

Work-Family Interference and Occupational Burnout among Employees in Service Occupations in Nigeria

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Abstract

This study investigated the extent to which two directions of work-family interference (work interfering with family and family interfering with work) were associated with occupational burnout. It was a cross-sectional survey involving 311 employees (147 males; 164 females) sampled from 2 service occupations (Health=149; Bank=162) in southwestern Nigeria. Results of the hierarchical multiple regression indicated that type of service occupation was significantly associated with emotional exhaustion and overall occupational burnout with employees in the health sector experiencing higher burnout than those in the banking sector. However, there were no occupational differences in employees' level of dehumanization and feelings of reduced personal accomplishment. Family interfering with work was significantly associated with dehumanization, feelings of reduced personal accomplishment and overall occupational burnout such that employees' levels of dehumanization, feelings of reduced personal accomplishment, and overall occupational burnout increased with family interfering with work. Family interfering with work was not associated with emotional exhaustion. Work interference with family was not associated with emotional exhaustion, dehumanization, and overall occupational burnout. However, employees who experienced high work interference with family reported low feelings of reduced personal accomplishment. In order to reduce occupational burnout among employees in service occupations, adequate job resources that help manage the perceived incompatibility in work and family roles should be provided.

Keywords: burnout, exhaustion, bank workers, health workers, work-family interference, Nigeria

1. Introduction

Family and work are central issues which most adults try to balance (Noor, 2004). The challenges associated with balancing family and work demands are predicated on how employees allocate their time and energy to family and work roles (Senecal, Vallerand, & Guay, 2001). Negative interference of work and family may occur when more time and energy are devoted to either family or work roles at the expense of the other; which may lead to increased stress and culminate in occupational burnout among employees. Previous studies (e.g. Noor, 2004; Senecal et al., 2001) on the relationship between negative work-family interference and occupational burnout usually explored only one dimension of occupational burnout. Studies have shown environmental and occupational differences in the manifestations of the dimensions of occupational burnout (Bakker, Demerouti & Euwema, 2005; Ogungbamila, 2013). It is, therefore, important to deepen the literature on how the directions of work-family interference connect with the dimensions occupational burnout; which this study aimed to achieve.

1.1 Service Occupation and Occupational Burnout

Schaufeli and Greenglass (2001) defined occupational burnout "... as a state of physical, emotional and mental exhaustion that results from long-term involvement in work situations that are emotionally demanding" (p. 501). Occupational burnout resulting from the emotional demands of the work, especially in service occupations, can exhaust employees' capacity to be involved with, and responsive to, the needs of service recipients (Maslach, Schaufeli & Leiter, 2001). This implies that occupational burnout has three main components: emotional exhaustion, dehumanization, and feeling of reduced personal accomplishment.

Emotional exhaustion, which refers to the depletion of emotional resources, is prominent among professionals in human service occupations such as health (Ogungbamila, 2013) and banking (Sowmya & Panchanatham, 2011).

Dehumanization reflects a condition in which employees distance themselves from, and become callous or cynical towards service recipients (Maslach, 1993). Feelings of reduced personal accomplishment describe employees' tendency to negatively self-appraise their work-related accomplishments. Michinov (2005, p. 100) submitted that emotional exhaustion is the core element of occupational burnout and is accompanied by two kinds of negative attitudes: client-directed (dehumanization) and self-directed (reduced sense of personal accomplishment). These client-directed and self-directed negative attitudes may adversely affect the functionality of the employees and the quality of service to the clients in the banking (Sowmya & Panchanatham, 2011), health (Ogungbamila, 2013), and other service sectors of the economy.

In a study comparing three service occupations in Nigeria, Ogungbamila (2013) found that health workers reported the highest levels of emotional exhaustion, dehumanization, and overall occupational burnout compared with teachers and police personnel. This may be because health care workers in Nigeria face special challenges in assessing, diagnosing, treating, and managing health care needs of patients, families, and communities (Olanipekun, 2009) due to dearth of health workers and inadequate health facilities (Bangdiwala, Fonn, Okoye, & Tollman, 2010).

The high level of migration of health workers out of Nigeria (Bangdiwala et al., 2010; Chankova, Nguyen, Chipanta, Kombe, Onoja, & Ogungbemi, 2007), which culminated in inadequate numbers of health workers, might have increased the workloads, job stress, and occupational burnout among the remaining health workers (Stilwell, Diallo, Zurn, Dal Poz, Adams, & Buchan, 2003). The first aim of this study was to determine whether differences existed in the level of occupational burnout among health and bank workers. Based on this, the following hypotheses were tested:

Hypothesis 1a: Health workers report higher level of emotional exhaustion than bank workers.

Hypothesis 1b: Health workers report higher level of dehumanization than bank workers.

Hypothesis 1c: Health workers report higher feelings of reduced personal accomplishment than bank workers.

Hypothesis 1d: Health workers report higher level of overall occupational burnout than bank workers.

1.2 Work-Family Interference and Occupational Burnout

Apart from occupational differences in occupational burnout, employees can also experience occupational burnout due to perceived negative interface between family and work obligations. The negative interference of work and family is conceptualized as the role pressures that emanate from perceived incompatibility in the work and family responsibilities (Greenhaus & Beutell, 1985). Work-family interference occurs when (i) employees find it difficult to comply with the expectations of one role (work or family) due to time pressures associated with a preoccupation with the other role, (ii) employees' ability to function in one role (work or family) is adversely affected due to stress and strains emanating from the other role, or (iii) employees perceive incompatibility in the behavioral requirements of work and family roles (Carlson, Kacmar, & Williams, 2000; Greenhaus & Beutell, 1985; Wayne, Musisca, & Fleeson, 2004).

Greenhaus and Beutell (1985) suggested that work-family interference is bi-directional; which implies that work can interfere with family (work interference with family - WIF) and family can interfere with work (family interference with work—FIW). Previous studies (e.g. Byron, 2005; Noor, 2004) suggest that WIF and FIW are distinct but reciprocally related work-family interference (Grzywacz et al., 2007).

Some of the antecedents of work-family conflict include role conflict, role ambiguity, social support, job involvement (Boles, Wood, & Johnson, 2003; Carlson et al., 2000; Senecal et al., 2001), and family-supportive work environment (Allen, 2001). Other studies (e.g. Wayne et al., 2004) reported that neuroticism was related to greater work-family conflict; but conscientiousness was related to less work-family conflict.

Apart from job-related psychosocial factors that may expose employees in service occupations to high risk of occupational burnout (Escriba-Aguir, Martin-Baena, & Perez-Hoyos, 2006); work-family interference can also be a risk factor in occupational burnout. This is because, in spite of the positive interface that may exist between work and family, there could be a negative spillover of work and family relationship in terms of work-family conflict (Eby, Casper, Lockwood, Bordeaux, & Brinley, 2005). As work-family conflict increases, because of employees' difficulties in balancing their commitments to work and family, the resulting stress and tension may have negative impact on them (Heraty, Morley, & Cleveland, 2008). Employees' perceived inability to control and cope with the conflicting work and family stressors may put them at the risk of occupational burnout; which may affect their duties to the organization, the family, and the society (Maslach et al., 2001). Work-family

conflict has been implicated in psychological distress (Noor, 2004) and emotional exhaustion (Senecal et al., 2001).

The connection between negative work-family interference and occupational burnout can be explained using the job demand-resources model (Bakker et al., 2005; Demerouti, Bakker, Nachreiner, & Schaufeli, 2001). The basic assumption underlining the job demand-resources model is that every job has specific risk factors (job demands and job resources), which result in job stress or occupational burnout when certain job demands are high and when certain job resources are limited (Demerouti et al., 2001; Demerouti & Bakker, 2011). Bakker et al. (2005) referred to job demands as the physical, social, or organizational aspects of a job that require constant physical and mental efforts; and are, therefore, linked to certain physical and psychological costs. Job resources are the physical, social, or organizational aspects of a job that aid the achievement of goals, reduce job demands and the associated physical and psychological costs or engender employees' personal growth and development (Bakker et al., 2005).

Therefore, when job demands are high without adequate family-supportive physical, social, and organizational resources, employees' mental and physical resources may be depleted (emotional exhaustion), which may culminate in dehumanization and feelings of reduced personal accomplishment (Bakker et al., 2005; Bakker, Demerouti, De Boer, & Schaufeli, 2003). Low family-supportive job resources coupled with high job demands may result in increased negative work-family interference or work-family conflict (Allen, 2001), which the employee may not be able to cope with (Noor, 2004); thereby leading to occupational burnout. The second aim of this study was to ascertain the extent to which occupational burnout was associated with negative work-family interference. Against this background, the following hypotheses were tested.

Hypothesis 2a: Work interfering with family increases emotional exhaustion.

Hypothesis 2b: Work interfering with family increases dehumanization.

Hypothesis 2c: Work interfering with family increases feelings of reduced personal accomplishment.

Hypothesis 2d: Work interfering with family increases overall occupational burnout.

Hypothesis 3a: Family interfering with work increases emotional exhaustion.

Hypothesis 3b: Family interfering with work increases dehumanization.

Hypothesis 3c: Family interfering with work increases feelings of reduced personal accomplishment.

Hypothesis 3d: Family interfering with work increases overall occupational burnout.

2. Method

2.1 Participants

This was a cross-sectional survey involving 311 employees (147 males; 164 females) sampled from 2 service occupations (Health=149; Bank=162) in Lagos, southwestern Nigeria. The average age of the participants was 34.36 ($SD = 9.05$) with a range of 26 to 48 years. Out of the 149 health workers, 54(36.2%) were nurses, 28(18.8%) were medical doctors, 26(17.4%) were laboratory technicians, 22(14.8%) were physiotherapists, and 19(12.85) were pharmacists. The sampled bank workers comprised 64(39.5%) cashiers; 58(35.8%) worked in the customers relations unit, and 40(24.9%) worked in the marketing unit of the banks. When asked to categorize their marriages, majority of the participants (88.1% or 274) indicated that they were in intact marriage and the remaining (37 or 11.9%) indicated that they were divorced, widowed, or separated. In terms of academic qualification, 125 of the participants had first degree, 95 had postgraduate degree, 71 had up to diploma certificate, and 20 had less than diploma certificate. They had spent between 1 and 34 years on the job ($M_{Job\ tenure} = 7.18$; $SD = 6.37$).

2.2 Measures

Occupational burnout was measured using Maslach Burnout Inventory (MBI) developed by Maslach and Jackson (1986). It was a 22-item scale designed to measure burnout syndrome, which comprised 3 components: emotional exhaustion (9 items), dehumanization (5 items), and reduced personal accomplishment (8 items). MBI was rated on a 6-point scale (1= a few times a year; 6= everyday). Sample items were: "I feel used up at the end of the day's work" (emotional exhaustion), "I have become more callous towards people since I took up this work" (dehumanization), and "I can easily create a relaxed atmosphere with my patients or customers" (reverse scored) (reduced personal accomplishment). According to Maslach and Jackson (1986), the 3 subscales of MBI had Cronbach's alpha that ranged from .71 to .90. In a study that examined the manifestations of the three components of burnout among employees in service occupations (including health workers) in Nigeria,

Ogungbamila (2013) reported that the scale had Cronbach's alpha coefficients of .78 (emotional exhaustion subscale), .79 (dehumanization subscale), .76, (reduced personal accomplishment) and .81 (overall scale). With the present sample, MBI had Cronbach's alpha coefficients of .79 (emotional exhaustion), .80 (dehumanization), .79 (reduced personal accomplishment) and .82 (overall scale). High score reflected high occupational burnout and low score reflected low occupational burnout.

Work-family interference was measured using Carlson et al.'s (2000) Work-family Conflict Scale (WFCS). It was an 18-item scale that measures employees' perceived pressures associated with perceived incompatibility in the work and family responsibilities. According to Carlson et al. (2000), WFCS can be scored as a six-, three-, two-, or one-dimensional scale. In the present study, WFCS was scored as a two-dimensional scale to reflect the directions of work-family interference. WFCS was rated on a 4-point scale (1=strongly disagree; 4= strongly agree). Sample items included: "The time I must devote to my job keeps me from participating equally in household responsibilities and activities" (work interfering with family - WIF); "Because I am often stressed from family responsibilities, I have a hard time concentrating on my work" (family interfering with work - FIW). Carlson (2000) reported Cronbach's alpha coefficients that ranged from .85 to .87 for the dimensions of WFCS. In the present study, the WIF, FIW, and the overall scale had Cronbach's alpha coefficients of .82, .81, and .84, respectively. High score on the scale indicated that the respondents had difficulties balancing work and family responsibilities and low score indicated that the respondents were not experiencing difficulties in balancing work and family responsibilities.

2.3 Procedure

The management and potential participants employed in the 5 selected large public and private hospitals and branches of 5 commercial banks in Lagos, southwestern Nigeria were provided information about the objectives and procedure of the study. For example, they were informed that participation in the study was voluntary, there were no known physical or psychological harms associated with the study, and they had the freedom to discontinue with the study whenever they felt so. After the management of each organization certified that the study would not expose the participants to psychological and physical harms, the questionnaires were distributed to individuals. The respondents were told that the study was designed to examine how they felt affected by the needs to combine work and family responsibilities.

Due to the busy schedule of employees working in banks and hospitals in Nigeria (Ogungbamila, 2013), respondents were given the liberty to complete the questionnaire during break or at home. A total of 420 questionnaires were distributed to employees in the selected banks (210 questionnaires) and hospitals (210 questionnaires) who were willing to participate in the study. Response rates of 81% and 75% were recorded among bank and health workers, respectively. In all, 311 questionnaires were duly completed and found usable for analysis.

3. Results

3.1 Descriptive and Correlational Analyses

The results of descriptive and inter-variable correlations are presented in Table 1.

Table 1. Mean, SD, and inter-variable correlations

Variables	<i>M</i>	<i>SD</i>	1	2	3	4	5	6	7	8	9	10
1. Age	34.36	9.05	1									
2. Type of service occupation	-	-	-.14*	1								
3. Gender	-	-	-.17**	-.10	1							
4. Marriage status	-	-	.16**	-.11	.09	1						
5. Work interfering with family	22.43	4.47	.13*	.16**	-.13*	-.04	1					
6. Family interfering with work	18.36	4.91	-.10	-.00	-.08	.19**	.13*	1				
7. Emotional exhaustion	27.45	8.60	.04	-.21**	.08	.12*	-.02	.12*	1			
8. Dehumanization	12.10	5.32	.04	-.06	-.00	.16**	-.02	.31**	.58**	1		
9. Reduced personal accomplishment	19.54	9.05	-.01	.06	-.02	.20**	-.07	.44**	-.06	.15**	1	
10. Overall occupational burnout	59.10	15.56	.03	-.10	.04	.24**	-.06	.43**	.72**	.75**	.60**	1

Note. * $p < .05$. ** $p < .01$. N = 311. Gender was coded male 0; female 1. Type of service occupation was coded health 0; bank 1. Marriage status was coded intact 0; divorced, widowed or separated 1.

As shown in Table 1, work interfering with family had no significant relationships with emotional exhaustion [$r(309) = -.02, p > .05$], dehumanization [$r(309) = -.02, p > .05$], reduced personal accomplishment [$r(309) = -.07, p > .05$], and overall occupational burnout [$r(309) = -.06, p > .05$]. However, family interfering with work was related with increased levels of emotional exhaustion [$r(309) = .12, p < .05$], dehumanization [$r(309) = .31, p < .01$], reduced personal accomplishment [$r(309) = .44, p < .01$], and overall occupational burnout [$r(309) = .43, p < .01$] among employees.

3.2 Test of Hypotheses

To hypotheses 1a to 3d, four sets of 3-step hierarchical multiple regression were conducted. In the model 1 of the analysis, the socio-demographic variables (age, gender, and marriage status) were entered. In model 2, type of service occupation was added to the model. In model 3, WIF and FIW were added to the model. The results are presented in Table 2.

Table 2. Hierarchical multiple regression on dimensions of occupational burnout

Model	Dimension of Occupational Burnout											
	Emotional Exhaustion			Dehumanization			Reduced personal accomplishment			Overall occupational burnout		
	β	R^2	ΔR^2	β	R^2	ΔR^2	β	R^2	ΔR^2	β	R^2	ΔR^2
Model 1		.05	.05		.04	.04		.14	.14		.12	.12
Age	-.05			-.04			.20**			.07		
Gender	.06			-.02			-.02			.02		
Marriage status	.08			.14*			.19**			.20**		
Model 2		.10	.04		.05	.004		.14	.001		.14	.01
Age	-.08			-.05			.20**			.05		
Gender	.06			-.02			-.02			.02		
Marriage status	.06			.14*			.19**			.19**		
Type of service occupation	-.23**			-.07			.03			-.13*		
Model 3		.11	.01		.12	.08		.27	.13		.26	.13
Age	-.08			-.06			.20**			.05		
Gender	.07			.01			.02			.05		
Marriage status	.05			.08			.11*			.11*		
Type of service occupation	-.22**			-.04			.08			-.09		
WIF	.01			-.07			-.11*			-.09		
FIW	.10			.31**			.39**			.39**		

Note. * $p < .05$. ** $p < .01$. N = 311. WIF = Work Interfering with Family. FIW = Family Interfering with Work. Gender was coded male 0; female 1. Type of service occupation was coded health 0; bank 1. Marriage status was coded intact 0; divorced, widowed or separated 1.

Results of the hierarchical multiple regression indicated that type of service occupation was significantly associated with emotional exhaustion ($\beta = -.23, p < .01$) and overall occupational burnout ($\beta = -.13, p < .05$); with employees in the health sector experiencing higher burnout than those in the banking sector. Therefore, hypotheses 1a and 1d were accepted. However, hypotheses 1b and 1d were rejected based on the results in Table 2. The results indicated that there were no occupational differences in employees' levels of dehumanization ($\beta = -.07, p > .05$) and reduced personal accomplishment ($\beta = .03, p > .05$). The inclusion of the type of service occupation in model 2 was associated with 10% changes in employees' level of emotional exhaustion, 5% changes in dehumanization, 14% changes in reduced personal accomplishment, and 14% changes in overall occupational burnout.

WIF was not associated with emotional exhaustion ($\beta = .01, p > .05$), dehumanization ($\beta = -.07, p > .05$), and overall occupational burnout ($\beta = -.09, p > .05$). Consequently, hypotheses 2a, 2b, and 2d were rejected. However, employees who experienced high work interfering with family reported low level of reduced personal accomplishment ($\beta = -.11, p < .05$). Hypothesis 2c was accepted.

FIW was significantly associated with dehumanization ($\beta = .31, p < .01$), reduced personal accomplishment ($\beta = .39, p < .01$), and overall occupational burnout ($\beta = .39, p < .01$) such that employees who reported high family interfering with work also tended to report dehumanization, reduced personal accomplishment, and overall burnout. Against this background, hypotheses 3b, 3c, and 3d were accepted. FIW was not associated with emotional exhaustion ($\beta = .10, p > .05$). Hypothesis 3a was rejected. Table 2 shows that the inclusion of WIF and FIW in model 3 was associated with 11%, 12%, 27%, and 26% changes in employees' levels of emotional exhaustion, dehumanization, reduced personal accomplishment, and overall occupational burnout, respectively.

3.3 Additional Analysis on Direction of Work-Family Interference and Occupational Burnout

Against the background that work-family interference predicted occupational burnout and occupational differences existed in occupational burnout, additional analyses were conducted to determine whether occupational differences existed in work-family interference. Independent t-tests were conducted. The results are presented in Table 3.

Table 3. Summary of t-test on directions of work-family interference

Direction of work-family interference	Type of service occupation	N	M	SD	df	t	p
Work interfering with family	Health	149	21.70	4.16	309	-2.78	< .05
	Bank	162	23.10	4.66			
Family interfering with work	Health	149	18.38	4.73	309	0.05	> .05
	Bank	162	18.35	5.09			

The results in Table 3 indicate that bank workers reported higher level of work interfering with family than health workers [$t(309) = -2.78, p < .05$]. However, there was no difference in the level of family interfering with work among bank and health workers [$t(309) = 0.05, p < .05$]. This implied that bank workers reported as much family interfering with work as health workers.

3.4 Additional Analysis on Type of Marriage and Occupational Burnout

Since stress and burnout emanating from work-family conflict has been associated with employees' inability to balance the perceived interference of work and family demands (Noor, 2004; Senecal et al., 2001), it might not be out of place if the level of occupational burnout of employees in intact and non-intact marriages are compared. The results of the comparison are presented in Table 4.

Table 4. Summary of t-test on marriage status

Dimension of occupational burnout	Marriage status	N	M	SD	df	t	p
Emotional exhaustion	Intact	274	27.09	8.62	309	-2.05	< .05
	Non-intact	37	30.16	8.12			
Dehumanization	Intact	274	11.80	5.19	309	-2.80	< .01
	Non-intact	37	14.38	5.79			
Reduced personal accomplishment	Intact	274	18.88	9.06	309	-3.61	< .001
	Non-intact	37	24.49	7.41			
Overall occupational burnout	Intact	274	57.76	15.03	309	-4.25	< .001
	Non-intact	37	69.03	15.98			

As shown in Table 4, employees in non-intact marriages (i.e. those who were divorced, separated, or widowed) reported significantly higher levels of emotional exhaustion [$t(309) -2.05, p < .05$], dehumanization [$t(309) -2.08, p < .01$], reduced personal accomplishment [$t(309) -3.61, p < .001$], and overall occupational burnout [$t(309) -4.25, p < .001$] than those in intact marriage.

4. Discussion

This study aimed to extend research on the connection between work-family interference and dimensions of occupational burnout. In line with some of the hypotheses on occupational differences in the manifestations of dimensions of occupational burnout, health workers felt more emotionally drained from their work and reported higher level of overall occupational burnout than bank workers.

These results partly corroborated the findings of previous studies (e.g. Ogungbamila, 2013) that higher level of occupational burnout existed among health workers compared with employees in other service occupations (teachers and police personnel). Health workers might have experienced higher emotional exhaustion and overall occupational burnout than bank workers because of the dearth of health workers in Nigeria as a result of migration (Bangdiwala et al., 2010; Chankova et al., 2007). The inadequate health personnel in the Nigerian health sector might have increased the workload and occupational burnout of health workers who remained in the under-staffed health sector (Stilwell et al., 2003). In addition to that, caring for individuals who are suffering from pains, disability, and terminal illnesses is particularly demanding (Melo & Oliver, 2012) and might have accounted for the high level of occupational burnout among health workers.

The results of the current study that health workers were as callous and felt underachieving as bank employees were at variance with Ogungbamila's (2013) findings. The ethics of the medical profession frown at medical personnel who behave callously toward patients. Similarly, bank workers are obliged to treat customers with dignity and balance organizational demands with customer needs (Ogungbamila, 2010). These professional and organizational expectations might have exerted similar pressure on health and bank workers to be responsive toward patients and customers, which might have indirectly enhanced their level of efficiency.

Increase in emotional exhaustion was associated with increase in perceived work interfering with family. Though this result went in the hypothesized direction, the relationship was not significant. Contrary to the presumptions that work interfering with family would increase emotional exhaustion, dehumanization, feelings of reduced personal accomplishment, and overall occupational burnout, the results did not generally go in the hypothesized direction. Work interfering with family was associated with low dehumanization, feelings of reduced personal accomplishment, and overall occupational burnout; though the relationships were not significant, except in the case of feelings of reduced personal accomplishment. This contradicts the positions of Heraty et al. (2008), Noor (2004), and Senecal et al. (2007) that negative work-family interference results in psychological distress and emotional exhaustion.

The possible explanation for this surprising result may be that employees whose work responsibilities interfered with their family responsibilities had individuals (spouse, relative, and house helps) who could make-up for their inadequacies in meeting family obligations. This social support received from others might have compensated for the employees' inadequacies in meeting family obligations. As a result of this, the levels of stress and burnout that would have emanated from combining the responsibilities of work and family decreased. Employees who expended more time and energy on meeting work responsibilities at the expense of the family might have experienced low feelings of reduced personal accomplishment because spending more time and energy on work-related activities enabled them to accomplish valued job tasks. They might have felt less bordered by the spill-over of work to family responsibilities may be because they perceived that their contributions were needed more at work than at home.

As reported in previous studies (Heraty et al., 2008; Noor, 2004; Senecal et al., 2007), the present study showed that when employees felt that family responsibilities were interfering with work responsibilities they felt highly underachieving, unresponsive to the needs of the recipients of their services, and experienced high level general physical and mental and exhaustion. These results may be connected with the fact that such employees felt uncomfortable when family issues prevented them from fulfilling valued job obligations. The job seemed more important than the family probably because they felt the family needed the job to survive.

Consequently, they might have felt that anything that threatens their efficiency at work may ultimately undermine the survival of the family. Since employees felt unable to cope with the family responsibilities that were negatively affecting their work responsibilities they experienced occupational burnout. As posited in the job demand-resources model, this might be because their job did not have enough resources that would enable them cope with the conflicting demands emanating from the work and home front (Bakker et al., 2005; Demerouti & Bakker, 2011; Demerouti et al., 2001).

The current study extended the job demand-resources model to incorporate how the interference of work and family responsibilities can increase occupational burnout among employees in service occupations. Specifically, this study suggested that the work environment may need to include job resources that are family-supportive

(Allen, 2001) in order to reduce occupational burnout that may emanate from perceived incompatibility in work and family roles. This may be particularly beneficial for employees in troubled marriage as indicated in Table 4.

In spite of the theoretical and practical implications of this study, its results were not without short-comings. One, the results of this study may not represent the connection between work-family interference and occupational burnout among employees in service occupations in Nigeria; as the sample was drawn from only two service occupations. Two, the study did not investigate the roles of perceived social support and family-supportive work environment on the connection between work-family interference and occupational burnout. For example, Allen (2001) reported that family-friendly benefits reduced work-family interference and enhanced job outcomes. Lastly, the analysis of the current study did not include the number of children, which could be an important factor in work-family interference. Against this background, future studies (involving a sample drawn from more service occupations) should investigate the effect of perceived family-supportive work environment and number of children on the relationship between work-family interference and occupational burnout.

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