

The Effect of Work-Life Balance on Psychological Well-Being Among Healthcare Workers in Sumenep

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Abstract

Healthcare workers are a work group at high risk of experiencing physical and psychological stress, so maintaining psychological well-being is a crucial aspect in preventing stress and burnout. This study aims to determine the effect of work-life balance on psychological well-being among healthcare workers in Sumenep. This study used a quantitative method, with data collected through a Google form. The sample was determined using a census (total sampling) targeting approximately 111 healthcare workers in Sumenep. Furthermore, the data were further analyzed using simple linear regression. The analysis of the study results suggests that work-life balance has a significant influence on psychological well-being, as evidenced by a significance value of $p = 0.000$. The coefficient of determination of $R^2 = 47.8\%$ indicates that almost half of the variation in psychological well-being can be explained by work-life balance. This analysis explains that the better the WLB possessed by healthcare workers, the higher the level of PWB they feel. This condition can also be seen in the context of the characteristics of the Sumenep region, which differs from urban areas, including in terms of access to support facilities for psychological recovery outside the work environment. These limitations force healthcare workers to rely more heavily on WLB to maintain psychological well-being. Overall, the research findings demonstrate that WLB is a crucial aspect in understanding the PWB of healthcare workers in Sumenep. This study suggests that healthcare facilities in Sumenep need to prioritize flexible work arrangements and psychosocial support, given the limited external coping resources available to healthcare workers.

Keywords: Psychological Well Being; Healthcare Worker; Work Life Balance

INTRODUCTION

Human resources in the health sector can be considered a crucial subsystem of the national health system, playing a significant role in the implementation of various health programs and in achieving Universal Health Coverage and the Sustainable Development Goals (SDGs). Human resource management, also known as SDM, in the health sector is a priority and flagship program of the Indonesian government, one of which is none other than health facilities (Aprianto & Zuchri, 2021). Healthcare workers play a dominant role in improving the health of the community and serve as the primary providers of health services. In carrying out their duties, they face various high risks in the field, often risking their own safety to provide the best service to the community (Maatisya et al., 2022).

Healthcare workers are required to possess competencies encompassing clinical skills, patient care, managerial skills in organizing work and responsibilities, and compliance with applicable standards. Therefore, healthcare workers also need to maintain balance in their work, one of which is through the implementation of work-life balance (WLB) (Chendra et al., 2023). Balance in terms of work and personal life can be defined as the capacity and capability of an individual or person to effectively manage not only time and physical aspects, but also emotions, behavior, and obligations, both professionally and personally (Mubarak, 2023). Therefore, work-life balance is not only related to the presence of obstacles but also includes positive, complementary contributions. This balance plays a crucial role in the psychological well-being of nurses, understood as a state of psychological health.

Most healthcare workers face various physical and psychological pressures that often exceed their capacity (Pinggian et al., 2021). Psychological disorders experienced by healthcare workers are often associated with low levels of psychological well-being (Philip & Cherian, 2020). Psychologically, psychological well-being (PWB) reflects a state in which an individual understands and manages their mental, emotional, and social conditions well, accompanied by an awareness of their own well-being and positive relationships with others (Maulidira et al., 2024). According to (Wibowo, 2022), psychological well-being is the foundation for each individual to achieve a sense of happiness, experience meaning in life, and function optimally in various aspects of life.

Several previous studies have shown a positive correlation between WLB and PWB, which contributes to healthcare workers' psychological well-being due to a balanced work-life balance that does not conflict and can reinforce each other. This is aligned with the statement by (Fauziah et al., 2025) who showed that nurses who are able to maintain WLB tend to have good PWB. Similar results were also shown by (Jaelani and Nugraha, 2024) who stated that WLB contributes to nurses' performance achievements, with PWB as a mediating factor. Furthermore, studies by (Oktaria et al., 2021) and (Mardlotillah and Fahmawati, 2023) also reinforce the finding that when a person's WLB increases, their level of psychological well-being also increases. However, differences in professional contexts and work environments across studies indicate variations in results, so the effect of WLB on PWB cannot be universally generalized.

This creates a significant gap in the literature. Very little attention has been given to the dynamics of WLB among healthcare workers in rural areas, which differ from those in urban areas, where geographical conditions and the strong collectivist culture of the community create a unique sociocultural burden that differs from the pressures of work in urban areas. Collectivist culture is a culture characterized by close bonds between individuals (Triandis, 2001 cited in Tangkelangi, 2023), which has the potential to become a double social burden for health workers, where professional work demands synergize with high expectations from the community and family in their social roles.

Therefore, this study was conducted to fill the research gap related to WLB on PWB among healthcare workers in Sumenep. Research on the effect of WLB on PWB among healthcare workers in coastal areas with different community characteristics, where a strong collectivist culture has the potential to blur the boundaries between the professional and social roles of healthcare workers due to high community expectations. This condition can lead to interference between personal life and professional roles, which has an impact on the psychological well-being of healthcare workers, but has not been empirically studied. Therefore, the novelty of this study lies in testing the effect of WLB on the PWB of healthcare workers in the context of a collectivist community in a coastal area through a population study (census) approach. Based on the above description, this study aims to determine the effect of WLB on the PWB of healthcare workers in Sumenep.

METHOD

This study used a quantitative method, with the research population covering all healthcare workers in the Batang- a subdistrict of Sumenep. The sampling technique used was a population study (census). This technique was chosen because all 111 members of the population met the research criteria and were therefore included in the sample (Sugiyono, 2020). The census approach was chosen to ensure data accuracy and minimize sampling bias, so that the regression results truly represented the actual population parameters at the research location.

The data in this study were collected through a Google Form-based questionnaire with a 1–5 Likert scale. The Work Life Balance variable consisted of 15 items divided into four dimensions, including Work Interference Personal Life (WIPL), Personal Life Interference with Work (PLIW), Work Enhancement of Personal Life (WEPL), and Personal Life Enhancement of Work (PLEW). This instrument was adopted from a study (Maimunah et al., 2024) with the researcher's permission. The instrument has been proven to be valid and reliable with a reliability level of 0.86.

The Psychological Well-Being variable was measured using a 1–5 Likert scale consisting of 27 items and covering 10 dimensions that had been adapted to the Indonesian cultural context, including positive feelings, negative feelings, self-confidence, positive relationships, future orientation, self-development, negative emotion management, responsibility, problem-solving skills, and harmony. This instrument was adopted from a study (Egan et al., 2025) with the researcher's permission and has been declared valid and reliable at 0.86.

The research procedure complies with ethical principles by including digital informed consent that guarantees the confidentiality of respondents. The instruments in this study have undergone reliability testing and have been proven to have an adequate level of internal consistency, with Cronbach's Alpha values of 0.792 for the WLB variable and 0.846 for the PWB variable. The data were analyzed through a series of prerequisite tests, including normality and multicollinearity tests, to ensure the suitability of the analysis model. After all assumptions were met, the data were processed using simple linear regression to determine the effect of WLB on PWB among healthcare workers in Sumenep.

RESULTS and DISCUSSION

Results

In this study, respondents were healthcare workers from various professions, including nurses, midwives, and nutritionists. All respondents voluntarily agreed to participate. The data collected included information on gender, age, education level, length of employment, marital status, and number of children.

Table 1. Description of the research subject

Category	Frequency	Percentage (%)
Gender		
Male	40	36
Female	71	64
Age		
20-30 Tahun	32	29
31-40 Tahun	55	50
41-50 Tahun	18	16
>50 Tahun	6	5
Education Level		
Diploma (D1/D2/D3)	64	57,7
Bachelor's Degree (S1)	45	40,5
Master's Degree (S2)	2	1,8
Length of Employment		
< 5 Years	20	18
5-10 Years	39	35
11-20 Years	41	37
> 20 Years	11	10
Marital Status		
Married	98	88,3
Not yet married	12	10,8
Divorced	1	0,9
Having Children		
Yes	89	80,2
No	22	19,8

Source: Research results and processed data, 2025

Based on the information in Table 1, it can be seen that 111 of them are healthcare workers, dominated by women (64%) with a productive age range of 31-40 years (50%), which describes the general profile of healthcare workers in Indonesia. In terms of education level, the majority of respondents had a diploma qualification (57.7%). In terms of profession, most respondents worked as nurses (52%) and midwives (37%). Based on the table above, the length of employment of respondents also varied, ranging from less than 5 years to more than 20 years. The largest group had 11-20 years of employment, accounting for 37%. Furthermore, in terms of marital status, the majority of respondents were married (88.3%), and 80.2% of them had children.

The results of the prerequisite tests in this study indicate that the data distribution is in the normal category (Asymp. Sig. 0.200 > 0.05) and there are no symptoms of multicollinearity (Tolerance 1.000 > 0.1; VIF 1.000 < 10), so that the regression model meets the requirements for use.

Simple Linear Regression Analysis

This study used simple linear regression analysis to test the hypotheses. The results of the statistical analysis are shown in the table below:

Table 2. Simple Linear Regression Test

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	Collinearity Statistics	
	B	Std. Error	Beta			Tolerance	VIF
(Constant)	51,937	5,264		9,866	,000		
Work Life Balance	,922	,092	,691	9,994	,000	1,000	1,000

Source: Research results and processed data, 2025

Based on the output of the resulting regression equation, it can be explained that the influence of WLB (X) on PWB (Y) on healthcare workers in Sumenep is as follows:

- a = 51,937, which shows that if WLB (X) is at zero or non-existent, then PWB (Y) remains at 51.937. This value describes the basic condition of PWB without being influenced by the WLB variable.
- b = 0,922, which shows that every one-unit increase in the WLB variable (X) contributes to a 0.922 increase in PWB (Y). Since the regression coefficient value is positive, it can be interpreted that WLB has a positive effect on PWB. In other words, the better the work-life balance of healthcare workers, the higher their psychological well-being.

Determination Coefficient Test

Table 3. Determination Coefficient Test

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	,691 ^a	,478	,473	7,76773

Source: Research results and processed data, 2025

The significant contribution of WLB to PWB among healthcare workers in Sumenep is demonstrated through the coefficient of determination. The analysis results show an R-square of 0.478 (47.8%), meaning that nearly half of the variation in PWB can be explained by the level of work-life balance. Meanwhile, the remaining 52.2% is influenced by factors outside this research variable.

Discussion

The findings of this study indicate that WLB has a significant influence on PWB among healthcare workers in Sumenep. These results demonstrate that healthcare workers' ability to balance work and personal life demands plays a crucial role in maintaining a positive psychological state. This is in line with research conducted by (Sayekti, 2018), which states that the WLB function is designed to manage the balance between work and personal life demands of employees. This policy was developed as a strategy to minimize various HR issues, such as high levels of work stress, low productivity, weak work morale, and an increasing tendency for employee turnover. Effective implementation of WLB plays a role in increasing work productivity, strengthening employee commitment, and reducing employee intentions to leave the organization.

This can be seen in the respondents' perceptions of the statements in the questionnaire related to the indicator (PLIW) of 3.9, which falls into the agree category. This indicator describes that healthcare workers feel that problems or burdens in their personal lives often affect their performance and focus in the work environment. This condition can also be seen in the context of Sumenep's communal socio-cultural environment. In a collectivist society, healthcare workers are often considered important figures in their communities, so even outside of working hours they are still asked for help by neighbors and family. As a result, the boundaries between personal life and work become blurred, leading to physical/emotional exhaustion and difficulty maintaining a work-life balance.

Meanwhile, the PWB is located on the self-confidence indicator with an average value of 4.3, which means that healthcare workers have strong confidence in their abilities to carry out tasks and face challenges. Thus, it can be concluded that interference from personal life into work remains a threat to the psychological well-being of healthcare workers in Sumenep even though they have fairly high self-confidence. This is aligned with research (Abubaeda et al., 2024) which states that employees with high levels of self-confidence generally have greater confidence in completing tasks and are motivated to work harder and face various challenges.

Most healthcare workers are in the productive age group and have extensive work experience. Those aged 31-40 who are married or have children generally receive stronger social support (Yudiani & Istiningtyas, 2022; Meliana & Sahrani), so that exposure to various clinical situations contributes to

the development of strong self-efficacy. Furthermore, the communal society of Sumenep provides social support from family and the surrounding community. This support contributes to a positive perception of their abilities, as healthcare workers feel valued and a vital part of their community. This also increases healthcare workers' self-confidence in carrying out their professional roles, despite facing high work demands.

Based on the results of this study, WLB contributes 47.8% to the PWB of healthcare workers in Sumenep. This means that almost half of the changes in the psychological well-being of healthcare workers can be explained by how well they balance work demands and personal life. This high value also illustrates that healthcare workers in Sumenep are highly dependent on the quality of WLB because the conditions take into account the context of the region, which has limited facilities for recreation and coping spaces, so that an imbalance between work demands and personal life has the potential to have a greater impact on the psychological condition of healthcare workers.

The results obtained in this study contribute to expanding previous findings that highlight the influence of WLB on PWB. (Fauziah et al., 2025) explain that healthcare workers who can manage their work and personal lives show good well-being. This indicates that when individuals can manage WLB, they will be better able to maintain emotional stability, reduce psychological fatigue, and increase job satisfaction. (Jaelani and Nugraha., 2024) reinforce these findings by showing that WLB affects nurses' performance not only directly but also through the mediation of improved psychological well-being. This means that psychological well-being plays an important role in determining how work-life balance can contribute to the quality of healthcare workers' performance.

Research from (Oktaria et al., 2021) and (Mardlotillah & Fahmawati., 2023) also provides additional evidence that individuals with high WLB contribute to their high psychological well-being. This shows that WLB is an important factor in reducing stress levels in the work environment.

CONCLUSION

This study concludes that WLB significantly affects the PWB of healthcare workers in Sumenep, indicating that WLB serves as a crucial protective mechanism in maintaining their psychological stability amid high work demands. The practical implication of this finding is for healthcare managers to develop policies that support WLB, such as proportional workload arrangements or the provision of internal wellness facilities, given the limited means of stress reduction in the region. Work factors in the institutional environment, such as task load and role demands, also shape how healthcare workers maintain this balance. This understanding helps institutions see the dynamics of healthcare workers' well-being more comprehensively from a WLB perspective.

Awards

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BIBLIOGRAPHY

1. Abubaeda, R. Y., Alam, S., & Gunawan. (2024). Pengaruh kepercayaan diri terhadap kinerja provinsi sulawesi tenggara. *15*(2), 281-291.
2. Aprianto, B., & Zuchri, F. N. (2021). Implementasi manajemen sumber daya manusia kesehatan di fasilitas kesehatan: A literature review. *Jurnal Ilmiah Kesehatan*, 2(September), 160–166.
3. Chendra, W. J., Paramarta, V., Dianvayani, G., Iqbal, R., & Harahap, M. (2023). Theoretical study: Pengelolaan work life balance pada tenaga kesehatan di rumah sakit. *Jurnal Ilmiah Manajemen*, 3(2).
4. Egan, H., Hapsari, I. I., Wahyuni, L. D., & Gumelar, G. (2025). Analisis psikometri instrumen psychological well-being pada dokter: Adaptasi skala pengukuran. *Jurnal Penelitian dan Pengukuran Psikologi: JPPP*, 14(1), 8–16. <https://doi.org/10.21009/jppp.141.02>
5. Fauziah, Z. Y., Nurhastuti, S. E., & Astari, K. (2025). Hubungan antara work life balance dan psychological well-being pada ibu yang bekerja sebagai perawat. *In Search*

6. Jaelani, A. S., & Nugraha, Y. (2024). Pengaruh work life balance terhadap job performance yang dimediasi oleh psychological well-being pada perawat. *Psychocentrum Review*, 6(1), 31–38. <https://doi.org/10.26539/pcr.611990>
7. Maatisya, F. Y., & Santoso, A. P. A. (2022). Rekonstruksi kesejahteraan sosial bagi tenaga kesehatan di rumah sakit. *Jurnal Ilmu Sosial dan Ilmu Politik*, 6(3), 10337–10355. <https://doi.org/10.36312/jisip.v6i3.3395>
8. Maimunah, F., Lestari Kadiyono, A., & Nugraha, Y. (2024). Reliabilitas dan validitas konstruk work-life balance pada remote working employee di Indonesia. *Tekmapro*, 19(1), 94–103. <https://doi.org/10.33005/tekmapro.v19i1.387>
9. Mardlotillah, I. A. M., & Fahmawati, Z. N. (2023). Work life balance dan psychological well being pada karyawan perusahaan. *Universitas Muhammadiyah Sidoarjo*.
10. Maulidira, A., Huda, N., Fitriah, A., & Marsha, G. C. (2024). Pengaruh dukungan tenaga kesehatan terhadap psychological well-being ibu menyusui di wilayah kerja Puskesmas Kayu Tangi. *Jurnal Keperawatan*, 4, 1–23.
11. Meliana, N., & Sahrani, S. (2024). Peran work-life balance dan resiliensi terhadap psychological well-being wanita dewasa muda yang bekerja. *Jurnal Sains Sosial dan Humaniora*, 5(1), 44–55.
12. Mubarak, A. (2023). Apakah work-life balance masih layak diteliti? Systematic review mengenai work life balance terkini. *Jurnal Psikologi*, 68–81.
13. Oktaria Grahani, F., Mardiyanti, R., Permei Sela, N., & Nuriyah, S. (2021). Psychological well being (PWB) terhadap work life balance (WLB) pada perempuan bekerja. *Prosiding Seminar Nasional & Call for Paper "Peran Perempuan Sebagai Pahlawan Di Era Pandemi" PSGESI LPPM UWP*, 8(1), 86-93. <https://doi.org/10.38156/gesi.v8i1.42>
14. Philip, J., & Cherian, V. (2020). Factors affecting the psychological well-being of health care workers during an epidemic: A thematic review. *Indian Journal of Psychological Medicine*, 42(4), 323–333. <https://doi.org/10.1177/0253717620934095>
15. Pinggian, B., Opod, H., & David, L. (2021). Dampak psikologis tenaga kesehatan selama pandemi COVID-19. *Jurnal Biomedik*, 13(28), 144–151.
16. Rahmi, A. (2024). Peran work-life balance terhadap psychological well-being pegawai yang bekerja selama new normal covid-19. *Al-Ishlah: Jurnal Ilmiah Pendidikan*, 16(1), 123–135.
17. Sugiyono. (2020). Metodologi penelitian kuantitatif, kualitatif dan R&D. *Alfabeta*.
18. Sayekti, L. N. & Suhartini. (2018). Work life balance dan work engagement : Dampaknya terhadap kepuasan kerja. 132–142.
19. Tangkelangi, N. I. (2023). Pengaruh dimensi budaya terhadap implementasi refleksi kolektif dalam perspektif collectivism dan high-power distance. 3(1), 16–26.
20. Wibowo, M. E. S. (2022). Studi fenomenologi terkait psychological well-being pada pelaku usaha batik di Kampoeng Batik Kauman Kota Pekalongan. *INOBIS: Jurnal Inovasi Bisnis dan Manajemen Indonesia*, 5(4), 489-504.
21. Yudiani, W., & Istiningtyas, L. (2022). Psychological well-being and work-life balance for woman lecturers. *Psikis: Jurnal Psikologi Islami*, 8(2), 150–160.