Can Doctors Volunteering Online in Health Virtual Community Achieve Work-Family Balance?

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Abstract

Online volunteering is one of the most evident examples of how information communication technology has influenced volunteerism. Volunteering online is prevalent for its flexibility in terms of time and place, allowing individuals to volunteer at any time or any space that they desire. While the technologies may increase flexibility for doctors volunteering online to respond to their work or family, somehow it also allows the online volunteering work to spill over into work or home life, blur the boundaries between work and family domains, hence increases work-family conflict. This study attempt to develop a conceptual framework associated with the potential of achieving work and family balance among doctors volunteering online in health virtual community. The proposed framework is guided by the work-family Border theory to provide a broader understanding of how the embracement of Internet technology for volunteering affects the negotiation of work-family boundaries. The paper described the important concept in online volunteering and work-family balance, and then reviews the border theory that provides the perspectives in which work-family balance embrace other important domain such as online volunteering.

Keywords: Health virtual community, Online volunteering, Work-family balance.

1. Introduction

Online volunteers (OV) used information and communication technologies (ICT) such as technological platforms (e.g. the Internet access) and devices (e.g. smartphones, computers, tablets) to perform their work purposes as well as volunteering purposes tasks. However, past research has identified that the widespread use of ICT in a broad range of life aspect especially among employees may blur the boundaries between work and family domains [1] and potentially increases work-family conflict [2]. The findings above is in line with [3] and [1]. In their findings, they assert that technology availability have extended individuals working hours and encourage them to work at the traditional office, at home or practically any place and anytime. Although these technologies may increase flexibility for doctors volunteering online to respond to their work or family, somehow it also allows the online volunteering work to spill over into work or home life. Thus, it is more difficult for them to maintain a boundary between the different roles [4]. Eventually, the different roles overlap, the blurring role is high and boundaries are flexible and permeable.

Furthermore, the doctor's heavy workload postulated another source of work-family conflict. Studies in Malaysia demonstrated that doctors' burden is stemming from heavy patient loads, long working hours, administrative tasks, and working under pressure [5]. Principally, for OV of doctors who are tied to the 'nature' of their work, conflict may occur when they find it difficult to fulfil the different responsibilities with different priorities [6]. Performing simultaneous multiples roles such as employee, spouse, parent, online volunteer and others can be stressful [7] for doctors to ful-

fill the expectations of other roles. The main contribution of this study is to develop a conceptual framework associated with the potential of achieving work and family balance (WFB) among doctors volunteering online in health virtual community (HVC). The Border theory has been employed to underpin this study. The rest of this paper is organized as follows: First, we contextualize the WFB and place our work in context with the previous work in this area. Second, we discuss the concept of online volunteering. Third, we outline the theoretical framework for the study. Fourth, we discuss the proposed conceptual framework. Finally, we then draw conclusion.

2. Balancing Work Family in Context

Typically, WFB is associated with equilibrium or an overall sense of harmony in various life domains, such as work and non-work. [8] defined living a balanced life as "achieving satisfying experiences in all life domains; and to do so requires personal resources such as energy, time, and commitment to be well distributed across domains" (p. 80). Balance works in two ways, namely, the positive and negative balance, depending on the level of attention, time, commitment and whether they are high or low. [9] suggested that work-family balance can be achieved when work and family resources are adequate to meet work and family demands, so the participation of individuals is effective in both domains. The demands and resources in the work or family domains may affect the quality of the other domains. [9] defined resources as a structural or psychological aspect that facilitates performance or reduces demands. On the other hand, demands may come in the form of

structural or psychological claims related to the role requirement, expectation, and norms that individuals must respond to.

The above definitions provide an essential understanding of WFB, suggesting that both work and family roles may impact one another. However, as WFB is a complex experience, no consensus has been reached as to what it means exactly [10]. Hence, WFB in this study refers to the extent to which individuals having good functioning control over where, when and how they work and volunteer online by meeting the competing demand of both work and family domains. So, WFB is achieved when individual is able to reach a satisfactory level of involvement between the multiple roles.

2.1. WFB among Doctors Volunteering Online

Although a comprehensive body of literature can be found in relation to work-family interface in onsite volunteering, few studies exist on online volunteering. Due to a lack of literature on work-family interface among OV, various works including those on onsite volunteering are used to understand the issue at hand. This is because OV roles are characterized by demands (e.g., time commitment) and resources (e.g. rewards), similar to those of onsite volunteers [9]. [11] asserted that online volunteering needs time commitment just as onsite volunteering does.

A large amount of research has focused on the negative impact of holding multiple roles. For instance, managing the boundaries between paid work and other life roles generally will lead to work-family conflict [12] and it is potentially more blurred among professionals compared to other blue-collar workers [13]. As different occupations have different work demands and, hence, different work-family conflict, [14] recommended that future research on work-family looks into professional jobs (e.g., doctors). Highly demanding jobs, work performance pressure, and increased hours spent at the workplace especially in two-career families [15] require individuals to balance the different life domains. If the OV doctors are incapable of splitting work from family life or vice versa, they may confront with a high level of conflict.

One criticism of the widespread use of ICT is that it may blur or blend the work and family boundaries [16]. OV of doctors who utilize the ICT such as social media as platform to interact with patients face both challenges and opportunities with regards to WFB [17]. The technology allows them to perform their work outside the traditional office setting. They can check and respond to emails or online questions on the weekend or on vacation. Consequently, the technology may raise work-family conflict and boundary breach as it can be accessible at work and during family time [12] [18]. A study on the use of HVCs for ParkinsonNet, a professional network for Parkinson disease, found that doctors feel uncertain to adopt the Internet-based platform as a medium to deliver patient care. Doctors imply that these technologies may cause an interruption to their traditional practice pattern and require their additional times. Similar findings by [19] [20] reported that doctors perceive extra burden of time and resources as one of the barrier hinders them to use social media for health-related purposes.

Online volunteering among doctors, therefore, can make the work and family borders become porous and permeable, which can negatively affect WFB experiences. Thus, the study tried to understand how doctors volunteering online manage the border between work and family demand in achieving balance.

3. Concept of Online Volunteering

There is no general consensus on the definition of online volunteering [21]. Various terms have been used to refer to online vol-

unteering. They include virtual volunteering, digital volunteering, micro volunteering, cyber service, and crowdsourcing. The variations of terms arise as they represent the same concept, such as doing work away from the work site, using the Internet as the medium, formal or informal involvement as workers, volunteers or consultants, and whether the tasks involved are short-term or long-term. In general, the different terms connote that the tasks done are voluntary and with no expectation of monetary rewards.

Researchers used the terms 'online volunteering' as any volunteer tasks that are completed off-site from the organization, in whole or in part, through the Internet at home, work or public access through a mission-based organization (non-profit, civil society etc.). From this definition, there are some OV tasks that can be done entirely online while there may be some tasks that can be implemented in a mixture of online and offline.

In Malaysia, even though online volunteering represents a small proportion of voluntary sector, it is a growing field. According to the World Giving Index (WGI) report, Malaysia moved to the 7th place in 2014 from the 71st place in 2010 in the global league of generosity, indicating a significant improvement in all three ways of giving behaviour such as volunteering time, donating money and helping a stranger [22]. This situation reflects that Malaysia has a strong culture of helping and giving back to the community, but there is much more to be done to make volunteering, particularly online volunteering, a mainstream in the Malaysian culture.

3.1. Online Volunteering vs. Onsite Volunteering

Volunteering cannot be easily restricted to either work or leisure, as its activity is characterized by the freedom of choice of the individuals; yet, a strong social commitment is required which differentiates it from other leisure activities, such as hobbies. Researcher such as [11] demonstrated that OV roles are characterized by demands (e.g., time commitment) and resources (e.g. rewards), similar to those of onsite volunteers. In principle, the workload faced by the OV is comparable to that of the onsite volunteers [6]. Hence, findings from research pertaining to onsite volunteering may explain the process in the online volunteering context, particularly on WFB.

3.2. Volunteering in Health Virtual Communities

Doctors volunteering online through HVCs has facilitated their functions as they are not tied to specific locations (at home or in the office) and times (during or after office hours), hence increasing the flexibility of their engagement. HVCs act as a platform for people to interact together through telecommunication technologies to get information, self-help, and social support for health-related concerns. An example of HVCs is the DoktorBudak project run by group of paediatricians and paediatric-related specialists working in Malaysia government and private hospitals, which supports children's health.

A large and growing body of literature has identified the significance of HVCs in meeting the social needs of patients and empower them to manage their own healthcare. [23] demonstrated that HVCs can enhance a doctor-patient relationship and, to some extent, reduce health argument. Furthermore, by leveraging the technologies through volunteering online in a HVC, the healthcare organization may tap into the potential to develop a patient-centered health hub as well as promoting long-term value to the healthcare organizations.

4. Theoretical Background

There are many theories used to explain the relationship between work and family as well as life outside work. These include Spill-over, Segmentation, Boundary and the Border theory. These theories provide the researcher with a framework to explore the connection between work and family among OV of doctors. In this study, the work-family Border theory [24] was used as a guiding theory since this theory does not only encompass the psychological aspects but also the tangible boundaries which divide the time, place and people associated with work and family. The lens of work-family Border theory provides a useful understanding of how people manage and negotiate the work and family and the borders between them in order to attain balance.

The work-family Border theory hypothesizes that work and family are independent spheres that influence each other separated by physical (place), temporal (time), and psychological borders between them. The strength of the border between the work and family domains will dictate the degree of interaction between them. The core concepts in work-family border theory are (a) home and work domains; (b) border between work and home; (c) border-crosses; and (d) border- keepers and other domains [24]. Figure 1 presents these concepts.
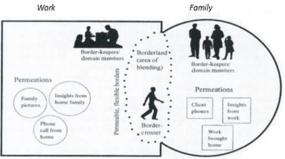

Fig. 1: Work-family border theory (adopted by Clark, 2000)

4.1. The Work and Family Domain

In Border theory, 'work' and 'family' are delineated into two distinct spheres, work and family with different expectations, cultures, rules, and responsibilities. The only similar factor is the participant, who is a 'member' of both spheres. Thus, the member of each domain will perform unique tasks, such as rules, thoughts, and behaviours. They are also viewed as border-crossers, who manage and negotiate the work and family domains and the borders between them to achieve balance.

Even though cultures, purposes and results in both work and home domains differ, individuals often manage to combine the two domains to a certain extent. As indicated by [25], an individual who integrates work and family cannot distinguish between what belongs to work and what belongs to home regardless the source of the task. In contrast, an individual who uses segmentations makes a distinction between work and family issues whether physically, temporally, or psychologically. To find out how individuals segment or integrate work and family and to what extent their selection leads to balance can be answered by exploring the border between the domains and how they shape and manage it.

4.1. The Border

The central of Border theory is the 'border' between work and family domains which must be properly managed to create and maintain a balance. The borderline that demonstrates the starting or ending of such domain is defined by physical, temporal and psychological borders [24].

A physical border is defined as where the domain-relevant behaviour takes place. For example, the border may be the actual walls of one's workspace or home. A temporal border refers to the time set for work and family, such as one's work schedule. A psychological border dictates the thinking patterns or emotions used in one domain but not the other. Some borders are more permeable than others; permitting a physical movement from one domain to another while others may be psychological in nature. Psychological borders are largely self-created; however, physical and temporal borders may be used by individuals to determine the rules that make up the psychological borders.

Border theorist [4] [24] described the main characteristics of borders are flexibility, permeability, and blending, which mutually define the strength of the border. According to Clark, all three borders must be taken into account in border theory. Boundary permeability is the extent to which a boundary permits psychological or behavioural elements of one role or domain to spill into another [4]. Flexibility refers to the malleability of the boundary between two or more roles/ domains and its ability to expand or diminish to accommodate the demands of different roles. The more flexible the boundaries, the more they permit roles to be acted in a variety of settings (e.g., a remote worker) and at varying times, whereas less flexible boundaries restrict when and where a role may be acted (e.g., doctors within a hospital setting). Blending arises when a high level of flexibility and permeability exist within borders [24]. Clark revealed that a border which is blended means that the "area around the presupposed border is no longer exclusive to one domain or the other but called either domain" (p.757).

Clark suggested that the characteristics of the borders between work and family domains, as well as how individuals shape and manage the borders, may have a significant effect on how individuals segment or integrate work and home. The segmentation or integration approaches used by individual may in turn significantly influence WFB.

5. The Proposed Conceptual Framework

The proposed conceptual framework of this study is guided based on the work-family Border theory which postulates that WFB can be achieved in many ways depending on the factors, such as the relationship between the work and family domains and the strength of the borders between the domains.

As the work-family Border theory main focus are on the domains of work and family only; researcher approached the study from the perspective that WFB may include other important domains. Researcher justification is made based on Clark's definition of the nature of borders, where she suggests that "permeability is the degree to which other domains may enter" (p. 754). Her reference to 'domains' suggest that additional domains than work and home, might exist in one's life.

That 'other domains' may be represented with the Internet world or the virtual world, which provide an interactive structure for individuals to communicate beyond the borders of the traditional work and family settings. For example, in traditional work settings, work activities are engaged in within the time and space context of work (i.e., at the workplace during work hours. On the other hand, with the rapidly expanding Internet technology, [26] suggested that the Internet or the virtual world should not be viewed as an external world as it has becoming integrated into the normal practices of daily life. Therefore, doctor's volunteering online has embedded another new domain from the online world into their everyday life. Thus, a broader understanding of different forms of 'life' is needed, by taking into account that the concept of work-family Border theory is relevant to doctors who volunteer

online in maintaining a balance with work and family while volunteering online.

By taking into account that the Internet has play important roles in shaping individuals work-family boundaries, researcher suggests the Internet as another new domain which co-exist with both work and family domain. This new domain allows work and family domains to occur in the same virtual environment with little separation. In addition, extensive literatures view the Internet technology roles as either creating additional boundaries or eroding existing ones [27]. Thus, it is crucial to understand how individuals manage the boundaries, as they are unaware of those borders as they move through virtual space.

In this paper, the work-family Border theory is proposed by merging the virtual domain to complement the existing work and family domains. The framework is proposed due to increase research interest in the usage of the Internet technology in general and the ICT in particular which has challenge work-family boundaries. For examples, how doctors volunteering online shape their experiences in negotiating the work-family boundaries. At the same time, there is limited existing framework in work-family especially in viewing the roles of employees who volunteer online.

The proposed framework is known as Conceptual Framework of Work-Family of OV. Figure 2 represents general concept of the conceptual framework. The proposed framework consists of three interrelated domains. It is believed that for doctors volunteering online, the online and offline life is vague, boundary blurring will be increase, and, thus, the work-family border construction will be even more critical if individuals are to manage both domains.
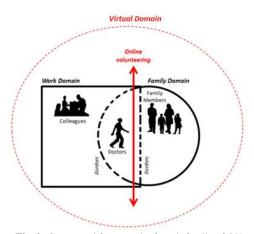

Fig. 2: Conceptual framework of work-family of OV

6. Conclusion and Recommendation

In all, this concept paper had aimed to define issues on work-family balance and online volunteering among doctors volunteering online. Most importantly this study had identified and discussed the concept and theoretical background of WFB focusing on doctors volunteering online. A conceptual framework of work-family of OV has been proposed based on the work-family Border theory. The proposed conceptual framework could be used to understand of how the embrace of Internet technology for volunteering affects the negotiation of work-family boundaries as the work and non-work (e.g. family, online volunteering) activities are no longer bound to a particular place or time. Even the Internet technology provides the doctors volunteering online the flexibility to balance their work and family responsibilities; the existence of virtually borderless world requires a re-examination of work-family border theory. This is particularly important because the emerging online volunteering phenomenon among employee such as doctors may affect their lives direct or indirectly. Further studies are needed to identify the strategies used by doctors volunteering online in attaining WFB. This would help to explain the online volunteering phenomenon and confirm the assumptions from previous studies.

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