



Research article

EVALUATING SOCIAL WORKERS WORKING LIFE QUALITY WORKING AT BUSHEHR UNIVERSITY OF MEDICAL SCIENCES IN 2015-16

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ABSTRACT

Background and Objective: Working life quality is a combination of working environment variables which could be effective on job satisfaction increase, personnel retention and finally qualitative and quantitative promotion of services in each organization. So, Ministry of Health is not exempt from this rule. The present study has been performed with the aim of determining social workers working life quality working in Bushehr province health centers. **Methodology:** This study has been conducted in cross-sectional method (descriptive – analytical) on 467 social workers of the province health center. Statistical population selection and participation is in census form. Data collecting tool is Walton two-part questionnaire. The first part of questionnaire includes social workers demographic information which includes 7 questions. The second part of questionnaire which contains social workers working life quality includes 35 questions. Regarding wide usage of this questionnaire, its reliability and validity is confirmed and it is in an acceptable level. The collected information was analyzed using SPSS version 20 software and the results were analyzed using descriptive – analytical statistics, Pierson correlation and unilateral variance analysis. **Findings:** The average total score of social workers working life quality 97.5 indicates desirable level. Considering all cases, also inclusion of confounding cases in regression model, in respect of demographic information only the variables of city ($p=0.026$), age ($p=0.006$), working background ($p=0.33$) determine social workers working life quality. **Conclusion:** Working life quality of Boushehr province social workers is in desirable level and the impact of this variable is considerable in increasing job satisfaction rate and social workers motivation and as a result the society health level promotion. Regarding the role of some factors especially demographic factors in more promotion of this variable, necessity of identifying these factors and trying to improve working life quality has special significance.

KEYWORDS: Intellectual capital, Human capital, Costumer capital, Structural capital, Yasuj University of Medical Sciences.

INTRODUCTION

After passing of years, every country found that for progress in the economy and world competition arena, it should have expert, skillful and motivated human resources. Improvement in human force efficiency causes positive and important results such as economic growth, life level gradation, improvement in payments and sometimes improving of quality and quantity of human force leisure time. Position and significance of human force in realization of each organization's objectives has caused that factors leading to service quit, absence from work, performance

increase and finally efficiency increase to be under consideration of most researchers. Regarding high position and significance of efficiency in economic development, today many studies have been performed about factors effective in efficiency increase that most of these studies consider working life quality as one of factors of efficiency increase^[1].

Identifying motives and factors of incentive increase in human resources of each organization considerably helps advancement of the plan supplied by that organization. These factors and incentives couldn't be absolute and

identical. For example, some consider the impact of salary increase, some job promotion and some job being challenging effective on increasing occupational motivation. In this regard, most researchers' scholars and experts agree about the direct impact of working life quality on this issue [2]. Working life quality is a significant issue and in this respect individual satisfaction is very important in both life aspects (individual and working). Working life quality is related to the employee and the working environment he is placed. Working life quality has a direct relation with work improvement. That a manager how looks his employee and an employee how regards his organization refers to this issue. Working life quality has complex dimensions like job security, method of reward granting, the rate of personnel participation in the organization decisions, training and the personnel occupational promotion that this is even evident in personnel working in factories and small industries and researchers consider low working life quality as one of the most important hidden reasons of personnel inefficiency, shortage of skillful personnel and lack or shortage of working moral and motivation among the personnel [3].

U.S Life Quality Association about working life quality remarks so: any activity which is performed in every level of an organization and its result causes increasing of effectiveness, efficiency and improvement of the organization condition and this activity is through raising position and altitude of that organization's personnel. This association looks working life quality as a process that the organization stakeholders (managers and personnel) train it to live better with each other and it encourages both groups to analyze their activities and plans and do required modifications for their improvement and gradation if necessary and at the same time cause increasing of working life quality and the organization progress [4].

Human force in healthcare centers, due to their special role and position has a specific significance in health supply, since one of the most important challenges for these organizations is the quality of services provided by the personnel that in case of undesirability of these services would follow critical results. And like all other organizations, one of major approaches for providing more desirable services is particular attention to these centers human resources working life quality [5].

Since minimum 4% of personnel of Boushehr Medical Sciences University are working as social worker in health centers and also the criteria of selecting social workers, method and diversity of services expected in health centers have changed very much comparing the past, the scholar decided to perform the required studies on the most important components required for promoting services provided by this group (working life quality) and if necessary, respective interventions to be applied by expert authorities.

METHODOLOGY

Study design: The present study is a descriptive- analytical research in regard of study method and in respect of objective, it is an applied and cross- sectional study that necessary information was collected through field studies.

Sample size estimation : For evaluating the required sample regarding the study objective and due to lack of administering similar study in the province has been considered $\alpha = 0.05$, $d=0.1$ and $p=0.5$ and the minimum sample content for the study was calculated 384 persons using the following formula:

$$n = \frac{z^2 p(1-p)}{d^2}$$

Sample size: Regarding the possibility of samples outflow and that total number of social workers in the province is 467, the method of performing census was considered for this study.

Inclusion criteria: This research includes all social workers working in health centers which are servicing the covered society. Regarding that this study is performed through census, more than 90% of the province social workers participated, in other words the percentage of people participation was more than 90%.

Methodology: In this study, data collecting tool was Walton two-part questionnaire:

1: the part of demographic information

2: the questionnaire of working life quality.

Demographic information questionnaire contains 7 questions which include age in year, marital status, gender, working background in year, the number of social workers working in the service place (health center), education level and employment status, that regarding the present study, each of these questions could be effective on final results that finally the possible impact of these demographic information on working life quality is specified.

The questionnaire of working life quality assessment was for evaluating working life quality which was designed by Timousi et al in 2008 based on eight- component Walton model (Octamerous dimensions of this 35-queston questionnaire included adequate and just payment (questions 1-4), safe and healthy working condition (questions 5-10), using and promoting human abilities (questions 11-15), opportunity for continuous growth and safety (questions 16-19), social unity in the organization (questions 20-23), commitment to and observance of laws (questions 24-27), general space of life and work (questions 28-30) and social relation in working life (questions 31-35).

In order to recognize the employee's perception from his own working life quality five-degree Likert scale (very dissatisfied =1, dissatisfied= 2, neither satisfied nor dissatisfied=3, satisfied= 4 and very satisfied=5) was used.

In evaluating the scores acquired from this questionnaire, those criteria which obtained the score more than 3 in scales 1 to 5 were considered positive and indicative of satisfaction in working place and those criteria which had average score less than 3 were categorized in the negative group or dissatisfaction from working life quality.

Regarding that this questionnaire was used for the first time for collecting data in target group of this study and due to existence of different possible conditions in this context (the province texture, culture, climate and other issues), the scholar was persuaded to examine this questionnaire in two stages of content and nominal evaluations and after viewing respective experts and professors viewpoints for evaluating reliability of the questionnaire , questions were offered to 20 persons from target population and after their completion and collection using the existing software and Cronbach alpha , life quality questionnaire's reliability was obtained 0.97 which was in desirable range.

Statistical analysis: The collected data were analyzed using SPSS software version 22.

RESULTS

In this study, 369 social workers working in health centers of Boushehr province participated. They provided their information about working life quality based on the distributed questionnaires. Average age of the participants was 38 ± 8.42 . The youngest individual is 17 years old and the oldest is 58. These people average working background is 16 ± 9.13 that 13 individuals have one year or less and 13 other individuals have 30 years or more of working background. 66.3% of participants were female and the rest men. 85.3 % were married and 10.1% single and the rest of the participants were widows or divorcees. 76.9% were officially employed in Medical Sciences University and the rest were serving in other forms.

In the domain of sufficient and just payment, the average score of participants was 8.9 ± 3.4 that the score of 25% of participants was maximum score of 6 and less than it. The score of 75% participants was 11 and less. In the domain of healthy and safe working condition, the average score of participants was 16 ± 5.3 that about 3% of participants were quite dissatisfied and 1.4 % of people were quite satisfied with this domain. This is while 25% of social workers obtained the score of 12 and less and 75% obtained the score of 20 and less. 3.5% of people were quite dissatisfied with the university present conditions in using human abilities while 1.4% of them were quite satisfied. In respect of social relation and work significance domain, 25% of people had the score of 13.5 and less and 75% had the score of 20 and less and this is while the average score obtained in this domain is 16.6.

Based on the present study, the average total score of working life quality of Boushehr province social workers was

97.5 ± 25.9 and its mean was 98 that in this case 2 participants (0.5%) had undesirable condition in all considered domains and on the other extreme, 2 persons were very satisfied with all dimensions of their working life quality and 75% of participants had the score of 113 or less.

In examining the relation between participants age with the questionnaire various domains, it was specified that there is a significant correlation between participants age and the fourth domain (growth and promotion opportunity and job security) ($p=0.02$) and sixth domain (commitment to and observance of law) ($p=0.04$) and also eighth domain (social relation and job significance) ($p<0.001$) and total score of working life quality. In other words, with increasing of social workers age, they enjoy a higher level of working life quality, while there is no significant relation between working background and Octamerous domains of this questionnaire.

In examining the relation of working life quality with various domains of the questionnaire, it was specified that generally in all domains and also in total score, the average score of male social workers satisfaction is higher than the average score of female social workers and this relation is significant in domains 2 ($p<0.0001$), domain 3($p=0.01$) and domain 7 ($p=0.01$).

After interning all studied confounding variables with working life quality score in regression model, only the variables of habitat city ($p= 0.026$) , age ($p=0.006$) and working background ($p=0.033$) remained in the model. In other words, people with less working background and younger ones and working in some cities are the most important determining factors for social workers working life quality.

DISCUSSION

In a study which had been performed in 1391 on the relation between working life quality (Brooks) and nurses efficiency working in Kerman Medical Sciences University, the direct relation between working life quality and efficiency was confirmed using correlation test ($r = 0.96$, $P=0.001$). in this study, there was a direct relation between working life quality and efficiency and the highest satisfaction was related to changing shift (42.9%) and the highest dissatisfaction was related to leave shortage (89.5%)^[6].

In a study which was conducted by Sedigheh Ansari-pour et.al on job satisfaction of social workers working in Isfahan Medical Sciences University in 1392, the rate of social workers job satisfaction based on Herzberg questionnaire is related to work nature (84.6%) and the lowest rate of job satisfaction is related to satisfaction from salary and wages (51.8%). In the domain of job promotion opportunities, the greatest satisfaction is related to using held training workshops and the least satisfaction rate is related to impossibility of academic promotion. In this study, Pierson correlation showed that there is a reverse relation between

total score of social workers job satisfaction with age, children number and working background ($p < 0.05$)^[7].

The average score of Boshehr province social workers working life quality was 97.5 ± 25 . In this respect, working life quality was in desirable level for 2 persons and in very desirable level (very satisfied) for 5 other people. This is while in the study of Dehghan Nayeri et al.^[8]

This average is in the level of 41.9% and working life quality of participating nurses is in medium level and about 1% of participants reported their working life quality desirable. In this study, working life quality was related to gender that this relation was significant in male gender. Yet, in the study of Dehghan Nayeri et al.^[8] gender didn't have significant relation with working life quality. In this study, age was affirmed as a determining variable in working life quality ($p = 0.006$), while this relation didn't exist in the study of Alireza Chobineh et al and yet this relation was confirmed among Birjand nurses too. In this study, social workers were satisfied with the rate of their activities social acceptability, while in the study of Alireza et al they were dissatisfied with their job social acceptability which is possibly due to cultural difference and type of society look at health services. Another aspect of social workers demographic information which was studied in this research was employment status and its relation with their working life quality and there is no significant relation with the mentioned variable. Yet, in the research of Sedigheh Ansari-pour, this relation was significant with the income and salary rate^[9]. In this study, the least and the most satisfaction was related to salary payment and social relation and yet in Behzadfar study, the least satisfaction is related to job promotion and the most job satisfaction is related to working in village setting^[10].

CONCLUSION

While programs plurality may create a diversity in the space of departmental work and is a factor which prevents from personnel early weariness but if this plurality of programs is not applicable in working time, by itself causes social workers dissatisfaction and early weariness that this problem could be resolved by increasing forces number or better planning . in this study, those social workers who had 2 or more colleagues in a health center, had better working quality. In this respect, it is required that more studies to be performed so that by identifying its reasons, necessary interventions (by considering cost and benefits of interventions) are performed and singular or less than three social workers working life quality is improved . among other results of this study is better working life quality of younger social workers than others and in this respect, we could use younger forces (if possible) and perform necessary studies in recognizing factors which reduce older social workers working life quality and try to resolve this problem and increase quality and

quantity of health care services in rural regions by social workers.

REFERENCES

1. Panah SN. Studying the relationship between the quality of working life quality and efficiency – Human Resources Management Journal, Imam Hossein University. 2014;4:18
2. Sharma N. Importance of quality of work life in small industries for employees. International journal of latest research science and technology. 2013;2:5.
3. POUR SA. Evaluating Social Workers Working Life Quality Working at Isfahan University of Medical Sciences, Health Informatics Management.2013;10:10
4. Choobineh A. Evaluating Social Workers Working Life Quality Working at Shiraz University of Medical Sciences, Ergonomics and Human Factors Engineering Association Quarterly. 2013;1:7
5. Dashti S. Evaluation of Effective Factors on Job Satisfaction at Healthcare Clinics in Hamedan, Pajouhan Scientific Journal.2014;12:7
6. Zakerian S. Studying Dimentions of Work Life Quality and Its Relationship with Job Satisfaction in Automobile Industry, The Journal of Ergonomics. 2013;1:11
7. Sabr S. The relationship between work life quality and efficiency of nurses of Kerman University of Medical Sciences, The Iranian Journal of Bioethics.2012;3:25
8. Niri ND. Quality of work life and efficiency of clinical nurses and their relationship with each other – Iranian Journal of Nursing. 2009;3:11
9. Far MB. Effective Factors on job satisfaction of social workers of Ghazvin, Journal of Ghazvin University of Medical Sciences. 2014;4:7
10. Lahmali AA. – Studying the relationship between work life quality in Mazandaran Tax Admission Organization, Tax journal. 2013;19:25
11. Mogharreb M. Studying work life quality of nurses in teaching hospital of Birjand.2011