Influence Work-Family Conflict, Family-Work Conflict on The Performance of Women Nurses Moderated by Job Satisfaction in Yogyakarta Grhasia Mental Hospital

Anang Setiawan¹, Winarno², Sri Dwi Ari Ambarwati³

Universitas Pembangunan Nasional "Veteran" Yogyakarta¹²³ Alamat : JL. SWK 104 (Lingkar Utara) Condongcatur, Sleman, Yogyakarta 55283 *Correspondence author: setiawananang260@gmail.com

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ABSTRACT

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This study aims to determine the effect of work-family conflict, a family-work conflict, on performance and job satisfaction as a mediation of female nurses at the Grhasia Setiawan, A., Winarno, W., Ambarawati, S. Mental Hospital, Yogyakarta. This study D. A. (2024). Influence work-family conflict, uses a descriptive-quantitative approach; family-work conflict on the performance of the population in the survey is all female job nurses, as many as 92 nurses. For the satisfaction in Yogyakarta Grhasia Mental sample used, namely female nurses with Hospital. International Journal of Applied civil servant status, there were as many as Business and International Management, 84 nurses, with a research sampling technique using purposive sampling. The data used are primary data obtained through questionnaires and interviews. The https://doi.org/10.32535/ijabim.v9i1.2386 analytical method used in this study is the structural equation model (SEM) with a partial least square (PLS) of 4.0. The results of this study indicate that work-family conflict has a negative and significant effect on the performance of female nurses, a negative and significant influence on female nurses, and a negative effect on the performance of female nurses at Grhasia Yogyakarta Hospital moderated by job satisfaction. The family-work conflict did not affect the performance of female nurses at Grhasia Yogyakarta Hospital moderated by job satisfaction.

> Keywords: Family-Work Conflict; Hospital Service; Job Satisfaction; Performance; Work-Family Conflict

INTRODUCTION

Currently, mental health is a problem that cannot be fully resolved, both at the global and national levels. Moreover, the COVID-19 pandemic has caused various negative impacts, such as an increase in mental problems and mental disorders. In addition, COVID-19 has made the people's economy worse, such as by closing many businesses and reducing employees, which directly affects the economy and also the mentality of the people (Millenia, 2022). Difficult situations eventually lead to mental disorders in most people. Director of Prevention and Control of Mental Health and Drug Problems, Dr. Celestinus Eigya Munthe, explained that mental health problems in Indonesia are related to the high prevalence of people with mental disorders. For now, Indonesia has a prevalence of people with mental disorders of around 1 in 5 of the population, meaning that around 20% of the population in Indonesia has potential mental problems (Kemenkes.go.id, 2022). According to the General Director of Endang of the Ministry of Health, as long as COVID-19 occurs in Indonesia, the number of mental disorders is estimated at 64.3%, either due to suffering from COVID-19 or due to other social problems because of the COVID-19 pandemic (Rokom, 2022). In addition, the increase in COVID-19 patients nationally in the last 2 years has made nurses experience fatigue, both physically and mentally. Pressure, work stress, and tight working hours at work make nurses run out of time to take care of their families. Time-draining work tasks result in reduced time with family.

A hospital's success in carrying out its functions is characterized by a rise in the quality of hospital services. A hospital's effectiveness is defined, in addition to suitable infrastructure, by human resources who work well. Advanced hospitals are undoubtedly supported by staff or employees who can manage the organization towards the intended advancement, and on the other hand, many organizations have weakened as a result of the inability to manage the organization. Good human resource management will keep employee performance at its peak and will also aid in the achievement of company goals. This is supported by (Hasibuan, 2010), who states that human resource management is a method or attempt to manage, create, and shape personnel to achieve organizational goals.

Medical people, pharmacists, nursing staff, community and environmental workers, nutrition workers, physical skills workers, medical technical employees, and those who support the provision of health services are all classified as health workers under RI Law No. 36 of 2009. The nursing staff is the majority staff; 60–70% of the staff in the hospital is dominated by female nurses (Gillies, 2003). Therefore, nurses are the focus of this research because, based on the large number of nurses on duty at the hospital, it can be seen that nurses play a very large role in the field of health services. Nurses are required to have high performance to provide maximum health services for the community.

Moreover, special female nurses for mental hospitals are different from hospital nurses in general. Female nurses for psychiatric hospitals are required to have great patience because what they face every day are patients with mental disorders with different levels, whether mild, moderate, or severe. Mental hospital patients are patients whose mental health is disturbed. Mental health according to the understanding of medical science (DepKes RI, 1985), is a condition that allows for optimal physical, intellectual, and emotional development of a person and that development goes in harmony with the circumstances of other people.

Therefore, nursing services are an integral part of health services that play a role in realizing optimal health degrees in individual, family, and community settings. Nursing services in hospitals as a spearhead that can be a big leverage in efforts to develop health (DepKes RI, 1999), therefore it requires optimal nurse performance.

Performance is work results (output), both the quantity and quality achieved per unit period in carrying out their work duties following the responsibilities given to them (Mangkunegara, M. A. P., & Hasibuan, M. M. S., 2009). Based on PP. No. 30 of 2019, the consequence of every public servant's work according to SKP and work behavior is performance. Nurse performance is certainly influenced by several things, such as multiple conflicts in the form of work and family conflicts (work-family conflict) and family and work conflicts (family-work conflict), and there may be an effect on job satisfaction that can later weaken or strengthen it.

Conflict often arises in human life, including in organizations, and is something that cannot be avoided. According to Carlson et al. (2000), multiple-role conflict is defined as the conflict that arises when roles in work conflict with roles in the family. One such conflict is the work-family conflict. work-family conflict. This conflict will be experienced by a female worker, especially if both partners are working. Career women who are unable to address numerous role conflicts may exhibit unfavorable work attitudes, such as a lack of desire and concentration at work due to family concerns, affecting the overall performance of the organization or firm (Yuliviona, 2015). Work-family conflict (WFC) is unavoidable in the nursing profession due to the high levels of physical, cognitive, and emotional demands (Buonocore & Russo, 2013; Shacklock & Brunetto, 2012).

Work-family conflict is characterized by Greenhaus and Beutell (1985) as a type of inter-role conflict in which the demands of the work and family roles are mutually incompatible in a number of ways and where participation in one of these roles is made more challenging by expectations for participation in other roles. Work-family conflict is a stress factor that appears when a person devotes more time to work, which causes conflict with his family's demands. Thus, work and family roles are inversely related to one another, allowing time for one role to produce conflict with the other (Hughes et al., 1992). One task that might be challenging to do concurrently is striking a balance between tasks at home and at work. The burden created by pressure from the job's requirements, such as sales objectives, will have an effect on performance (Inthalasari & Arief, 2021).

Long and irregular working hours as well as challenging working conditions and job stress make nurses especially vulnerable to work-family conflict, especially for nurses in mental hospitals. Incompatible role pressures from the work and family domains can lead to work-family conflict, a kind of inter-role conflict (Greenhaus & Beutell, 1985). Work-family conflict can affect nurse performance, as supported by previous research that states that work-family conflict (WFC) has a significant negative effect on the performance of female nurses (Puspitawati & Yuliawan, 2019).

Additionally, persistent strain from both job and family obligations can have negative impacts across a variety of domains. Work-Family Conflict (WFC) has been shown to have a detrimental impact on organizational commitment, performance, job satisfaction, and intention to stay (Grandey et al., 2005; Kalliath & Kalliath, 2015; McElwain et al., 2005; Shacklock & Brunetto, 2012). The study of university teaching staff in Pakistan demonstrates that work-family conflict (WFC) has a considerable positive impact on employee

performance, although there is a research shortage in this area. This is shown in the research of Somoro, A. A., Breitenecker, R. J., and Moshadi Shah, S. A. (2018). Therefore, researchers want to prove this with a different object, namely female nurses in mental hospitals.

Another factor that can affect the performance of other female nurses is family-work conflict (FWC). Family-work conflict (FWC) is defined as problems in the family that can interfere with his role as a worker in a company or organization (Carlson et al., 2000). Family-to-work conflict is a disorder that is specifically defined by cause (family) and effect (work). Apart from being nurses, women certainly have responsibilities at home, either as mothers or wives, such as taking care of their husbands, children, and other household needs..

Not infrequently, many parents, especially working mothers, have to divide their time to gather and spend time with their children and husband. So there are many cases where a woman who does chores at home to take care of her husband, children, household needs, and even elderly parents will feel very tired. This is exacerbated if the husband does not understand how to help with household chores. Incidents like this will certainly make nurses feel tired and pressured, and it is feared that they will affect performance in the workplace, namely in a mental hospital. Supported by previous research from Alawi et al. (2021) which proves that family-work conflict (FWC) has a significant negative effect on teachers' performance. In contrast to research from Soomro et al. (2018), family-work conflict results show no significant effect on performance (university teaching sector in Pakistan). Therefore, the researchers found research that can be further investigated with a similar title but with a different object.

Olsen and Near in Rode et al. (2007) found a negative correlation between conflict that arises at work as a result of family issues and job satisfaction. For example, if a young child is sick, it will make a working mother worry, this will make her unable to concentrate at work and make her feel less job satisfaction than usual in normal circumstances. A person can be grouped into satisfiers where job satisfaction arises from achievement, recognition, work, self, responsibility, and advancement, meanwhile, dissatisfiers can cause dissatisfaction at work because of technicality, pay, interpersonal relationships, working conditions, supervisors, security, and job status, (Hezberg et al., 2010).

Job Satisfaction is a pleasant emotional state that arises from evaluating one's job or work experience, and involves feeling good and happy employees with achieving business goals (Al Jenaibi, B., 2010). Then another opinion Job Satisfaction is a pleasant or positive feeling that is the impact or result of evaluation of various aspects of the job (Robbins & Judge, 2017) Research from (Soomro et al., 2018) shows that job satisfaction moderately negative and significant between work-family-conflict (WFC) and employee performance. Supported by research results from (Cortese et al., 2010), which revealed that work-family conflict (WFC) is considered one of the negative predictors of job satisfaction, attendance work-family conflict (WFC) contributed to a decrease in the level of job satisfaction. So, it's possible that job satisfaction can weaken the influence of work-family conflict (WFC). Likewise, family-work conflict (FWC) includes the stressor variable. Role conflicts that occur in the family when the wife is doing what is her duty and responsibility, both as a wife and as a mother, of course, make her feel tired and stressed. Fatigue and stress are what will affect the work in the office.

So, when the role conflict between work-family conflict (WFC) and family-work conflict (FWC) is quite high, it can be dampened and reduced, one of which is the efforts of the administrators of the Yogyakarta Ghrasia Hospital in presenting policies that can create a sense of job satisfaction for these nurses. Examples of these policies include additional incentives, decent salaries, attention from managers, career path opportunities, and so on. It is hoped that good job satisfaction will be able to reduce the influence of work-family conflict (WFC) and family-work conflict (FWC), which in the end will make the nurse's performance optimal. So that's a variable, and job satisfaction can be a moderating variable in this research.

Grhasia Mental Hospital is located at Jalan Kaliurang Km 17, Tegalsari Village, Kepanewon Pakem, Sleman Regency, Special Region of Yogyakarta. Ghrasia Yogyakarta Hospital is located at an altitude of 600 m2 above sea level, so it has cool weather. The land used by the Grhasia Yogyakarta RSJ is sultanate land or "sultan ground" with usufructuary status. At first, the Grhasia Yogyakarta Hospital had a land area of 104,250 m2. However, based on the MOU between the DIY Regional Government and the Directorate General of Corrections, a portion of the 48,825 m2 of land was used for the location of the Narcotics Prison, whose construction began in 2006 and began operating in June 2008. 20 IL/Kep. KDH/A/2010. RSJ Grhasia Yogyakarta has a vision to be a center for mental health and complete drug services with quality and ethics, besides that it has a motto of serving with a SENYUM, namely: S = Siap, E = Empati, N = Nalar, Y = Yakin, U = Upayakan pelanggan diperhatikan, and M = Mengucapkan terimakasih.

No.	Data on inpatients at the Ghrasia Hospital in Yogyakarta	Year
1.	1444	2019
2.	1488	2020
3.	1432	2021
	Total Patients	4464

Table 1. Number of hospitalized patients for the last 3 years

Source: Inpatient Data at Ghrasia Hospital, Yogyakarta, 2019 - 2021

Based on the data above, the number of inpatients at Ghrasia Yogyakarta Hospital is an average of 1488 patients per year. This data does not include outpatient mental patients, mental patients under the monitoring of the Yogyakarta Ghrasia Hospital, or general hospital patients. With the impact of COVID-19, there was an increase in patients in 2020, when COVID-19 was moderately booming. These patients are either due to the COVID-19 virus or as a result of a pandemic, such as patients who experience mental health disorders. This will have an impact on increasing the workload of nurses, which is increasing pressure and stress, and it is feared that it can affect the performance of nurses.

Table 2. Number of female nurses

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	No.	Employment status	Amount			
	1.	Civil servant	84			

2.	BLUD	5
3.	PTT	3
	Total female nurses	92

Source: Ghrasia Hospital Yogyakarta staffing data 2023

Based on the data above, the number of female nurses was 84 nurses with PNS status, 5 BLUDs, 3 PTTs, and the remaining 57 male nurses. From these data, the composition of female nurses who are more numerous is certainly at risk of experiencing role conflict, both Work-Family Conflict (WFC) and well Family-Work Conflict (FWC). Based on these data, the researchers intended to examine female nurses with PNS status because they had the largest number, namely 84 nurses.

The answer was that several nurses faced fairly high role conflicts, specifically work-family conflict (WFC), according to the findings of observations and interviews with numerous female nurses in Wisma A, B, and C at Ghrasia Yogyakarta Hospital. The nurse admitted that all this time she had experienced verbal and non-verbal violence from patients several times. Verbal violence includes shouting, insults, and insults committed by patients with mental disorders. The majority of nurses, particularly those at Wisma C, have suffered non-verbal violence such as slapping, striking, and hurling things. Some nurses, especially those with limited job experience, may feel rather weighty as a result of this. The care of mentally ill patients necessitates special attention and wears out the nurse. Nurses feel a little bothered if they get shift nights because they have to leave their small children, and there is fear when going to work because the house is not close. However, division shift is fairly regulated.

Further related to family-work conflict (FWC) experienced by nurses at Grhasia Yogyakarta Hospital. The reason is that most of the female nurses at Wisma A still have children under five and several children who are still in elementary and kindergarten schools; therefore, they sometimes have to take turns arranging working hours with other nurses to be able to prepare for their children's needs. Sometimes it is difficult for nurses to concentrate on work in the hospital because they think about their young children when they are sick or when no one is waiting. Furthermore, some nurses do not have their own home, so they still live with their parents or in-laws. This certainly adds to the work and responsibility of taking care of them. Then, at Wisma B, based on interviews conducted, female nurses also experience role conflict, but not as high as at Wisma A, because the majority of nurses here are senior nurses and no longer have young children to depend on and already have their own homes, in other words, are more stable both physically and mentally. economics and emotions. Furthermore, Wisma C has similar conditions to Wisma B.

Then, related to job satisfaction, Based on the results of interviews with several nurses at Wisma A, B, and C, it shows that there are no problems related to salary and incentives. This is because it has been regulated in PP No. 30 of 2019, and promotion has also been arranged, so co-workers generally have no problems, as well as the widest possible learning opportunities. The problem is that there are superiors who do not provide control and supervision of their subordinates; sometimes nurses feel they are not being cared for. Furthermore, there are employees in other parts based on the nurse's narrative; these employees have a less friendly attitude. Then, specifically for Wisma C, the training and development provided are still lacking, and not all nurses get that opportunity. The purpose

of this study was to analyze the direct effect of work-family conflict and family-work conflict on the performance of female nurses and the influence of job satisfaction as a moderating variable. Based on the description of the background above, this study aims to determine "the influence of work-family conflict and family-work conflict on the performance of female nurses moderated by job satisfaction at Ghrasia Mental Hospital, Yogyakarta.

LITERATURE REVIEW

Work-Family Conflict

Greenhaus and Beutell (1985) explain work-family conflict as a form of inter-role conflict that occurs when one role (work or personal life) imposes responsibilities and requirements that are inconsistent with other roles. The phenomenon known as work-family conflict is one that people experience when one of their roles at work interferes with another role at home (Carlson et al., 2000). Work interferes with family responsibilities, meaning that most of the time and attention is devoted to doing work, so they lack the roles of a wife for their husband, a mother for their children, taking care of their parents, and other roles. Indicator Work-Family Conflict, according to Carlson et al. (2000) describes three forms of work-family conflict, which are:

Time-Based Conflict (time-based conflict) occurs when time spent fulfilling one function cannot be used to fulfill another, such as the division of time, energy, and opportunities between work and domestic roles. When the demands and actions required to act out the two do not match, scheduling is tough and time is restricted. For example, if a woman spends more time working, she will have less time to manage her position as a mother or wife at home. Longer working hours diminish the quantity and quality of responsibilities that must be performed at home.

Strain-based conflict (pressure-based conflict) is the emergence of tension or an emotional condition caused by one position that makes it harder for a person to satisfy the demands of another role. A mother who works all day, for example, will be weary and worried, making it impossible for her to sit comfortably while accompanying her child to finish her schoolwork. For example, a working woman under heavy job pressure may experience exhaustion and stress after work, interfering with the roles or tasks she must perform at home.

Behavior-based conflict (conflict based on behavior) is a conflict that occurs when the expectations of one position diverge from the expectations of another. The disparity between individual behavior at work and home, produced by variances in behavioral regulations for a career woman, is frequently difficult to interchange between the roles she performs with one another. For example, a female worker who is required to work rapidly at work will be carried away by her performance at home as a mother or wife.

Family-Work Conflict

Family-work conflict (FWC) is defined as problems occurring in the family of an employee or worker that can interfere with his role as a worker in a company or organization (Carlson et al., 2000). Indicator Family-Work Conflict adopted from Carlson et al. (2000):

Time-Based Conflict (time-based conflict) is a conflict that occurs because the time used to fulfill one role cannot be used to fulfill another role, including the division of time, energy, and opportunities between the roles of household work and office work. In this case, the time required to carry out family demands can reduce the time required to carry out work demands. An example is when a woman spends time taking care of her family, husband,

children who are still toddlers, and parents who take longer to interfere with her time in managing her role as an office worker.

Strain-based conflict (conflict based on pressure) refers to the emergence of tension or an emotional state produced by one role that makes it difficult for a person to fulfill the demands of another role. For example, a woman who works all day taking care of her husband, small children, parents, and other household chores will feel tired, and it will be difficult for her to concentrate because she is tired. Things like this can certainly have an impact on performance at work. Behavior-based conflict (conflict based on behavior) is a conflict that occurs when there is a role mismatch between family and work. As with the problem-solving solutions in the family, they are not suitable when applied to solving problems at work.

Job Satisfaction

Job satisfaction is a pleasant or positive feeling that is the result of evaluating various aspects of the job (Robbins & Judge, 2017). According to Hezberg et al. (2010), someone can be grouped into satisfiers where job satisfaction arises from achievement, recognition, work, self, responsibility, and advancement, whereas dissatisfiers can cause job dissatisfaction because of technicality, pay, interpersonal relationships, working conditions, supervisors, security, and job status. Indicator Job Satisfaction used in the study quoted from Robinson and Judge (2017), namely:

When an employee's employment is in line with his or her interests and abilities, he or she will feel satisfied with their job. Employee satisfaction with rewards occurs when they believe their pay or compensation is in line with their workload and fairly distributed among all other employees in the company. Satisfaction with supervision or bosses makes employees feel they have a superior who can provide technical assistance and motivation. Employee satisfaction with coworkers, specifically with coworkers who can offer technical assistance and social support, Opportunities for promotion within the organizational structure exist through promotions.

Performance

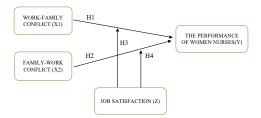
According to Robinson and Judge (2017), performance is "output derived from processes, human or otherwise," so performance is the result of work that can be achieved by a person or group of people in an organization, following the authority and responsibility of each to achieve the goals of the organization concerned. Furthermore, according to PP. No. 30 of 2019, performance is the result of work achieved by every civil servant in the organization or unit according to SKP and work behavior.

Employee performance will certainly be judged by the extent to which employees provide maximum quality for their contributions. Performance appraisal assists organizations in human resource planning for the benefit of improving performance in the future. Work assessment concerns the credibility of the employee concerned and is an organizational benchmark for improving work systems. Measurement of employee performance according to PP 30 of 2019 concerning PNS Performance Assessment consists of an SKP assessment with a weight of 70% and 30% behavior, which includes indicators:

Quantity is the amount of output (output) and/or benefits (outcome) that must be included in every performance target. Quality is defined as output or benefit quality and does not always have to be included in performance targets, depending on the nature and features of the activities performed. Time is the time standard used to complete tasks and does not always

have to be in the performance targets, depending on the type and features of the activities carried out. Costs are the money required to complete activities, and depending on the nature and qualities of the activities performed, they may or may not always be included in the performance targets. Service orientation refers to a civil servant's attitude and behavior at work with the goal of serving the community, supervisors, coworkers, connected work units, and/or other agencies with the greatest possible service. A person's willingness and capacity to match their attitudes and behaviors with organizational goals by putting the needs of the service ahead of their own interests constitutes commitment. Work Initiative, which includes the capacity and willingness to come up with fresh ideas and innovative methods for improving work, the readiness to assist colleagues when they need it, the ability to see challenges as opportunities rather than threats, the ability to work more effectively every day, and an infectious enthusiasm. Innovations made by civil servants are also included in aspects of work initiatives. Collaboration refers to an employee's willingness and capacity to cooperate with coworkers, bosses, and subordinates in their work units and other agencies to complete a certain task or duty with the greatest amount of effectiveness and efficiency. Leadership is the capacity and readiness of government employees to inspire and exert influence over subordinates or those associated with their line of work in order to accomplish organizational goals.

Figure 1. Thinking Framework 1



The hypothesis proposed by the author in this study is:

- H₁: Work-Family Conflict (WFC) has a negative effect on the performance of female nurses at Grhasia Yogyakarta Hospital.
- H₂: Family-Work Conflict (FWC) has a negative effect on the performance of female nurses at Grhasia Hospital, Yogyakarta.
- H₃: Work-Family Conflict (WFC) has a negative effect on the performance of female nurses at Grhasia Yogyakarta Hospital, moderated by job Satisfaction.
- H₄: Family-Work Conflict (FWC) has a negative effect on the performance of female nurses at Grhasia Yogyakarta Hospital, moderated by job Satisfaction.

RESEARCH METHOD

This study employed quantitative research, which gathers data through surveys and questionnaires with close-ended question. According to Sekaran and Bougie (2017) the quantitative technique is a scientific approach where data is presented as numbers that may be processed and examined using mathematical or statistical computations. The information created from the study's data processing is then used to make decisions. A Likert scale was used to ask respondents to rate their responses to the questionnaire's questions.

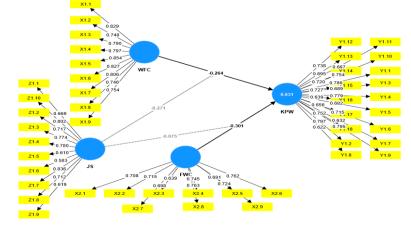
The object of this research is located at Grhasia Hospital. The population in this study was all female nurses, totaling 92 people. The criteria used in this study were 84 female nurses with PNS status at the Grhasia Mental Hospital, Yogyakarta.

RESULTS

Validity test

The outer model is judged by sight convergent validity (magnitude loading factor for each construct). Convergent validity from the reflexive measurement model the indicators are assessed based on the correlation between item score/component score with construct score calculated with the PLS analysis tool.

Figure 2. Output Outer Loading SmartPLS 1



Average Variance Extracted (AVE) is the percentage of the average score variance extracted between question items or indicators of a variable which is a summary of convergent indicators. According to Ghozali (2021), the AVE value is at least 0.5. This value describes convergent validity which means that a latent variable can explain more than half of the variance of its indicators in the average. Based on the table, it can be seen that the AVE values for all research variables are > 0.5 so it can be concluded that all variables in this study are declared valid. The table 1.1 shows that all of the AVE values for the research variables are > 0.5, indicating that all of the variables in this study can be regarded as legitimate.

	Cronbach's alpha	Composite reliability	The average variance extracted (AVE)
FWC	0.882	0.905	0.514
JS	0.891	0.912	0.511
KPW	0.944	0.950	0.514
WFC	0.929	0.939	0.633

Table 3. Output Average Variance Extracted (AVE)

Source: Data Processed, 2023

Whether two variables are sufficiently dissimilar from one another is explained by discriminant validity. Although a value of 0.5 to 0.6 is thought to be enough for early-stage

research, the requirements for the square root value of AVE for each variable are > 0.7. Based on Table 1.2, it can be seen that the validity results have met all the criteria of discriminant validity, so this research is declared valid.

	FWC	JS	KPW	WFC	Information
FWC	0.717				VALID
JS	0.316	0.715			VALID
KPW	-0.522	-0.435	0.717		VALID
WFC	0.078	0.075	-0.439	0.795	VALID

Table 4. Output of AVE Square Root and Correlation Between Latent Constructs

Source: Data Processed, 2023

Reliability Test

On each statement, the reliability test was run simultaneously. The instrument is deemed credible if the correlation coefficient is positive and significant. The SmartPLS 4.0 application helped with reliability testing in this investigation. Cronbach's alpha results can be shown. The statement items or questions in the questionnaire are considered credible if the value of Cronbach Alpha > 0.7 (Ghozali, 2021). Additionally, if the composite reliability value > 0.70, the value of the study's questionnaire is considered reliable (Ghozali, 2021).

	Cronbach's alpha	Composite reliability	Information
FWC	0.882	0.905	Reliable
JS	0.891	0.912	Reliable
KPW	0.944	0.950	Reliable
WFC	0.929	0.939	Reliable

Table 5. Reliability Test Output

Source: Data Processed, 2023

Based on the test results in Table 2.1, it can be seen that the results' composite reliability and Cronbach's alpha showed a satisfactory value, namely the value of each variable above the minimum value of 0.70, so this study was declared valid.

Quantitative Analysis

To assess if work-family conflict, family-work conflict, and moderated job satisfaction have an impact on the performance of female nurses, a model using structural equation modeling with the PLS technique (partial least squares) is used. The analysis was done with the aid of SmartPLS 4.0. In this study, hypothesis testing was used to examine the relationship between the independent variables (X1 and X2) and the dependent variable (Y).

which is moderated by the moderating variable (Z), as well as the relationship between the independent variables (X1 and X2) and the dependent variable (Y). The relationship between latent constructs in this research model is seen from the estimated path (path coefficient) and its level of significance (p-value). The level of significance (p-value) used in this study is sig α (0.05). Testing the proposed hypothesis is done by testing the structural model (inner model) by looking at path coefficients which show the parameter coefficients and t-statistical significance values. The significance of the estimated parameters can

provide information about the relationship between research variables. The hypothesis is accepted if the t-statistical significance value is >1.96 and the p-value is <0.05.

	Original sample (O)	Sample mean (M)	Standard deviation (STDEV)	T statistics (O/STDEV)	P values
FWC -> KPW	-0.301	-0.317	0.112	2.695	0.007
WFC -> KPW	-0.264	-0.261	0.068	3.900	0.000
JS x FWC -> KPW	-0.075	-0.105	0.110	0.683	0.495
JS x WFC -> KPW	-0.271	-0.257	0.095	2.851	0.004

Table	6	Output	Path	Coefficient
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Source: Primary Data Processed, 2023

Hypothesis Testing 1: Influence Work-Family Conflict on the Performance of Female Nurses.

The first hypothesis states that work-family conflict (WFC) has a negative effect on the performance of female nurses at Grhasia Yogyakarta Hospital. Based on Table 4.10, it can be seen that the value of the effect of the coefficient of work-family conflict on the performance of female nurses is -0.264 (negative), with a p-value of 0.000, which is smaller than 0.05. This shows that the higher the work-family conflict, the lower the performance of female nurses. This result can be interpreted as having a negative and significant effect on the performance of female nurses at Grhasia Mental Hospital, Yogyakarta.

Hypothesis Testing 2: Influence Family-Work Conflict on the Performance of Female Nurses

The second hypothesis states that family-work conflict (FWC) has a negative effect on the performance of female nurses at Grhasia Yogyakarta Hospital. Based on Table 4.10, it can be seen that the value of the effect of the coefficient family-work conflict on the performance of female nurses is -0.301 (negative), with a p-value of 0.007, which is smaller than 0.05. This shows that the higher the family-work conflict, the lower the performance of female nurses. This result can be interpreted as indicating that family-work conflict has a negative and significant effect on the performance of female nurses at Grhasia Mental Hospital, Yogyakarta.

Hypothesis Testing 3: Work-Family Conflict negative effect on the Performance of female nurses moderated by Job Satisfaction

The third hypothesis states that work-family conflict (WFC) has a negative effect on the performance of female nurses at Grhasia Yogyakarta Hospital, moderated by job satisfaction. Based on the results of testing the hypothesis shown in Table 4.10, the coefficient can be obtained as big-0.271 with a significance level P-value of 0.004 <0.05. This meaningful job satisfaction significantly moderates the relationship between work-family conflict and the performance variable of female nurses at Grhasia Mental Hospital, Yogyakarta.

Hypothesis Testing 4: Family-Work Conflict has a negative effect on the performance of female nurses moderated by job Satisfaction

The fourth hypothesis claims that job satisfaction at Grhasia Yogyakarta Hospital moderates the detrimental impact of family-work conflict (FWC) on the performance of female nurses. Based on the results of testing the hypothesis shown in Table 4.10, the coefficient can be obtained as big-0.075 with a significance level P-value of 0.495 > 0.05. This meaningful job satisfaction did not significantly moderate the relationship between family-work conflict and the performance variable of female nurses at Grhasia Mental Hospital, Yogyakarta.

DISCUSSION

Work-family conflict is a strong factor in determining the performance level of female nurses. Work-family conflict has negative and significant effect on the performance of female nurses at Grhasia Mental Hospital, Yogyakarta. This result gives the meaning that the higher work-family conflict, the performance of female nurses at Grhasia Mental Hospital Yogyakarta will decrease. Therefore, Grhasia Mental Hospital Yogyakarta needs to pay attention to what factors cause high and low work-family conflict. In this case, the highest conflict value occurs in the indicator strain-based conflict, this means that the respondent experiences significant pressure at work. In this case, female nurses at the Grhasia Mental Hospital Yogyakarta often experience two types of violence, namely verbal violence: shouts, insults, and diatribes. Non-verbal violence: scratching, throwing objects, being spat on, and once being slapped. However, the distribution of shifts has been arranged fairly. The results of this study support Amran et al. (2021) research, which showed that work-family conflict has a negative effect on employee performance. And Support by Astuti et al. (2021) Work-family conflict partially has an impact on the work of working at home during the COVID-19 pandemic in Medan City.

Family-work conflict has a significant negative effect on the performance of female nurses at Grhasia Mental Hospital, Yogyakarta. Family-work conflict is a strong factor in determining the performance level of female nurses. This result gives the meaning that the higher the family-work conflict, the lower the performance of female nurses at Grhasia Mental Hospital Yogyakarta. Therefore, Grhasia Mental Hospital Yogyakarta needs to pay attention to what factors cause high and low family-work conflict. In this case, the highest conflict value occurs in the indicator strain-based conflict, This means that the respondent experienced significant pressure in his household. In this case, when the respondent worried, so this will make them less focused on their work at the Grhasia Mental Hospital, Yogyakarta. Apart from that, it is not uncommon for problems caused by arguments between husband and wife and pressure from the family to also disrupt the respondent's work. The results of this study support research conducted by Alawi et al. (2021) which shows that family-work conflict has a significant negative effect on performance.

Job satisfaction managed to moderate the influence of variables of work-family conflict on the performance of female nurses which can be seen from the level of significance. If seen from the research results show value of job satisfaction is relatively high. This means that the organization has made efforts to create satisfaction for nurses, especially women at Grhasia Mental Hospital, Yogyakarta. In this case, it is related to job satisfaction. Most female nurses are satisfied with organizational policies consisting of educational scholarship opportunities, training and development, additional income outside of salary, and incentives. Workload and emotional commitment to a single job are activities in daily life that are said to increase WFC, while organizational support, particularly management-level support, is thought to be one of the most effective factors in reducing WFC (Colombo & Ghislieri, 2008). This is in line with research from Soomro et al. (2018), which shows that job satisfaction is

moderately negative and significant between work-family conflict (WFC) and employee performance. Supported by research results from Cortese et al. (2010), which revealed that work-family conflict (WFC) is considered one of the negative predictors of job satisfaction, attendance work-family conflict (WFC) contributes to a decrease in the level of job satisfaction and will ultimately weaken employee performance.

CONCLUSION

This study aims to determine the effect of work-family conflict, a family-work conflict, on performance and job satisfaction as a mediation of female nurses at the Grhasia Mental Hospital, Yogyakarta. This study uses a descriptive-quantitative approach; the population in the survey is all female nurses, as many as 92 nurses. For the sample used, namely female nurses with civil servant status, there were as many as 84 nurses, with a research sampling technique using purposive sampling. The data used are primary data obtained through questionnaires and interviews. Based on the analysis and discussion that has been done, it can be concluded that work-family conflict and family-work conflict have negative and significant effects on the performance of female nurses at Grhasia Mental Hospital, Yogyakarta. Work-family conflict has a significant negative effect on the performance of female nurses at Grhasia Yogyakarta Hospital, moderated by job Satisfaction when family-work conflict does not affect the performance of female nurses.

The implications of this research are to reduce the impact caused by work-family conflict, so nurses can ask for more support, especially from the family, and then for organizations, especially leaders, to, as often as possible, provide appreciation and support as well as more intense communication so that nurses don't hesitate to convey complaints. and problems experienced at work. Related to family work conflict and the importance of support from the family, it is better for respondents to start scheduling holidays at the weekend and sharing tasks with their husband to take care of the family. If the husband also works, then entrusting the children is the best option. The suggestion for organizations is that leaders should always provide moral support and motivation more often. Furthermore, leaders can also provide empathy and invite nurses to be more open about their problems. For job satisfaction, leaders can also schedule fun gatherings, joint holidays, and other activities that can foster togetherness. The performance of female nurses has a high average score; however, organizations and leaders must continue to monitor and provide training to nurses as often as possible.

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REFERENCES

Al Jenaibi, B. (2010). Job satisfaction: Comparisons among diverse public organizations in the UAE. *Management Science and Engineering*, *4*(3), 60-79. http://dx.doi.org/10.3968/j.mse.1913035X20100403.007

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- Al-Alawi, A. I., Al-Saffar, E., AlmohammedSaleh, Z. H., Alotaibi, H., & Al-Alawi, E. I. (2021). A study of the effects of work-family conflict, family-work conflict, and work-life balance on Saudi female teachers' performance in the public education sector with job satisfaction as a moderator. *Journal of International Women's Studies*, 22(1), 486-503. https://vc.bridgew.edu/jiws/vol22/iss1/39
- Amran, A., Lestari, T., Komalasari, Y., Putriyandari, R., Rahayu, Y. S., & Drajat, D. Y. (2021). The phenomenon of work-family conflict and work stress and their effect on employee performance. *Journal of International Conference Proceedings*, 4(2), 98-108. https://doi.org/10.32535/jicp.v4i2.1230
- Astuti, R., Tanjung, H., Surya, M. A. A., & Rahmawany, D. (2021). Impact of conflict and job stress at work at home mom performance during pandemic covid 19 in Medan. *Journal of International Conference Proceedings*, *4*(2), 555-560. https://doi.org/10.32535/jicp.v4i2.1290
- Buonocore, F., & Russo, M. (2013). Reducing the effects of work–family conflict on job satisfaction: the kind of commitment matters. *Human resource management journal*, 23(1), 91-108. https://doi.org/10.1111/j.1748-8583.2011.00187.x
- Carlson, D. S., Kacmar, K. M., & Williams, L. J. (2000). Construction and initial validation of a multidimensional measure of work–family conflict. *Journal of Vocational behavior*, *56*(2), 249-276. https://doi.org/10.1006/jvbe.1999.1713
- Colombo, L. & Ghislieri, C. (2008). The work-to-family conflict: theories and measures. *TPM* – *Testing, Psychometrics, Methodology in Applied Psychology* 15, 35–55. 10.4473/TPM.15.1.3
- Cortese, C. G., Colombo, L., & Ghislieri, C. (2010). Determinants of nurses' job satisfaction: the role of work–family conflict, job demand, emotional charge and social support. *Journal of nursing management*, *18*(1), 35-43. https://doi.org/10.1111/j.1365-2834.2009.01064.x
- Ghozali, I. (2021). Partial Least Squares Konsep, Teknik, dan Aplikasi Menggunakan Program SmartPLS 3.2.9 untuk Penelitian Empiris (3rd ed.). Badan Penerbit Universitas Diponegoro
- Gillies, D. A. (2003). *Manajemen Keperawatan: Suatu Pendekatan Sistem (2nd ed.)*. WB Saunders Company.
- Grandey, A. A., Cordeiro, B. L., & Crouter, A. C. (2005). A longitudinal and multi-source test of the work–family conflict and job satisfaction relationship. *Journal of occupational and Organizational Psychology*, *78*(3), 305-323. https://doi.org/10.1348/096317905X26769
- Greenhaus, J. H., & Beutell, N. J. (1985). Sources of conflict between work and family roles. *Academy of management review*, *10*(1), 76-88. https://doi.org/10.2307/258214
- Hasibuan, M. S.P. (2010). Manajemen Sumber Daya Manusia. PT Bumi Aksara
- Hezberg, F., Mausner, B., & Snyderman. B. (2010). *The motivation to work (12th ed.).* Transaction Publishers
- Hughes, D., Galinsky, E., & Morris, A. (1992). The effects of job characteristics on marital quality: Specifying linking mechanisms. *Journal of Marriage and the Family*, 31-42. https://doi.org/10.2307/353273
- Inthalasari, R., & Arief, M. (2021). The effect of emotional intelligence, work-family conflict, job autonomy company performance: The role job satisfaction and job stress as mediating variable. *Journal of International Conference Proceedings, 4*(3), 220-244. https://dx.doi.org/10.32535/jicp.v4i3.1313
- Kalliath, P., & Kalliath, T. (2015). Work–family conflict and its impact on job satisfaction of social workers. *British Journal of Social Work*, 45(1), 241-259. https://doi.org/10.1093/bjsw/bct125.

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https://www.ejournal.aibpmjournals.com/index.php/IJABIM

- Mangkunegara, M. A. P. (2009). *Manajemen Sumber Daya Manusia Perusahaan*. PT Remaja Rosdakarya.
- McElwain, A. K., Korabik, K., & Rosin, H. M. (2005). An examination of gender differences in work-family conflict. *Canadian Journal of Behavioural Science/Revue canadienne des sciences du comportement*, 37(4), 283. https://doi.org/10.1037/h0087263
- Millenia, M. (2022). *Minimnya Kesadaran Masyarakat Terhadap Mental Health.* https://sardjito.co.id/2022/03/09/minimnya-kesadaran-masyarakat-terhadapmental-health/
- Munthe, C. E. (2021). *Kemenkes Beberkan Masalah Permasalahan Kesehatan Jiwa di Indonesia.* https://sehatnegeriku.kemkes.go.id/baca/rilismedia/20211007/1338675/kemenkes-beberkan-masalah-permasalahankesehatan-jiwa-di-indonesia/
- Puspitawati, N. M. D., & Yuliawan, A. K. (2019). The role mediation of work satisfaction in the effect of work family conflict on female nurse performance. *International Journal* of Business, Economics and Law, 19(5), 19-24.
- Robbins, S. P., & Judge, T. A. (2017). Perilaku Organisasi (16th ed.). Salemba Empat.
- Rode, J. C., Rehg, M. T., Near, J. P., & Underhill, J. R. (2007). The effect of work/family conflict on intention to quit: The mediating roles of job and life satisfaction. *Applied Research in Quality of Life*, *2*, 65-82. https://doi.org/10.1007/s11482-007-9030-6
- Rokom, R. (2022). *Kemenkes Perkuat Jaringan Layanan Kesehatan Jiwa di Seluruh Fasyankes.* https://sehatnegeriku.kemkes.go.id/baca/umum/20221010/4041246/kemenkes-

kembangkan-jejaring-pelayanan-kesehatan-jiwa-di-seluruh-fasyankes/

- Sekaran, U. & Bougie, R. (2017). *Metode Penelitian untuk Bisnis Pendekatan Pengembangan (6th ed.)*. Salemba Empat
- Shacklock, K., & Brunetto, Y. (2012). The intention to continue nursing: work variables affecting three nurse generations in Australia. *Journal of advanced nursing*, *68*(1), 36-46. https://doi.org/10.1111/j.1365-2648.2011.05709.x
- Soomro, A. A., Breitenecker, R. J., & Shah, S. A. M. (2018). Relation of work-life balance, work-family conflict, and family-work conflict with the employee performancemoderating role of job satisfaction. *South Asian Journal of Business Studies*, 7(1), 129-146. https://doi.org/10.1108/SAJBS-02-2017-0018
- Yuliviona, R. (2014). Work family conflict dan stress kerja perempuan bekerja. *Jurnal Ipteks Terapan*, *8*(4), 192-198.http://doi.org/10.22216/jit.2014.v8i4.15