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## Incidence of Work-Family Conflict, Stress and Problem Drinking: Apparel Manufacturing Sector Male Employees in Sri Lanka

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### සංකේපය

බොහෝ විද්‍යාඥයින් විසින් වෘත්තීමය ජීවිතය සහ ගෘහ ජීවිතය අතර ඇති වන ගැටුම්වල නිශේධනාත්මක ප්‍රතිඵල පිළිබඳ අධ්‍යයනයන් සිදු කරනු ලැබ ඇත. එසේ වුවත්, වෘත්තීමය සහ ගෘහ ජීවිතයේ ගැටුම් සහ මත්පැන් පානය කිරීමේ ගැටලුව පිළිබඳව ප්‍රමාණවත් ලෙස අධ්‍යයන සිදු කර නොමැත. එබැවින්, ආතතිය අවම කිරීමේ න්‍යාය මත පදනම්ව, මත්පැන් පානය කිරීම මගින් ආතතියේ හානිකර බලපෑම් අඩු කරනු ලබන්නේ ඇයි යන උපකල්පනය මත පිහිටා මෙම අධ්‍යයනය සිදුකරනු ලැබේ. වෘත්තීමය සහ ගෘහ ජීවිතයේ ගැටුම මානසික ආතතිය වැඩි කිරීමට හේතු වන අතර එමඟින් ගැටළුකාරී, මත්පැන් පානය කෙරෙහි යොමු වන්නේ යැයි උපකල්පනය කරනු ලබයි. එමනිසා, මෙම පර්යේෂණය මධ්‍යස්ථ-මැදිහත්වීමේ ආකෘතියක් මත පදනම්ව වෘත්තීමය සහ ගෘහ ජීවිතයේ ගැටුම් සහ මත්පැන් පානය පිළිබඳ අතර සම්බන්ධතාවය පරීක්ෂා කරයි. ශ්‍රී ලංකාවේ ඇඟලුම් නිෂ්පාදන සමාගමක පිරිමි සේවකයින් 200 ක්, මත්පැන් පානය කරන 100 ක් සහ මත්පැන් පානය නොකරන සේවකයින් 100 ක් ආවරණය කර ඇත. ව්‍යුහාත්මක සමීකරණ ආකෘති (Structural Equation Models) මගින් වෘත්තීමය-ගෘහ ජීවිතයේ ගැටුම මත්පැන් පානය කෙරෙහි ධනාත්මකව බලපා ඇති බව සොයා ගන්නා ලදී. වෘත්තීමය-ගෘහ ජීවිතයේ ගැටුම් සහ මත්පැන් පානය අතර සම්බන්ධය ආතතිය හා විත්තවේගී කේන්ද්‍රීයව ප්‍රශ්න වලට මුහුණ දීමේ (Emotion-focused coping) යාන්ත්‍රණයන් මගින් තීව්‍ර කර ඇති බව සොයා ගන්නා ලදී. එපමණක් නොව, ආතතිය අඩු කිරීමේ අපේක්ෂාව මත්පැන් භාවිතය වැඩි කරයි. මෙම සොයාගැනීම් ශ්‍රී ලංකාවේ පෞද්ගලික අංශයේ වෘත්තීමය -ගෘහ ජීවිතයේ ගැටුම් සහ මත්පැන් පානය අතර ඇති සම්බන්ධය නිසි ලෙස වටහා ගැනීමට උපකාරී වේ.

මූලාස පද: වෘත්තීමය-ගෘහ ජීවිතයේ ගැටුම්, මත්පැන් පානය කිරීමේ ගැටලුව, ආතතිය, ආතතිය අවම කිරීමේ න්‍යාය, ශ්‍රී ලංකාව

## **1. Introduction**

Two major areas in adult life are work and family. Work-family involvement and family-work involvement, also known as work-family conflict (WFC) is a particularly significant stress-related concept to consider as a possible impact on drinking behaviour (Frone, Work stress and alcohol use, 1999; Grzywacz & Bass, 2003). According to the literature, WFC is an identified reason for negative mental conditions for alcohol consumption (Williams & Alliger, 1994). Alcohol consumption is a significant public health issue worldwide (WHO, 2014). Problem drinking is the leading reason for mortality and morbidity in adolescence and early adulthood (Marmet, Rehm, Gmel, Frick, & Gmel, 2014). Problematic drinking by employees is a significant social policy problem because it can negatively affect the safety and efficiency of employees (Allen, Herst, Bruck, & Sutton, 2000). Alcohol consumption has been correlated with many negative outcomes such as non-attendance, work performance decrease, workplace safety matters, worker turnover, and amplified healthcare costs (Vasse, Nijhuis, & Kok, 1998). The work-stress model indicates that psychological issues for workers and problematic health-related habits such as alcohol use may be due in part of negative working conditions (Frone, Work stress and alcohol use, 1999). Many studies have been found negative effects of work-family conflict on alcohol use. However, little research found the relationship between work-family conflict and problem drinking.

Various reasons affect the amount and the frequency of alcohol use. Social and environmental factors are also influential elements of alcohol use and alcohol addiction, as such friends, living environment, genetic propensity, stress, job types, gender, religion, culture race, and ethnicity (Edwards G., 2000). Alcohol use generally starts in adolescence (Newes-Adeyi, Chiung, & Williams, 2005). Koeppela et al, (2015) state that those who start drinking at an early age consume more alcohol in adulthood than those who start drinking later in adolescence. It is indicated that alcohol use rates among employees are greater than their same-aged adolescents who are not employed (Wechsler, et al., 2002). According to Oster-Aaland et.al. (2007), people drink in different situations and settings. Around 5.9 percent of deaths are due to alcohol consumption worldwide (WHO, 2014). There is a strong positive relationship between alcohol use and alcohol use related negative consequences. Therefore, it is very essential to comprehend WFC and problem drinking.

The word problem drinker refers to those people who, as a result of their alcohol consumption, have problems with their lives. The term problem drinking is used in some definitions to refer to persons who have not yet developed full-blown alcoholism, although it most often applies to all forms of substance misuse (Edwards G., 2000). There is a misconception associated with the term alcoholism, even by relating to their problems, there are also people who use the term problem drinking. In general, problem drinking can be defined as excessive use of alcohol or alcohol addiction (Edwards G., 2000). Alcohol consumption among workers

is a significant social policy matter as it adversely affects workers' wellbeing and their efficiency (Allen, Herst, Bruck, & Sutton, 2000). Consequently, this research study tests the association between work-family conflict and problem drinking based on a moderated mediation model.

## **1.2 Work-Family Conflict**

Work-family conflict (WFC) occurs when a person encounters conflicting demands between work and family roles, making it more difficult to engage in both roles (Grzywacz & Bass, 2003). WFC arises when family or work clash with the demands of work requirements or family requirements (Greenhaus & Beutell, 1985). WFC is defined as the degree to which work to family or family to work influencing negatively (Greenhaus & Beutell, 1985). Hence, WFC can be defined as mismatched forces arising concurrently from the work and family functions. Excessive levels of work-family conflict (one or both ways) are related to negative outcomes for employees, families, and organizations that they work (Byron, 2005). Theoretical models have recognized three subscales of WFC, time-based, strain-based, and behavior-based WFC. Time-based WFC pressures related to membership in one role can make it difficult to fulfil with anticipations from another role. WFC is based on strain, where pressure effects such as discomfort and tiredness arise in one function, overlap with involvement in the other role. Behavior-based WFC, which particular behaviors imposed in one role which inconsistent with behavioral norms in the other role (Greenhaus & Parasuraman, 1986).

Opposite of WFC is work-life balance, which is widely accepted that a good work-life balance is significantly necessary for organizational economic stability and family welfare and economy. Dealing with job responsibilities and demands arising from small children's care are not an easy tasks (Darrow, Russell, Cooper, & Mudar, 1992). A healthy work / non-work balance is widely accepted to be increasing value for the economic viability of establishments and the health of families (Collins, Parks, & Marlatt, 1985). WFC is not only a social issue, but also it has negative impacts in different ways on mental and physical health. Literature indicates that WFC is associated with hypertension, coronary heart disease, and cancer (Edwards & Rothbard, 2005). It also associates with job and life dissatisfaction, depression, and anxiety (Greenhaus & Parasuraman, 1986).

## **1.3 Work-Family Conflicts and Problem Drinking**

Many pieces of researches have found a connection between WFC and alcohol use among adolescents (Koeppela, Bouffardb, & Koeppel-Ullrichc, 2015). Previous findings have found that employees with higher incidents of WFC, such as not being able to perform family roles due to work-related responsibilities or vice versa, experience higher levels of tension prefer to drink more and higher rates than people with fewer incidents of WFC (Frone, 2000). Authors argue that the connection between stress and alcohol use can be explained by the emotion

regulation assumptions theories (Lang, Patrick, & Stritzke, 1999). According to Cooper (1994), people use alcohol to conquer certain changes in effect, these expected changes could be either positive or negative. Drinking motives are reasons for problem drinking that are considered to be significant predictors of alcohol consumption (Kuntsche & Kuntsche, 2019). Furthermore, the source of expected change could be either an internal emotional state or external social environment (Kuntsche & Kuntsche, 2019). Based on two dimensions, positive (internal and external) and negative (internal and external), Cooper (1994) assumed that there are four separate intentions to drink: enhancement intention (positive, internal), social intention (positive, external), coping intention (negative, internal), and conformity intention (negative, external). According to this intention model of alcohol use, includes the social factors (social intention), enhancement factors (enhancement intention), coping factors (coping intention), and conformity factors (conformity intention). Drinking motivations are frequently viewed as static predictors of drinking activities, separated from the sense in which choices are taken about using alcohol (O'Hara, Armeli, & Tennen, 2015), this is fairly troublesome, as drinkers typically report being affected by factors such as drinking place, the involvement of others, and external behavioral contingencies (Bachrach, Merrill, & Bytschkow, 2012).

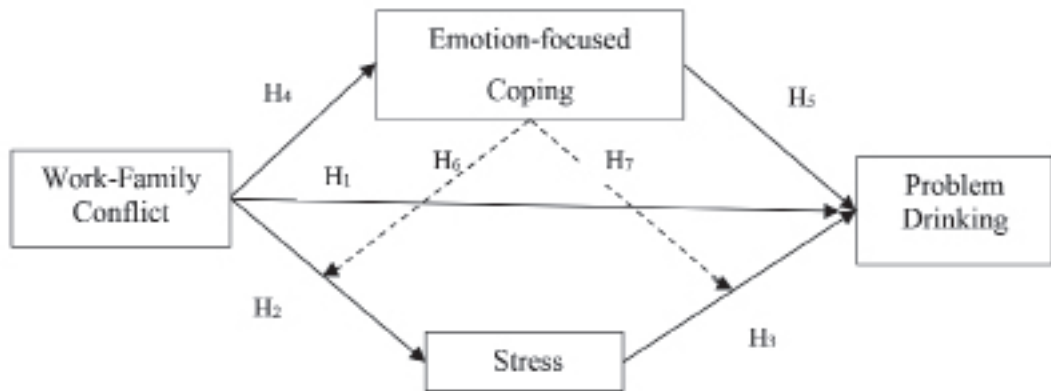
McCarty and Kaye (1984) found four main reasons for alcohol use, they are avoidance, social reasons, sensation-seeking, and pleasure. Drinking for avoidance which is described as drinking to avoid negative effect was the main reason for drinking alcohol. According to the literature, problem drinkers are motivated to drink in terms of negative reinforcement such as stress reduction, while social drinkers are motivated to take alcohol in terms of positive reasons such as celebration and sociability (Farber, Khavari, & Douglass, 1980). Beliefs that alcohol would reduce stress are one of the main reasons for taking alcohol (Brown, 1985). It explains that the emotional bond is significant to understand individual behavior. Literature indicates that the quality of the family relationship during adolescence determines social and emotional wellbeing (Pesola, Shelton, Heron, & M., 2015). Family conflict tends to lead to problem drinking across ethnic groups and cultures (Bray, Adams, Getz, & Baer, 2001). Thus, family conflict as well as work demand leads to alcohol use across ethnic groups and cultures.

#### **1.4 Tension Reduction Theory & Problem Drinking**

The Tension Reduction Theory (TRT) explains the theoretical bases of alcohol use. Tension reduction beliefs may be a potential mediator between WFC and problem drinking. Tension reduction beliefs mean to the views that drinking alcohol will decrease tension, offer relaxation, and distract a person from distressing problems (Moore, Sikora, Grunberg, & Greenberg, 2007). According to the standard of tension reduction theory, people tend to drink alcohol because of its stress-reducing protentional (Cappell & Greeley, 1987). It implies that when people feel discomfort or negative feelings, people may be more likely to drink. Research has demonstrated, along with this hypothesis, that work-family tension is related to increased

intake of alcohol (Wolff, Rospenda, Richman, & Liu, 2013). Since work-family tension represents the general well-being between work and family life, it has been hypothesized as an important cause of stress that can impact the well-being of a person (Greenhaus & Parasuraman, 1986).

Cappell & Herman (1972) found that alcohol intake reduces stress and people drink alcohol to take advantage of its stress-reducing effects. The TRT predicts that tension relief is an essential component of motivation for alcohol consumption. Tension is commonly believed to be one of the significant reasons for alcohol use (Cooper, 1994). Reduction of self-awareness and redirection of one's attention away from tension creation signals and towards immediate signals are the mechanisms by which alcohol can reduce tension (Steele & Josephs, 1988). Besides, it is assumed that stressed individuals can attempt a quick escape from stresses, which can lead them to use maladaptive behaviors, such as the use of alcohol (Baumeister & Scher, 1988). As an application of the theory of tension reduction, WFC has been suggested as the main reason for alcohol use among employees (Frone, 1999). The Theory of Tension Reduction forecasts that high levels of stress situations encourage higher levels of alcohol use than the low levels of stress situations (Armeli, Carney, Tennen, & Affleck, 2000). Hence, it is proposed the following hypothesis:



**Figure 01: Conceptual Framework.**

*Note: Solid lines denote hypothesized direct effects; broken lines denote hypothesized moderating effects.*

- H<sub>1</sub>. WFC positively and significantly impact on Problem Drinking
- H<sub>2</sub>. WFC positively and significantly impact on Stress
- H<sub>3</sub>. Stress positively and significantly impact on Problem Drinking
- H<sub>4</sub>. WFC positively and significantly impact on Emotional-focused Coping
- H<sub>5</sub>. Emotional-focused Coping positively and significantly impact Problem Drinking

- H<sub>6</sub>. Emotional-focused Coping negatively and significantly intensify the relationship between WFC and Stress
- H<sub>7</sub>. Emotional-focused Coping negatively and significantly intensify the relationship between Stress and Problem Drinking

## **2. Participants and Methods**

### **2.1 Participants**

This study was based on a sample survey conducted with 200 private sector male employees. The respondents were selected randomly from three apparel manufacturing company in Western Province in Sri Lanka. It comprises 20 to 60 years middle managers, 100 problem drinkers, and 100 normal respondents as a control group. The control group was consistent with the problem drinkers' group for a job position, level of education, marital statuses, age, and socioeconomic background. The basic background of the study population is as follows; Marital status: married 62.5% unmarried 37.5%, Education: University degree, or above 21.5%, Advance Level 78.5%. The problem drinkers were identified based on the frequency and quantity. Hence, the problem drinkers' group was comprised of those who said they take alcohol "every day or almost every day" and two or more shorts per day within last 12 months.

### **2.2. Measures**

#### **2.2.1 Work Family Conflict**

Work-Family Conflict (WFC) was assessed using the Work-Family Conflict Scale developed by Kelloway et al., (1999). This measurement is a 22-item self-assessed scale. It has four dimensions of WFC, comprising both the time-based and the strain-based, Work to Family Conflict (WFC) intervention and Family to Work Conflict (FWC) intervention. Therefore, the four subscales, sample question of strain-based WFC is "After work, I have little energy left for things I need to do at home", and time-based sample question is "Job demands keep me from spending the amount of time I would like with my family". Strain-based FWC sample question is "Things going on in my family life make it hard for me to concentrate at work", and time-based FWC sample question is "I would put in a longer workday if I had fewer family demands". All items will be rated on a 4-point Likert scale ranging from 1 (never) to 4 (always).

#### **2.2.2 Problem Drinking**

Alcohol consumption will be measured using the *Daily Drinking Questionnaire* (DDQ) developed by Collins et al., (1985). The DDQ is a self-report measure of drinking frequency and quantity. The subjects were asked to estimate the average number of drinks consumed each day within last the 12 months. The answer categories for measuring frequency were 'never'

(coded as 0), 'less than once a month' (1), 'once a month' (2), 'once a week' (3), and 'every day or almost every day' (4). The answer categories for measuring quantity were 'zero' (0), 'one' (1), 'two' (2), 'three' (3), 'four' (4), 'five' (5), 'six' (6), seven to nine (7) and ten or more drinks (8). The DDQ measure has been applicable in recording changes in drinking behavior in other studies (Marlatt, Baer, & Larimer, 1995).

### **2.2.3. Cope Mechanism**

Cope Inventory was introduced by Carver, Scheier & Weintraub (1989) to evaluate the distinctive methods that people respond to stress. The Cope Inventory is a multidimensional coping inventory to measure the distinctive ways that people deal with stress. The conceptually different five aspects are used to measure problem-focused coping. Namely, 1) Active coping (the practice of taking active action to remove the stressor or reduce its effects), 2) Planning (thinking about how to cope with a stressor), 3) Avoidance of competitive tasks (putting aside other tasks, attempting to prevent becoming distracted by other events), 4) Restraint Coping (waiting until there is a reasonable chance to act, and not behaving prematurely), 5) Looking for Instrumental Social Help (for advice, help or information). The conceptually different five aspects are used to measure the Emotion-Focused coping. Namely, 6) Seeking Emotional Social Support (the desire to be thankful by receiving emotional social support), 7) Positive Reinterpretation (managing feelings of anxiety rather than engaging with the stressor), 8) Acceptance (accepting the truth of a stressful state), 9) Denial (reducing stress and dealing with stress), 10) Turning to Religion (when they are stress turn to religion). Three scales assess coping reactions that are arguably Less Helpful, 11) Focus on & venting emotions (Wanting to express feelings), 12) Behavioural Disengagement (Giving up trying to deal with the problem), 13) Mental disengagement (Distracting self from thinking about the problem). The other two scales assess Recently Developed aspects of coping responses, 14), Substance use (Using alcohol or drugs to reduce distress), 15) Humor (Making light of the problem).

### **2.2.4 Work Stress**

Stressful Life Events Scale (SLES) is used to measure the major stressful life events. It includes eight social and personal finance related domains that cover all the major stressful life events of a person (Rahe, Ryman, & Ward, 1980). They are, 1, marriage, 2, children leaving home, 3, divorce, 4, widowhood, 5, death of loved, 6, employment promotion, 7, important purchases, and 8, retirement. These were ranked in Holmes' and Rahe's Social Readjustment Scale as important life events that relate to major areas affecting adult life. Stress full life events for the past 12 months were asked and coded as variables that were dichotomous as yes or no.



### 3 Results

#### 3.1 Reliability and Validity of Scales

Cronbach's Alpha Coefficient should be analysed to check the reliability of the measurements used in the analysis. Cronbach's Alpha Coefficient of a scale for valid calculation should be above .7 (Hair, Anderson, Tatham, & Black, 2003). The Coefficient of all the scales that were used in this study is roughly greater than 0.7, the optimal level (Table 01). It suggests that each variable used in the study has internal reliability.

#### 3.2 Structural Equation Models (SEM)

Confirmatory factor analysis was performed to confirm the validity of each factor used in this study. For an optimal model fit of confirmatory factor analysis, the values of *Adjusted Goodness of Fit Index (AGFI)*, *Goodness of Fit Index (GFI)*, *the Tucker-Lewis Coefficient (TLI)*, and *The Comparative Fit Index (CFI)* should be above .9. The value of *Root Mean Square Error of Approximation (RMSEA)* should be less than .05, and  $\chi^2/df$  should be less than 4.5. The findings in Table 01 show that all values are above the threshold level, implying that the data is best represented by the adopted model.

**Table 01:**  
**The Reliability Test Model fit**

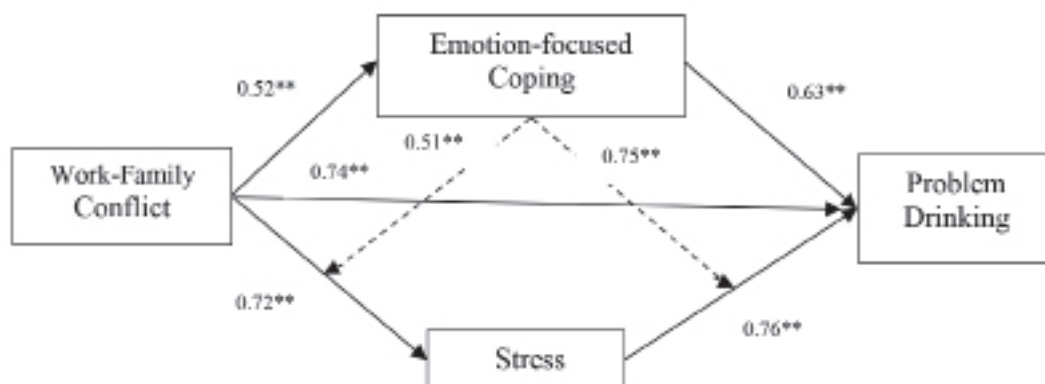
Variables	Cronbach's Alpha	$\chi^2/df$	RMSEA	GFI	AGFI	CFI	TLI
Work-Family Conflict	0.873	3.216	0.043	0.952	0.932	0.923	0.952
Problem Drinking	0.881	4.001	0.041	0.924	0.911	0.943	0.943
Emotion-focused coping	0.834	3.221	0.035	0.963	0.924	0.955	0.953
Stress	0.953	2.321	0.043	0.896	0.897	0.892	0.946

Pearson's correlation analysis was conducted to see the relationship between Work-Family Conflict, Problem Drinking, Emotion-focused coping, and Stress. The recommend optimal range for the inter-item correlations should be between .2 and .4 (Hair, Anderson, Tatham, & Black, 2003). Hence, correlations between study variables are above of optimal level of reliability. Results indicate that all the variables are significantly correlated with each other.

The hypotheses were tested based on Structural Equation Modeling (SEM), using AMOS to explore the influence of Work-Family Conflict, Emotion-focused coping, and Stress on Problem Drinking. The standardized estimates of the variables are given in Figure.2. The estimates of the entire model fit are significant in all cases. The model has given outstanding appropriateness to the data with all measurements exceeding recommended levels for acceptable model fit (Yoshioka & Misawa, 2013). *AGFI* (Adjusted Goodness of Fit Index)=0.762, *CMIN/*



DF (Minimum Discrepancy), =3.136, GFI (Goodness of Fit Index)=0.856, RMR (Root Mean square Residual) =0.326, CFI (the Comparative Fit Index)=0.867, IFE (Incremental Fit Index)= 0.862, (Root Mean Square Error of Approximation) = 0.054, TLI (the Tucker-Lewis Coefficient) = 0.836, RMSEA. The values given in the model indicate a good fit to the data.



**Figure 2 Standardized Estimates of the Study Model.**

The values of standardized estimates of the path analysis from WFC towards Problem Drinking is positively significant,  $b = 0.74, p < .00$ . However, the path from WFC towards Stress also is positively significant,  $b = 0.72, p < .00$ , whereas the path from Stress towards Problem Drinking is positively significant,  $b = 0.76, p < .00$ . The path from WFC towards Emotional-focused Coping is positively significant,  $b = 0.52, p < .00$ . The impact of Emotional-focused Coping on Problem Drinking is  $b = 0.63, p < .00$ . Relationship between WFC and Stress is intensified,  $b = 0.51, p < .00$ , whereas the relationship between Stress and Problem Drinking is  $b = 0.76, p < .00$ .

The peruse of this research study was to find out the impact of WFC on problem drinking and the mediation effect of stress between WFC and problem drinking. The results indicated that during last the 12-month period, before problem drinking, the incidence rate of WFC among problem drinkers was statistically higher than normal respondents ( $P < .0001$ ). Statistical data is given in Table 02.

**Table 02:  
Number of WFC incidents among alcohol addicts and non-addicts for last 12 months**

	Problem Drinkers (n = 100) M (SD)	Non-drinkers (n = 100) M (SD)	P Value
Number of WFC incidents	6.56 (3.83)	3.92 (3.28)	.0001

Regarding the mediation effect of stress between WFC and problem drinking, the results indicated that compared to non-drinkers, the problem drinkers have significantly used emotion-focused coping methods. It means that they have not tried to find out the course of the problem and control them ( $P < .01$ ). Those who cope with WFC based on problem-focused coping methods do not require dealing with drinking or will not raise their intake of alcohol above their normal levels. The problem drinkers have more significantly used emotion-focused coping method ( $P < .0001$ ) which tends to use alcohol as a coping mechanism to escape stresses (Table 03).

**Table 03.**  
**Different Types of Coping Methods dealing with Stress among**  
**The addict and The non-addicts Groups**

Type of coping Methods	Problem Drinkers (n = 100) M (SD)	Non-drinkers (n = 100) M (SD)	P Value
Problem-Focused	10.43 (3.85)	13.13 (3.01)	.01
Emotion- Focused	11.34 (3.49)	12.02 (3.22)	.01
Less Useful	7.52 (2.87)	3.60 (2.17)	.001

#### 4. Discussion

The objective of this study was to investigate whether there is a positive significant impact of the incidents of WFC on problematic alcohol use among apparel manufacturing male employees in Sri Lanka. The results indicated that during last the 12-month period, before problem drinking, the incidence rate of different WFC among problem drinkers was statistically higher than non-problem drinkers. The mediation effect of stress between WFC and problem drinking, the results indicated that compared to non-problem drinkers, the problem drinkers have not significantly used problem-focused coping methods ( $P < .01$ ). This complements with the finding of Chandrasekara W.S., (2019), that extraversion personality has a negative significant association with alcohol addiction. Thus, the relationship between WFC and alcohol consumption can be influenced by coping motives, so that WFC is related to the level of alcohol usage to deal with stress and depressive feelings. Accord with Chandrasekara W.S., (2018), stress plays a major role in day to day life. This suggests that the WFC is indirectly connected (through dealing with drinking) to high alcohol intake, but there is no direct connection between WFC and alcohol use. This research gap is amazing because motives for drinking are commonly described as the final decision whether to drink or not to drink and are thus believed to be the most strong reason for drinking (Kuntsche, Knibbe, Gmel, & Engels, 2005).

Findings indicate that employees who are having more incidents of WFC tend to have more stress and as an emotion-focused coping method, they tend to use more alcohol to deal

with the negative issues and problems connected to WFC. According to the findings, alcohol addicts have more significantly used emotion-focused coping method which tends to use alcohol as a coping mechanism to escape from stresses. Therefore, it is recommended to teach them some skills such as stress reduction, stress adjustment, and stress toleration strategies.

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