (X2.1)	0,164	0,540	0,589
Time Based Family Interference With Work (X2.2)	0,908	4,267	0,000
Strain Based Work Interference with Family (X2.3)	0,832	4,921	0,000
Strain Based Family Interference With Work (X2.4)	0,838	4,191	0,000
Behavior Based Work Interference with Family (X2.5)	0,913	3,774	0,000
Behavior Based Family Interference with Work (X2.6)	0,813	4,304	0,000

Source: Smart PLS 3 Data Processing, 2025

Based on table 2 above, it appears that of the six indicators that reflect the work family conflict variable (X2), there are five indicators, namely time-based family interference with work, strain-based work interference with family, strain-based family interference with work, behavior-based work interference with family, behavior-based family interference with work, which

are dominant in forming the work family conflict variable with an outer loading value greater than 0.5 and statistically significant because the calculated t value is greater than the t table (1.98) or the p value is less than 0.05.

The family-work conflict variable indicators consist of Work Interference With Family and Family Interference with Work. The factor loading values for each indicator can be seen in Table 3 below:

Table 3 Evaluation of Family Work Conflict Variable Model

Indicators	Outer Loadings	t-statistic	p-value
Work Interference With Family (X3.1)	0,807	2,851	0,005
Family Interference with Work (X3.2)	0,995	3,331	0,001

Source: Smart PLS 3 Data Processing, 2025

Based on table 3 above, it appears that there are three indicators that reflect the work motivation variable (X3), namely the need for circumstances, relationship motivation, and power motivation. Of the three indicators, there are two indicators that have an outer loading value greater than 0.5 and are statistically declared insignificant because the calculated t value is smaller than the t table (1.98) or the p value is greater than 0.05. Based on the outer loading value, it is known that the three indicators are not dominant in forming the work motivation variable.

The work stress variable indicator consists of six questions. The work stress factor loading values can be seen in Table 4 below:

Table 4 Evaluation of Work Strss Variable Model

Indicators	Outer Loadings	t-statistic	p-value
The work itself (X4.1)	0,178	0,714	0,476
Role management (X4.2)	0,032	0,138	0,890
Interpersonal relationships (X4.3)	0,902	1,743	0,082
Organizational style (X4.4)	0,004	1,743	0,991
Career development (X4.5)	-0,207	0,012	0,639
Work-family conflict (X4.6)	0,745	0,469	0,059

Source: Smart PLS 3 Data Processing, 2025

Based on table 4 above, it appears that there are six indicators that reflect the work stress variable (X4), namely the work itself, role management, interpersonal relationships, organizational style, career development, and work-family conflict. Of the six indicators, there are 2 indicators that have an outer loading value greater than 0.5 and are statistically declared insignificant because the calculated t value is smaller than the t table (1.98) or the p value is greater than 0.05. Based on the outer loading value, it is known that the two

dominant indicators in forming the work stress variable are the interpersonal relationship and work-family conflict variables.

The midwife performance variable indicators consist of Task Performance and Contextual Performance. The factor loading values for each midwife performance indicator can be seen in Table 5 below:

Table 5 Evaluation of Midwife Performance Variable Model

Indicator	Outer Loadings	t-statistic	p-value
Task Performance (Y1)	0,972	117,25	0,000
Contextual Performance (Y2)	0,969	98,74	0,000

Source: Smart PLS 3 Data Processing, 2025

Based on Table 5 above, it appears that there are two indicators that reflect the performance variables, namely task performance and contextual performance. Both indicators have an outer loading value greater than 0.5 and are statistically significant because the calculated t value is greater than the t table (1.98) or the p value is less than 0.05. Based on the outer loading value, it is known that the dominant indicators in shaping the midwife performance variables are task performance and contextual performance.

R-Squared (R^2)

R-Squared is a measurement that shows how much variation in endogenous latent variables can be explained by exogenous latent variables. Changes in the R-Square value can be used to explain the influence of certain exogenous latent variables (X) on endogenous latent variables (Y) whether they have a substantive influence or not. An R-Square value of 0.70 indicates a model at a strong level, 0.50 indicates a model at a moderate level, and 0.25 indicates a model at a weak level (Ghozali, 2012). The results of the R-square analysis are shown in table 2.

Table 6 R-Square Values

Variabel	R-Square
Work Life Balance	0,635
Work Family conflict	
Family Work Conflict	
Stres Kerja	
Kinerja	

Source: Smart PLS 3 Data Processing, 2025

The direct influence model of work life balance, work family conflict, family

work conflict, work stress on midwife performance provides an R Square value of 0.635 which can be interpreted that the midwife performance variable can be influenced by work life balance, work family conflict, family work conflict, work stress by 63.5%, while the remaining 36.5% is explained by other variables outside the model. This contribution has a strong level of closeness because it has a value between 0.61-0.80.

Data Analysis Results

In the previous explanation, it has been stated that in order to answer the problem of the hypothesis proposed in this study, the direct influence of exogenous variables on endogenous variables, it is carried out using path analysis using Smart PLS 3 software. A summary of the results of the path analysis calculations in this study can be presented in the table below:

Table 7 Summary of Direct Influence Path Analysis Results (Without Moderating Variables)

Research Variables	Path Coefficient	T-Statistic (critical t 1.98)	p value	Info
Work Life Balance → Midwife Performance	0,204	1,210	0,227	Rejected
Work Family conflic → Midwife Performance	-0,574	2,319	0,021	Accepted
Family Work Conflic → Midwife Performance	0,017	0,072	0,943	Rejected
Stres Kerja → Midwife Performance	0,945	1,702	0,089	Rejected

Source: Smart PLS 3 Data Processing, 2025

Table 8 Summary of Results of Indirect Influence Path Analysis (With the Role of Moderating Variables)

Variabel Penelitian	Path Coefficient	T-Statistic (critical t 1.98)	p value	Info
Work Life Balance → Midwife Performance	0,230	0,990	0,323	Rejected
Work Family conflict → Midwife Performance	-0,742	1,814	0,007	Accepted
Family Work Conflict → Midwife Performance	0,185	0,648	0,517	Rejected
Stres Kerja → Midwife Performance	1,061	1,632	0,103	Rejected

Source: Smart PLS 3 Data Processing, 2025

Based on the results of the two influence path analyses, it was found that the coefficient value of work life balance, work family conflict and family work conflict moderated by work stress on midwives was -0.574, smaller than the coefficient value of testing the direct influence of life balance, work family conflict and family work conflict by looking at the moderating variables on midwife performance, which was -0.74.

Table 9 Results of the Analysis of the Influence of Moderating Variables

Research Variables	Moderating Variables	Endogenous Variables	Path Coefficient	T-Statistic	p-value	Info
Work Life Balance	Job Satisfaction	Midwife Performance	0.093	(critical t 1.98)	0.781	Rejected
Work Family conflict	Job Satisfaction	Midwife Performance	0.272	0.278	0.256	Rejected
Family Work Conflict	Job Satisfaction	Midwife Performance	-0.209	1.138	0.596	Rejected

Source: Smart PLS 3 Data Processing, 2025

Based on the results of the analysis of the influence of the moderating variable of work stress, it is known that the influence of work life balance moderated by work stress on midwife performance obtained a path coefficient value of 0.093 with a p value of $0.781 > 0.05$ which is interpreted as no significant influence. The influence of work family conflict moderated by midwife performance obtained a path coefficient value of 0.272 with a p value of $0.256 > 0.05$, which is interpreted as no significant influence. Then the influence of family work conflict moderated by work stress on midwife performance obtained a path coefficient value of 0.209 with a p value of $0.596 < 0.05$ which is interpreted as no significant influence.

Discussion

The Influence of Work-Life Balance on Midwife Performance at Bahteramas General Hospital, Southeast Sulawesi

Based on the recapitulation results, in general, the work-life balance (WLB) of midwives at Bahteramas Regional Hospital is in the sufficient category, with an average score of 3.5 across all indicators, namely work interference with personal life, personal life interference with work, and work-personal life enhancement. However, in the structural model test, only two

indicators WIPL and WPLE significantly reflect the WLB variable. The results of the hypothesis test indicate that WLB has a positive effect on midwife performance (path coefficient = 0.204), but this effect is not statistically significant (p-value = 0.227). This insignificance is likely due to the dominance of other factors such as motivation, workload, or professional competence that are more determinants of work performance. This is in line with the theory of Greenhaus & Allen (2011) which states that WLB can improve quality of life and performance, but the effect may not be as strong in high-pressure work contexts such as midwifery. Support for Herzberg's theory also shows that WLB is a hygiene factor, so its presence is important but does not automatically improve performance. Research by Wahyuni (2020) and Fitriani & Susanto (2021) supports these findings by showing that WLB does not always significantly impact health worker performance. Therefore, improving midwives' performance needs to be directed not only at improving WLB but also at factors that more directly influence motivation and professionalism, such as recognition, well-managed workloads, and developing a supportive work environment.

The Influence of Work-Family Conflict on Midwife Performance at Bahteramas General Hospital, Southeast Sulawesi

The results of the study indicate that midwives at Bahteramas Regional Hospital face moderate levels of work-family conflict, with an average overall score of 3.3. This conflict encompasses aspects of time, pressure, and behavior, both in terms of work interfering with family and vice versa. Although some indicators indicate relatively good time and pressure management, behavioral aspects indicate challenges in separating work and family roles. This finding supports the theory of Greenhaus & Beutell (1985), which explains that work-family conflict (WFC) arises when the demands of work and family roles cannot be harmoniously combined. The results of the path analysis showed that WFC had a negative and significant effect on midwife performance (coefficient = -0.574; $p = 0.021$), meaning that the higher the role conflict experienced, the lower the performance demonstrated. This indicates that role conflict not only disrupts work-life balance but also has a significant impact on the quality of midwifery services. Therefore, organizational support such as flexible working hours, fair shift systems, welfare facilities, and stress management training are very necessary to reduce WFC and maintain midwives' performance in stressful work contexts (Greenhaus & Beutell, 1985).

The Influence Of Family Work Conflict On The Performance Of Midwives At Bahteramas General Hospital, Southeast Sulawesi

The results of the study indicate that family-work conflict (FWC) among midwives at Bahteramas Regional Hospital is in the moderate category, with an average score of 3.4. FWC is formed by two indicators, namely Work Interference with Family (WIF) and Family Interference with Work (FIW), which have an average score of 3.4 and 3.5, respectively. This indicates that although midwives face pressure from both work directions that interfere with family roles and vice versa, they are still able to adjust and manage these roles functionally. This ability reflects good role adjustment, in line with the theory of role balance which states that individuals who are able to balance two or more roles will tend to avoid significant role conflict (Greenhaus & Beutell, 1985). The findings of the outer model strengthen the construct validity of FWC with a factor loading value > 0.5 and statistical significance ($p < 0.05$), which indicates that WIF and FIW are dominant reflections in forming FWC. However, the results of testing the effect of FWC on performance showed that the relationship was not statistically significant ($p = 0.943$), with a very small coefficient (0.017). This means that FWC does not have a significant impact on midwives' performance. It is possible that midwives have implemented the concept of role compartmentalization, namely the ability to separate family matters from work, so that family conflicts do not carry over into the workplace (Ashforth et al., 2000). Although FWC does not directly affect performance, it still requires attention because it has the potential to affect psychological well-being and work stress in the long term (Frone, 2003). Therefore, management needs to continue to provide structural and emotional support, such as stress management training and gender-responsive work policies, to maintain role balance and work quality for female health workers.

The Effect of Work Stress on the Performance of Midwives at Bahteramas General Hospital, Southeast Sulawesi

Based on the research results, the level of work stress among midwives at Bahteramas Regional Hospital is in the moderate category with an average score of 3.2, indicating that stress is still within tolerable limits but needs to be monitored to prevent it from developing into severe pressure that can reduce productivity and work well-being. Indicators of work stress include the work itself, role management, interpersonal relationships, organizational style, career development, and family-work conflict. Of the six indicators, interpersonal relationships have the highest score (3.8), indicating a supportive work environment, while aspects of work, role management, and career development are the main sources of stress. The results of the regression analysis showed that work stress has a positive but insignificant effect on

midwife performance (coefficient 0.945; p-value 0.089), meaning the hypothesis is accepted in the direction of the influence but rejected statistically. This finding indicates that although stress can trigger increased performance to a certain extent (eustress), its effect is not strong enough to produce significant changes in performance (Lazarus & Folkman, 1984; Ivancevich & Matteson, 1996). These findings are supported by research by Lestari (2021) and Handayani (2020), which found that work stress did not significantly impact healthcare worker performance due to work adaptation and support systems. However, research by Sari and Supartha (2018) showed a different result, indicating that work stress had a significant negative effect on nurse performance. This difference may be due to the organizational context and individual characteristics. Therefore, managing work stress remains crucial through stress management training, strengthening supervision, and providing a supportive work environment to prevent stress from developing into distress, which negatively impacts midwives' performance.

The Effect of Work Life Balance Moderated by Work Stress on Midwife Performance at Bahteramas General Hospital, Southeast Sulawesi

The results of this study indicate that work stress does not act as a significant moderator in the relationship between work-life balance (WLB) and midwife performance at Bahteramas Regional Hospital, as indicated by a path coefficient of 0.093 and a p-value of 0.781 (>0.05). This indicates that high or low levels of work stress do not strengthen or weaken the effect of WLB on performance. This finding can be explained through the Demand Resources Model (Bakker & Demerouti, 2007), which states that individual performance is influenced by the balance between job demands and available resources, including the ability to manage stress. However, in this context, work stress does not appear strong enough to change the direction of this relationship, possibly because midwives already have effective coping mechanisms or work pressure is still within the tolerance threshold (Lazarus & Folkman, 1984). This study is in line with the findings of Setiawan (2020) who showed that work stress is not always a significant moderator, especially if there is adequate social support and job autonomy. Conversely, Nugroho and Hartini (2019) found that work stress can weaken the positive influence of WLB on performance in healthcare workers. This difference is likely due to variations in organizational context and workload. In the case of Bahteramas Regional Hospital, the existence of a flexible work system, a collegial work culture, and employee welfare programs may be protective factors. Therefore, efforts to improve midwives' performance should be more focused on directly

strengthening work-life balance, rather than through interventions that address work stress as a moderator.

The Influence of Work-Family Conflict Moderated by Work Stress on the Performance of Midwives at Bahteramas General Hospital, Southeast Sulawesi

The results of this study indicate that job stress does not play a significant role as a moderating variable in the relationship between work-life balance and midwife performance. Therefore, improving midwife performance should focus directly on strengthening work-life balance without overly relying on job stress as an intervention factor. However, stress management remains important within the framework of general workforce well-being. This finding aligns with Greenhaus and Powell's (2006) Work-Family Enrichment theory, which states that a balance between work and personal life can improve performance by increasing job satisfaction and engagement. Furthermore, based on the Transactional Model of Stress and Coping by Lazarus and Folkman (1984), stress will only significantly impact work behavior if an individual perceives the pressure they are experiencing exceeds their coping abilities. In the context of Bahteramas Regional Hospital, midwives' ability to manage stress, or stress that is still within reasonable limits, likely contributes to the insignificant moderating effect. These results also align with research by Sudibyo and Utami (2020), which found that work-life balance directly influences performance, without being significantly moderated by job stress, and Hasibuan et al. (2021) showed that time management and social support were more influential in increasing work effectiveness. Therefore, Bahteramas Regional Hospital management policies should focus on providing flexible work schedules, family support facilities, psychological services, and a work culture that supports employee work-life balance. Stress management programs are still necessary, but more as a commitment to the long-term well-being of healthcare workers, rather than as a tool to strengthen the relationship between work-life balance and performance.

The Influence of Family Work Conflict Moderated by Work Stress on the Performance of Midwives at Bahteramas General Hospital, Southeast Sulawesi

The results showed that work stress did not significantly moderate the effect of family-work conflict on midwives' performance, although the direction of the effect was positive. A p-value of 0.596 indicates that work stress neither strengthened nor weakened the relationship between family-work conflict and performance (Kahn et al., 1964). Based on Role Theory, psychological distress

resulting from role conflict should reduce performance, but in this context, work stress did not exacerbate this effect, possibly because the stress experienced was within tolerable limits or because midwives had effective coping mechanisms. According to the Job Demand-Control-Support Model (Karasek & Theorell, 1990), the effects of stress are highly dependent on the level of control and social support, and midwives may receive adequate support from both the work environment and family. This finding is consistent with the results of research by Wulandari and Muis (2022) and Sari and Prasetyo (2020), which showed that work stress did not act as a moderator in the relationship between family-work conflict and health worker performance. Collectivistic culture and women's adaptability in dealing with double burdens are also suspected to be factors that reduce the effect of stress in this context. Therefore, interventions should be directed at addressing work-family conflict, such as time management training, family counseling, and flexible work arrangements, while managing work stress remains important as part of a psychosocial well-being strategy through employee assistance programs such as Employee Assistance Programs (EAP).

Conclusion

This study aims to analyze the influence of work life balance, work family conflict, family work conflict moderated by work stress on the performance of midwives at Bahteramas General Hospital, Southeast Sulawesi, then the following conclusions can be put forward: Work life balance has a positive and insignificant effect on the performance of midwives at Bahteramas Hospital, Southeast Sulawesi Province, this shows a tendency that the better the balance between work life and personal life felt by midwives, the performance also tends to increase. Work family conflict has a negative and significant effect on the performance of midwives at Bahteramas Hospital, Southeast Sulawesi Province, this study indicates that the higher the level of conflict between work demands and family roles felt by midwives, the performance tends to decrease significantly, this is also because problem-solving behavior at home cannot be applied at work. Family work conflict has a positive and insignificant effect on the performance of midwives at Bahteramas Hospital, Southeast Sulawesi Province, this finding shows that interference from family affairs into the world of work does not significantly affect the decline or increase in midwives' performance but stress at work disrupts the midwives' family life. Work stress has a positive and insignificant effect on the performance of midwives at Bahteramas Hospital, Southeast Sulawesi Province, this indicates that in the context of this study, work stress is not the main factor that directly affects the level of midwife performance, although it still needs to be managed as part of

efforts to maintain the welfare and productivity of health workers. Work life balance moderated by work stress does not have a significant effect on the performance of midwives at Bahteramas Hospital, Southeast Sulawesi, meaning that the influence of work life balance on midwives' performance remains independent, without being significantly influenced by the level of work stress experienced. Work family conflict moderated by work stress does not have a significant effect on the performance of midwives at Bahteramas Hospital, Southeast Sulawesi, this indicates that the presence of work stress does not strengthen or weaken the relationship between work and family role conflict on midwives' performance. Family work conflict moderated by work stress does not have a significant effect on the performance of midwives at Bahteramas Hospital, Southeast Sulawesi, thus, efforts to improve performance should be focused directly on managing family work conflict, while controlling work stress remains important, but not as an influential moderating factor in this context. To ensure more representative and generalizable research results, it is recommended to expand the sample size and research locations to several other hospitals in Southeast Sulawesi. This will help compare the conditions and factors influencing midwife performance across hospitals.

Reference:

1. Aisya, R. R., & Evasari, A. D. (2023). *Peran Stres Kerja Dalam Memediasi Pengaruh Beban Kerja Dan Lingkungan Kerja Terhadap Kinerja Karyawan Pada CV. Bumi Mandiri Indonesia. Bismar (Bisnis dan Manajemen): The Journal of Business and Management*, 6(3), 515-528.
2. Ajala, E. (2017). *Work-family-conflict and family-work-conflict as correlates of job performance among working mothers: implications for industrial social workers*. 7(1), 52–62
3. Aminah A., (2008). *Job, Family and Individual Factors as Predictors of Work-Family Conflict. The Journal of Human Resource and Adult Learning*, 4(1), 57-65.
4. Anggun Oktaviana, N. (2023). *Pengaruh Work Life Balance, Burnout, dan Hardiness Terhadap Kinerja Tenaga Kesehatan (Studi Kasus pada Perawat RSAU dr. Efram Harsana Lanud Iswahjudi. Skripsi: Universitas Muhammadiyah Ponorogo*.
5. Ariati, N. W. T., & Wulandari, N. L. A. A. (2022). *Pengaruh Work Family Conflict Dan Family Work Conflict Terhadap Staff Performance. Widya*

- Amrita: Jurnal Manajemen, Kewirausahaan Dan Pariwisata*, 2(4), 945–955.
ejournal.unhi.ac.id.
6. Azka, A., & Raharso, S. (2019). Pengaruh Konflik Pekerjaan-Keluarga Terhadap Kepuasan Kerja Di Industri Perbankan. *Jurnal Riset Bisnis Dan Investasi*, 5(2), 33–44
 7. Bakker, A. & Geurts, S. (2005). Toward a Dual-Process Model of Work-Home Interference. *American Sociological Review*, 39(4), 567-578.
 8. Cahyana, I. G. S., & Jati, I. K. (2017). Pengaruh Budaya Organisasi, Stres Kerja Dan Kepuasan Kerja Terhadap Kinerja Pegawai. *E-Jurnal Akuntansi*, 18(2), 1314–1342
 9. Candra, T. L., Herlambang, T., & Satoto, B. E. (2022). Beban Kerja dan Work-Family Conflict terhadap Kinerja Pegawai yang Dimediasi Komitmen Organisasi. *BUDGETING : Journal of Business, Management and Accounting*, 4(1), 120–133.
 10. Dando, M. L. Y. D., Fanggal, R. F., & Fanggal, A. H. (2021). Pengaruh peran ganda terhadap kinerja tenaga medis wanita melalui stres kerja.
 11. Davis, Keith dan John W. Newstrom. 2021. *Perilaku Dalam Organisasi*, Jilid 1-2. Jakarta: PT. Erlangga
 12. Dinahaji, Haminati Sharikha. 2022. Pengaruh Pemberian Insentif Terhadap Kinerja Pustakawan Di Perpustakaan Daerah Provinsi Jawa Tengah. *Jurnal Ilmu Perpustakaan No.2 Vol 1*
 13. Effendy, A. A., & Fitria, J. R. (2019). Pengaruh Lingkungan Kerja Dan Stres Kerja Terhadap Kinerja Karyawan (Studi Kasus Pt. Modernland Realty, Tbk). *JIMF (Jurnal Ilmiah Manajemen Forkamma)*, 2(2), 49–61.
 14. Fadilah, F. F. F., & Al Banin, Q. (2022). Pengaruh pelatihan, lingkungan kerja, dan fasilitas kerja terhadap kinerja pegawai di puskesmas bantarkawung. *Jurnal Ilmiah Manajemen Dan Bisnis (JIMBis)*
 15. Farha, T. R., Sanjaya, V. F., & Sari, I. K. (2021). Pengaruh Konflik Peran Ganda Terhadap Kinerja Karyawan Wanita Dengan Stres Kerja Sebagai Mediasi. *Gema : Jurnal Gentiaras Manajemen Dan Akuntansi*, 13(1), 51–59.
 16. Fereday, J., & Oster, C. (2010). Managing a work-life balance: the experiences of midwives working in a group practice setting. *Midwifery Journals*, 26(3), 311–318.
 17. Grandey, A. A., Cordeiro, B. L., & Crouter, A. C. (2005). A longitudinal and multi-source test of the work-family conflict and job satisfaction relationship. *Journal of Occupational and Organizational Psychology*. 78(3). hlm. 1-20.
 18. Hardiyanti, A., Susanti, I. H., & Wirakhmi, I. N. (2023). Hubungan Work-Family Conflict dengan Kinerja Perawat Wanita di RSUD Ajibarang. *Jurnal Kesehatan*, 11(2), 81-94.

19. Hariri, F. R., Sari, V. N., & Pratiwi, N. (2024). Pengaruh Lingkungan Kerja dan Stres Kerja terhadap Kinerja Karyawan dengan Kepuasan Kerja Karyawan sebagai Variabel Intervening pada PT. Primatama Mulia Jaya (PMJ) IV Koto Kecamatan Kinali Kabupaten Pasaman Barat. *Journal of Information System, Applied, Management, Accounting and Research*, 8(2), 303-322.
20. Kahn, et al. (1964). *Organizational Stres: Studies in Role conflict and Ambiguity*. New York: John Wiley & Sons, Inc Handayani, R. (2020). Multi Peran Wanita Karir Pada Masa Pandemi Covid-19. *Jurnal Kajian Gender Dan Anak*, 04(1), 1-10.
21. Kahn, R. L., Wolfe, D. M., Quinn, R. P., Snoek, J. D., & Rosenthal, R. A. (1964). *Organizational stress: Studies in role conflict and ambiguity*. New York: John Wiley.
22. Krishnan, R., Loon, K. W., & Tan, N. Z. (2018). The Effects of Job Satisfaction and Work-Life Balance on Employee Task Performance. *International Journal of Academic Research in Business and Social Sciences*, 8(3), 652-663.
23. Handoko, Hani T. 2021, *Manajemen Personalia dan Sumberdaya Manusia*. Yogyakarta : BPFE
24. Haria, W. (2020). Pengaruh lingkungan kerja, work family conflict dan stres kerja terhadap kinerja pegawai Dinas Pendidikan Kabupaten Nias Barat.
25. Hendra, P. N. B., & Made, S. (2019). Effect Of Work-Family Conflict, Job Stres And Organizational Commitment Of Employee Performance On Government Employees In The Dprd Secretariat Of Bali Province, Indonesia. *RJOAS*, 5(89), 187-197.
26. Idris, F., Hasyim, A. W., & Alhadar, F. M. (2023). Pengaruh work family conflict terhadap kinerja karyawan melalui stres kerja sebagai variabel mediasi pada PT. Bank Bri cabang kota Tidore kepulauan. *Jurnal EMBA: Jurnal Riset Ekonomi, Manajemen, Bisnis dan Akuntansi*, 11(3), 138-148.
27. Ivancevich, J. M. & Matteson, M. T. 1980. *Stres and Work: A managerial perspective*. Glenview, IL: Scott, Foresman and Company.
28. I, R. G. (2019). *Managing Work Family Conflict and Work Stres through Job Satisfaction and Its Impact on Employee Performance*. *Jurnal Teknik Industri*, 20(2), 127.
29. Mahavianpoor, A., & Ahmad Mirjafari, S. (2018). The prediction of job burnout based on work addiction and work-family conflict and family conflict-work among nurses. *Indian Journal of Health & Wellbeing*, 9(6), 874-877. search.ebscohost.com.
30. Minarika, A., Purwanti, R. S., & Muhidin, A. (2020). Pengaruh Work Family Conflict Dan Work Life Balance Terhadap Kinerja Karyawan (Suatu Studi

- Pada Pt. Pacific Eastern Coconut Utama Pangandaran). *Business Management And Entrepreneurship Journal*, 2(1), 1–11
31. Mulatta, S. D., & Waskito, J. (2024). Pengaruh Work family conflict, Work Life Balance Dan Beban Kerja Terhadap Kinerja Perawat Dimediasi Oleh Komitmen Organisasi Pada RSAU dr Siswanto. *Management Studies and Entrepreneurship Journal*, 5(1).
 32. Nikmah, B. S. (2023). Pengaruh Work Family Conflict Dan Beban Kerja Terhadap Kinerja Mitra Dengan Stress Kerja Sebagai Variabel Intervening Dalam Perspektif Manajemen Sumber Daya Insani (Studi Pada Mitra BPS Wilayah Sukarame, Bandar Lampung) (Doctoral dissertation, UIN Raden Intan Lampung).
 33. Novitasari, M., Nurhajati, N., & Wahono, B. (2024). Pengaruh Pengembangan Sumber Daya Manusia, Human Relatin Dan Work Family Conflict Terhadap Kinerja Karyawan (Studi Kasus Pada PT. Total Cipta Persada). *E-JRM: Elektronik Jurnal Riset Manajemen*, 13(01), 143-151.
 34. Nitisemito, Alex. 1992. *Manajemen Personalia: Manajemen SDM*. Jakarta: Ghalia Indonesia
 35. Pradita, N. Y., & Franksiska, R. (2020). Work-Life Balance: A Perspective Of Multinational Corporation (MNCS) Employee. *Jurnal Bisnis Dan Manajemen*, 7(1), 1–18.
 36. Pradnyan, N. W. S. A. G. R. (2022). Peran Stres Kerja Dalam Memediasi Pengaruh Work-Life Balance Dan Kompetensi Terhadap Kinerja Pegawai. *Jurnal Ilmu Manajemen*
 37. Pradnyani, N. W. S., & Rahyuda, A. G. (2022). Peran stres kerja dalam memediasi pengaruh work-life balance dan kompetensi terhadap kinerja pegawai. *Jurnal Ilmu Manajemen*, 806-820.
 38. Prianggi, Y., Fatmawati, R., & Kusuma, Y. B. (2022). Pengaruh Work Family Conflict Dan Stres Kerja Terhadap Kinerja Karyawan Wanita Pada PT. Araya Bangun Sarana. *Aplikasi Administrasi: Media Analisa Masalah Administrasi*, 117-127.
 39. Puspita, I. L. (2022). Pengaruh Work Family Conflict Terhadap Stres Kerja Melalui Komitmen Organisasi Di Dinas Perumahan, Kawasan Permukiman Dan Pertanahan Kota Sungai Penuh: Ifitri Loza Puspita. *Jurnal Administrasi Nusantara Maha*, 4(10), 60-73.
 40. Putri, N. M. S. R., & Rahyuda, A. G. (2019). Peran Stres Kerja Dalam Memediasi Pengaruh Beban Kerja Dan Lingkungan Kerja Terhadap Kinerja Karyawan Ni. *E-Jurnal Manajemen*, 8(12), 7370–7390
 41. Rasheed, M., Iqbal, S., & Mustafa, F. (2018). Work-family conflict and female employees turnover intentions. *Gender in Management*, 33(8), 636–653.

42. Reski, R. (2022). *Pengaruh Work-Family Conflict Terhadap Kinerja Perawat Wanita Dengan Stres Kerja Sebagai Variabel Intervening (Studi Kasus RSUD Batara Siang Kabupaten Pangkep)* (Doctoral dissertation, Universitas Hasanuddin).
43. Robbins, P. S., & Judge, T. A. (2013). *Organizational Behavior*. New Jersey: Pearson Education.
44. Rizky, D., & Afrianty, T. W. (2018). Pengaruh beban kerja terhadap stres kerja dengan work life balance sebagai variabel intervening. *Jurnal Administrasi Bisnis (JAB)*, 61(4), 47–53.
45. Robbins, Stephen P. 2006. *Perilaku Organisasi*, edisi ke-10. Jakarta : PT. Indeks.
46. Robbins, Stephen P. dan Timothy A. Judge. 2020. *Perilaku Organisasi Edisi ke- 12*. Jakarta : Penerbit Salemba Empat
47. Samola, N. E. C., Ogi, I. W., & Uhing, Y. (2025). Pengaruh Konflik Keluarga Dan Stres Kerja Terhadap Niat Pindah Kerja Pegawai Bank Bri Kantor Cabang Manado. *Jurnal EMBA: Jurnal Riset Ekonomi, Manajemen, Bisnis dan Akuntansi*, 13(01), 466-477.
48. Sari, I. K., Farha, T. R., & Sanjaya, V. F. (2021). Pengaruh Konflik Peran Ganda Terhadap Kinerja Karyawan Wanita Dengan Stres Kerja Sebagai Mediasi. *GEMA: Journal of Gentiarras Management and Accounting*, 13(1), 51-59.
49. Sedarmayanti. (2001). *Sumber Daya Manusiadan Produktivitas Kerja*. Jakarta: Mandar Maju.
50. Sulisetyawati, S. D., Giatmi, G., & Murharyati, A. (2023). Hubungan Work-Family Conflict Dengan Kinerja Perawat Wanita Dalam Pendokumentasian Asuhan Keperawatan. *Jurnal Kesehatan Kusuma Husada*, 58-69.
51. Triningsih, N. N., Suputra, G. A., & Agustina, M. D. P. (2021). Pengaruh konflik work family conflict dan stres kerja terhadap kinerja perawat wanita RSUD Wangaya Denpasar. *WidyaAmrita: Jurnal Manajemen, Kewirausahaan dan Pariwisata*, 1(1), 412-430.
52. Syafirna, N., & Manik, S. (2018). Pengaruh Lingkungan Kerja Terhadap Kinerja Karyawan Pada Pt. Bank Syariah. *Jurnal Lembaga Keuangan Dan Perbankan*, 3(2).
53. Wang, I., Tsai, H., Lee, M., & Ko, R. (2019). The effect of work – family conflict on emotional exhaustion and job performance among service workers : the cross-level moderating effects of organizational reward and caring. *The International Journal of Human Resource Management*, 0(0), 1–22.