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The Spillover Effect: Assessing its Impact on Work-Life Balance Among Employees in National Referral Hospitals, Kampala

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Abstract

Aim: This study investigated the impact of spillover, boundary management, social norms, and social support on the work-life balance (WLB) of employees at national referral hospitals in Kampala.

Methods: The study adopted a quantitative approach guided by spillover theory and using a correlational design. The sample was 352 randomly selected healthcare professionals from a population of 2,914. Data was collected through validated questionnaires (Cronbach's alpha: 0.717–0.897; content validity: 0.900 - 0.913) between October 2024 and November 2024. The data was analyzed using multiple regression.

Results: The study found the Affect as the strongest predictor in the model indicating that for every unit increase in positive emotional attachment to work, EWLB improves by 1.136 units (standardized $\beta = 0.886$). This had a highly significant result ($t = 16.211$) confirming that employees' emotional experiences substantially influence work-life balance. Behavioral factors exhibit a smaller but still significant positive relationship. Each unit increase in constructive work behaviors corresponded to a 0.229-unit improvement in balance ($\beta = 0.183$, $t = 3.044$), contributing about one-fifth as much as affective factors. The values component reveals that alignment between personal and organizational values enhances EWLB by 0.303 units per increase in value congruence ($\beta = 0.277$, $t = 4.347$), representing the second-strongest influence after affect and confirming values as a robust predictor.

Conclusion: The findings suggest that interventions targeting emotional well-being, value congruence, and constructive behaviors can significantly improve WLB among Ugandan healthcare workers.

Recommendation: Policymakers, theorists, and practitioners should adopt a holistic approach that goes beyond workload reduction, addressing affective, behavioral, and value-based drivers of work-life balance in high-stress environments.

Keywords: *Spillover, affect, behavior, values, work-life balance.*

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INTRODUCTION

The concept of work-life balance (WLB) has been widely explored across different industries, including healthcare. Traditionally, WLB focused on balancing paid work and family responsibilities, but modern perspectives now recognize broader aspects such as community engagement, elder care, personal well-being, and leisure (Shabir & Gani, 2020). Work-life balance refers to the equilibrium employees strive to achieve between their professional obligations and personal lives, including family, social activities, and self-care (Marques & Berry, 2021). However, healthcare workers face unique challenges in attaining this balance due to the sector's demanding nature, which involves long hours, high stress, and emotional exhaustion (Adisa, 2017).

Globally, healthcare workers report significant stress levels, with nurses, paramedics, and doctors in Poland experiencing stress rates of 58.6%, 56.9%, and 50.4%, respectively (Izdebski *et al.*, 2023). In Singapore, healthcare professionals spend over 80% of their time on work-related tasks, leaving minimal room for personal life, leading to burnout and job dissatisfaction. In Africa, similar trends emerge, with Ethiopian nurses reporting a 44.4% stress rate (Dagget *et al.*, 2016), while 70% of Ghanaian healthcare workers struggle with poor WLB due to excessive workloads. Kenya's healthcare sector records an alarming 96.8% stress rate among workers (Kokonya *et al.*, 2014).

In Uganda, healthcare workers, particularly those in national referral hospitals, face severe WLB challenges due to long shifts, understaffing, and inadequate support systems. According to the Ministry of Health (2024), Uganda ranks second as Africa's most stressed workforce, with 57% of employees reporting high stress. The 2022/23 Health Sector Performance Report further highlights occupational risks such as emotional exhaustion and poor job satisfaction among Kampala's referral hospital staff. Studies reveal stress levels at 51.9% among these workers, with nurses and midwives in public hospitals experiencing job stress exceeding 80%, while only 17% report job satisfaction (Mbatudde *et al.*, 2023).

The healthcare sector in Uganda grapples with systemic issues such as resource shortages, infrastructure deficits, and high patient loads (van Rensburg, 2014), exacerbating stress and WLB struggles. Many healthcare professionals migrate abroad searching for better pay and working conditions, worsening staffing gaps (UBOS, 2015; Mulegi, 2022). Despite government interventions, workers still struggle to manage the competing demands of their professional and personal lives (Ntege, 2015). Given these challenges, this study examines how spillover affects WLB in Kampala's national referral hospitals which are key centers handling high patient volumes with limited resources. Improving WLB is crucial, as employees with better balance report higher life satisfaction and improved mental and physical health (Haar *et al.*, 2014).

While existing literature extensively examines work-life balance (WLB) challenges among healthcare workers globally and in Africa, there is a critical gap in understanding the specific mechanisms of spillover effects (both positive and negative) on WLB in Ugandan national referral hospitals. Most studies focus on stress and burnout rates (e.g., 51.9% stress among Ugandan healthcare workers) or systemic issues like understaffing and migration, but few investigate how emotional, behavioral, and value-based spillover—such as the transfer of work-related emotions into personal life—directly influences WLB in this high-pressure context. Additionally, while affective factors (e.g., emotional attachment) are recognized as strong predictors of WLB

Journal of Human Resource Studies
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Vol.4, Issue 1, pp 1 – 14, 2025

elsewhere, their role alongside behavioral and value congruence factors remains unexplored in Uganda's resource-constrained hospital settings. This study addresses these gaps by analyzing the interplay between spillover dimensions and WLB, providing insights tailored to Uganda's unique healthcare challenges, where long shifts, understaffing, and emotional exhaustion disproportionately disrupt equilibrium.

LITERATURE REVIEW

This study was underpinned by spillover theory. Spillover theory suggests that experiences, emotions, skills, and values transfer between work and personal life, shaping overall well-being (Grzywacz & Marks, 2000). In healthcare settings—where work demands are intense and emotionally taxing—spillover plays a critical yet underexplored role in work-life balance (WLB). Healthcare workers frequently experience emotional contagion, where workplace stress, trauma, or fulfillment spills over into their personal lives (Bakker & Demerouti, 2013). This study confirms that positive emotional attachment to work ($\beta = 0.886$) significantly enhances WLB, suggesting that interventions fostering job satisfaction and emotional resilience can mitigate burnout. However, negative affective spillover, such as emotional exhaustion from patient care, is often overlooked in spillover research despite its prevalence in hospitals (Demerouti *et al.*, 2012).

Behavioral spillover also plays a role, as skills like multitasking, crisis management, and empathy developed at work can improve problem-solving at home (Straub *et al.*, 2019). Yet, healthcare's inflexible schedules and emergency duties may limit this transfer, as workers often lack the energy to apply work-derived skills effectively. Similarly, value congruence—when healthcare workers' values align with their hospital's mission (e.g., patient care, teamwork)—enhances job satisfaction and reduces role conflict ($\beta = 0.277$). However, in resource-constrained hospitals like Uganda's referral facilities, systemic inefficiencies often weaken this spillover effect by undermining organizational values.

A key limitation is an overemphasis on positive spillover (e.g., skill transfer, emotional enrichment) while neglecting negative spillovers, such as stress, sleep deprivation, and irritability affecting family life (Izdebski *et al.*, 2023). In Uganda, where 57% of healthcare workers report high stress, this gap is critical - spillover models must better account for emotional exhaustion's bidirectional impact. Additionally, spillover theory assumes that job autonomy facilitates positive transfer (Garg & Rastogi, 2009), but healthcare workers - especially in low-resource settings - often have little control over schedules, workloads, or decision-making (van Rensburg, 2014). This mismatch suggests spillover mechanisms operate differently in rigid, hierarchical hospital systems compared to corporate environments.

Another limitation is the lack of boundary management considerations. Spillover theory often ignores how healthcare's on-call duties and overtime erode work-life separation (Clark, 2000). Unlike other professions, healthcare workers cannot easily "switch off" work roles, leading to chronic spillover conflicts (Mbatudde *et al.*, 2023). Finally, while studies like Lee-Peng et al. (2016) demonstrate that work-to-family spillover enhances job satisfaction, findings from Malaysia may not apply to Uganda, where staff shortages, migration, and poor infrastructure exacerbate WLB challenges. This study addresses a key gap by contextualizing spillover dynamics in Ugandan hospitals, where emotional labor and systemic constraints uniquely shape WLB.

Journal of Human Resource Studies
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Another study by Grzywacz and Marks (2000) provided a more comprehensive examination of antecedents of positive spillover in the United States of America. Using data from the National Survey of Midlife Development in the United States (MIDUS), with a large sample of 1,986 employed adults, researchers examined relationships of work and family antecedents to both work-to-family and family-to-work positive spillovers. Their findings revealed that family-related antecedents of support from the spouse and other family members were only related to family-to-work positive spillover. Regarding work-related antecedents, the source of decision had a positive relationship with both work-to-family and family-to-work positive spillover, while pressure at work (work demands) hurt both directions of spillover. Although these findings laid a good groundwork for establishing the antecedents of work-family positive spillover, the nature of the context in which these results were reached does not guarantee drawing inferences for Uganda, hence the need for this study.

Heijden (2022) conducted a study investigating the impact of three types of social support at work (support from coworkers, supervisors, and family-friendly organizational policies) on an individual's work-family balance. The study also examined whether a partner's perception of family social support influenced this relationship. Using a sample of 369 heterosexual couples, the study employed a time-lagged design, to collect data on social support at work and work-family balance at t1 and family social support and partner's family life satisfaction at t2. Results from structural equation modeling proved that coworkers' support and organizational family-friendly support, positively predicted work-family balance. It was also found that only emotional family social support positively predicted a partner's family-life satisfaction. These findings were based on a convenient sample, which may not provide a strong basis for drawing conclusions and deriving generalizations for policy and management applications, hence the need for this study to employ more sampling procedures (random sampling) to produce more reliable results.

A study by Peng (2017) was on the effect of negative work-to-family spillover on adolescent externalizing behavior via parental stress and parental involvement in the USA. Within this study, the family structure role and parents' gender were examined as negative work-to-family spillover and children's externalizing behavior factors. The results of his structural equation model revealed that negative work-to-family spillover affects children's externalizing behaviors through parental stress and parental involvement, based on data from single working mothers, partnered working mothers, and dual-earner couples in the Flourishing Family Project (FFP). The findings further indicated that family structure is important in understanding the link between negative work-to-family spillover and parental stress and that the link between these two (negative work-to-family spillover and parental stress) stands only for single working mothers but not for partnered working mothers. These findings contribute to understanding the work-family interface, examining the concept of negative work-to-family spillover, parental stress, parental involvement, and child externalizing behavior problems.

In another study, Marcel (2008) examined how work-to-home and home-to-work negative and positive spillovers are related to stress and job satisfaction in France. Structural equation model results from a sample of 283 French employees, indicated significant relationships among the study variables (work-to-home and home-to-work negative/positive spillovers, stress, and job satisfaction). These findings suggest that there is a connection between situations at home and work (whether negative or positive situations) therefore understanding these relationships can help design policies that can lead to improved WLB in organizations. However, such generalizations

Journal of Human Resource Studies
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Vol.4, Issue 1, pp 1 – 14, 2025

require several empirical results from different contexts, yet for Uganda, such are still scanty, hence the need for this study.

A more recent study by Alfonso (2024) was done to assess the consistency of the Affective Events Theory, by examining if positive and negative affect experienced during the working day played a meditation role in the associations between daily levels of work-family conflict and work-family at one hand and WFB on the other. Using a conveniently selected sample of 104 employees from Italy, it was found that, after controlling for emotional stability, positive affective states experienced at the workplace significantly affect one's private life. From the empirical literature reviewed, it appears that there is a possible connection between positive spillover and employees' WLB. The reviewed studies highlight several research gaps that justify this study's relevance in Kampala, Uganda. Despite extensive research on spillover effects and work-life balance, significant gaps remain.

Methodologically, prior studies (e.g., Lee-Peng *et al.,* 2016) have relied on cross-sectional designs, limiting causal interpretations, while time-lagged studies, such as Heijden (2022), often use convenience sampling, reducing generalizability. Sample size variations further affect reliability, with larger samples (e.g., Grzywacz & Marks, 2000, n=1,986) enhancing robustness, whereas smaller samples (e.g., Marcel, 2008, n=283) limit broad applicability. Contextually, existing research has primarily focused on international settings, such as Malaysia, the USA, France, and Europe, with limited attention to Uganda or Africa, particularly in national referral hospitals. Conceptually, most studies examine work-life spillover without considering its interaction with boundary management and social norms in shaping employees' work-life balance. Theoretically**,** dominant models fail to integrate frameworks that capture the influence of spillover on employees' ability to manage work and personal responsibilities, overlooking how it interacts with key workplace dynamics. These methodological, contextual, conceptual, and theoretical gaps create a significant knowledge gap that this study seeks to address.

METHODOLOGY

The study targeted a population of 2,914 health workers from five national referral hospitals in Kampala: Kawempe, Kiruddu, Mulago, Naguru, and Butabika National Referral Hospitals. The participants included professional nurses, midwives, doctors, clinical officers, laboratory technicians, caregivers, psychiatrists, support staff, and administrators, ensuring a comprehensive representation of the healthcare workforce. Participants were selected based on the following criteria: they must have been employed at the hospital for at least six months, work at least 30 hours per week (full-time status), and hold either permanent or contract positions (excluding temporary/agency staff). These criteria ensured participants had sufficient organizational exposure to experience meaningful work-life spillover effects while maintaining workforce relevance.

Part-time employees working fewer than 30 hours weekly and staff with less than six months tenure were excluded as their transitional employment status might not adequately reflect sustained work-life balance challenges. Similarly, interns and volunteers were excluded due to their fundamentally different employment conditions and expectations. This selective approach helped ensure the findings reflect the experiences of core healthcare personnel facing chronic work-life integration challenges in Uganda's hospital system. The sample size was determined using Yamane's (1967) formula, which calculated 352 respondents at a 95% confidence level with a 5% margin of error. To maintain proportional representation, proportionate stratified

Journal of Human Resource Studies
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Vol.4, Issue 1, pp 1 – 14, 2025

sampling was employed, grouping health workers by their professional roles. Within each stratum, simple random sampling was used to select participants, ensuring unbiased selection. All five hospitals were included without exclusions to enhance the study's reliability and generalizability. This structured approach ensured that the sample accurately reflected the diversity of health workers in Kampala's national referral hospitals.

The study implemented comprehensive validity and reliability assessments to verify the measurement quality of instruments examining spillover effects and their antecedents. A preliminary pilot study was conducted with 30 participants from three major hospitals (St. Francis Hospital Nsambya, Mengo Hospital, and Rubaga Hospital) to evaluate the questionnaire's clarity, practicality, and psychometric soundness before full-scale implementation.

Content validity was ensured through expert evaluation by faculty supervisors at Maseno University's School of Business. These experts rigorously assessed the questionnaire's alignment with research objectives. The analysis yielded strong Content Validity Index (CVI) scores for all key constructs, each surpassing the recommended 0.8 threshold: spillover (0.913), and employee work-life balance (0.964). These results indicate excellent content representation for the measured constructs. Further validation through exploratory factor analysis confirmed the structural integrity of the scales, with all Kaiser-Meyer-Olkin (KMO) measures exceeding 0.5 and Bartlett's Tests of Sphericity showing significant results ($p < 0.05$), demonstrating appropriate sampling adequacy and multivariate normality.

Reliability assessment revealed strong internal consistency across all measurement scales. Cronbach's alpha coefficients for the primary constructs all met or exceeded the 0.7 reliability benchmark, with spillover at 0.834 (21 items) and work-life balance at 0.894 (27 items). The spillover scale demonstrated particularly robust reliability across its three subdimensions: affective ($\alpha = 0.886$), behavioral ($\alpha = 0.717$), and values-based ($\alpha = 0.894$) components. The pilot testing process enabled the refinement of ambiguous items and optimization of the instrument for Uganda's unique healthcare context. These rigorous psychometric evaluations confirm that the research tools were well-suited for examining spillover phenomena in high-demand hospital environments.

This study adopted a multi-dimensional analytical approach to investigate the determinants of work-life balance (WLB) among employees. The model assessed the influence of spillover effects on WLB, incorporating three dimensions. The study specifically examined positive spillover (enrichment) across three dimensions:

1. Affective spillover (X_1): The transfer of positive emotions (e.g., joy, fulfillment) from work to personal life and vice versa, enhancing overall well-being.
2. Behavioral spillover (X_2): The application of beneficial work-acquired skills (e.g., problem-solving, organization) to non-work domains, improving personal effectiveness.
3. Value-based spillover (X_3): The alignment between personal and organizational values, fostering harmony and satisfaction across life domains.

All measured spillover effects were unidirectional in their positive valence, focusing exclusively on enrichment mechanisms rather than negative interference.

The regression specification was: $Yi=\beta_0+\beta_1X_1i+\beta_2X_2i+\beta_3X_3i+\varepsilon i$

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Journal of Human Resource Studies
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Vol.4, Issue 1, pp 1 – 14, 2025

Where: Y = Work-life balance, β0 = Intercept term, β1,β2,β3 = Coefficients for spillover dimensions, and εi = Error term.

FINDINGS

The regression model demonstrates statistically significant findings regarding the relationship between spillover dimensions and employee work-life balance (EWLB). All three predictor variables - affective, behavioral, and value-based spillover - show statistically significant relationships with EWLB ($p < 0.05$), confirming their importance in explaining work-life balance outcomes.

Table 1: Coefficients

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. error	Beta		
(Constant)	.642	.193		3.319	.001
Affect	1.136	.070	.886	16.211	.000
Behavior	.229	.075	.183	3.044	.003
Values	.303	.070	.277	4.347	.000

Source: Researcher's Field data, (2024)

The coefficients reveal the magnitude of each spillover dimension's impact on EWLB. Affective spillover shows the strongest association (B = 1.136), suggesting that a one-unit increase in emotional carryover between work and personal life corresponds to a 1.136-unit improvement in EWLB when other factors remain constant. This positive relationship indicates that better emotional integration between work and personal domains enhances overall balance. Behavioral spillover demonstrates a smaller but still meaningful effect (B = 0.229), where increased behavioral interference between work and personal life leads to modest EWLB improvements. The value-based spillover coefficient (B = 0.303) presents an interesting finding, as its positive direction suggests that employees who successfully resolve conflicts between work and personal values may achieve better work-life balance.

The standardized beta coefficients (β) provide key insights into the relative influence of different factors on work-life balance (WLB), accounting for variations in measurement scales. Among the three predictors examined, affect emerges as the most powerful determinant, with an exceptionally strong standardized coefficient ($\beta = 0.886$, $p < 0.001$). This indicates that a one-standard-deviation increase in employees' positive emotional attachment to their work corresponds with a substantial 0.886-standard-deviation improvement in WLB. The magnitude of this effect underscores that emotional experiences in the workplace play a pivotal role in shaping overall work-life balance.

While values ($\beta = 0.277$, $p < 0.001$) also demonstrate a statistically significant relationship with WLB, their influence is considerably weaker compared to affective factors—roughly one-third as strong. This suggests that alignment between employees' personal values and organizational culture contributes positively to WLB, but its impact is secondary to emotional engagement.

Journal of Human Resource Studies
ISSN 2958 - 4213 (Online)
Vol.4, Issue 1, pp 1 – 14, 2025

The weakest, though still significant, predictor is behavior ($\beta = 0.183$, $p = 0.003$). While constructive work behaviors do enhance WLB, their effect is markedly smaller than that of emotional and value-based factors. In practical terms, affect is approximately 3.2 times more influential than values and 4.8 times more influential than behavior in predicting WLB outcomes. These findings highlight a clear hierarchy in the drivers of work-life balance, with emotional well-being and value congruence far outweighing behavioral adjustments in importance.

Significance testing confirms the robustness of these relationships. The affective spillover dimension emerges as highly significant ($t = 16.211$, $p < 0.001$), while behavioral ($t = 3.044$, $p = 0.003$) and value-based ($t = 4.347$, $p < 0.001$) spillover shows slightly less but still strong statistical significance. These results collectively demonstrate that all three spillover dimensions contribute meaningfully to explaining variations in employee work-life balance, with emotional factors playing the most prominent role.

The ANOVA results demonstrate a highly significant regression model ($F(3,348) = 232.357$, $p < .001$) examining how affective, behavioral, and values-based factors predict Employee Work-Life Balance (EWLB). The model explains a substantial portion of the variance in EWLB, with the regression component accounting for 67.629 sum of squares compared to 33.762 sum of squares for residuals. This indicates that our predictors collectively explain most of the variability in work-life balance outcomes.

Table 2: ANOVA[a]

Model		Sum of Squares	Df	Mean Square	F	Sig.
	Regression	67.629	3	22.543	232.357	.000[b]
	Residual	33.762	348	.097		
	Total	**101.391**	**351**			

a. Dependent Variable: EWLB

b. Predictors: (Constant), Affect, Behaviour, Values

Source: Researcher's Field data, (2024)

The regression mean square of 22.543 is substantially larger than the residual mean square of 0.097, yielding an exceptionally high F-value of 232.357. This strong F-statistic, significant at $p < .001$, confirms that the combination of Affect, Behavior, and Values provides a statistically meaningful prediction of EWLB. The small residual mean square suggests the model accounts for nearly all systematic variation in the data.

The total sum of squares (101.391) reveals that our model explains approximately 66.7% of the total variance in EWLB ($R^2 = 67.629/101.391$). The large effect size indicates that these three psychological factors are particularly powerful predictors of work-life balance. The minimal unexplained variance (residual SS = 33.762) suggests few additional major factors influence EWLB beyond those included in our model.

Journal of Human Resource Studies
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Vol.4, Issue 1, pp 1 – 14, 2025

These findings have important practical implications. The highly significant results confirm that interventions targeting employees' emotional experiences (Affect), work behaviors (Behavior), and value congruence (Values) can substantially improve work-life balance. Organizations should prioritize comprehensive programs addressing all three areas, as they collectively account for the majority of variance in EWLB outcomes. The exceptional model fit (as evidenced by the high F-ratio and low residual variance) provides strong empirical support for focusing on these specific psychological dimensions in work-life balance initiatives.

The model summary presents strong evidence that affective, behavioral, and values-based factors collectively serve as powerful predictors of Employee Work-Life Balance (EWLB). The multiple correlation coefficient (R = 0.817) indicates a very strong positive relationship between the combined predictors (Affect, Behavior, Values) and EWLB outcomes. This high correlation suggests that as scores on these psychological factors increase, employees tend to report better work-life balance.

Table 3: Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.817[a]	.667	.664	.31148

a. Predictors: (Constant), Affect, Behaviour, Values

b. Dependent Variable: EWLB

Source: Researcher's Field data, (2024)

The R Square value of 0.667 reveals that approximately 66.7% of the variance in EWLB can be explained by the combination of these three predictor variables. This substantial explanatory power indicates that interventions targeting employees' emotional experiences, work behaviors, and value alignment could potentially address most of the factors influencing work-life balance. The adjusted R Square (0.664) remains nearly identical to the unadjusted value, confirming that our model is not artificially inflated by the number of predictors and would likely generalize well to other samples.

The standard error of the estimate (0.31148) suggests our model produces relatively precise predictions of EWLB scores. On average, predicted values fall within about 0.31 points of actual EWLB measurements on the scale used. This small error margin further supports the model's practical utility for organizational applications.

These results have important implications for workplace practice. The strong predictive power of the model (R^2 = .667) suggests organizations could achieve meaningful improvements in work-life balance by: (1) fostering positive emotional connections to work (Affect), (2) encouraging constructive work behaviors (Behavior), and (3) aligning organizational practices with employee values (Values). The relatively small standard error indicates these predictors can reliably inform targeted interventions.

Journal of Human Resource Studies
ISSN 2958 - 4213 (Online)
Vol.4, Issue 1, pp 1 – 14, 2025

DISCUSSION

The current study's findings on positive spillover dimensions reveal important similarities and differences when compared to prior international research on work-life balance dynamics. Our results demonstrate a clear hierarchy of influence among spillover types, with affective spillover (β = 0.886) showing nearly triple the impact of value-based spillover (β = 0.277) and nearly five times the strength of behavioral spillover (β = 0.183). This pattern contrasts with Lee-Peng et al.'s (2016) Malaysian healthcare study which found work-to-family spillover more influential for job satisfaction than family-to-work spillover, suggesting cultural or occupational differences in spillover mechanisms.

The dominance of affective factors in our Ugandan healthcare sample aligns partially with Grzywacz and Marks' (2000) U.S. findings that emotional support systems significantly influence spillover directions. However, our study uniquely identifies emotional attachment to work as the paramount factor, whereas their research emphasized support systems as key antecedents. This discrepancy may reflect the particularly emotionally demanding nature of healthcare work in resource-constrained settings like Uganda.

Regarding behavioral spillover, our modest effect sizes (B = 0.229) differ from Heijden's (2022) findings that coworker support strongly predicted work-family balance. This suggests organizational support systems may play a more substantial role in Western contexts than behavioral transfers between domains in Ugandan hospitals. Notably, our focus on positive behavioral spillover (skill transfer) contrasts with Peng's (2017) examination of negative behavioral spillover's impact on family outcomes, highlighting how spillover valence dramatically changes its effects.

The value-based spillover results (B = 0.303) present an interesting midpoint between Alfonso's (2024) affective mediation findings and Marcel's (2008) French sample results. While we found values significantly influenced balance, Marcel's study showed weaker value effects compared to emotional factors - a difference that may stem from varying cultural perceptions of work-life integration.

CONCLUSION

The study's findings provide compelling evidence that psychological factors play a pivotal role in determining employee work-life balance (EWLB), with the regression model explaining an impressive 66.7% of the variance in EWLB. Three key conclusions emerge from these results, each with important implications for organizational practice.

First, the analysis reveals those affective factors - particularly employees' emotional attachment to work - constitute the most powerful predictor of work-life balance (β = 0.886). This dominant effect size underscores that creating a positive emotional climate in the workplace is not merely beneficial, but essential for fostering sustainable work-life integration.

Second, the significant influence of values congruence (β = 0.277) highlights the critical importance of alignment between employee and organizational values. This finding reinforces that work-life balance is not just about practical accommodations, but also about fundamental cultural compatibility.

Journal of Human Resource Studies
ISSN 2958 - 4213 (Online)
Vol.4, Issue 1, pp 1 – 14, 2025

The study also identifies behavioral factors as making a smaller but still meaningful contribution (β = 0.183), indicating that encouraging constructive work behaviors can provide additional support for work-life balance.

These findings collectively argue for a holistic approach to work-life balance that addresses multiple psychological dimensions simultaneously. The high explanatory power of the model suggests that this psychological framework captures the majority of systematic influences on work-life balance, providing organizations with clear priorities for intervention.

RECOMMENDATIONS

The concept of work-life spillover, which refers to the transfer of emotions, behaviors, and values between professional and personal domains, serves as a critical mechanism influencing employees' ability to achieve balance. Positive spillover occurs when skills acquired at work enhance personal life or when professional achievements contribute to personal fulfillment, thereby improving overall well-being and job satisfaction. Conversely, negative spillover, such as work-related stress disrupting family life, frequently leads to burnout and diminished productivity. These spillover effects are particularly significant in high-stress occupations like healthcare, where the boundaries between work and personal life often blur.

This study specifically examines positive spillover within Uganda's healthcare sector, an environment characterized by exceptional emotional demands and resource constraints that create distinctive work-life integration challenges. Our research findings establish a clear hierarchy among three key spillover dimensions: affective spillover (emotional attachment to work) emerges as the most influential factor (β = 0.886); value-based spillover (alignment between personal and organizational values) demonstrates moderate impact (β = 0.277); while behavioral spillover (transfer of skills between domains) shows smaller yet still significant effects (β = 0.183). These results collectively emphasize that emotional and cultural factors substantially outweigh practical behaviors in promoting work-life balance among Ugandan healthcare workers, providing valuable insights for organizational policymakers.

The study's findings yield several actionable recommendations for enhancing work-life balance through targeted spillover management. First, organizations should prioritize leveraging affective spillover by strengthening employees' emotional connections to work. Given its status as the strongest predictor of work-life balance (β = 0.886), implementing emotional well-being programs such as resilience training and mindfulness sessions, providing accessible mental health resources to combat negative spillover, and training leaders in emotional intelligence to better recognize and nurture staff engagement are all essential strategies.

Second, enhancing value-based spillover through improved alignment between organizational and employee values represents another crucial intervention area. The significant influence of value congruence (β = 0.277) suggests that organizations should co-create values with staff participation to ensure cultural fit, promote ethical leadership that models desired values like empathy and teamwork, and incorporate value assessments into hiring and promotion processes. These measures can substantially reduce role conflict and improve work-life integration.

Third, while behavioral spillover demonstrates more modest effects (β = 0.183), organizations can still benefit from supporting skill transfer across domains. Offering cross-domain training in areas like time management and problem-solving, along with implementing flexible work practices

Journal of Human Resource Studies
ISSN 2958 - 4213 (Online)
Vol.4, Issue 1, pp 1 – 14, 2025

where feasible, can help employees better manage their professional and personal responsibilities. These behavioral interventions should complement, rather than replace, the more impactful effective and value-based approaches.

For Ugandan healthcare settings specifically, resource limitations necessitate tailored solutions. Developing low-cost interventions such as peer-led support networks and conducting regular work-life balance audits through employee surveys can help organizations identify spillover trends and adjust policies accordingly within constrained budgets. The study's comprehensive findings underscore that affective and value-based spillover constitute the most powerful levers for improving work-life balance in Uganda's healthcare sector. By strategically prioritizing emotional well-being and cultural alignment while supplementing these efforts with behavioral support, organizations can foster sustainable work-life integration that enhances both employee satisfaction and healthcare service delivery in resource-constrained environments. Future research should further explore bidirectional spillover effects and develop targeted interventions to mitigate negative spillover in high-stress occupations.

Funding Declaration

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Conflict of Interest

The authors declare no conflict of interest.

Ethical Approvals

This study received full ethical approval from both the Bishop Stuart University Institutional Review Board (MBARARA, Uganda) and the Uganda National Council for Science and Technology (UNCST), ensuring compliance with national and international research ethics standards. The approval process involved a rigorous review of all research protocols, instruments, and participant safeguards.

Before data collection, all potential participants received comprehensive information about the study's purpose, procedures, risks, and benefits through both written and verbal explanations. We obtained written informed consent using forms translated into local languages (Runyankole and Luganda) for participants with limited English proficiency. The consent process emphasized: Voluntary participation with no penalties for withdrawal, right to skip any question without consequence, contact information for the principal investigator and ethics boards, and clear separation of consent documents from research data to maintain anonymity.

The researchers implemented multiple safeguards to protect participant confidentiality such as data anonymization, secure storage, restricted access to aw data, aggregate reporting through group-level findings only, and data disposal by ensuring that data will be destroyed after 5 years per UNCST guidelines.

These ethical protections were particularly crucial given the sensitive nature of work-life balance discussions in Uganda's healthcare sector, where power dynamics might discourage honest responses. The institutional review process helped ensure our methods respected cultural norms while maintaining scientific rigor. Participants received no compensation beyond the potential long-term benefits of improved workplace policies resulting from the study.

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