Work-Family Conflict and Safety Behaviour among Dual-Earner Couples; Does Family Supportive Supervisor Behavior Matter?

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ABSTRACT

The study considered the moderating role of family supportive supervisor behaviour in the relationship between work-family conflict as a source of stress and employees' safety behaviour. A survey research design was employed and data collection was done using questionnaires. A sample of two hundred and twenty-six (226) was purposefully drawn from 330 dual-earner couple nurses. The data retrieved from the respondents were analyzed with the aid of IBM SPSS (V23.0), Smart Partial Least Square 3.0, and Haye's PROCESS Macro. The results indicated that work-family conflict is negatively related to employees' safety behaviour (i.e., safety participation and safety compliance). Further, family-work conflict was negatively and significantly related to safety behaviour (safety participation and safety compliance). Additionally, family-supportive supervisor behaviour significantly buffered the link between work-family conflicts and safety behaviour (safety participation and safety compliance). Finally, the findings of the study revealed that family-supportive supervisor behaviour moderated the relationship between family-work conflict and safety behaviour (safety participation and safety compliance)."Hospital managers and administrators must take steps to reduce the extent of workfamily conflict to circumvent its impact on employees' safety behaviours at work. Moreover, social support from supervisors and family-friendly policies might play a crucial role in reducing the negative effects of work-family conflict on employees' adhere to safety rules and conduct themselves safely at the workplace. This study has made contributions to the growing stream of work-family interface literature by investigating its influence on safety behaviour and exploring the moderating role of family supportive supervisor behaviour simultaneously."

Keywords: Dual-earner couples, Family-supportive supervisor behavior, Family-work conflicts, Ghana, Nurses, Safety behaviour, Work-family conflicts.

JEL Classification: K32; J28; J62.

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Highlights of this paper

- A negative relationship was found between work-family conflict and safety behaviour of dualearner couple nurses.
- Family-Work conflict negatively affected safety behavior.
- The relationship between work-family conflict and safety behaviour was significantly moderated by family supportive supervisor behaviour.

1. INTRODUCTION

Globally, a major transformation has taken place in women's roles outside the home as a result of prospects that have been made available to them in the professional realm (Adisa, Modi, & Osabutey, 2017). A lot of international and local initiatives and policies have encouraged the continuous development and employment of women outside the home. This situation has led to a reduction in the previously dominant male breadwinner model worldwide and an increase in the number of dual-earner couples (Kremer, 2016; Novitasari, Sasono, & Asbari, 2020). According to Phil Ciciora an editor of business and law, since the 1960s, men's time spent working for pay has progressively declined while women's time has climbed. Men devoted more time to childcare and housekeeping (cooking, cleaning, etc.). In contrast, during the past 40 years, women have spent less time doing housework but not significant changes occurred with regards to time spent with their children. A probable outcome of the increment of dual-earner couples is potential tensions between work and family roles. Thus, many professional couples will still have problems between job and family that can eventually result in higher stress levels. According to Kremer (2016) Work-family conflict is regarded as a type of inter-role clash, which is a strain between demands required of an individual at the workplace and household. According to Fuß, Nübling, Hasselhorn, Schwappach, and Rieger (2008) a theoretical reference used in explaining the phenomena of work-family conflict is the scarcity hypothesis; which describes that human beings have limited energy resources. Therefore, playing many roles which tend to overlap can exhaust them and cause stress or inter-role struggle.

In many countries, it is reported that all levels of socio-economic development face varying degrees of challenges in the education, employment, deployment, retention and performance of healthcare workers. The World Health Organisation (WHO) has estimated that eighteen million more health workers are needed by 2030 primarily in low and lower-middle-income countries (WHO website). This assertion indicates that the health care sector faces a shortage of personnel which invariably places a lot of demands (workload and long working hours) on the limited workforce. Long hours of work and work overloads are precursors of work-family conflict incidence as a result of extreme time and effort at the workplace. Such occurrences lead to deficient time and energy for family/household responsibilities. For instance, Suchitra (2014) reported that health workers require a great deal of time and energy as a result of the challenging tasks in their working environment. This combined with family responsibilities is likely to cause them to experience a higher level of work-family conflict. Thus, balancing work and family responsibilities, especially for dual-earner couples in the health care sector is inevitable. According to Jurkat, Reimer, and Vollmert (2003) it is reported that conflict between job and family demands is on the higher side for hospital workers. Higher work-family conflict produces strain which is said to have several negative consequences or outcomes. For example, Novitasari et al. (2020) study on Performance during Covid-19 Pandemic: What is the Role of Readiness to Change Mentality, it was reported that work-family conflict has a negative and significant effect on employee performance. Several other studies have also reported that a lack of work-life balance has a major risk of lowering employees' work performance. This attests that work-family conflict has a significant negative relationship with employees' performance (Geroda & Puspitasari, 2017; Hsu, 2011; Taheri Goudarzi, 2017). For instance, Obrenovic, Jianguo, Khudaykulov, and Khan (2020) have also reported the negative impact of work-family conflict on psychological safety and psychological well-being.

However, literature examining the link between work-family conflict and employees' safety behaviour appears to be limited. Meanwhile, as has been indicated earlier, an imbalance between work and family responsibilities poses strain and pressure on employees which may affect their ability to safely carry out their responsibilities at the workplace. This assertion is supported by Turner, Hershcovis, Reich, and Totterdell (2014) study which indicated that through psychological distress, work-family interference positively impacts workplace injuries. Thus, trying to remain active in two important life domains poses a threat to an individual's ability to meet demands in each domain, leading to psychological strain and potential failures in performance (i.e safety behaviours, such as workplace accidents). The study seeks to determine the relationship between work-family conflict and employees' safety behaviour as well as whether institutional arrangement via the employee's supervisors makes any difference in the stress associated with work-family conflict and the workers' safety behaviour in the Healthcare sector.

2. LITERATURE REVIEW

2.1. Theoretical Relevance/Lens

2.1.1. Transactional Theory of Stress and Coping

The present study draws on the transactional theory of stress and coping developed by Lazarus and Folkman (1984) to examine how family-supportive supervisor behaviour buffers the relationship between work-family conflict and safety behaviours. The transactional theory of stress and coping describes how people react to stressful events by adopting coping strategies or mechanisms (Lazarus & Folkman, 1984). According to Lazarus (1993) stress is defined as a relationship between the person and the environment which is considered by the individual as greater than his/her resources and is toxic to their well-being. Employees often appraise their work demands and consider whether they have adequate resources at their disposal to deal with these demands (Lazarus, 1993). The model entails influencing factors, appraisals, coping and reaction to stressful circumstances (Arefin, Alam, Li, & Long, 2020). The influencing factors affect how one perceives the person-environment link. The person's perception of the person-environment link forms the bases for cognitive appraisal of whether a situation is considered stressful or not. The cognitive appraisal takes two forms; primary and secondary. The primary appraisal helps to identify if the situation or circumstance is stressful while the secondary assessment began if the situation is considered stressful. If through the secondary appraisal, the individual finds the influencing factors as relevant, it is considered a positive situation and looks for means (coping strategies) of working around to reduce its reactions or outcomes. Lastly, the stress from the mismatch in the person-environment negatively affects employees' job-related attitudes (reaction).

For this study, the influencing factors are the demands placed on the individual presented in family and work roles and the time (resources) the individual has to fulfil these roles. Stress is perceived to have occurred if the individual assesses that, there isn't enough time at his/her disposal to fulfil responsibilities in these domains (workfamily roles). According to Armstrong, Atkin-Plunk, and Wells (2015) WFC is one of many stressors that impact employee job stress. The individual's perception of stress as a result of WFC would inversely influence their job-related behaviours; job safety behaviour. The study proposes that a situation-based coping strategy that could be considered by the nurses who perceive strain based on a conflict between work-family roles is family supportive supervisor behaviours. According to Lazarus and Folkman (1984) the effect of a negative subjective stress appraisal on adaptable outcomes can be modified by strengthening an individual's social support. Past studies have considered family supportive supervisor behaviours as social support which is a promising coping mechanism (Dillard, 2019). Thus, supportive family behaviour is assessed as a moderator which would reduce the negative reaction of workfamily conflict in predicting safety behaviour.

2.2. Work-Family Conflict and Safety Behaviour

Grzywacz and Demerouti (2013) explained that work-family interference is a form of inter-role conflict in which work conflicts with family (i.e., work-family conflict), and vice versa (i.e., family-work conflict). The concept of work-family conflict is grounded on the role stress theory propounded by Kahn, Wolfe, Quinn, Snoek, and Rosenthal (1964). The role theory describes that if a certain set of social roles enforce conflicting role expectations on a focal person, it can create psychological conflict and role overload. The outcome of this role conflict can affect an individual's time, energy, and commitment, which are limited, and can lead to exhaustion and psychological pressure.

Safety behaviours are described as those that are the direct precursors of safety-oriented tasks (Griffin & Neal, 2000). According to Chu, Guo, Liu, and Chen (2020) Safety compliance and safety participation are the two components of safety behaviours. Safety compliance refers to in-role behaviours that are directly related, and therefore, required to maintain workplace safety. An example of safety compliance occurs when an employee adheres to work rules. Safety participation on the other hand, describes the extra-role proactive behaviours that are indirectly connected to individual safety and are adopted to help workers or the entire organization to improve safety. Examples of such behaviours include providing safety suggestions to managers or helping recruits comprehend and chart safety rules. In the case of nurses, long hours of working and work overload as a result of inadequate manpower and limited health facilities and equipment, brings about challenges and pressure to them, and these strenuous and challenging work-related activities easily interfere with family (Wei, Guo, Ye, Liao, & Yang, 2016). Thus, the health care workers are required to put in some resources to resolve conflicts. According to Wang, Wang, and Xia (2018) exhaustion of resources can result in failures, such as making incorrect judgments and failing to sustain attention and thus undermining safety behaviours (safety compliance and safety participation).

Hefazi Torghabeh, Hosseini, Soltani, and Jahanian (2021) have reported that Work-family conflict is one of the factors that are likely to contribute to work accidents and can affect the quality of work-life. As it has been established earlier, work-family conflict arises from interference between work-family roles. The imbalances in work-life produce elevated stress levels which reduces the quality of work-life. According to Fang and Hung (2014) nurses working in hospitals are more open to work-life conflict due to their working conditions. Studies have indicated that a relationship exists between work-family conflict and occupational accidents and reduced safety behaviour (Chu et al., 2020; Smith, Hughes, DeJoy, & Dyal, 2018). This implies that when nurses experience conflict from work-family responsibilities, they are likely to get involved in workplace accidents and a decrement in the performance of their safety behaviour. This is because exposure to work-family conflict affects an individual's ability to function well psychologically. More so, the stress produced by WFC may inhibit employees from achieving optimal attentiveness and putting the needed time and energy into their work (Chu et al., 2020). Fuß et al. (2008) found in their study that comparatively, paramedics in Germany have a significantly higher level of quantitative work demands. The researchers further reported that high values of WFC significantly correlated to higher rates of personal burnout, and behavioural and cognitive stress symptoms. In such an instance, work-family conflict can play a role in the severity of the relationship between occupational accidents and the quality of safety behaviour (Hefazi Torghabeh et al., 2021). Also, Chu et al. (2020) studied Work-family conflict, personality, and safety behaviours among high-speed railway drivers. The results discovered that safety compliance and safety participation was negatively related to work-family conflict. A study of 494 railway drivers reported that WFC negatively influences safety participation, and the relationship was partially mediated by job satisfaction (Wei et al., 2016).

From the analysis, the study hypothesizes that:

Hypothesis 1a: Work-family conflict is significantly and negatively related to safety compliance.

Hypothesis 1b: Work-family conflict is significantly and negatively related to safety participation.

Hypothesis 1c: Family-work conflict significantly and negatively relates to safety compliance. Hypothesis 1d: Family-work conflict significantly and negatively relates to safety participation.

2.3. Moderating Role of Family Supportive Supervisor Behaviour

According to Crain and Stevens (2018) family supportive supervisor behaviours as social support in the workplace, tends to lessen work-family conflict by replenishing work resources and alleviating the exhaustion of family resources. Therefore, in relation to the present study, when nurses feel supported in the workplace, they will feel cared for by others, and their psychological resources to cope with work stress would increase. Moreover, family-supportive supervisor behavior encourages workers to use organisational formal family-friendly policies without hesitation. In this study, it is hypothesized that family-supportive supervisor behavior as a job resource can alleviate workers' work-family conflicts, thereby helping them improve their safety behaviours. Unambiguously, when employees gain work-family resources from their supervisor and invest them into work and family domains, they can avoid resource loss and reduce work-family conflict; thereby improving their performance of safety behaviours. According to Hobfoll (1989) workplace support from supervisors can be viewed as a resource protector and act as a buffer to stressors.

According to Odle-Dusseau, Hammer, Crain, and Bodner (2016) family-supportive supervisors are viewed as supervisors who care about employees' work-family well-being by encouraging behaviours that resolve work-family interference and having empathy for their need for work-family balance. Many researchers have examined the influence of family-supportive supervisor behavior. For instance, a positive relationship has been found between family-supportive supervisor behavior and work-family balance, job satisfaction, performance and commitment. Thus, family-supportive supervisor behavior may become an essential resource in decreasing work-family conflict outcomes. Chu et al. (2020) have reported that in the construction industry, family-supportive supervisor behavior is also likely to reduce the workers' family-work conflict. That is, family-supportive supervisor behavior can help cushion the stressor from the family domain by providing advice on how to better fulfil family responsibilities and how to balance work and family life. Feeney and Stritch (2019) have indicated that employee take-up of leave policies, employer-supported access to child care, alternative work scheduling, and a culture of family support enhances work-life balance (WLB). From the above analysis, the study hypothesis that;

Hypothesis 2a: Family-supportive supervisor behavior would moderate the relationship between work-family conflict and safety participation.

Hypothesis 2b: Family-supportive supervisor behavior would moderate the relationship between work-family conflict and safety compliance.

Hypothesis 2c: Family-supportive supervisor behavior would moderate the relationship between family- work conflict and safety participation.

Hypothesis 2d: Family-supportive supervisor behavior would moderate the relationship between family-work conflict and safety compliance.

Figure 1 Illustrate the conceptual framework of study variables.

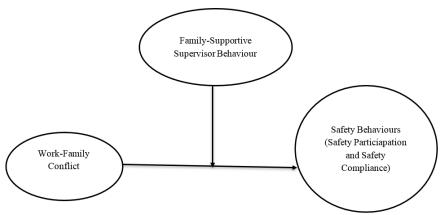


Figure 1. Conceptual framework.

3. METHODOLOGY

The study adopted the quantitative approach for conducting research and the design was a descriptive survey. Data collection was done through a cross-sectional field survey. To collect the primary data for the study's analysis, a closed-ended questionnaire was utilized. The rationale for adopting this approach was its cost-effectiveness and the fact that it allows large data to be collected from respondents within a short period. The target population for this study consisted of three hundred and thirty (330) nurses who are dual-earner couples from four (4) hospitals in the Central Region of Ghana. Drawing on the Krejcie and Morgan (1970) formulae for determining sample size, two hundred and twenty-six (226) dual-earner couples were purposively sampled. To ensure inclusivity, both male and female dual-earner couples were sampled. The researcher personally administered the questionnaires to the study participants making room for all the ethical considerations governing data collection.

3.1. Measures

Work-family conflict as the independent variable was measured in two directions (work-to-family and family-to-work) with a total of 10 items (Netemeyer, Boles, & McMurrian, 1996). Sample items for work-family conflict include; "The demands of my work interfere with my home and family life" and "The amount of time my job takes up makes it difficult to fulfil family responsibilities". Also, sample items for family-work conflict include; "The demands of my family or spouse or partner interfere with work-related activities" and "I have to put off doing things at work because of demands on my time at home". The items were rated on a five-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree).

Safety behaviours as the dependent variable were assessed using scales adapted from the instrument developed by Neal and Griffin (2006). The scale was measured on two dimensions namely; "I use all the necessary safety equipment to do my job" and "I use all the necessary safety equipment to do my job" (safety compliance) and "I promote the safety program within the organization" and "I put in extra effort to improve the safety of the workplace" (safety participation). The items were rated on a five-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree).

Family-supportive supervisor behaviour as the moderating variable was assessed with a nine-item scale adapted from Shinn, Wong, Simko, and Ortiz-Torres (1989). Sample items include; "I can rely on my supervisor to make sure my work responsibilities are handled when I have unanticipated non-work demands" and, "My supervisor asks for suggestions to make it easier for employees to balance work and non-work demands". The items were rated on a five-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree).

3.2. Method for Data Analysis

Entries of the data collected from the study were done using IBM (International Business Machines) SPSS (Statistical Package for Social Sciences) (V. 23.0), Smart PLS (Partial Least Squares) – 3.0 and Hayes (2017) PROCESS macro. The IBM SPSS was used to examine the descriptive statistics as well as the relationship that exists between work-family conflict and safety behaviour using Pearson correlational analysis. Further, the Smart PLS 3.0 was used to conduct the confirmatory factor analysis; factor loadings, the Cronbach alpha, composite reliability and the average variance extract of the constructs under study. Also, the Smart PLS 3.0 was used to assess the discriminant validity based on the Fornell- Larcker ratio criterion. The rationale for the adoption of these analyses is that it has the tenacity to correct biases of relationship estimates and is better at estimating complex models. The interactional effect of family supportive supervisor behaviour was tested using Hayes PROCESS Macro.

Table 1. Demographic characteristics of respondents.

Variable	Categories	Frequency (N)	Percentage (%)	
Gender	Female	136	60.18	
	Male	90	39.82	
Age	Below 30 years	122	53.98	
	30 - 39 years	62	27.43	
	40 - 49 years	42	18.58	
Marital Status	Single	144	63.72	
	Married	82	36.28	
Academic Qualification	Higher National Diploma	54	23.89	
	Bachelor's Degree	152	67.26	
	Master's Degree	20	8.85	
Working Experience	1-5 years	136	60.18	
	6-10 years	48	21.24	
	11 - 15 years	42	18.58	

Source: Field study (2022).

4. DATA ANALYSIS AND RESULTS

Table 2 shows the composite reliability (CR), Cronbach's alpha (CA), average variance extract (AVE) and discriminant validity of the variables(V) in the study. As suggested by Nunnally (1978) the reliability score of a construct should be above an acceptable threshold of 0.7. Hence, all the study variables of are reliable since they are above the threshold of 0.7. According to Hair, Ortinau, and Harrison (2010) and Fornell and Larcker (1981) average variance extract (AVE) and composite reliability (CR) are used to test the extent to which a construct is said to have convergent validity. As shown in Table 1, all the composite reliability scores of the constructs under study are above the acceptable threshold of 0.7 as suggested by Nunnally (1978). A critical look at the table also reveals that values of the average variance are above the acceptable threshold of 0.5 as recommended by Fornell and Larcker (1981).

 Table 2. Composite reliability, average variance extract, discriminant validity and cronbach's alpha.

Discriminant Validity										
Variables	CR	AVE	FSSB	FWC	SC	SP	WFC	CA		
FSSB	0.927	0.762	0.873					0.900		
FWC	0.853	0.551	-0.041	0.742				0.907		
SC	0.876	0.546	0.209	-0.180	0.739			0.882		
SP	0.823	0.615	0.248	-0.237	0.566	0.784		0.815		
WFC	0.898	0.639	0.144	-0.571	0.322	0.334	0.799	0.860		

Note: FSSB=Family-Supportive Supervisor Behavior FWC=Family-Work Conflict SC=Safety Compliance SP=Safety Participation WFC=Work-Family Conflict.

Table 3. Correlation among study construct.

No.		Mean	SD	1	2	3	4	5	6	7	8
1	Gender	1.60	0.494	-							
2	Age	1.88	0.75	0.262^{*}	-						
3	Marital Status	1.67	0.56	0.217*	0.687**	-					
4	WFC	3.73	1.08	0.179	0.412**	0.468**	-				
5	FWC	3.02	1.13	0.111	0.380**	0.437**	0.782**	-			
6	SC	4.29	0.82	0.257^{*}	0.151	0.299**	-0.397**	-0.297**	-		
7	SP	4.23	0.79	0.240*	0.279**	0.386**	-0.510**	-0.449**	0.770**	-	
8	FSSB	2.92	1.05	-0.134	-0.237*	-0.267*	-0.359**	-0.469**	-0.271*	-0.311**	-

Note: **. Correlation is significant at the 0.01 level. *. Correlation is significant at the 0.05 level. WFC=Work-family conflict FWC=Family-work conflict SC=Safety compliance SP=Safety performance FSSB=Family supportive supervisor behavior.

4.1. Test of Hypothesis

Table 3 shows that work-family conflict is negatively related with safety compliance (r= -0.397, p< 0.01) and safety participation (r= -.510, p< 0.01). This means that as work-family conflict among dual-earner couples increases, and there is the likelihood that safety participation and compliance will reduce and vice versa. These findings lend support to Hypothesis 1a and 1b of the study. Further, it was found that family-work conflict relates negatively with safety participation (r= -.297, p< 0.01) and safety compliance (r= -.449, p< 0.01) of dual-earner couples. This indicates that when family-work conflict reduces, there is a significant likelihood that safety participation and compliance will increase and vice versa. Hence hypothesis 1c and 1d of the study was supported.

In addition, the study tested the hypothesis that family-supportive supervisor behaviour will moderate the relationship between work-family conflict and safety participation and compliance. The results as presented in Table 6 revealed that family-supportive supervisor behaviour moderated the relationship between work-family support and safety participation ($\beta = -.1810$, t = -2.8365, p < 0.01). Hence hypothesis 2a of the study was supported (see Figure 4). The results in Table 7 also revealed that family-supportive supervisor behaviour moderated the relationship between work-family support and safety compliance ($\beta = -.2779$, t = -4.1253, p < 0.001), indicating support for hypothesis 2b of the study (see Figure 5). More so, the findings of the study as presented in Table 4 supported hypothesis 2c which stated that family-supportive supervisor behaviour would moderate the relationship between family-work conflict and safety participation ($\beta = -0.1259$, t = -1.9513, p < 0.05) (see Figure 2). Finally, the prediction that family-supportive supervisor behaviour would moderate the relationship between family-work conflict and safety compliance ($\beta = -0.2797$, t = -4.2233, p < 0.001) as presented in Table 5 was supported. Hence hypothesis 2d of the study was supported by the findings of the study (see Figure 3).

Table 4. The moderating effect of family-supportive supervisor behavior in the relationship between family-work conflict and safety participation.

safety participation.							
Variables	Coeff	Se	T	р	LLCI	ULCI	Decision
Constant	1.9587	0.7040	2.7822	0.0067	0.5582	3.3591	N/A
Gender	0.2327	0.1526	1.5248	0.1312	-0.0709	0.5362	N/A
Age	-0.0677	0.1350	- 0.5014	0.6174	-0.3363	0.2009	N/A
Marital Status	0.3003	0.1850	1.6228	0.1085	-0.0678	0.6684	N/A
FWC	0.5725	0.1999	2.8638	0.0053	0.1748	0.9701	N/A
FSSB	0.2861	0.2005	1.4270	0.1574	-0.1128	0.6850	N/A
$FWC \times FSSB$	-0.1259	0.0645	-1.9513	0.0441	-0.2542	0.0025	Moderation
	R9-0 3119	F-6 1799***					

Note: ***. Correlation is significant at the 0.001 level. WFC=Work-family conflict FWC=Family-work conflict SC=Safety compliance SP=Safety performance FSSB=Family supportive supervisor behavior N/A=Not Applicable.

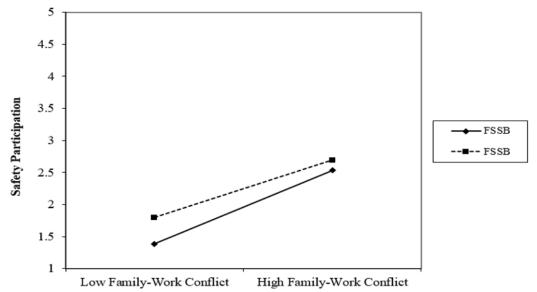


Figure 2. The Interactional effect of family-work conflict and family-supportive supervisor behaviour on safety participation. Source: Field Study (2022).

Table 5. The moderating effect of family-supportive supportive behavior in the relationship between family-work conflict and safety compliance.

Variables	Coeff	Se	T	р	LLCI	ULCI	Decision
Constant	1.1672	0.7226	1.6153	0.1101	-0.2703	2.6047	N/A
Gender	0.3027	0.1566	1.9327	0.0567	-0.0089	0.6143	N/A
Age	-0.2055	0.1386	-1.4826	0.1420	-0.4812	0.0702	N/A
Marital status	0.3371	0.1899	1.7748	0.0796	-0.0408	0.7149	N/A
FWC	0.9135	0.2052	4.4523	0.0000	0.5054	1.3217	N/A
FSSB	0.6908	0.2058	3.3564	0.0012	0.2814	1.1003	N/A
$FWC \times FSSB$	-0.2797	0.0662	-4.2233	0.0001	-0.4114	-0.1479	Moderation
R0-0 3360	F-6 0451***						

Note: ****. Correlation is significant at the 0.001 level. N/A(Not Applicable).

Source: Field Study (2022) Notes: Sample size =226 FWC=Family-Work Conflict FSSB=Family-Supportive Supervisor Behavior N/A=Not Applicable.

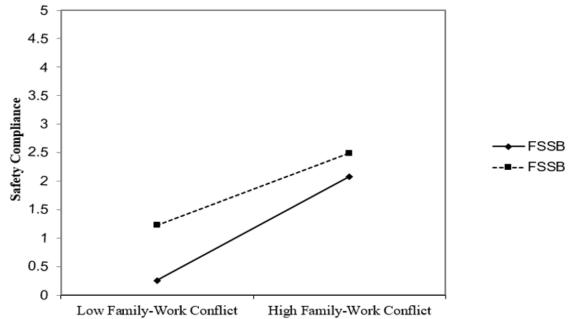


Figure 3. Interactional effect of family-work conflict and family-supportive supervisor behaviour on safety compliance. Source: Field Study (2022).

Table 6. The moderating effect of family-supportive supervisor behavior in the relationship between work-family conflict and safety participation.

Variables	Coeff	Se	T	P	LLCI	ULCI	Decision
Constant	0.9031	0.8078	1.1179	0.2669	-0.7039	2.5101	N/A
Gender	0.2010	0.1445	1.3903	0.1682	0.3942	1.1485	N/A
Age	-0.0795	0.1282	- 0.6198	0.5371	0.0879	1.0689	N/A
Marital status	0.2909	0.1760	1.6527	0.1022	-0.3079	-0.0541	N/A
WFC	0.7714	0.1896	4.0688	0.0001	-0.0866	0.4885	N/A
FSSB	0.5784	0.2466	2.3459	0.0214	-0.3346	0.1756	N/A
WFC×FSSB	-0.1810	0.0638	-2.8365	0.0057	-0.0592	0.6410	Moderation
	R2=0.3803	F=8.3864***					

Notes: Sample size = 226 WFC=Work-Family Conflict FSSB=Family-Supportive Supervisor Behavior N/A=Not Applicable. ***. Correlation is significant at the

Source: Field Study (2022).

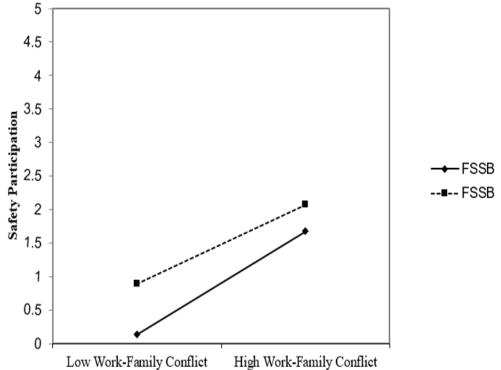


Figure 4. Interactional effect of work-family conflict and family-supportive supervisor behaviour on safety participation. Source: Field Study (2022).

Table 7. The moderating effect of family-supportive supervisor behavior in the relationship between work-family conflict and safety compliance.

Variables	Coeff	Se	t	P	LLCI	ULCI	Decision
Constant	0.1772	0.8528	0.2078	0.8359	-1.5193	1.8736	N/A
Gender	0.3020	0.1526	1.9795	0.0511	-0.0015	0.6056	N/A
Age	-0.2220	0.1354	- 1.6400	0.1048	- 0.4913	0.0473	N/A
Marital status	0.3487	0.1858	1.8770	0.0641	-0.0209	0.7183	N/A
WFC	0.9837	0.2001	4.9155	0.0000	0.5856	1.3819	N/A
FSSB	0.9288	0.2603	3.5681	0.0006	0.4109	1.4466	N/A
WFC×FSSB	-0.2779	0.0674	- 4.1253	0.0001	-0.4119	-0.1439	Moderation
	$R^2 = 0.3691$	F=7.9940***					

Notes: Sample size = 226 WFC=Work-Family Conflict FSSB=Family-Supportive Supervisor Behavior N/A=Not Applicable. ***. Correlation is significant at the 0.001 level. Source: Field Study (2022).

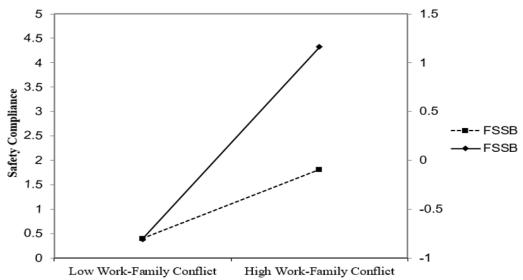


Figure 5. Interactive effect of work-family conflict and family-supportive supervisor behaviour on safety compliance. Source: Field Study (2022).

5. DISCUSSION

It was found that employee work-family conflict and family-work conflict both negatively predicted safety behaviours (safety participation and safety compliance). As hypothesized in the study. This finding is in line with several past studies conducted in different settings and geographical jurisdictions (e.g. (Chu et al., 2020; Hefazi Torghabeh et al., 2021)) that mismatch of roles (WFC, FWC) may result in negative work outcomes. For instance, in a study of high-speed railway drivers, Chu et al. (2020) also discovered that work-family conflict negatively predicted safety compliance and safety participation. Additionally, Wei et al. (2016) have reported that work-family conflict negatively influences safety participation. These findings are in line with psychologists' opinion that in-role conflicts between work and family not only disturb employees' mental health but also lead to adverse work-related behaviour (Ahmad & Islam, 2019). This is suggestive that employees who are not happy (because of their family and work demands interference) are less likely to complete their tasks diligently (Ahmad & Islam, 2019; Kalliath & Kalliath, 2013). Because the work of nurses involves direct care of human life, any situation that affects the tendency for the safe discharge of their obligations must be the concern of any hospital. This calls for management to means of lessening work and family imbalances to increase the safety compliance and participation of its workforce.

According to Crain and Stevens (2018) family-supportive supervisors recognize their employees' non-work lives and help to facilitate the managing of work and non-work responsibilities. As proposed in the study hypothesis, the results found to support that family supportive supervisor behaviours buffers the linkage between family-work conflict and safety behaviours(safety compliance and safety participation). This calls for the need for both supportive workplace policies and support from supervisors which are essential for employees to cope with their conflicting responsibilities between work and non-work areas. While organizational and national policy reforms are non-negotiable, the changing characteristics (e.g., increasing numbers of female workers, individuals with multiple caregiving responsibilities) of the 21st-century employees require supportive supervisor behaviours for non-work life in these modern times. The findings of the study are in line with other studies (e.g. (Chu et al., 2020; Feeney & Stritch, 2019)). For instance, in the construction industry, family supportive supervisor behaviours (FSSB) were found to reduce workers' FWC (Chu et al., 2020). Family supportive supervisor behaviour in the Ghanaian healthcare context could be a tactical coping resource for aiding employees to deal with the dysfunctional effect of perceived WFC and thus reduce the negative impacts on employees' safety behaviour; safety participation and compliance. Based on the transactional theory of stress and coping (Lazarus & Folkman, 1984) the study provides an original analysis of the

moderating role of family support from supervisors in minimizing the effect of work-family and family-work conflict on employees' behaviour.

5.1. Managerial Implications

The outcomes of this study provide relevant guidance to hospital administrators and managers. Since the findings indicated a negative relationship between work-family conflict and safety behaviour, managers should recognize that work and family role interference may spill over and affect nurses' ability to conduct their responsibilities at the workplace safely. Since the work of nurses is patient-oriented, effort must be made to reduce the experiences of interferences in these two important domains of the health worker. Such effort may include human resource management programs which enhance the nurses' skills and ability to effectively perform their roles as expected of them at home and in the workplace. Also, family supportive supervisor behaviours moderated the linkage between family-work conflict and safety behaviour. Thus, managers must equip supervisors with competencies to assist nurses in reducing strains from work and family roles. Moreover, work-life balance policies (onsite child-care centres, flexible work schedules and hours) must be instituted to enable employees to function well in the domains of both work and family responsibilities.

5.2. Conclusion, Limitations and Direction For Future Research

The study has provided relevant insight into vital issues connected to work-family and family-work conflict and its related work outcomes as well as family supportive supervisor behaviours among nurses in Ghana. This study's findings demonstrated that WFC has detrimental effects safety behaviour and the connection is moderated by family supportive supervisor behaviours in organisations. As indicated earlier, though the influence of WFC on many organisational outcomes has been studied, its relationship with safety behaviours is under-explored. Thus, the spillover effects of WFC on safety behaviours need to be studied in various cultural settings and different organisations in future investigation to progress the theoretical knowledge of how WFC relates to workers' safety behavior. Additionally, all the study participants were from hospitals. Thus, our findings may not be generalized to other organizations (e.g. manufacturing and other service industries. Therefore, direction for future studies based on samples from other companies and industries is essential to resolve the issue of generalization. Moreover, social support could emanate from both family and the workplace. The current study only considered support from the workplace. Future research could consider support from both the family and the organisation to analyze its influence on the linkage between WFC and safety behaviour.

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