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Author(s):

Nuzhat-ul-Ain, Sumaira Rafique

Affiliation:

Center for Clinical Psychology, University of the Punjab, Lahore, Pakistan

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Work-Family Positive Spillover and Mental Health of Married Special Education Professionals

Nuzhat-ul-Ain* and Sumaira Rafique

Center for Clinical Psychology,
University of the Punjab, Lahore, Pakistan

Abstract

The current study aims to examine the relationship between work-family positive spillover and mental health of special education professionals. For this purpose, correlation research design was used. Purposive sampling method was used to recruit 200 married professionals working in private special education institutions of Lahore. Assessment was carried out using multi-dimensional scale of work-family positive spillover and Mental Health Continuum-Short Form (MHC-SF). Pearson Product Moment Correlation and Linear Regression were employed to analyze the data. A significant positive relationship of work to family positive spillover with social wellbeing and psychological wellbeing of the participants was found. Similarly, a positive relationship of family to work positive spillover with social wellbeing and psychological wellbeing of the participants was also found. Overall, it was concluded that a positive association of work and family roles with each other improves the social and psychological wellbeing of special education professionals.

Keywords: mental health, professionals, psychological wellbeing, social wellbeing, special education, work-family spillover

Introduction

In Pakistan, married professionals, apart from their jobs, have to fulfill familial obligations as well. If they can successfully create healthy balance between occupational and domestic roles, they are able to enjoy both roles and have active participation in work life and family life. Furthermore, conflict between work and family roles leads to distress and inability to focus on both roles while keeping their mental health in check. Healthy

*Corresponding Author: nuzhatulain4@gmail.com

balance between occupational and domestic roles is important for both men and women professionals (Avais et al., [2014](#)).

Moreover, an institution of special education demands more pressure and work load as compared to normal education as professionals have to manage the disability along with the individualized education plans of each student which is not the case in regular education. Special children have also an emotional impact on the teacher/professional which affects their mental health. Therefore, it is important to study the work-family spillover and mental health of the respective professionals to investigate how they are creating balancing between both their roles while managing their mental health as special education professionals (Avais et al., [2014](#); Mukhtar et al., [2020](#)).

Work-Family spillover means the influence of roles of both, work and family, on each other. Work-family positive spillover is the transfer of emotive aspects, values, talents and actions from the originating domain to the receiving domain. Thus bringing a positive change in the receiving domain which leads to increased productivity of the receiving domain. Work-to-Family spillover means that work is the originating domain and family is the receiving domain while Family-to-Work spillover is the opposite of work-to-family spillover (Hammer et al., [2007](#)). In the present research, positive work-family spillover is focused.

Health is a state of physical, psychological and sociological wellbeing. Apart from physical illness, it also important to mental illness to consider. Mental illness affects the people cognitively, affectively, and functionally. A number of researches suggest that the married working women who have higher level positive balance between work and family roles and lower work-family conflict are more likely to experience better mental health (Biggs et al., [2019](#)). These findings have been seconded by other researches as well (Karim et al., [2016](#)).

Theoretically, the description of work-family spillover has been focused in many theories. The relationship of work-family spillover and mental health has also been theorized. The dominant theoretical perspective used to explain the linkages between work and family has been role theory Katz and Kahn ([1978](#)), which explains the relationship via the scarcity hypothesis

and the enhancement hypothesis. The scarcity hypothesis suggests that a person has a limited amount of time and energy to engage in roles and that strain is normal and inevitable given the over-demanding nature of engaging in multiple roles. In contrast to the scarcity hypothesis, the enhancement hypothesis proposes that occupying multiple roles can lead to one role impacting another including gaining knowledge from one role and applying it to another role and fulfilling the latter role more effectively. Beyond this it also leads to better social health. Thus enhanced positive energy in one role leads to impact in another role. It is believed that the net effect of these benefits facilitates the integration and management of the roles positively, leading to fewer negative and more positive outcomes (Barnett & Hyde, [2000](#); Edwards & Rothbard, [2000](#); Goode, [1960](#); Sieber, [1974](#); Voydanoff, [2002](#)). Going forward with the enrichment hypothesis, it is also considered that psychological, emotional, and social benefits are considered as instrumental benefits of work-family linkage (Kirschmeyer, [1992](#)).

The present study investigates the relationship between work-family spillover and mental health in special education professionals.

Rational of the Study

Special Education is a challenging field and demands extensive effort in order to support individuals with special need to make them independent and functional members of the society. However, it has been noted that due to being an exhaustive field, the special educators are four times more likely to leave the field as compared to general education teachers (Hopkins et al., [2019](#)). One of the reasons for this turnover is difficulty in balancing work and family life (Biggs et al., [2019](#)). Experiencing work-family conflict and being in a challenging field lead to poor mental health of special education professionals. This research focuses on empirical evaluation of this phenomena in order to establish a baseline for further researches focusing on the mental health of these professionals and reduction of their turnover rate.

Method

Participants

Two hundred married professionals working in special education were included in the present study through purposive and convenient sampling

techniques. Inclusion criteria of the study were that the participant should have been working in the special school for at least one year. Professionals should have been married for at least one year. However, professionals doing part-time jobs, special Education professionals working in normal schools and the professionals with any severe psychological and physiological problems were excluded from the study.

Measures

The instruments used in the present study included Perceived Work–Family Positive Spillover (Hammer et al., [2007](#)) and Mental Health Continuum-Short Form (MHC-SF) (Lamers et al., [2011](#)). The total number of items of Perceived Work–Family Positive Spillover scale was 22. Likert-type scale ranging from 1 (*strongly disagree*) to 5 (*strongly agree*) was used in this scale. Mental health continuum-short form (MHC-SF) was a 14-item scale used to assess emotional, social and psychological well-being in a person. The format of the scale was having a six (0-5)-point scale for each response.

Procedure

First approval from the authors of the tools and translation of the tools, special schools and special education professionals was obtained and then every participant was provided with a detailed information sheet regarding the research. After the clarification of the research topic, consent form was signed by the willing participants and the researcher to make sure their voluntary participation in the research. The participants were assured about confidentiality of their responses and their identity. Then, the main study was conducted. The participants filled out the forms. On the average it took about 7-10 minutes to fill out the forms.

Results

Initially, the demographics of the participants were focused. It was found out that the Mean age of participants was 37 and they worked for 4 to 5 hours daily in a special education set-up. Eighty-eight percent participants were Muslims with 54% having masters or equivalent educational level. The participants were earning around 15000 to 20000 monthly and 71% stated that their income was used on family expenditures. The majority of

the participants were satisfied with the time they spend with their family i.e., husband and children.

The results of correlation analysis are shown in table 2.

Table 1

Correlation Values for Perceived Work–Family Positive Spillover and Mental Health

Variables	1	2	3	4	5
1. Work to Family Positive Spillover	1	.87**	.05	.27**	.22**
2. Family to Work Positive Spillover		1	.08	.25**	.22**
3. Emotional Wellbeing			1	.39**	.50**
4. Social Wellbeing				1	.54**
5. Psychological Wellbeing					1

The table shows that significant positive relationship of work to family positive spillover with social wellbeing and psychological wellbeing is there. On the other hand, positive relationship of family to work positive spillover with social wellbeing and psychological wellbeing was also found. Emotional wellbeing was not significantly correlated with work-family spillover.

The results of regression through bootstrapping analysis are shown in table 3.

Table 2

Predictors of Mental Health of Special Education Professionals

Predictors	Emotional Wellbeing		Social Wellbeing		Psychological Wellbeing	
	B	95% CI	B	95% CI	B	95% CI
Constant	13.24	(10.49,16.00)	15.71	(11.47,19.95)	23.69	(19.19,28.20)
Work to Family Spillover	-.06	(-.17,.05)	.23***	(.06,.40)	.04*	(.29,1.35)
Family to Work Spillover	.77	(-.03,.19)	-.07**	(.09, .25)	.10	(-.08,.28)
R ²	.01		.07***		.21*	
F	.89		7.95		4.70	

According to the table 2, Work to Family Spillover and Family to Work Spillover are the significant predictors of Social Wellbeing with $F(2,197) = 7.95, p < .01$ and accounted for 7% variance. Work to Family Positive Spillover is a significant predictor of Psychological Wellbeing with $F(2,197) = 4.70, p < .05$ and accounted for 21% variance. In this model, Family to Work Spillover does not significantly predict Psychological Wellbeing. Lastly, both Work to Family Spillover and Family to Work Spillover do not predict Emotional Wellbeing [$F(2,197) = .89, p > .05$].

Discussion

A positive correlation between work to family positive spillover with social wellbeing and psychological wellbeing and, similarly, a positive relationship of family to work positive spillover with social wellbeing and psychological wellbeing show that the married professionals experience healthy social and psychological health if their work and family roles are well balanced. These findings have also been supported in the previous researches carried out in other countries (Demerouti et al., [2014](#); Leung et al., [2020](#)).

Furthermore, the same results have been received via regression analysis as well. The previous researches suggest the positive and significant relationship between work-family positive spillover and psychological wellbeing (Obrenovic et al., [2020](#)) and work-family positive spillover and social wellbeing (Voydanoff, [2002](#)). The work-family balance predicts social and psychological wellbeing (Kirschmeyer, [1992](#)). Viewing these results in the light of role theory (Katz & Kahn, [1978](#)), it appears that work family positive spillover is enhancing social and psychological mental health of married special education professionals. This proves the enhancement hypothesis of the role theory as one area of life enhances the functionality of another aspect of same individual and hence, improves the mental health of these individuals.

In the light of cultural underpinnings, since mostly women are working in special education sector, it has been empirically established that working women in Pakistan are, generally, 'time poor'. This term is used for women who are involved in both paid and unpaid nature of tasks as part of their

daily routine. The research conducted by Iqbal et al. (2020) has highlighted the reasons of women 'being time poor' which included increased working hours (9am-5pm), lack of support from significant others, societal pressures related to work-family roles, being considered responsible for major child-care obligations and domestic matters, and patriarchal mindset of Pakistani Society. In the present research, it was noted that the participants were working for 4-5 hours a day which enabled them to have satisfactory time with their family. Majority of the participants were satisfied with the time they spend with their family i.e., husband and children which may indicate the presence of required social support from significant others.

However, emotional wellbeing neither correlated nor was predicted by work-family spillover which is an unexpected finding (Dodanwala & Shrestha, 2021). There can be one major reason for this issue which is that emotional intelligence is a trait and it is beyond situational factors. The capability of managing emotions is based on person's life history and overall psychological framework. Hence, it cannot be predicted through factors such as work and family life (Sánchez-Núñez et al., 2020). Moreover, although the results show the trend towards positive spillover but it should also be noted that around 71% participants were spending their income on their family which also shows the economic burden that these participants were sharing. This might be one of the reasons which may affect the emotional mental health of special education professionals (Khursheed et al., 2019).

Conclusion

The results revealed that a healthy work-life balance improves social and psychological mental health of special education professionals. However, there is a need to conduct further research to find out the factors which improve the emotional health of these professionals.

Limitations of the Study

The current study was conducted on a sample of mental health professionals working in the private sector of special education institutes. Data from governmental and NGO based special education institutions should also be taken to enhance the generalizability of the research. The limitations of this research included the absence of any mediating and

moderating variables as predictors of the mental health of special education professionals.

Recommendations of the Study

The results depicted that both work-place and household environments are crucial to ensure the mental health of employees. Furthermore, future studies should focus on investigating the strategies to enhance workplace environment, employee satisfaction, and above all, the mental health of employees.

Implications of the Study

This research is of extreme importance for special education sector. This field demands the establishment of extraordinary psychological involvement. To ensure the positive impact of the professional over the child with special needs, the institution needs to make sure that the workplace and household requirements of the employee are satisfied. Authorities should, on regular basis, devise activities to boost up the morale and mental health of the special education professionals.

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