

The Effect of Work Family Conflict on Resilience in Working Mothers at dr. Mohammad Zyn Sampang Hospital

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ABSTRACT

The increasing participation of women in the workforce, particularly in the healthcare sector, presents unique challenges for working mothers in balancing their dual roles as medical professionals and homemakers. Conflict between work and family demands (WFC) has the potential to reduce resilience in women. This study aims to determine the effect of work-family conflict on resilience as a mediator in working mothers at Dr. Mohammad Zyn Regional General Hospital, Sampang. This research method uses a quantitative approach with path analysis techniques. 170 working mothers were included in a population of 295 people. The results of this study indicate that WFC can significantly influence resilience; resilience acts as a mediator in work-family conflict (WFC). Data collection was conducted through an online questionnaire and analysis using JASP software version 19.3. The conclusions of this study emphasize that resilience plays a crucial role as a mediator, helping working mothers balance the pressures of two life domains. The ability to withstand and recover from stress is key to maintaining mental well-being and productivity.

INTRODUCTION

In the current era of globalization and modernization, the role of women in the world of work is increasingly prominent and significant. Based on data from the Central Statistics Agency in 2022, women's participation in the labor force in Indonesia reached 53.66%, indicating that more and more women are actively involved in various work sectors, including the health sector. Dr. Mohammad Zyn Sampang Hospital is one of the health service institutions that has a large number of female medical personnel. These women not only play the role of professionals in the work environment, but also carry out domestic responsibilities as mothers and wives. These dual roles pose complex challenges, especially in terms of managing time, energy, and emotions, thus potentially creating conflicts between work demands and family obligations, known as *Work Family Conflict* (WFC).

The WFC phenomenon is an important issue that needs attention because it can have an impact on individual psychological well-being, trigger prolonged stress, emotional exhaustion, and even reduce the quality of social interaction and professional performance. In the context of female medical personnel, the pressures of these two spheres of life can disrupt work focus, reduce service effectiveness, and affect interpersonal relationships at work and at home. Therefore, it is important to understand how women who live in dual roles are able to survive and continue to function optimally in the midst of such pressures. One of the psychological factors that is believed to have an important role in dealing with WFC is *Resilience*, which is the ability of individuals to rise from difficulties, adapt to changes, and maintain emotional stability and work performance.

Resilience serves as a protective mechanism that allows individuals to cope with stress in a more adaptive way. Women who have a high *level of resilience* tend to be able to manage stress better, maintain motivation, and maintain productivity despite the demands of dual roles. In this context, *resilience* is not only an internal force, but can also be influenced by external factors such as social support, organizational culture, and work policies that support a balance between professional and family life. Therefore, a deep understanding of the relationship between WFC and *Resilience* is critical to designing effective interventions in supporting the well-being of women medical personnel.

This study was conducted with the aim of analyzing the influence of *Work Family Conflict* on *Resilience* in working mothers at dr. Mohammad Zyn Sampang Hospital. The main focus of this study was to find out the extent to which conflict between work and family affects an individual's psychological resilience, as well as how *resilience* can be a buffer against the negative impacts of WFC. By understanding this relationship, it is hoped that health institutions can develop more appropriate strategies in supporting female medical personnel to remain resilient, mentally healthy, and able to carry out dual roles in a more balanced manner.

From a theoretical perspective, this study enriches the literature in the field of Industrial and Organizational Psychology, especially in understanding the psychological dynamics of women who face dual role pressures. From a

practical perspective, the results of this research can be a reference for the management of dr. Mohammad Zyn Sampang Hospital in designing resilience strengthening programs, such as stress management training, psychological counseling, and flexible and family-friendly work policies. Adequate organizational support will help working mothers maintain emotional balance, improve quality of life, and provide optimal health services to the community. In addition, this research can also be a reference for working women to understand the importance of building *resilience* as psychological capital in facing the challenges of professional and domestic life in harmony and empowerment.

THEORETICAL REVIEW

Work-Family Conflict

1. Definition of Work-Family Conflict

Greenhaus and Beutell (1985) describe work-family conflict as a form of role conflict that arises when the pressures of work and family roles cannot align. This incompatibility causes difficulties in fulfilling one role due to the demands of the other role. In general, Work-Family Conflict can be understood as a condition in which an individual faces obstacles in fulfilling a role in one domain (work or family) due to pressures or demands from the other domain.

Roboth (2015) adds that this conflict occurs when a person's efforts to fulfill a work role are affected by limitations in fulfilling family responsibilities, or vice versa. According to Latifah and Rohman (2014), this conflict arises when an individual has difficulty fulfilling a work role due to family demands, or vice versa. Meanwhile, Spector (2008) defines dual role conflict as a situation where work responsibilities interfere with household affairs, or conversely, when family obligations interfere with work activities.

Carlson, Kacmar, and Williams (2000) state that dual role conflict is a mismatch between workplace and family roles, where demands from both sides clash (Aluja & Blanch, 2012). Frone, in Triaryati (2003), also explains that this conflict occurs when individuals strive to fulfill work responsibilities while simultaneously facing limitations in meeting family demands, or vice versa. For example, a working mother will experience role conflict if she must care for children at home while continuing her professional career. Her success in fulfilling one role will be greatly influenced by her ability to fulfill the other.

From these various definitions, based on the theory of Greenhaus and Beutell (1985), it can be concluded that Work-Family Conflict is a condition when individuals are required to balance two primary responsibilities – family and work – each of which carries its own pressures and demands, potentially creating tension or role conflict.

2. Dimensions of Work-Family Conflict

Greenhaus and Beutell (1985) identified three dimensions of work-family conflict:

a. Time-based conflict

The time required to fulfill one demand (family or work) can reduce the time available for fulfilling the other demand (work or family). This form of conflict is positively related to: number of hours worked, overtime, attendance rates, shift irregularities, and work schedule control.

b. Strain-based conflict.

Occurs when pressure from one role affects performance in another role. Symptoms of strain include tension, anxiety, fatigue, the nature of the work role, the arrival of a new child, and the availability of social support from family members.

c. Behavior-based conflict

Specific patterns of behavior associated with one role may be incompatible with the expectations of another role. In other words, certain behaviors required in one role may not be appropriate for another role. If an individual is unable to adjust their behavior to meet the expectations of different roles, they are more likely to experience inter-role conflict.

Carlson et al. (2000) developed a six-dimensional model of WFC that combines three forms of conflict (time-based, pressure-based, and behavioral) with two directions of conflict:

- a) Work Interference with Family (WIF): When work interferes with family life.
- b) Family Interference with Work (FIW): When family interferes with work.

Resilience

1. Definition of Resilience

According to Reivich and Shatte (2002), resilience is a person's ability to face and adapt to various challenging life events or challenges. This ability enables individuals to persist amidst pressure and recover from difficulties or trauma. The term resilience was first introduced by Block (in Johanna, 2012) as ego-resilience, which refers to an individual's general capacity to adapt flexibly when faced with internal and external pressures. More specifically, ego-resilience is understood as a part of personality that supports individuals in shaping responses to the environment, both in the short and long term. This resource helps individuals change their character and the way they manage their self-control.

Benard (in Krovetz, 1999) states that resilience is the ability to bounce back positively despite experiencing significant risk or stress. Grothberg (1995) also describes resilience as the human capacity to face, overcome, and gain new strength—even to the point of experiencing personal transformation—after experiencing adversity. Meanwhile, Banaag (in Johanna, 2012) explains that resilience is the result of the interaction between individual and environmental factors. Individual factors serve to protect individuals from self-destruction and encourage positive self-development, while environmental factors provide protection and help ease the burdens faced by individuals.

Schoon (2006), after reviewing various expert definitions, concluded that resilience is a dynamic process in which an individual can demonstrate adaptive

abilities in the face of adversity, which plays a crucial role in the individual's functioning in life. Overall, resilience is a combination of personal strengths and environmental support, enabling individuals to adapt flexibly, withstand stress, and grow stronger after facing adversity.

2. Dimensions of Resilience

According to Reivich and Shatte (2003), there are seven aspects that can shape resilience: emotional regulation, impulse control, optimism, problem-solving skills, empathy, self-efficacy, and achievement. A more complete explanation is provided below:

a. Emotional Regulation

Emotional regulation is an individual's ability to remain stable and calm under stressful conditions. Emotional regulation is also an individual's ability to cope with various negative emotions. Individuals who are able to regulate their emotions will be able to control themselves when feeling angry, disappointed, or anxious, thereby effectively resolving a problem. Emotional regulation skills are important for building interpersonal relationships. Furthermore, not only must every emotion be corrected or controlled, but also how to express emotions appropriately is part of resilience (Reivich & Shatte, 2003).

b. Impulse Control

An individual's ability to control desires, urges, and pressures that arise from within. Impulse control relates to the ability to appropriately manage actions, behaviors, and emotions during difficult situations. Impulse control is related to emotional regulation. Individuals with poor impulse control skills will quickly experience emotional changes that can lead to negative traits and disrupt those around them.

c. Optimism

Optimism is an individual's ability to maintain a positive attitude despite facing a situation or difficulty. Reivich and Shatte (2003) define realistic optimism as the belief that, through all efforts, the future will be better, and all efforts are made to achieve it. Optimists believe that difficult circumstances will eventually change for the better. Optimists are full of hope for the future and believe they will be able to control their lives well.

d. Problem-Analyzing Ability

An individual's ability to accurately identify the causes of problems they face. Individuals do not focus too much on external factors but instead focus on formulating the problem and finding solutions, starting to overcome existing problems, recovering from them, and achieving success. Individuals who cannot properly address the causes of their problems will continue to make the same mistakes.

e. Empathy

Empathy is defined as the ability to understand and be sensitive to others. Empathy includes the ability to sense another person's emotional state, feel caring, try to solve problems, and understand their perspectives.

f. Self-Efficacy

Belief in one's own ability to achieve success. People with high self-efficacy are committed to solving their problems and do not give up easily when they find that the problem-solving steps they use do not meet their expectations.

g. Achievement

Achievement describes an individual's ability to improve and gain positive aspects of life after adversity or setbacks.

Connor and Davidson developed the CD-RISC to measure an individual's ability to cope with and adapt to stress or adversity. This scale consists of 25 items reflecting five main dimensions:

Dimensions from Reivich & Shatté (2003) were chosen because they reflect the adaptive abilities of working mothers in the face of the dual pressures of work and family. Aspects such as emotion regulation, impulse control, optimism, and problem analysis are particularly relevant for female healthcare workers who face high emotional demands in the hospital and at home. These dimensions also support the maintenance of Work Engagement, as they help individuals remain focused, resilient, and motivated even in difficult situations.

METHODOLOGY

This study uses a quantitative approach with a correlational design, which aims to analyze the relationship between two main variables, namely Work-Family Conflict (WFC) as an independent variable and Resilience as a mediating variable. Through this approach, researchers sought to understand the extent to which the conflict between work demands and family responsibilities affects the psychological resilience of working mothers, as well as how resilience plays a role in weakening the negative impact of the pressure of dual roles. The correlational design was chosen because it allowed the researcher to measure the strength and direction of the relationship between variables without manipulating the subjects' conditions, so that the results obtained reflected the phenomenon that occurs naturally in the work environment of female medical personnel.

The population in this study includes all working mothers who work as medical personnel at dr. Mohammad Zyn Sampang Hospital, with a total of 295 people. The research sample was determined using the Krejcie and Morgan tables, so that 170 respondents were obtained as a sample that was considered representative. The sampling technique was carried out purposively with the criteria that the respondents were married women, had family responsibilities, and worked full-time at the hospital.

The instruments used in this study consist of two psychological scales that have been tested for validity and reliability, namely:

1. Work-Family Conflict (WFC) Scale – consists of 18 valid items that reflect three types of conflicts, namely time-based conflict, strain-based conflict, and behavior-based conflict. This scale has high reliability with a Cronbach's Alpha value of 0.853, which indicates that the instrument is stable in measuring the level of dual role conflicts.

2. Resilience Scale – consists of 22 valid items that cover seven main dimensions, namely emotion regulation, optimism, self-efficacy, empathy, problem-analysis skills, impulse control, and goal achievement. This scale shows very high reliability with a Cronbach's Alpha value of 0.905, indicating that this measuring tool is very reliable in assessing an individual's ability to adapt to life's stresses and challenges.

All instruments use a 5-point Likert scale, ranging from Strongly Disagree (1) to Strongly Agree (5), which provides flexibility for respondents to express their level of agreement with each statement. The validity and reliability test was carried out with the help of the SPSS version 25 program, and the results showed that both instruments had good internal consistency and were suitable for use in this study.

The collected data were analyzed using correlation and mediation analysis methods to identify the direct and indirect influences between Work-Family Conflict on Resilience. The JASP version 19.3 program is used to support path analysis, which allows researchers to test causal relationships models between variables more comprehensively. Before the main analysis, the researcher first conducted a classical assumption test, specifically a data normality test using the One Sample Kolmogorov-Smirnov method through SPSS version 25. The test results showed a significance value of 0.200 ($p > 0.05$), which means that the data is distributed normally and is eligible for further analysis.

Path analysis and mediation are used to see the direction and strength of the relationship between WFC and Resilience, both directly and indirectly. Although there are some indications of data distribution that are not completely normal, the analysis can still be performed taking into account the stability of the model and the strength of the relationships between variables. This research procedure is designed to be replicated by other researchers, with clear documentation of the data collection methods, instruments used, and the analysis techniques applied. This is important to ensure the external validity and reliability of the research results, especially in the context of working mothers in the health sector who face high work pressure and complex domestic responsibilities.

Through this systematic methodological approach, the research is expected to provide an in-depth empirical picture of how Work-Family Conflict affects Resilience in working mothers, as well as make a real contribution to the development of policies and programs that support the psychological well-being of women medical personnel in Indonesia.

RESULTS

Hypothesis Test

Tabel 1. Hasil Analisa Jalur

Variabel	Z-Value	P	Information
<i>Work Family Conflict</i> → <i>Resilience</i>	6.188	<0,001	Signifikan

The results of the path analysis carried out with the help of the JASP version 19.3 program found that Work Family Conflict has a significant influence on Resilience. This is indicated by a Z-value of 6.188 with a significance value of $p < 0.001$, which indicates that this relationship is statistically significant. In other words, there is an attachment between work conflict against family (WFC) and H2 Resilience ACCEPTED.

Based on the results of the path analysis carried out using the help of the JASP version 19.3 program, important findings were obtained related to the relationship between *Work-Family Conflict* (WFC) and *Resilience* in working mothers at dr. Mohammad Zyn Sampang Hospital. The second hypothesis in this study examines whether the conflict between work demands and family responsibilities has an influence on the level of psychological resilience of individuals, which in this case is measured through the *Resilience variable*.

The test results showed that WFC exerted a significant influence on Resilience, with a Z-value of **6.188** and a **significance value of $p < 0.001$** , which was well below the threshold of statistical significance of 0.05. A high Z-value indicates that the WFC variable has a strong contribution in explaining the variation in Resilience. This means that changes in the level of work-family conflict have a real impact on changes in the level of individual resilience.

Furthermore, the very low significance value ($p < 0.001$) reinforces the belief that the relationship between the two variables is not the result of mere coincidence, but rather reflects a real and consistent correlation. In a statistical context, this means that the probability of type I error (rejecting the true zero hypothesis) is very small, so that these results can be trusted and used as a basis for decision-making or policy intervention.

These findings indicate that the higher the level of conflict felt by working mothers in managing the dual roles between work and family, the greater the challenges that must be faced in maintaining self-resilience. However, interestingly, these results also show that the pressure from WFC does not necessarily weaken Resilience, but rather becomes a trigger for individuals to activate their adaptive mechanisms. In this context, Resilience serves as a psychological response that arises when individuals are faced with situations that demand the ability to manage stress, balance emotions, and remain optimally functioning.

Theoretically, these results support the *Job Demands-Resources* (JD-R) framework, which states that high job demands can trigger stress, but if individuals have personal resources such as resilience, then the negative impact of those demands can be minimized. In practice, working mothers who experience conflicts between work and family tend to develop stronger coping strategies, such as more disciplined time management, wiser priority management, and improved ability to manage emotional stress. This shows that WFC is not only a challenge, but also an opportunity for individuals to strengthen their psychological capacity.

Thus, the second hypothesis in this study is **ACCEPTED**, because there is a statistically significant relationship between *Work-Family Conflict* and *Resilience*.

These findings make an important contribution to understanding the psychological dynamics of working mothers in the health sector, as well as the basis for the development of intervention programs that focus on strengthening resilience as the main capital in facing the pressure of dual roles. Programs such as stress management training, psychological counseling, and social support in the workplace can be effective strategies to help female medical personnel stay resilient, productive, and mentally well-being amid the complexity of professional and domestic demands.

DISCUSSION

The results of this study show that Resilience has a very significant role in bridging the negative impact of Work-Family Conflict (WFC) on the psychological well-being of working mothers at dr. Mohammad Zyn Sampang Hospital. These findings reinforce the understanding that women who juggle dual roles as medical workers and caregivers face complex pressures, but not all of these pressures lead to a decline in psychological functioning. On the other hand, individuals with a high level of resilience are able to manage these pressures adaptively, maintain emotional stability, and still carry out their responsibilities optimally. This is in line with a previous study by Chinwuba (2022) which confirmed that resilience has a protective role against the negative effects of WFC. This means that the existence of resilience is able to bridge these relationships so that it still has a positive impact on the attachment of working mothers.

In the context of a hospital environment that demands high professionalism, punctuality, and physical and mental resilience, the conflict between work and family is a real challenge. However, the results of the second hypothesis test show that WFC has a significant influence on Resilience. This means that the higher the level of role conflict faced by a working mother, the greater the need to build psychological resilience. This shows that the pressure of role conflict is not always destructive, but can be a stimulus for individuals to strengthen their mental and emotional capacities. In demanding situations, working mothers tend to develop more effective coping strategies, such as time management, adjusting expectations, and increasing flexibility in carrying out domestic and professional roles.

These findings are in line with the Job Demands-Resources (JD-R) theory, which emphasizes that personal resources such as Resilience can serve as a hedge against the negative impacts of job demands. When demands increase, individuals with resilience tend to see pressure as an overcome, not a threat. Thus, Resilience acts as an internal force that allows working mothers to stay focused, energized, and able to maintain a balance between work and family life. This resilience also serves as a psychological buffer that prevents the occurrence of emotional exhaustion, burnout, and other psychological disorders that often arise due to prolonged work pressure.

Furthermore, the results of this study also confirm that Resilience is not just a response to stress, but is an active and dynamic psychological mechanism. This resilience includes the ability to regulate emotions, think positively, have self-efficacy, and demonstrate empathy and good impulse control. In practice, working

mothers who have high resilience are able to adjust to changes in work schedules, patient demands, and family needs without losing direction or motivation. They are also better able to build healthy communication with colleagues and family members, creating a social environment that supports balance of roles. This resilience also allows working mothers to remain with clear expectations and goals, even in situations of stress and uncertainty.

The practical implications of these findings are very important for health institutions, especially in designing policies and programs that support strengthening the resilience of women medical personnel. Interventions that can be carried out include stress management training, work-life balance programs, psychological counseling, and increased social support in the workplace. With adequate support, working mothers will be better prepared to face the pressure of dual roles, maintain their mental health, and continue to provide quality health services to the community. Institutions can also develop more flexible work systems, such as adaptive working hours, leave that supports family balance, and an inclusive and empathetic work environment for women's needs.

In addition, this research opens up opportunities for further exploration of other factors that can strengthen resilience, such as social support, emotional intelligence, and an inclusive organizational culture. Further research with a longitudinal approach can also provide a deeper picture of the dynamics of resilience over time, as well as how this resilience evolves as work and family life conditions change. These findings are in line with the results of previous research by Chinwuba (2022) which stated that resilience can weaken the negative impact of WFCs. This is an important basis for the development of resilience not only to improve the psychological quality of individuals, but also to maintain the quality of services in the hospital environment. Thus, an understanding of the psychological mechanisms that support working mothers in the face of dual role pressures can be increasingly comprehensive and applicable, not only for the health sector, but also for the world of work in general. This research can also be the basis for the development of public policies that are more responsive to the needs of working women, as well as encourage the creation of a healthy, productive, and sustainable work ecosystem.

CONCLUSIONS AND RECOMMENDATIONS

Based on the results of the study entitled "The Effect of Work Family Conflict on Resilience in Working Mothers at dr. Mohammad Zyn Sampang Hospital", it can be concluded that dual roles as mothers and workers present complex challenges for women in the health sector. Conflict between work demands and family responsibilities (Work Family Conflict) is a common dynamic and has the potential to affect an individual's psychological well-being. Although the pressures of role conflict do not always have a direct negative impact, the results of the study show that Work Family Conflict has a significant influence on Resilience. This means that the higher the level of conflict faced, the greater the need to build psychological resilience as an adaptive response to such stress.

Resilience has been shown to play an important role as a protective mechanism that allows working mothers to stay focused, emotionally stable, and

able to carry out their responsibilities optimally in the midst of the pressures of two realms of life. This resilience includes the ability to manage stress, think positively, regulate emotions, and maintain a balance between professional and domestic demands. Therefore, Resilience can be seen as a key element in maintaining the well-being of working mothers in a demanding work environment.

As a practical implication, the management of dr. Mohammad Zyn Sampang Hospital is advised to develop programs that are oriented towards strengthening resilience, such as stress management training, improving coping skills, psychological counseling, and activities that support harmony between work and family. In addition, flexible and family-friendly work policies, such as adaptive work scheduling, a leave system that supports personal needs, and increased social support in the workplace, also need to be implemented to reduce the rate of Work Family Conflict and strengthen the organization's commitment to the well-being of female employees.

FURTHER STUDY

For further research, it is suggested that the scope be expanded by adding other variables such as social support, self-efficacy, and work environment conditions that also have the potential to affect the psychological resilience of working mothers. Cross-institutional research or with a longitudinal approach can also provide more comprehensive insights into the dynamics of resilience in the face of dual role pressures. With a deeper understanding, it is hoped that the intervention strategies designed can be more targeted and have a positive impact on the quality of life and productivity of women in the world of work.

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