



# Overview of Work-Life Balance for Working Mothers Who Have Early Childhood During the COVID-19 Pandemic

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**Abstract.** Working mothers have many challenges because there are risks that must be faced. Mothers who have multiple roles often feel sad and guilty, because they can't accompany their children's development process due to work. Early childhood is often considered unruly and problematic phase. Parents consider children at this age to be a difficult and problematic period. To prevent the spread of COVID-19, the government has issued various policies for determining work from home (WFH) for companies. One of the challenges for working mothers while doing WFH is that it's difficult to achieve work-life balance. Work-life balance is an individual's view of the balance and engagement between work and personal life. This study aims to describe the work-life balance of working mothers who have early childhood during the COVID-19 pandemic. This quantitative research with descriptive method collects data from participants using a Work/Nonwork Interference and Enhancement Scale questionnaire. All data collected were analyzed using descriptive statistics and the Shapiro-Wilk normality test. The characteristics of the participants are working mothers, doing work from home, work from office, or mixed (doing both) policies, having early childhood child(ren) (0–8 years old), and domiciled in DKI Jakarta. To see a picture of the work-life balance of the research participants, the sample size used in this study was 127 participants. In general, for WIPL domain, 49.61% of participants were in the high category, while 50.39% were low. For PLIW domain, 58.27% of participants were in the high category, while 41.73% were low. Participants who were in the high category on the WEPL domain were 51.18%, and 48.82% were low. Lastly, participants who are in the high category on the PLEW domain by 51.97%, and the rest are in the low category (48.03%).

**Keywords:** COVID-19 pandemic · early childhood · work-life balance · working mother

## 1 Introduction

As time goes by mothers now play a dual role, namely as workers inside and outside the home [1]. Working mothers have greater challenges when compared to mothers who do not work, because there are risks that must be faced, such as abandonment of family due to work, the onset of role conflicts, time consumed due to work, and have less time

with child(ren) [2]. Basically working mothers are more conflicted than men, because by playing a dual role women have different roles in the family [3]. Furthermore, mothers who play a dual role are also often feel sad and guilty because they cannot accompany the child's development due to work.

According to the Badan Pusat Statistik (2020), working mothers have the potential to provide improper care for their children when compared to mothers who are not working [4]. This is shown by data that states that 5 out of 10 early childhoods get improper care because they have a working mother (Badan Pusat Statistik, 2020). Early childhood is a child aged 0–8 years old [5]. Early childhood is often considered as a difficult phase to manage and problematic, this happens because the child is in the process of developing a personality that demands freedom [6]. At this stage of development, parents consider children at this age to be a difficult and problematic stage [7]. During the period of early childhood development, mother is expected to play an active role because the child will need a stable and consistent attachment to build trust and security in child since childhood.

In March 2020, the President of the Republic of Indonesia announced the first positive case of COVID-19 that appeared in Indonesia. Coronavirus or often called COVID-19 is an infectious disease caused by the SARS-CoV-2 virus. To prevent the contagion of COVID-19 that has been widespread since the beginning of 2020, the government issued various policies and rules, one of them is the establishment of work from home (WFH) for companies. This makes workers who previously worked in the office (work from office) must adjust themselves due to the COVID-19 pandemic. In addition to doing WFH or WFO fully, there are companies that do both in turn. In this study when workers performed WFH and WFO it was alternately referred as mixed. That the change from work from office (WFO) to work from home (WFH) is a change in work culture that must be faced by workers during the COVID-19 pandemic [8].

Related with the ongoing COVID-19 pandemic, states that the dual role performed by working mothers at the same time during the COVID-19 pandemic makes their time and energy they have reduced [9]. The dual role borne by working mothers becomes greater with the WFH policy applied [10]. One of the studies related to the impact of WFH on working mothers is a study conducted in Ende, NTT Preliminary survey results state that after being at home for two weeks, as many as 75% of women feel overwhelmed and challenged [11]. This is because there is work that accumulates along with tasks as a wife and mother that must be prioritized. In addition, there are different situations when the situation is "normal" or before the COVID-19 pandemic. Another challenge for working mothers during WFH is that it is difficult to achieve work-life balance [10] (Santoso, & Santosa, 2020).

Defined work-life balance as the extent to which an individual is equally engaged in—and equally satisfied with—his or her work role and family role. Defines work-life balance as an individual perception based on how balanced a person's work and personal life are [12]. From several existing definitions of work-life balance, researchers defined work-life balance as an individual's view of the balance and engagement between work and personal life. There are four domains of work-life balance, namely work interference with personal life, personal life interference with work, work enhancement of personal life, and personal life enhancement of work.

That work-life balance acts as a deterrent to mental health, useful for getting satisfaction in work, as well as a strategy when dealing with stress, either at work or at home [13]. Workers who feel a balance between work and personal life tend to be more satisfied with their lives and are followed by better physical and mental health [12]. In relation to work, that job satisfaction influences employee performance and has a positive impact on the company. Based on the explanation above, the question from this study is, “What is the overview of work-life balance for working mothers who have early childhood during the COVID-19 pandemic?”.

## 2 Methods

### *Study Design*

The type of research used is quantitative research. Quantitative research is an approach used to describe and explain relationships between variables and is presented in numerical form [14]. More specifically, the research conducted is descriptive quantitative research. States that descriptive research is research aimed at systematically describing situations, problems, phenomena, and services or programs. The design used in this study is survey research design. Survey research design is a procedure when researchers describe attitudes, opinions, behaviors, or characteristics by surveying a population or sample. In conducting research by using survey design, quantitative data collected by disseminating questionnaires.

### *Setting and Samples*

The sample in this study amounted to 127 participants, with the characteristics of working mothers, doing work from home, work from office, or mixed (doing both), having early childhood child(ren) (0–8 years old), and domiciled in DKI Jakarta. Participants were collected using nonprobability sampling. Nonprobability sampling is a sampling technique used by researchers because a sample of participants is available, convenient, and represents some of the characteristics that wants to be researched in a study [14]. More specifically, the nonprobability sampling used is convenience sampling. Convenience sampling is a sampling technique performed when researchers select participants because they are willing and available for research.

### *Ethical Consideration*

In this study, researchers considered the ethics that will be done when collecting data. In considering data collection methods and procedures, the study had a duration of 10–15 min. Participants will be asked to choose an answer choice based on conditions related to their work and personal life during the COVID-19 pandemic during work from home (WFH), work from office (WFO), or mixed (doing both) policies. Researchers have explained in the informed consent before participants fill out the measuring instrument, that this study is voluntary and without any compulsion. Therefore, if participants are willing to participate in this study can choose the statement “Yes, I have agreed and willing to fill out a questionnaire.” If participants are not willing to engage in the study,

they can choose the statement “No, I do not approve and not willing to fill out a questionnaire.” If the participant feels uncomfortable when filling out the questionnaire, then the participant can stop filling the questionnaire without any forfeit.

In informed consent, researchers explain the background and purpose of the study, the number of study participants, what will be done during the study, the nature of the voluntary research, the advantages and risks derived from the study, the confidentiality of the data themselves and all answers given, and the research process (analysis of results, who organized, and who reviewed the research). At the end of the informed consent section, researcher stated the obligation to maintain all participant data and will only be used for research purposes only. The researchers also included the contact address of the researcher if the participant experienced obstacles or had further questions to ask. In the consent section, researchers ensured participants had read and understood the contents of informed consent, and consciously agreed and were willing or disapproving and unwilling to engage in the study.

### *Measuring Instrument*

The first measuring instrument used in this study is the Work/Nonwork Interference and Enhancement Scale. The Work/Nonwork Interference and Enhancement Scale is a measuring instrument developed by Fisher, Bulger, & Smith in 2009. This measuring instrument consists of 17 items and four domains, namely work interference with personal life (WIPL), personal life interference with work (PLIW), work enhancement of personal life (WEPL), and personal life enhancement of work (PLEW). Before using the measuring instrument, researchers have sent an email containing permission applications to Gwenith F. Fisher as the researcher and the first person to compile the Work/Nonwork Interference and Enhancement Scale. The measuring instrument created by Fisher, Bulger, & Smith (2009) was selected to collect data in this study because it measured enhancement and interference in work-life balance. Other instruments that measure work-life balance generally focus only on the enhancement between work and life [15].

The answer options on the Work/Nonwork Interference and Enhancement Scale measure have five answer scales. The answer “Not at all” has a score value of 1, the answer option “Rarely” has a score value of 2, the answer option “Sometimes” has a score value of 3, the answer option “Often” has a score value of 4, the answer option “Almost all of the time” has a score value of 5. Four domains have the same interpretation of score values. In this measuring instrument, if the work interference with personal life (WIPL) and personal life interference with work (PLIW) scores are lower, and the higher the work enhancement of personal life (WEPL) and personal life enhancement of work (PLEW) scores, the higher a person’s work-life balance. The score will be totaled from each domain, so that the results of the total work-life balance that are owned by participants are obtained.

The second measuring instrument used in this study was the Coronavirus Impacts Questionnaire. Coronavirus Impacts Questionnaire is a measuring instrument developed by Conway III, Woodard, & Zubrod in 2020. This measuring tool consists of 6 items that contain questions related to the impact experienced because of the COVID-19 pandemic. Before using the measuring instrument, researchers had sent an email containing a permit

application to Lucian G. Conway III. as the researcher and the first person to compile the Coronavirus Impacts Questionnaire. This measuring tool was chosen to collect data in this study because it measures the impact caused by the COVID-19 pandemic. The choice of answers in this measuring instrument are seven scales of answers. On a scale 1 indicates “Strongly disagree”, and on a scale 7 indicates “Strongly agree”. The score will be matched from each item, resulting in the total impact of the COVID-19 pandemic felt by participants.

### *Data Collection/Procedure*

The method of data collection carried out by researchers is by distributing questionnaires to participants via Google Form link. When filling out the questionnaires, participants will be asked to choose one of the alternative scales given, the selected scale will describe the circumstances that best suit the participants. This method of filling out the questionnaire was conducted in a selected-response item, this was done when participants were asked to choose 1 alternative answer on the Likert scale that represented their opinions, feelings, and conditions [16]. In the work of this measuring instrument there is no time limit, but it can generally be completed within 10–15 min.

The Work/Nonwork Interference and Enhancement Scale measuring instrument developed by Fisher, Bulger, & Smith (2009), and the Coronavirus Impacts Questionnaire developed by Conway III, Woodard, & Zubrod (2020) uses English, so researchers need to translate the measuring instrument into Indonesian. Researchers has done the translation of measuring instruments from English to Indonesian done by sworn translators, the same procedure has also been done for the back translation. Researchers have also conducted expert judgement to one of the lecturers from Faculty of Psychology. This is done to assess the process and the results of the translation of measuring instruments that have been done by researchers.

### *Data Analysis*

In this study, normality test was conducted using the Shapiro-Wilk formula. The purpose of the normality test is to find out whether the data obtained has resemble normal or not normal distribution. Corder, & Foreman (2014) said that on items that have an alpha level significance smaller than  $< .05$  resemble not normal distribution, whereas if the alpha level significance value is greater than  $> .05$  resemble normal distribution. The normality test is performed using Jamovi version 1.6.23. Further data analysis is done to get an overview of work-life balance by summing each of the four domains (work interference with personal life, personal life interference with work, work enhancement of personal life, and personal life enhancement of work).

The item analysis used in this study is the item of homogeneity. Item homogeneity is used to see the degree of conformity to the extent to which items measure a construct equally. Results from the homogeneity item test showed that all items on the Work/Nonwork Interference and Enhancement Scale and Coronavirus Impacts Questionnaire were above the critical significance value of 0.197 ( $p < .05$ ), indicate that all items in both measuring instruments could be used. Furthermore, the validity of the Work/Nonwork Interference and Enhancement Scale and Coronavirus Impacts Questionnaire is done with a construct validity method that aims to see if the measuring

instrument used measures the construct you want to measure. The technique used in this validity is internal consistency. The result from internal consistency test on both measuring instruments show that all items are above the critical value of 0.197 ( $p < .05$ ), so it can be said to be valid.

Furthermore, reliability is the consistency of test scores on the same subject at different times. This states that the results of low reliability tests indicate inconsistency and inaccuracy in a measuring instrument [16]. The reliability test of the Work/Nonwork Interference and Enhancement Scale and Coronavirus Impacts Questionnaire using coefficient alpha. This method can be used on both measuring instruments because these measuring instruments do not have a right or wrong answer. Results from the coefficient alpha showed both are reliable measuring instruments, as they were above 0.6. The entire psychometric test process is carried out using Jamovi version 1.6.23.

### 3 Result

Based on the overview of general demographic table of 127 participants, the highest percentage of working mothers in the study was between 34–38 years old, which is 35.43%. The second most age range is working mothers aged between 29 and 33 years old (30.7%), followed by the range between 24 and 28 years old (15.75%), and 39–43 years old (13.30%). Lastly, the least age of participants was 44–48 years old, which is 4.72%. Most education taken by participants were undergraduate and equivalent (72.44%), while the least were primary school and equivalent (3.15%) (Table 1).

Mostly the participants were private employees (71.65%), followed by education personnel (15.75%), health workers (6.3%), while government employees and the entrepreneur had the same number of 3.15%. In the working area, most participants worked in educational services (18.9%), the second most were financial services and insurance (13.39%), and third was wholesale and retail (10.24%). Other job areas have almost the same percentage.

In domicile category, participants domiciled in East Jakarta and West Jakarta had a close percentage, which was 33.07% and 29.13%. Furthermore, participants domiciled in North Jakarta, South Jakarta, and Central Jakarta respectively amounted to 14.96%, 13.39%, and 9.45%. Of all the study participants, there were 32.28% who did work from office (WFO) policies, 33.07% did work from home policies, while those who did both (mixed) as much as 34.65%. More than half of the study participants have started doing policies implemented by their offices since the first trimester of the COVID-19 pandemic, which is 55.12%. Participants who conducted policies in the second trimester of the COVID-19 pandemic were 27.56%, while participants who conducted policies in the third trimester of the COVID-19 pandemic were the least (17.32%).

Most of the number of early childhoods that the study participants had was one child, at 64.57%. Participants who had the number of early childhoods as many as three children were the least, which was 0.79% or only one participant. The most characteristics based on early childhood age are the age range of 2–5 years old (66.93%). There are 33.07% of working mothers who have early childhood in the age range of 6–8 years old, the last is the age range of 0–1 years old at 26.77%. Furthermore, in characteristics based on the child's primary caregiver, 37% of working mothers took care of their own children

**Table 1.** General Demographic Overview of Research Participants

Demographic Characteristics	n	%
Age		
24–28	20	15.75
29–33	39	30.7
34–38	45	35.43
39–43	17	13.39
44–48	6	4.72
Level of education		
Primary School and Equivalent	4	3.15
Secondary Schol and Equivalent	12	9.45
Bachelor and Equivalent	92	72.44
Postgraduate and Equivalent	19	14.96
Profession		
Government employees	4	3.15
Private employees	91	71.65
Education personnel	20	15.75
Health workers	8	6.3
Entrepreneur	4	3.15
Working area		
Agriculture, forestry, and fisheries	1	0.79
Mining and excavation	1	0.79
Processing industry	8	6.3
Construction	5	3.94
Wholesale and retail	13	10.24
Car and motorcycle repair	1	0.79
Transportation and warehousing	2	1.57
Provision of accommodation and drinking	7	5.51
Information and communication	9	7.09
Financial services and insurance	17	13.39
Real estate	5	3.94
Company services	7	5.51
Government administration, defense, and mandatory social security	1	0.79
Educational services	24	18.9

*(continued)*

**Table 1.** (continued)

Demographic Characteristics	n	%
Health services and social activities	8	6.3
Others	18	14.17
Domicile		
North Jakarta	19	14.96
South Jakarta	17	13.39
West Jakarta	37	29.13
East Jakarta	42	33.07
Central Jakarta	12	9.45
Policies		
Work from home	42	33.07
Work from office	41	32.28
Mixed (doing both)	44	34.65
Start doing the policy		
First trimester of the COVID-19 pandemic	70	55.12
Second trimester of the COVID-19 pandemic	35	27.56
Third trimester of the COVID-19 pandemic	22	17.32
Number of early childhood(s) owned		
One	82	64.57
Two	44	34.65
Three	1	0.79
The age of the early childhood owned		
0–1 years old	34	26.77
2–5 years old	85	66.93
6–8 years old	42	33.07
Child's primary caregiver		
Yourself	47	37
Grandparents	30	23.62
Babysitter	44	34.65
Others	6	4.72
Husband's job		
Government employees	11	8.67
Private employees	73	57.48

(continued)



**Table 1.** (continued)

Demographic Characteristics	n	%
Education personnel	14	11.02
Health workers	3	2.36
Entrepreneur	24	18.9
Freelance	1	0.79
Not working	1	0.79
Husband's policy		
Work from home	23	18.11
Work from office	48	37.8
Mixed (doing both)	56	44.09

by themselves. Not much different, 34.65% of the primary caregivers were babysitter, while 23.62% were fostered by grandparents, and 4.72% were others.

In this study, participants were also asked to fill in some information about their husbands. In the table can be seen most of the jobs of the participants' husbands are private employees (57.48%), 18.9% are entrepreneurs, 11.02% are education personnel, and 8.67% are government employees. The fewest jobs were health workers (2.36%) and freelance (0.79%), while non-working husbands were only 0.79%. In the characteristics of policies carried out by husbands, there are 18.11% who do work from home, while those who do work from office by 37.8%, and mixed by 44.09%.

In this measuring instrument, the total score of participants of each domain is grouped into two groups, namely high and low. Researchers grouped the two categories using a

**Table 2.** Overview of Work-life Balance Categorization of Research Participants

Domain	Raw Score	Category	n	%	<i>M</i>	<i>SD</i>
Work Interference with Personal Life (WIPL)	> 13	High	63	49.61	16.78	2.35
	≤ 13	Low	64	50.39	10.34	2.39
Personal Life Interference with Work (PLIW)	> 14	High	74	58.27	17.76	3.79
	≤ 14	Low	53	41.73	11.15	2.28
Work Enhancement of Personal Life (WEPL)	> 9	High	65	51.18	11.43	1.44
	≤ 9	Low	62	48.82	8.06	1.01
Personal Life Enhancement of Work (PLEW)	> 10	High	66	51.97	12.2	1.27
	≤ 10	Low	61	48.03	8.67	1.4

percentile whose distribution was divided into 50%. In WIPL domain, the high category is the total score of each participant who has a score above 13, and the low category is the opposite. In the PLIW domain, the high category is the total score of each participant who has a score above 14, and the low category is the opposite. Furthermore, in the WEPL domain, the high category is the total score of each participant who has a score above 9, and the lower category vice versa. Lastly on the PLEW domain, the high category is the total score of each participant who has a score above 10, and the low category is the opposite.

Based on Table 2 of categorization of work-life balance from participants, overall, there is not much difference between the participants who have high and low scores. On the WIPL domain, 49.61% of participants were in the high category, while 50.39% were low. For PLIW domain, 58.27% of participants were in the high category, while 41.73% were low. Participants who were in the high category on the WEPL domain were 51.18%, and 48.82% were low. Lastly, participants who are in the high category on the PLEW domain by 51.97%, and the rest are in the low category (48.03%).

If the score is low on the WIPL domain, it means that a person feels the work does not interfere with personal life too much. Like the PLIW domain, if the score is low then a person feels personal life does not interfere too much with work. While in the WEPL domain, if a person has a high score, then it indicates the work enhance personal life. Lastly, if a person has a high score on the PLEW domain, then it indicates personal life enhance work.

Based on Table 3, researchers grouped work-life balance categories based on all four domains. The highest percentage of all participants was 21.26%, namely at high WIPL, high PLIW, low WEPL, and low PLEW. Contrast with previous category, 15.57% of participants had low scores in WIPL and PLIW domains, and high scores in WEPL and PLEW domains. The rest of the category can be seen in Table 3.

In Table 4, participants who had the most balanced work-life balance (LLHH) categories were participants who do mixed policies (doing WFH and WFO interchangeably), by 8.67%. While in participants who do WFH by 4.72%, and WFO by 2.36%. Furthermore, participants who worked by doing WFH policy mostly in HHLL category (7.87%). In the same category, the participants who worked by doing WFO were 7.09%. The rest of the category can be seen in Table 4.

As seen in Table 5, the category of participants who have one early childhood child the most is HHLL category (14.17%), which is for high WIPL and PLIW domains, while WEPL and PLEW domains are low. Not much different from the HHLL category, working mothers who have one early childhood child in LLHH category is 13.39%. Working mothers who have two early childhoods are most found in the HHLL category, which is 6.3%, while those who have a balanced *work-life balance* of 2.36%. Of all the participants, only one working mother had three early childhoods and was included in the HHLL category.

Table 6 shows the average of each work-life balance domain based on the policies carried out by the participants, namely work from home (WFH), work from office (WFO), mixed (doing both). In the work interference with personal life and personal life interference with work domains, the average score of participants who conducted WFO policies was the highest, which were 15 and 16. The average score on the work

**Table 3.** Overview of the Category of Work-life Balance

Domain				N	%
WIPL	PLIW	WEPL	PLEW		
High	Low	Low	Low	4	3.15
High	High	Low	Low	27	21.26
High	High	High	Low	9	7.09
High	High	High	High	7	5.51
High	Low	High	High	5	3.94
High	Low	Low	High	1	0.79
High	Low	High	Low	1	0.79
High	High	Low	High	8	6.3
Low	Low	Low	Low	5	3.94
Low	Low	Low	High	7	5.51
Low	Low	High	High	20	15.75
Low	High	High	High	11	8.66
Low	High	High	Low	4	3.15
Low	High	Low	Low	2	1.57
Low	High	Low	High	7	5.51
Low	Low	High	Low	8	6.3

*Note.* H: High, L: Low

enhancement of personal life for all three policies has the same result, which is 10, so it's included in the high category. Lastly, in the domain of personal life enhancement of work, the average score of each policy is not much different, but the highest is the participants who do mixed policy.

In the Coronavirus Impacts Questionnaire, the total scores of participants in each domain are grouped into three categories, namely high, moderate, and low. Researchers grouped all three categories using percentiles. From Table 7, most participants had moderate categories (69.29%), followed by participants who were in low category (16.54%) and high (14.17%). The low category in this measuring instrument can be interpreted that participants felt the COVID-19 pandemic had slight impact on financial, occupational, resource, and psychological aspects. If participants who were in moderate category, it means that individuals feel the COVID-19 pandemic has quite an impact on financial, occupational, resource, and psychological aspects. Finally, if participants who were in high category, then the COVID-19 pandemic greatly impacts financial, employment, resources, and psychological aspects.

In Table 8, researchers conducted cross-tabulation on each domain of work-life balance and the impact of the COVID-19 pandemic felt by participants. In WIPL and PLIW domains, the median of participants were in the moderate and high categories. In WEPL and PLEW domains, most participants were in the low category, meaning that

**Table 4.** Work-life Balance Category Overview by Policies

Categories	Policies					
	WFH		WFO		Mixed	
	n	%	n	%	n	%
HLLL	-	-	1	0.79	3	2.36
HHLL	10	7.87	9	7.09	8	6.3
HHHL	2	1.57	5	3.94	2	1.57
HHHH	2	1.57	2	1.57	2	1.57
HLHH	5	3.94	-	-	1	0.79
HLLH	-	-	1	0.79	-	-
HLHL	-	-	-	-	1	0.79
HHLH	1	0.79	4	3.15	4	3.15
LLLL	1	0.79	2	1.57	2	1.57
LLLH	2	1.57	1	0.79	4	3.15
LLHH	6	4.72	3	2.36	11	8.67
LHHH	3	2.36	6	4.72	2	1.57
LHHL	3	2.36	1	0.79	-	-
LHLL	-	-	2	1.57	-	-
LHLH	4	3.15	2	1.57	1	0.79
LLHL	3	2.36	2	1.57	3	2.36

Note. H: High, L: Low

participants who felt their work and personal lives enhance each other feel slight impact of the COVID-19 pandemic.

## 4 Discussion

Previous research conducted stated that the challenge of working mothers during WFH are difficult to achieve work-life balance, tired from spending time in front of a computer or laptop, limitations in communicating with colleagues, and others [10]. Table 4 showed most participants who do WFH policies had high category in WIPL and PLIW domains, while low category in WEPL and PLEW domains (7.87%). In contrast with participants who had low category in WIPL and PLIW domains, while high category in WEPL and PLEW domains (4.72%). This can happen because when working from home, mother will face more conflict between work and personal or family life, so at the same time there are two responsibilities to be carried out [11].

In Table 5 contains an overview of the work-life balance category based on the number of early childhoods a participant has, participants who has one early childhood child and have low category in WIPL and PLIW domains, while high category in WEPL

**Table 5.** Work-life Balance Category Overview Based on The Number of Early Childhoods

Categories	The Number of Early Childhoods					
	One		Two		Three	
	n	%	n	%	n	%
HLLL	2	1.57	2	1.57	-	-
HHLL	18	14.17	8	6.3	1	0.79
HHHL	8	6.3	1	0.79	-	-
HHHH	4	3.15	3	2.36	-	-
HLHH	3	2.36	2	1.57	-	-
HLLH	1	0.79	-	-	-	-
HLHL	1	0.79	-	-	-	-
HHLH	7	5.51	2	1.57	-	-
LLLL	2	1.57	3	2.36	-	-
LLLH	1	0.79	6	4.72	-	-
LLHH	17	13.39	3	2.36	-	-
LHHH	5	3.94	6	4.72	-	-
LHHL	3	2.36	1	0.79	-	-
LHLL	1	0.79	1	0.79	-	-
LHLH	3	2.36	4	3.15	-	-
LLHL	6	4.72	2	1.57	-	-

Note. H: High, L: Low

**Table 6.** Overview of the Four Domains of Work-life Balance Based on the Policies

Domain	<i>M</i>		
	WFH	WFO	Mixed
Work interference with personal life (WIPL)	13	15	13
Personal life interference with work (PLIW)	15	16	14
Work enhancement of personal life (WEPL)	10	10	10
Personal life enhancement of work (PLEW)	10	10	11

and PLEW domains are 17 participants (13.39%). Not much different in participants who have one early childhood, but have high category in WIPL and PLIW domains, while low category in WEPL and PLEW domains are 18 participants (14.17%). The only participants, who had three early childhood children, had high category in WIPL and PLIW domains, while low category in WEPL and PLEW domains. A mother's work-life balance will be influenced by the number of children they have. It reached the

**Table 7.** Overview of the Total Score from the Impact of the COVID-19 Pandemic

Raw Score	Categories	N	%
23–42	High	18	14.17
13–22	Moderate	88	69.29
6–12	Low	21	16.54

**Table 8.** Overview of the Four Domains of Work-life Balance Based on the Impacts of the COVID-19 Pandemic

Domain	<i>Me</i>		
	Low	Moderate	High
Work interference with personal life (WIPL)	11	14	14
Personal life interference with work (PLIW)	13	16	16
Work enhancement of personal life (WEPL)	12	9	10
Personal life enhancement of work (PLEW)	12	10	11

conclusion that the more children owned, the work-life balance of the mother will tend to be low [17].

In Table 6, it can be seen that in WIPL and PLIW domains, participants who did work from office had the highest average scores compared to other policies, namely 15 and 16. WEPL and PLEW domains have averages that tend to be equivalent between the three. Based on the average of each domains, it can be said that participants who did work from office feel work and personal life interfere each other. Furthermore, in Table 8, researchers conducted cross-tabulation on each domain of the Work/nonwork Interference and Enhancement Scale and the impact of the COVID-19 pandemic. In WIPL and PLIW domains, the median of participants were in the moderate and high categories. Researcher interpreted participants in moderate and high categories feel work and personal life interfere each other, while they also felt COVID-19 pandemic quite and greatly impacted in financial, employment, resources, and psychological aspects. In WEPL and PLEW domains, most participants were in the low category, meaning that participants who felt their work and personal lives enhance each other feel slight impact of the COVID-19 pandemic.

## 5 Conclusions

This study has a focus on data retrieval during the COVID-19 pandemic, so the results cannot be generalized to the population in general. Work-life balance is a subjective construct, so there will be differences in everyone in perceiving and managing work and personal life effectively. The results of research conducted by Matulevicius, Kho, Reisch, & Yin 2021 said that working mothers who have children are the group that has

the most unbalanced work-life balance even before the COVID-19 pandemic, but the COVID-19 pandemic worsens it. From the research conducted by Matulevicius, Kho, Reisch, & Yin, there is a difference in work-life balance before the COVID-19 pandemic and during the COVID-19 pandemic, therefore the results of this study also cannot be applied for the long term.

The measuring instrument used to measure work-life balance in this study are not specific in the context of the COVID-19 pandemic. For future study that will do research of work-life balance during the COVID-19 pandemic, can focus on making a measuring instrument that are more in accordance with the context of the COVID-19 pandemic. Furthermore, the population in this study was working mothers who do work from home (WFH), work from office (WFO), and mixed policies, had early childhood (0–8 years old), and lived in DKI Jakarta. DKI Jakarta has a large population, but due to limitations, the sample obtained in this study only amounted to 127 participants. If the next research will be conducted in DKI Jakarta, the research sample used can be larger, or conduct research in other cities. At the time of the study data collection process, researchers paid less attention to the age of the mothers who were targeted by the study sample. If the age range of working mothers to be studied is more specific, then it can be associated with developmental process.

The results showed that there were several items where most participants answered low scale on the Work/Nonwork Interference and Enhancement Scale. The items answered on a low scale by participants were in the domain of interference between work and personal life. When having children, a mother's work-life balance will tend to be unbalanced when compared to those who do not have children [17]. Therefore, a working mother should be able to manage a better time to babysit and complete office work. This can be done when returning home does not bring work that should be completed in the office, so when at home there is a special time spent between mother and child or to rest.

From the results of this study, it is also known that participants who do work from office (WFO) have a high average score of work interference with personal life and personal life interference with work, meaning that participants feel personal life and work interfere with each other. In this case, working mothers who do WFO can carry out strict health protocols as the government has established so as not to cause concern when working outside the home. Mothers can also manage time by making priorities so that personal needs are not neglected despite working from the office, for example by using the time to be in the office to complete all the work, so that when the time to rest at home can be done optimally.

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