



# Navigating Digital Demands: Resilience, Technostress, and Work-Life Balance Predict Quality of Life among Insurance Employees in Ibadan, Nigeria

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## ABSTRACT

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work-life balance.

Quality of life (QOL) is an important measure of psychological well-being, physical functioning, cognitive abilities and social health. With increasing digital demands, insurance workers' quality of life has gained attention, especially as digitisation alters working hours and work-life dynamics. This study examined resilience, technostress and work-life balance as predictors of quality of life among insurance employees in Ibadan, Nigeria. A cross-sectional survey was adopted involving a purposive sample of 246 participants from insurance companies with participants' age ranging between 23 and 65 years ( $M_{age} = 36.87$ ,  $SD = 8.79$  years). Data was collected using the Short Form Health Survey (SF-12), the Brief Resilience Scale, the Technostress Scale, and the Work-Life Balance Scale. Data analysis was done using Pearson moment correlation and hierarchical multiple regression. Regression results indicated that quality of life declined as technostress, work interference with personal life (WIPL), and personal life interference with work (PLIW) increased. However, it improved with higher resilience levels. This study revealed the importance of psychological resilience in maintaining quality of life among insurance employees. Interventions aimed at enhancing the well-being of insurance employees in digitally demanding environments should prioritise strengthening psychological resilience and reducing technostress. Supporting employees in building adaptive coping strategies and minimising digital stressors may contribute significantly to maintaining and improving their overall quality of life.

## Introduction

The digital age, marked by rapid technological advancements, has fundamentally transformed the way people work, interact, and balance their personal lives (Arora & Garg, 2025; Isiaka, et al., 2024). The insurance sector, traditionally customer-centric and yet operationally efficient, is increasingly data-driven, with digital engagement and technological demands on the rise (Braun & Jia, 2025; Egbuhuzor et al., 2025). Digital demands encompass the growing reliance on information technologies for essential functions like data processing, customer relationship management, and digital communication (Ozay et al., 2024; Rustandi et al., 2024). While these tools boost productivity, they also introduce stressors, including increased workloads, time pressures, and the constant need to adapt to new technologies (Lottu et al., 2023; Kang'e et al., 2020). Consequently, such demands have reshaped the work environment for insurance employees, presenting both opportunities and unique challenges that may impact employees' quality of life (QoL) (Obasa et al., 2024; Nwaogu et al., 2021).

Quality of life (QoL), a critical measure of individuals' physical, psychological, and social well-being, plays a significant

role in job satisfaction and performance (Awosoga et al., 2022). Quality of life (QoL) is a multidimensional concept encompassing both objective factors—such as work conditions and physical health—and subjective factors, including emotional well-being and personal satisfaction (Schalock & Verdugo, 2002). In the context of insurance work, QoL encompasses physical health, mental well-being, subjective experiences like fatigue and stress, and social interactions (Hanna da Silva Pires, 2019; Olutola & Adejuwon, 2020). With digitisation reshaping work hours and intensifying work demands, there is growing concern about insurance employees' quality of life, particularly as work-related stress spills over into personal life (Adekeye, et al., 2024). Employees often perceive this high-paced work environment, driven by digital demands, as detrimental to their QoL due to external pressures that extend beyond traditional work hours (Khan, et al., 2025; Supriyadi, et al., 2025).

Maintaining a high QoL is crucial for employees as they navigate both personal and work-related stressors. Insurance employees often face the dual pressure of meeting customer service standards and fulfilling technological requirements, which frequently extend beyond typical working hours through constant communication on platforms like WhatsApp, email, and other

digital channels. Studies show that prolonged job-related stress negatively affects QoL by impairing mental and physical health (Awosoga et al., 2022; Zaghini et al., 2023). In high-stress industries, including insurance, employees must constantly meet productivity and customer satisfaction standards, often leading to job dissatisfaction and burnout (Eya, 2025). Thus, examining how resilience, technostress, and work-life balance predict QoL offers valuable insights into sustaining the well-being of insurance professionals in a highly digitised work environment.

Resilience is commonly defined as the ability to bounce back or recover from adversity, trauma, or significant sources of stress (Masten, 2001). It reflects a dynamic process that enables individuals to maintain or regain mental health despite experiencing hardship. According to Lutharet al. (2000), resilience involves a positive adaptation within the context of significant adversity. Building on these foundational perspectives, Ekpemuaka et al. (2025) described resilience in the Nigerian context as the capacity to adapt and recover from stress, a trait that shapes how individuals handle the pressures of digital demands in modern society. Within the workplace, resilience has been linked to improved health outcomes and higher quality of life (QoL), particularly in high-stress industries (Ibigbami et al., 2021; Odunaike & Azeez, 2024). Employees with greater resilience can manage digital demands more effectively, reducing burnout rates and enhancing overall well-being (Adeyemi et al., 2024; Nwaogu et al., 2022). Specifically, resilience appears to function as both a direct and indirect buffer against stress, with direct benefits through emotional regulation and stress management and indirect benefits via adaptive coping strategies that reduce the likelihood of burnout (Brites et al., 2024; Mohamed et al., 2025).

Technostress—the strain induced by frequent, often challenging interactions with technology—is considered a key factor that may affect the quality of life (QoL) among insurance employees, where high expectations for digital proficiency and constant software updates create unique stressors (Yener et al., 2021). In the high-stakes insurance sector, where seamless service delivery is essential, technostress can lead to anxiety, cognitive fatigue, and burnout, especially when employees feel pressured to adapt to new systems or experience technology overload. This overload can impact time management and skill acquisition, contributing to disengagement and decreased productivity (Panda, 2020). Research indicates that elevated levels of technostress are strongly linked to reduced work satisfaction and impaired mental well-being, often resulting in psychological fatigue and even physical health issues (Ibrahim et al., 2023; Nastjuk et al., 2024; Saleem & Malik, 2023).

Another critical aspect influencing the quality of life among employees is work-life balance. Work-life balance is a compromise between work and family roles, enhancing happiness and productivity (Obinwanne & Kpaji, 2022). It is a time-sharing arrangement between work and family, which can lead to stress and

unconstructive working attitudes. However, weaknesses in work-life balance can negatively impact employees' work and life satisfaction, mental health, physical health, and individual performance in an organisation. An effective work-life balance has been associated with higher job satisfaction, reduced stress, and an improved sense of well-being (Yahya & Azeez, 2024). Insurance workers face challenges in balancing work and personal life due to constant digital notifications, after-hours emails, and shifting technology requirements, leading to increased stress and dissatisfaction. Conversely, a positive work-life balance has been linked to enhanced quality of life, as it allows individuals to engage meaningfully in both their professional and personal spheres (Oderinde et al., 2024; Yahya & Azeez, 2024).

The quality of life theory provides a comprehensive framework for understanding how the various life domains (physical, social, mental and environmental) interact to influence well-being. According to Schalock (2004), an individual's quality of life is shaped by the balance between personal resilience and environmental demands. This theoretical perspective is particularly relevant to the study of resilience, technostress, and work-life balance, as it emphasises how psychological resources and external pressures jointly affect emotional and physical health. In the insurance sector, where employees must adapt to rapid technological changes and manage multiple responsibilities, these factors become critical determinants of overall life satisfaction (Kukreti et al., 2025).

The quality of life theory highlights the interconnected nature of workplace experiences and well-being. Resilience, as a psychological resource, enhances emotional stability and personal growth, enabling employees to cope with workplace challenges without compromising their quality of life (Amaonye et al., 2024). Conversely, unmanaged environmental stressors such as technostress can diminish emotional and physical well-being (Zayid et al., 2024). According to the QoL framework, when employees face persistent technological demands, they may experience cognitive overload and emotional strain, ultimately reducing their life satisfaction. Additionally, work-life balance plays a critical role in promoting emotional well-being and social inclusion by minimising conflicts between professional and personal responsibilities (Schalock & Verdugo, 2002). When work-life balance is maintained, it fosters interpersonal relationships and enhances overall well-being.

These theoretical insights are particularly relevant to the insurance industry, where professionals increasingly rely on digital tools for client management, claim processing, and data analysis. While these tools enhance operational efficiency, they also pose challenges that may affect employees' QoL (Awosoga et al., 2022; Odole et al., 2023; Okeya et al., 2020). Previous research has linked QoL to work-life balance in part-time employees (Talip et al., 2021), personality traits in the banking sector (Sowunmi, 2022), and workload's effect on health in Nigeria's banking industry (Okeya et

al., 2020). However, studies focusing specifically on insurance employees remain limited. Existing research on insurance employees has examined resilience, social support, and workload separately. For instance, Khuong and Tran (2019) linked resilience to reduced depression and anxiety, Yang et al. (2021) explored social support's moderating role, and Omar et al. (2020) analyzed workload's impact on job stress.

While previous studies examined resilience, technostress, and work-life balance independently, little research have simultaneously examined their influence on quality of life among Nigerian insurance employees, despite the sector's increasing digitalisation and evolving work-life dynamics. To address this gap, this study investigates independent and joint prediction of quality of life by resilience, technostress, and work-life balance among insurance employees in Ibadan, Nigeria. We hypothesized that: (a) Resilience would positively predict quality of life among insurance employees. (b) Technostress would negatively predict quality of life among insurance employees. (c) Work-life balance would positively predict quality of life among insurance employees.

## Method

### Participants and Procedure

Participants in this study were 246 insurance employees (men = 100, women = 146) drawn through a purposive sampling method from four major insurance companies—Mutual Benefits Assurance Plc, Zenith Insurance, Leadway Insurance, and Unitrust Insurance—in Ibadan, Oyo State, Nigeria. Participants' ages ranged from 23 to 65 years, with a mean age of 38.45 years ( $SD = 8.52$  years). The sample included employees from various departments, such as claims, finance, legal, marketing, and underwriting. The choice of these companies was due to their large workforce and their significance in the Nigerian insurance industry, with Mutual Benefits Assurance Plc being one of the largest insurance firms in Ibadan. The sample size was calculated using the Taro Yamane (1973) formula with a 95% confidence level to ensure the reliability of the findings. Inclusion criteria for participation in the study required individuals to be 18 years or older, currently employed as insurance staff in Ibadan, willing to participate, and sufficient English literacy to understand and complete the questionnaire. Anyone who did not meet these criteria was excluded from the study. The researchers employed three trained research assistants who administered the questionnaires and facilitating data collection.

Data collection took place over a three-month period in 2024 during staff meetings and work breaks within the participating companies. Prior to the commencement of the study, formal approval was obtained from the participating organizations. An introductory letter and ethical clearance documents were presented to the respective Human Resource (HR) departments of each organization to secure administrative cooperation and access to participants. Furthermore, all participants were provided with a clear and detailed informed consent form outlining the purpose,

procedures, potential risks, and benefits of the study. Each participant voluntarily signed the consent form, affirming their willingness to take part in the research and acknowledging their right to confidentiality, anonymity, and withdrawal at any stage without penalty. Out of 270 questionnaires distributed, 246 were properly completed and returned, while 24 were either incomplete or not returned. The study adhered to ethical guidelines, with informed consent gotten from all participants. Participants were encouraged to answer the questionnaires honestly, and their participation was voluntary without any form of coercion.

### Instruments

Demographic variables such as gender, age, marital status, religion and years of working experience.

#### *Short-form Health Survey (SF-12)*

Health-related quality of life was measured using the Short Form Health Survey (SF-12), a shortened version of the Health Survey (36) developed by Ware and colleagues (1995). The SF-12 health survey is represented by the physical component score (PCS) and the mental component score (MCS), with the PCS including the items inquiring about parameters of physical functioning and pain, while the MCS focuses on psychological and mental health questions (Ware et al., 1995). It includes the areas of physical functioning (2 questions), physical limitations in daily activities (2 questions), bodily pain (1 question), general health (1 question), energy/fatigue (1 question), social functioning (1 question), emotional limitations in daily activities (2 questions) and mental health (2 questions). It employs various question formats, including categorical (yes/no) and Likert scales (e.g., three-point for limitations; five-point for pain and overall health; six-point for mental health, vitality, and social functioning). The SF-12 generates two summary scores: MCS and PCS each with a mean of 50 and a standard deviation of 10. Haddad et al. (2021) reported Cronbach's  $\alpha$  coefficient of .74 indicating acceptable internal consistency reliability. Mbada et al., (2021) reported a Cronbach  $\alpha$  of .90. This study reported Cronbach's  $\alpha$  of .83

#### *Brief Resilience Scale*

The Brief Resilience Scale was developed by Smith et al. (2008) and consists of six (6) items that assesses resilience in its original meaning, where, according to the authors, other resilience measures have failed to do so. The core meaning of resilience, as captured by the Brief Resilience Scale, refers specifically to an individual's ability to bounce back or recover quickly from stress and adversity, rather than focusing on related but broader concepts such as coping strategies, social support, or personal resources, which many other resilience measures tend to emphasise. For the validation of the measure, Smith et al. (2008) used four different samples, composed of undergraduates, cardiac rehabilitation patients, and women who either had fibromyalgia or healthy controls and employees. Examples of the item include: *It is hard for me to snap back when something bad happens; I tend to bounce back quickly after hard times*]. Participants responded on a 5-point Likert



scale, ranging from 1 (Strongly Disagree) to 5 (Strongly Agree). According to Aloba, et al., (2015) the scale demonstrated adequate reliability (Cronbach's  $\alpha = .81$ ). This study reported Cronbach's  $\alpha$  of .80

#### Personal Orientation subscale of Technostress Scale

The Technostress Scale, developed by Çoklar et al. (2017) as the Teachers' Techno-Stress Levels Defining Scale (TTLDS), was designed to assess technostress levels among teachers. The Personal Orientation subscale of the Technostress Scale was selected because it specifically assesses individual differences in attitudes, feelings, and behaviors related to technology use, which are critical for understanding how employees personally experience and manage technostress. Unlike other subscales that focus on organizational or technological factors, this subscale captures the psychological and emotional responses of individuals to digital demands. Examples of the items include: "I feel overwhelmed by the amount of information I receive through technology." "I get frustrated when I cannot use new technologies effectively". The 5 items of the Personal Orientation subscale are scored on a 5-point Likert response scale (1 = Strongly Disagree to 5 = Strongly Agree). This subscale showed solid internal consistency, with a Cronbach's  $\alpha$  of .85.

#### Work-Life Balance Scale

The scale used for measuring work-life balance in this study was a 13-item scale adapted from an instrument reported by Dolly (2015). The scale was designed to assess three dimensions of work-life balance: Work Interference with Personal Life (WIPL), Personal Life Interference with Work (PLIW), and Work/Personal Life Enhancement (WPLE). The 13 items adopted from the study of Dolly (2015) indicate an adequacy level of validating the analysis. Work Interference with Personal Life (WIPL) comprises items Q1-Q5, Personal Life Interference with Work (PLIW) comprises items Q12-Q15, and Work/Personal Life Enhancement comprising (WPLE) comprises items Q8-Q11. The scale was scored on a four-point Likert scale ranging from strongly disagree to strongly agree. Dolly (2015) reported a Cronbach  $\alpha$  of .79, .70 and .74 for the three dimensions. All 13 items were found to have high reliability with a

Cronbach  $\alpha$  of .70. This study reported Cronbach's  $\alpha$  of .78 (WIPL), .74 (PLIW) and .71 (WPLE), with a total scale Cronbach's  $\alpha$  of .80.

#### Data Analyses

Data on quality of life, resilience, technostress, and work-life balance were measured on an interval scale, while demographic characteristics such as gender and working experience were categorical and coded numerically for analysis. Hierarchical multiple regression analysis was employed to test the hypotheses. This method allows for the sequential inclusion of variables in blocks, enabling the examination of whether each newly added predictor explains a statistically significant proportion of variance in quality of life after controlling for prior variables. Specifically, the analysis sought to determine if adding resilience, technostress, and work-life balance would significantly improve the model's explanatory power ( $\Delta R^2$ ). In the first block, demographic variables that demonstrated significant correlations with quality of life—age, gender, and working experience—were included as covariates. This step accounted for basic individual differences and controlled for their effects.

Based on the **quality of life (theory)**, which emphasises the multifaceted nature of quality of life, the core predictors were entered in the following steps. Resilience, conceptualised as the capacity to recover from stress (Grygorenko&Naydonova, 2023), was included in the second step due to its known protective role in enhancing life satisfaction and coping (Mayordomo et al., 2021). In the third step, technostress—a stressor associated with technology use—was added, reflecting growing evidence that constant digital demands may impair psychological well-being and work-life balance (Tarafdar et al., 2019). Finally, the components of work-life balance (work-personal life interference, personal life-work interference, and work-personal life enhancement) were entered in the last step to evaluate their unique contributions to predicting quality of life.

## Results

**Table 1: Summary showing the distribution of the participants' characteristics across specified demographic variables.**

Variables	Category	n (246)	n%	Mean	SD
Gender	Male	100	40.7	38.45	8.52
	Female	146	59.3		
Age	23-65	244	99.2		
Marital Status	Single	79	32.2		
	Married	160	65.3		
	Divorced	3	1.2		
	Widowed	3	1.2		
Educational Qualification	SSCE	11	4.5		
	NCE/OND	9	3.7		
	HND/BSc	177	72.0		
	MSc/PhD	46	18.7		
Religion	Christianity	206	83.7	13.89	10.01
	Islam	33	13.4		
	Traditional	2	0.8		
Working experience		1-46	241		

Table 1 presents the demographic characteristics of the 246 participants. The sample consists of 40.7% males and 59.3% females, with a mean age of 38.45 years ( $SD = 8.52$ ). Most of the participants (65.3%) were married, while 32.2% were single, and a small percentage were divorced (1.2%) or widowed (1.2%). Regarding educational qualifications, the majority (72%) hold

HND/BSc degrees, while 18.7% have MSc/PhD, and a smaller proportion possess SSCE (4.5%) or NCE/OND (3.7%). Christianity was the predominant religion (83.7%), followed by Islam (13.4%) and Traditional religious beliefs (0.8%). Participants' working experience ranges from 1 to 46 years, with a mean of 10.01 years ( $SD = 13.89$ ).

**Table 2: Means, standard deviations, and intercorrelations among study variables**

Variables	<i>M</i>	<i>SD</i>	1	2	3	4	5	6	7
1. Gender	1.59	0.49	--						
2. Age	33.45	11.52	-.15*	--					
3. Resilience	32.45	12.40	.11	.02	--				
4. Technostress	22.70	8.66	-.13*	.01	.37**	--			
5. WIPL	10.35	3.21	-.10	.12*	.19**	.31**	--		
6. PLIW	12.26	4.09	-.14*	.07	.17**	.27**	.42**	--	
7. WPLE	9.45	3.12	.08	.16**	.21**	-.19**	.13*	-.11	--
8. Quality of Life	52.41	16.46	-.09	.45**	.58**	-.13*	.14**	-.34**	.19**

\* $p < .05$ ; \*\* $p < .01$ .

**Table 3: Hierarchical multiple regression analysis predicting quality of life from resilience, technostress, and work-life balance with gender, age, and working experience as control variables**

	Predictor	<i>B</i>	<i>SE B</i>	<i>t</i>	<i>R</i>	<i>R</i> <sup>2</sup>	$\Delta R^2$	<i>F</i>
1	Gender	0.05	0.04	.06	1.14	.32	.10	7.64**
	Age	0.22	0.07	.17	3.02**			
	Working Experience	0.19	0.06	.14	2.84**			
2	Gender	0.03	0.03	.04	1.00	.68	.46	42.87***
	Age	0.18	0.06	.14	2.95**			
	Working Experience	0.15	0.05	.12	2.62**			
	Resilience	0.40	0.05	.47	8.16***			
3	Gender	0.02	0.03	.03	0.72	.74	.55	49.03***
	Age	0.15	0.05	.12	2.78**			
	Working Experience	0.14	0.04	.11	2.45**			
	Resilience	0.32	0.04	.39	6.25***			
	Technostress	-0.28	0.06	-.32	-4.86***			
4	Gender	0.01	0.03	.01	0.35	.78	.61	41.12***
	Age	0.12	0.04	.10	2.52*			
	Working Experience	0.11	0.04	.09	2.31*			
	Resilience	0.29	0.04	.32	5.21***			
	Technostress	-0.24	0.05	-.28	-4.02***			
	WIPL	-0.16	0.07	-.19	-2.16*			
	PLIW	-0.27	0.05	-.31	-5.11***			
	WPLE	0.09	0.06	.12	1.60			

Note. \* $p < .05$ ; \*\* $p < .01$ ; \*\*\* $p < .001$ ; WIPL (Work Interference with Personal Life), PLIW (Personal Life Interference with Work), WPLE (Work-Life Enhancement)

Table 2 presents the relationships of gender, age, resilience, technostress, work-life balance and quality of life among insurance staff in Ibadan, Oyo State. Results revealed a significant positive relationship between age and quality of life. This implies that older insurance staff reported better quality of life than younger ones. There was a significant positive relationship between resilience and quality of life. This implies that employees who can resist or overcome stressful events show a better quality of life. A significant negative relationship was found between technostress and quality of life. This implies that employees with excessive exposure to technology-related stressors (e.g., information overload, constant connectivity, technical issues) had a lower quality of life.

The correlation results suggest that different components of work-life dynamics have distinct relationships with quality of life among employees. Specifically, work interference with personal life (WIPL) showed a positive correlation with quality of life, indicating that employees who experience more work-related demands spilling into their personal lives might still perceive their overall quality of life positively, possibly due to a sense of professional achievement or purpose. In contrast, personal life interference with work (PLIW) was negatively correlated with quality of life, implying that when personal issues disrupt work responsibilities, employees' well-being tends to decline. Additionally, work-personal life enhancement (WPLE) was positively associated with quality of life, highlighting that when work enriches or supports personal life, it contributes positively to employees' well-being.

The hierarchical multiple regression analysis examined the prediction of quality of life by gender, age, working experience, resilience, technostress, and work-life balance. The analysis was conducted across four models, progressively incorporating different predictor variables. In the first model, demographic variables (gender, age, and working experience) were analysed as predictors of quality of life. Independently, age ( $\beta = .10, t = 2.52, p < .05$ ) and working experience ( $\beta = .09, t = 2.31, p < .05$ ) predicted quality of life. The results indicated a significant contribution to quality of life by these demographic factors,  $F(3,242) = 7.64, R = .32, R^2 = .10, p < .01$ , meaning that these variables accounted for 10% of the variance in quality of life.

In the second model, resilience was added to the regression analysis. The results revealed a significant prediction of quality of life by the demographic variables and resilience,  $F(4,241) = 42.87, R = .68, R^2 = .46, p < .001$ , indicating that these variables collectively explained 46% of the variance in quality of life. The  $R^2$  change value of .36 suggests that the inclusion of resilience accounted for an additional 36% of the variation beyond the demographic variables. This indicates that resilience was a strong positive predictor of quality of life, suggesting that employees with higher resilience reported better quality of life ( $\beta = .32, t = 5.21, p < .001$ ).

In the third model, technostress was added to the analysis. The results showed a significant prediction of quality of life by the demographic factors, resilience, and technostress on quality of life,  $F(5,240) = 49.03, R = .74, R^2 = .55, p < .001$ , meaning these variables jointly accounted for 55% of the variance. The  $R^2$  change value of .09 indicates that technostress contributed an additional 9% variance in quality of life. These results suggest that while age, working experience, and resilience positively predicted quality of life, technostress negatively affects quality of life among insurance employees ( $\beta = -.28, t = -4.02, p < .001$ ).

In the fourth and final model, work-life balance components—Work Interference with Personal Life (WIPL), Personal Life Interference with Work (PLIW), and Work-Life Enhancement (WPLE)—were introduced. The analysis revealed a significant joint prediction of all variables on quality of life,  $F(8,237) = 41.12, R = .78, R^2 = .61, p < .001$ , explaining 61% of the variance in quality of life. The  $R^2$  change value of .06 indicates that the inclusion of work-life balance components added 6% explanatory power to the model. , technostress, Two of the dimensions of work-life balance: WIPL ( $\beta = -.19, t = -2.16, p < .05$ ) and PLIW ( $\beta = -.31, t = -5.11, p < .001$ ) were significant predictors, while WPLE ( $\beta = .12, t = 1.60, p = .11$ ) was not.

## Discussion

This study investigated the resilience, technostress, and work-life balance as predictors of quality of life of insurance employees in Ibadan, Nigeria. This study's results showed a significant prediction of quality of life by resilience, technostress and work-life balance. The study found that resilience emerged as a strong predictor of quality of life among insurance employees, thereby supporting the hypothesis that higher resilience would positively predict quality of life. This finding is consistent with earlier studies (e.g., Akintunde-Adeyi et al.; 2023; Phina et al., 2022; Nwaogu et al., 2022), which reported that employees with greater resilience tend to experience better mental health outcomes and higher life satisfaction.

Theoretically, the finding aligns with the Transactional Model of Stress and Coping (Lazarus & Folkman, 1984), which posits that resilient characteristics serve as buffers against stress and improve psychological outcomes. Resilience may enable employees to better navigate the challenges and demands of digitally driven and high-pressure work environments by fostering adaptive coping mechanisms. Consequently, organisations, especially the insurance and healthcare sectors, must prioritise the development of resilience-enhancing programs. Interventions such as stress management workshops, mental health counselling, and structured peer-support systems can strengthen employees' psychological resources. By doing so, organisations can improve employees' capacity to manage workplace stressors, thereby enhancing overall quality of life and workplace productivity. Employers should

implement comprehensive resilience-building strategies, including regular training, mentorship, and wellness programs, to sustain a healthy, high-performing workforce.

Technostress was identified as a negative predictor of quality of life, thereby supporting the hypothesis that increased technostress would negatively predict quality of life. The pervasive use of technology in the workplace can lead to feelings of overwhelm and burnout, particularly if employees struggle to disconnect from work-related tasks outside of office hours. Previous studies (Saleem & Malik, 2023; Le Roux & Botha, 2021) reported that technostress negatively impacts quality of work life. Techno-overload had a significant impact on employees during the pandemic, as increased reliance on digital tools and constant connectivity led to heightened stress levels (Dutta & Mishra, 2024). This excessive digital workload, often resulting from high expectations to manage multiple technological demands, affected employees' mental well-being and overall productivity.

The present finding is explained by the Person-Environment Fit Theory (Caplan, 1987), which posits that stress arises when there is a misfit between an individual's abilities and the demands of their environment. In this context, employees may feel overwhelmed if their technological skills or coping capacities do not align with the escalating digital demands of their workplace, thereby negatively affecting their quality of life. The negative impact of technostress is particularly concerning in modern workplaces where digital tools are integral to daily operations. Organisations should implement policies to mitigate technostress by promoting work-life balance, such as encouraging digital detox periods, limiting after-hours communication, and providing training on effective technology use. Additionally, insurance companies should assess their technological infrastructure and practices to identify areas that contribute to technostress. Providing training sessions and resources that enable employees to navigate technology effectively will empower them to perform their duties without unnecessary stress. Encouraging regular feedback on technology usage can also help organisations identify and address any emerging technostress issues.

Work-life balance components specifically work interference with personal life (WIPL), personal life interference with work (PLIW), and work-personal life enhancement (WPLE) were found to be significant predictors of quality of life among insurance staff in Ibadan. This supports the hypothesis that work life balance would significantly predict quality of life. Specifically, when work demands spill over into personal time (WIPL) or when personal challenges hinder work responsibilities (PLIW), employees report lower quality of life. Conversely, when experiences at work positively influence personal life (WPLE), employees experience an improvement in well-being. This finding aligns with previous studies (e.g., Adekeye et al., 2024; Okeya et al., 2020; Solihu et al., 2023; Uzochukwu et al., 2023), who reported a strong connection between work-life balance and employee health

and well-being. Theoretically, this result is explained by the Role Theory (Kahn et al., 1964), which posits that individuals hold multiple roles such as employee, spouse, or parent, and stress arises when the demands of one role interfere with the ability to meet the expectations of another. In this case, poor balance between work and personal life results in role conflict, which in turn diminishes quality of life.

The finding implies that work-life balance initiatives, such as flexible scheduling, leave policies, and career growth opportunities, not only enhance job satisfaction but also support physical and mental health. Employees who experience a healthier work-life balance are better positioned to manage work demands effectively, reducing stress and enhancing overall well-being. Moreover, organisations should actively promote work-life balance by adopting flexible work arrangements, such as remote work options and flexible hours. Establishing clear boundaries between work and personal life can lead to greater employee satisfaction and a healthier work environment. Fostering a culture that values open communication and support from management can create a more inclusive and collaborative atmosphere, contributing to overall employee well-being and quality of life. By implementing these recommendations, organisations can create a supportive environment that enhances the quality of life for insurance workers and promotes long-term success.

Results also revealed that age and working experience had a significant influence on quality of life. This implies that older insurance staff and staff with more years of working experience exhibit better quality of life and vice versa. This result finds empirical backing from previous studies (e.g., Moda et al., 2023; Lebni et al., 2021) who reported that age significantly influences workers' quality of life. This suggests that age-related factors, potentially including experience, stability, and established work-life routines, may contribute positively to the quality of life in older employees across these sectors.

Older insurance staff and those with longer working experience may exhibit better quality of life due to increased job stability, familiarity, and established work-life routines. This implies that organisations should implement age-sensitive policies that cater to the evolving needs of employees as they age. Additionally, providing continuous professional development and mentorship opportunities can enhance the quality of life for younger and less experienced staff by fostering a sense of stability and career growth. It is recommended that insurance companies in Nigeria prioritise employee well-being by promoting work-life balance initiatives, offering mental health support, and implementing programs that recognise and reward long-term service. Future research could explore the influence of other demographic factors, such as educational attainment and marital status on quality of life among insurance employees.

Results also indicated that there was no significant



difference in quality of life between male and female insurance workers in Ibadan. This lack of significant gender difference suggests that both male and female employees may experience comparable levels of quality of life within the workplace. This result is in line with the result of Fashola et al. (2023) who found that gender did not significantly impact the quality of life among bankers. Factors other than gender may play a more substantial role in determining quality of life within this professional group.

### Limitations and Suggestions for Future Studies

While this study provides valuable insights into the factors influencing quality of life among insurance workers in Ibadan, it has several limitations. Relying on self-reported data introduces potential biases, and focusing on a specific geographical location limits the generalizability of the findings. Future research should expand the sample to include employees from various industries and regions, enabling comparative analysis and a more comprehensive understanding of the factors affecting quality of life. The cross-sectional nature of the study limits its ability to explore the dynamic relationships between resilience, technostress, work-life balance, and quality of life over time. Longitudinal studies and the inclusion of additional variables, such as organisational culture, digital fatigue, and personality traits, could provide a more nuanced understanding of these complex relationships.

Incorporating qualitative methods, such as interviews or focus groups, would offer a richer understanding of employees' experiences and perceptions. Additionally, investigating the impact of interventions aimed at improving resilience and work-life balance could provide practical guidance for organisations. By addressing these limitations and exploring these avenues, future research can contribute to a more comprehensive understanding of the factors affecting quality of life in the workplace.

### Conclusion

Resilience and work-life balance positively predicted quality of life, suggesting that workers who demonstrate high resilience and maintain a balance between work and personal life experience greater quality of life. Technostress, however, negatively predicted quality of life, revealing the importance of managing digital demands in the workplace. Specific components of work-life balance, especially work interference with personal life and personal life interference with work, also played a role in the quality of life, with increased interference associated with diminishing quality of life. Gender did not significantly influence the quality of life among insurance employees, implying that both male and female workers may experience similar levels of life quality. Age and work experience were found to significantly impact quality of life, with older and more experienced employees reporting better life satisfaction. These results suggest that addressing these factors through resilience training, managing technostress, and supporting work-life balance may be essential to enhancing the quality of life for insurance workers.

**Data availability statement:** The data that support the findings of this study are available from the corresponding author upon reasonable request.

**Consent to Participate:** Informed consent was obtained from all individual participants included in the study. Participants were informed about the purpose of the study, the procedures involved, and any potential risks or benefits. They were also assured that their participation was voluntary and that they could withdraw from the study at any time without any repercussions.

**Consent to Publish:** Consent to publish was obtained from all individual participants included in the study. Participants were informed about the potential for their data to be published in scientific journals, but that their privacy and confidentiality would be maintained.

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