

ASSESSMENT OF JOB SATISFACTION & WORK LIFE BALANCE OF HOSPITAL INDUSTRY WORKER OF UTTRAKHAND

Deepa Vinay¹, Divya Singh¹ and Harshita Bisht^{1*}

¹Department of Family Resource Management, College of Home Science,
G.B. Pant University of Agriculture & Technology, Pantnagar, U.S. Nagar Uttarakhand (India)
E-mail: bisht.h2204@gmail.com (*Corresponding Author)

Abstract: This study explores the condition of work life imbalance and job satisfaction of hospital industry workers. A cross-sectional study was conducted in the four districts of Uttarakhand. Total 120 nurses were selected through simple random sampling method. The interview schedule was designed with the demographic profile of nurses, work life imbalance and job satisfaction of nurses. The result revealed that work family conflict (1.98 ± 0.84) and work life conflict (1.73 ± 0.71) is more which signifies that they are sacrificing their family needs and they were dissatisfied with nature of job and mental demands at work place. So that to cope up with their issues a training module was designed and distributed among nurses for the betterment of their life. This training module consists information regarding work life balance and stress coping strategies along with improvement in their physical and mental health tips. This was developed to enhance the quality of work and productivity of nurses.

Keywords: Nurses, work life imbalance, work-life-conflict, Family-work-conflict.

Introduction

Health service is one of the industries that provide a continuous facilities around the clock for the benefit of all citizens in any country. Hospital personnel is responsible for provision of health care through application of medical science knowledge and skill expertise in meeting the health needs of all people within each country¹. It is expected that a healthy and psychologically balanced workforce provides health care Industry workers. Nurses play the major role in health care industry and are the first ones who are thought about when we talk about health care. The demand for nurses is also increasing not only because of the job security and attractive salary but also because of the care they provide thus making a difference in other lives which is generally not found in many other careers².

The need of professional skilled nurses increases as the population ages while the shortages of nurses is the reality already. Nurses are stressed further by inconvenient working conditions like extensive working hours, weekend work, evening and night time work, insufficient breaks during working shift and even having to take true job in order to

*Received April 25, 2016 * Published June 2, 2016 * www.ijset.net*

reasonable ask pay. Stress experienced in the field of nursing is increasing. The growing conflict between the demand and the resources available creates an increasing amount of overload³.

Job satisfaction, quality of work environment and moral of health practitioners is beginning to receive attention worldwide. Job satisfaction is defined as an attitude that individuals have about their jobs. It an extent to which one feels positively or negatively about the intrinsic or extrinsic aspects of one's job⁴. Job satisfaction in health care workers is correlated with interesting work demand and the opportunity to contribute skill and idea. In medical profession, nursing staff are the one who have variety of job to perform and need to juggle with many jobs at many places in the hospital or in medical center and still are under paid and under valued.

Nurses shortage can be a symptom of low job satisfaction, poor management and organizational support⁵. Shortage are resulting in heavy workload which is a precursor of job stress and burnout which have also been linked to low job satisfaction. Job dissatisfaction is a primary predictor of nurses intent to leave (quit their current job)^{6,7}. Job satisfaction of the health workers is said to be highly important in building up employee motivation and efficiency as higher job satisfaction determine better employee performance and higher level of patients satisfaction⁸. Whereas work life balance is also important aspects of health industry workers.

There are many issues in an working environment, work life balance (WLB) has attracted attention in recent year. Work life balance refers to management of the actual and desired proportion of one's week and private life activities^{9,10}. In contrasts with the imbalance a life dominated by work, focused on satisfying external requirements at the expense of inner development and in conflict with a person's true desires. Work life balance implies that work life issues are no longer only just women's issues of family issues. Several studies revealed that factor like improper work life balance, work pressure, improper working environment, growth pressure and salary and job security have greater impact on job satisfaction and work life balance. The job satisfaction and work life balance of a nurses is absolutely important for the smooth functioning and successful upcoming of the health care industry¹¹. Improvement of nurses working environment is an important issue as working conditions can adversely affect nurses health and cause them to resign from their jobs and profession itself.

The potential nursing shortage has become a serious problem. Because India is becoming the world's faster ageing society, there will be a shortage of young nurse in the near future, it is

important to encourage current nurses to remain in their positions and continue their professional careers. So there is need to improve job satisfaction level in nurses, attention should be paid on improving working condition and taking their preference into account while planning the work schedule. So keeping the above aspects in mind, present study is designed with following objectives:-

1. To study the demographic profile of the nurses engaged in hospital Industry.
2. To assess the job satisfaction level among the nurses.
3. To explore the work life imbalance among hospital industry workers.

Methods

Participants and location

A cross-sectional study was design. This study was conducted in the four district of Uttrakhand and participants were selected through simple random sampling method. Total 120 nurses were selected and for conducting the survey permission was obtained from the CMO of the hospital.

Procedure

In order to gain an in-depth understanding of nurses profession and their work life, semi structure and in formal interview techniques were used. The interviews allowed focuses yet conversational communication with nurses with some flexibility to probe more details.

Demographic data

On the basis of previous research¹², we have adapted and included the following demographic data in our study such as age, sex, marital status, education level, year of nursing experience, per month income, shift type, occupational rank and off periods (days per month).

Measurement

Based on the standard scale of Netemeyer et al., (1996), we measured the 1) work family conflict (WFC) and family work conflict (WFC) 2) Work life conflict (WLC) and life work conflict (LWC). The main goal of the study was to measure the work life imbalance among nurses working in the hospital industry. Three point likert scale was used to find out the job satisfaction of the nurses and the higher scores indicated greater job dissatisfaction. Job satisfaction questionnaire were divided in to four category these were satisfaction with nature of job, mental demands at work place, working environment in hospital and job attitude towards profession. Cronbach's alpha was 0.703. Following statistical tool were used to analyze data such as frequency, percentage, mean and standard deviation to draw a

conclusion of the study. The hypothesis were tested using correlation and regression through statistical package for social science (SPSS) version 20 were used for data analysis.

Result

The result envisages from table 1.1 showed that in India most of the nurses were female. Work profile of the survey reveals that 95.83 per cent female working as nurses in the hospital and 41.67 per cent of the nurses belong from 20-30 year of age category. Total 74.16 per cent respondents were married and 74.17 per cent nurses had nuclear family.

Most of nurses fall in 5-10 years working experience category. Majority of the nurses (78.33 per cent) were GNM qualified and 32.5 per cent nurses had permanent job. Fifty five per cent nurses get 4 days off in a month whereas they had also reported that without permission they were not allowed to go out of town in these four days due to emergency call. More than fifty per cent of nurses' social life disturbed due to their night shifts duty. Moreover 41.67 per cent of nurses accepted that night shift affect their attitude and personality. Nurses also reported that they were suffering from mood swing after their night shift.

Table 1.1: Frequency and percentage of nurse regarding the demographic data. (n=120)

S.NO	Category	Total nurses	Percentage
1.	Gender		
	Female	115	95.83
	Male	5	4.17
2.	Age (years)		
	20-30	50	41.67
	30-40	45	37.50
	40-50	20	16.67
	50 and above	5	4.17
3.	Marital status		
	Married	89	74.17
	Unmarried	30	25
	Widow	1	.83
4.	Type of family		
	Extended	4	3.33
	Joint	27	22.50
	Nuclear	89	74.17
5.	Work Experience		
	20 and above year	5	4.17
	15-20 year	15	12.5
	10-15 year	20	16.67
	5-10 year	44	36.67
	Less than 5 year	36	30
6.	Education		

	ANM	13	10.83
	GNM	94	78.33
	B.Sc. Nursing	13	10.83
7.	Type of job		
	Registered nurses	33	27.50
	Enrolled nurses	5	4.17
	Permanent nurses	39	32.50
	Contractual nurses	43	35.83
8.	Off period		
	5 days	22	18.33
	4 days	66	55.00
	3 days	32	26.67
9.	Night shift disturb your social life		
	Agree	63	52.50
	Disagree	57	47.50
10.	Night shift affect your attitude		
	Sometimes	50	41.67
	Never	54	45.00
	I do not know	16	13.33

Work-life-family-conflict among nurses conflict

Work family conflict (WFC) was analyzed and Mean and SD were find out 1.98 ± 0.84 among the nurses of the four district. Whereas family work conflict (FWC) was found 1.23 ± 0.48 . In WFC only 35 per cent nurses reported that the demand of work never affect their home and family life, rest of them facing this problem. While asking about the fulfill their family responsibility, 39.17 per cent nurses agreed that due to their job timing and job stress they were not able to fulfill their family duty. This implied that their family life is affecting due to their work. Moreover 64.16 per cent nurses also replied that due to work duties most of the time they have to change their family plans.

In FWC only 35.83 per cent nurses agreed that demand of families/spouse interfere with their duties. Care of patients were depended on the nurses that's way more than seventy per cent revealed that they never put off doing things/incomplete work at workplace because of demand at home/spouse. Further nurses felt that their job required a great deal of responsibilities. Moreover 79 per cent nurses agreed that their home life did not interfere with their work similarly 60 per cent nurses also accepted their family related strain did not hinder their ability to perform.

so that home life of 79 per cent nurse and family related strain of 60 per cent nurses never interfere with their work.

**Table 1.2: Frequency and percentage of nurse regarding the family-work-conflict.
(n=120)**

S. No	Work-family conflict (WFC)	Disagree	agree	Strongly agree
1.	The demands of my work interfere with my home and family life.	42 (35)	38 (31)	40 (33.33)
2.	The amount of time my job takes up makes it difficult to fulfill family responsibility.	45 (37.50)	47 (39.17)	28 (23.33)
3.	Things I want to do at home do not get done because of the demands my job put on me.	59 (49.17)	39 (32.50)	22 (18.33)
4.	My job produces strain that makes it difficult to fulfill family duties.	46 (38.33)	37 (30.83)	37 (30.83)
5.	Due to work related duties. I have to make change to my plans for family activities.	43 (35.83)	29 (24.17)	48 (40.00)
Family-work conflict (FWC)				
1.	The demand of my family of spouse/partner interfere with work-related duties.	77 (64.17)	37 (30.83)	6 (5.00)
2.	I have to put off doing things at work because of demand on my time at home.	86 (71.67)	29 (24.17)	5 (4.17)
3.	Things I want to do at work don't get done because of the demands of my family of spouse/partner.	103 (85.83)	14 (11.67)	3 (2.50)
4.	My home life interfere with my responsibilities at work such as getting to work accomplishing daily tasks and working overtime.	95 (79.17)	22 (18.33)	3 (2.50)
5.	Family-related strain interferes with my ability to perform job-related duties.	72 (60)	36 (30)	12 (10)
Work-life conflict (WLC)				
1.	The demand of my work interfere with my life away from work.	46 (38.33)	61 (50.83)	13 (10.83)
2.	The amount of time my job takes up makes it difficult to fulfill other interests.	31 (25.83)	73 (60.83)	16 (13.33)
3.	Things I want to do at home do not get done because of the demands of my job.	44 (36.67)	54 (45.00)	22 (18.33)
4.	Due to work. I have to make changes to my plans for activities away from work.	51 (42.50)	31 (25.83)	38 (31.67)
5.	My job produces strain that makes it difficult to fulfill other responsibilities and duties.	59 (49.17)	49 (40.83)	12 (10.00)
Life-work conflict (LWC)				
1.	The demands of my personal life interfere with work-related duties.	93 (77.50)	24 (20.00)	3 (2.50)
2.	I have to put off doing things at work because to demands on my outside work.	108 (90.00)	9 (7.50)	3 (2.50)
3.	Things I want to do at work don't get done	108	12	0

	because of the demands of my interests outside work.	(90.00)	(10.00)	–
4.	My home life interferes with my responsibilities at work.	97 (80.83)	23 (19.17)	0 –
5.	Personal life strain interfere with my ability to perform work-related duties.	73 (60.83)	42 (35.00)	5 (4.17)

Work life conflict (WLC) was 1.73 ± 0.71 and life work conflict (LWC) 1.16 ± 0.64 . In WLC 61 per cent nurses life disturbed due to demand of work whereas 74 per cent of nurses could not fulfill their personal interest due to time demand at their job. Almost half of the respondent accepted that their work creating chaos in their life like they had to change their plans, unable to complete their personal work and other responsibilities. In LWC most of the nurses believed that in their profession mistakes were not negotiable therefore most of the nurses accepted that demand of their life never affect their work related duties, responsibilities and ability to do work. Overall result showed that nurses were sacrificing their personal life as well as family.

Job satisfaction level among hospital industry worker

Table 1.3 illustrated that the analysis of job satisfaction of nurses regarding various aspect like nature of job, mental demand, work place environment and job attitude toward profession. Weighted mean of job satisfaction reveled that maximum dissatisfaction among nurses is that they had to remember different things in their job. Followed by they were felt that they did not get recognition for performing well. Moreover their job require work fast with great deal of concentration. Besides that nurses were more satisfied if they will get good working environment and it will energies them.

Table 1.3: Frequency and percentage of nurse regarding the job satisfaction. (n=120)

S. No	Statement	Disagree	Agree	Strongly Agree	Weighted mean
(I) Nature of job.					
1	My job is monotonous in nature.	62 (51.67)	10 (8.33)	48 (40)	Xiii
2	I hardly get time for entertainment.	51 (42.5)	13 (10.83)	56 (46.67)	Xii
3	I am not able to give time to my family.	46 (38.33)	16 (13.33)	58 (48.33)	Xi
4	I have lost interest in activates that I used to enjoy.	54 (45)	50 (41.67)	16 (13.33)	Xv
5	I sometimes loose self- confidence in myself.	94 (78.33)	16 (13.33)	10 (8.33)	Xxiv

6	I have less job stress and unrest.	65 (54.16)	32 (26.67)	23 (19.16)	vii
(II) Mental demand at work place.					
1	My job require a great deal of concentration.	7 (5.83)	11 (9.16)	102 (85)	iii
2	My job require me to remember different things.	5 (4.16)	6 (5)	109 (90.83)	i
3	My job requires me to work fast.	3 (2.5)	19 (15.83)	98 (81.67)	iii
4	My job requires me to work hard.	10 (8.33)	42 (35)	68 (56.67)	v
5	I have command over quality and quantity of professional work I do.	12 (10)	21 (17.5)	87 (72.5)	xxiii
(III) Working environment at work place					
1	Work condition lead to restlessness.	32 (26.67)	17 (14.16)	71 (59.16)	viii
2	Working get time are not fit.	51 (42.5)	5 (4.16)	64 (53.33)	x
3	Recently, I have been getting edgy and bad tempered.	23 (19.16)	25 (20.83)	72 (60)	vi
4	Good work environment facilitate to work quickly an energetically.	7 (5.83)	18 (15)	95 (79.16)	xxv
5	Member of work group are supportive.	12 (10)	23 (19.16)	85 (70.83)	xxii
6	I fell good job about working as nurses in this hospital.	27 (22.5)	18 (15)	75 (62.5)	xvii
(IV) Job attitude to word profession					
1	My job helped me to raise standard of living.	13 (10.83)	26 (21.67)	81 (67.5)	xix
2	I am regular for my work.	12 (10)	27 (22.5)	81 (67.5)	xix
3	I am satisfied with salary.	22 (18.33)	6 (5)	92 (76.67)	xxi
4	I am satisfied with the way the way task is carried out.	60 (50)	15 (12.5)	45 (37.5)	ix
5	I fell capable of making decision about professional things.	17 (14.16)	29 (24.16)	74 (61.67)	xviii
6	I am certain about opportunities for promotion and advancement in the future.	34 (28.33)	25 (20.83)	61 (50.83)	xiv
7	I use skills from experiences for my job.	27 (22.5)	19 (15.83)	74 (61.67)	xvi
8	I receives recognition when a job is done well.	104 (86.67)	12 (10)	4 (3.33)	ii

Table 1.4 : linear regression result WFC

Independent variable	Dependent variable	Beta	Significant value	Level
Nature of job	WFC	.289	.003*	
Mental demand at work place	WFC	.239	.010*	
Working environment at work place	WFC	.021	.827	
Job attitude to word profession	WFC	.100	.242	

The result of the analysis given in the table 1.4 according to the analysis there is a evidence that dissatisfaction with nature of job, and mental demand at work place positively affect WFC of nurses. This showed that hectic nature of job and mental demand at work place creating problem for nurses to fulfill families requirement properly.

Table 1.5 : linear regression result for WLC

Independent variable	Dependent variable	Beta	Significant value	Level
Nature of job	WLC	.321	.001*	
Mental demand at work place	WLC	.189	.038*	
Working environment at work place	WLC	.083	.372	
Job attitude to word profession	WLC	.010	.905	

The result of the analysis given in the table 1.5 found that result were similar as above result that means dissatisfaction with nature of job, and mental demand at work place positively affect WLC of nurses. This showed that hectic nature of job and mental demand at work place also affecting creating problem for nurses to fulfill families requirement properly.

Limitation: The study limited to only 4 district. This study comprises only 120 respondent. Further this study only focused or work life imbalance job satisfaction other aspect and issue can be taken for study.

Conclusion

In this study we investigate their job satisfaction and work life imbalance and we found that nurses were very much disappointed with timing and work pressure most of nurses reported that they had to sacrifice their family for their work whereas some accepted these situation and adopt the culture of apart from family and their children managing themselves. But most of nurses complaining and accepting betterment in their job profession like more nurses recruited that they got more helping hand we will ultimately deceases the work pressure improvement in job satisfaction & work life balance head to progress in nurses performance to work give better service. A training module were designed and distributed among nurses of those hospital which were chosen for survey. Training module was consists information

regarding work life balance and stress coping strategies along with tips in their physical and mental health tips. This was developed to upgrade their life style in their hectic job style.

References

- [1] Manjushree (2012) Work life Balance & Career Satisfaction of Critical care Nurses in Private Hospitals at Coimbatore. Indian Journal of Applied Research, 2(2).
- [2] M. Neates, (2010) Fit for LIFE at the Western Australia Police. RCMP Gazette,72(1), 22-23.
- [3] Wickstrom (2001). Healthy Working House, Report of the research and development project, 19th International symposium on shift work and Working Time “Health and Well-being in the 24-h Society” San Sercolo Island, Venezia, Italy, 2-6 August 2009. www.shiftwork2009.it.
- [4] Bhvian, S.N., &Menguc, B. (2002) An extension and evaluation of job character stick, organizational commitment and job satisfaction in an expatriate, guest worker, sales setting. The journal of personal selling and sales management, 22(1),1-11.
- [5] Zurn, P., Dal, P.M.R., Stillwell, B., and Adams, O. (2004) Imbalance in the health workforce. Human Resources for Health, 2: 13.
- [6] Shields, M.A. and ward, M. 2001. Improving retention in the National Health Service in England: the impact of job satisfaction on intention to quit. Journal Health Economics. 20 (5),677-701.
- [7] Tzeng, H.M. (2002). The influence of nurses’ working motivation and the job satisfaction on intention to quit: an empirical investigation in Taiwan. International Journal of nursing study. 39,867-878
- [8] Alemshet, Y., Leja, H., Alima, H., Challi, J. and Morankar, S. (2011) Job satisfaction and its determinants among health workers in Jimma University Specialized Hospital Southwest Ethiopia. Ethiop J Health Science, 21,19-27.
- [9] Fereday, J., Oster, C. (2010). Managing a work-life balance: the experiences of midwives working in a group practice setting . Midwifery 26. 311-8.
- [10] Charles, N., Harris, C. (2007) Continuity and change in work-life balance choices. Br J Social 58, 277-95.
- [11] A, Day.(2010). Workplace health and well-being. RCMP Gazette.72(1),18-19.
- [12] Karki, I., Sharma, P. and Rastogi, S.K. (2014) Occupational Safety And Management Of Risk In Health Care Industry, concept publishing company(P) LTD, New delhi.