

Quality Work Life among Employees of Public Sector In Algeria: A Case Study

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Abstract:

Regarding the many problems that exist in public sector in Algeria, the quality of working life is one of the important challenges in any public system. The purpose of this study was to evaluate the level of quality of working life among medical staff in Algeria. Data was obtained from a sample of 33 employees, using questionnaire instrument. The statistical program SPSS is used to test the hypotheses using the following statistical methods: the mean, the standard deviation and, one sample T test,

The most important findings of the study are as follows: There are degrees of of quality of work life at the level of significance ($\alpha \leq 0.05$)

Keywords: quality work life; work ;work context ;health sector; algeria.

Jel Classification Codes: M54, I18

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1. INTRODUCTION

Quality of work life represents an important concept related to the satisfaction and comfort that an individual feels in his work environment. When a worker is satisfied with their job environment, they are likely to be more productive and effective in performing their tasks.

Managers are now redesigning works to enhance the quality of working life. The quality of work life is considered the umbrella under which employees feel completely satisfied with the work environment and provide their cooperation and support to management to enhance productivity. Quality of working life creates a more humanized working environment. It is trying to provide the higher order needs of employee's as well as their more fundamental needs. Quality of work life refers all inputs aimed at the employee's Contentment and enhancing organizational effectiveness (kumar & jyoti, 2018).

Quality of work life is an important factor in attracting new talent and retaining existing talent, as individuals look for a work environment that meets their needs and offers them opportunities for development. The quality of work life contributes to building a positive organizational culture that enhances cooperation and team spirit among employees. Understanding quality of work life is vital to achieving a healthy and sustainable work environment, with the ultimate benefits for both employees and employers. The present study aims to determine the factors by reviewing relevant literature on quality of work life.

Problem Statement

The study problem takes the following form:

What is the level of quality of work life among medical staff ?

Sub-problems:

The study sub-problem takes the following form:

- What is the level of work/home life among medical staff?
- What is the level of Work design among medical staff?
- What is the level of work context among medical staff?
- What is the level of Work world dimension among medical staff?

The hypotheses of the study:

In order to answer our question the following hypotheses are proposed:

- There are significant level of work/home life among medical staff.
- There are significant level of Work design among medical staff.
- There are significant level of work context among medical staff.
- There are significant level of Work world dimension among medical staff.

The objectives of the study:

- To evaluate the level of quality of work life among medical staff.
- To know how employees manage work and family life equally.
- To know how work context leads to job satisfaction(quality of work life).

2.Literature Reviews:

2.1. Previous Studies

Mahesh and Nanjundeswaraswamy(2020),the purpose of this study is an effort to study the status of Quality of Work Life of employees working in the corporate sector and to explore the impact of demographic elements on Quality of Work Life. In the survey conducted among the 277 employees of the corporate sector in Bangalore, it is seen that only 54.8% of the employees are satisfied with the present status of Quality of Work Life. From the demographical analysis conducted, it is observed that there is no relation between demographical factors and Quality of Work Life.

Adikoeswanto Dodot et al., (2020) investigated the relationship between quality of work life and organizational commitment.

This research was conducted in the Finance Section of PT. Kereta Api (Persero) Daop 8 Surabaya in which there are 30 employees. The sampling technique was carried out using a census technique. Therefore, the sample

in this study is the entire population, namely, 30 people who are employees of the finance section of PT. Kereta Api (Persero) Operation Area 8 Surabaya. In this study it can be concluded that the Quality of Work Life (Development, Participation, Compensation, Supervision, and Work Environment) has a significant effect on the Organizational Commitment of employees of the finance section of PT. Kereta Api (Persero) Operation Area 8 Surabaya. So, it is known that employees of the finance section of PT. Kereta Api (Persero) Daop 8 Surabaya through the quality factors of work life can influence them to commit to their organization. Furthermore, it is known from the results of the analysis of this study that the work environment variable is the most dominant variable in influencing organizational commitment.

Mebarki Bouhafs et al., (2019), the aim of the present paper is to measure the level of quality of work life (QWL) and to study the differences in demographic characteristics (gender, age, work experience and socio-professional category) among managerial staff in two public settings from tertiary sector based in Oran - Algeria. A total sample of 252 managerial staff members participated in the study. Data were collected using a questionnaire technique.

The analysis of the results showed that the level of QWL was medium, and there were no statistically significant differences in QWL between demographic characteristics categories (1) gender, (2) age, (3) work experience in these two organizations and (4) socio-professional categories.

Lolemo Kelbiso et al., (2017) investigated the level of quality of work life and its predictors among nurses working in Hawassa town public health facilities, South Ethiopia. The study sample is consisted of 253 nurses of two hospitals and nine health centers. A multinomial logistic regression model was fitted to identify significant predictors of quality of work life using SPSS version 20. Results. The study showed that 67.2% of the nurses were dissatisfied with the quality of their work life. We found that educational status, monthly income, working unit, and work environment were strong predictors of quality of work life among nurses.

2.2.The Concept of Quality of Work Life

2.2.1.definition of Quality of Work Life

The quality of working life has been defined by researchers in different ways. According to the EFIWLC (2003), The concept of the quality of working life has “its foundations in the multidimensional understanding of an individual’s well-being or good life.” This is a perspective widely accepted by researchers, most of whom define the concept as a dynamic, multidimensional construct that can include any set of measures related to job quality (hannif, cox, & almeida, 2014, p. 2).

Quality of working life is the process of work company enabling its members at all levels to activeity, Participate in shaping the company’s environment, methods and results. This value-based process aims to achieve the twin goals of enhancing the effectiveness of organizations and enhancing the quality of work life of workers (kumar & jyoti, 2018, p. 443).

Enhancing the quality of work is a comprehensive path to the process of improving the quality of life of the facilities workforce and is critical for any organization to recruit and retain its employees. A high quality of work life is crucial for healthcare facilities to have qualified, dedicated and inspired employees. Service provision in health care facilities depends on the capabilities and capabilities of its human resources (lolemo, belay, & woldie, 2017, p. 2).

2.2.2..Objectives of Quality of Work Life

The main objectives of the QWL programmes are to (swathi, 2017, p. 191):

- Improve employee satisfaction;
- Improve physical and psychological health of employees which creates positive feelings;

- Enhance productivity of employees;
- Reinforce workplace learning;
- Improved management of the on-going change and transition; and
- Build the image of the company as best in recruitment, retention, and in general motivation of employees.

3. Methodology:

3.1. Study Sample:

The study sample is consisted of 33 employees(nurse, doctor, manager) of Ksar-elhirane hospital, Laghouat .

3.2. Data Collection:

This study includes two types of data: primary data and secondary data. Secondary data sources are collected from various reviews such as journals, conferences and articles. While primary data relates to data collected through a questionnaire. To measure the four dimensions of quality of work life, a structured questionnaire was designed inspired by previous studies. It consists of two sections. The first section dealt with the demographic characteristics of the sample: gender, education, work experience in the organization, and professional category. The second section, which consists of 15 paragraphs, deals with the following dimensions of quality of work:

- Three items of work/home life dimension
- Work design dimension consists of 3 items
- The work context dimension consists of 6 items
- Work world dimension consists of 3 items

3.3. Data analysis

Data were analyzed by Statistical Package for the Social Sciences SPSS programme (22), their standard deviations and means were computed and

the techniques of T-test (for the variables of Work/home life dimension, Work design dimension, Work context, Work world dimension) . In general, these analyses have been made on three dimensions. To answer the main question (What is the level of quality of work life among medical staff ?).

We conducted a test to measure the Reliability of the questionnaire using the Cronbach's Alpha and the results were as follows;

Table1. Reliability Test

Reliability Statistics	
Cronbach's Alpha	N of Items
0.67	15

Source: compiled by researchers

Cronbach Alpha is used to measure the reliability of questionnaire. It is (0.67) for quality of work life questionnaire. Since acquired Cronbach's Alpha ratio is greater than (0.6), one can say that the reliability of questionnaire is confirmed.

Normality test:

normality test is carried out by non-parametric statistical Kolmogorof-Smirnof (KS) test. Based on the output data shown in table (2) by using normality a test by means of statistical tests, the obtained results are:

Table2 :The Results of One Sample Kolmogorov-Smirnov Normalite Test

	Kolmogorov-Smirnov Z	Asymp. Sig. (2-tailed)
Work/home life	0.139	0.10
Work design	0.12	0.20
Work context	0.10	0.20

Work world dimension	0.07	0.20
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The results of Kolmogorof-Smirnof test provides values of (0.13 , 0.12,0.10,0.07) with probability of (0.10, 0.20, 0.20,0.20) far above the $\alpha = 0.05$, thus it can be concluded that the residual data are distributed normally

Table .3: Work/home life Means and standard deviation

N°	Statement	Std. Deviation	Mean
1	I have enough energy left after work.	0.98	4.03
2	I am able to balance work and family needs.	1.02	3,87
3	The health facility's working hours system negatively affects my life	1.19	3.57
Total	Work/home life	3.82	0.72

Source: compiled by researchers

Out of the three factors, one factor, Q1 ‘I have enough energy left after work (mean=4.03) ; was perceived as the most important factors that achieve the Work/home life. The remaining two factors were perceived as the important factors that enabler Work/home life.

Table. 4: Work design Means and standard deviation

N°	Statement	Std. Deviation	Mean
4	I feel comfortable and satisfied with my job.	1.05	3.12
5	There are enough employees in my work setting.	0.93	4.06
6	I am able to provide good quality client/patient care	1.21	2.81
Total	Work design	0.44	3.33

Source: compiled by researchers

The results indicate that out of the three factors, one factor, Q5 ‘There are enough employees in my work setting (mean=4.06) was perceived as the most important factor that achieves the Work design, the respondents reported that there are enough employees in their health care facilities.

Table. 5: Work context Means and standard deviation

N°	Statement	Std. Deviation	Mean
7	I am able to participate in decisions made by my employees manager/supervisor.	1,14	3,36
8	I am able to communicate well with my employee manager/supervisor	1,29	3,39
9	I receive feedback on my performance from my employee manager/supervisor	1,12	3,45
10	I feel like there is teamwork in my work environment	,85	2,66
11	My manager provides opportunities for career advancement	1,10	2,90
12	I receive support to attend continuing education and training programs	,704	1,60
Total	Work context	,605	2,89

Source: compiled by researchers

As shown in Table 5, the mean total score of Work context was 2.89 (SD = 0.60), This value is greater than the theoretical average, which means that the sample members’ attitudes toward the dimensions of the work context were at a medium level.

. Table .6: Work world dimension Means and standard deviation

N°	Statement	Mean	Std. Deviation
1	My work impacts the lives of patients, families and the community	1.66	0.69
2	I feel quite secured about my job	1.45	0.75
3	My salary is appropriate for my job, given the current labor market conditions and workload.	1.51	0.50
Total	Work world dimension items	1.54	0.38

Source: compiled by researchers

As shown in Table 6, the mean total score of Work world dimension was 1.54 (SD = 0.38), which means that respondents attitudes towards Work world dimension were at a low level.

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4. Hypothesis Testing

The application of the test 'T' (One- Sample T. Test) to detect the level of satisfaction of employers about the quality of work life dimensions, and Table (6) shows that.

Table 7 :The Results of One Sample T test

	T value	Significance
Work/home life	6.58	.000
Work design	4. 34	.000
Work context	0.95-	.34
Work world dimension	21.97	.000

Source: compiled by researchers

The table shows (7) that the value of (T) is positive and stood at (6.58, 4.34, 21.97-) and statistically significant and (0.00), where general mean value compared to the standard value of the Likert- 5 Scale, namely, (3), and the results showed medium degree and statistical level of (Work/home life, Work design, Work world dimension) at the significance level (0.05). The analysis of the results showed that the level of Work context was low and there were no statistically significant differences in Work context.

5. Discussion

As shown in Table 3, the mean total score of Work/home life was 3.82 (SD = 0.72), This value is greater than the theoretical average, which means that the sample members' attitudes towards the dimensions of work/home life were at a medium level.

The respondents reported that they received supportive supervision and satisfactory feedback from their employees' manager/supervisor (mean = 3.54). Sample members revealed that they do not receive support to enroll in continuing education and training programs (mean=1.60).

Salary was also a major factor contributing to disappointment among staff working in public health facilities. The majority of participants reported that their wages are inadequate given the nature of the duties they perform, and participants believe that their jobs are insecure.

The results of the present study, there for, develop policy to improve quality of work life within the Algerian public sector. This could include suggestions for organizational changes, training programs, leadership development initiatives, and employee support mechanisms.

6. Conclusion

In the survey conducted among the 33 employees of the health sector in Algeria(Ksar-elhirane hospital), it is seem that majority of the employees are satisfied with the present status of QWL(Work/home life, Work design, Work world dimension), and the current study showed that the workers felt that lack of opportunities for educational advancement and hospital

sponsored training and inability to affect decisions which are issues that influence the Work context.

We recommend that the incentive and rewards packages, and opportunities for continuing education and career development should be reviewed to meet the interests of workers in study facilities.

The samples obtained in this study are not evenly distributed by characters. the future research is suggested to add other institutions, so that the characteristic of obtained sample is more evenly.

7. References

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8. Appendices

Fiabilité

Echelle : ALL VARIABLES

Récapitulatif de traitement des observations

		N	%
Observations	Valide	33	100,0
	Exclue ^a	0	,0
	Total	33	100,0

a. Suppression par liste basée sur toutes les variables de la procédure.

Statistiques de fiabilité

Alpha de Cronbach	Nombre d'éléments
,67	15

Tests non paramétriques

Test Kolmogorov-Smirnov pour un échantillon

		whl	wc	WD2	WW2
N		33	33	33	33
Paramètres normaux ^{a,b}	Moyenne	3,8283	2,8990	3,1461	1,5935
	Ecart type	,72227	,60516	1,01051	1,01850
Différences les plus extrêmes	Absolue	,139	,123	,108	,075
	Positif	,133	,069	,077	,060
	Négatif	-,139	-,123	-,108	-,075
Statistiques de test		,139	,123	,108	,075
Sig. asymptotique (bilatérale)		,103 ^c	,200 ^{c,d}	,200 ^{c,d}	,200 ^{c,d}

a. La distribution du test est Normale.

b. Calculée à partir des données.

- c. Correction de signification de Lilliefors.
- d. Il s'agit de la borne inférieure de la vraie signification.

Descriptives

Statistiques descriptives			
	N	Moyenne	Ecart type
x1	33	4,0303	,98377
x2	33	3,8788	1,02340
x3	33	3,5758	1,19975
N valide (liste)	33		

Descriptives

Statistiques descriptives			
	N	Moyenne	Ecart type
x1	33	4,0303	,98377
x2	33	3,8788	1,02340
x3	33	3,5758	1,19975
whl	33	3,8283	,72227
N valide (liste)	33		

Descriptives

Statistiques descriptives			
	N	Moyenne	Ecart type
x4	33	3,1212	1,05349
x5	33	4,0606	,93339
x6	33	2,8182	1,21075
wd	33	3,3333	,44096
N valide (liste)	33		

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Descriptives

Test sur échantillon unique

	Valeur de test = 3					
	t	ddl	Sig. (bilatéral)	Différence moyenne	Intervalle de confiance de la différence à 95 %	
					Inférieur	Supérieur
whl	6,588	32	,000	,82828	,5722	1,0844
wd	4,342	32	,000	,33333	,1770	,4897
wc	-,959	32	,345	-,10101	-,3156	,1136
wz	-21,976	32	,000	-1,45455	-1,5894	-1,3197

Statistiques descriptives

	N	Moyenne	Ecart type
x13	33	1,6667	,69222
x14	33	1,4545	,75378
x15	33	1,5152	,50752
wz	33	1,5455	,38022
N valide (liste)	33		