

# Navigating Dual Identities: Exploring the Impact of Professional Identity on Work-Life Balance Among Staff Nurses at a Tertiary Hospital

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## Abstract

According to estimates from the International Council of Nurses (ICN) and the World Health Organisation (WHO), there is a 5.9 million-person nursing shortage globally, with the largest shortages found in South Asia, Africa, the WHO Eastern Mediterranean region, and certain Latin American countries. The overall number of nursing graduates must rise by roughly 8% annually in order to address the shortfall, and their retention rates and employability must also be improved. Objectives: To assess the level of work life balance and professional identity among Staff Nurses a Tertiary Hospital. To correlate the level of work life balance and professional identity among Staff Nurses a Tertiary Hospital. To Associate the level of work life balance and professional identity among Staff Nurses with their selected demographic variables. Methodology: Quantitative approach and descriptive research design was adopted for this study., The study was conducted at a Tertiary Hospital. Results: The findings showed that 61.7% of nurses had moderate work-life balance, while 60% displayed a high level of professional identity. A statistically significant positive correlation ( $r=0.326$ ,  $p<0.05$ ) was observed, indicating that improved work-life balance enhances professional identity. Demographic variables, particularly family income, significantly influenced work-life balance ( $p=0.032$ ), while gender showed a significant relationship with professional identity ( $p=0.009$ ).

**Keywords:** Professional identity, Work life balance, Staff nurses, Tertiary hospital

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## INTRODUCTION

According to estimates from the International Council of Nurses (ICN) and the World Health Organisation (WHO), there is a 5.9 million-person nursing shortage globally, with the largest shortages found in South Asia, Africa, the WHO Eastern Mediterranean region, and certain Latin American countries. The overall number of nursing graduates must rise by roughly 8% annually in order to address the shortfall, and their retention rates and employability must also be improved [1]. However, quality—that is, skilled nurses—is more important than quantity. They also need to have a strong sense of professionalism. Research demonstrates a positive correlation between job satisfaction and professional identity, defined as an individual's perspective on professional traits, views, values, motives, and experience, and job retention (Slay and Smith, 2010). We must develop and hone the professional identities of nursing students, as they will be the future nursing workforce[1]. Job satisfaction, which in turn encourages job retention, has been linked to professional identity, which is described as one's viewpoint on professional traits, beliefs, values, motives, and experience (Slay and Amith 2010). [1]. According to the WHO report from March 18, 2022, nurses and midwives are responsible for half of the

global shortage of health workers. Southeast Asia and Africa have the biggest shortages of these health workers [3]. Burnout and low job satisfaction have a direct correlation with low levels of work-life balance and/or professional identity (Mei et al., 2022). Research has also demonstrated that any lack of clarity regarding one's professional identity can have a substantial negative impact on practitioners' dissemination of professional opinions and the perceived value of a profession [3]. In the 1990s, research on nurses' work-life balance became clear. Job sharing among staff nurses to promote work-life balance was the subject of the first study on work-life balance among nursing professionals (Kane & Kartha, 1992). Borman (1993) followed this with a study on chief nurse executives' balance between work and personal life. [3]. Studies of work-life balance among nurse faculty members led to research on their challenges in balancing the demands of their personal lives with those of their jobs (Grigsby & Megel, 1995). The acute global shortage of nursing faculty has made work-life balance a major concern. 36% of all nursing schools had 1,900 full-time faculty vacancies in 2010, according to the NLN. A study by Cornelius, Dreher, and Smith Glasgow (2012) discovered that out 168 (26%) of the 624 PhD nursing faculty members in the sample planned to retire within the next five years, and 335 (53%) over the next 10 years. The study makes use of statistical tools such as the Pearson correlation coefficient, independent-sample t-test, Cronbach's alpha, and exploratory factor analysis.to achieve its objectives [2].

Numerous studies have demonstrated that job satisfaction and professional identity have an impact on nurses' intentions to leave their jobs. To the best of our knowledge, though, no research has looked at this problem in connection with new nurses. Consequently, the goal of the current Research was to investigate the relationship among nurses employed at a Tertiary Hospital between professional identity, job satisfaction, and turnover intention. The results showed a somewhat favourable correlation between job satisfaction and work-life balance, suggesting a significant linear relationship between the two variables. In order to preserve equality for all workers, particularly male and female employees as well as married and single workers, such policies and initiatives should be strategically framed.

## METHODOLOGY

The research approach used was a quantitative approach and research design adopted for the study was descriptive research design. A non-probability convenient sampling technique was used to select the sample of the study. The sample size consists of 60 staff nurses working in a Tertiary Hospital.

## DEVELOPMENT AND DESCRIPTION OF THE TOOL

### SECTION A:

This section consists of Demographic variables: Age, Gender, Years of working, Educational qualification, Religion, Type of family, Marital status, occupation of spouse, Family Income .

### SECTION B

Work Life balance: The work life balance scale was developed by Hayman's in 2005.It has 15 item on a 7 point likert scale. Here we have used semi structured questionnaire to assess the work life balance among the staff nurses working at a Tertiary Hospital.

### SECTION C

Professional Identity: The Professional Identity Scale for Nursing Students (PISNS) was developed by Hao et al (2014) and is a measurement tool to evaluate the developing level of professional identity in nursing students. It has five factors with 17-items on a 5-point rating scale. The Cronbach's alpha and split-half reliability are 0.83 and 0.84 respectively.

## SCORING AND INTERPRETATION

- Descriptive analysis is to be used to describe **demographics characteristics**
- **Work life balance:** The total score is calculated by sum of all items. For the WLB the total score ranges between 16 and 80 with a higher score indicating poor work life balance. The scale is divided into four levels-very low (16-32), low (33-47), moderate (48-64), high (65-80).

| All questions | STRONGLY<br>AGREE<br>5 | AGREE<br>4 | NEUTRAL<br>3 | STRONGLY<br>DISAGREE<br>2 | DISAGREE<br>1 |
|---------------|------------------------|------------|--------------|---------------------------|---------------|
|               |                        |            |              |                           |               |

**Professional Identity:** The total score is calculated by finding the sum of all items. For PISNS the total score ranges from 17 to 85. The higher the individual score is, the more positive the professional identity is. The scale is divided into four levels: Low - Less than the 34th percentile (< 61); Moderate - More than the 34th percentile and less than the 67th percentile (61 - 71) and High - 67th percentile and more ( $\geq 71$ )

|               |                     |            |              |                        |               |
|---------------|---------------------|------------|--------------|------------------------|---------------|
| All questions | STRONGLY AGREE<br>5 | AGREE<br>4 | NEUTRAL<br>3 | STRONGLY DISAGREE<br>2 | DISAGREE<br>1 |
|---------------|---------------------|------------|--------------|------------------------|---------------|

**Chi-square test:** This test is primarily used to examine whether two categorical variables are independent in influencing the test statistic.

### CONTENT VALIDITY OF THE TOOL

Content validity of the tool was established on the basis of opinion of nursing experts of SRM College of Nursing. Based on the expert suggestions, a few modifications were made to the tool. The finalized tool with the corrections was used for data collection.

### RELIABILITY OF THE TOOL

The reliability of the tool was assessed during pilot study using Cronbach's alpha. The Cronbach's alpha reliability coefficient normally ranges between 0 to 1.

### ETHICAL CONSIDERATION

The study was approved by research committee of SRM college of Nursing, SRMIST, Kattankulathur. Permission was obtained from each participant for the study before starting data collection, Assurance was given to the subjects that anonymity of each individual would be maintained and they can withdraw from the study at any time.

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**Table 1: Frequency and percentage distribution of demographic variables of the staff nurses in a Tertiary Hospital.**

N = 60

| Demographic Variables            | Frequency | Percentage |
|----------------------------------|-----------|------------|
| <b>Age in years</b>              |           |            |
| <20                              | 1         | 1.7        |
| 21 - 30                          | 55        | 91.7       |
| 31 - 40                          | 4         | 6.7        |
| >40                              | -         | -          |
| <b>Gender</b>                    |           |            |
| Male                             | 5         | 8.3        |
| Female                           | 55        | 91.7       |
| <b>Years of working</b>          |           |            |
| 0 - 1 year                       | 34        | 56.7       |
| 2 - 5 years                      | 18        | 30.0       |
| 6 - 10 years                     | 5         | 8.3        |
| >10 years                        | 3         | 5.0        |
| <b>Educational qualification</b> |           |            |
| Post Basic Nursing               | 1         | 1.6        |
| DGNM                             | 19        | 31.7       |
| B.Sc. Nursing                    | 40        | 66.7       |
| M.Sc. Nursing                    | -         | -          |
| <b>Religion</b>                  |           |            |
| Hindu                            | 44        | 73.3       |

| Demographic Variables       | Frequency | Percentage |
|-----------------------------|-----------|------------|
| Muslim                      | 1         | 1.7        |
| Christian                   | 15        | 25.0       |
| Others                      | -         | -          |
| <b>Type of family</b>       |           |            |
| Nuclear family              | 40        | 66.7       |
| Joint family                | 20        | 33.3       |
| <b>Marital status</b>       |           |            |
| Married                     | 13        | 21.7       |
| Unmarried                   | 47        | 78.3       |
| Divorced                    | -         | -          |
| Prefer not to say           | -         | -          |
| <b>Occupation of spouse</b> |           |            |
| Government job              | 1         | 1.6        |
| Private job                 | 22        | 36.7       |
| None                        | 37        | 61.7       |
| <b>Place of residence</b>   |           |            |
| Rural                       | 29        | 48.3       |
| Urban                       | 31        | 51.7       |
| <b>Family income</b>        |           |            |
| ≤10,000                     | 7         | 11.7       |
| 11,000 – 20,000             | 23        | 38.3       |
| 21,000 – 30,000             | 19        | 31.7       |
| ≥31,000                     | 11        | 18.3       |

## RESULT:

The table 1 shows that most of the staff nurses, 55(91.7%) were aged between 21 – 30 years, 55(91.7%) were female, 34(56.7%) were working for 0 – 1 year, 40(66.7%) were studied B.Sc. Nursing, 44(73.3%) were Hindus, 40(66.7%) belonged to nuclear family, 47(78.3%) were unmarried, 37(61.7%) were not working, 31(51.7%) were residing in urban area and 23(38.3%) had family income of 11,000 – 20,000.

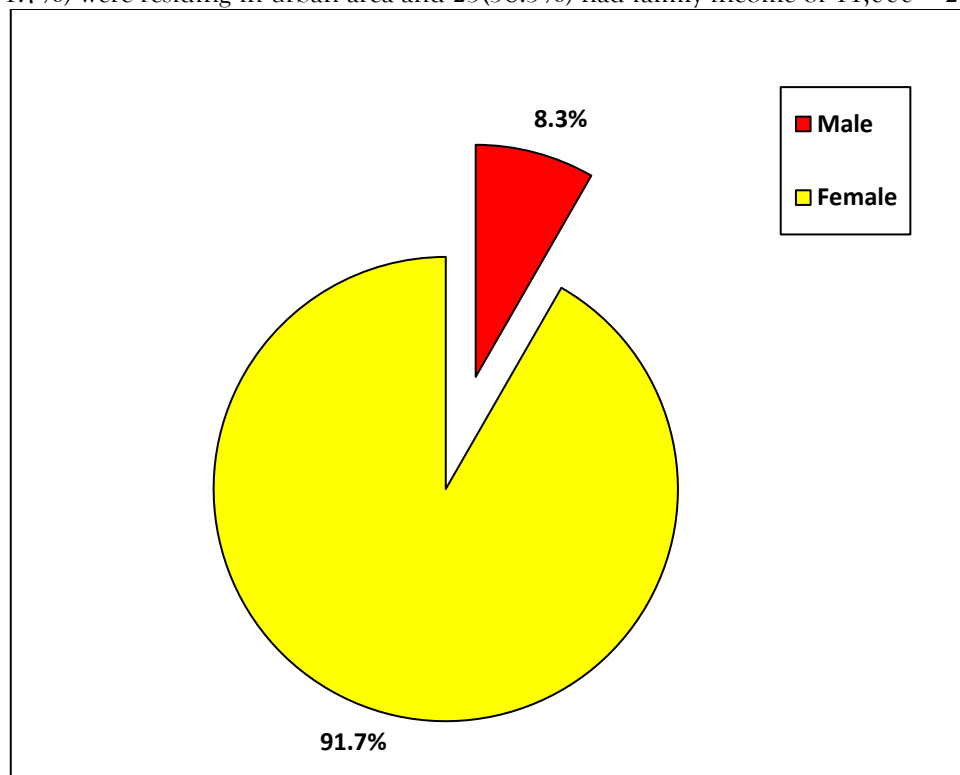


Figure 1: Percentage distribution of gender of the staff nurses

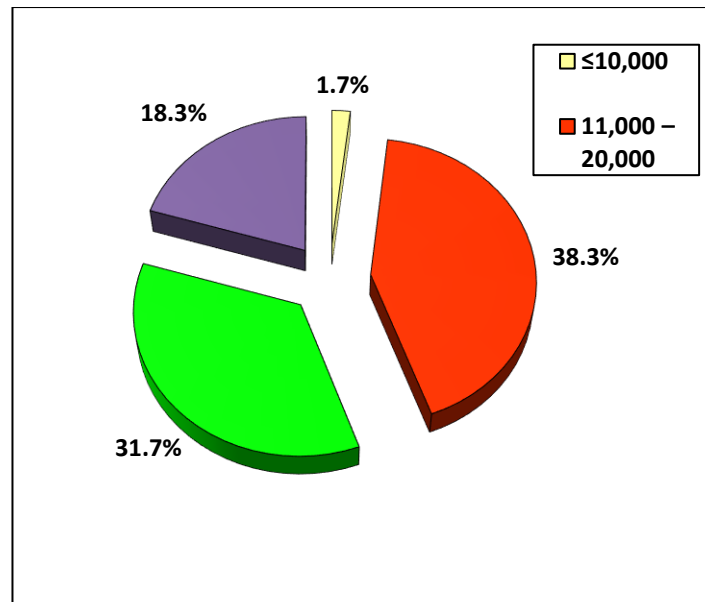


Figure 2: Percentage distribution of family income of the staff nurses

Table 2: Frequency and percentage distribution of level of work life balance among staff nurses in a Tertiary Hospital.

N = 60

| Level of Work Life Balance           | Frequency | Percentage |
|--------------------------------------|-----------|------------|
| Very low work life balance (16 – 32) | 1         | 1.7        |
| Low work life balance (33 – 47)      | 17        | 28.3       |
| Moderate work life balance (48 – 64) | 37        | 61.7       |
| High work life balance (65 – 80)     | 5         | 8.3        |

The table 2 shows that among staff nurses, 37(61.7%) had moderate work life balance, 17(28.3%) had low work life balance, 5(8.3%) had high work life balance and only one (1.7%) had very low work life balance.

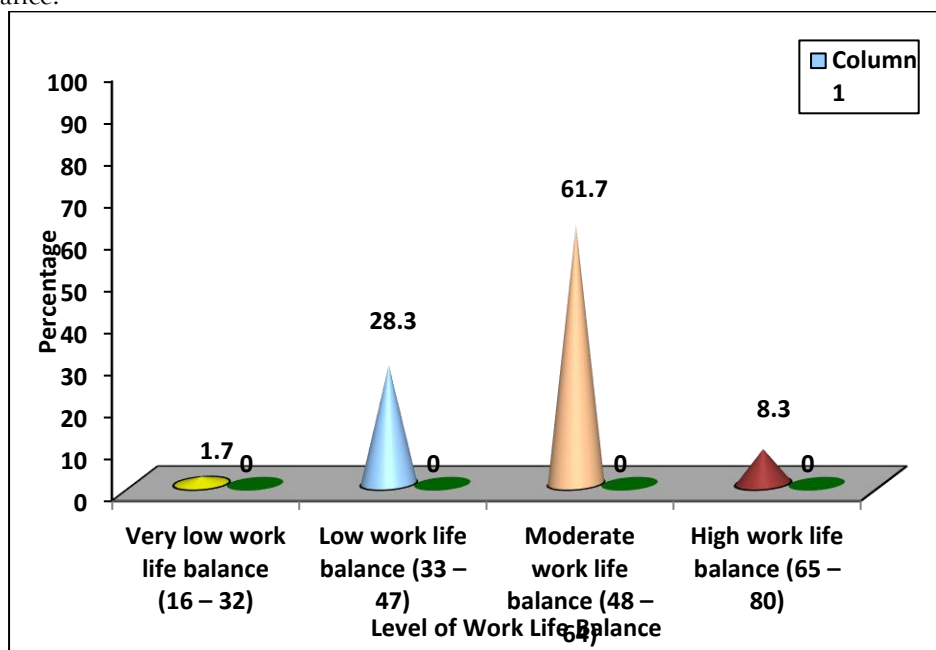


Figure 3: Percentage distribution of level of work life balance among staff nurses

Table 3: Frequency and percentage distribution of level of professional identity among staff nurses in a Tertiary Hospital.

N = 60

| Level of Professional Identity | Frequency | Percentage |
|--------------------------------|-----------|------------|
|--------------------------------|-----------|------------|

|                                          |    |      |
|------------------------------------------|----|------|
| Very low professional identity (16 – 32) | -  | -    |
| Low professional identity (33 – 47)      | 2  | 3.3  |
| Moderate professional identity (48 – 64) | 22 | 36.7 |
| High professional identity (65 – 80)     | 36 | 60.0 |

The table 3 shows that among staff nurses, 36(60%) had moderate professional identity, 36(60%) had high professional identity and 2(3.3%) had low professional identity.

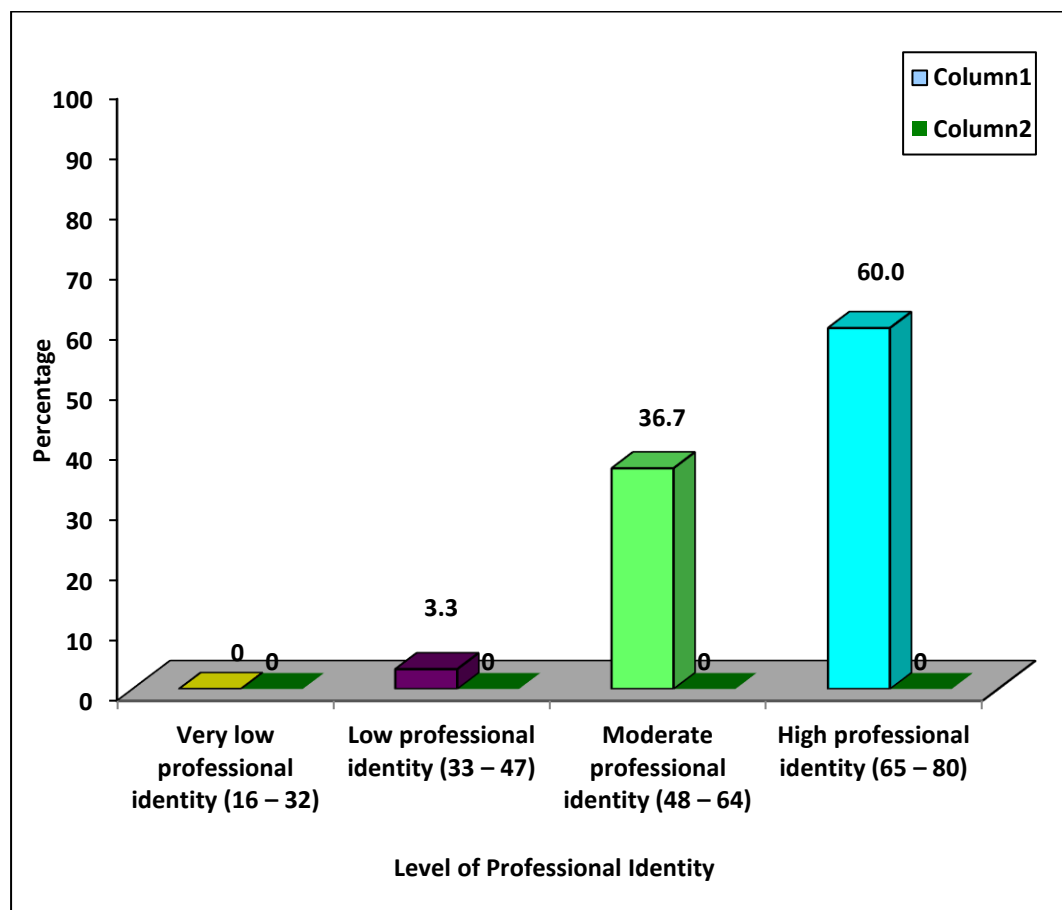


Figure 4: Percentage distribution of level of professional identity among staff nurses

Table 4: Correlation between work life balance and professional identity among staff nurses a Tertiary Hospital.  
N = 60

| Variables             | Mean  | S.D  | Karl Pearson's Correlation & p-Value |
|-----------------------|-------|------|--------------------------------------|
| Work life balance     | 52.40 | 9.94 | t=0.326<br>p=0.011, S*               |
| Professional identity | 64.80 | 9.13 |                                      |

\*p<0.05, S - Significant

#### Result:

The table 4 shows that the mean score of work life balance was 52.40±9.94 and the mean score of professional identity was 64.80±9.13. The calculated Karl Pearson's Correlation 'r' value of r=0.326 shows a mild positive correlation between work life balance and professional identity statistically significant at p<0.05 level which infers that when work life balance among staff nurses improves then their professional identity also improves.

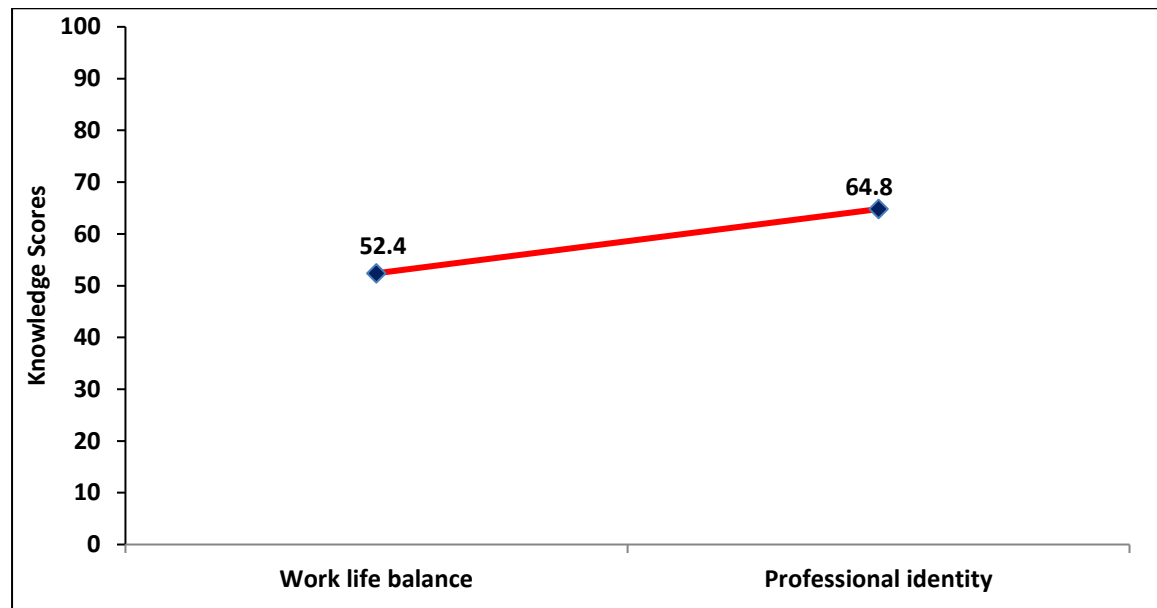


Figure 5: Correlation between work life balance and professional identity among staff nurses

Table 5: Association of level of work life balance among staff nurses with their selected demographic variables.

N = 60

| Demographic Variables            | Frequency | Chi-Square & p-value                      |
|----------------------------------|-----------|-------------------------------------------|
| <b>Age in years</b>              |           | $\chi^2=3.128$<br>d.f=6<br>p=0.793<br>N.S |
| <20                              | 1         |                                           |
| 21 – 30                          | 55        |                                           |
| 31 – 40                          | 4         |                                           |
| >40                              | -         |                                           |
| <b>Gender</b>                    |           | $\chi^2=3.391$<br>d.f=3<br>p=0.335<br>N.S |
| Male                             | 5         |                                           |
| Female                           | 55        |                                           |
| <b>Years of working</b>          |           | $\chi^2=4.189$<br>d.f=9<br>p=0.899<br>N.S |
| 0 – 1 year                       | 34        |                                           |
| 2 – 5 years                      | 18        |                                           |
| 6 – 10 years                     | 5         |                                           |
| >10 years                        | 3         |                                           |
| <b>Educational qualification</b> |           | $\chi^2=5.220$<br>d.f=6<br>p=0.516<br>N.S |
| Post Basic Nursing               | 1         |                                           |
| DGNM                             | 19        |                                           |
| B.Sc. Nursing                    | 40        |                                           |
| M.Sc. Nursing                    | -         |                                           |
| <b>Religion</b>                  |           | $\chi^2=1.886$<br>d.f=6<br>p=0.930<br>N.S |
| Hindu                            | 44        |                                           |
| Muslim                           | 1         |                                           |
| Christian                        | 15        |                                           |
| Others                           | -         |                                           |
| <b>Type of family</b>            |           | $\chi^2=2.443$<br>d.f=3<br>p=0.486<br>N.S |
| Nuclear family                   | 40        |                                           |
| Joint family                     | 20        |                                           |
| <b>Marital status</b>            |           |                                           |

| Demographic Variables       | Frequency | Chi-Square & p-value                      |
|-----------------------------|-----------|-------------------------------------------|
| Married                     | 13        | $\chi^2=0.320$<br>d.f=3<br>p=0.956<br>N.S |
| Unmarried                   | 47        |                                           |
| Divorced                    | -         |                                           |
| Prefer not to say           | -         |                                           |
| <b>Occupation of spouse</b> |           | $\chi^2=4.951$<br>d.f=6<br>p=0.550<br>N.S |
| Government job              | 1         |                                           |
| Private job                 | 22        |                                           |
| None                        | 37        |                                           |
| <b>Place of residence</b>   |           | $\chi^2=5.534$<br>d.f=3<br>p=0.137<br>N.S |
| Rural                       | 29        |                                           |
| Urban                       | 31        |                                           |
| <b>Family income</b>        |           | $\chi^2=18.275$<br>d.f=9<br>p=0.032<br>S* |
| ≤10,000                     | 7         |                                           |
| 11,000 – 20,000             | 23        |                                           |
| 21,000 – 30,000             | 19        |                                           |
| ≥31,000                     | 11        |                                           |

\*p<0.05, S – Significant, N.S – Not Significant

### Result

The table 5 shows that the demographic variable family income ( $\chi^2=18.275$ ,  $p=0.032$ ) had shown statistically significant association with level of work life balance among staff nurses at  $p<0.05$  level and the other demographic variables had not shown statistically significant association with level of work life balance among staff nurses at  $p<0.05$  level.

**Table 6: Association of level of professional identity among staff nurses with their selected demographic variables.**

N = 60

| Demographic Variables            | Frequency | Chi-Square & p-value                      |
|----------------------------------|-----------|-------------------------------------------|
| <b>Age in years</b>              |           | $\chi^2=1.178$<br>d.f=4<br>p=0.882<br>N.S |
| <20                              | 1         |                                           |
| 21 – 30                          | 55        |                                           |
| 31 – 40                          | 4         |                                           |
| >40                              | -         |                                           |
| <b>Gender</b>                    |           | $\chi^2=9.421$<br>d.f=2<br>p=0.009<br>S** |
| Male                             | 5         |                                           |
| Female                           | 55        |                                           |
| <b>Years of working</b>          |           | $\chi^2=1.749$<br>d.f=6<br>p=0.941<br>N.S |
| 0 – 1 year                       | 34        |                                           |
| 2 – 5 years                      | 18        |                                           |
| 6 – 10 years                     | 5         |                                           |
| >10 years                        | 3         |                                           |
| <b>Educational qualification</b> |           | $\chi^2=3.951$<br>d.f=4<br>p=0.413<br>N.S |
| Post Basic Nursing               | 1         |                                           |
| DGNM                             | 19        |                                           |
| B.Sc. Nursing                    | 40        |                                           |
| M.Sc. Nursing                    | -         |                                           |
| <b>Religion</b>                  |           | $\chi^2=3.767$<br>d.f=4<br>p=0.438<br>N.S |
| Hindu                            | 44        |                                           |
| Muslim                           | 1         |                                           |
| Christian                        | 15        |                                           |

| Demographic Variables       | Frequency | Chi-Square & p-value |
|-----------------------------|-----------|----------------------|
| Others                      | -         |                      |
| <b>Type of family</b>       |           | $\chi^2=1.318$       |
| Nuclear family              | 40        | d.f=2                |
| Joint family                | 20        | p=0.517              |
|                             |           | N.S                  |
| <b>Marital status</b>       |           | $\chi^2=2.181$       |
| Married                     | 13        | d.f=2                |
| Unmarried                   | 47        | p=0.336              |
| Divorced                    | -         | N.S                  |
| Prefer not to say           | -         |                      |
| <b>Occupation of spouse</b> |           | $\chi^2=2.633$       |
| Government job              | 1         | d.f=4                |
| Private job                 | 22        | p=0.621              |
| None                        | 37        | N.S                  |
| <b>Place of residence</b>   |           | $\chi^2=2.229$       |
| Rural                       | 29        | d.f=2                |
| Urban                       | 31        | p=0.328              |
|                             |           | N.S                  |
| <b>Family income</b>        |           | $\chi^2=3.777$       |
| ≤10,000                     | 7         | d.f=6                |
| 11,000 – 20,000             | 23        | p=0.707              |
| 21,000 – 30,000             | 19        | N.S                  |
| ≥31,000                     | 11        |                      |

\*p<0.05, S – Significant, N.S – Not Significant

## Result

The table 6 shows that the demographic variable gender ( $\chi^2=9.421$ ,  $p=0.009$ ) had shown statistically significant association with level of professional identity among staff nurses at  $p<0.01$  level and the other demographic variables had not shown statistically significant association with level of professional identity among staff nurses at  $p<0.05$  level.

## CONFLICT OF INTEREST

We have no conflicts of interest to disclose. All authors declare that they have no conflicts of interest.

## CONCLUSION

The demographic variable gender ( $\chi^2=9.421$ ,  $p=0.009$ ) had shown statistically significant association with level of professional identity among staff nurses at  $p<0.01$  level and the other demographic variables had not shown statistically significant association with level of professional identity among staff nurses at  $p<0.05$  level.

The mean score of work life balance was  $52.40\pm9.94$  and the mean score of professional identity was  $64.80\pm9.13$ . The calculated Karl Pearson's Correlation 'r' value of  $r=0.326$  shows a mild positive correlation between work life balance and professional identity statistically significant at  $p<0.05$  level which infers that when work life balance among staff nurses improves then their professional identity also improves.

## REFERENCES

1. WHO, April 7, 2020 WHO and partners call for urgent investment in nurses
2. Mei, X. X., Wang, H. Y., Wu, X. N., Wu, J. Y., Lu, Y. Z., & Ye, Z. J. (2022). Professional Identity Among Freshmen Nursing Students: A Latent Profile and Moderated Mediation Analysis. *Frontiers in psychology*, 13, 779986. <https://doi.org/10.3389/fpsyg.2022.779986>
3. WHO, March 18, 2022 Nursing and midwifery
4. Cherry, K. (2023), Work life balance and Why Believing in yourself matters, Verywell mind. <https://www.verywellmind.com/what-is-self-efficacy-2795954>
5. Wikipedia, Work life balance. [https://en.wikipedia.org/wiki/work\\_life\\_balance](https://en.wikipedia.org/wiki/work_life_balance)

6. Cruess, R. L., Cruess, S. R. (2019). Professional identity formation and Communities of Practice, McGill University Faculty of Medicine.
7. Cavazos Montemayor, R. N., Elizondo-Leal, J. A., Ramírez Flores, Y. A., Cors Cepeda, X., & Lopez, M. (2020). Understanding the dimensions of a strong professional identity: a study of faculty developers in medical education. *Medical education online*, 25(1), 1808369. <https://doi.org/10.1080/10872981.2020.1808369>
8. Yao, X., Yu, L., Shen, Y., Kang, Z., & Wang, X. (2021). The role of self-efficacy in mediating between professional identity and self-reported competence among nursing students in the internship period: A quantitative study. *Nurse education in practice*, 57, 103252. <https://doi.org/10.1016/j.nepr.2021.103252>
9. Hao, Yu-Fang, Niu, Hui-Jun, Li, Li-Ping, Yue, Shu-Jin, Liu, Xiao-Hong, Measurement of professional identity in Chinese nursing students *International Journal of Nursing Sciences*, 2014/06/01, Volume-1. <https://doi.org/10.1016/j.ijnss.2014.05.002>
10. Gao, Z., Wei, X., Yang, L., Cui, D., Kong, L., Qi, L., & Zhang, P. (2022). Mediating role of career self-efficacy between clinical learning environment and professional identity in nursing students. *Journal of advanced nursing*, 78(4), 1012–1019. <https://doi.org/10.1111/jan.15027>
11. Zhao, Z. H., Guo, J. Y., Zhou, J., Qiao, J., Yue, S. W., Ouyang, Y. Q., Redding, S. R., Wang, R., & Cai, Z. X. (2023). Perceived social support and professional identity in nursing students during the COVID-19 pandemic era: the mediating effects of self-efficacy and the moderating role of anxiety. *BMC medical education*, 23(1), 117. <https://doi.org/10.1186/s12909-022-03968-6>