

**Original article**

# A STUDY ON QUALITY OF WORK LIFE AMONG NURSES IN A MEDICAL COLLEGE HOSPITAL IN BANGALORE

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## ABSTRACT

**Introduction:** Quality of Work Life (QWL) is defined as the extent to which an employee is satisfied with personal and working needs through participating in the workplace while achieving the goals of the organization.

**Objectives:** To assess the quality of life of nurses working in a medical college hospital in Bangalore and the factors associated with it.

**Methods:** Ethical approval from the institution and informed consent from the study participants was obtained and quality of life questionnaire was administered to all the nurses working in the hospital.

**Results:** A total of 671 (88.5%) nurses participated in the study. Among the participants, 452 (67.7%) indicated that they have the autonomy to make patient care decisions, 500 (74.9%) were unable to balance their work and family lives, 656 (98.2%) were stressed in their work and 543 (81.3%) of nurses were unable to complete their work in the time available.

**Conclusion:** It is important to consider the quality of working life of the nurses to improve productivity and performance of the nurses.

**Key words:** quality of work life, nurses, hospital

## INTRODUCTION

Quality of Work Life (QWL) is an area of study that has attracted an ever increasing interest over the past two decades not only in the areas of health, rehabilitation, disabilities and social services but also in medicine, education and others. The study of QWL is an examination of influences upon the goodness and meaning in life, as well as people's happiness and well-being.<sup>1</sup> The ultimate goal of QWL study and its subsequent applications is to enable people to lead quality lives - lives that are both meaningful and enjoyable. The term QWL is used to evaluate the general well-being of individuals and societies. QWL should not be confused with the concept of standard of living which is based primarily on income. Instead, standard indicators of the QWL

include not only wealth and employment, but also the built environment, physical and mental health, education, recreation and leisure time and social belonging. A high QWL is essential for organizations to attract and retain employees.<sup>2</sup> QWL is a comprehensive, department-wide program designated to improve employee satisfaction, strengthening workplace learning and helping employees to manage change and transition.<sup>3</sup> QWL includes: 1. an opportunity to realize one's potential and utilize one's talents, to excel in challenging situations that require decision making, taking initiative and self-direction; 2. a meaningful activity perceived worthwhile by the individuals involved; 3. an activity in which one has clarity of role necessary for the achievement of some overall goals; and 4. a feeling of

belongingness and pride associated with what one is doing and moreover doing it well.<sup>4</sup> Dissatisfaction with QWL is a problem, which affects almost all workers regardless of position or status. Many managers seek to reduce dissatisfaction in all organizational levels, including their own. This is a complex problem because it is difficult to isolate and identify all of attributes, which affect the quality of work life.<sup>2</sup>

## OBJECTIVES

The objective of the study was to assess the quality of work life among nurses working in a Medical College Hospital in Bangalore.

## MATERIALS AND METHODS

This was a cross sectional study done during the period of October 2012-January 2013. Institutional Ethical Review Board approval, group and individual consent was obtained for the study. The study population included all working staff nurses in the Medical College Hospital. List of all working nurses was collected from nursing superintendent. Total of 758 nurses were enrolled into the study. The modified version of QWL questionnaire<sup>5</sup> consisted of demographic details, job characteristics, organizational climate, organizational commitment, job satisfaction, motivation and quality of working life. It was a 77-item questionnaire. A four-point Likert's scale, with 1 being "strongly agree" and 4 being "strongly disagree" was used. A low total scale score indicates a low overall QWL, while a high total scale score indicates a high QWL or more favorable environment. QWL questionnaire was administered to all nurses.

The data was entered in Microsoft Excel and analyzed using statistical package for social sciences-16. Frequencies, independent 't' test and correlation analysis were done.

## RESULTS

The questionnaire was administered to 758 nurses, all were females and the response rate of 671 (85.5%) among these three questionnaires were incomplete. So the final sample size was 668. The majority of respondents were aged 21-30 years 563 (84.8%), followed by 31-40 years 62 (9.3%), 41-50years 34 (5.1%) and 50-60 years 5 (0.8%). The youngest was 22 years and the oldest 57 years. Their education statuses were as fol-

lows, general nursing and midwifery 416 (62.3%), bachelor in science 246 (35.8%) and masters in science 6 (0.9%). The respondents had less than 1 year of total tenure employment were 194 (28.9%) followed by 1-5 years 352 (52.5%), 5-10 years 71 (10.6%) and more than 10 years 54 (8.0%) as shown in Table 1.

**Table 1 : Work experience (n=668)**

Duration (years)	Frequency (n=668) (%)
< 1	194 (29.1)
1-5	349 (52.2)
5-10	71 (10.6)
>10	54 (8.1)

The quality of work life questionnaire assessed the responses under the following headings: work life dimension including family needs, work design dimension, motivation and occupational safety. The majority of the respondents 468 (70.0%) found it difficulty to balance work and family needs, 656 (98.2%) find their work stressful and 576 (86.2%) feel that they are tired/used up at the end of the day. Regarding work design 543 (81.3%) finds that they need to work extra hours to finish their job and 468 (70.1%) feels that they don't have enough time to do their job well. Among the participants, 551 (82.5%) felt that the work environment is motivating, 623 (93.2%) agrees that training programmes are useful and 567 (84.9%) felt that their job was secure. Regarding occupational safety, majority of them feels that the management gave high priority for work safety 542 (81.1%); 447 (66.9%) experienced frequent backaches and 415 (62.1%) suffered frequent muscle and joint aches. Only 96 (14.5%) of the respondents indicated that their salary was fair.

**Table 2: Work environment vs. organizational tenure**

Organizational tenure	Respondent (n=668) (%)	Mean rank
< 1 year	194 (29)	299.76
1 - 5 years	349 (52.3)	349.37
5 - 10 years	71 (10.6)	352.95
≥ 10 years	54 (8.1)	338.94

P Value 0.029

Kruskal-Wallis test was done to compare the total score of work environment with different demographic variables like age, education level,

nursing tenure and organizational tenure. There was a statistically significant difference only between work environment and organizational tenure ( $p = 0.029$ ) as shown in table 2.

The overall QWL had been assessed and the results were 1 (0.1%) had very poor QWL, 563 (84.3%) had poor QWL, 101 (15.1%) had good QWL and 3 (0.4%) had very good QWL with a mean of  $80.14 \pm 1.34$ , a median of 79 and a mode of 76.

**Table 3: Quality of work life**

Quality of Work Life	Respondent (n=668)(%)
Very Poor (0-46)	1 (0.1%)
Poor (47-92)	563 (84.3%)
Good (93-138)	101 (15.1%)
Very Good (139-184)	3 (0.4%)

## DISCUSSION

The purpose of this study was to assess the QWL among nurses in a medical college hospital, Bangalore. The findings of this study indicated a number of factors of concern regarding the QWL among nurses.

### Perception of the quality of work life among nurses

The nurses were asked to rate their QWL. The aim was to gain an understanding of the QWL of nurses by assessing their work life experience. Contrary to the Brooks and Anderson<sup>6</sup> where respondents were pleased overall with their work life situations, the findings of the present study indicated that the respondents were dissatisfied with their work life. However, these findings are consistent with findings of a number of previous studies where nurses were not satisfied with their work life.<sup>7,8,9</sup> Efforts to improve QWL among health care staff can improve the morale of employees and organizational effectiveness. Additionally, QWL can improve the quality of care provided as well as retention of the nursing workforce.<sup>10</sup> Improving QWL may be a more practical and long-term approach to decreasing attrition and turnover and should be considered by health care managers.

The majority of nurses in this study perceived dissatisfaction with the work life factors including family needs, working hours and had no energy left after work. Nurses reported that they spent a long time at work so they had little energy left after work. As a result, the nurses were unable to balance their work with their family

life. This is consistent with findings from previous studies.<sup>8,11</sup> In keeping with global trends, a shortage in the nursing workforce<sup>10</sup> was identified as a main problem in the current study. This shortage puts a high work load on the existing nurses. Payment including salary and financial incentives was found to be an important factor leading to dissatisfaction among nurses which in turn affected their QWL. Although several research studies found that payment is not the prime motivator for employees, behavioral theorists such as Herzberg and Maslow suggest that satisfying basic needs is essential because people cannot concentrate on their higher needs until basic needs are met.<sup>12,13</sup> In support of this, several recent nursing studies have found that salary, financial benefits and equity in pay were very important to nurses, and the lack of such benefits may impact their satisfaction, commitment and performance.<sup>14,15</sup> The majority of respondents in this study 567 (84.9%) reported that their jobs are secure and they do not expect to lose their job unexpectedly.

## CONCLUSION

The study findings indicate the poor QWL among the existing nursing staff and also the reasons for the same. The hospital health administration in order to improve the QWL among nurses should concentrate on improving their job satisfaction, organizational commitment, organizational climate and job characteristics. In turn, they are more likely to stay in their positions and provide better nursing care.

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