

# Marital Satisfaction and Job Commitment of Nigerian Nurses: Implications for Family Value System

## ABSTRACT.

**Aim:** Work and family domains are interdependent. Job commitment is very important for both employees and employers. The study aims to examine the implications of marital satisfaction and job commitment to the Nigerian family value system.

**Study Design:** Cross-sectional survey design.

**Place and Duration of Study:** Redeemer's University Osun State, South-West Nigeria.

**Methodology:** A total of 259 nurses (50 males and 209 females) purposively selected from two general hospitals in Osun State Nigeria responded to Enrich Marital Satisfaction Scale (EMSS) and Organisational Commitment Scale (OCS). Descriptive and inferential statistics were used in data analysis.

**Results:** Age was observed to have a significant inverse relationship with job commitment and identification. Length of marriage has a significant inverse relationship with job identification. Marital satisfaction ( $R^2 = .073$ ,  $p = .005$ ), age ( $R^2 = .022$ ,  $p = .015$ ), and length of marriage ( $R^2 = .001$ ,  $p = .035$ ) were found to significantly predict job commitment. Also job status had significant influence on identification ( $t(256) = 2.35$ ,  $p = .019$ ) and job commitment ( $t(257) = 2.49$ ,  $p = .014$ ).

**Conclusion:** Authors concluded that age is inversely related to job commitment as well as job identification, that marital satisfaction, age, and length of marriage are significant independent predictors of job commitment among nurses. For positive job commitment appreciation of family value systems and employees, marital satisfaction should be among employers' top priority. Organisational policies that promote work-life balance should be encouraged especially in healthcare institutions.

**Keywords:** Marital satisfaction, job commitment, family values, nurses.

## 1. INTRODUCTION

Over the decades, research on the concept of job commitment has attracted the attention of researchers from various disciplines in management and behavioural sciences including psychology. Job commitment is the individual's psychological attachment to the organisation which refers to the relative strength of an individual's identification with, and involvement in an organisation [1]. Job commitment is characterized by a strong belief in, and acceptance of the organisation's goals and values, a willingness to exert considerable effort on behalf of the organisation, and a strong desire to maintain membership in the organisation [2] and includes interactions related to affective behaviors including: pay, promotion, supervision, fringe benefits of employment, contingent rewards, operating conditions, coworkers, nature of work, and communication [3, 4].

Employee level of commitment is an important factor that determines employees' level of performance and overall organisational business outcomes such as profitability, customer's satisfaction, company growth and productivity [5] and this, in turn, determines their level of contribution to the overall success of the organisation and plays a crucial role in improving competitive power of the firm in the global market. People who are highly committed to their work-place tend to expand their effort or work extra hours to ensure organisational success [6] and avoid any kind of counterproductive work behavior that is against the interest of the organisation [2].

One of the main objectives of hospitals is to provide adequate and quality services to the patient. The role of the nurses in achieving this objective cannot be overemphasized as they shoulder most of the work in hospitals. Hence the low level of commitment among nurses may have various forms of negative consequences on their attitude towards work, on the level of patients' satisfaction, patients' survival, overall quality of service delivery and hospital reputation. Note-worthy is the fact that the job commitment

of nurses', like those of other professionals, hinges on several organisational and non-organisational factors. Of concern to this study is the highly important non-organisational factor of marital satisfaction. The ability of a nurse to balance work-family responsibility is an important determinant of their degree of commitment to hospital work. A nurse who is experiencing marital conflict and dissatisfaction may find it difficult to discharge her duties **effectively and effectively [7]. Studies also observe** that the match between work conditions and the quality of marital relationship was positively related to relations with parents. In a related study [8] affirmed that there is a negative relationship between work pressure and marital life; in other words, when an individual feels more pressure, his/her marital relationship decreases. Couples with the same attitude toward marital and job satisfaction suffered from the same level of spouse's stress [9]. Also, marital satisfaction has been found to lead to good family strength and the ability of a couple to deal with problems properly and be protected from damages [10]. Investing the relationship between marital satisfaction and job satisfaction on the long term, Rogers and May [11] observed that job satisfaction and marital satisfaction were significantly correlated in long term. They also observed that an increase in marital satisfaction was significantly related to an increase in job satisfaction and that there was a negative relationship between marital disorders and job satisfaction on both women and men [11].

Various studies have been conducted on the concept of job commitment [12, 13] there are however few studies on Nigerian health personnel in general and nurses in particular that have taken a cursory look into the link between marital satisfaction and job commitment. To fill this gap, this study examines the predictive influence of marital satisfaction and some demographic variables on the job commitment levels of selected nurses in Nigeria. The implications of marital satisfaction and job commitment of Nigerian nurses on the family value system of the nurses were also discussed in the study.

## 1.1 Research Questions

1. What is the correlation between age, length of the marriage, marital satisfaction and job commitment among Nigerian nurses?
2. To what extent will marital satisfaction predict job commitment among nurses?
3. To what degree does the duration of marriage predict job commitment among nurses?
4. To what extent does age predict job commitment among Nigerian nurses?
5. What is the influence of job status on job commitment among Nigerian nurses?

## 2. MATERIAL AND METHODS

### 2.1 Participants

A cross-sectional survey design was employed in the study. Samples were drawn from the two state-owned hospitals in Oshogbo, which are State Specialist Hospital, and Ladoke Akintola University of Technology Teaching Hospital. The total population of the nurses in the selected hospitals is less than 1,000. Purposive sampling technique was used in selecting the sample. A total of 150 questionnaires were administered to nurses in each of the two hospitals. For good representativeness, nurses were grouped into two categories (Nursing Officers II and I, and Senior Nurse Officers and above). 75 copies of the questionnaires were administered to each of the two categories in each hospital. Overall 259 of the returned questionnaires were properly responded to and were finally used for the study.

### 2.2 Measures

Two research instruments were used in data collection. The Enrich Marital Satisfaction Scale (EMSS) adopted from Blaine and David [14], a 15-item scale that seeks information on respondents' general level of satisfaction in their marital life. It consists of two domains Idealistic distortion and Communication & Sexual relationship. Scores of responses are based on a 5-point Likert scale ranging from strongly agree to strongly disagree, authors reported a Cronbach alpha of  $r = 0.86$ , and test-retest reliability over a period of four weeks **was  $r = 0.86$** . Looking at concurrent validity, when correlating with one-item measure of satisfaction with a sample of 7261, the coefficient was 0.71 for men and .77 for women.

Organisational Commitment Scale (OCS) by Buchanan [15] was used to assess job commitment among respondents. This 23-item self-administered instrument consists of the following three domains: job

identification, job involvement, and job loyalty. Scores of responses are based on a Likert scale of 1-7 point continuums. The author reported a reliability coefficient of  $r = 0.86$ , 0.84, 0.92 and 0.94 for identification, involvement, loyalty and overall commitment.

### Data analysis

Collected data were analyzed using the Statistical Package of Social Sciences (SPSS Pack 23). Descriptive statistics (frequency counts and percentages) were used to organize, summarize and describe the demographic characteristics of respondents, while inferential statistics (independent sample t-Test, Pearson Moment Correlation Analysis, and Linear Regression Analysis) was employed to test the hypotheses.

## 3 RESULTS

### 3.1 Demographic characteristics of the participants

The summary of the participant's socio-demographic data showed that the male respondents account for 50 (19.3%) of the total participants while females account for 209 (80.7%). In terms of religious affiliation, it is observed that 159 (61.4%) of the total respondents are affiliated with Christianity religion while 100 (38.6%) are of Islamic affiliation. Furthermore, respondent job status indicates that 142 (54.8%) are nursing officer II, and I while 117 (45.2%) are senior nurse officer and above. Respondents' age distribution shows that 31(12.0%) of the total respondents are within 20-29 years old, 104 (40.2%) are within 30-39 years, 88 (34.0%) are within 40-49 years old while 36 (13.9%) are within 50-60 years old. Finally, type of marriage shows that 8(3.1%) report court wedding, 47(18.1%) claim registry, 23 (8.9%) report traditional, 103(39.8%) report church wedding while 78 (30.1%) report Muslim wedding.

**Table 1: Correlation matrix showing the relationship among age, length of marriage marital satisfaction and job commitment**

	Variables	A	B	C	D	E	F	G	H	I
A	Age	1								
B	Length of marriage	.66**	1							
C	Idealistic	.04	.04	1						
D	Communication	.05	.09	.60**	1					
E	Marital satisfaction	.05	.09	.59**	1.00**	1				
F	Identification	-.17**	-.14*	-.26**	-.27*	-.26**	1			
G	Job involvement	-.08	-.12	-.12**	-.11*	-.11*	.41**	1		
H	Loyalty	-.05	.012	-.14*	-.19**	-.19**	.36**	.22**	1	
I	Commitment	-.15*	-.10	-.25**	-.23**	-.23**	.76**	.64**	.56**	1

[\*Correlation is significant at 0.01 (2-tailed), \*\* = Correlation is significant at 0.05 (2 tailed)

Table 1 shows that age of nurses has significant inverse relationship with job commitment ( $r = -.15$ ,  $p < 0.05$ ) and identification dimension of job commitment ( $r = -.17$ ,  $p < 0.05$ ). Furthermore, the length of marriage did not significantly related to overall job commitment ( $r = -.10$ ,  $p > 0.05$ ), however it was found to have significant inverse relationship with identification dimension of job commitment ( $r = -.14$ ,  $p < 0.05$ ). Marital satisfaction is found to be negatively correlated with commitment ( $r = -.23$ ,  $p < 0.05$ ). Also idealistic ( $r = -.25$ ,  $p < 0.05$ ) and communication ( $r = -.23$ ,  $p < 0.05$ ) are inversely related to job commitment among nurses.

**Hypothesis 1: Marital satisfaction will significantly predict job commitment among Nigerian nurses**

A multiple regression analysis was employed to test the hypothesis; respondent composites scores on two dimensions of marital satisfaction (idealistic distortion and communication) is the predictor variable while job commitment is the dependent variable. The analysis result is presented in Table 2 below.

**Table 2: Multiple regression analysis of job commitment by marital satisfaction**

	B	$\beta$	t	sig	$R^2$	F	p
(Constant)	99.81		42.46	.000			
Idealistic distortion	-.15	-.21	-1.90	.058	.073	6.72	.005
Communication	1.75	2.07	.48	.635			

Table 2 shows that marital satisfaction significantly predicts job commitment ( $R^2=.073, p=.005$ ). A further examination from the table shows that marital satisfaction explains a 7.3% variation in job commitment. It is also observed that none of each dimension of marital satisfaction independently predicts job commitment.

**Hypothesis 2: Age will significantly predict job commitment among nurses**

A linear regression analysis was employed to test the hypothesis. Respondents' composite score on their age is the predictor variable while job commitment is the outcome variable. The analysis result is presented in Table 3 below.

**Table 3: Linear regression of age on job commitment**

	B	$\beta$	t	sig	$R^2$	F	p
(Constant)	102.94		24.89	.000			
Age	-.24	-.15	-2.41	.017	.022	5.79	.015

The analysis of the result in Table 3 shows that age significantly predicts job commitment ( $R^2= .022, p=.015$ ). The analysis result shows that age accounts for 2.2% variation in job commitment. The finding shows that among nurses, age is a significant predictor of job commitment.

**Hypothesis 3: Length of marriage will significantly predict job commitment among the participants**

A linear regression analysis was employed to test the hypothesis; respondents' composite score on the length of marriage is the predictor variable while job commitment is outcome variable. The analysis result is presented in Table 4 below.

**Table 4: Linear regression analysis of job commitment by the length of marriage**

	B	$\beta$	t	sig	$R^2$	F	p
(Constant)	95.276		45.649	.000			
Length of Marriage	-.218	-.097	-1.491	.014	.001	2.223	.035

Table 4 shows that length of marriage significantly predicts job commitment ( $R^2 = .001, p= .035$ ). It is observed that a 1% variance in job commitment is accounted for by the length of marriage. The finding shows that among nurses, length of marriage has a significant influence on job commitment.

**Hypothesis 4: Job status will significantly influence job commitment among the nurses.**

The study employed an independent sample t-test to analyze the data and test the hypothesis; the level of significance is set at 0.05%. The analysis procedure involves comparing the mean score of nurse officers II and I and those of their senior counterparts on their job commitment level (Identification, Job

involvement, Loyalty, and Commitment); higher score on this domain indicate higher job commitment, the analysis result is presented in Table 5.

**Table 5: Independent sample t-test showing the influence of job status on job commitment**

Variables		N	$\bar{x}$	SD	t	p
Identification	Nurse Officers II and I	142	25.53	9.47	2.352	.019
	Senior Nurse Officer and above	117	23.03	7.65		
Job Involvement	Nurse Officers II and I	142	26.77	6.48	0.543	.588
	Senior Nurse Officer and above	117	26.35	5.98		
Loyalty	Nurse Officers II and I	142	44.17	7.63	1.897	.059
	Senior Nurse Officer and above	117	42.24	8.74		
Commitment	Nurse Officers II and I	142	95.96	18.32	2.487	.014
	Senior Nurse Officer and above	117	90.24	18.53		

The t-test scores showed that there were 142 Nurse Officers II and I category and 117 Senior Nurse Officer and above category. Table 5 revealed that job status has a significant influence on identification dimension of job commitment ( $t(257) = 2.352, p = .019$ ), as well as on composite job commitment score ( $t(257) = 2.487, p = .014$ ) among the participants. It is observed that Nurse Officers II and I ( $mean=25.53, SD=9.47$ ) obtained a significantly higher mean ( $\pm$  SD) score of job commitment (identification) than Senior Nurses ( $mean=23.03, SD=7.65$ ). Furthermore, senior nurses obtain insignificant different level of mean ( $\pm$  SD) scores on Job involvement ( $mean=26.35, SD=5.98$ ) as their junior ( $mean =26.77, SD=6.48$ ) counterparts ( $t(257) = 0.543, p= .588$ ). It was also observed that Nurse Officers II and I obtain similar mean ( $\pm$  SD) scores on Job loyalty ( $mean =44.17, SD=7.63$ ) with their senior counterparts ( $mean = 42.24, SD=8.74$ ) ( $t(257) = 1.897, p= .059$ ). Finally, Nurse Officers II and I ( $mean = 95.96, SD=18.32$ ) also obtained a significantly higher mean ( $\pm$  SD) score on job commitment than the senior nurse officers and above ( $mean =90.24, SD=18.53$ ). It is therefore concluded that job status has a significant influence on job commitment among Nigerian nurses.

#### 4. DISCUSSIONS

The result of the first hypothesis showed that marital satisfaction significantly predicts overall job commitment. This research finding is in contrast with the study of Uzonwanne [16] who examined the relationship between marital distress and job involvement among employees in Lagos Nigerian Airbase and reported that marital satisfaction is positively correlated with job involvement among employees. According to him, employees experience less psychological distress and therefore experience a higher level of work-life balance. In a study carried out on nurses and doctors in Turkey, Anafarta [17] found a significant negative relationship between work-family conflict and job satisfaction. He concluded that when work causes difficulties in fulfilling family responsibilities, the individual gets lower satisfaction from work. The finding in this study is also consistent with the findings of Onuoha and Idemudia [18] and some other related literature [19, 20, 21, 22].

The result further revealed that age is a significant predictor of job commitment among nurses. This finding supports previous findings [6, 12, 23, 24] who affirmed the relationship between age and job commitment. The result of further analysis implied that as the age of nurses increased, their commitment to work reduced. Salami [12] in a study on a Nigerian sample also found a significant positive relationship between age and organisational commitment. Pourghaz, Tamini & Karamad [25] in an Iranian sample found that affective job commitment of employees' age category 21 - 28 years were higher than those in the age category 29 - 39 years old and 40 years and upper. In other words, younger employees were found to be more committed to their jobs than their older counterparts.

Furthermore, the length of marriage was found to significantly predict job commitment. The findings revealed that the higher the length of a marriage, the lower the commitment, as the length of marriage significantly predicts job commitment among nurses. Previous researches also show that employees who are married showed more commitment to their organisations compared to single employees [24]. Salami [12] found that the marital status of employees significantly predicted organisational commitment, suggesting that individual workers who are married are much committed than single individuals. The result further revealed that nurse officers II and I displayed a higher level of job identification than senior nurses counterparts. Observations from this present study also suggest that nurse officers II and I display a higher level of loyalty than their senior counterparts this further supports finding among a Nigerian sample [12] Iranian study [25] as well as other related studies [6, 23, 24].

#### **4.1 Implications of Findings on Family Value System.**

The findings of this study exposed salient issues that have significant implications on the family value system. Nurses reported that marital satisfaction negatively predicts job commitment, further analysis shows that the more the job commitment (identification, involvement, and loyalty) the lesser the marital satisfaction among nurses. This research finding suggests that commitment to the job is at the expense of family life. To substantiate this, it is further observed that as the age of nurses increases their commitment to work reduces. This suggests that younger nurses perform their responsibilities at the world of work more than their responsibilities to the family. The implication of these among others is that the family value systems which include work play and love, handed down from generation to generation are gradually being eroded. The demand at the place of work which is necessitated by the current changes and dynamism of the society may require keeping more than one job or spending extra time at work. According to Trachtenberg, Anderson, and Sabatelli [26] work and family should not be seen as two separate domains but as highly interdependent. Boyar, Maertz, Mosley, and Carr [27]; Kim, Leong and Lee [28] also concluded that long working hours (a reflection of job commitment) duty and heavy workloads (often experienced by nurses) have a direct influence on roles and responsibilities in the home. The more the time spent at work the lesser the time for family and the lesser the intimacy and communication between spouses or with children. The implication of this is that there will be weaker bounds at the home front due to lesser time for family, play, love, and work.

In addition to this length of marriage was found to negatively predict job commitment, showing that the longer the length of marriage, the lower the commitment. Consequent to this research finding it can be concluded that those with a lesser the length of marriage are more committed to their jobs at the expense of the family. The finding that Nurse Officers II and I display a higher level of job identification than senior nurses is suggestive of the fact that younger career nurses attribute more importance to their jobs than their family lives. Unlike most of the senior colleagues who are more experienced and thus better established at work who also have the juniors officers at their beck and call, it is of no doubt that junior employees put in more effort and time in other to carve a notch for themselves in their chosen career and become more established in their profession. Hence the effective balance between the work and family domains among this group [29] is jettisoned. This imbalance and the subsequent negative resultant effect on family value system could be attributed to an increase in some social vices such as divorce rates among young couples, single-parent families, maladjusted and disgruntled children and youths, antisocial and delinquent behaviors and several other issues that stem from dysfunctional families and failed family value system.

#### **5. CONCLUSIONS AND RECOMMENDATIONS.**

Based on the findings of this present study, it could be concluded that as age increases, identification with a job as well as job commitment increases. Also, the length of a marriage is negatively correlated with job identification among nurses. Marital satisfaction of nurses is a significant predictor of their work commitment. Socio-demographic factors such as age and length of marriage are significant predictors of organisational commitment. Job status also has a significant influence on job commitment. However job status does not significantly influence job involvement and job loyalty.

Based on the findings of this study, it is recommended that additional research that can identify individual nurses whose marriage and family life have been adversely impacted by the work activities should be

carried out by health care institutions so that family therapy sessions can be organized for them. Such therapies can help to remedy disrupted family values. Also, family-friendly policies that entrench favorable work-life balance should be formulated. This will encourage better work attitude as employees will feel cared for by the organisation. Health institutions should ensure a conducive and well-equipped working environment and should be adequately staffed to reduce excess workload and attendant work stress as nurses are required to stay longer at work while their roles at the home domain suffer. These measures, we believe will positively affect the job commitment of the nurses.

## 6. LIMITATIONS

The study sampled only 259 nurses in Osun State south-western Nigeria, hence limiting the generalizability of results. Also, only nurses who were on their duty posts and willing complete the questionnaires participated in this study.

## ETHICAL CONSIDERATION

Ethical approval for conducting research was sought from the Internal Ethics Research Board of Redeemer's University, Ede, Osun State Nigeria. Additionally, ethical approval was obtained from the State Specialist Hospital, Oshogbo Nigeria, before the commencement of instrument administration to the nurses. Also, the Nigerian National Code for Health Research Ethics online training program, of the West African Bioethics Training Program and the National Health Research Ethics Committee of Nigeria, was taken and a certificate of completion was issued.

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