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MODERATION EFFECTS OF MATERNAL GUILT ON WORK-FAMILY CONFLICT AND JOB INVOLVEMENT AMONG WORKING MOTHERS OF TODDLERS

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ABSTRACT

Research has shown that work-family conflict and maternal guilt have an impact on the job involvement of a mother. This study examined the relationship between work-family conflict, maternal guilt and job involvement among working mothers of toddlers. Data was obtained from 150 nurses working in five different departments of private hospitals who had 1 to 2 children from which any one was toddler (1= 87, 2= 63) aged 28-35 (M= 30.27, SD= 2.22) using a correlation research design and non-probability purposive sampling technique. Hayes Process Model for Moderation was used to analyze the data. Findings revealed maternal guilt plays a moderating role between family to work conflict and job involvement. The overall model approached significance, F (3,146) =2.32, p=0.78, R2 =0.046, indicating family to work conflict as a significant negative predictor of job involvement (B = –0.96, SE = 0.41, p = .020, 95% CI [–1.77, –0.16]), suggesting that greater interference from family into work is associated with lower levels of job involvement. However, the overall model was not statistically significant, F (3, 146) = 0.832, p = .479, R^2 = .017, indicating that the predictors (work to family conflict, maternal guilt, and their interaction) together did not explain a significant amount of variance in job involvement. The interaction effect between work to family conflict and maternal guilt was also not significant, B = 0.005, p = .426, 95% CI [–0.007, 0.016], suggesting that maternal guilt did not significantly moderate the relationship between work to family conflict and job involvement. Additionally, the main effects of work to family conflict (B = –0.36, p = .266) and maternal guilt (B = –0.10, p = .465) were also not statistically significant. Future studies are needed to examine the effect of maternal guilt on mothers of toddlers working in different professions.

Keywords: *work-family conflict, maternal guilt, job involvement, working mothers of toddlers, nurses*

Introduction

Employment provides financial security but also brings challenges for women who must balance professional and family roles. Research highlights that increasing female workforce participation has redefined traditional gender roles, where women were once expected to be full-time caregivers (Mokhtar et al., 2021; Singh & Sweety, 2024). However, societal expectations still associate motherhood with complete devotion to children, creating a conflict between the role of a "good mother" and that of a committed professional (Gridiron, 2017). Studies suggest that maternal guilt is a common psychological experience among working mothers, especially when cultural values emphasize women's caregiving duties (Sevigny et

al., 2016). In collectivist societies such as Pakistan, where family structures and social expectations strongly reinforce women's caregiving roles, working mothers often face harsher judgment for prioritizing career demands (Gardazi et al., 2016). This cultural context exacerbates feelings of guilt, leading mothers to question their adequacy in both roles. Empirical evidence shows that maternal guilt not only affects psychological wellbeing but also influences workplace outcomes, including job involvement and performance (Martínez et al., 2011).

The nursing profession illustrates this struggle more clearly than many other fields. Nursing requires long shifts, rotating schedules, and emotional labor, which significantly disrupt family life (Holdren et al., 2020). Research demonstrates that nurses with young children are particularly vulnerable to work-family conflict, which often translates into stress, guilt, and reduced engagement at work (Unruh & Zhang, 2014). Moreover, high emotional demands, coupled with limited workplace flexibility, place working mothers in nursing at greater risk of burnout and diminished job satisfaction (Demerouti et al., 2019).

Literature further indicates that work-family conflict is negatively associated with job involvement, as individuals experiencing high conflict often disengage from their work roles to cope with personal stress (Greenhaus & Beutell, 1985; Michel et al., 2011). However, maternal guilt has been identified as a significant factor that can intensify this relationship, as guilt may consume cognitive and emotional resources, leaving less capacity for active job engagement (Martínez et al., 2011). This suggests that maternal guilt is not just a byproduct of work-family conflict but an independent predictor of job involvement. In the context of Pakistani working mothers, particularly those in demanding professions like nursing, these findings are highly relevant. Limited access to childcare facilities, long working hours of partners, and the dominance of joint family systems shape how guilt and work-family conflict are experienced. Existing literature points toward the need for supportive workplace structures such as flexible shifts, family-friendly policies, and accessible childcare services to reduce maternal guilt and enhance job involvement among working mothers (Khan et al., 2020).

Work-Family Conflict

As women strive hard to succeed in their careers by simultaneously managing their roles as wives and mothers, long shifts are considered to be the key factors that can have an impact on their familial relationships (Faiza et al., 2023). Work-family conflict emerges when there is a clash between the demands of mother's job and the intensive caregiving needs of toddler's clash, making it challenging to manage both effectively. This conflict often manifests as work interfering with parenting responsibilities, such as attending to a toddler's physical and emotional needs, or family obligations impacting workplace productivity, schedules, or career advancement opportunities (Greenhaus & Beutell, 1985).

Maternal Guilt

Due to the intense and unbearable nature of guilt, it can have a strong impact on our cognitive health. The burden and stress of a maternal figure to be an ideal mother can result in intense guilt which creates self-doubt. They start to question their own capabilities and are always on edge to be perfect for their children and thus, being extremely worn out. Mental health gets drained and is negatively affected by this guilt. Hence, making it difficult to balance their personal and professional lives and affecting parent-child bond (Bozkur & Cig., 2022).

Job Involvement

An individual's ability of how much he/she is psychologically involved in his/her job is termed as job involvement. It suggests that a highly job-involved person perceives their job as a significant component of their self-identity. Human nature is characterized by involvement in various aspects of life, including work, family, religion, and sports. People tend to engage more deeply in activities that they believe can fulfill essential psychological needs. Job involvement is a crucial element in most individuals' professional lives, reflecting a

positive immersion in key aspects of their work (Mehta, 2011).

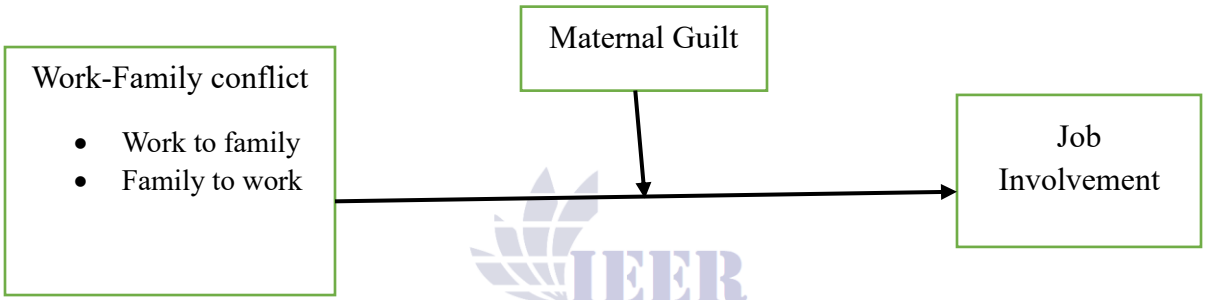
Objective of the Study

1. To examine the relationship between work-family conflict, maternal guilt and job involvement among working mothers of toddlers.
2. To find out the predictors of Job Involvement among working mothers of toddlers.
3. To find out the moderating role of maternal guilt in the relationship between work-family conflict and job involvement among working mothers of toddlers.
4. To examine whether there is a statistically significant difference in maternal guilt scores between working mothers of toddlers whose partners work fewer hours and those whose partners work longer hours.

Hypotheses

H1: Work–Family Conflict positively influences Maternal Employment Guilt.
H2: Work–Family Conflict negatively influences Job Involvement.
H3: Maternal Employment Guilt negatively influences Job Involvement.
H4: Maternal Employment Guilt mediates the relationship between Work–Family Conflict and Job Involvement.

Hypothesized Model



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Literature Review and Theoretical Framework

Work–Family Conflict

Work–family conflict (WFC) is recognized as one of the most significant psychosocial challenges affecting employed individuals who simultaneously perform demanding professional and family roles. The concept refers to inter-role conflict in which pressures arising from work and family domains are mutually incompatible. The nursing profession presents a unique context because nurses frequently work extended hours, rotating shifts, weekends, and emotionally demanding duties while simultaneously managing family responsibilities. Mothers of toddlers are particularly vulnerable because this developmental stage requires intensive caregiving. Within the Pakistani context, traditional gender expectations further intensify these pressures. Previous literature indicates that elevated work–family conflict is associated with burnout, emotional exhaustion, reduced job satisfaction, and lower organizational commitment. Despite substantial international evidence, relatively limited research has examined work–family conflict among Pakistani nurses with toddlers, providing the rationale for the present study. (Yunus et al., 2022).

Maternal Employment Guilt

Maternal employment guilt refers to the negative emotional experience arising when employed mothers perceive that employment prevents them from fulfilling caregiving responsibilities according to personal or societal expectations. The literature suggests that guilt is influenced by cultural norms, psychological processes, and workplace demands. Among nurses, rotating shifts and emotionally demanding work often intensify guilt because mothers fear missing important developmental experiences with their children. Prior studies consistently report a positive association between work–family conflict and

maternal employment guilt. Organizational support, flexible schedules, childcare services, and supportive families can mitigate these feelings. However, evidence specific to Pakistani nurses with toddlers remains limited, justifying further investigation. (Cindy,2020).

Job Involvement

Job involvement represents the degree to which employees psychologically identify with their work and consider it central to their identity. High job involvement contributes to organizational commitment, motivation, work performance, and patient care quality. The literature indicates that work–family conflict and maternal employment guilt can reduce employees' psychological engagement by increasing stress, emotional exhaustion, and distraction. Organizational support and family-friendly policies may strengthen job involvement by helping employees balance competing responsibilities. Research specifically examining Pakistani nurses with toddlers remains scarce. (Smith& Rodrguez, 2022).

Relationships Among Variables

The reviewed literature suggests that work–family conflict increases maternal employment guilt because occupational demands restrict mothers' ability to satisfy caregiving expectations. Persistent work–family conflict also reduces job involvement by depleting emotional and cognitive resources. Maternal employment guilt may further reduce job involvement through emotional distress and distraction. Although international studies support these relationships, integrated evidence from Pakistani nurses with toddlers remains limited, representing an important research gap addressed by the present study. (Borelli, 2017).

Theoretical Framework

This study is grounded in Role Conflict Theory, Conservation of Resources Theory, and Self-Determination Theory. Role Conflict Theory explains incompatibility between occupational and family roles. Conservation of Resources Theory proposes that stress results from depletion of valuable personal resources such as time, energy, and emotional capacity. Self-Determination Theory explains how satisfaction of autonomy, competence, and relatedness influences motivation and job involvement. Together these theories explain how work–family conflict contributes to maternal employment guilt and influences job involvement. (Khokar et al., 2020).

Methodology

Sample

Sample size consisted of 150 mothers of toddlers who were working in nursing field. Their age ranged from 28-35 years. Data was collected from only 5 departments (Cardiology, Gynecology, Dermatology, Pulmonology, Orthopedic). The non-probability purposive sampling strategy was used_to select a sample for data collection in this research. Correlation research design was used to examine the relationship between work-family conflict, maternal guilt and job involvement among working mothers of toddlers.

Study Setting and Participants

The study targeted registered nurses employed in tertiary healthcare hospitals who were mothers of toddlers. This population was selected because nurses experience demanding work schedules alongside intensive caregiving responsibilities.

Sampling Technique and Sample Size

A non-probability purposive sampling technique was used to recruit nurses meeting the inclusion criteria. The final sample size was determined according to the procedures described in the thesis and was considered adequate for the planned statistical analyses.

Data Collection Procedure

Institutional permission was obtained before data collection. Eligible participants were informed about the study, voluntary participation, confidentiality, and anonymity. Written informed consent was obtained prior to questionnaire administration.

Measures

Work-Family Conflict Scale

It is a 10-item scale designed to assess the extent to which work interferes with family life and evaluate the degree to which family responsibilities interfere with work life. It has two factors; work-family conflict and family-work conflict. Respondents answer each item on a 7-point Likert-type scale ranging from 1 (very strongly disagree) to 7 (very strongly agree). The scale was used in English. Cronbach's alpha score is 0.91. Construct validity is 0.96.

Maternal Employment Guilt Scale

It is a 15-item scale designed to assess guilt feelings experienced by working mothers related to their employment and its impact on their children. It is a one factor scale. Respondents answer each item on a 5-point Likert scale from 1 (strongly disagree) to 5 (strongly agree). The scale was developed and confirmed in a sample of employed mothers from Turkey. Cronbach's alpha score is 0.94. Construct Validity is 0.94.

Job Involvement Scale-Revised

It is a 9 -item scale designed to measure the degree of psychological identification and commitment of employees towards their jobs. It is a one factor scale. Respondents answer each item on a 7-point Likert scale 1 (strongly disagree) to 7 (strongly agree). This scale is a revised version of (Lodahl & Kejner, 1965) 20 item scale. The scale was used in English. Cronbach's alpha score is 0.88. Construct Validity is 0.93.

Ethical Considerations

The study followed accepted ethical standards for research involving human participants. Ethical approval, informed consent, confidentiality, anonymity, and secure handling of data were maintained throughout the study.

Data Analysis

Data were analysed using IBM SPSS Statistics. Descriptive statistics summarized participant characteristics. Reliability was assessed using Cronbach's alpha. Pearson correlation, multiple regression, and mediation analyses were performed to test the study hypotheses, with statistical significance set at $p < .05$..

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Results & Analysis

Characteristics of the participants

Table 1

Characteristics	*n* (%)	*M*	*SD*
Age		30.27	2.22
28-31	110 (73.3)		
32-35	40 (26.7)		
No. of Children			
1	87 (58)		
2	63 (42)		
Toddler Age			
1-2	72 (48)		
2-3	78 (52)		
Department			
Cardiology	40 (26.7)		
Gynecology	40 (26.7)		
Dermatology	20 (13.3)		
Pulmonology	18 (12.0)		
Orthopedic	32 (21.3)		
Duration of Job			
0-4 years	99 (66)		

4-8years	51 (34)
Designation	
Staff Nurse	83 (55.3)
Executive Nurse	48 (32.0)
Nurse Manager	7 (4.7)
Head Nurse	12 (8.0)
Family System	
Joint	66 (44)
Nuclear	84 (56)
Partners Working Hours	
6-8	76 (50.7)
9-12	74 (49.3)
Childcare Arrangements	
Daycare	33 (22.0)
Family	89 (59.3)
Nanny	28 (18.7)

A total of 150 registered nurses who were mothers of toddlers participated in the study. Participants ranged in age from 28 to 35 years (M = 30.27, SD = 2.22). All respondents were employed in tertiary healthcare settings and met the study inclusion criteria. Regarding family characteristics, 58% of the participants had one toddler, whereas 42% had two children, one of whom was a toddler. Approximately 48% of the toddlers were between 1 and 2 years of age, while 52% were between 2 and 3 years. Participants were recruited from cardiology (26.7%), gynecology (26.7%), dermatology (13.3%), pulmonology (12.0%), and orthopedics (21.3%).

Reliability Analysis

Table 2

Scales	M	*SD*	Range	Cronbach's α
WFCS	40.19	9.83	16-59	0.87
Work to Family	23.99	5.35	7-35	0.83
Family to Work	16.20	6.04	5-30	0.86
MEGS	58.09	11.91	23-89	0.88
JIS-R	35.49	5.30	23-51	0.51

The Cronbach's α value for Work-Family Scale was 0.87 (> 0.7) which indicated high level of internal consistency. Work-Family Conflict Scale consisted of two subscales; Work to Family Conflict and Family to Work Conflict. The mean score of Work to family conflict was more than family to work conflict which indicated moderate levels of work interfering in family life and low levels of family interfering in work life of nurses. Both their Cronbach's α were (> 0.7) indicating high internal consistency.

Correlation Analysis

Table 3

Variables	*n*	M	*SD*	1	2	3	4	5
WFC	150	40.19	9.83	-				
W-FC	150	23.99	5.35	.84***	-			
F-WC	150	16.20	6.04	.88***	.48***	-		
MEGS	150	58.09	11.91	.69***	.59***	.60***	-	

JISR	150	35.49	5.30	-0.06	-.11	-.01	-.06	-

Variables	Estimates	*SE*	95% CI		p
			LL	UL	
Constant	43.53	7.24	29.23	57.83	0.00
W-FC	-.36	.32	-.99	.28	.26
MEGS	-.10	.14	-.38	.18	.46
W-FC × MEGS	.00	.00	.00	.01	.42

Pearson correlation analysis indicated a significant positive relationship between work-to-family conflict and family-to-work conflict ($r = .48$, $p < .001$). Overall work–family conflict demonstrated a strong positive relationship with maternal employment guilt ($r = .69$, $p < .001$). Maternal employment guilt was positively associated with both work-to-family conflict ($r = .59$, $p < .001$) and family-to-work conflict ($r = .60$, $p < .001$). No statistically significant relationship was observed between work–family conflict and job involvement.

Multiple Linear Regression Analysis

Table 4

Variable	*B*	*SE*	*t*	p	95% CI
Constant	38.01	2.01	18.93	.000	[34.03, 41.97]
Work to family conflict	-.14	.09	-1.47	.14	[-.32, .04]
Family to work conflict	.04	.08	.57	.56	[-.11, .21]

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Table 4 of multiple linear regression analysis was conducted to examine whether work to family conflict and family to work conflict significantly predicted job involvement. Results revealed that this model accounted for only 1.5% of the variance in job involvement that is not statistically significant $F(2,147) = 1.10$, $p = .336$. The findings revealed that neither work to family conflict ($B = -0.14$, $SE = 0.09$, $\beta = -0.14$, $t = -1.47$, $p = .14$) nor family to work conflict ($B = 0.05$, $SE = 0.08$, $\beta = 0.05$, $t = 0.58$, $p = .57$) were significant predictors of job involvement. The 95% confidence interval for both predictors indicates no significant effect.

Moderation

The results of a moderation analysis examining whether maternal guilt moderates the relationship between work-to-family conflict (W-FC) and job involvement among working mothers of toddlers. The overall model was not statistically significant, $F(3, 146) = 0.832$, $p = .479$, $R^2 = .017$, indicating that the predictors (W-FC, maternal guilt, and their interaction) together did not explain a significant amount of variance in job involvement. The interaction effect between W-FC and maternal guilt was also not significant, $B = 0.005$, $p = .426$, 95% CI [–0.007, 0.016], suggesting that maternal guilt did not significantly moderate the relationship between W-FC and job involvement. Additionally, the main effects of W-FC ($B = -0.36$, $p = .266$) and maternal guilt ($B = -0.10$, $p = .465$) were also not statistically significant.

Summary of Hypothesis Testing

H1: Work–Family Conflict positively influences Maternal Employment Guilt – Supported.
H2: Work–Family Conflict negatively influences Job Involvement – Not Supported.

H3: Maternal Employment Guilt influences Job Involvement – Partially Supported.
H4: Maternal Employment Guilt moderates the relationship between Work–Family Conflict and Job Involvement Partially Supported.

Overall, the findings demonstrate that work family conflict was strongly associated with maternal employment guilt but did not directly predict job involvement. Maternal employment guilt significantly moderated only the relationship between family-to-work conflict and job involvement. The findings indicate that work family conflict was positively associated with maternal employment guilt among nurses with toddlers. However, work family conflict did not directly predict job involvement. Maternal employment guilt significantly moderated the relationship between family-to-work conflict and job involvement, highlighting the importance of psychological responses to family demands in understanding nurses' professional engagement.

5. Discussion

The present study investigated the relationships among **work–family conflict**, **maternal employment guilt**, and **job involvement** among nurses with toddlers employed in tertiary healthcare hospitals. Drawing upon **Role Conflict Theory**, **Conservation of Resources (COR) Theory**, and **Self-Determination Theory (SDT)**, the study sought to explain how competing occupational and family responsibilities influence employed mothers' emotional experiences and occupational attitudes. The findings demonstrated that work–family conflict was significantly associated with maternal employment guilt, whereas its direct relationship with job involvement was not statistically significant.

Work–Family Conflict and Maternal Employment Guilt

The findings revealed a **significant positive relationship** between work–family conflict and maternal employment guilt, indicating that nurses experiencing greater interference between work and family responsibilities also reported stronger feelings of guilt regarding their maternal role. This finding supports the first hypothesis and suggests that increasing occupational demands intensify mothers' concerns about fulfilling caregiving responsibilities. This finding is consistent with the studies reviewed in the literature, which indicate that work–family conflict is one of the strongest predictors of maternal guilt among employed mothers. Previous research has consistently shown that long working hours, rotating shifts, excessive workload, and limited opportunities for family interaction contribute to feelings of guilt because mothers perceive that employment reduces the quality and quantity of time available for childcare. The present findings therefore reinforce existing evidence while extending it to Pakistani nurses caring for toddlers. The results are also consistent with **Role Conflict Theory**, which proposes that incompatible expectations associated with occupational and family roles generate psychological strain. Nurses participating in the present study simultaneously managed demanding professional responsibilities and intensive childcare obligations. Consequently, increased work–family conflict likely intensified perceptions that they were unable to perform both roles according to personal and societal expectations, thereby increasing maternal employment guilt. Similarly, **Conservation of Resources Theory** provides further explanation by suggesting that continuous investment of emotional and physical resources across competing roles eventually depletes available resources, increasing psychological stress and emotional exhaustion.

Work–Family Conflict and Job Involvement

Contrary to expectations, the present study found **no statistically significant relationship** between work–family conflict and job involvement. Although previous international studies frequently report that increasing work–family conflict reduces employees' psychological engagement with work, this relationship was not supported among nurses included in the present investigation. One possible explanation is that nursing is a profession characterized by strong professional commitment and ethical responsibility. Nurses may continue to

demonstrate high levels of psychological involvement in patient care despite experiencing substantial work–family conflict because professional identity and patient welfare remain central to their occupational values. Consequently, occupational commitment may buffer the negative influence of work–family conflict on job involvement. The absence of a significant relationship may also reflect organizational and cultural characteristics of the Pakistani healthcare context. Many nurses may perceive balancing occupational and family responsibilities as an unavoidable aspect of professional life, thereby developing coping strategies that allow them to maintain work engagement despite experiencing considerable personal stress.

Moderating Role of Maternal Employment Guilt

An important contribution of the present study is the examination of maternal employment guilt as a moderating variable in the relationship between work–family conflict and job involvement. The findings demonstrated that maternal employment guilt did not significantly moderate the relationship between work-to-family conflict and job involvement. However, it significantly moderated the relationship between family-to-work conflict and job involvement. The absence of a moderating effect in the work-to-family conflict model suggests that interference originating from occupational responsibilities may influence nurses relatively similarly regardless of their level of maternal guilt. Healthcare professionals often accept demanding schedules, shift work, and overtime as inherent features of the nursing profession. Consequently, although these work demands generate conflict with family responsibilities, maternal employment guilt does not substantially alter their influence on psychological involvement in work. In contrast, the significant moderating effect observed for family-to-work conflict indicates that emotional experiences associated with motherhood become particularly important when family responsibilities interfere with professional duties. Nurses experiencing greater maternal employment guilt may perceive interruptions originating from family responsibilities more negatively because these experiences reinforce concerns regarding their ability to fulfil both maternal and occupational expectations simultaneously. Consequently, maternal guilt amplifies the psychological consequences of family-to-work conflict on professional engagement.

Theoretical Implications

- First, the findings provide empirical support for Role Conflict Theory by demonstrating that competing occupational and family responsibilities are associated with increased maternal employment guilt. The study therefore confirms that incompatible role expectations create psychological strain beyond occupational outcomes alone.
- Second, the results strengthen Conservation of Resources Theory by illustrating that competing work and family demands contribute to emotional resource depletion. Maternal employment guilt appears to represent one psychological consequence of prolonged resource loss, particularly among nurses balancing intensive professional responsibilities with childcare obligations.
- Third, the findings provide a more nuanced understanding of Self-Determination Theory. Although work–family conflict did not significantly reduce job involvement, maternal employment guilt influenced how family-related conflict affected professional engagement.

Practical Implications

- Healthcare organizations should recognize that reducing work–family conflict alone may not be sufficient to improve occupational outcomes. Equal attention should be directed toward addressing the emotional experiences of employed mothers, particularly maternal employment guilt, through supportive workplace policies and organizational practices.
- Hospitals should consider implementing family-friendly scheduling practices, greater flexibility in shift allocation, and supportive leave arrangements for nurses with young children. Access to reliable childcare services, employee assistance programmers, and psychological

counselling may further reduce emotional strain associated with balancing professional and family responsibilities.

- Nursing supervisors also play an important role in creating supportive work environments. Open communication, recognition of employees' caregiving responsibilities, and empathetic leadership may help reduce perceptions of conflict while strengthening employees' psychological well-being.

Limitations and Future Research

Despite its contributions, the present study has several limitations that should be acknowledged.

- First, the cross-sectional design limits the ability to establish causal relationships among the study variables. Future longitudinal studies could examine how work–family conflict, maternal employment guilt, and job involvement evolve over time.
- Second, data were collected using self-report questionnaires, which may be influenced by social desirability bias and common method variance. Future studies may benefit from incorporating supervisor ratings, observational methods, or mixed-method approaches.
- Third, the study focused exclusively on nurses with toddlers employed in tertiary healthcare hospitals. Consequently, the findings may not be generalizable to other healthcare professionals, fathers, mothers with older children, or employees working in different organizational contexts.
- Fourth, the relatively low internal consistency observed for the Job Involvement Scale suggests that future research should consider alternative measurement instruments or culturally adapted versions with stronger psychometric properties.

Future investigations could also examine additional variables such as organizational support, supervisor support, resilience, emotional intelligence, psychological capital, and work engagement to develop a more comprehensive understanding of factors influencing employed mothers' occupational experiences.

Conclusion

The present study examined the relationships among work–family conflict, maternal employment guilt, and job involvement among nurses with toddlers employed in tertiary healthcare hospitals. The findings demonstrate that work–family conflict is significantly associated with maternal employment guilt, highlighting the emotional consequences of balancing demanding professional responsibilities with childcare obligations. Contrary to expectations, work–family conflict did not directly predict job involvement, suggesting that nurses may maintain professional commitment despite experiencing considerable occupational and family pressures. However, maternal employment guilt significantly moderated the relationship between family-to-work conflict and job involvement, emphasizing the importance of emotional experiences in shaping occupational attitudes among employed mothers. Overall, the study contributes to organizational behaviour and nursing literature by integrating Role Conflict Theory, Conservation of Resources Theory, and Self-Determination Theory within a single conceptual framework. The findings provide evidence supporting the development of family-supportive workplace policies that acknowledge both organizational demands and the psychological experiences of working mothers. By addressing an important gap within the Pakistani healthcare context, this study offers practical recommendations for healthcare organizations seeking to enhance employee well-being, strengthen professional engagement, and improve the quality of patient care while supporting nurses in balancing their professional and maternal responsibilities.

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