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## WORK FAMILY CONFLICT, RECOVERY EXPERIENCE, & EMPLOYEE'S WELL BEING IN WORKING WOMEN (CASE STUDY OF NURSES IN INPATIENT DIVISION AT HOSPITAL IN BANDUNG)

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### Abstract

*Work Family Conflict (WFC) often occurs in working women. This study discusses the influence of WFC on Employee's Well Being with Recovery Experience as a moderator variable. The purpose of this study are to analyze WFC, Recovery Experience, & Employee's Well Being for working women, and to find out the influence of WFC on Employee's Well Being directly or indirectly through Experience Recovery for working women. The method used was the survey method by giving questionnaires to 30 nurses in Inpatient Division at Hospital in Bandung. This study use Partial Least Square (PLS) to analyze the relation between variables. The measurements of WFC are work-family conflict & family-work conflict. The measurements of Recovery Experience are psychological detachment from work & verbal expression of emotions. The measurement of Employee's Well Being are psychological strain & life satisfaction.*

*Keywords: work family conflict; recovery experience; employee's well-being; working women*

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### 1. Introduction

Now a days, women who work is a common things, especially in big cities. Work itself is a challenge for women, Working Women have two roles. The first role is as a mother & wife which is expected to do domestic role, such as take care of children and house. The second role is as employee which is expected to do public role, such as responsible to their task at work and work professionally. These two roles often incompatible for one another and lead working women to experience Work Family Conflict. Work Family Conflict (WFC) can be experienced by working men and women, but it has higher possibility to be experienced by working women (Sari, 2018). In Indonesia, woman is more expected to

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have feminine attribute (passive, obedient, caring, more focus on family, etc.) and prioritized doing domestic role. Woman is more appreciated if she prioritized her role as a mother and wife. This kind of value occur from past view days until now. It makes WFC often occur in working women.

WFC is a conflict between roles within oneself that occur due to pressure from work and family that are not mutually supportive or incompatible (Flippo, 2005). Demands from work and family often tug each other, so it's difficult to fulfill both roles in family & work well and become conflict. WFC is divided into two types of conflict. There are work interfering with family life (also known as work family conflict WFC) and family interfering with work life (also known as family work conflict FWC) (Frone, Russell & Cooper 1997).

The inability to balance work and family can affect the health and well-being of employees (Kinnunen, Feldt, Geurts & Pulkkinen, 2006). Employee's Well-Being can be seen from two sides, there are psychological strain and life satisfaction (Jimenez, Mayo, Vergel, Geurts, Munoz & Garrosa, 2008). Psychological strains (psychological tension) is defined as a condition when a person feels depressed internally or experiences stress. Individual struggles in balancing roles in work and family in a limited time can increase stress, fatigue, loss of performance, and decreased job satisfaction and commitment to the company (Nart & Batur, 2013). Stress that occurs in individuals on one side of life, can affect the other side of life in an unexpected way, so it can draining up stamina and end up increasing the mind tension (Pleck, Staines & Lang, 1980). WFC (WFC & FWC) also has negative correlation with employee's satisfaction in many aspects, including life satisfaction (Aryees, Fields & Luk, 1999). Life Satisfaction is a feeling when a person feels comfortable and satisfied with his/her lives, both in terms of work and family.

In order to reduce the negative effect of WFC on Employee's Well Being (EWB), moderating variable is needed. The experience of recovery (recovery experience) can be moderating variable that can affect WFC impact on EWB (Jimenez, Mayo, Vergel, Geurts, Munoz & Garrosa, 2008). Recovery Experience (RE) is defined as a relaxation process psychologically and physiologically after exerting effort at work (Geurts & Sonnentag, 2006). Individuals who experience WFC have a higher level of psychological strain when not doing recovery experience after stress work. Positive experience after work, such as relaxing and learning new things, can improve EWB (Jimenez, Mayo, Vergel, Geurts, Munoz & Garrosa, 2008). There are two types of RE that can help people to relieve stress, there are psychological detachment from work and verbal expression of emotions (Sonnentag & Fritz, 2007). Both of psychological detachment from work and verbal expression of emotions can reduce negative impact of WFC on health and wellbeing.

Recovery experience is needed by all people who work in any field, especially in medical field. Working at medical field is challenging, especially as a nurse. Nurses, especially nurses who work in Inpatient Department at Hospital, take care of patients without knowing time. From morning till morning, there are just medical actions or just assistance to patients that must be done. This is the basis of the "*shift*" system in nurses working hours, especially for nurses who work in Inpatient Department at Hospital.

Based on interviews with nurses of private hospital in Bandung (4/1/2019), There are three shifts of nurses working hours: Morning shift (6 am – 2pm), Middle shift (2pm – 10pm), Night Shift (10pm – 6am). Beside responsibility to take care the patients, nurses also to take care their families. The shift system of nurses working hours make them difficult balancing their roles as a mother & wife and as an employee, especially for nurses who have kids around 0-5 years old. Kids around 0 – 5 years old still need much attention from their mothers. Beside the nurses working hours, nurses also have challenge in giving excellent services for patients. Nurses still have to give excellent services to patients, even they are not in good condition (bad mood, sick, have problems). In order to satisfy patients, Nurses have to keep their good attitudes, even the patients show improper attitudes. Sometimes, they also get pressure from their boss (Head of Nurse or doctors). This kind of working condition lead nurses to stress and feel depress. Medical personnel are vulnerable to experience stress and decrease in health because of the high pressure at work (Jimenez, Mayo, Vergel, Geurts, Munoz & Garrosa, 2008). High workload in service business can reduce employee's motivation to work and make the employee choose to resign (Mahardiana & Thahir, 2019). Clash between family and work demands often occur in female nurses and make them have to choose to prioritized one demand over another, and it will affect their performances.

Based on interviews with one of the private hospital in Bandung (4/1/2019) it was found that the clash between family interests and work often happened to female nurses. Female nurses trapped in situations must carry out roles as nurses and mothers and wives at the same time. Cases that often occur are when a husband or child is sick, the nurse still has to work. On the one hand the nurse wants to choose to care for a sick family member. On the other hand nurses still have to go to work because they cannot take leave and cannot skip work. This situation makes nurses experience WFC.

The problem that is concluded from explanation above are:

1. Does Work Family Conflict has direct impact on Employee's Well-Being in working women?
2. Does Work Family Conflict has impact on Recovery Experience in working women?
3. Does Recovery Experience has impact on Employee's Well-Being in working women?
4. Does Work Family Conflict has indirect impact on Employee's Well-Being in women working through Recovery Experience?

The objectives of this study are:

1. Giving information, knowledge, and solution of problems to the company about WFC, RE, and EWB and the relation between those variables in working women, especially at Bandung
2. Giving information, knowledge, and solution of problems to the company about WFC, RE, and EWB and the relation between those variables in working women,

## 2. Literature Review

### 2.1. Work Family Conflict

In (Greenhaus & Beutell, 1985), WFC is a form of role conflict in internal individuals where the demands of work and family are not compatible. Job and family life are often in the opposite direction (Frone, 2000). WFC is divided into two types of conflict (Frone, Yardley & Markel, 1997), there are:

1. *Work interfering with family life*

Work interfering with family life also known as work-family conflict (WFC). WFC refers to the extent to which problems at work affect the family. WFC caused by excessive work demands and predict negative family outcomes (Sari, 2018). For example, working women come late to work because of caring her sick child.

2. *Family interfering with work life*

Family interfering with work life also known as family work conflict (FWC). FWC refers to the extent to which problems in family affect work. FWC is caused by excessive family demands and predict negative work outcomes (Sari, 2018). For example, work overtime at work, make working women have less quality time with her family.

### 2.2. Recovery Experience

Recovery Experience is the process of helping individuals after exerting effort in work, including processes in eliminating the tension experienced (Geurts & Sonnentag, 2006). There are two types of Recovery Experience (Jimenez, Mayo, Vergel, Geurts, Munoz & Garrosa, 2008):

1. *Psychological Detachment from Work*

Psychological Detachment from Work is defined as the feeling of individuals who want to stay away from work situations (Etzion, Eden & Lapidot, 1998). Not only physically far from the workplace, but also mentally involved with different activities which is not related to work (Jimenez, Mayo, Vergel, Geurts, Munoz & Garrosa, 2008). Psychological detachment from work can help individual to relieve stress.

2. *Verbal Expression of Emotion*

Verbal Expression of Emotion is defined as the ability to use words in expressing feelings (Saarni, 2000). Verbal Expression of Emotion is included in the Emotional Competence Construct. Verbal Expression of Emotion is an emotional recovery related to health (Jimenez, Mayo, Vergel, Geurts, Munoz & Garrosa, 2008). People who experience stress tend to show their emotion verbally to gathered social support (Noor, 2002).

### 2.3. Employee's Well-Being

Employees who have good health and wellbeing are assets for company. Employee's Well-Being can be seen from two sides (Jimenez, Mayo, Vergel, Geurts, Munoz & Garrosa, 2008), there are:

1. *Psychological strain*

Psychological strains also known as psychological tension. It refer to a condition when a person feels depressed internally or experience stress. Individuals who experience WFC have a higher level of psychological strain when not doing a recovery experience after working.

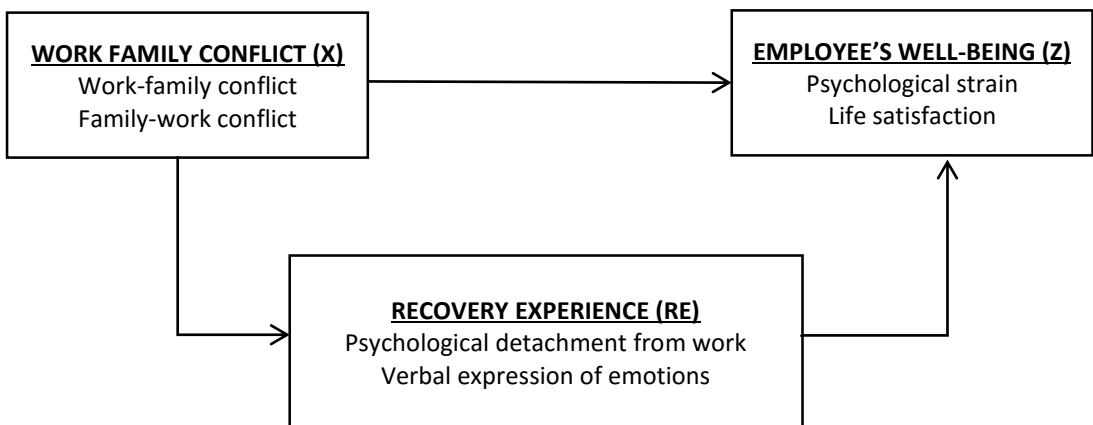
2. *Life satisfaction*

Life Satisfaction is a feeling when individual feels comfortable and satisfied with his/her life, in work, family, and the other side. Individuals who experience WFC have a lower level of life satisfaction when not doing a recovery experience.

### 2.4. Theoretical Framework

This research focuses on recovery experiences as moderator variables that can influence the relations between WFC and Employee's well-being (Jimenez, Mayo, Vergel, Geurts, Munoz & Garrosa, 2008). The research model is shown in figure below:

Figure 1 Theoretical Framework of WFC, Recovery Experience & Employee's Well-Being in Working Women



Source: Author contribution, 2019

### 3. Methodology

Empirical model of this study is:

$$Y = P_{xy} X + \epsilon_1$$

$$Z = P_{yz} Y + \epsilon_2$$

X refer to Work Family Conflict (WFC), Y refer to Recovery Experience (RE), and Z refer to

Employee’s Well-Being (EWB). Pxy is defined as path coefficient from X to Y. Pyz is defined as path coefficient Y to Z.  $\epsilon_1$  is defined as epsilon of path coefficient X to Y.  $\epsilon_2$  is defined as epsilon of path coefficient Y to Z. The data of this research are gathered by giving 30 questionnaires to nurses who served in the inpatient department at the Hospital in Bandung.

This study used Partial Least Square (PLS) to analyze the influence between WFC, Recovery Experience, and Employee’s Well-Being. PLS is a soft modelling method which is not based on measurement scale, distribution free, and needs small amount of samples (30-100 respondents) (Ghozali, 2008).

Smart PLS version 3.0 is used to process the data for this study.

**4. Results**

**4.1. Descriptive Analysis of Respondents**

a. Job Position

Table 1. Job Positions of Respondents

No	Job Position	Frequency	Percentage
1	Head of Department	1	3,33%
2	Nurse	18	60,00%
3	Midwife	9	30,00%
4	Nurse Assistant	2	6,67%
	Total	30	100%

Source: processed data, 2019

Table 1 shows that 3.33 % of respondents have positions as Head of Department. 50 % respondents have positions as Nurse. 30% respondents have positions as Midwife. 6.67 % respondents have positions as Nurse Assistant.

b. Age

Table 2 shows that 46.67% respondents are about 21 – 30 years old. 50% respondents are about 31 – 40 years old. 3.33% respondent is about 51 – 60 years old.

Table 2 Age of Respondents

No	Age (years old)	Frequency	Percentage
1	21 – 30	14	46,67%
2	31 – 40	15	50,00%
3	41 – 50	0	0,00%
4	51 – 60	1	3,33%
	Total	30	100%

Source: processed data, 2019

c. Educational Level

Table 3 Educational Level

No	Educational Level	Frequency	Percentage
1	Master Degree	0	0,00%
2	Bachelor Degree	0	0,00%
3	Diploma 4	0	0,00%
4	Diploma 3	29	96,67%
5	Senior High School	1	3,33%
	Total	30	100%

Source: processed data, 2019

Table 3 shows that 96.67% respondents have Diploma 3 Degree and 3.33 % respondent has Senior High School Degree.

d. Marriage Status

Table 4 Marriage Status

No	Marriage Status	Frequency	Percentage
1	Single	2	6,67%
2	Married	28	93,33%
3	Widow	0	0,00%
	Total	30	100%

Source: processed data, 2019

Table 4 shows that 6.67% respondents are single and 93.33% respondents are married.

e. Permission from Husband

Table 5 Permission from Husband

No	Permission	Frequency	Percentage
1	Yes	28	100,00%
2	No	0	0,00%
	Total	30	100%

Source: processed data, 2019

Tables 5 shows that 100 % respondents or all married nurses have permission to work from their husbands.

f. Reason of working

Table 6 Reason of Working

No	Reason	Frequency	Percentage
1	Improve financial condition of family	0	0,00%
2	Has social status	0	0,00%

3	Self-actualization	0	0,00%
4	Want to have your own income	29	96,67%
5	Others	1	3,33%
	Total	30	100%

Source: processed data, 2019

Table 6 shows that 96.67 % respondents work because they want to have their own income and 3.33% of respondent has other reason.

g. Amount of kid

Table 7 Amount of kid

No	Amount of kid	Frequency	Percentage
1	No kid	8	26,67%
2	1	12	40,00%
3	2	7	23,33%
4	3	1	3,33%
5	More than 3	2	6,67%
	Total	30	100%

Source: processed data, 2019

Table 7 shows that 26.67 % respondents have no kid. 40 % respondents have 1 kid. 23.33 % respondents have 2 kids. 3.33 % respondents have 3 kids. 6.67% respondents have more than 3 kids.

**4.2. Work Family Conflict (WFC), Recovery Experience (RE), and Employee’s Well Being (EWB) in Working Women**

Table 8 Coefficient of Correlation

Interval	Level of Relationship
0,00 – 0,199	Very Low
0,20 – 0,399	Low
0,40 – 0,599	Moderate
0,60 – 0,799	Strong
0,80 – 1,000	Very Strong

Source: Sugiyono, 2012:216

Score of WFC in Working Women (Nurses in Inpatient Department at Hospital in Bandung) is 2.93 which the highest score is 5. Based on the score, WFC in Working Women is relatively moderate.

Score of RE in Working Women (Nurses in Inpatient Department at Hospital in Bandung) is 2.87 which the highest score is 5. Based on the score, RE in Working Women is relatively moderate.



Score of EWB in Working Women (Nurses in Inpatient Department at Hospital in Bandung) is 2.92 which the highest score is 5. Based on the score, EWB in Working Women is relatively moderate.

**4.3. Impact of Work Family Conflict (WFC) on Employee’s Well Being (EWB) in Working Women**

The impact of WFC on EWB in Working Women can be seen from table below:

Table 9 Result of Impact WFC on EWB

Variable	Direct Impact	Standard Deviation (STDEV)	T Statistics ( O/STERR )	P Values	Conclusion	
Work Family Conflict → Employee’s Well-Being	0.520	0.168	3.092	0.004	Reject Ho	Significant

Source: processed data, 2019

The t score is 3.092 which is higher than 1.96 (t table) and the P values is 0,004 which is lower than significancy rate (0.05). It means that WFC has significant impact on EWB. Impact WFC on EWB is 52 %. WFC has negative impact on EWB. When WFC in Working Women is high, EWB in Working Women is low.

**4.4. Impact of Work Family Conflict (WFC) on Recovery Experience (RE) in Working Women**

The impact of WFC on RE in Working Women can be seen from table below:

Table 10 Result of Impact WFC on RE

Variable	Direct Impact	Standard Deviation (STDEV)	T Statistics ( O/STERR )	P Values	Conclusion	
Work Family Conflict → Recovery Experience	0.817	0.062	13.183	0.000	Reject Ho	Significant

Source: processed data, 2019

The t score is 13.183 which is higher than 1.96 (t table) and the P values is 0.000 which is lower than significancy rate (0.05). It means that WFC has significant impact on RE. Impact WFC on EWB is 81.7 %. When WFC in Working Women is high, RE in Working Women is high.

**4.5. Impact of Recovery Experience (RE) on Employee’s Well Being (EWB) in Working Women**

The impact RE on EWB in Working Women can be seen from table below:

Table 11 Result of Impact RE on EWB

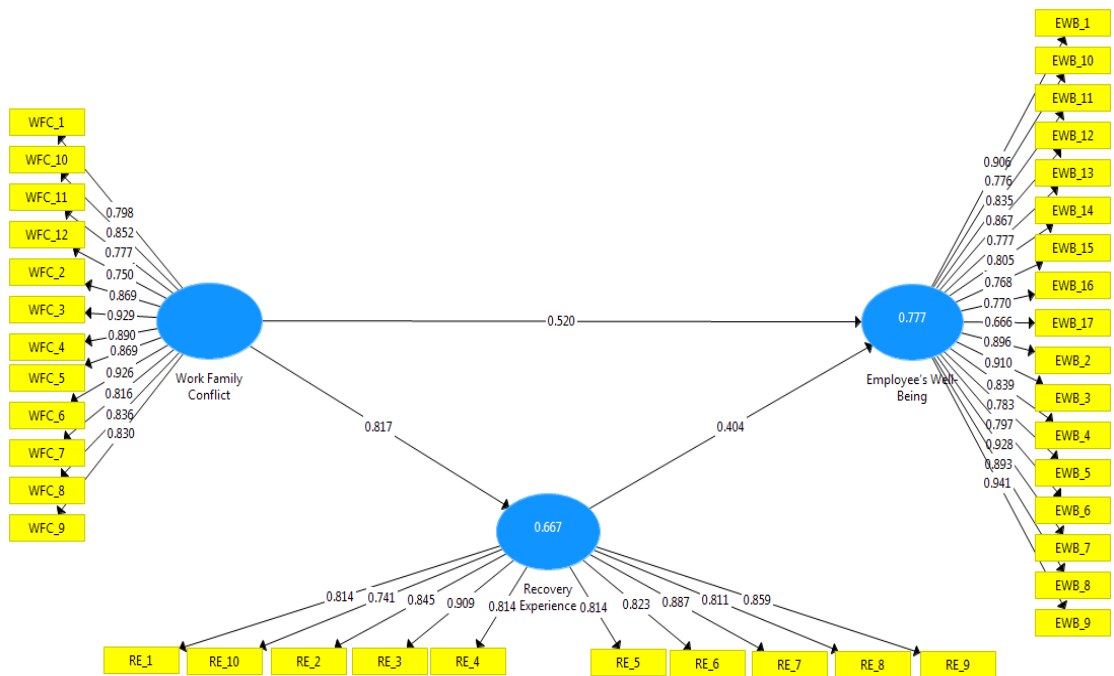
Variable	Direct Impact	Standard Deviation (STDEV)	T Statistics ( O/STERR )	P Values	Conclusion
Recovery Experience → Employee's Well-Being	0.404	0.168	2.413	0.022	Reject Ho Significant

Source: processed data, 2019

The t score is 2.413 which is higher than 1.96 (t table) and the P values is 0.022 which is lower than significance rate (0.05). It means that RE has significant impact on EWB. Impact WFC on EWB is 40.4 %. When RE in Working Women is high, EWB in Working Women is high. When RE in Working Women is high, EWB in Working Women is high.

**4.6. Impact of Work Family Conflict (WFC) on Employee's Well Being (EWB) through Recovery Experience (RE) in Working Women**

Figure 2 Output PLS Algorithm



Source: processed data, 2019

The t score is 2.262 which is higher than 1.96 (t table) and the P values is 0.031 which is lower than significance rate (0.05). It means that WFC has significant impact on EWB through RE. Impact WFC on EWB through RE is 33 % %. When WFC in Working Women is high, RE in Working Women is also high, and EWB in Working Women is low.

Table 12 Result of Impact RE on EWB

Variable	Direct Impact	Standard Deviation (STDEV)	T Statistics ( O/STERR )	P Values	Conclusion	
Work Family Conflict → Recovery Experience → Employee's Well-Being	0.330	0.164	2.262	0.031	Reject Ho	Significant

Source: processed data, 2019

## 5. Discussion and Conclusions

### 5.1. Discussion

#### 5.1.1. Impact of Work Family Conflict (WFC) on Employee's Well Being (EWB) in Working Women

Based on table 9, WFC shows significant and negative impact on EWB. Impact WFC on EWB is 52%. It means that EWB in working women will be low, if WFC is high. Result of this study is supported by (Jimenez, Mayo, Vergel, Geurts, Munoz & Garrosa, 2008) who said WFC has significant impact on EWB. It is because:

1. Most of respondents, about 73.333%, are married couples who have kids. 46.67% of respondents are young married couple (21 -30 years old). In the early age of marriage, both husband and wife are still adjusting from single life to married life. This condition make working women have two roles, as an employee (nurse) and as a mother & wife. As a mother and wife, working women are expected to take care of the family and domestic tasks. On the other side, as employee, working women are expected to be professional at work, loyal to company, and do their task well. The two role demands are often incompatible each other and lead them to experience WFC. WFC is an inter-role conflict in which role demands from family and work are mutually incompatible in some respect (Sari, 2018).
2. Most of respondents, about 40 % have 1 kid. The age of the kids are around 0 – 5 years old (Based on interview with some of nurses who work in Inpatient Department at Hozpital in Bandung, 4/1/2019). In the early age, kids still need high attention from their mother. It lead working women (nurse) to experience WFC. There are two types of WFC, there are work interfering with family life (also known as work-family conflict – WFC) and family interfering with work life (also known as family work conflict (FWC) (Sari, 2018). The working woman (nurse) prefer to be absent at work when her kid is sick and this is consider as work interfering with family life. When work is hectic, the working woman (nurse) prefer to reschedule family dinner or spend less time with her family to work overtime. It is consider as family interfering with work life.

3. Balancing the incompatible roles, as an employee and as a mother & wife, make working women experience psychological strain. Psychological strain make working women experience stress. Stress can lead working women to feel unsatisfied with their lives. High psychological strain and low life satisfaction can reduce EWB. Two types of conflict, WFC and FWC, have adverse consequences on health and well-being (Jimenez, Mayo, Vergel, Geurts, Munoz & Garrosa, 2008).

### **5.1.2. Impact of Work Family Conflict (WFC) on Recovery Experience (RE) in Working Women**

Based on table 10, WFC shows significant and positive impact on RE. Impact WFC on EWB is 81.7 %. It means that RE in working women will be high, if WFC is high. Result of this study is supported by (Jimenez, Mayo, Vergel, Geurts, Munoz, & Garrosa, 2008) who said WFC has significant impact on RE. It is because:

1. Most of respondents are married couples (93.33%) and have kids. About 40% of respondents have 1 kid which is 0 – 5 years old (based on interview with some of respondents, 4/1/2019). About 23.33% of respondents have 2 kids. About 3.33% of respondents have 3 kids and 6.67% of respondents have more than 3 kids. Based on interview with some of respondents (4/1/2019), they said that balancing work and family life is quite stressful and make them feel exhausted. The “shift” system of work time often make them difficult to have quality time with family. Pressure at work sometimes make working women experience “bad mood” and show their emotion to their family. It can be consider as family interfering with work life (family-work conflict - FWC). On the other side, problems in family (with husbands, kids, or parents) can affect working women’s behavior and performance at work. It can be consider as work interfering with family life (work-family conflict – WFC). In order to reduce the negative impact of FWC and WFC, the working women need to recovery. Recovery is necessary to avoid the negative effects that related to stressful conditions (Eden, 2001).
2. This study focus on 2 types of recovery, there are psychological detachment from work and verbal expression of emotion. Based on interview with some respondents (4/1/2019), working women (the nurses) like to do relaxing activities after work such as doing sport, shopping, etc. The Hospital also provide the nurses with gathering activities to recreation place outside Bandung to help the nurses reduce their stress. These kind activities are considered as psychological detachment from work. It help them to feel fresh after work. It supported by (Sonnentag & Fritz, 2007) who said that psychological detachment from work helps people to recover from stress and reduce negative effect of stress on health and well-being. Based on interview with some respondents (4/1/2019), working women like to express their feeling on social media and sharing their problems to theirs friends or families to get social support. These activities are considered as verbal expression of emotion. It help them to feel relieved. The negative effect of WFC is higher among people who don’t have social support (Noor, 2002).

### ***5.1.3. Impact of Recovery Experience (RE) on Employee's Well Being (EWB) in Working Women***

Based on table 11, RE shows significant and positive impact on EWB. Impact WFC on EWB is 40.4 %. EWB in working women will be high, if RE is high. Result of this study is supported by (Jimenez, Mayo, Vergel, Geurts, Munoz, & Garrosa, 2008) who said RE has significant impact on EWB. It is because the respondents work at a Hospital that has supportive environment to improve EWB. Even the respondents have moderate WFC and experience stress, the Hospital provide them with fun activities outside the city to refresh them from work. They also often having lunch together and sharing problems. Sometimes, they also express their emotions verbally on social media. These activities are considered as Recovery Experience. This Recovery Experience make them feel relieved, get support and even solutions for their problems. It is supported by (Jimenez, Mayo, Vergel, Geurts, Munoz & Garrosa, 2008) who said recovery experience, such as psychological detachment from work and verbal expression of emotion, are considered as personal resource to reduce negative impact of wfc and fwc on well-being (especially on psychological strain and life satisfaction). Recovery is an explanatory mechanism between acute stress and chronic health problems (Geurts & Sonnentag, 2006).

### ***5.1.4. Impact of Work Family Conflict (WFC) on Employee's Well Being (EWB) through Recovery Experience (RE) in Working Women***

Based on table 12, WFC shows significant impact on EWB through RE. Impact WFC on EWB through RE is 33 %. When WFC in Working Women is high, RE in Working Women is also high, and EWB in Working Women is low.

The direct impact of WFC on EWB amounted to 52% which is a moderate impact, but if there is RE (as moderating variable) between WFC and EWB become 33% which is a weak impact. It means RE influence the relationship between WFC and EWB, but the influence is low. RE reduce the impact of WFC on EWB about 19% (from 52% minus 33%). Working women tend to experience WFC and lead them to experience stress. The stress can affect their Well-being. In order to keep their Well-Being, the working women need to recovery. This study focus on two kind of recovery, there are psychological detachment from work and verbal expression of emotion. Psychological detachment from work is one of effective strategy to reduce the negative consequences of WFC (Jimenez, Mayo, Vergel, Geurts, Munoz & Garrosa, 2008). With psychological detachment from work, working women feel refresh from their work, and then reduce psychological strain & improve life satisfaction. This study focus on psychological strain and life satisfaction to measure EWB. Beside the psychological detachment from work, verbal expression of emotions also help to reduce psychological strain. By showing their emotion verbally through social media and sharing their feelings to their friends or families, respondents can ease their stress. In the WGC context, verbal expression of emotion is an important personal resource that may buffer the negative impact of WFC on EWB. From this study we can conclude that RE is buffering mechanism in the relation between WFC and EWB. With high level of RE, EWB in working women can be improved.

## 5.2. Conclusion

This study shows that Work Family Conflict (WFC), Recovery Experience (RE), and Employee's Well-Being (EWB) are at moderate level in working women in Bandung, especially in people who work in medical field with high pressure of work such as in inpatient department. WFC has negative and moderate impact on EWB directly. WFC has positive and very strong impact on RE. RE has positive and moderate impact on EWB. WFC has negative and low indirect impact on EWB through RE. This study shows that RE is a buffering mechanism which reduce the negative effect of WFC on EWB (Noor, 2002).

By Recovery Experience such as psychological detachment from work and verbal expression of emotion, impact of Work Family Conflict (work-family conflict and family work conflict) on Employee's Well Being (psychological strain and life satisfaction) can be reduced. Work in medical field by shift system of work hours can develop WFC, especially for working women (Jimenez, Mayo, Vergel, Geurts, Munoz, & Garrosa, 2008). It is because balancing their role as employee and mother & wife is quite hard. From this study, it can be concluded that Company (Hospital) need to pay attention to it's workers recovery process from work. Company (Hospital) need to make certain Recovery Program. The Hospital where respondents work already made gathering activity by visiting recreation place outside the city to help it's worker to recovery from work. It held once in a year. The Company (Hospital) should add more fun activities in order to improve RE of it's workers from moderate to high, so the EWB will be improve too. It will be better if families of the workers can be participated on the fun activities that held by the company (hospital).

For the next research, it will be better for this study to use greater amount of respondents. The respondents also could from other field of work, such as working women at company, or women entrepreneur, etc. For further research, job performance and family satisfaction can be included in research about Work Family Conflict.

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