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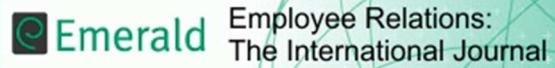
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Understanding the causes and consequences of work-family conflict: an exploratory study of Nigerian employees

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Manuscript ID	ER-11-2015-0211.R2
Manuscript Type:	Research Paper
Keywords:	Work-family conflict, Work-family balance, spill-over, Nigerian employees

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3 **Understanding the causes and consequences of work-family conflict: an exploratory study**
4 **of Nigerian employees**
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8
9 **Abstract**
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11 **Purpose** - An important theme for a 21st century employee is a desire for work and family
12 balance which is devoid of conflict. Drawing on detailed empirical research, this article
13 examines the multi-faceted causes and consequences of work-family conflict in a non-western
14 context (Nigeria).
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21 **Methodology** - The paper uses qualitative data gleaned from the semi-structured interviews of
22 88 employees (44 university lecturers and 44 medical doctors) in cities in the six geo-political
23 zones of Nigeria.
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29 **Findings** – The findings showed that work pressure, heavy familial duties, poor infrastructural
30 facilities, and a lack of suitable and practicable work-family balance policies are the main causes
31 of work-family conflict in Nigeria. Juvenile delinquencies, broken marriages/families, and an
32 unhappy workforce are among the grave consequences of work-family conflict among Nigerian
33 employees.
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41 **Originality/value** – This article suggests that the availability of basic infrastructural facilities,
42 more governmental support, practicable work-family policies, inter alia, will reduce the level of
43 work-family conflict for Nigerian employees and will also results in positive spill-over from the
44 work domain to the family domain and vice-versa.
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52 **Keywords:** work-family balance, work-family conflict, spill-over, Nigerian employees.
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Introduction

An understanding of the causes and consequences of work-family conflict (WFC) is of practical importance for both employees and employers. It will help employees work towards solving the problem of WFC by achieving a balance between their work demands and familial obligations (Burke et al., 2011). Employers will be able to offer help to employees in terms of ameliorating any WFC and will eventually have a healthy, happy, and productive workforce, thereby fostering societal harmony (Ransome, 2007; Kelly, Phyllis and Eric, 2011). This is, perhaps, why Harrington and Ladge (2009, p. 148) described work-family balance (WFB) as one of the “most significant business issues of the 21st century”. It can be argued that WFC is an issue of global concern, with a great deal of research having been conducted about western countries (Brough and Kalliath, 2009; O’Driscoll, Brough and Kalliath, 2006). However, fewer studies have been undertaken about Sub-Saharan Africa (SSA) (specifically Nigeria) (Ajiboye, 2008; Akintoya, 2010). This article provides an empirical insight into the causes and consequences of WFC by using Nigeria as the empirical focus. The social, cultural, and economic contexts differ from those of the West. This article aims to provide a Sub-Saharan African context for WFC.

WFC has been discussed extensively in management literature and has dominated public discourse on work-family interface in the past four decades (Runte and Mills, 2006). The strong interest in this subject may well be connected with the fact that WFC negatively affects families, workers, and employers/organisations (Grover and Crooker, 1995; Konrad and Mangel, 2000). According to Runte (2009, p. 19), conflict arises “*as a result of competition for the limited resource of the employee’s time and commitment*”. For Voydanoff (2004), however, WFC arises when there are pressures and conflicting responsibilities from both the work and family domains,

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3 which eventually lead to the incompatibility of the two domains. This is in stark contrast with
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5 human capital theory in that workers have a limited amount of energy and time. Therefore, when
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7 they are involved in multiple roles, the demands of these roles (based on the assumption of the
8
9 scarcity of their resources) will diminish the available resources (Becker, 1985; Runte, 2009).
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13 Typically, WFC has been considered particularly problematic for women (Lundberg, Mardberg
14
15 and Frankenhauseret, 1994; Williams and Alliger, 1994). However, this article has adopted a
16
17 gender-neutral stance in order to discover whether male workers also experience WFC.
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19 Therefore, will test for gender differences in the experiences of WFC. Spill-over theory will be
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21 used as the theoretical framework for this study. According to spill-over theory, spill-over occurs
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23 between work and family domains when feelings, attitudes, and behaviours in one field (e.g.
24
25 work) are affected by role participation in another area (e.g. family). The key postulation of the
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27 spill-over model is that values, behaviours, and skills learned in one area might have an effect or
28
29 influence on the other domain (Edwards and Rothbard, 2000; Staines, 1980). It is important to
30
31 note that empirical research on WFC regarding Nigeria is scarce. In addition, Nigeria leans
32
33 toward a collectivist culture which emphasises the importance of family ties and perceives
34
35 family as a social security shield for every member of the family (Chakrabarty, 2009).
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39 Most of the extant research about Africa in terms of work-family interface has been undertaken
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41 in the context of South Africa and has focused on the themes of occupations, industries, and
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43 gender (Epie and Ituma 2014; Mokomane and Chilwane, 2014). The high interest in women in
44
45 this research area within the African setting, according to Bardoel et al. (2008), is due to the
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47 historical conceptualisation that WFB predominantly affects women who are in paid
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49 employment and have families. The article sought data from medical doctors and university
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51 lecturers across Nigeria. The two professions could potentially present interesting similarities
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3 and differences. Across the world, both professions are generally prone to challenges in terms of
4 WFB and WFC. Medical doctors have a reputation for working long hours, working at
5 unsociable hours (e.g. at nights), and experiencing work pressure to pay perfect and complete
6 attention to detail. These negative experiences have been reported almost universally: including
7 the USA (Keeton et al., 2007), Japan (Umene-Nakano et al., 2013), and New Zealand (Gander et
8 al., 2010). University lecturers, on the other hand, generally tend to have more work flexibility.
9 However, they usually set personal goals for high attainment; therefore, they require a balance
10 between the demanding requirements of teaching, research, and professional practice. They take
11 on administrative tasks and pastoral roles for students. Consequently, long hours of work are
12 common. In the UK, for instance, academics who reported experiencing WLC and discrepancy
13 between their present and ideal levels of work-life integration tended to be less healthy, less
14 satisfied with their jobs, and more likely to seriously consider leaving academia (Kinman and
15 Jones, 2008).

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34 The similarities and differences between these two professions can be critically evaluated as to
35 how organisational and personal targets influence WFC. Specifically, the objectives of this study
36 are to: (a) critically evaluate the causes of WFC among medical doctors and lecturers in Nigeria,
37 (b) examine the consequences of WFC, and (c) offer recommendations as to what can be done
38 either to prevent or ameliorate WFC. It is hoped that the findings will: (a) provide valuable
39 empirical data to assist decision makers about public policy, (b) be useful for academics and for
40 the formulation and application of human resource management (HRM) policies which will
41 benefit both employers and employees, and (c) stimulate further research into WFC.

52 53 **Work-family Conflict in Context**

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3 WFC is a widely-researched subject area in terms business and organisational behaviour
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5 (Poelmans, O'Driscoll and Beham, 2005). Its origin in literature can be traced to the studies of
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8 Rapoport and Rapoport (1965, 1969), Renshaw (1976), Kanter (1977), Pleck (1977), Handy
9
10 (1978), and Pleck and Staines (1985). The main theme of all these studies is that work and
11
12 family demands always contest for employees' time and energy, which eventually results in
13
14 conflict (Poelmans, O'Driscoll and Beham, 2005). This means that different expectations in
15
16 terms of roles in work and family domains can create conflicts which can result in reduced
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18 participation, satisfaction, and performance in either or both of these domains (O'Driscoll,
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20 Brough and Kalliath, 2006). Usually, employees experience WFC when work demands interfere
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22 with participation or performance in home demands and vice-versa (Greenhaus and Beutell,
23
24 1985).
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30 WFC is a form of inter-role conflict which occurs as a result of incompatibility between work
31
32 and family role demands. This incompatibility in role demands often leads to unhealthy
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34 functioning in both work and family roles (Greenhaus and Beutell, 1985). Arguably, work and
35
36 family roles are probably the most important roles in an individual's life (Morris and Madsen,
37
38 2007) and each role has high expectations that could bring forth conflict if it is not effectively
39
40 managed (Elloy and Smith, 2003). The greater the role demands of an individual's employment,
41
42 the higher the level of conflict that they are likely to experience in the family domain and vice-
43
44 versa (Cinamon, 2006). However, conflict does not only flow from the work domain to the
45
46 family domain, the reverse can also occur. This depends on an individual's involvement in both
47
48 spheres. It could be work-family conflict or family-work conflict (Voydanoff, 2004). Work-
49
50 family conflict occurs when work demands interfere with family needs and family-work conflict
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52 occurs when family demands interfere with work requirements (Greenhaus and Beutell, 1985;
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3 Voydanoff, 2004). Hence, conflict, in whichever direction, is always bad for employees'
4 participation and performance in both domains (Chandola et al., 2004).
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9 Carlson and Frone (2003) discovered that WFC is caused by internal and external interference.
10 Internal interference is caused by self-inflicted demands and external interference is caused by a
11 source which is external to the individual. Greenhaus and Beutell (1985) argued that
12 incompatibility between work and family domains could lead to three types of conflict: time-
13 based conflict, strain-based conflict, and behaviour-based conflict. None of these conflicts are
14 specific to a particular area. They occur in both work and family domains (Carlson, 1999). Time-
15 based conflict occurs when time or attention from one area hinders performance in that domain
16 but facilitates performance in another domain. Strain-based conflict occurs when demands from
17 one area make it very difficult to meet the demands of another domain. Behaviour-based conflict
18 occurs when a behaviour which is active in one role is inappropriately transferred to the other
19 role (Greenhaus and Beutell, 1985, p. 77). WFC is not exclusively a women's issue, rather, it is
20 an issue for both men and women (Noor, 2002). Researchers have, however, argued that women
21 are more susceptible to experiencing WFC than men (Adisa, Mordi and Mordi, 2014; Lundberg
22 et al., 1994; Williams and Alliger, 1994). Women are confronted with the need to engage in paid
23 employment and to care for their households (Carlson and Frone, 2003). Such care was referred
24 to by Gerstel and Gross (1987) as "unpaid family duties". Women's engagement in paid
25 employment (which often augments their family's financial status) (Smith, 1987) does not, in
26 any way, disturb their domestic responsibilities such as cooking, cleaning, shopping, etc.
27 (Cowan, 1987). This, perhaps, explains why, for women, conflicts between the demands of work
28 and family are always increasing (Noor, 2002).
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3 Some of the extant research (e.g. Bardoel et al., 2008; Drago and Kashian, 2003) has also
4 suggested that the boundaries of work-family research should include all studies and discourse
5 connecting paid employment and the individuals' commitment to their friends and families. It is
6 herein argue this does not exclude self-employment and, therefore, define work-family research
7 to include extant research which investigates the relationships between all forms of employment,
8 including self-employment and individuals' commitment to their kith and kin. This article, while
9 seeking to contribute to the broad debate about WFC, provides detailed empirical evidence of the
10 causes and consequences of WFC in a non-Western context (Nigeria) and offers
11 recommendations to ameliorate the competing pressures of work demands and familial
12 responsibilities.
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26 27 **Conceptual Background**

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29 Work-family interface has been viewed and researched from different standpoints (Guest, 2001).
30 This study is guided by the spill-over model (Staines, 1980), which explains how events,
31 activities, emotions, and attitudes in one area can positively or negatively affect another
32 (Edwards and Rothbard, 2000). According to the model, feelings, attitudes, behaviours, and
33 emotions in work and family domains usually transcend the physical boundaries of those
34 domains. In addition, the model provides that these domains affect one another through a
35 permeable boundary either positively or negatively (Edwards and Rothbard, 2000; Staines,
36 1980). This implies that spill-over tends to occur between family and work. This typically arise
37 when feelings, attitudes, and behaviours in one area are affected by role participation in another.
38 For example, happiness at work leads to happiness at home and vice-versa (Barnett, 2005).
39 Positive spill-over occurs when experiences and role performances in one domain manifest in
40 enhanced emotions, attitudes, or behaviours (Carlson et al., 2006), contributing to greater
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3 involvement, satisfaction, or performance in the other (Rogers and May, 2003). Positive spill-
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5 over enhances employees' role performance (Edwards and Rothbard, 2000; Pedersen et al.,
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7 2009). Employees who experience positive spill-over will always want to keep their job (Haar
8
9 and Bardoel, 2008). This is one of the great benefits of positive spill-over (Edwards and
10
11 Rothbard, 2000; Grzywacz, Almeida and McDonald, 2002). Conversely, negative spill-over is
12
13 experienced when pressures from work and family domains are incompatible (Bellavia and
14
15 Frone, 2005). For example, if an employee has a frustrating day at work, they are more likely to
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17 carry the ruinous mood home. This will invariably affect the family domain (Staines, 1980).
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22 Dilworth and Kingsbury (2005) argued that working hours are correlated with negative spill-
23
24 over. This is because long working hours often include an enormous volume of work demand
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26 and, in most cases, less flexibility (Dilworth, 2004). This usually presents employees with less
27
28 time to manage family responsibilities (Ruppanner and Pixley, 2012). However, in a practical
29
30 sense, both positive and negative spill-over, in terms of working hours, can co-exist to some
31
32 degree and can share relatively distinct determinants as well as consequences (Jennings and
33
34 McDougald, 2007). The key message of the spill-over model is that values, behaviours, and
35
36 skills learned in one area might have an effect or influence on another (Staines 1980; ten
37
38 Brummelhuis et al., 2013). Several studies have also supported the notion that skills, values,
39
40 behaviours, etc. in one domain influence another (Crouter, 1984; Edwards and Rothbard, 2000;
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42 Ruderman et al., 2002). This article, therefore, applies the spill-over model because of its
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44 strengths in terms of explaining how experiences (negative or positive) are transferred from one
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46 domain another (Sok, Blomme and Tromp, 2014).
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53 54 55 **The Nigerian Context** 56 57 58 59 60

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3 Nigeria is a West African country with a population of over 181 million people. There are over
4
5 250 ethnic groups, and more than 400 dialects in Nigeria (CIA World Fact Book, 2015). The
6
7 workforce is estimated to be 57.46 million and the unemployment rate 23.9% (CIA World Fact
8
9 Book, 2015). This figures were disputed by the Nigerian Bureau of Statistics who stated the
10
11 unemployment rate at 7.5% based on those who worked for less than 20 hours in the week
12
13 preceding the survey (Nigerian Bureau of Statistics, 2015). If one adds the 16.6% who worked
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15 20-39 hours in the week preceding the survey, then the figures are similar. The Nigerian health
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17 sector is formed of private and government/public hospitals and is regulated by the Medical and
18
19 Dental Council of Nigeria (MDCN). The Nigerian health worker base is one of the biggest in
20
21 Africa; yet, the health sector is struggling with a shortage of manpower (HRH Fact Sheet, 2010).
22
23 Nigerian universities, on the other hand, have a past glory of having been ranked among the best
24
25 of all of the Commonwealth universities (Okebukola, 2006). The country possesses around 45
26
27 private, 37 state, and 36 federal universities which are attended by over a million students every
28
29 year. The universities are supervised by the Federal Ministry of Education and the National
30
31 Universities Commission (NUC). However, there has been a significant increase in the number
32
33 of new universities in the past decade. This vast expansion of educational institutions has led
34
35 academic staff members to also take on administrative responsibilities. This has resulted in
36
37 increased workloads (NUC, 2009). These two sectors (health and education) have been chosen
38
39 due to the significance of health and education in terms of national development. In addition,
40
41 these two sectors evenly employ people across the country. In addition, it is essential to note that
42
43 Nigeria leans toward a collectivist culture and women are responsible for putting homes in order
44
45 in terms of caring for the children, doing the cooking and other domestic chores regardless of
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47 their social and employment status (Okonkwo, 2012)
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Methodology

Studies of WLB and WFC in an African setting have largely been empirical and the majority used a quantitative methodology (Mokomane and Chilwane, 2014). Aryee (2005) specifically suggested that in-depth interviews would help to provide an understanding of how work and family roles are socially constructed and contribute to lives of urban African parents. Similarly, Bardoel et al. (2008) argued that counter-intuitive findings (which are common in studies which use quantitative methodologies) are not appropriate. This study uses in-depth semi-structured interviews and a purposive sampling technique. Data were collected from cities in the six geopolitical zones of Nigeria. Medical doctors and lecturers from federal, state, and private institutions were interviewed. The full sample of this study was 88 (44 university lecturers and 44 medical doctors) as shown in Table 1. Respondents were sought by emailing existing personal contacts and referrals and by a snowballing process. It was quite noticeable from the interviews that all of the respondents had varied demographic profiles. In terms of the suitability criteria, all of the respondents were vetted in order to establish whether the interviewees were medical doctors and teaching employees of their various hospitals and universities respectively. As a rule of thumb, the researchers commenced the interviews by explaining the aims and objectives of the research. The interviewees were assured of the confidentiality and anonymity of their answers and places of work and were further guaranteed that only patterns across the answers would be reported. Open-ended questions were prepared and used as an interview guide. Each interview lasted between 35 and 40 minutes. The interviews were conducted in English. They were also voice-recorded and later transcribed for analysis. Following Braun and Clarke (2006), the generated data were analysed by using thematic content analysis. The themes became the categories for analysis (data analysis involved the use of pre-arranged codes which were verified

by a second coder to ensure reliability). The codes were generated from the themes that emerged during the analysis stage. Coding was carefully undertaken in order to look for evidence which included the key research objectives. Pseudonyms were used to ensure anonymity and confidentiality.

Table 1: Respondents' Profile

Doctors								
	Gender		Marital Status		Age Bracket			Total
	Male	Female	Married	Unmarried	31-40	41-50	51-60	
Private Hospital	7	9	12	4	6	8	2	16
State Hospital	6	7	9	4	5	6	2	13
Federal Hospital	7	8	13	2	4	10	1	15
Subtotal	20	24	34	10	15	24	5	44
Lecturers								
Private University	7	5	9	3	4	6	2	12
State University	6	8	12	2	5	8	1	14
Federal University	8	10	16	2	7	8	3	18
Subtotal	21	23	37	7	16	22	6	44
Overall Total	41	47	74	14	31	46	11	88

Around 53% of the respondents were female. 84% of all the respondents were married and 52% of the respondents were between 41-50 years old.

Findings

This study discovered four main causes of WFC among Nigerian employees. Respondents believed that work pressure, heavy familial duties, poor infrastructural facilities, and a lack of proper and practicable work-family policies are the main causes of WFC in Nigeria. Three significant consequences of WFC among Nigerian employees were also uncovered: broken marriages/families, unhappy workforce/performance at work, and aggravated juvenile delinquencies. The research questions, emergent themes, type of spill-over, and illustrative extracts are presented in Table 2.

Table 2: Emerging themes with illustrative extracts

Overarching Research Questions	Emerging Themes	Type of Spill-over	Illustrative Extracts
(1) What factors might be responsible for WFC?	(a) Work pressure	Negative Spill-over	<i>Work pressure is so much...The expectations are so high... Doctors' work for long hours... the pressure often has an adverse effect on our family lives.</i>
	(b) Obligatory familial duties	Negative Spill-over	<i>My household chores are so much that I am considering getting a house-maid. It is like two hard labours; one at work, the other at home.</i>
	(d) Poor infrastructural facilities	Negative Spill-over	<i>A lack of good supply of electricity, lack of fast and reliable Internet service... because of terrible traffic that always happens as a result of bad roads and a very poor transportation system.</i>
	(e) Lack of proper and practical work-family policies	Negative Spill-over	<i>There are no work-family policies in place to help me cushion my work and family's high demands... seriously, I can say that a lack of work-family policies is the primary cause of WFC.</i>
	(2) What are the consequences of WFC on work and family?	(a) Broken marriages/families	Negative Spill-over
(b) Unhappy employees/ performance at work		Negative Spill-over	<i>My work demands are affecting my duties as a wife and a mother... I am always unhappy when I think about the distance between myself and my family (as a result of work commitments)...my family is not happy with me.</i>
(c) Juvenile delinquencies		Negative Spill-over	<i>Our children, unfortunately, are at the mercy of our very high work demands... most of us are not there to fulfil our parental duties as we are always away at work. The result of this is juvenile delinquencies which are heaping negative consequences on the society at large.</i>

Note: Researchers' Findings, 2015

Causes of WFC

(i) Work pressure

This study found that work pressure is one of the key sources of WFC among Nigerian workers.

The respondents who were university lecturers complained about the pressure arising from combining academic and administrative duties. Female lecturers, in particular found the pressure of teaching, researching, attending conferences, mentoring and supervising students, marking, and other related administrative tasks hardly gives them the time and energy to attend to familial

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3 commitments. This exacerbates WFC (especially for those who are married with children). A
4
5 senior lecturer at Model University said:

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8 *Work pressure is so much that I hardly have time for my family. The expectations are so*
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10 *high in terms of academic excellence...lately; most of us have got to combine academic*
11
12 *duties with administrative work, making it really stressful and difficult to perform familial*
13
14 *duties.*

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17 Another lecturer explained:

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20 *For me, the main source of WFC is excessive work pressure. For instance, I am teaching*
21
22 *both undergraduate and postgraduate students; I just came back from a conference in*
23
24 *South Africa, and I have four Ph.D. students under my supervision. I am also in charge of*
25
26 *registering year-three economic and management students. Doing all of these plus*
27
28 *researching which, to me, is at the core of being an academic is inordinate and stressful.*
29
30 *The result of living up to these responsibilities is invariably WFC because my familial*
31
32 *obligations always suffer in order for me to achieve satisfaction and excellence at work*
33
34 *(Lecturer, Citadel University).*

35
36 Regarding work pressure, the majority of the respondents (89%) who were university lecturers
37
38 identified the pressure of achieving academic excellence combined with administrative work as
39
40 one of the major causes of WFC. Similarly, 91% of medical doctors attributed the cause of WFC
41
42 to the huge pressure that is associated with the medical profession. According to the respondents
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44 who were medical doctors, the pressure (physical and emotional demands) of the medical
45
46 profession eliminates doctors' abilities and willingness to fulfil their familial obligations. This
47
48 pressure remains the most common cause of WFC among Nigerian medical doctors.

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50 Commenting on this issue, a respondent at Fenny Hospital said:

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56 *Work pressure is the primary source of WFC for medical doctors. Doctors' work for long*
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58 *hours... the pressure often has an adverse effect on our family lives. For instance, I have*
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3 *been away from home since yesterday morning and the shift does not end until 7pm*
4 *tonight; that translates to more than 24hrs at a stretch. I do this all the time, and it is*
5 *causing rifts in my family life.*
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10 Another respondent said:

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13 *The medical profession is emotional and physically demanding. Doctors always think*
14 *about methods and means of solving our patients' medical problems; which often takes*
15 *control of our lives (specifically family life). Aside from work pressure, for example, I find*
16 *it very difficult to switch from work mode to family mode when I am at home (It is*
17 *psychological...) and this is causing many problems between my husband and I. Such is*
18 *the nature of the medical profession (Medical Doctor, Ginny Hospital. The majority of the*
19 *respondents (81%) reported similar views).*
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27 The above statements from both lecturers and medical doctors clearly show that work pressure is
28 one of the major causes of WFC among Nigerian workers. The incompatibility between work
29 demands and familial obligations is one of the major causes of WFC. Competing and
30 contradictory responsibilities of work and family lives result in a negative spill-over from the
31 work domain to the family domain.
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38 **(ii) Obligatory Familial Duties**

39 Another cause of WFC is that of obligatory familial duties. Respondents (particularly women)
40 lamented their many domestic chores, which often provoke conflict between their work and
41 family lives. A medical doctor said:
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48 *I wake up as early as 4.30am to bath the children, get them ready for school, clean the*
49 *house and its environment, cook breakfast, drop children at school, and collect them back*
50 *from school at three in the afternoon and then go back to work. There are several other*
51 *duties awaiting my arrival from work in the evening, all of which are often so much that*
52 *they are affecting every aspect of my life, especially work because by the time I get to work*
53 *in the morning, I am already tired (Medical Doctor, Gabby Hospital).*
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3 Similarly, a respondent at Topmost University attributed the main cause of her WFC to her many
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5 familial responsibilities, which are intruding into her work life:
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8 *Even though I share the family duties with my husband, my work is still suffering as a*
9 *result of my huge family responsibilities. My Head of Department has complained about*
10 *my not meeting several deadline submission dates or failing to turn up for departmental*
11 *meetings. I will honestly attribute the cause of my WFC to my vast familial responsibilities*
12 *(Lecturer, Topmost University).*
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18 The above statements (which represent an overwhelming 87% of the respondents' views and
19 experiences) indicate that vast familial duties are a cause of WFC among Nigerian workers.
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21 These familial duties seem so enormous that they intrude into their work domain in a
22 dysfunctional way, thereby causing conflict. These findings portray a negative spill-over from
23 family/home to work and adversely affect employees' performance at work.
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30 **(iii) Poor Infrastructural Facilities**

31 This theme is indicated by all respondents as another cause of WFC. In Nigeria, the lack of basic
32 infrastructural facilities (such as a good power supply, good Internet service, good roads, good
33 transportation systems, etc.) contributes to WFC. The empirical evidence suggests that the lack
34 of a good power supply and Internet service, for instance, means that a great deal of work needs
35 to be done manually. This aggravates work pressures. Respondents also claimed that poor road
36 networks and poor traffic management increases vehicular traffic and traveling times. This
37 further exacerbates WFC. The following statements typify the shared experiences of more than
38 two-thirds (71%) of the respondents:
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52 *For me, the causes are twofold: (a) lack of a good supply of electricity and (b) lack of a*
53 *fast and reliable Internet service. These two keep me away at work for so long that it is*
54 *causing an everyday rift between my wife and I. Electricity supply is crucial to my work*
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3 *because I need it to use the computer and the Internet. Most of the time I have to go to the*
4 *Internet shop to be able to use the Internet and, quite often, I stay there until very late in*
5 *the night because the Internet service is very slow... (Lecturer, Great University).*
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10 Some respondent complained about the challenges and difficulties of transportation and
11 commuting as well as the poor state of the road network system. The poor conditions or
12 complete lack of these basic infrastructural amenities tend to accentuate WFC:
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18 *Lack of infrastructural facilities, for me, is the primary cause of WFC. For example, to*
19 *resume work at 8am means I have to leave my house as early as 4am when my wife and*
20 *children are still in bed sleeping...this is because of terrible traffic that always happens as*
21 *a result of bad roads and very poor transportation and road network systems. I usually*
22 *close at 6pm in the evening but will not get home until around 10, sometimes 11pm when*
23 *my family would have gone to bed. The numbers of hours I spend commuting to and from*
24 *work every day is excessive, thus causing and aggravating conflict in my work and family*
25 *life (Medical Doctor, Hope Hospital).*
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33 Another respondent noted:
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36 *Electricity is the primary cause of WFC. With the poor state of electricity supply, WFB*
37 *cannot be realised as it is in developed countries. In fact, it creates so much conflict within*
38 *my family because I end up using a generator for electricity and the Internet which is*
39 *always slow anyway...by the time I get home very late at the night, I will be very tired and*
40 *unable to do anything...my husband and children are really not happy about this (Lecturer,*
41 *Citizens University).*
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48 These problems are standard in Nigeria and other African countries. In more developed
49 countries, electricity problems, poor road networks, poor transportation systems, and slow
50 Internet services are challenges which have mostly been overcome.
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3 **(iv) Lack of Proper and Practical Work-family Policies**
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5 An overwhelming majority of the respondents (93%) expressed their concerns regarding the lack
6 of good WFB policies in their respective places of work. In fact, most of them were oblivious to
7 the existence of the many WFB policies that are in practice in other parts of the world when the
8 researchers mentioned such policies to them. One respondent said:
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14 *I am hearing most of those WFB policies you just mentioned for the first time, they really*
15 *would go a long way in helping me (and indeed most of my colleagues) reduce my WFC if*
16 *they existed here...seriously, I can say that the lack of WFB policies is the primary cause of*
17 *WFC...because if they existed, most WFCs would be diminished (Medical Doctor, Victory*
18 *Hospital) This view is also shared by the majority of the respondents).*
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25 Another respondent said:
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28 *Is the lack of work-family policies one of the major causes of WFC? For me, yes. This is*
29 *because, if WFB policies were available, the incessant conflict between my work demands*
30 *and family obligations will surely be lessened to the barest minimum (if conflict ever*
31 *happens)...unfortunately, we do not have them in place (Medical Doctor, Well Hospital).*
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36 The respondents' view that the lack of WFB policies is a major factor which is responsible for
37 WFC was overwhelming (93%).
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40 ***Consequences of WFC***
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42 This study identified three main consequences of WFC among Nigerian employees: (i) broken
43 marriages/families, (ii) an unhappy workforce and poor performance at work, and (iii)
44 aggravated juvenile delinquencies.
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49 **(i) Broken Marriages/Families**
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51 A broken family is often the result of a broken marriage. This was identified as one of the
52 consequences of WFC among Nigerian workers. The incompatibility of work demands and
53 family obligations often results in conflict. This, in turn, damages marriages and family ties.
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3 Usually, employees who experience intense strain at work find it difficult to interact with and be
4 attentive to their families at home. This often results in WFC. The incessant occurrences of these
5 incidents often lead to broken marriages and families. The following statements typify
6 respondents' views and experiences:
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12 *The demands of my work and family are very high; I leave home very early in the morning*
13 *and return very late in the evening...I am never there for the children and my husband. At*
14 *one point, it started affecting my marriage because my husband was not happy about it. I*
15 *could not leave my job because I believed the family need my salary to flourish. However,*
16 *in the end, I lost my marriage and my children and I now live alone, very sad (Medical*
17 *Doctor, Sky Hospital).*
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24 Many respondents (32%) considered their broken marriage as a consequence of WFC. Incessant
25 WFC (according to these respondents) results in marital stress and often results in broken
26 marriages. The remaining respondents whose marriages were not broken (54%) also claimed that
27 their families are experiencing serious strain as a result of WFC.
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34 **(ii) Unhappy Employees and Poor Performance at Work**

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37 This theme emerged from many accounts in the data. An overwhelming majority of the
38 respondents (86%) believed that WFC results in emotional reactions, which eventually give rise
39 to behavioural reactions. Respondents voiced their frustrations about the high demands of their
40 work duties and the negative effects thereof on their family lives. According to these
41 respondents, their spouses and/or children are unhappy with them because of the intrusion of
42 work into their family lives. This unhappiness spills over to their work domains, making them
43 unhappy workers. Some respondents suggested that the situation is affecting their performance at
44 work. One respondent said:
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3 *I am not happy (even at work) because my wife and children are not happy with me; they*
4 *complained of my being too far away from them...and to be honest I am far away from*
5 *them. It is affecting me. I think about the distance between myself and my family (as a*
6 *result of work commitments) and I am always unhappy because they are not happy with me*
7 *(Medical Doctor, Recharged Hospital).*

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13 A lecturer at Gold College University also said:

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16 *Each time I remember that my wife and children are not happy with me, I feel sad,*
17 *dejected, and de-motivated, and my performance at work suffers...It has been an issue for*
18 *a while now...my work demand is affecting my family life obligations. Thus, my family are*
19 *not happy with me; it is affecting my performance at work because I always think about it*
20 *(Lecturer, Gold University College).*

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26 The above statements suggest that an inability to perform familial duties ultimately affects an
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28 employee's performance at work. The majority of the respondents (86%) shared this view with
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30 almost equal fervour.

31 32 33 **(iii) Truancy and Juvenile Delinquency**

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36 A large number of the respondents (92%) indicated that truancy and juvenile delinquency is one
37
38 of the consequences of WFC. Employees whose work-family life is characterised by conflict and
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40 whose children are not well cared for (as a result of the parents' work demands) are more likely
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42 to have delinquent children. A medical doctor at Healers' Hospital said:

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47 *Our children, unfortunately, are at the mercy of our high work demands...there is no one to*
48 *care for them during the day time as myself and their father are away at work...this*
49 *obviously has an effect on both home and outside home environment...it's a private family*
50 *issue, but certainly not a good one (Medical Doctors, Healers Hospital).*

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56 Another respondent indicated:

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Children grow up in homes and it is expected that parents are always there to guide, instruct, and discipline them as required. However, most of us are not there to fulfil our parental duties as we are always away at work. The result of this is juvenile delinquency, which is heaping negative consequences on society at large...I am battling with one at the moment, and I know of several colleagues who have similar problems (Professor of HRM, Dove University).

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WFC results from poor parent-child relations and inadequate child supervision and discipline. Consequently, for an overwhelming number of respondents (92%), there is a high rate of juvenile delinquency and truancy among their children.

25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 **Discussion**

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The abovementioned findings highlighted the major causes and consequences of WFC among Nigerian workers as perceived by the respondents. Consistent with previous research on WFC (Jager, 2002; Stier, Lewin-Epstein and Braun, 2012; Voydanoff, 2004), this study found that WFC is often caused by incompatible responsibilities in both the work and family domains. However, this study adds to extant research, thereby improving the understanding of WFC in a non-western context (Nigeria). It especially contributes thereto in terms of the causes and consequences of WFC.

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The findings of this study suggest that pressures of work and heavy familial responsibilities form a major cause of WFC. In terms of medical doctors and university lectures, the work pressure was considered huge and they usually experience fatigue and burnout. They are, therefore, unable to give the required attention to their familial duties at home. The results also identified a specific psychological challenge for these professionals. Most of the employees reported difficulties in switching from work- to family-mode even when they are at home. Work remained a major concern in their thought processes. This represents negative spill-over from the work

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3 domain to the family domain and often triggers conflict at home. This negative spill-over
4 suggests that an employee who has a bad and frustrating day at work is more likely to carry the
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6 ruinous mood to their family at home, which invariably affects the family domain (Bellavia and
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8 Frone, 2005; Staines, 1980). Work pressure does not prevent the existence of the vast familial
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10 duties at home. Respondents articulated the conflicting nature of these two responsibilities and
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12 the consequences of negative spill-over. These findings are consistent with the studies of
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14 Voydanoff (2004) and Stier, Lewin-Epstein, and Braun (2012), who argued that WFC is often
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16 caused by incompatible responsibilities in both the work and family domains.
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22 In addition, poor infrastructural facilities were also identified as a cause of WFC among Nigerian
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24 workers. The lack of a stable supply of electricity and Internet service aggravate work pressures
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26 for the professionals in our study. They spend a considerable number of hours travelling to and
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28 from work because of traffic congestion. This is a result of bad road networks and a poor
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30 transportation system. In her research, Epie (2010) argued that working in Nigeria's big cities is
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32 very stressful and that inadequate road channels and traffic problems keep workers on the road
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34 for hours on a daily basis. Moreover, Epie and Ituma (2014) stressed that a considerable
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36 percentage of employees in Lagos spend a disproportionate amount of time and energy in
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38 commuting to and from work. This is the case in many cities in Sub-Saharan Africa.
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43 This situation is predominant in many developing countries and is a key indicator of their level
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45 of development. Many of these countries are still struggling to provide citizens with an
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47 uninterrupted electricity supply and a high-speed Internet access. These are challenges that many
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49 western and emerging economies in East Asia have put behind them. Respondents were either
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51 unaware of WFB policies or considered them rare, non-existent, or impracticable. For example,
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53 working from home is a family friendly policy that would be desirable by these professionals
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3 because it would alleviate the challenge of commuting time and traffic difficulties. However, the
4 erratic supply of electricity at home, the relatively low level of technological infrastructure in
5 organisations, and the unavailability of reliable Internet services render this WFB policy
6 impracticable. The majority of the respondents are oblivious of several internationally accepted
7 and popular WFB policies (e.g. term-time working, compressed or annualised hours, job sharing,
8 home working/telecommuting, on-site child care, flexi-time, etc.) which are intended to help
9 employees minimise WFC. Adisa, Mordi and Mordi (2014) in their study on Nigerian workers
10 reported that governments, employers, and policy-makers in Nigeria are reluctant to explore and
11 implement WFB policies which are intended to enhance employee wellbeing and to minimise
12 WFC. This study, therefore, argues that the lack of basic infrastructural facilities and the absence
13 of implementable WFB policies (emancipatory policies through which employees are afforded
14 opportunities to balance their work and non-work lives) are major barriers to realising WFB.
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33 This study found that the consequences of WFC include an increasing number of broken
34 marriages and families. This is one of the consequences of being disconnected from one's
35 family, which occurs as a result of huge work demands. This was not found to have been
36 reported in many extant studies. However, the National Marriage Project (1999) reported that an
37 increase in WFC is associated with a decrease in marital and family satisfaction and often results
38 in dissolution of marriages. Furthermore, the findings hereof suggests that WFC precipitates an
39 unhappy workforce, which then has a negative impact on employees' performances. Employees'
40 general unhappiness in terms of their unfulfilled family lives spills over to their work domains
41 and thereby negatively affects their job performance. This finding is in agreement with Roth and
42 David (2009) and Butler and Skattebo (2004), who argue that, when an employee lacks the
43 necessary time to meet their obligations at home, their performance at work will be negatively
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3 affected. The challenge of increasing juvenile delinquency in families which is associated with
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5 WFC is probably the most significant finding of this study. However, it is perhaps a puzzling
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7 finding at first sight. Most parents are always at work and leave their children at home without
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9 parental guidance and discipline. This often allows the children to behave inappropriately
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11 (including being influenced by peer pressure) and even, in extreme cases, to practise and commit
12
13 petty crimes. According to Lipsey and Derzon (1998), juvenile delinquency often occurs as a
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15 result of poor parent-child relations, poor supervision, and a lack of discipline. The findings,
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17 therefore, suggest that the consequences of WFC can be more serious and problematic, more so,
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19 than it was previously known. The findings also show that there is huge negative spill-over,
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21 which could be damaging for employees' performance at work and home life. It is, however,
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23 essential that WFC is minimised in order to prevent the terrible consequence of juvenile
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25 delinquency.
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31 **Implication of Findings: For Policy and Practice**

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33 The importance of WFB for both employees and employers cannot be overstated (Fu and
34
35 Shaffer, 2001). As these two domains (work and family) cannot be separated from each other,
36
37 they often affect each other (Greenhaus and Parasuraman, 1987). Therefore, organisations should
38
39 ensure a smooth relationship between the two domains (Fu and Shaffer, 2001). The findings
40
41 reported in this article have implications for organisations and employees. In order to reduce
42
43 WFC, many organisations in the Western world have adopted various WFB policies (Galea,
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45 Houkes and De Rijk, 2014; Joyce et al., 2010; Russell, O'Connell and McGinnity, 2009). Such
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47 practices in Nigeria, however, are still relatively new (Adisa, Mordi and Mordi, 2014). With an
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49 increasing number of women in paid employment and a correspondingly high number of dual-
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51 earner families, there is an increasing need for Nigerian organisations to provide employees with
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53 alternative WFB policies in order to reduce WFC and enhance the quality of employees' work
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3 and family lives. Supportive WFB and other family programmes as well as employee friendly
4 policies will help employees balance the competing demands of work and family responsibilities.
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6 Nevertheless, some researchers have cautioned that considerable care is needed before assuming
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8 that the more “family-friendly” policies and institutional arrangements present in western
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10 countries would be desirable in Africa (Korenman and Kaester, 2005; Mokomane and Chilwane,
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15 2014).
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18 The findings of this study highlight various causes and consequences of WFC. These should
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20 therefore attract the immediate attention of organisations, employers, government policy-makers,
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22 trade unions, and other stakeholders. Such attention will yield positive results for both
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24 organisations and workers and will drastically reduce WFC. Organisations in particular should
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26 make strategic and targeted efforts to introduce WFB policies systematically in Nigeria, but
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28 should also consider employees’ families as an important aspect of, and a facilitator of,
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30 individual and organisational performance.
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36 This study uncovered various causes of WFC which are specific to Nigeria medical doctors and
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38 university lecturers and highlighted their consequences and effects in terms of organisations,
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40 employees, and society at large. It is surprising that many Nigerian professionals (our
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42 respondents) are still unaware of some of WFB policies. This is, perhaps, because these policies
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44 are not available in their places of work. This indicates that, in relative terms, Nigerian
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46 organisations may be lagging behind with respect to offering good contemporary HRM policies
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48 and practices such as WFB. This has become the hallmark of corporate and multi-national
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50 companies around the world, including those who operate in Nigeria. Indeed, policy transfers,
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52 adaptations, and modifications from multi-national companies who already practice WFB
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54 policies in Nigeria may be a perfect way to jumpstart the widespread application and
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3 implementation of WFB policies. This is because many such Nigerian based multi-national
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5 companies have modified many of their global policies and practices to be Nigeria-compliant
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7 and Nigeria-specific.
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10 This paper, therefore, argues that WFC could be reduced if organisations in Nigeria introduced
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12 various practical WFB policies and encourage employees to use them. Nationally, very little
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14 change has occurred in Nigerian employment regulation. Despite more than 16 years of
15
16 democracy, employment is still regulated by the Labour Act 1974. Anecdotal evidence shows
17
18 that the typical, regulated 8-hour working day is not generally enforced as longer hours are
19
20 common. Specific management styles and organisational cultures endorse this practice (Epie and
21
22 Ituma, 2014). Similarly, public policies which are aimed at infrastructural development would
23
24 accelerate the effectiveness of WFB programmes. Policy change and commitment from
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26 government in this direction in order to enhance WFB would encourage employers to take it
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28 seriously. Such policy changes could include a temporary reduced tax or one-time tax relief for
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30 organisations who are seeking to implement WFB.
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36 **Conclusion**

37 Overall, this article adds to the overall literature on WFC by exploring the causes and
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39 consequences thereof among Nigerian medical doctors and university lecturers by using the spill-
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41 over model. The findings of this study offer insights which will be useful for academics,
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43 organisations, government, policy-makers and other stakeholders in Nigeria with a possible
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45 ripple effect on other countries in SSA which have similar geographical, business, and economic
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47 conditions to Nigeria. More pre-emptive government intervention is necessary in order to ensure
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49 a more worker-friendly environment and to encourage the application and the use of family-
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51 friendly policies in the workplace. Despite the rationale provided for having collected data from
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53 only two professional groups (doctors and lecturers), the generalisability of these findings is
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3 limited. A broader spectrum of employees across a more varied sector would probably produce
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5 richer and more generalisable results. This is recommended for future studies. The use of survey
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7 research is also an option which could produce a much larger data set across a range of industries
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9 in the private and public sectors. This would provide more generalisability. Moreover, a
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11 quantitative study allowing for the control of several extraneous variables could affect the results
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13 of such a study; for example, location (urban/semi-urban/rural), gender, age, marital status,
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15 family size, income level, etc.
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20 Perhaps the WFC challenges uncovered in this paper will stimulate further research into
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22 behavioural research in the context of SSA, following Mokomane and Chilwane's (2014)
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24 assertion that work-family issues require further and broader consideration. Much benefit would
25
26 arise from future studies which explore the deep psychological effects of WFC on employees'
27
28 work and family lives, through a more systematic and scientific sampling (the reduced
29
30 systematic and scientific nature of the sampling method in this article is a limitation thereof) and
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32 a wider sector coverage. This study collected data from professional medical doctors and
33
34 university lecturers as an empirical focus. It would be valuable if future studies would explore
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36 the subject from the perspectives of employers. More specifically, such studies could investigate
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38 the level of awareness of internationally known WFB programmes in organisations and why they
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40 are non-existent or underutilised in some developing countries.
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