Birjand University of Medical Sciences

Journal of Surgery and Trauma

Orginal Article

The effects of applying time management skills on work-family conflict and work-family enrichment in pre-hospital emergency technicians

Hossein Ebrahimiavval[1], Maryam Nakhaei[2], Gholam Reza Sharifzadeh[3], Zahra Danaei[4], Seyyed Abolfazl Vagharseyyedin[5]

[1] MSc in Emergency Nursing, Department of Nursing, Faculty of Nursing and Midwifery, Birjand University of Medical Sciences, Birjand, Iran

[2] Assistant Professor, Department of Nursing, Faculty of Nursing and Midwifery, Birjand University of Medical Sciences, Birjand, Iran

[3] Assistant Professor of Epidemiology, Social Determinants of Health Research Center, Birjand University of Medical Sciences, Birjand, Iran

[4] Ph.D. in General Psychology, Counseling, and Mental Health, Birjand University of Medical Sciences, Birjand, Iran

[5] Associate Professor, Department of Nursing, Faculty of Nursing and Midwifery, Birjand University of Medical Sciences, Birjand, Iran

Corresponding Author:
Tel: +98915362605
Email: waghars@bums.ac.ir

[Downloaded from jsurgery.bums.ac.ir on 2026-11-01]

[DOI: 10.32592/jsurgery.2022.10.2.102]

Abstract

Introduction: Work-family conflict is a common problem among pre-hospital emergency technicians. The present study investigates the effects of applying time management skills on family-work conflict and work-family enrichment in pre-hospital emergency technicians.

Methods: In this quasi-experimental study, eight emergency bases located in Birjand, Iran, were divided into two blocks: block A and block B (4 bases in each block). The two blocks were then randomly assigned to intervention and control groups, and 30 participants were selected from each block. Participants in both groups completed a demographic form, the work-family conflict scale, and the work-family enrichment scale. An eight-hour workshop on time management was held in one day for the intervention group. Immediately after the intervention and one month later, the two groups completed the study instruments. Data were entered into SPSS (version 19) for analysis. The independent t-test, repeated measures analysis of variance, and Bonferroni's post hoc test were applied for statistical data analysis. A P-value of less than 0.05 was considered statistically significant.

Results: Regarding work-family conflict, family-work conflict, and total conflict, there was significantly more improvement from before the intervention to one month after the intervention in the intervention group compared to the control group ($P<0.001$). Improvement in work-family enrichment, family-work enrichment, and total work-family enrichment from before intervention to immediately after it in the intervention group was higher than in the control group ($P<0.001$). In the intervention group, family-work enrichment and work-family enrichment improvement from before intervention to one month after intervention were significantly higher than in the control group ($P<0.001$).

Conclusion: Applying time management skills is an effective tool to improve work-family conflict and work-family enrichment in pre-hospital emergency technicians.

Keywords: Emergency Medical Services, Time Management, Work-Life

Citation: Ebrahimiavval H, Nakhaei M, Sharifzadeh GH.R, Danaei Z, Vagharseyyedin S.A.The Effects of Applying Time Management Skills on Work-family Conflict and Work-family Enrichment in Pre-hospital Emergency Technicians. J Surg Trauma.2022;10(2):61-70.

Received: December 27, 2021 ***Revised: February 23, 2022*** ***Accepted: April 4, 2022***

Introduction

While providing pre-hospital emergency medical care, pre-hospital emergency technicians are exposed to many unpredictable threats and stressors. Therefore, they experience much stress (1). In addition to pre-hospital emergency technicians, their families are also affected by such pressures (2). Moreover, difficult working conditions, such as long working hours, can negatively influence the family life of pre-hospital emergency technicians (1). The work shift duration for Iranian pre-hospital emergency technicians is 24/48, in which personnel work for a full 24 hours followed by 48 hours off. The other shift pattern is 48/24 (48 hours on-site and 24 hours off). Furthermore, a combination of both patterns may be applied.

All the conditions mentioned above can lead to work-family conflict, a common problem pre-hospital emergency technicians face (3). Work-family conflict is defined as a condition in which work duties spill over to the family side and vice versa (4). Work-family conflict is divided into two subtypes: work-family conflict and family-work conflict. Work-family conflicts occur when job tasks take up a person's time and energy, reducing the individual's ability to play a family role. In contrast, family-work conflicts occur when family responsibilities interfere with the proper and timely completion of job tasks. (4-6). Leaving intentions, poor self-rated health, and depression have been linked with high levels of work-family conflict (7).

Notably, research on the work-family conflict among pre-hospital emergency personnel is quite scarce. One of the few studies conducted in Iran has reported a moderately high level of work-family conflict among the majority of pre-hospital emergency personnel (the mean score of work-family conflict was 55.11 out of a possible 74) (5). In another study performed by Koohsari et al. (2021), a sample of 150 pre-hospital emergency staff reported a moderate level of burnout and secondary traumatic stress (8). One can assume that these problems may negatively influence pre-hospital emergency staff's family life.

The opposite of work-family conflict is the enrichment of work-family that has a twofold nature: work-family enrichment and family-work enrichment. Family-work enrichment occurs when the resources generated in work roles improve the quality of family life. Family-work enrichment occurs when resources generated in family roles enhance the quality of work-life (9). Work-family enrichment leads to positive consequences, such as vigor at work, thriving at work, and reduced depression (11-13).

Time management skills seem to play an influential role in reducing work-family conflict. Time management is considered a form of decision-making used by a person to structure and adapt their time to changing conditions (13). Rasooli et al. (2009) reported the effect of time management training on reducing work-life conflict in a sample of Iranian nurses (14). Additionally, in a study by Beyramijam et al. (2020), there was a significant inverse correlation between work-family conflict and time management behaviors among Iranian pre-hospital emergency technicians (4).

Despite the importance of work-family conflict and enrichment among pre-hospital emergency technicians, published studies related to this topic are scarce. Moreover, the effects of training and application of time management skills on work-family conflict and work-family enrichment in Iranian pre-hospital emergency personnel have not been studied. Because the working conditions of pre-hospital emergency personnel differ from those of other employees in healthcare organizations, the findings of research conducted in other healthcare contexts do not apply to pre-hospital emergency personnel. Therefore, the present study investigates the effects of applying time management skills on family-work conflict and work-family enrichment in pre-hospital emergency technicians.

Materials and Methods

In this quasi-experimental study conducted in 2019, the research population included all pre-hospital emergency technicians in Birjand, Iran. Considering a similar study (14) ($m1 = 40.19$, $m2 = 54.65$, $s1 = 13.65$, $s2 = 15.91$, $\beta=0.2$ and $\alpha= 0.05$),

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[DOI: 10.32592/jsurgery.2022.10.2.102]

the sample size was calculated as 22 participants per group. To increase the study's power, 30 participants were recruited in each group. According to the inclusion and exclusion criteria, these participants were selected using the convenience sampling method. Inclusion criteria were a willingness to participate in the study, a higher level of education in emergency medicine, at least one year of work experience, and no formal or informal training in time management or any work-family conflict reduction program. Exclusion criteria included unwillingness to continue participation and failure to apply taught time management skills in more than two follow-up time points. To start sampling, eight emergency bases in Birjand were divided into block A and block B, with four bases in each block. The two blocks were then randomly divided into intervention and control groups. Then, 30 pre-hospital emergency technicians who met the inclusion criteria were selected from each block. After explaining the purpose of the study and obtaining informed consent, a demographic characteristics form, the work-family conflict scale, and the work-family enrichment scale were completed by participants in both groups.

For the intervention group, an eight-hour one-day workshop on time management was held by the first author who was trained by a general psychologist (the fourth author). The content of the workshop includes: describing the purposes and objectives of the workshop, basic training in time management (e.g., proper scheduling and prioritizing goals), reassessing priorities of goals, mechanizing of time (such as organizing a list of tasks), prioritizing and managing tasks, prioritizing tasks based on importance, principles of problem-solving, decision-making or delegation, having a daily schedule and making a to-do list, and being flexible through unexpected crises (15). The teaching method consisted of lecture and group discussion. The lectures were presented using PowerPoint presentations. The participants discussed the presented materials in small groups (6-participants). Immediately after the intervention and one month later, the two groups completed the work-family conflict scale and the work enrichment scale. In addition, at the end of the first week after the intervention, the first researcher held a session with the intervention group participants to ensure accurate learning of the taught skills and the correct application of those skills. During one month after the intervention, weekly telephone calls were made to intervention participants to ensure these participants applied that taught time management skills. A checklist was completed by the researcher with each weekly telephone call. One month after the intervention, 25 participants in the intervention group and 29 participants in the control group completed the study instrument. Participants in the control group were informed that they could receive the intervention after the study.

This study collected data using demographic characteristics questionnaire (including age, marital status, type of employment, work tenure, and education level), Carlson's work-family conflict scale, and Carlson's work-family enrichment scale. The work-family conflict scale has nine items related to work-family conflict and nine items related to the family-work conflict. The participants respond to the items on a five-point Likert scale (never = 0 to always = 4). Therefore, the minimum score on this scale is zero and the maximum score is 36, where a higher score indicates more conflict (8).

This scale has been used in Iran by Ahmadyan Mazhin et al. (2015). In Ahmadyan Mazhin et al. study (13), the reliability of this scale was satisfactory, with Cronbach's alpha of 0.87 (16). The work-family enrichment scale has two subscales: (1) work-family enrichment (9 items) and (2) family-work enrichment (9 items). Scale items are responded to on a five-point Likert scale (from strongly disagree=1 to strongly agree=5) (17). Cronbach's alphas for the work-family enrichment and family-work enrichment subscales were 0.87 and 0.92, respectively (18).

The collected data were entered into SPSS (version 19). Kolmogorov-Smirnov test was used to evaluate the distribution normalization of main variables. Due to the normal distribution of these variables, the independent t-test, repeated measures analysis of variance, and Bonferroni's post hoc test were applied

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[DOI: 10.32592/jsurgery.2022.10.2.102]

for the statistical analysis of data. The independent t-test and Chi-square tests were used to compare the demographic characteristics of the two groups. A P-value of less than 0.05 was considered statistically significant.

The present study proposal was approved by the ethics committee of Birjand University of Medical Sciences (Ethics Code: BUMS.REC.1397.169). The purpose of the study was explained to the participants. The participants were also reminded that participation was optional. The confidentiality of the collected data was guaranteed.

Results

The final statistical analysis was performed on the collected data from 25 participants in the intervention group and 29 participants in the control group. The mean age in the intervention and control groups was 31.72 ± 4.54 and 31.21 ± 4.90 years, respectively (P=0.69). Job tenure in the intervention and control groups was 8.80 ± 3.88 and 8.14. 4.42 years, respectively (P=0.56). Moreover, the family size in the intervention was 3.77 ± 1.20 and in the control group was 3.85 ± 1.69 (P=0.78). A comparison of other demographic characteristics is displayed in Table 1.

Table 1: Comparison of some demographic characteristics between the intervention group and the control group

Variable	Intervention group n (%)	Control group n (%)	*P*-value
Marital status			0.76*
Single	6 (24)	8 (27.6)	
Married	19 (76)	21 (72.4)	
Level of education			0.21*
Associate degree	9 (36)	6 (20.7)	
Bachelor or above	16 (64)	23 (79.3)	
Type of employment			0.86*
Permanent	6 (24)	7 (24.1)	
Long-term contract	16 (64)	17 (58.6)	
Other	3 (12)	5 (17.2)	
*: Analyzed by the Chi-square test			

A comparison of the mean score of work-family conflict, work-family enrichment, and their subscales in different time points between the two groups are presented in Table 2.

As shown in Table 3, the work-family conflict, family-work conflict, and total work-family conflict in the intervention group had a significant decrease over time (P<0.001). In contrast, these variables did not significantly change over time in the control group (P>0.05).

The post hoc Bonferroni's test revealed that the mean score of work-family conflict and total work-family conflict immediately and one month after the intervention was significantly lower than before intervention in the intervention group (P<0.001). One month after intervention, these variables significantly decreased compared to immediately after intervention in the intervention group (P<0.001). Finally, the mean score of family-work conflict one month after the intervention was significantly lower than before and immediately after intervention in the intervention group (P<0.001).

Work-family enrichment, family-work enrichment, and total work-family enrichment significantly increased over time in the intervention group (P<0.001). However, these variables showed no significant changes over time in the control group (P>0.05).

Post hoc comparison by Bonferroni's test showed that the mean score of work-family enrichment and the total work-family enrichment immediately after intervention and one month after intervention

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[DOI: 10.32592/jsurgery.2022.10.2.102]

significantly increased compared to before intervention in the intervention group (P<0.05).
In addition, the mean score of family-work enrichment one month after the intervention was significantly higher than before the intervention in the intervention group (P=0.002).

Table 2: Comparison of the mean score of work-family conflict, work-family enrichment, and their subscales before, immediately, and one month after the intervention between the two groups

Variable/time	Intervention group	Control group	t-value	*P*-value
Work-family Conflict				
Pretest	21.24±4.20	18.83±6.15	10.15	<0.001
Posttest	`17.28±3.85	18.48±5.45	0.92	0.36
Follow-up	6.20±2.74	17.72±5.07	10.15	<0.001
Family-work Conflict				
Pretest	16.64±5.02	10.69±5.43	4.16	<0.001
Posttest	14.80±4.70	10.83±5.32	2.89	0.006
Follow-up	3.64±2.66	9.28±4.81	5.21	<0.001
Total Work-family Conflict				
Pretest	34.56±6.50	27.24±9.69	3.20	0.002
Posttest	29.16±6.87	26.86±8.85	1.05	0.3
Follow-up	9.32±4.31	25.21±6.83	10.03	0.001
Work-family Enrichment				
Pretest	29.28±7.25	34.03±5.98	2.64	0.01
Posttest	30.92±6.47	33.83±5.94	1.72	0.09
Follow-up	31.92±6.28	34.66±5.37	1.73	0.09
Family-work Enrichment				
Pretest	36.84±4.23	38.34±5.05	1.18	0.25
Posttest	38.08±3.87	38.79±5.02	0.58	0.57
Follow-up	39.20±3.64	38.52±5.15	0.55	0.58
Total Work-family Enrichment				
Pretest	66.12±9.44	72.38±9.47	2.43	0.02
Posttest	69.00±8.27	72.62±9.43	1.49	0.14

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[DOI: 10.32592/jsurgery.2022.10.2.102]

Table 3: Results of the repeated ANOVA for the main variables in the two groups

Variable	Group	Pretest	Posttest	Follow-up	Results of repeated ANOVA	Results of Bonferroni's post hoc test
Work-family Conflict	Intervention group	21.24±4.20	17.28±3.85	6.20±2.74	F=171.23, *P* <0.001	Posttest vs. Pretest, *P*<0.001 Follow-up vs. Pretest, *P*<0.001 Follow-up vs. Posttest, *P*<0.001
	Control group	18.83±6.15	18.48±5.45	17.72±5.07	F=1.58. *P*= 0.21	–
Family-work Conflict	Intervention group	16.64±5.02	14.80±4.70	3.64±2.66	F=141.99, *P* <0.001	Follow-up vs. Pretest, *P*<0.001 Follow-up vs. Posttest, *P*<0.001
	Control group	10.69±5.43	10.83±5.32	9.28±4.81	F=2.90, *P*= 0.06	-
Total Work-family Conflict	Intervention group	34.56±6.50	29.16±6.87	9.32±4.31	F=239.25, P <0.001	Posttest vs. Pretest, P<0.001 Follow-up vs. Pretest, P<0.001 Follow-up vs. posttest, P<0.001
	Control group	27.24±9.69	26.86±8.85	25.21±6.83	F=2.32, *P*=0.11	–
Work-family Enrichment	Intervention group	29.28±7.25	30.92±6.47	31.92±6.28	F=9.47, *P*< 0.001	Posttest vs. Pretest, P=0.03 Follow-up vs. Pretest, P<0.001
	Control group	34.03±5.98	33.83±5.94	34.66±5.37	F=0.90, *P*=0.41	–
Family-work Enrichment	Intervention group	36.84±4.23	38.08±3.87	39.20±3.64	F=9.24, *P*< 0.001	Follow-up vs. Pretest, *P*=0.002
	Control group	38.34±5.05	38.79±5.02	38.52±5.15	F=0.28, *P*=0.76	–
Total W/F Enrichment	Intervention group	66.12±9.44	69.00±8.27	71.12±8.17	F=12.84, *P*< 0.001	Posttest vs. Pretest, *P*=0.02 Follow-up vs. Pretest, *P*<0.001
	Control group	72.38±9.47	72.62±9.43	73.17±9.50	F=0.33, *P*=0.72	–

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[DOI: 10.32592/jsurgery.2022.10.2.102]

A comparison of the mean changes in work-family conflict, family-work conflict, and total conflict in different phases of the study showed that the mean changes in the score of these variables immediately after the intervention compared to before the intervention; one month after the intervention compared to before the study, and one month after the intervention compared to immediately after the intervention was significantly higher in the intervention group than the control (P<0.001; Table 4).

Table 4: Comparison between groups regarding mean changes of the main variables scores before and after the intervention

Variable/time	Intervention group	Control group	*t*-value	*P*-value
Work-family Conflict				
Posttest - Pretest	-3.96±3.72	-0.34±1.34	4.88	<0.001
Follow-up – Pretest	-15.04±4.95	-1.1±4.11	11.31	<0.001
Follow-up - Posttest	-11.08±3.86	-0.76±4.04	9.55	<0.001
Family-work Conflict				
Posttest - Pretest	-1.84±4.78	0.14±1.16	2.16	0.04
Follow-up – Pretest	-13.00±3.67	-1.41±4.57	10.14	<0.001
Follow-up - Posttest	-11.16±3.99	-1.55±4.68	8.03	<0.001
Total Work-family Conflict				
Posttest - Pretest	5.40±5.85	-0.38±1.61	4.44	<0.001
Follow-up – Pretest	-25.24±6.23	-2.03±6.58	13.24	<0.001
Follow-up - Posttest	-19.84±6.14	-1.66±6.46	10.55	<0.001
Work-family Enrichment				
Posttest - Pretest	1.64±2.87	-0.21±0.77	3.33	0.002
Follow-up - Pretest	2.64±3.25	0.62±4.21	1.95	0.06
Follow-up- Posttest	0.99±3.05	0.83±4.19	0.17	0.87
Family-work Enrichment				
Posttest - Pretest	1.24±2.79	0.45±0.95	3.33	0.002
Follow-up - Pretest	2.36±3.07	0.17±4.04	2.21	0.03
Follow-up - Posttest	1.12±2.33	-0.28±3.89	1.57	0.12
Total Work-family Enrichment				
Posttest - Pretest	2.88±4.89	0.24±1.12	2.82	0.007
Follow-up - Pretest	5.00±5.61	0.79±6.59	2.50	0.02
Follow-up - Posttest	2.12±4.26	0.55±6.46	1.04	0.31

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[DOI: 10.32592/jsurgery.2022.10.2.102]

Finally, statistical analysis indicated that the mean changes in the scores of work-family enrichment, family-work enrichment, and total work-family enrichment immediately after the intervention compared to before the intervention in the intervention group were significantly higher than in the control group ($P<0.001$). In the intervention group, the mean changes in family-work enrichment and work-family enrichment scores one month after the intervention compared to before intervention were significantly higher than in the control group ($P<0.001$; Table 4).

Discussion

The purpose of the present study was to investigate the effects of applying time management skills on work-family conflict and work-family enrichment in pre-hospital emergency technicians.

The intervention implemented in the present study significantly reduced work-family conflict in the intervention group compared to the control group. This decrease lasted one month after the intervention. On the other hand, the intervention group reported a significant increase in work-family enrichment, family-work enrichment, and total work-family enrichment from before the intervention to immediately after the intervention compared to the control group. However, the results showed that the mean changes from immediately after the intervention to one month after the intervention was not significantly different between the two groups.

In line with the results of the present research, in a study conducted by Rasooli et al. (2009), time management training for nurses led to a significant decrease in the mean scores of work-life conflict in the intervention group one month after the intervention in comparison to before the intervention (14). Furthermore, Goudarzi et al. (2012) investigated the relationship between nurses' time management and work-life conflict. In this study, a negative and significant relationship between time management skills and work-family conflict among a sample of Iranian nurses was reported (19).

For explaining the efficiency of implemented intervention in reducing work-family conflict in the present study, paying attention to the concept of role conflict can be helpful. Role conflict reflects individuals' unpleasant experiences, which they face due to the confronting and clashing demands of different roles and positions (20). It is evident that time is a limited source; therefore, when the allotted time for a role increases, the possibility of role conflict arises. Consequently, it can be supposed that following the use of time management skills, individuals will have less time wasted and will be able to fulfill their various roles in both work and family in a more desirable way. Generally, time management focuses on avoiding unnecessary tasks, increasing efficiency, organizing, and delegating authority. In other words, time management includes identifying needs and goals, classifying them based on priority, and allocating the time and other necessary resources to reach them (21). Regarding the bidirectional nature of the work-family conflict (10), when time management leads to a better performance in family roles, this good experience will also positively affect working life and vice versa.

Notably, searching databases did not retrieve any published study that evaluated the effects of applying time management skills on work-family enrichment. Work-family enrichment is defined as the extent to which a person's positive experiences at work enhance the quality of family life and the extent to which positive family experiences enhance the quality of work-life (10). Work-family enrichment is positively associated with vigor at work and thriving at work (12, 13). Thus, it can be assumed that the present intervention was able to reduce work-family conflict in the intervention participants; this might, in turn, have led to a positive experience in family life or working life. It is proposed that work-family enrichment is bidirectional (21); consequently, these positive experiences have resulted in an improved experience of family and work life.

As one of the limited research conducted to investigate the effect of applying time management skills in pre-hospital technicians, the results of the present study can be used to design future studies in this area. Investigating the impacts of time management application on the job and family factors, such as job performance and individuals' well-being, is

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[DOI: 10.32592/jsurgery.2022.10.2.102]

recommended in future studies. The use of a quasi-experimental before and after the design was one of the limitations of this study.

Conclusion

Applying time management skills can effectively improve work-family conflict and increase work-family enrichment in pre-hospital emergency technicians. It was the first study to conduct time management intervention in the pre-hospital emergency context. Our findings would help design a modified intervention and evaluate its lasting effect, especially on the work-family enrichment among pre-hospital emergency technicians.

Acknowledgment

Our thanks go to all the pre-hospital emergency technicians who, without their cooperation, it would not

Funding

The authors did not receive funding for this project.

Conflict of interest

The authors declare that they have no competing interests.

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[DOI: 10.32592/jsurgery.2022.10.2.102]