

## Balinese Nurses and the Multifaceted Role Burden: A Qualitative Exploration

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ARTICLE INFO	ABSTRACT
<p><b>Manuscript Received:</b> 26 Mar, 2025  <b>Revised:</b> 10 Jun, 2025  <b>Accepted:</b> 24 Jun, 2025  <b>Date of Publication:</b> 12 Aug, 2025  <b>Volume:</b> 8  <b>Issue:</b> 8  <b>DOI:</b> <a href="https://doi.org/10.56338/mppki.v8i8.7622">10.56338/mppki.v8i8.7622</a></p>	<p><b>Introduction:</b> Female nurses in Bali face several challenges after marriage, including cultural expectations, domestic responsibilities, and professional demands in the workplace. This may be a risk factor for physical and psychological problems. This study aimed to determine the perspectives of female Balinese nurses on their triple roles, so it contribute to existing literature on gender roles and nursing in patriarchal.</p> <p><b>Methods:</b> This study uses a qualitative methodology underpinned by a phenomenological framework. Data were obtained through in-depth interviews and subjected to a systematic analysis involving transcription, thematic categorization, and processing using N-Vivo 12 software. The population in this study consisted of Balinese Hindu women who worked as nurses. Participants were determined using a purposive sampling technique with the following inclusion criteria: willing to be a participant, able to speak Indonesian, a nurse, as a housewife and already having children, working with a shift system or clearly scheduled (at least 40 hours/week), and active in traditional activities. The exclusion criterion was Balinese women with cognitive, mental, and verbal communication disorders. Twelve participants were interviewed until data saturation was reached. This study was approved by the Health Research Ethics Committee of Stikes Bina Usada Bali (Approval Number: 082/EA/KEPK-BUB-2025). All participants provided informed consent before participating in the study.</p> <p><b>Results:</b> This research resulted in 6 themes, namely adaptation process, challenges as a Balinese' woman, perceived complaints, strategies to balance roles as Balinese women, support received, and feeling as a Balinese' woman. Participants explained their perspectives and experiences in balancing roles at home, as workers, and as part of Balinese society. Their multiple roles have led to physical and psychological complaints. However, some participants also revealed that there is support from the environment and positive affirmation that being a married Balinese woman is pride, because it is strong and awesome.</p> <p><b>Conclusion:</b> This study uncovered six themes that deeply describe what Balinese female nurses experience and feel. These results are expected to help community nurses take strategic steps in providing nursing care to a special aggregate, namely, working women in the Balinese community.</p>
KEYWORDS	
<p>Female; Nurse; Perception; Triple Roles</p>	
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## INTRODUCTION

Women are the spearhead of a nation's development. The role of women is not only limited to participation in the world of work, but also very influential in encouraging economic growth and social progress. Women have the ability to organize, care for and earn a living for their families (1). In this modern era, women's contributions are increasingly important, as they must balance multiple responsibilities at home, at work, and in the community (2). Despite their significant contributions, women still face systemic challenges rooted in patriarchal structures that continue to persist in many cultures (3).

Patriarchy as a social system in which men hold ultimate power often determines gender roles and expectations that limit women's opportunities and freedom (4). This system is deeply rooted in tradition and cultural norms, reinforcing inequality and hindering women's full participation in various spheres of life (5). Women are expected to prioritize their domestic roles over their professional and personal ambitions. The persistence of cultural norms and the preservation of traditional heritage further complicate this dynamic, as conventional roles and expectations are often upheld—sometimes at the expense of women's well-being (6). This indicates that the transition experienced by Balinese women after marriage is perceived quite differently compared to other regions, reflecting a unique culture and set of characteristics shaped by a deeply rooted patriarchal system.

The patriarchal system continues to be upheld as the prevailing social structure in the province of Bali. Balinese women hold significant roles and responsibilities both within the family and in the broader community. This is particularly evident during religious rituals, where women assume central and vital roles—such as preparing *banten* (ritual offerings), performing sacred dances, and arranging the placement of offerings in accordance with established traditions. Moreover, there are numerous other essential duties that women are expected to carry out during religious ceremonies (7). The patriarchal system, deeply embedded in all aspects of Balinese cultural life, has a significant impact on the mental health of married Balinese Hindu women. These women are subject to social expectations that require them to actively contribute to the preservation of cultural traditions within the community, a practice known as *menyama braya*. Previous research has indicated that this obligation can lead to social anxiety, particularly among newly married women. Balinese Hindu women often experience anxiety when faced with the pressure of fulfilling the high social expectations associated with their traditional roles (8). However, there has been no research exploring how Balinese female nurses manage their threefold roles in everyday life, thus highlighting the novelty and significance of this study.

Balinese Hindu women navigate multiple layered responsibilities, commonly referred to as triple roles, which encompass domestic, productive, and social duties. These roles impose a considerable burden, as women strive to fulfill their obligations as caregivers, income earners, and active participants in both social and cultural spheres. The weight of these diverse responsibilities can lead to significant stress. This is supported by previous research indicating a significant correlation between the mental health conditions of female nurses working in Bali and the demands of triple roles. The triple role condition has been shown to exert a negative impact on their mental well-being (9). One study found that the average level of occupational stress among female nurses is higher than that of male nurses (10). In addition, a study conducted in China also reported that female nurses scored higher on measures of burnout syndrome compared to their male counterparts (11). The factors contributing to role conflict among Balinese women who undertake triple roles include limited time spent with family, work-related issues carried into the home, and leisure time devoted to cultural activities (12).

The poorly managed condition of triple roles has the potential to cause psychological disorders ranging from anxiety to depression, with the most severe consequence being suicide attempts. There have been concerning reports regarding the rising levels of stress among Balinese women. Prolonged stress can lead to depressive conditions, which may increase the risk of suicidal ideation. Both independent and combined dysregulations in physiological stress systems—especially the hypothalamic–pituitary–adrenal (HPA) axis, the immune-inflammatory response, and the autonomic nervous system (ANS)—may play a role in increasing this risk (13). A study conducted in Bali between 2017 and 2019 documented 234 cases of suicide attempts, of which a majority—156 cases (66.7%)—involved female patients (14). Another study indicates that women who undertake triple roles are prone to experiencing conflicts both within the family and at work, thereby increasing the risk of psychological stress (15).

The psychological well-being of Balinese women has yet to emerge as a prominent issue, resulting in a lack of preventive measures or strategic policies. This underscores the importance of conducting an exploratory study to

understand how Balinese female nurses navigate their multiple layered roles in daily life. The objective of this research is to gain an in-depth perspective from Balinese female nurses regarding the triple roles they undertake.

## **METHOD**

### **Research Type**

This study employs a qualitative phenomenological design to explore in depth the perspectives of Balinese women regarding the triple roles they undertake (16). This approach was chosen because it allows for an in-depth understanding of how participants experience and perform their roles as wives, mothers, members of the community, and healthcare professionals. It enables the exploration of their inner experiences related to cultural, occupational, and domestic pressures, and uncovers the subjective meanings they ascribe to their daily lives. Data were collected through in-depth interviews guided by a semi-structured framework and subsequently analyzed using thematic analysis.

### **Population and Participants**

The population of this study comprises all Balinese Hindu women working as nurses. Participants were selected using purposive sampling based on the following inclusion criteria: willingness to participate, proficiency in the Indonesian language, employment as a nurse, status as a homemaker with children, working in a shift or clearly scheduled system (40 hours per week in accordance with international standards set by the WHO and ILO), and active involvement in cultural activities. The exclusion criteria consisted of Balinese women experiencing cognitive, mental, or verbal communication impairments. A total of 12 informants were interviewed, at which point data saturation was achieved.

### **Research Location**

The study was conducted in Tabanan Regency, which is known for its strong adherence to customs and cultural traditions. Consequently, married women are required to participate in religious and cultural activities held within their respective village communities.

### **Instrumentation or Tools**

The primary instrument in this qualitative study is the researcher, supported by an interview guide, recording devices, and field notes to facilitate data collection. The researcher will conduct a pilot test with two Balinese women to ensure the validity of the interview guide and to prepare adequately. A semi-structured interview guide has been designed and utilized to explore participants' experiences in managing the triple roles in their daily lives. To manage reflexivity and reduce potential bias, data triangulation was employed by validating the emerging themes with participants, ensuring the accuracy and credibility of the findings.

### **Data Collection Procedures**

The researcher explained the procedures that would be undertaken throughout the study. Additionally, informed consent was obtained from participants prior to data collection. Data were gathered through face-to-face in-depth interviews conducted at the participants' homes, each lasting approximately 30 to 45 minutes.

### **Data Analysis**

Data were analyzed thematically using NVivo version 12 software to identify patterns and themes related to the triple roles of Balinese women. The analysis began with importing the data, followed by repeated reading and reviewing of the transcripts. This was succeeded by coding and the creation of nodes. The coding process involved identifying, labeling, and organizing segments of data from the transcripts into categories that reflected emerging themes, underlying concepts, or significant meanings (17). *After completing these steps, the researcher proceeded to identify subthemes and themes, as well as to establish patterns. The resulting subthemes and themes were then visualized using a mind map.* This study also adopts a feminist phenomenological approach, which integrates phenomenology with feminist perspectives to gain a deeper understanding of women's experiences as shaped by social, cultural, and patriarchal power structures (18).

## Ethical Approval

This study was approved by the Health Research Ethics Committee of Stikes Bina Usada Bali (Approval Number: 082/EA/KEPK-BUB-2025). All participants provided informed consent prior to their involvement in the study. The confidentiality of all participants was rigorously maintained throughout the research process. The researcher ensured that no form of coercion or harm occurred during the data collection process.

## RESULTS

### Characteristic of Participants

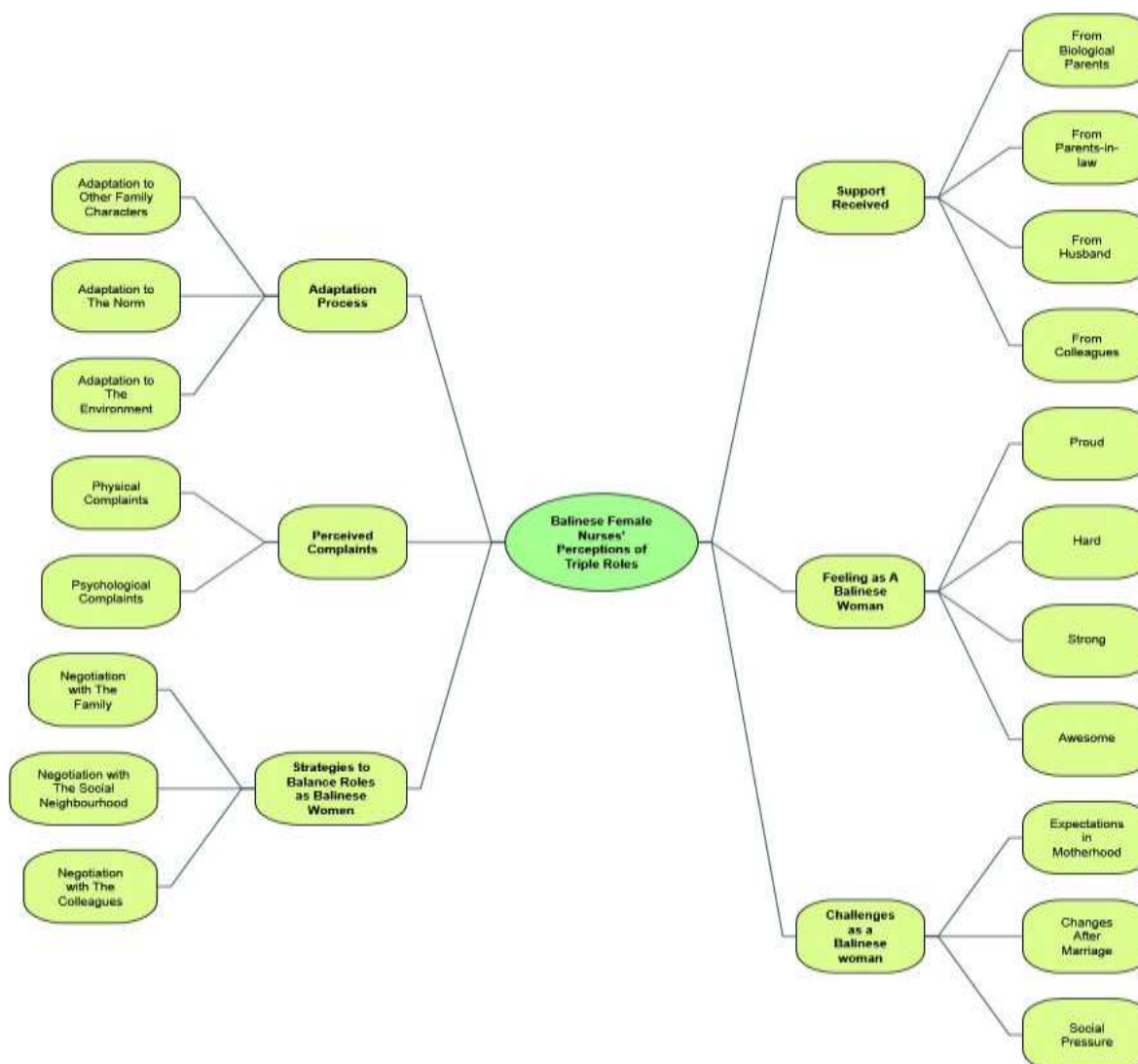
The study involved 12 participants, whose characteristics are summarized in Table 1. The oldest participant was 45 years old (P9), while the youngest was 29 years old (P7). The longest duration of marriage was 19 years (P9), and the shortest was 3 years (P12). The length of employment as a nurse was also examined, with the longest tenure being 19 years (P9) and the shortest being 5 years (P7, P12). Regarding the number of children, the participants were evenly divided into two groups: six participants had two children (P1, P3, P4, P5, P6, P9), and six participants had one child (P2, P7, P8, P10, P11, P12).

**Table 1.** Characteristic of Participants (n=12)

No	Participant Code	Age	Duration of Marriage	Length of Employment as a Nurse	Number of Children
1	P1	36	10 years	11 years	2
2	P2	30	3 years	7 years	1
3	P3	39	10 years	8 years	2
4	P4	40	15 years	17 years	2
5	P5	35	10 years	8 years	2
6	P6	36	8 years	10 years	2
7	P7	29	4 years	5 years	1
8	P8	42	14 years	10 years	1
9	P9	45	19 years	19 years	2
10	P10	30	4 years	7 years	1
11	P11	35	8 years	9 years	1
12	P12	30	3 years	5 years	1

Source: Primary Data

In-depth interviews were conducted with twelve participants until data saturation was reached. The data analysis yielded six themes: adaptation process, perceived complaints, strategies to balance roles as Balinese women, support received, feelings as Balinese women, and challenges as Balinese women. A visualization of the themes and subthemes derived from the analysis is presented in Figure 1 below.



**Figure 1.** Mind Map of Balinese Female Nurses' Perceptions of Triple Roles

Each theme in this study comprises two to four subthemes, which were analyzed based on the participants' transcript data. The following is a detailed description of the research findings organized by each theme.

### Adaptation Process

The first theme identified is the adaptation process, which consists of three subthemes based on the participants' experiences and perceptions. These subthemes are adaptation to other family members' personalities, adaptation to social norms, and adaptation to the environment. Previous studies have not yet explored, in a qualitative context, how Balinese women adapt after marriage. One prior study merely stated that Balinese women undergo certain adjustments, particularly when there is a difference in caste (19).

### Adaptation to Other Family Characters

One participant (P10) mentioned that at the beginning of her marriage, conflicts arose with her in-laws due to differences in personality. The following is P10's statement:

*"At first, it was difficult since everything was new. There were conflicts initially, but over time I adapted and my in-laws adapted as well, so now we simply understand each other" (P10)*

One participant (P12) also expressed that differing personalities are part of the adaptation process and that it is necessary to adjust accordingly. The following is P12's statement:

*"After getting married, we meet new people with different personalities, and that is where I learned that not everyone needs to know when I'm in a bad mood. So, as much as possible, I try not to show those feelings"* (P12)

### **Adaptation to The Norm**

Participant P4 expressed that one aspect of the adaptation process involves changes in daily norms and habits. The following is P4's statement:

*"In the early stages of marriage, there are always challenges because we experience changes in norms and daily habits, requiring adaptation at the beginning of the marriage. Moreover, now that I live in my husband's family compound, which is quite large, I also need to learn to adapt."* (P4)

### **Adaptation to The Environment**

Participants P2 and P9 revealed that a new living environment can itself become a stressor due to difficulties in adapting. The following are their statements:

*"The first challenge is adapting to the new environment."* (P2)

*"Actually, there are many challenges; you have to adapt at the beginning because getting married in the village is difficult."* (P9)

### **Challenges as A Balinese Women**

The second theme identified in this study is challenges as a Balinese woman. The subthemes derived from the analysis, based on participants' experiences and perceptions, are: expectation in motherhood, changes after marriage, and social pressure. Previous research in India analyzed the comparison between matrilineal and patrilineal systems. Women in matrilineal societies were found to be more empowered in terms of decision-making freedom, whereas women in patrilineal societies were found to be less empowered (20).

### **Expectation in Motherhood**

Participant P12 expressed that the greatest change after marriage is becoming a mother who must be fully present to support her child's growth and development. The following is P12's statement:

*"Sometimes I feel that I am not yet as a good mother; I should be 100% present for my child."* (P12)

### **Changes After Marriage**

Participant P2 revealed that after marriage, one significant change is having to wake up earlier to attend to domestic household duties. The following is P2's statement:

*"My routine clearly changed after marriage compared to when I was a teenager. After getting married, I woke up at 5 a.m. because I felt shy around my in-laws, and they wake up very early."* (P2)

Participant P3 also expressed that a major difference in life after marriage is the obligation to remain actively involved in religious and cultural ceremonies. The following is P3's statement:

*"In essence, if there is a traditional ceremony within the immediate family, such as a death, wedding, or other cultural events, I must attend."* (P3)

### **Social Pressure**

Participant P2 mentioned that social pressure is greater on Balinese women compared to men. The following is P2's statement:

*"But I feel that more pressure is placed on women. Women are expected to be active in the banjar; if they are absent for a long time, feelings of shame arise, and people talk about why they haven't participated, even though my husband rarely attends."* (P2)

Participants P8 and P9 revealed that the social pressures they experience are often expressed verbally. The following are their statements:

*“My work cannot be left unattended; when my mother-in-law was ill, cultural activities could not proceed smoothly and were often talked about by neighbors.” (P8)*

*“There are actually many challenges, especially when I work night shifts as a nurse. My husband often hears comments from people in our neighborhood saying, ‘Why does your wife frequently work night shifts and cannot contribute to social activities?’” (P9)*

### **Perceived Complaints**

The third theme identified in this study is perceived complaints, which comprises the subthemes of physical complaints and psychological complaints. These findings can serve as an initial step toward preventing long-term health implications for Balinese women. Efforts to improve health status through community-based physical activities have already been implemented; however, a common concern expressed is the lack of time and physical exhaustion.

#### **Physical Complaints**

Eight participants reported experiencing physical fatigue after marriage. The following are statements from P1, P2, P3, P5, P8, P10, P11, and P12:

*“Actually, it doesn’t threaten health per se, but perhaps the fatigue is very common among Balinese women due to the many activities they engage in.” (P1)*

*“Maybe the difference is just getting tired quickly, probably because of a busy routine.” (P2)*

*“Now I get tired more quickly compared to before marriage.” (P3)*

*“Physically, every day I go back and forth taking my child to school, then in the afternoon I have to work, and after work, take care of the child again.” (P5)*

*“There definitely is some physical fatigue, especially now that I’m getting older, it’s easier to get tired.” (P8)*

*“To be honest, physical fatigue, ma’am.” (P10)*

*“The obstacle comes from myself; I just feel tired.” (P11)*

*“Physically, after work I always feel very tired.” (P12)*

#### **Psychological Complaints**

Four participants reported experiencing stress related to being Balinese women. The following are statements from P1, P3, P5, and P9:

*“Anxiety and stress are very common among Balinese women.” (P1)*

*“I go through it, although on the other hand I feel pressured.” (P3)*

*“The feeling of tiredness is actually the main issue.” (P5)*

*“Mental strain is the heaviest burden.” (P9)*

Additionally, three participants reported stress related to their domestic role as mothers. The following are statements from P7, P8, and P11:

*“After marriage and giving birth, I almost experienced baby blues.” (P7)*

*“When the child won’t listen, it makes me emotional.” (P8)*

*“Mental stress happens sometimes, for example when my child had a swimming lesson at a time that wasn’t convenient, so I got a bit frustrated having to take them there.” (P11)*

### **Strategies To Balance Roles as Balinese Women**

The fourth theme identified in this study is strategies to balance roles as Balinese women, which includes three subthemes: negotiation with the family, negotiation with social and neighborhood circles, and negotiation with colleagues. The strategies identified in this study align with Southeast Asian collectivist cultures, where group harmony, family ties, and community obligations are prioritized over individual goals (21).

### Negotiation with The Family

Five participants reported negotiating with their families to manage their multiple roles. The following are statements from P1, P2, P5, P11, and P12:

*"So, I negotiate with my environment and parents because I have to choose one priority among the three roles."* (P1)

*"I work in the morning, so the problem of ngayah (traditional service) is handled by my mother-in-law."* (P2)

*"There was a time when I didn't have a helper, so my husband and I arranged schedules to back each other up with household chores, and if schedules conflicted, I would ask my mother-in-law to watch the children since I don't live with her."* (P5)

*"I don't want to force myself too much to attend traditional ceremonies because my mother-in-law is still around and she takes the lead."* (P11)

*"Fortunately, my mother-in-law sometimes helps with preparing the children's meals."* (P12)

### Negotiation with Social and Neighbourhood

Three participants also reported negotiating with their social environment in their residential area to balance their roles as workers and homemakers. The following are statements from P6, P7, and P11:

*"They know that I work and it's impossible for me to always have time off. If there is a traditional ceremony on the weekend, I will attend. I'm more flexible regarding cultural activities, and my community is relatively understanding."* (P6)

*"Usually, I just pay someone else to replace me and don't participate directly in the traditional work."* (P7)

*"When there is a traditional ceremony in the village, such as Ngaben, my community understands that I have to work and take care of my children first."* (P11)

### Negotiation with The Colleagues

As nurses, the participants also expressed the possibility of negotiating within the workplace to balance their roles as community members and mothers. The following are statements from P4, P8, P10, and P11:

*"Usually, I swap shifts with my coworkers; for example, if I have to help with traditional ceremonies in the morning, I exchange my shift to the afternoon so I can assist."* (P4)

*"When I work the morning shift, I sometimes have to request leave if my mother-in-law cannot replace me in the traditional role."* (P8)

*"As long as I can swap shifts, I do; but if I can't, usually my mother-in-law steps in."* (P10)

*"There was a time when my child was sick while I had to work, so I chose to stay at home."* (P11)

### Support Received

The fifth theme identified in this study is support received, which consists of four subthemes: support from biological parents, support from parents-in-law, support from husband, and support from colleagues. The support received by the participants was perceived as highly beneficial in helping them balance the three roles they must fulfill on a daily basis. None of the participants reported receiving support from institutional or organizational sources, either from their workplace or community organizations. However, support from colleagues was considered highly valuable in maintaining professionalism in their roles as nurses.

#### From Biological Parents

Although Balinese culture follows a patriarchal system, Balinese women still often receive support in managing multiple roles from their biological parents. The following are statements from P1, P7, P10, P11, and P12:

*"Support from my biological parents is definitely there."* (P1)

*"My biological parents, but my mother doesn't really help with childcare, so mostly my father assists."* (P7)

*"In the end, childcare usually falls to my biological mother so that all roles can be managed."* (P8)

*"Support comes from my biological parents."* (P10)

*"Mostly it's actually my biological mother."* (P11)

*"I receive a great deal of support from my biological mother."* (P12)



### **From Parents-in-law**

Support from parents-in-law is also perceived as quite strong by the participants. The following are statements from P3, P4, and P9:

*"My mother- and father-in-law always guide and teach me about the customs and norms at home, and they advise me to always respect the elders."* (P3)

*"My parents-in-law help by taking care of my child."* (P4)

*"I have support from my parents-in-law, so automatically I can manage to balance things well."* (P9)

### **From Husband**

Another form of support that has a significant impact on the lives of Balinese women is support from their husbands. The following are statements from P2, P4, P6, and P12:

*"The most support I receive is from my husband because whenever I have complaints, I always turn to him. My husband understands, comforts me, gives me understanding, and provides support."* (P2)

*"My husband plays the biggest role, ma'am, in my opinion. For example, he usually takes our child to school, helps with bathing and feeding the child. He also often helps with household chores like washing and sweeping."* (P4)

*"My husband and I support each other; we help and back each other up."* (P6)

*"My husband, I don't know why, maybe because we dated for 10 years before marrying, he understands me without me having to say anything, so in situations like that, my husband becomes my listener."* (P12)

### **From Colleagues**

As workers, Balinese female nurses also have the opportunity to share experiences and receive support from their colleagues. The following are statements from P8 and P12:

*"Indirectly, I can share experiences and discuss role-related issues with fellow workers."* (P8)

*"My main source of support is at the workplace, where I share with friends."* (P12)

### **Feeling as A Balinese Women**

The sixth theme identified in this study is feeling as a Balinese woman, which consists of four subthemes: proud, hard, strong, and awesome. These emotions are consistent with the findings of previous research, which indicated that the resilience of Balinese women is significantly influenced by self-compassion (22).

#### **Proud**

One of the participants expressed her pride in being a Balinese woman working as a nurse. The statement from P1 is as follows:

*"I am proud of Balinese women for being able to manage their time, because once married, besides working, they must also participate in cultural ceremonies."* (P1)

#### **Hard**

There are also three participants who expressed that being a Balinese woman is challenging. Here are the statements from P2, P7, and P11:

*"As a Balinese woman, I think it is difficult because we have to adapt more than our husbands, maybe because Bali is more patriarchal."* (P2)

*"It is a burden because Balinese people have to participate in ngayah (community service) after marriage."* (P7)

*"Actually, it is mostly difficult because the workload is not just one."* (P11)

#### **Strong**

Furthermore, there is an assessment that being a Balinese woman means being very strong. Here are the statements from P2, P4, P6, P9, and P10:

*"In my opinion, Balinese women are very strong and remarkable."* (P2)

*"I see them as strong in carrying out their roles." (P4)*

*"Strong, not only by themselves but also supported by others; many Balinese women are remarkable in managing their time well." (P6)*

*"Balinese women must be strong, both at work, at home, and in the community." (P9)*

*"Balinese women are strong in all situations — at home, at work, and in cultural activities. They are truly remarkable." (P10)*

### **Awesome**

The strength of Balinese women, according to several participants, makes them remarkable individuals. Here are the statements from P3, P5, and P7:

*"Balinese women are definitely awesome." (P3)*

*"They are remarkable in managing all schedules, from cultural ceremonies, work, to taking care of the household. In my opinion, they are truly remarkable." (P5)*

*"They are remarkable for having reached this stage, from childbirth, working, to fulfilling cultural duties. Truly awesome." (P7)*

## **DISCUSSION**

### **Characteristic of Participants**

The age range of the participants was between 29 and 45 years old. This finding is consistent with previous research stating that female nurses who are at risk of experiencing sleep quality disturbances and depression are within the age range of 24 to 58 years (23). This indicates that the age range of female nurses tends to be associated with high levels of stress and responsibility. Another characteristic examined in this study is the duration of marriage. The longest duration of marriage was 19 years and the shortest was 3 years, with an average of 9 years. This finding aligns with previous research which reported that the average duration of marriage related to quality of life during the pandemic was 8.69 years. This suggests that an average marriage length of 9 years faces challenges that potentially affect a person's quality of life.

The length of employment as a nurse was also examined in this study, with the range of working years found to be between 5 and 19 years. This is consistent with previous research that also investigated the prevalence of burnout among nurses in relation to their length of service. The results showed that 19.6% of nurses with a similar range of work experience experienced burnout (24). The number of children was also one of the variables examined in this study. There were six participants each with two children and one child, respectively. A qualitative study exploring work-life balance among women doctors and nurses in Malaysia also investigated the number of children. The majority of participants in that study had two children (25). This result indicates that the number of children is related to the balance of multiple roles experienced by female nurses.

The discussion of the themes identified in this study is closely related to the ethnocultural nuances within the context of professional nursing. This represents a novel aspect of research, as there has been limited exploration of the perspectives of female nurses who live and perform multiple roles within a patrilineal society. Furthermore, a transcultural nursing model has been developed by nursing expert Madeleine Leininger, which is reflected in the Sunrise Model that incorporates religious, social, and cultural factors (26). However, this model has yet to address strategic approaches for situations in which nurses themselves experience stressors resulting from the demands of these three factors. Therefore, integrating and formulating a model that responds to this phenomenon is essential, taking into account the themes identified in this study.

### **Adaptation Process**

The theme of the adaptation process is derived from three subthemes: adaptation to other family members' characters, adaptation to norms, and adaptation to the environment. Balinese female nurses undergo a challenging adaptation process because they face customs different from those of the home where they were born and raised. This is due to the strong adherence to a patrilineal system in Balinese society, in which women must leave their parental home to live with their husband and his family.

Previous research has indicated that Balinese women face social pressure to bear male offspring. However, the study also mentions that in certain cases, the male party may live and continue the lineage in the woman's home. Nevertheless, the challenges faced by women are more difficult due to their shifting role as head of the household (27). Adaptation to differing norms between families is also experienced by Balinese women after marriage, especially concerning differences in caste (19). Expectations regarding the roles, responsibilities, positions, and obligations deemed suitable or unsuitable for men and women differ greatly across societies. In some cultures, there are rigid rules about what roles each gender should fulfill—for instance, it may be frowned upon for a man to be seen in the kitchen or to publicly carry his child, just as it may be considered inappropriate for a woman to frequently leave home to pursue work (28).

Based on the findings of this study and several previous studies that examined the adaptation process of Balinese women, it can be concluded that they experience a significantly challenging adaptation process—even when marrying within the same province. This is largely due to the diverse cultures and customs present in Bali. Additionally, differences in caste, language and intonation, as well as various aspects related to religious offerings (*sesajen*), are key factors that compel Balinese women to undergo a demanding adaptation process.

### **Challenges as a Balinese Women**

The theme challenges as a Balinese woman emerged from three subthemes: expectation in motherhood, changes after marriage, and social pressure. Balinese women continue to face various challenges even after passing through the initial stages of marital adaptation. They are often expected to conceive soon after marriage in order to continue the husband's family lineage. However, becoming a mother presents a new set of challenges, particularly in balancing social responsibilities within the community and professional duties in the workplace.

Previous research exploring the experiences of female nurses as mothers found that emotional conflicts frequently arise when navigating these dual roles, often accompanied by feelings of anxiety, guilt, and stress (29). In addition, other studies have noted that during the pandemic, nurses were required to maintain professional performance despite extended working hours. This situation led to challenges within the family, as they were unable to meet the needs of their children and spouses, and had limited time to spend with them (30). Thus, female nurses are required to balance their roles at home and in the social environment, while also meeting professional demands.

The changes experienced after marriage were strongly felt by several participants. This aligns with previous research which stated that, prior to marriage, Balinese women were described as a group subjected to gender inequality in the form of stereotypes, sexual harassment, verbal abuse, and a double burden of work. Meanwhile, the portrayal of married Balinese women highlights the persistence of stereotypes, verbal and psychological abuse, economic violence, and continued double workloads (31). Greater challenges are experienced in inter-caste marriages, particularly for women who marry into a lower caste. Other studies have indicated that Balinese women who marry into a lower caste often face negative stigma and, in some cases, are ostracized by their own biological families (32). Another qualitative study noted that Balinese women who marry into a lower caste undergo various forms of personal adjustment, including adjustments in their relationships with their spouses, conflict management, interactions with extended family and in-laws, as well as their perceived social status (33).

Balinese women experience several types of social pressure after marriage, including pressure to have children immediately and pressure to participate in social and customary activities. A study conducted in Jembrana Regency, Bali, revealed that the community tends to prioritize traditional honor above all other considerations. Social values that emphasize the importance of lineage and family honor contribute to practices such as child marriage, often seen as a solution to out-of-wedlock pregnancies (34). Another study states that married Balinese women experience social anxiety, particularly in interactions with the social community. This anxiety is triggered by concerns about negative judgments from the community (8).

Based on the findings of this study and supported by several previous studies, it can be concluded that the challenges faced by Balinese women are not limited to the adaptation process but continue throughout their married life. Furthermore, as nurses, Balinese women also encounter professional demands that sometimes disrupt the balance between their roles at home and in the social environment. Nevertheless, the role balance of Balinese women remains essential, particularly in sustaining traditional customs and cultural heritage. This distinct phenomenon underscores the necessity for an effective and adaptive support system.

### **Perceived Complaints**

The theme of perceived complaints consists of the subthemes of physical complaints and psychological complaints. Balinese women experience these complaints due to managing multiple layered roles every day. Prolonged physical fatigue also threatens psychological well-being, and vice versa. A representative conceptual framework for this phenomenon is Psychoneuroimmunology. This theory illustrates the complex interactions between psychological processes (such as stress and emotions), the central nervous system, and the immune system, as well as their impact on physical and mental health (35).

Previous research has stated that sleep disturbances and fatigue experienced by female nurses have the potential to increase turnover intentions and actual turnover (36). Other studies also reported that as many as 35.1% of female nurses experience sleep disturbances, and 37.4% experience mild levels of depression (37). Some of these findings indicate that female nurses are highly susceptible to experiencing both physical and psychological complaints. This is closely related to the findings in the current study, where several participants reported experiencing both types of complaints while managing multiple roles. Other studies even mention that the risk of suicide is higher among female nurses (38).

Another study specifically examining Balinese women stated that being both a mother and a career woman is physically and emotionally draining, especially in Bali, a region with binding customary rules that place social and cultural life as an obligation (39). Furthermore, other studies have noted that in patriarchal societies, women working in the informal sector are often perceived as not making a significant economic contribution to their families. Additionally, domestic work or the role of a housewife is considered an obligation of little value. Consequently, patriarchal culture has influenced public perceptions, causing women to be viewed as inferior compared to men. This perception contributes to increased psychological pressure on Balinese women (40).

Based on the findings of this study, supported by previous research, it can be concluded that Balinese female nurses are highly vulnerable to both physical and psychological problems. The demands of professionalism as nurses tend to predominantly affect physical complaints, whereas social environment and domestic household matters more significantly impact the psychological aspects of Balinese women. However, these two issues are interrelated, thereby necessitating strategic efforts to enable Balinese women to adapt effectively to all the roles they undertake.

### **Strategies To Balance Roles as Balinese Women**

The theme strategies to balance roles as Balinese women consists of three subthemes: negotiation with the family, negotiation with social and neighborhood, and negotiation with colleagues. Married Balinese women live with their husband's extended family. Various types of negotiation are undertaken by the participants in this study to balance the multiple roles they must fulfill.

Previous research has stated that one resilience strategy for female nurses to manage burnout syndrome is obtaining social support (41). Other studies also state that there is a relationship between coworker support and work-family conflict among working Balinese women. These studies further mention that Balinese women with husbands who work full-time receive support from family members to manage household tasks (42). Additionally, other studies also mention that negotiation with both the mother-in-law and biological mother can assist Balinese women in balancing the three roles they must fulfil (8). Other studies also state that negotiation with the social environment can bring happiness amid the demands of the roles Balinese society must fulfill (43).

### **Support Received**

The theme support received is composed of the subthemes: support from biological parents, from parents-in-law, from husband, and from colleagues. Thus, Balinese women also receive support from several parties in their current lives. Although not all receive support from every source, at least Balinese women can share roles with their biological family, their husband's family, their husband, and their colleagues.

The findings of this study align with previous research analyzing social support and the occurrence of burnout syndrome among nurses. The results showed a significant negative correlation between social support and burnout syndrome (44). Furthermore, findings from other studies also indicate that social support acts as a mediator between workplace bullying and health problems experienced by nurses (45). Specifically regarding female nurses, a study conducted in Indonesia found that factors influencing the success of exclusive breastfeeding among female nurses

include family support, co-worker support, and healthcare worker support (46). Thus, the success of female nurses in balancing their three roles is closely linked to the social support they receive, particularly within the workplace environment.

The internal support received by female nurses in Bali is also very important. A study discussing the patriarchal culture in Bali stated that men also play a significant role in gender equality and support women's roles in their struggles (47). Another study also mentioned that the presence of family is considered a support system, thereby enabling the alleviation of role conflicts between family and work within a collective culture (48). Therefore, internal support is also crucial for female nurses in Bali given the complexity of the multiple roles they must manage daily.

### **Feeling as a Balinese Women**

The theme feeling as a Balinese woman emerged from four subthemes: proud, hard, strong, and awesome. These various feelings were expressed by the participants, reflecting not only their own perspectives but also their observations of the women around them. The feelings of pride, strength, and greatness are an accumulation of the burdens experienced in fulfilling daily roles. These emotions also serve as a form of appreciation for all Balinese women who carry multiple roles and face their respective struggles.

These findings align with previous research which stated that the excessive workload borne by Balinese women is due to several tasks and roles occurring simultaneously and being obligatory (39). Furthermore, other studies have indicated that the issue of role conflict is especially significant for women who must balance the demands of both professional careers and domestic responsibilities. Although men may face similar challenges, greater attention is typically focused on women due to their traditionally central roles within the family structure as wives and mothers (49). Previous research has also emphasized that Balinese women are assumed to be the resolvers of karma, embodying the consciousness of life both within the household and in the social environment (50). This understanding requires Balinese women to bear all burdens and responsibilities, even if it may be detrimental to their physical and psychological health. Therefore, it is understandable that Balinese women perceive themselves as strong, remarkable, and even take pride in their hard work in balancing multiple layered roles.

### **Limitations and Cautions**

This study is subject to certain limitations, notably that the data analysis was conducted by a single researcher, which may have led to an interpretation that reflects a singular perspective on the phenomenon under investigation. Nevertheless, the data processing phase, including the transcription of interviews, was supported by several research assistants. This collaborative effort contributed to enhancing the transparency and credibility of the data.

### **Recommendations for Future Research**

Future research is expected to employ more complex data analysis methods, such as mixed-method approaches. In addition, subsequent studies are anticipated to develop innovative interventions aimed at improving the quality of life of Balinese female nurses.

## **CONCLUSION**

This study identified six themes: adaptation process, challenges as Balinese women, perceived complaints, strategies to balance roles as Balinese women, support received, and feelings as Balinese women. The study not only highlights the problems and challenges faced by female nurses within Balinese society but also explores the coping mechanisms employed to manage stressors. The implication of this research is to provide a foundation for policymakers to develop innovative programs aimed at improving the quality of life of Balinese female nurses.

This study is a preliminary investigation with various limitations. Therefore, the researcher hopes that future studies will explore this phenomenon more comprehensively. Additionally, research using research and development methods is needed in the future to create health programs tailored for Balinese women managing triple roles, for instance, this may include a review of workplace leave regulations or a critical reassessment of customary community norms that potentially impose additional burdens on women in managing their multiple roles.

## **AUTHOR'S CONTRIBUTION STATEMENT**

All authors contributed to the research process and the preparation of this manuscript. The proposal was prepared by all three authors (NLPDYS, LPW, and IPAW). Furthermore, the data collection process was carried out by one researcher (NLPDYS). The transcript preparation process was assisted by research members (LPW and IPAW). The research data processing was carried out by the three authors (NLPDYS, LPW, and IPAW). Then, the preparation of the manuscript was carried out by the three authors with the division of introduction and method (IPAW), results (LPW), discussion and conclusion (NLPDYS). All authors read the entire manuscript and gave feedback before the submission process was carried out.

## **CONFLICTS OF INTEREST**

The authors have declared there is no any potential conflicts that could influence the impartiality of the research. The authors state that we have no financial or personal relationships with entities that might unduly affect our objectivity. There is no conflict of interest in this study.

## **DECLARATION OF GENERATIVE AI AND AI-ASSISTED TECHNOLOGIES IN THE WRITING PROCESS**

We hereby declare that in the preparation and writing of this work, we have used generative artificial intelligence (AI) and/or AI-assisted (ChatGPT) to support language refinement, enhance clarity, or improve the overall readability and structure of the manuscript.

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