

Intervention for work–family conflict and work deviance behavior among female workers in Tourism, Museum, Art Gallery Exhibition Centers

Implications for sustainable Tourism development intervention study

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Abstract

Background: This study was motivated due to psychological exhaustion, demands, and conflict degenerating from the work environment and family responsibilities facing career female workers. These roles and expectations have posed serious dilemmas to female populations in workplaces. Leaving them untreated is risky and could lead to severe psychological disturbances. Based on these, this study investigated the effect of the occupation health model of Rational Emotive Behaviour Therapy on work–family conflict and work-deviant behavior among female workers in Tourism, Museum, Art Gallery and Exhibition Centers in Enugu State.

Methods: A randomized control design was used. A total of 119 female workers were randomized into intervention and control groups, measured at 3 points (pretest, posttest, and follow-up test), and the data collected were analyzed using repeated measure statistics.

Results: The finding showed that the intervention is significantly effective in reducing the work–family conflict and work deviance behavior among female workers in Tourism, Museum, and Art Gallery Exhibition Centers. Nonetheless, the findings show that the gender and time interaction effects did not significantly affect the work–family conflict and work deviance behavior scores of the workers. The follow-up stage improved the intervention's favorable impact on the reduction of work–family conflict and work-deviant behaviors.

Conclusion: This suggest that occupation health model of Rational Emotive Behaviour Therapy has significant impact in reducing and changing female workers' perceptions of work–family conflict and work deviant behaviors.

Abbreviation: REBT = Rational Emotive Behaviour Therapy, WDBS = Work Deviance Behavior Scale, W-FCQ = work–family conflict questionnaire.

Keywords: female workers, occupation health model of REBT, Tourism, Museum, Art Gallery Exhibition Centers, work deviance behaviours, work–family conflict

1. Introduction

Traveling and exploring new locations, cultures, and related activities have long been a part of human history. When effectively harnessed, organized, positioned, and repositioned over time, this naturally diverse activity creates significant revenue among nations and contributes more to national GDP than specific sectors of a nation's economy.^[1] Nigeria's tourism industry has seen numerous stages of development. Nigeria had developed a precolonial and colonial tourist industry prior to the entrance of the colonialists.^[1] This is demonstrated by the

ongoing efforts to protect our cultural assets, artwork, and forest as game reserves. It also involves the development of new tourist destinations, such as the TINAPA holiday resort and the Obudu Cattle Ranch in Cross River State, among other sites and tourist destinations throughout Nigeria. While museums may restrict access due to concerns about the asset's well-being, the tourism sector often aims to maximize the number of visits.^[2] Notwithstanding this erratic relationship between tourism and museums, there has been a rise in visitor demand for museums, which is linked to the significance of cultural tourism as well as the advent of the “New Tourist” and “New Tourism.”

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One of the major economic areas that creates jobs and promotes growth in many nations is tourism.^[3] Owing to its significant impact and influence, tourism has helped numerous nations, including Dubai, France, America, and Hong Kong, create wealth and revenue.^[4] According to Metilelu,^[5] there is great potential for job creation and employment in Nigerian tourism.

In today's society, many career women face conflicts stemming from expectations related to family roles and the workplace. These conflicts can disrupt the peace, growth, and well-being of both the individual's home and work environment. Every employee is expected to prioritize and address the needs of their family, including providing quality time, ensuring the security of family members, offering caregiving, and emotional support, helping with school preparations, picking children up from school, and resolving unexpected conflicts. However, career women often struggle to balance these family obligations with the demands of their jobs. The work schedule of some organizations is remarked as placing serious demands on the workers. Thus, female workers' inability to balance the work schedule in the office and at home led to mistrust and undesirable psychological satisfaction among each other.^[6,7] Based on this, the present researchers, therefore, argue that the absence of work balance seemed to have constructed work–family conflict, thus, affecting organizational level of productivity and inefficiency.

Work-family conflict is defined according to Zakaria and Ismail^[7] as a form of role conflict where the demands of work and family cannot be aligned in several ways. Yang et al.^[8] work-family conflicts occur when workplace role expectations are hindered by family responsibility. Other studies documented long working hours, role ambiguity and conflict, shift work, and high physical and psychological loads as possible sources of work–family conflict.^[6,9,10] Sometimes, work demands become high, leading to energy exhaustion, increased health problems, stress, and misbehavior among female married workers.^[7,11] These work demands are not limited to the workplace but they also happen in the families of the married workers. Hence, individuals' inability to balance and meet their needs and commitments could make them vulnerable to interpersonal and intrapersonal conflict, leading to work–family conflicts.^[12]

People are affected in varied dimensions due to work–family conflict. It could be time-based, strenuous-based, or behavior-based.^[11,13] Work–family conflicts are affecting the workers' overall wellness, including health status and psycho-emotional disposition.^[11,14] How it affects people has been demonstrated in different research conducted in different regions/countries. For example, Kinnunen and Mauno^[15] in a study conducted in Finland reported that 40% to 78% of parent workers experience work–family conflict. Also, in the United States of America, over 50% of parent populations are affected by work–family conflict.^[16] Panatik et al.^[17] reported that increased work–family conflict has seriously affected Malaysian school teachers. A similar thing applies to Nurses serving in Washington where 50% of cases were reported.^[18] In Nigeria, work–family conflict among female workers was equally reported.^[11] Prior to this report, it was found that Nigerian female employees experience work–family conflict compared to their male counterparts.^[19] These experiences have impacted negatively on the career resilience, job performance, and career well-being of female workers in Nigeria.^[20] Ignoring the increasing rates and possible intervention to meliorate the effects of work–family conflicts on workers will create more harm and jeopardize the organizational missions and vision.

When the missions and vision of the organization are messed up, workers will be exposed to unwholesome and ethical behaviors. Unethical behavior in this context is conceived as unacceptable behavior in workplaces. A behavior devoid of good is a bad act or an illegal act punishable by law.^[21] Unethical behavior is not accepted in any professional organization.^[22] This statement is not exceptional, especially for those working in the tourism, museum, art gallery exhibition centers, and hotel industries.

Unethical behaviors include fraudulent activities, negligence to duty, conflict, quarreling, lack of commitment to duty, pilferage, and lateness to duty.^[23,24] Unethical behavior could lead to insignificant output and zero productivity.^[25] Unethical behavior could lead to the termination of employment and when that happens, the economic status of the family is gruesomely affected.^[22,26]

To assist individuals with experiences of work–family conflict and reduce organizational deviant behaviors, past studies^[27,28] recommended occupational health intervention for such a population. Occupational health intervention is a rational emotive behavioral-driven strategy that aims to challenge the illogical interpretation of events by organizational workers. Rational emotive behavioral therapy was originally created by Albert Ellis (in the 1950s). Many studies have shown the effectiveness of the occupational health model of Rational Emotive Behaviour Therapy (REBT) in treating negative and unhealthy thoughts among organizational workers.^[29–32] To date, no research has been done using workers working in Tourism, Museum, Art Gallery, and Exhibition Centers. Meanwhile, a good number of them experience irrational beliefs about their jobs.

Applying well-structured cognitive techniques will empower the clients to be in charge of their thoughts, emotions, and psychological dispositions. This indicates that individual thinking patterns can be changed positively, leading to reduced work–family conflicts and organizational deviant behaviors. Evidence has shown that REBT-based studies are effective in cushioning the cause-effect of psycho-emotional behaviors among workers.^[27,33,34] Collectively, these studies remarked that REBT is one of the best and leading therapeutic found to be more effective when utilized among workers. Given the effectiveness of REBT approaches, this study hypothesizes that the occupation health model of REBT will be effective in challenging unrealistic and unhealthy beliefs orchestrated by work–family conflicts and work-deviant behavior among workers in Tourism, Museum, Art Gallery, and Exhibition Centers in Enugu State, Nigeria.

2. Methods

2.1. Intervention

In this study, we harmonize the occupational health model of REBT intervention developed by Ogbuanya et al.^[27] and Ifelunni et al.^[11] The 2 interventions were adapted and used in this study. The process was in line with the principles and RET methods. It helps the participants to change their thinking patterns with a more balanced, functional and healthy thoughts patterns. The program was designed to last for 12 weeks, with each week including a 60-minute therapeutic session. Additionally, there is a 2-week follow-up exam scheduled for 2 months after the initial sessions. The treatment strategy employed follows a similar process utilized by other researchers and includes mood relaxation, cognitive restructuring, disputation exercises, and stretching.^[28,35] See Table 1 for additional details.

3. Dependent measures

3.1. Work–family conflict questionnaire (W-FCQ)

The current study adopted a W-FCQ developed by Carlson et al.^[12] The instrument is an 18-item self-report questionnaire developed with the intention of measuring 6 dimensions of work–family conflict like time-based WIF, time-based FIW, strain-based WIF, strain-based FIW, behavior-based WIF, and behavior-based FIW. It is made up of 3 items in each of the 6 mentioned dimensions of work–family conflict. This self-report questionnaire was used to ascertain participants' level of realistic/unrealistic behavior resulting from the work–family conflict. The response were ranged in 5 Likert options of strongly disagree (1) to strongly agree (5). The response options were

Table 1
Intervention manual.

Objectives	Week	Sessions	Activities	Techniques
Familiarization and formation of the intervention rules and regulation	1	1	Introduction, established rapport and standard of conduct	Therapeutic alliance
To educate the participants about work-family conflicts	2	2	Explanation to work-family conflict	Mood monitoring
To educate the participants on the concept of organizational ethics	3	3	Explanation of organizational ethics	Mood monitoring
To relate organizational ethics and work-family conflict	4	4	Address the relationship between organization ethics and work-family conflicts, the features and indications. Revision and home exercise	Biofeedback technique, relaxation technique practice exercise
To understand the consequences of organizational ethical behavior and work-family conflicts	5	5	How unethical behavior induced work-family conflict and its concomitant effects on individual family wellbeing and progress	Relaxation technique practice exercise
To identify work-family conflict-related psychological distress and its associated effect on the workplace and family interest and on organizational output	6	6	Identification of how factors associated with work-family. Conflict-induced irrational perception of employee arouses physiological responses	Hypnosis technique
Introduction to the objective of the study the meaning, purpose and goals of the program.	7	7	Address how to overcome events related to work-family conflict and workplace deviant behavior. Revision and home exercise	Cognitive disputation technique
Ascertain the unrealistic beliefs of the participants about work-family conflict and the consequent effect on workplace environment.	8	8	Unrealistic, unhealthy beliefs, dysfunctional emotional and work deviant behavior among the clients (bank and hotel workers) with work-family conflict that create Psychological distress symptoms were identified and clarified. Revision and home exercise	Biofeedback and relaxation techniques, meditation and yoga skills and practice exercise
To accept to manage situations the way they are	9	9	To manage work-family conflict and improve on organizational guiding rules Revision and home exercise	Cognitive disputation, behavioral exercises, problem-solving techniques, meditation, and yoga skills
To change their unrealistic and unhealthy cognitive beliefs to realistic and healthy beliefs	10	10	To deal with identified unrealistic and unhealthy cognitive beliefs and psycho-emotional symptoms that trigger the conflict and induce work deviant behavior. Revision and home exercise	Cognitive disputation, behavioral exercises, problem-solving techniques, meditation and yoga skills
To help reduce automatic beliefs and overevaluation of events and discover how to recognize accurate beliefs and rational self-statement	11	11	To meditate on events accurately so that life situations will not be perceived as enormous. How to dispute automatic, faulty inferences, and worthlessness is also addressed. Then revision and review of home exercise	Cognitive disputation, behavioral exercises, problem-solving techniques. Rational-emotive imagery skills, and meditation and yoga skills.
To help make family and workplace environment more meaningful, goal achievable, less traumatize and productivity and practice exercise	12	12	How to cope and challenge problems associated with work-family conflict and improve on work place environment. Revision and home exercise	Behavioural exercises, coping skills, problem solving technique, rational emotive imagery skills, cognitive disputation and practice exercises

maintained in this study. Thus, the reported coefficient of the scale ranges from .78 to .87 across the 6 dimensions Carlson et al.^[12] However, in this study, the internal consistency was measured as 0.82 Alpha. The validity of the instrument W-FCQ has been shown in a study conducted to ascertain the effectiveness of work-family conflict among female primary school teachers' well-being in Nigeria.^[11]

3.2. Work Deviance Behavior Scale (WDBS)

The WDBS was developed by Bennett and Robinson.^[36] The instrument was created to measure deviant behaviors in the workplace. It consists of a 19-item scale, divided into 2 major item scales: a 12-item scale and a 7-item scale. The 12-item scale focuses on assessing behaviors that are directly harmful to the organization (organizational deviance), while the 7-item scale focuses on behaviors that are directly harmful to individuals within the organization (interpersonal deviance).

Participants were asked to rate how often they engaged in each behavior on a scale from 1 (never engaging in the behavior) to 7 (engaging in the behavior daily). Higher scores indicate greater engagement in workplace deviant behavior, while lower scores indicate less engagement. The average scores for organizational deviance (0.81 α) and interpersonal deviance (0.78 α) scales were used to calculate the overall workplace deviance among bankers and hotel employees.^[36] This study further confirmed that the scale is reliable (0.82). The validity of the instrument WDBS was validated in a study conducted to determine workplace deviant behaviors among school employees.^[35]

3.3. Design

This study adopted a randomized pretest, posttest, and follow-up with 2 groups; experimental and control. The experimental groups were assessed 3 times (i.e., pretest, posttest, and at

follow-up), while the control groups were assessed only twice at pretest and posttest.

3.4. Ethical adherence

This study was approved by the University of Nigeria, Nsukka. This study follows and adheres to the principles and standards set by the American Psychological Association for conducting research involving human subjects.^[37] Consent participation form was distributed to participants who declared interest to be part of the study.

3.5. Participants

The statistical sample population was 119 participants. The population is classified as follows Tourism = 30 participants [Intervention Group = 19 (31.7%): Waitlist Control Group = 11 (18.6%)], Museum = 53 participants [Intervention Group = 20(33.3%): Waitlist Control Group = 33 (55.9%)], Art Gallery = 16 participants [Intervention Group = 10 (16.7%): Waitlist Control Group = 6 (10.2%)] Exhibition Centers = 20 participants [Intervention Group = 11 (18.3%): Waitlist Control Group = 9(15.3%)]. Women workers in tourism, museums, art galleries, and exhibition centers were accessed to know their perceptions of the work–family conflict and work-deviant behavior and the preliminary study indicated they qualified to be participants. Also, past study has reported uncertainties and high labor turnover in tourism centers.^[1] Recently, more research confirmed that the Nigerian environment and work conditions are volatile, harsh, and unfriendly to workers.^[9–11] This motivated the present researcher to choose the staff of Tourism, Museums, Art Galleries, and Exhibition Centers. Kindly see Table 2 for more details on participants' information.

3.6. Intervention procedure

During the distribution of invitation letters, we sought contact information of workers in Tourism, Museum, Art Gallery, and Exhibition Centers. Those who indicated interests were screened using the dependent measures, inclusion, and exclusion criteria. Inclusion criteria were (i) participation must be voluntary, (ii) must have been confirmed as permanent staff, (iii) must not have received any psychological treatment within a space of 7 (7) years. Exclusion criteria were staff who did not meet up were not allowed to participate in the study. Specifically, staff receiving clinical treatment and those who have received clinical attention in the last 2 months. A

total of 119 employees were admitted into the study and were divided into 2 viz, intervention and control groups. Using simple random allocation sequence GPower 3.1 software by Faul, Erdfelder, Lang et al.^[38] As the process of recruitment was going on, we ensured the elimination of selection bias by concealing the allocation sequence from the study participants.

The participants in the intervention group were exposed to a 12-session intervention program Sessions 1 to 3 focused on introduction, explanation of family conflict, and work deviant behaviors. Sessions 4 and 5 focused on relating organizational deviance and work-family conflict to irrational factors and concomitant consequences on work and family. Session 6 focused on identifying work–family conflict-related psychological distress and its associated effect on the workplace and family interest and organizational output. Session 7 addressed the study objective. 8 and 9 focused on ascertaining the unrealistic beliefs of the participants about work–family conflict and the consequent effect on the work environment, accepting to manage situations the way they are. Sessions 10 to 12 dealt with identified unrealistic and unhealthy cognitive beliefs, how to dispute automatic and faulty inferences remarked, and how to cope and challenge problems associated with work–family conflict, improve on workplace environment, and termination. At the end of the 12-week program, participants in the intervention group were informed that they would reconvene again. The researchers equally sent reminder messages to all the participants in their various email addresses and WhatsApp lines. This is to mark a 2-month follow-up exercise to determine the retention level of the participants over the interventions they received. They were given modified instruments which they completed on the spot; the exercise just lasted within an hour. The participants' level of turnout and responses were so amazing. Given that no incentive was attached to those who participated in the study yet they showed a high level of commitment.

3.7. Integrity check

The proper recruitment of external observers who formed part of the research team coupled with unbiased randomization of the participants into intervention and control groups, implementation cum executions of integrity checklist content. Also, the high level of compliance and commitment displayed by the participants not minding the tight schedule in their various offices accounts for its strength.

3.8. Counselling psychologists

Four psychologists implemented the intervention (2 females and 2 males). They were all Ph.D. holders in counseling psychology and had practiced cognitive therapy for over a decade. The treatment manual was given to them 2 months into the programme. We made the following request from them; check the clarity and the language used in the manual, moderate, and give corrections and suggestions. Their comments and responses added value and quality to the manual.

4. Results

Table 3 is repeated Analysis of Variance testing the effect of the intervention on work–family conflict of workers in Tourism, Museum, and Art Gallery Exhibition Centers. The results show that the intervention has significantly changed the negative perception of the workers on work–family conflict, $F(1.118) = 622.495, P < .01, \eta^2_p = .843$. The results also indicate that there is no significant effect of time on work–family conflict among workers in Tourism, Museum, and Art Gallery Exhibition

Table 2
Participants' demographic variables.

Variables	Categories	Intervention group	Waitlist control group	Chi-square tests
Age	Below 35	15 (25.0%)	10 (16.9%)	.559
	36–45	24 (40.0%)	26 (44.1%)	
	46 and above	21 (35.0%)	23 (39.0%)	
Years of experience	1–10 years	38 (63.3%)	33 (55.9%)	.032
	11–20	14 (23.3%)	11 (18.6%)	
	21–30	8 (13.3%)	7 (11.9%)	
	30 years and above	0 (0.0%)	8 (13.6%)	
Qualifications	NCE	46 (76.7%)	33 (55.9%)	.007
	B.Ed/B.Sc	14 (23.3%)	19 (32.2%)	
	M.Ed/M.Sc	0 (0.0%)	7 (11.9%)	

B.Ed = Bachelor in Education, B.Sc = Bachelor in Science, M.Ed = Master in Education, M.Sc. = Master in Science, NCE = Nigeria Certificate Education.

Centers, $F(1.118) = 4.888, P = .012, \eta^2_p = .040$. The results also indicate that work-family conflict among workers' scores were influenced significantly by group and time interaction effect, $F(1.118) = 73.614, P < .01, \eta^2_p = .388$. However, the results indicate that work-family conflict among workers' scores were not influenced significantly by gender and time interaction effect, $F(1.118) = .273, P = .726, \eta^2_p = .002$. The univariate analysis results revealed that the positive benefit of the intervention was improved at the follow-up stage, $F(1.118) = 489.179, P < .01, \eta^2_p = .807$.

Table 4 is repeated Analysis of Variance testing the effect of the intervention on work deviance behavior of workers in Tourism, Museum, and Art Gallery Exhibition Centers. The results show that the intervention has significantly reduced the work deviance behavior among workers in Tourism, Museum, and Art Gallery Exhibition Centres, $F(1.118) = 167.748, P < .01, \eta^2_p = .591$. The results also indicate that there is no significant effect of time on work deviance behavior among workers in Tourism, Museum, and Art Gallery Exhibition Centres, $F(21.118) = 23.226, P < .01, \eta^2_p = .167$. The results also show that the group and time interaction effect has a substantial impact on the work deviance behavior scores of workers, $F(1.118) = 279.285, P < .01, \eta^2_p = .707$. Nonetheless, the findings show that the gender and time interaction effects did not substantially affect the work deviance behavior scores of the workers [$F(1.118) = .372, P = .690, \eta^2_p = .003$]. The follow-up stage saw an improvement in the intervention's favorable impact on work deviant behavior, according to the univariate analysis results: $F(1.118) = 346.874, P < .01, \eta^2_p = .748$.

5. Discussion

The results show that the intervention has significantly reduced the work-family conflict and work deviance behavior among workers in Tourism, Museum, and Art Gallery Exhibition Centers. The findings also demonstrate a significant impact of the group and time interaction effect on the workers' work-family conflict and work-deviant behavior ratings. However, the results indicate that the workers' work-family conflict and work deviant behavior scores were not significantly impacted by the gender and time interaction effects. The intervention's beneficial effects on lowering work-family conflict and work-deviant behavior were enhanced during the follow-up phase. This demonstrates how the methods used helped the clients develop the skills necessary to manage the emotional responses that lead to work-family conflict and work-deviant behavior. However, earlier studies have shown that workers may behave unhealthily while performing their jobs^[29,30,39] which led to this study.

The finding of this study is in agreement with past studies that reported the effectiveness of REBT in challenging occupational-related irrational beliefs.^[11] Thus, by identifying and altering workers' unrealistic and unhealthy beliefs, the significant benefits of this psychotherapy to workers in their respective homes and workplaces cannot be overlooked and are not surprising. Because the main effect of the intervention was also clear in the follow-up test and could be reflected in their

subsequent dealings, relationship with others, and dedication to duty in their respective centers. Therefore, the ability to tackle an observed unhealthy and unrealistic belief could help female workers maintain optimum peace and adjustment in the family and workplace.^[40,41]

Generally, irrational beliefs were challenged with the application of some behavioral and emotional techniques. These include Cognitive rapport, cognitive restructuring, relapse prevention, reinforcement, problem-solving, assertiveness, and coping techniques. Cognitive rapport was created by the application of cognitive alliance technique. The participants in the intervention group were also exposed to how to identify their unhealthy and faulty thoughts and possible ways to challenge them. It was necessary to introduce some of the techniques to address the activating event such as problem-solving and assertiveness. Following this, cognitive reframing was also used to restructure the family/occupational-related disbeliefs and misbehaviors. By this, the participants' core statements were rationalized to reflect and represent what is realistic. Ensuring that the new way of interpreting situations in the family and workplace is learned very well, the participants were introduced to relaxation chair and breathing exercises, and coping techniques.

Consequently, on issues related to gender, the findings of this study indicated no gender interaction that both genders experience work-family conflict and exhibit deviant behaviors in their respective work environment. Thus, from the available literature reviewed, the focus was on the female gender^[8,11] among others. So, the finding of this study clearly showed that individuals' genders inability to positively respond to mental exhaustion affects their mood in the home and in their workplace. But through exposing those participants to intervention such unhealthy and unrealistic thoughts were challenged and dealt with.

Regarding organizational behaviors of the employed population, this study supported Ekwueme et al^[35] that the rational emotive behavior approach was a significant strategy in decreasing work deviant behaviors and irrational beliefs among school teachers. This is interesting as a similar finding is double evidence that the rational emotive behavior approach is consistent in helping people to adapt to their work environment. This has demonstrated that despite the work environment, rational emotive behavioral principles could assist the workers regardless of the work conditions and gender. Like the present study, Ekwueme et al^[35] also showed that gender is not a substantial factor considering the impact of rational emotive behavioral principles. It becomes necessary that male and females workers with irrational beliefs about their careers that lead them to engage in workplace deviant behaviors could be exposed to rational emotive behavioral principles.^[41] Given that workplace demand predisposes individual families to conflict which influences their behavior in the workplace, workers often negatively interpret emotional experiences and it produces dysfunctional reactions (deviant behavior).^[42] With this in mind, unrealistic and unhealthy beliefs have been validated as the undermining factor for work-family conflict and deviant behaviors in the workplace,^[43] it therefore, important that bank and hotel

Table 3

Main effect of the intervention on work-family conflict and the responding interaction effect by time and gender as measured by WFCQ.

Source	Type III sum of squares	Df	Mean square	F	Sig.	Partial eta squared
Group	20,426.189	1	20,426.189	622.495	.000	.843
Time	266.541	1.708	156.090	4.888	.012	.040
Time * Gender	14.914	1.708	8.734	.273	.726	.002
Time * Group	4014.368	1.708	2350.859	73.614	.000	.388
Follow-up stage	11,464.118	1, 118	11,464.118	489.179	.000	.807

Table 4**Main effect of the intervention on WDBS and responding interaction effect by time and gender.**

Source	Type III sum of squares	Df	Mean square	F	Sig.	Partial eta squared
Group	8483.034	1	8483.034	167.748	.000	.591
Time	321.350	2	160.675	23.226	.000	.167
Time * Group	3864.212	2	1932.106	279.285	.000	.707
Time * Gender	5.147	2	2.574	.372	.690	.003
Gender	220.201	1	220.201	4.354	.039	.036
Follow-up test	7325.021	1, 118	7325.021	346.874	.000	.748

WDBS = Work Deviance Behavior Scale.

workers be exposed to interventions that will have significant impacts on their cognitive and behavioral changes towards their family and their workplace since its evidence has been significantly proved to be juicy not only at posttest but even at follow up evaluation.

5.1. Limitations

Despite the numerous challenges faced, the current study successfully met its stated objectives. The study chose to focus on quantitative measures for evaluation, neglecting qualitative measures. As a result, the researchers suggested incorporating other methods, such as focus groups, interviews, and observation, to gather qualitative information that could complement the quantitative measurements. This limitation was identified as a drawback of the current study. Therefore, it is recommended that future research ensures that issues related to transportation and security are adequately addressed with participants early on.

6. Implications for sustainable Tourism development

The current study has further shown that rational emotive behavioral principles are promising in treating female workers with work–family conflict and deviant work behaviors orchestrated by unhealthy and unrealistic beliefs. The implication is that female workers in Tourism, Museum, Art Gallery Exhibition Centers should be referred to rational emotive behavioral therapists whenever they experience psychological disturbances, especially work–family conflict and deviant work behaviors. Female workers are often in conflict to resolve both domestic and workplace activities. The participant's inability to resolve domestic and organization activities often predisposes the individual (the employee) to psychological distress. When this psychological distress is misinterpreted in relation to their work, and family wellness, the resultant effect is manifest as conflict in family and induced work unacceptable behavior which affects the organizational growth and individual family wellness. Therefore, exposing the workers to such a psychological intervention could help the workers to embrace realistic thinking that could help them live up to expectations through overcoming such unrealistic thinking, non-pragmatic life, and erroneous beliefs.

The policy implications of this study are extensive as it contributes to the values and processes that drive policy and practice outcomes. These outcomes are aimed at practitioners who are the primary implementers of policy statements. With the current findings of the study, practitioners will better understand potential indicators or psychological attributes that impact the effective practice of their profession. This understanding will help them address beliefs that contribute to work–family conflict and deviance in the workplace. The positive impact of the intervention will lead to a more positive interpretation of job policies and improved work performance. This perception will enhance the future of Tourism Development in Nigeria. Previously, concerns

were raised about the peculiarities of the tourism industry in Nigeria, citing a work environment filled with uncertainties and high labor turnover.^[1] With a better understanding of these job peculiarities, the standards of practice will improve, leading to standardized input and output in line with global best practices. This will also encourage unionization and professionalization of workers in Tourism, Museums, Art Galleries, and Exhibition Centers.

7. Conclusion

Illogical perceptions of demands at work and family constitute certain frustrations and conflicts that influence career women's behaviors. These have been reported to affect job satisfaction, organizational well-being, and work behaviors. Hence, this study was designed to investigate the effect of occupation health model of REBT on work–family conflicts and work-deviant behavior among workers in Tourism, Museum, Art Gallery, and Exhibition Centers in Enugu State, Nigeria. This study concluded that the intervention is significantly effective in reducing the work–family conflict and work deviance behavior among female workers in Tourism, Museum, and Art Gallery, and Exhibition Centers. Nonetheless, the findings show that the gender and time interaction effects did not significantly affect the work–family conflict and work deviance behavior scores of workers. The follow-up stage improved the intervention's favorable impact on the reduction of work–family conflict and work-deviant behavior. Therefore, management and directors of tourist centers and the likes should partner with professionals in rational emotive behavior therapy for the advancement of the REBT education in the respective centers.

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