
How Do Psychologists in Sri Lanka Navigate Work-Life Balance? A Qualitative Exploration of Their Experiences

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Abstract

In the presence of an imbalance between work and life, individuals are highly likely to have mental distress, which can result in adverse professional, personal, and health-related consequences. Despite the fact that every profession comes with its own demanding responsibilities. Providing therapy on a regular basis, bearing the emotional weight of their clients, and dealing with vicarious trauma while bearing personal responsibilities without any institutional support can make it difficult for psychologists to maintain a healthy work-life balance. Without sufficient tools for self-soothing, such close proximity to psychological trauma and human suffering can result in severe emotional anguish, burnout, and, worst of all, attrition from the field. In order to avoid such consequences, this research examines how psychologists balance their lives between work and life, the key challenges they face and the strategies they utilize to achieve balance. Using purposive sampling, psychologists with over two years of experience working with clients in Sri Lanka were recruited as the sample. Data saturation determined the sample size, which concluded with seven participants. A qualitative design was adopted, and semi-structured interviews were conducted. Thematic analysis was used to determine the main themes within the interview responses. Three major themes emerged from the study: psychologists manage many responsibilities, deal with issues including emotional exhaustion, time management, and boundary setting, and cope by using coping mechanisms like self-care, peer and family support, and psychological techniques. The study concluded that psychologists find it difficult to maintain a balance between their personal and professional lives. Nevertheless, due to the techniques individuals have utilized and supported by their loved ones, they are dealing with it healthily.

Keywords: Work-life balance, psychologists, key challenges, coping strategies

Introduction

In today's demanding work environments, work-life balance is a central concern across professions, shaping productivity, job satisfaction, and well-being. It is defined as the equilibrium and satisfaction an

individual perceives between work demands and personal life (Kalliath & Brough, 2008). While significant in many fields, it is especially crucial in healthcare due to the emotional labour, workload, and ethical responsibilities inherent to the profession. Among healthcare workers, psychologists face unique challenges that compromise their ability to sustain personal and professional well-being (Demetri et al., 2023).

Work-life balance has been explained through multiple frameworks, with boundary theory (Ashforth et al., 2000) and role theory (Kahn et al., 1964) offering particular relevance. Boundary theory highlights how individuals either segment or integrate work and personal life, influencing their ability to manage competing obligations. In Sri Lanka's high-context, collectivist culture with strong family expectations (Hofstede, 2001), segmentation is difficult to maintain. Psychologists often experience blurred boundaries, emotional spillover, and burnout (Croft & Fernando, 2018). These challenges are compounded by confidentiality and client availability demands, which further push professionals toward costly integration. Role theory highlights how multiple role expectations create conflict, with Sri Lankan psychologists facing therapeutic, research, and family duties, leading to role overload and strain.

Psychologists are not only therapeutic specialists but also powerful social welfare allies via policy-making, research, and public health intervention. Their line of work inherently involves witnessing other people's emotional worlds and atrocities in abundance, hence leaving them gravely open to emotional exhaustion, vicarious trauma, and burnout (Norcross & Guy, 2007; Rupert et al., 2015). The constant demand to remain empathetic, ethically accountable, and clinically competent often comes at the expense of personal relationships and well-being. In Sri Lanka, collectivist values that privilege group over individual needs further intensify these conflicts, reinforcing blurred boundaries and emotional spillover (Hofstede, 2001).

Although work-life balance has been widely studied in Western contexts, research in Sri Lanka remains sparse. Existing studies mainly address doctors, nurses, or stigma around accessing mental health services (Dewasiri et al., 2024). These highlight issues such as long working hours, inadequate institutional support, and cultural barriers, which are relevant to psychologists but remain underexplored. Moreover, most have relied on quantitative scales, which fail to capture the nuanced, subjective realities of how professionals negotiate work and personal life. Given the complex and individualized nature of work-life balance, qualitative methods are necessary to illuminate the lived experiences of Sri Lankan psychologists. Globally, coping strategies such as time management, peer supervision, and self-care have been emphasized (Agarwal et al., 2020). However, these are not consistently applied in Sri Lanka, where cultural norms, organizational structures, and professional expectations shape their feasibility. For instance, while peer support is commonplace in Western contexts, hierarchical structures and stigma around vulnerability may hinder its practice locally (Agarwal et al., 2020). This underscores the need for culturally grounded research not only on challenges but also on coping mechanisms and support systems psychologists find effective. The academic contribution lies in addressing a neglected professional group within a unique cultural setting, while practically the findings can inform institutional policies, training, and interventions to sustain psychologists' well-being. With the country facing a severe shortage of mental health professionals (*Mental Health Atlas*, 2017), supporting psychologists' health is both an individual and a public health imperative.

In response to such empirical and theoretical gaps, the present study attempts to examine how Sri Lankan psychologists live and work and face their lives and work. Specifically, it explores the key challenges they encounter, the coping strategies employed, and the culturally embedded ways they sustain balance. By addressing these objectives, the research intends to contribute valuable insights into the lives of psychologists in Sri Lanka, with the broader aim of improving both practitioner well-being and the overall quality of mental healthcare in the country.

Materials and methods

Ethical clearance for this study was obtained from the Pro-term Ethics Review Committee of the Faculty of Humanities and Sciences, Sri Lanka Institute of Information Technology. This study was executed as a qualitative study employing semi-structured interviews. Purposive sampling was utilized as the sampling method. The sample size was determined by data saturation, comprising a total of 7 participants. Psychologists between the ages of 25 and 65 who have been directly serving clients with mental health issues in Sri Lanka for more than two years made up the participants. The interview guide was created targeting the research objectives, comprising around 12 open-ended questions. Necessary measures were taken to guarantee the confidentiality of the participants as well as their dignity and well-being.

The individuals who met the requirements for inclusion were contacted by phone. The interviews took place online using Zoom and/or Microsoft Teams after participants gave their informed consent to participate. All the interviews lasted around 40-50 minutes each. Following the interview guide, suitable prompts and follow-up questions were asked when necessary. Participants were given the freedom to have their cameras on or off. Subsequent to the interviews, each participant was given a debrief sheet that contained information about available mental health services that they might already be familiar with. Utilizing the verbatim transcription approach, the researcher transcribed recorded interviews. Analysis of the qualitative data was carried out by employing reflexive thematic analysis (Braun & Clarke, 2019).

Results

Reflective thematic analysis (Braun & Clarke, 2019) revealed three main themes and several corresponding sub-themes: as shown below.

Table 1. Main themes and Sub-themes Emerged

Main Theme	Sub-Themes	Quotes
Wearing many hats	Balancing and transitioning between multiple roles	<i>“the amount of work that is demanded of a psychologist, because I’m playing multiple roles, academic researcher, the clinician, and then in private sector”</i> (Participant G)
	Evolving nature of professionalism over time	<i>“However, now... with time passes... it is really difficult. Sometimes the same case will be running through my head for two or three days... compared to the earlier stages for me... there is a possibility for to resume the case and come.”</i> (Participant B)
The Puzzle of Hardships	Life-Work Mush: When Your Job Invades Your Couch	<i>“I mean, at many times I have had parents cry in front of me ... so... because I know what it might feel like for a mom you know to just have to tell your child may be having a condition like this”</i> (Participant A)
	The non-existence of 'Off-Duty'	<i>“of course, can talk to her for an hour, but then again, that is not even a counselling session. And the question is, why should I take one hour of my holiday time with family to... help someone?”</i> (Participant F)
	Emotional Residue: The Weight You Can't Wash Off	<i>“after listening to stories for you know... four to six hours in a given day. And then what happens is if a family member talks to me... then I am not in the mood to... you know, have a chat with them.”</i> (Participant F)

	Hidden Landmines in the Job Description	<i>“So... we are supposed to work in a system that is basically built on habits and cultural patterns. So that is the biggest challenge that I face in my work life.” (Participant B)</i>
The Adaptive Compass	Building Balance Through Self-care	<i>“And uuhh... very often I do mindfulness practises. Whenever I do a relaxation exercise with a client, I also practise with the client.” (Participant D)</i>
	Leaning on Social Support	<i>“We have a professional as well as personal bond, even... even when we are struggling with our personal things. So they... they do support. You know... we meet for coffees... We share things... We share the difficult cases. And we get each other’s opinion...” (Participant D)</i>
	The Fractal Framework	<i>“Routine has helped for sure... (confirming way) Like I... I don’t think I can function without a routine... umm...” (Participant C)</i>

Multiple roles that Sri Lankan psychologists plays in both personal and work life such as therapist, academic, researcher and parent underscoring has been highlighted in the present data. It highlights the complexity of work-life balance. This is supported by Kahn's (1964) role theory, which suggests role strain occurs when the demands of several roles are incompatible. Participants described ongoing role switching between roles, while some had a gradual adjustment, others still struggled despite decades of experience. These results echo Croft and Fernando's (2018) research in collectivist cultures, where work roles are nested within social and family roles, creating emotional and time costs for the individual. They contradicted Western literature that prescribed role segmentation, as Sri Lankan psychologists seemed to embrace role integration, easily crossing boundaries rather than separating them into compartments. This incorporation, instead of being maladaptive, can signal culturally contextualized resilience wherein relational commitments and collective standards demand adaptability. This requires culturally responsive interpretations of role management, especially in non-Western contexts where familial and societal roles are strongly embedded in professional life. Furthermore, findings revealed that Sri Lankan psychologists encounter blurred boundaries between professional and personal domains, intensifying the challenges of maintaining work-life balance. Boundary Theory (Ashforth et al., 2000) reinforces this finding, as participants’ accounts of cultural expectations, confidentiality obligations, and constant availability illustrate how integration dominates over segmentation, ultimately producing the emotional spillover the theory anticipates.

Psychologists' lived experiences depicted an array of challenges that render their quest for work-life balance arduous, including emotional exhaustion, boundary blurring, and system limitations. Emotional spillover from client work, such as compassion fatigue and emotional exhaustion, highly resonate with research by Norcross and Guy (2007) and Rupert (2015), which identified the same burnout in mental health professionals. Yet, contrary to Norcross and Guy's finding that Western practitioners can decrease client load in response to distress, Sri Lankan psychologists did not show less provision of service. This inconsistency could be due to the overarching responsibility and collectivistic values in the Sri Lankan context and the unavailability of substitutes in under-resourced settings. As WHO (2017) documents, Sri Lanka's low psychologist-to-population ratio exacerbates caseloads and organizational burnout, echoing also in participants' discourse on overwork and lack of institutional support. Further, gendered and cultural responsibilities such as being continually emotionally available to family members or being requested in social contexts to provide informal advice continue to blur professional boundaries, as seen in earlier regional research. These distinctive stressors highlight the failure of Western models to encompass the complex loads of mental health professionals in collectivist, resource-poor environments.

Despite immense adversity, Sri Lankan psychologists demonstrated adaptive coping that engages personal agency and cultural and communal resources. In line with Agarwal's (2020) findings, self-care practices such as mindfulness, cleaning routines, supply shopping, and crocheting emerged as the main means of achieving psychological equilibrium. Social support from spouses, peers, and colleagues occupied a central role in resilience, where the foregrounding of peer supervision and informal case-sharing supports the argument that professional bonding lies at the heart of emotional strain reduction. Additionally, flexible boundary management ranging from routinized formalities to client-load boundaries suggests a practical, context-contingent interpretation of boundary theory (Ashforth et al., 2000). Participants neither segmented nor integrated roles in a rigid fashion but fluidly switched as per demands, indicating a more dynamic boundary negotiation strategy. While these strategies confirm previous research, such as that of Rupert and Dorociak (2015), they also contribute to existing theory through illustrating how boundary management must be adaptive rather than prescriptive in multicultural environments. Collectively, these results emphasize that effective work-life balance in Sri Lanka is not based on Western separation models, but on contextually adapted integration facilitated by community, culture, and professional solidarity.

Conclusion

This study explored work-life balance among Sri Lankan psychologists, revealing a complex interplay of professional identity, emotional conflicts, and culturally rooted coping. Despite awareness of self-care and boundary setting, systemic barriers such as high caseloads, limited formal support, and cultural expectations restricted their effective application. Yet, participants demonstrated resilience through adaptive coping, social support, and culturally responsive role integration, reflecting a distinct non-Western pathway to balance. A key strength lies in the diverse sample, spanning clinical settings, gender roles, and personal circumstances, which enriched the interpretation of experiences. However, reliance on self-report, potential social desirability bias, and limited generalizability due to the small, context-specific sample remain limitations. Future research should employ longitudinal designs to capture the evolving nature of work-life balance and assess organizational interventions supporting practitioners' well-being. Policies advancing peer supervision, equitable resource distribution, and culturally sensitive training are also vital. By embracing context-specific strategies, mental health systems in Sri Lanka and beyond can cultivate healthier, more sustainable workplaces for professionals.

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