

Work-Family Conflict and Depression Among Academics Concerning Gender

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ABSTRACT

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Purpose – This study aims to investigate the work-family conflict and depression levels of academicians working in public and foundation universities according to the gender variable and the relationship between work-family conflict and depression levels.

Design/methodology/approach – Data were collected online from academics working in public and foundation universities in Türkiye (n = 388). The hypotheses were tested using an independent sample t-test. Moreover, Pearson correlation analysis was used to determine the relationship between work-family conflict and depression.

Findings – The study results revealed no significant difference in work-family conflict according to the gender variable, but there was a significant difference in depression levels according to the gender variable ($p < 0.05$). The level of work-family conflict showed a low level of positive correlation with the depression level variable ($r = .259$).

Discussion – As a result, there are statistically significant differences in terms of depression levels between female and male academics in favor of female academics. There is a significant, positive, and low relationship between work-family conflict levels and depression levels. The findings of the study potentially affect academics by identifying work-family conflict and the gender difference in depression levels. This study provides insight into academics' perceptions of work-family conflict and depression levels in Türkiye.

1. Introduction

Keeping work and family life balanced and taking care not to experience conflict between the two lives are among the crucial issues (Vuga & Juvan, 2013). Work-family conflict comes out when the pressures from the work and family spheres are mutually incompatible; participation in the family role becomes difficult due to involvement in the work role (Weer & Greenhaus, 2014). The fact that an individual's job comes before the family or believes that his/her job is more important than the family reveals the notion of work-family conflict (Namasivayam & Mount, 2004). The preference to work rather than fulfill the role in the family, the high level of schedule control, and the strict rules of working hours may also cause work-family conflict (Glavin & Schieman, 2011). This issue is important since the work-family conflict has negative consequences on personal outcomes, such as work, non-work productivity, turnover, family well-being, health, and stress (Kossek & Lee, 2017; Mihelic & Tekavcic, 2014). Work-family conflict was investigated with different concepts, such as quality of life (Md-Sidin et al., 2010), well-being (Abd Aziz et al., 2018; Fan et al., 2024; Aycaan&Eskin, 2005), stress and depression (Carvalho et al., 2018; Winefield et al., 2014; Obidoa et al., 2011), sleep problems (Jacobsen et al., 2014; Magee et al., 2018; Mäkelä et al., 2014; Liuet et al., 2020), emotional exhaustion (Jensen&Rundmo, 2015; Jensen&Knudsen, 2016; Zulkarnain et al., 2015; Zhang et al., 2012; Wang et al., 2012), mental health (Frone, 2000; Nordenmark et al., 2020), perceived health (Hwang&Yu, 2021). As seen in the literature review on this subject, there are many studies about work-family conflict. In addition, there is very little research on this subject with a sample of academicians in Türkiye. In conclusion, this study examines the depression levels and work-family conflict among academicians actively working in public and foundation universities in Türkiye according to the gender variable. It investigates the relationship between work-family

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conflict and depression. The primary aim of this study is to determine the "real" gender differences in depression and work-family conflict. From this assessment, some generalizations can be made about gender, work-family conflict, and depression rates in Türkiye. In addition, this wealth of data will strengthen the theoretical and practical foundations supporting the depression and work-family conflict levels of academicians in developing countries, such as Türkiye.

2.Literature Review

2.1. Gender and Work-Family Conflict

A significant focus of the work-family study is gender (Haines et al., 2008). The concept has been frequently examined by considering work-family conflict and depression. Males and females may have different experiences in life and at work, and also different perceptions of needs and priorities (Zurlo et al., 2020).

The literature contains a variety of observations related to gender and work-family conflict. Some studies (e.g., Namazi et al., 2019) found that males have experienced more work-family conflict than females. On the other hand, females notified higher levels of work-family conflict than males, according to many studies (Zurlo et al., 2020; Grönlund & Öun, 2018; Van Daalen et al., 2006; Cinamon, 2006; Aycan & Eskin, 2005). Additionally, studies (O'Laughlin&Bischoff, 2005; Aycan&Eskin, 2005) have shown that females receive less institutional support for work and family balance than males.

With the increase in females's participation in the workforce, there are changes in cultural values and gender roles. These changes affect individuals' work and family lives. Reasons, such as the individual's burden of responsibilities at work, inability to make it home, inability to fulfill responsibilities at home, and bringing work home, lead to work-family conflict (Yıldırım&Aycan, 2008). Staines (1980) was among the first to acknowledge that feelings and conducts experienced in work actions can spill over to the home surroundings, in addition to that, going beyond the physical together with temporal borders of the workplace and the home domain (Sok et al., 2014). According to the spillover theory, the tendency of employees to carry their feelings, views, skillfulness, and attitudes that they start at work into their household life and backward (Md-Sidin et al., 2010). Meanwhile, other studies found no significant gender differences in work-family conflict (e.g., Grant-Vallone & Donaldson, 2001; Fan et al., 2024). In light of these circumstances, the research in question puts forth the following hypothesis:

H₁: The mean work-family conflict level of the participants differs significantly according to gender.

2.2. Gender and Depression

Depression, a mood disease, is one of them most frequent psychiatric problems (Kafes, 2021). In short, it is an emotion similar to hopelessness, grief, and sadness (Çiftçi et al., 2008). The connection among gender and depression has been examined frequently. Some studies of males found that males have more depression than females. For example, Jeong et al. (2023), when comparing the severity and individual symptoms of depression during COVID-19 to pre-pandemic levels, research on gender differences in these aspects revealed that males experienced significantly higher increases in both the weighted prevalence of depression and its severe symptoms. Jung et al. (2023) examined the connection among the prevalence of depression and workplace bullying. A statistically significant correlation was found for both genders among the experience of bullying at work and the occurrence of depression, with a higher correlation among male employees. Liu et al. (2024) examined the effects and potential mediators of relative deprivation on depression among university students and the differences in these effects among males and females. Males demonstrated a stronger sense of relative deprivation compared to females, and the effect of this negative perception on smartphone addiction and depression was also found to be greater in this group. However, other studies indicate that females have more depression than males. Wadood et al. (2023) conducted a gender-based study on the associated factors of depression among married adults, finding that the prevalence of depression was significantly higher in females than in males. Zhou et al. (2023) sought to identify the connection between social health determinants and depression and examine their role in explaining gender differences in depression. They concluded that females have a higher risk of depression than males. Kim & Lee (2023) studied the gender-specific connection between stroke status and depression in South Korea and observed a greater risk of depression in females compared to the non-stroke group. Zurlo et al. (2020) examined work-family conflict and psychophysical health states; it was discovered that females felt far higher degrees of somatization, anxiety, despair, and work-

family conflict. Another study conducted by Guille et al. (2017) indicated that females experience more tension between work and home responsibilities, which was linked to higher levels of depression and burnout than in males. Kinnunen et al. (2004) examined the link between work-family conflict and well-being and satisfaction. The results revealed that, among females, work-to-family conflict sensed at Time 1 remarkably predicted job displeasure, parental distress, and psychological signs at Time 2 after a year. Seto et al. (2004) revealed that females who had more frequent work-family conflict and more work-connected stressors like poor relations in the workplace, job distrust, and underutilization of abilities were probable to have more depressive signs. Their findings suggest that gender differences in depressive symptoms could be attributable to females's greater demands in the work sphere and fewer resources in the home sphere than males, as opposed to their being more vulnerable to workplace stressors.

Females's participation in the workforce is increasing day by day, and their position paves the way for work-family conflict and depression. Biologically based and socio-environmental-based theories have been recommended to explain the differences in depression levels between males and females. Socio-environmental theories explaining why females experience depression at a higher rate than males have centered on early gender socialization, females's lower social standing, and the roles that males and females play in society as adults (Sachs-Ericsson & Ciarlo, 2000). The main concept of social role theory is that dividing males and females into social roles within society is the primary cause of both similarities and differences. Male and female behaviors typically support and maintain the division of work because they are products of socialization and the establishment of gender roles. For example, societal roles in industrialized economies are structured so that females are more likely than males to be housewives, primary child caregivers, and caregivers in the paid sector. In contrast, males are more likely than females to be primary family providers and to hold full-time roles in the paid economy, often involving physical strength, assertiveness, or leadership skills (Eagly & Wood, 2016). In gender roles, males are assigned to more income-generating jobs and some professional roles (e.g., mechanics, engineers, managers) and tend to hold higher status positions in society than females. According to social role theory, gender differences in personality are not due to innate psychological differences between the sexes but rather to the roles assigned to males and females (Lippa, 2010).

However, no discernible gender variations in depression were reported in other investigations. Frone et al. (1996) examined the relationships between depression, bad physical health, severe alcohol use, and two types of work-family conflict—work interfering with family and family interfering with work—to test for gender variations in the strength of these linkages. There was a strong and positive correlation found between sadness, bad physical health, severe alcohol use, and both forms of work-family conflict. The strength of the associations among work-family conflict and health-related conclusions was unaffected by gender. In their investigation of work-family conflict, job instability, and health conclusions between US workers, Minnotte & Yucel (2018) discovered a direct correlation between poor mental and physical health and work-to-family and family-to-work conflict. The investigation revealed no proof of this. This particular study makes the following hypothesis based on these evaluations:

H₂: The mean depression level of the participants differs significantly according to gender.

2.3. Work-Family Conflict and Depression

In work-family conflict, individuals encounter work conclusions (e.g., job contentment, organizational commitment, and turnover), family outcomes (e.g., marital satisfaction and family satisfaction), and personal outcomes related to physical health (e.g., physical symptoms, eating, and exercise behaviors), and psychological health (e.g., stress and depressive symptoms, life satisfaction) (Kossek & Lee, 2017). Stress-related outcomes were determined by Allen et al. (2000) as general psychological strain, somatic/physical symptoms, depression, substance abuse, burnout, work-related stress, and family-related stress.

Hwang & Yu (2021) showed a statistical difference in work-family conflict according to perceived health. Work-family conflict was low among those with good or fair perceived health status. On the other hand, work-family conflict was high in those with high levels of depression. Another study conducted by Frone et al. (1996) studied gender, health-related outcomes, and work-family conflict using two community samples. There was a strong and positive correlation found between sadness, bad physical health, severe alcohol use, and both shapes of work-family conflict. Moreover, Frone et al. (1997) studied the link of work-family conflict

to health conclusions and found that work conflict was longitudinally connected to elevated levels of depression poor physical health, and the occurrence of hypertension. Zamarripa and Gregory (2003) found that the significant decisive of depression and anxiety for males and females was conflict among work and family. Leineweber et al. (2012) used Swedish working females and males to study the relationship between work-family conflict and health. They discovered that although females encounter work-family conflict slightly more frequently than males, the phenomenon has a detrimental impact on the health of both sexes. Zhang et al. (2017) discovered a strong correlation among work-family conflict and depression symptoms in another study. Based on the literature review, this study proposed this hypothesis:

H₃: There is a significant and positive relationship among work-family conflict level and depression level.

3. Method

3.1. Aim and Importance of this Research

This study was conducted to reveal the levels of work-family conflict and depression among academics according to the gender variable and the relationship between work-family conflict and depression. When the literature was examined, to our knowledge, no similar study has been conducted on academics, which has remained under-investigated.

3.2. Research Model and Hypotheses

The research model was established based on the relationship among work-family conflict and depression and gender and whether there is a relationship among work-family conflict and depression. A quantitative research method was used. A descriptive model was used as the research model.

The hypotheses are given below:

H₁: The mean work-family conflict level of the participants differs significantly according to gender.

H₂: The mean depression level of the participants differs significantly according to gender.

H₃: There is a significant and positive relationship among work-family conflict level and depression level.

3.3. Data Collection Tool and Sample

This study was conducted after obtaining ethical approval from Ankara Hacı Bayram Veli University Ethics Committee dated 03.01.2024 and numbered E-11054618-302.08.01-236680. There were three sections to the survey questionnaire. The survey's initial section had a few statements regarding the traits of university academics. The survey's second section asked questions concerning the work-family conflict lived by academics. Work-family conflict was assessed using a five-item form. Netemeyer et al. (1996) created the scale. As reported by Netemeyer et al. (1996) Cronbach's Alpha internal consistency reliability coefficient is .88 for the work-family conflict scale. Giray and Ergin (2006) translated it into Turkish. The Cronbach's alpha reliability coefficient of the five-item work-family conflict scale was found to be .89. Every item was rated from 1 (meaning "don't agree at all") to 7 (meaning "I agree"). The lowest total score that can be achieved from these scales is 5, and the highest total score is 35. Finally, general health (depression) was measured using a 12-item. The validity and reliability of this were determined by Kılıç (1996). The Cronbach's alpha reliability coefficient of the general health questionnaire (GHS12) was found to be 0.78. There are four answers to each question, which inquires about health-related symptoms during the previous several weeks: not at all, as usual, more often than normal, and very often.

The research universe consisted of academics actively working in public and private universities operating in Türkiye. For the 2023-2024 academic year, the Council of Higher Education reports that there are 184,021 teaching staff members employed in Türkiye (<https://istatistik.yok.gov.tr/>, 30 December 2024). As a result, the universe's limit was 184.021. The formula used to determine the sample size in the study is given below (Tutar and Erdem, 2022):

$$n = \frac{Nt^2pq}{d^2(N-1) + t^2pq}$$

Since it is recognized that there are 184.021 academicians in the research population, when the sample of the research is calculated according to the formula above, the sample is at least 384 academicians. The study used an online version of the questionnaire. Male and female academics from foundations and public institutions filled out the survey through the link (<https://forms.gle/xHhuoED8nxEvJBXP7>). In scope of the study, 388

academicians were reached. The data were gathered by the snowball sampling method between January 5, 2024, and June 5, 2024. Our sampling plan complied with the recommended acceptable sample size for this research.

3.4. Data Analysis

A normality test was run to ascertain if the variables of work conflict and depression level were regularly distributed. Although the Kolmogorov-Smirnova test alone is insufficient to determine this, the fact that the probability (p) values derived for the variables of conflict with work and depression level are below 0.05 shows that the data do not have a normal distribution. These findings are based on the results of the Kolmogorov-Smirnov test applied to the variables of conflict with work and depression level. Tabachnick and Fidell state that the data exhibit a normal distribution because the arithmetic mean, mode, and median values are near one another, and the skewness and kurtosis values are among +1.5 and -1.5. Thus, in this research, parametric analyses were applied in comparisons related to the examination of intergroup differences in work conflict and depression levels.

This study employed descriptive statistical techniques to gather data from its participants. A frequency table was created to examine the sociodemographic characteristics of individuals. To investigate the independent sample, a t-test was utilized for variations in the individuals' levels of depression and work-family conflict based on their gender. Statistical significance was described as $p < 0.05$ results in the independent sample t-test. The association between depression and the degree of work-family conflict was established using Pearson correlation analysis.

4. Results

Cronbach's alpha was used to test the reliability of the statements in the questionnaire form used as a research tool. The entire work-family conflict scale yielded a Cronbach's alpha reliability index of $\alpha = 0.929$, whereas the whole general health questionnaire scale yielded a Cronbach's alpha reliability value of $\alpha = 0.893$.

Frequency and percentage values related to the socio-demographic characteristics of 388 participants are given in Table 1.

Table 1. Socio-demographic Characteristics of Individuals

		N	%
Gender	Male	75	19,3%
	Female	313	80,7%
	Total	388	100,0%
Age	18-25	17	4,4%
	26-35	222	57,2%
	36-45	109	28,1%
	46-55	33	8,5%
	56 and +	7	1,8%
	Toplam	388	100,0%
Educational Status	Bachelor's Degree	14	3,6%
	Postgraduate	134	34,5%
	Doctorate	240	61,9%
	Total	388	100,0%
Marital Status	Married	259	66,8%
	Single	129	33,2%
	Total	388	100,0%
University Type	Public	282	72,7%
	Foundation	106	27,3%
	Total	388	100,0%
How long have you been in business?	0-5	122	31,4%
	6-11	140	36,1%
	12-17	66	17,0%
	18-23	28	7,2%

	24-29	21	5,4%
	30 and +	11	2,8%
	Total	388	100,0%
How long have you been working at this institution?	0-5	226	58,2%
	6-11	119	30,7%
	12-17	36	9,3%
	18-23	3	0,8%
	24-29	4	1,0%
	Total	388	100,0%
The position you work in	Professor	10	2,6%
	Associate Professor	19	4,9%
	Assistant Professor	76	19,6%
	Research Assistant	123	31,7%
	Lecturer	160	41,2%
	Total	388	100,0%
Your weekly working hours (in hours)	0-10	15	3,9%
	11-20	58	14,9%
	21-30	100	25,8%
	31-40	138	35,6%
	41 and +	77	19,8%
	Total	388	100,0%
Number of people you live with	0-2	210	54,1%
	3-5	169	43,6%
	6-8	4	1,0%
	9 and +	5	1,3%
	Total	388	100,0%
Number of employees at home:	0-2	373	96,1%
	3-5	15	3,9%
	Total	388	100,0%
If you are married, does your spouse work?	Yes	235	69,1%
	No	105	30,9%
	Total	340	100,0%
How many children do you have?	No	193	49,7%
	1-3	194	50,0%
	3+	1	0,3%
	Total	388	100,0%
Do you have a paid helper at home?	Yes	50	12,9%
	No	338	87,1%
	Total	388	100,0%
Is there anyone at home who helps you without being paid (e.g., relative)?	Yes	75	19,3%
	No	313	80,7%
	Total	388	100,0%
Do you have any dependents (e.g., parents and relatives)?	Yes	55	14,2%
	No	333	85,8%
	Total	388	100,0%
Do you have a relative/relative who is sick/ill and whose care depends on you?	Yes	17	4,4%
	No	371	95,6%
	Total	388	100,0%
Do you also take care of business when you come home?	Yes	349	89,9%
	No	39	10,1%
	Total	388	100,0%

Source: Author's data analysis.

According to respondent characteristics, the sample consisted of 80.7% female participants and 19.3% male participants. The majority of the respondents—57.2% of them were married, 66.8% were in their 26s and 35s—had doctorates (61.9%), 72.7% had worked at public universities, 36.1% had been employed there for six to eleven years, and 58.2% had been there for zero to five years. The distribution of working positions in the institution is as follows: 41.2% Lecturer, 31.7% Research Assistant, 19.6% Assistant Professor, 4.9% Associate Professor, 2.6% Professor. 3.9% of the participants work 0-10 hours, 14.9% work 11-20 hours, 25.8% work 21-30 hours, 35.6% work 31-40 hours, and 19.8% work 41 hours or more per week. Most of the participants, according to other socio-demographic characteristics, had 0-2 people, 96.1% had 0-2 employees at home, 69.1% were married and their spouses work, 50.0% had 1-3 children, 87.1% had no paid helpers at home, and 80.7% had no unpaid helpers at home. It was determined that 85.8% had no dependents, 95.6% had no relatives/relatives who were sick/ill and whose care depended on them, and 89.9% were interested in work when they came home.

4.1. Gender, Work-Family Conflict, and Depression

The following are the findings of the independent sample t-test used to investigate gender-specific differences in work-family conflict and depression levels (Table 2).

Table 2. The relationship among work-family conflict, depression, and gender

Dependent Variable	Gender	N	Average	SS	T	p
Work-Family Conflict Level	Male	75	4,6373	1,54279	-,354	,723
	Female	313	4,7137	1,70748		
Depression Level	Male	75	1,0133	0,41351	-4,777	,000
	Female	313	1,2915	0,59002		

Source: Author's data analysis.

Since the probability (p) value calculated for the variable 'work-family conflict level' is above the significance level of 0.05, the H_1 hypothesis is not supported. In this instance, there is no discernible difference between the groups' levels of work-family conflict or variation based on gender. Since the probability (p) value calculated for the variable 'Depression Level' is below the significance level of 0.05, hypothesis H_2 is supported. If this theory is correct, then there is a significant difference among the groups and gender-specific variations in depression levels. When the mean differences in the depression levels of the individuals according to gender were analyzed, the depression levels of females were higher than males.

4.2. Work-Family Conflict and Depression

The association between depression and work-family conflict was examined using correlation analysis (Table 3). There is no association if the dependent variable and independent variables have a correlation value of 0 ($0.00 = r_p$). There is a low association level if the correlation between the independent and dependent variables is between 0 and 0.29 ($0.00 < r_p < 0.29$). There is a moderate association level if the correlation between the independent and dependent variables is between 0.30 and 0.69 ($0.30 < r_p < 0.69$). There is a high degree of association if the correlation among the independent and dependent variables is between 0.70 and 0.99 ($0.70 < r_p < 0.99$) (George and Mallery, 2010).

Table 3. Pearson Correlation Analysis Results

		Work-Family Conflict Level	GSA Depression Level
Work-Family Conflict Level	R	1	
	P		
GSA Depression Level	R	,259**	1
	P	0,000	

Source: Author's data analysis.

The Pearson correlation analysis's findings indicated there is a positive, significant but low ($r=.259$, $p<0.05$) relationship between work-family conflict level and depression level. The H_3 hypothesis is supported.

5. Discussion and Conclusion

The theories surrounding work-family conflict, depression, and gender have been extensively examined independently or in some combinations in different sectors and countries. However, the relationship between them and the differences shown by each concept regarding gender has not been empirically shown. This study purposed to investigate the relation among depression and work-family conflict in academics in Türkiye and to identify gender disparities in these domains.

The findings achieved in this study showed no gender difference in work-family conflict. The findings of our study are coherent with studies showing that work-family conflict does not vary according to gender (Rahman et al., 2018; Turunç and Çelik, 2010). In the study conducted by Rahman et al. (2018) on academicians in private universities in Bangladesh, it was found that there was no significant relationship among gender and work-family conflict. Turunç and Çelik's (2010) study aimed to define the effects of organizational support on the level of organizational identification of employees, the level of work-family and family-work conflict, and the intention to leave the job; they found that there was no significant difference among the level of work conflict of male and female employees. The findings of our study are inconsistent with studies showing that work-family conflict varies according to gender (Zurlo et al., 2020; Grönlund&Öun, 2018; Van Daalen et al., 2006; Cinamon, 2006; Aycan&Eskin, 2005).

Traditional gender roles consider work more significant for males, whereas family responsibilities and household duties fall under the purview of females (Fan et al., 2024). Because of this, males and females behave differently depending on the gender they are assigned since the social positions they play have distinct expectations and talents. Therefore, according to social role theory, gender stereotypes are mostly confirmed by males and females because of their various roles and the corresponding social obligations they face (Vogel et al. 2003). As suggested by the gender role theory, cultural norms and ideologies regarding gender-specific behaviors may influence work-family conflict (Fan et al., 2024). The dominant cultural system, which links females to domestic life and describes them as emotional, passionate, and intuitive, and links males to public life and describes them as logical, analytical, productive, and indifferent to personal and life issues, perpetuates gender disparities in organizations (Gaio Santos & Cabral-Cardoso, 2008). Türkiye is a country that geographically and culturally connects the East and the West, is in economic and cultural transition, and where approximately 98% of the population is Muslim. Türkiye entered a phase of modernization following the fall of the Islamic Ottoman Empire, focusing on female emancipation and liberalization. In this process, females' entry into the professions was significant (Aycan&Eskin, 2005). In this process, females focus on both family and career (Grönlund & Öun, 2018) and attach considerable importance to work-family balance when making career choices (Treister-Goltzman & Peleg, 2016). It is thought that female academics have more home-related responsibilities than male academics. Also, female academics try to fulfill both home and work-related responsibilities. However, it may be challenging for them to balance work and family than male academics. Hence, it was expected that female academics who try to fulfill their work-related responsibilities at home or fulfill their home-related responsibilities at work would experience more work-family conflict and family-work conflict. For this reason, a finding opposite to the expectation was reached.

Second, in this study, there is a noticeable difference in depression levels between genders, indicating that females experience higher degrees of depression than males. This study finding is also consistent with earlier research about gender differences in depression levels (e.g., Wadood et al., 2023; Zhou et al., 2023; Kim & Lee, 2023; Zurlo et al., 2020; Guille et al., 2017; Kinnunen et al., 2004). This study expected a high level of depression in female academics. This may be because female academics have academic careers in addition to their responsibilities, such as housework, cooking, and childcare. Academic life is a field of work that contains many stress factors. When the responsibilities of female academics at home are added to this intense stress in their working lives, a feeling of inadequacy may arise. This feeling of inadequacy may combine with the stress factors in academic life in the long term and cause depression levels in female academics to increase.

Lastly, the research findings indicate a noteworthy distinction between academics' levels of work-family conflict and depression, leading to the conclusion that the correlation between the two variables is not very

strong. The positive correlation between depression and work-family conflict indicates that people's depression levels rise along with their levels of work-family conflict. This research's findings are also consistent with earlier studies (e.g., Hwang & Yu, 2021; Frone et al., 1996; Frone et al., 1997; Zamarrripa et al., 2003; Leineweber et al., 2012; Zhang et al., 2017) that investigated the effect of work-family conflict on academics' depression levels. This finding reached in the study was expected. Because there needs to be a balance between work-related responsibilities and home-related responsibilities, trying to fulfill work-related responsibilities at home outside of working hours leads to failure to fulfill family-related responsibilities. This situation also leads to work-family conflict. Academicians do not have specific working hours. They can conduct scientific studies at any time. Therefore, their working hours can continue during their time at home, which can cause home-related responsibilities not to be fulfilled. Due to this situation, work-family conflict is experienced and can result in depression over time. As academics' work-family conflict levels increase, their depression levels can also increase.

The following recommendations were developed in line with the findings of this research:

- Due to the higher levels of depression among female academics, senior management needs to improve conditions and reduce negative workplace effects.
- Since there is a relationship among work-family conflict and depression between academics, universities should make the necessary arrangements and ensure that academics fulfill their duties and responsibilities during their hours at the institution. Academics should not be disturbed by the institution outside of working hours; they should not be assigned tasks; academics should be allowed to plan their time as they wish outside of working hours. This study can be examined in terms of variables, such as the type of institution where academics work, level of education, length of service, and age.
- Since there is a relationship among work-family conflict and depression, this study can be applied to different educational institutions, such as schools and courses.
- This study can be applied to the health sector, considered one of the sectors where work stress is intense, and a comparison can be made according to professions.

The study findings have theoretical, methodological, and practical implications that reveal the relationship between academics' work-family conflict and depression levels and the differentiation of these concepts according to gender. Studies on reducing work-family conflict in academics will reduce depression and increase motivation. The findings have implications for academics' perceptions of work-family relationships and depression.

There are several limitations to this study. First, the fact that this study only included Turkish universities may restrict how broadly the results may be applied. To ensure generalizability, further studies should make use of a higher probability sample. Second, the research demonstrated the significant role work-family conflict plays in depression. Further studies should examine other mediation factors (e.g., childrearing and marriage) to comprehend the relationship between depression and work-family conflict on a deeper level.

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