

Different Tests on 4 Types of Hospitals Related to QWL, Self Efficacy, Job Satisfaction, Organizational Commitment, and Organizational Citizenship Behavior (OCB)

(Study of Nurse Hospitals in Malang Raya)

Ika Ruhana*, Hamidah Nayati Utami, Tiwulida
Afrianty
Department of Business Administration
Universitas Brawijaya
Malang, Indonesia
*ika_r_fia@ub.ac.id

Endang Siti Astuti
Department of Public Administration
Universitas Brawijaya
Malang, Indonesia

Abstract—This research is motivated by problems that arise in hospitals, especially those felt by nurses. The problem that often arises in hospitals is related to job satisfaction. With this research whether the nurse's job satisfaction is influenced by organizational factors (QWL) or is influenced by personal factors (self-efficacy) that will affect job satisfaction. Job satisfaction will affect organizational commitment and will affect OCB. These variables are examined and tested in four types of public hospitals in Malang. The location of this study was conducted in 4 Types of General Hospitals, Type A Hospital is Saiful Anwar General Hospital Malang. Type B General Hospital is Persada Hospital in Malang City, Type C General Hospital is Karsa Husada General Hospital in Batu City and Type D General Hospital is Islamic Hospital Madinah Kasembon, Malang Regency. The analysis used is descriptive analysis and inferential analysis with a different test. Based on the results of the analysis showed that QWL nurses at Persada Hospital were significantly different from QWL nurses in RSSA, Karsa Husada General Hospital Batu and Islamic Hospital Madinah Kasembon. Nurses' self-efficacy in RSSA is significantly different from nurses' self-efficacy in RSI Madinah Kasembon.

Keywords—Quality of Work Life (QWL), self efficacy, job satisfaction, organizational commitment, Organizational Citizenship Behavior (OCB)

I. INTRODUCTION

This research is motivated by the importance of the nurse's Organizational Behavior (OCB) variable in hospitals [1]. OCB is a new concept in analyzing performance but is a very old human behavior accompanied by voluntary actions and mutual assistance with no request for payment or official compensation in return [2]. In this study, it has been tested based on research [1] OCB is influenced by QWL, self-

efficacy, job satisfaction and organizational commitment. The problem often experienced by hospital nurses is related to job satisfaction. The problem that often arises in hospitals, especially experienced / felt by nurses is related to the number of workers, where the number of nurses is still very lacking. The ratio of the number of nurses to patients is not ideal.

Hajra [3] in his article entitled Problems Often Faced by Nurses, states there are several problems faced by nurses, namely nurses are often under-paid (both from colleagues and patients): low salaries; became the main target of layoffs; long working time; required to do many things at one time; increased exposure to infections. Regarding the distribution of nurses, many nurses prefer to live and work in cities rather than in remote areas. With this condition the number of nurses in the area is very less. Seen from the service point of view, nurses must further improve their service and service. You do this by increasing the level of education to a higher level.

This research was conducted on nurses in the General Hospital. Based on its type, public hospitals can be classified as general hospitals type A, B, C and D (Permenkes 56 of 2014 concerning hospital classification and licensing) [4]. The hospital classification is based on services, human resources, equipment, buildings and infrastructure. This research was conducted at the General Hospital in Malang, based on the consideration that Malang is the third city in East Java which has the highest number of hospitals after Surabaya and Sidoarjo. Based on data from the Central Statistics Agency of East Java Province, about the number of hospitals in East Java, by city / regency, Malang ranks third based on the number of hospitals after Surabaya and Sidoarjo [5]. Based on the number of hospitals, researchers determine Malang Raya as a research location. Malang Raya which consists of Malang Regency,

Malang City, Batu City has many hospitals, both state and private.

General Hospital (RSU) is a hospital that provides health services in all fields and types of diseases [4]. In this study the subjects or research samples were nurses in RSU Type A, RSU Type B, RSU Type C and RSU Type D in Malang Raya (i.e. RSUs in Malang City, Batu City and Malang Regency).

There are many public hospitals in Malang. These public hospitals are spread in Malang City, Malang Regency and Batu City. Based on the data obtained in Malang City Health Office, there are 1 hospital with type A, 5 hospitals with type B, 4 hospitals with type C and 2 hospitals with type D. There are 2 hospitals managed by the government, and 10 hospitals private-managed hospital (secondary data in Malang City Health Office 2019).

In Malang Regency there are 19 General Hospitals. Hospitals that have type B are 2 hospitals, which have type C are 5 hospitals, which have type D are 9 and there are 2 hospitals whose type has not been established. Data on the name of the General Hospital in Batu City shows that there are 4 public hospitals, where there are 2 hospitals that have type C and 2 hospitals that have type D. Based on these data the study was conducted at hospitals with various types / classes in Malang Raya, both managed by the government and the private sector. This study explores how QWL conditions, self-efficacy, job satisfaction, organizational commitment and OCB nurses in these types of hospitals (A, B, C and D).

This research contributed to the development of literature relating to OCB [6], expanded studies on Quality of Work Life (QWL) [7], expanded studies on Self-Efficacy [8], expanded studies on Robbins job satisfaction [9], Luthants [10] and Organizational commitment [11]. In this study developed a previous study from Ruhana [1] by testing whether there were differences in QWL, self-efficacy, job satisfaction, organizational commitment and OCB nurses in the four types of public hospitals Research that examines the differences in QWL, self-efficacy, job satisfaction, organizational commitment and OCB in 4 types of public hospitals, as far as researchers know, no one has done it.

The writing of this paper is divided into sections. Section I is an introduction. Section II contains the related work of QWL, self-efficacy, job satisfaction, organizational commitment and OCB, Section III contains methodology Section IV of research and discussion, section V conclusion and future research

II. RELATED WORKS

In this study the variables used are Quality of Work Life (QWL), Self-Efficacy, Job Satisfaction, organizational commitment and Organizational Citizenship Behavior (OCB).

A. *Quality of Work Life (QWL)*

Walton [7] defines QWL as how effectively an organization responds to the needs of employees. The term

QWL is far broader and more diverse than organizational development, which includes fair and just compensation, safe and healthy working conditions, opportunities for personal growth and development, satisfaction of social needs at work, employee protection rights, compatibility between work responsibilities and non-work, and social relevance of work life Lawler [12] defines QWL as the characteristics of work and working conditions. QWL in organizations is to improve employee welfare and productivity. QWL is a complex matter, because it consists of both physical and mental needs of employees. Beh and Rose [13] defines QWL as a form of a person's response to his work, specifically related to one's results that are associated with job satisfaction, and mental health.

Based on this opinion, it can be concluded that QWL is an employee's response to his work. In this study the indicators used in measuring QWL are compensation, competency development, working conditions and leadership.

B. *Self Efficacy*

Bandura [8] defines self-efficacy as a person's belief in his ability to organize and carry out actions to achieve the goals set. Ivancevich et al. [14] explains self efficacy related to personal beliefs about competence and self ability. Hassan [15] explains that self efficacy influences individual emotional responses, so work becomes fun because the individual is competent and confident. Chen et al. cited by Ten Tshai, et al. [16] states that self efficacy is useful to explain human behavior that determines individual choices, level of effort and perseverance of a person. Based on this understanding, it can be concluded, self efficacy is an individual's confidence in his abilities, so as to achieve the desired performance. Bandura [8] states that there are 3 dimensions of self efficacy, namely: level, which indicates the level of difficulty of the task performed. done or certain situations that have never been done up to in a series of difficult or varied tasks or situations. Third, the strength / strength that indicates the level of strength or stability of the individual against his beliefs. In this study the indicators / dimensions used are based on the opinion of Bandura [8].

C. *Job Satisfaction*

Job satisfaction is a positive emotional statement that results from the evaluation process of one's work experience. Job dissatisfaction occurs when a person's expectations are not appropriate / not met [17]. Hasanmoradi [18] states job satisfaction is a positive emotional form that results from a person's assessment of the work situation and is related to the characteristics of a job. Based on this opinion it can be concluded, job satisfaction is a positive emotional feeling that results from an employee's evaluation of his work or work experience by comparing between what is expected and what is really obtained from his job. Indicators in measuring job satisfaction are based on the Job Description Index (JDI), which includes job satisfaction, satisfaction with payroll, satisfaction with supervisors, satisfaction with promotions and

satisfaction with colleagues. In this study the indicators in measuring performance are based on the Job Descriptions Index.

D. Organizational Commitment

Meyer and Allen [10] state organizational commitment as a psychological state in which individual characteristics relate to the organization, and have implications for continuing or not continuing membership in the organization. Organizational commitment according to Steers [19] is defined as employee attitudes and as a set of behavioral intentions; willingness to put forth enough effort on behalf of the organization and a strong desire to maintain organizational membership. Parvar [20] states organizational commitment is the ability of individuals and their involvement in an organization. Based on this opinion it can be concluded, organizational commitment is the psychological state of the individual / individual attitude in dealing with organizations that have implications for strong attitudes / behaviors to accept the goals and values of the organization, willingness to exert all efforts on behalf of the organization and a strong desire to maintain organizational membership / strong desire to remain in the organization.

In measuring organizational commitment according to Meyer and Allen there are 3 dimensions, namely: affective commitment, showing the emotional attachment of employees to the organization. Employees who have affective commitments remain in an organization that is shown by their positive attitude towards the goals and values of the organization, employees have a sense of responsibility towards achieving organizational goals and are able to show high productivity. Affective commitment is considered as the most optimal component. Continuous commitment shows a tendency to stay in the organization. This is indicated as the employee first showed when needed work. In continuous commitments, employees / employees remain in work not because they want to; they remain at work because they need the job and think that leaving the company will be very detrimental to them. Employees who have high continuous commitment will stay in the organization because they really need the job. Third, normative commitment, shows the attitude of staying in the organization without any compulsion (or requirements). This reflects the sense of responsibility to become a member of the organization.

E. OCB

Organ [6] defines Organization Citizenship Behavior (OCB) as discretionary individual behavior that is not directly or explicitly recognized by the formal reward system and that aggregately promotes the effectiveness of organizational functions. OCB reflects actions taken by employees that go beyond the role of the minimum requirements expected by the organization and promote the well-being of colleagues, work groups, and / or organizations [21]. OCB is influenced by certain factors. According to Sofiah et al [22], the factors that influence OCB: empowerment, transformational leadership and competence. Neeta [21] uses 5 dimensions in OCB:

- Altruism (helping certain others); Altruism refers to the helping behavior of employees in organizations. Employees who have altruism behavior help their coworkers and also they are able to direct new people to their work.
- civic virtue (keeping important things in the organization); This behavior is shown by their responsibility to participate and rationally shows concern about organizational life. In other words, shown by the involvement of employees in meetings, participation in social activities that is gathering, attending certain meetings, etc.
- Conscientiousness; This behavior leads to behavior to obey the rules, after timely breaks, punctuality, avoiding casual conversation or to obey organizational rules, reporting tasks on time according to the boss's orders.
- courtesy behavior shows individual discretionary behavior that aims to prevent problems related to other jobs, assess and do what is best for employees in strengthening the dimensions of politeness.
- Sportsmanship. This behavior is a willingness to tolerate less than ideal conditions without complaining and refraining from activities such as complaining

Based on the study of the theory, then tested whether there are differences in the 5 variables in the four public hospitals in Malang Raya.

III. METHODOLOGY

This research was conducted using descriptive analysis and inferential analysis using a different test. The study population was nurses in public hospitals in Malang. Sampling was carried out with a multistage sampling technique, with stages: determining the area / location of the research that is the General Hospital in Malang City, the General Hospital in Malang Regency and the General Hospital in Batu City. The second step is to classify the hospital according to its type. The third step, determine the hospital based on its type with a purposive sampling technique, based on data obtained by hospital type A is Saiful Anwar Hospital in Malang City. Type B General Hospital is determined by Persada Hospital in Malang City, with the consideration that Persada Hospital is a hospital that provides international standard services. General Hospital with Type C is determined by Karsa Husada Batu General Hospital with consideration that Karsa Husada Batu General Hospital is one of the most referral patients. Hospital with Type D is RSI Madinaah Kasembon in Malang Regency, with consideration that RSI Madinah Kasembon is one of the referral hospitals for patients in Malang Regency.

After obtaining the General Hospital which was used as the location of the study, the sampling technique in each hospital used the proportional random sampling technique. The total responden amount 175 people.

IV. RESULTS AND DISCUSSION

A. Respondent Data

Based on the results of the study obtained data relating to research respondents as follows. Based on the number of samples obtained by 175 respondents, data respondents by sex showed that female respondents numbered 122 respondents (70%) and male respondents totaled 53 respondents (30%). The data shows that female respondents were the most respondents for each hospital with 122 respondents (70%). With this data nurses with female sex dominate in each hospital. This shows that gender is related to the services provided.

Based on the questionnaire that has been distributed, respondents in this study have different backgrounds ranging from D3, D4, S1 and S2. Respondent data based on nurses' educational background, the majority of respondents with D3 education background were 124 respondents (70.86%), S1 educational background were 44 respondents (25.14%), with D4 educational background were 6 respondents (3.43 %) and those with S2 education background are 1 respondent (0.57%). Based on these data shows that the dominant respondent / nurse background is D3 educated with 124 respondents (70.86%) and there is 1 respondent with S2 education background in RSSA of 0.57%. Her S2 education background is Nursing Masters education.

Respondents in this study have diverse ages, ranging from those aged 22 years (lowest age) to 59 years (highest age). Respondents in this study have diverse ages, ranging from those aged 22 years (lowest age) to 59 years (highest age). Based on the work tenure data, it is obtained that the majority of respondents are in the working period <1-5 years with 87 respondents (49.7%). In this study respondents were scattered in the field of Inpatient Installation (IRNA), Outpatient Installation (IRJ), ICU and operating room services.

B. Descriptive Analysis Results

Based on the results of the descriptive analysis conducted, the average variable results show the following results on table 1:

TABLE I. AVERAGE VARIABLES AND INTERPRETATIONS

No	Variable	Average variable	Interpretation
1	QWL (X1)	3,37	medium
2	SE/ self efficacy (X2)	3,66	Good/ high
3	job satisfaction (Y1)	3,47	satisfied
4	organizational commitment (Y2)	3,39	medium
5	OCB (Y3)	3,75	Good/ high

source: processed primary data, 2018.

Based on the results of the descriptive analysis showed that nurses QWL was perceived sufficient / moderate. Nurse's self efficacy is good / high. Job satisfaction is satisfied by nurses. Organizational commitment is perceived sufficient / moderate by nurses and OCB is perceived well / high by nurses.

C. Different Test Analysis Results

For different tests using ANOVA analysis, where there are procedures that must be met first. From the existing data, the residual normality must be tested first, if the normality test is fulfilled, then the assumption of residual homogeneity must be tested, if fulfilled, then we can use ANOVA. If the data tested for normality are not met, residual homogeneity must also be tested first. If it is not fulfilled then it is analyzed by Kruskal Wallis, to find out the significant / not tested by Mann Whitney.

This difference test analysis was carried out to compare whether there were differences in QWL, self efficacy, job satisfaction, organizational commitment and OCB in general hospitals. With consideration because the general hospital used as the location of this study has a different type, namely types A, B, C and D. With this different test can produce findings that are different from the results of research conducted by previous researchers, who only conducted an influence test / corational only.

1) *Different test variables QWL in hospitals Type A, B, C and D:* After a normality and homogeneity test, the next step is a different test with the Kruskal Wallis test. The test criteria states that if the probability \leq level of significance (alpha = 5%) then H0 is rejected, so it can be stated that there is at least one pair of hospitals that have Quality of Work Life in nurses is significantly different. To find out which hospitals that have Quality of Work Life for significantly different nurses are performed using Mann-Whitney with the criteria that if one pair of hospital types produces a probability \leq level of significance (alpha = 5%) then it can be stated that there is a significant difference in Quality of Work Life for nurses in both types of hospitals.

Based on the results of the analysis informs that the Quality of Work Life in RSUKH public hospitals is not significantly different from the Quality of Work Life at RSI and RSSA public hospitals, but it is significantly different from the Quality of Work Life at Persada public hospitals. While the Quality of Work Life at RSI public hospitals is not significantly different from the Quality of Work Life at RSSA general hospitals, but it is significantly different from the Quality of Work Life at Persada public hospitals. Then the Quality of Work Life in RSSA public hospitals is significantly different from the Quality of Work Life in Persada public hospitals.

2) *Different test variables self efficacy:* Based on the results of the analysis it can be concluded that:

- Self-efficacy for nurses in RSUKH is not significantly different from self-efficacy for nurses in RSI, RSSA and Persada Hospital
- Nurses' self-efficacy at RSI is not significantly different from nurses' self-efficacy at RSUKH and Persada Hospital but is significantly different from nurses' self-efficacy at RSSA

- Nurse's self-efficacy at RSSA is not significantly different from nurses' self-efficacy at RSUKH and Persada hospital, but is significantly different from nurses' self-efficacy at RSI
- Nurse's self-efficacy at Persada hospital was not significantly different from nurses' self-efficacy at RSUKH, RSSA and RRSI.

3) *Job satisfaction, organizational commitment and OCB:*

Based on the results of the normality test, homogeneity test and difference test with Kruskal Wallis shows that the variables of job satisfaction, organizational commitment and OCB show that there is no difference in job satisfaction, organizational commitment and OCB nurses in public hospitals type A, B, C and D in Malang.

V. CONCLUSION AND FUTURE SCOPE

Based on the results of descriptive analysis shows the results that nurses QWL responded adequately by nurses, self-efficacy responded well / high by nurses, organizational commitment was responded to moderately / moderately by nurses, job satisfaction was satisfied by nurses. and OCB responded well / highly by nurses. Different test results show that there are differences in QWL nurses in Persada Hospital with QWL nurses in RSSA, karsa Husada General Hospital and Islamic Hospital / RSI Madinah Kasembon, there are differences in nurse self-efficacy in RSSA and RSI Madinah Kasembon. There is no difference in job satisfaction, organizational commitment and OCB nurses in public hospitals type A, B, C and D in Malang.

This study shows interesting results. For the next researcher, it is necessary to dig deeper with regard to the variables studied. This study has a limitation of not distinguishing government hospitals and private hospitals. For subsequent researchers, it can be developed by differentiating / focusing their research on government or private hospitals so as not to produce biased data.

REFERENCES

- [1] I. Ruhana, "Pengaruh Quality of Work Life (QWL) dan Self Efficacy terhadap Kepuasan Kerja, Komitmen organisasional, Organizational Citizenship Behavior (OCB) (studi pada perawat Rumah Sakit Di Malang Raya)," Unpublished.
- [2] F.H. Kashani, "A Review on Relationship between Quality of Work Life and Organizational Citizenship Behavior (Case Study: An Iranian Company)," *J. Basic. Appl. Sci. Res.*, vol. 2, no. 9, pp. 9523-9531, 2012.
- [3] N. Hajra, "MIMS Today. Masalah yang Dihadapi Perawat," 2016.
- [4] Permenkes No 56 tahun 2004 tentang Klasifikasi dan Perizinan Rumah Sakit.
- [5] BPS East Java Province, "Number of Health Facilities by Regency / City in East Java Province, 2017," [Online]. Retrieved from <https://jatim.bps.go.id>
- [6] D.W. Organ, *Organizational Citizenship Behavior: The Good Soldier Syndrome*. Lexington, MA: Lexington Books, 1988.
- [7] R.A. Walton, "Quality of Work Life: What is it?" *Sloan Management Review*, Fall, pp. 11-21, 1973.
- [8] A. Bandura, *Self-efficacy: The exercise of control*. New York: Freeman, 1997.
- [9] P.S. Robbins, *Prinsip-prinsip Perilaku Organisasi*. (5th Ed.). Jakarta: Erlangga, 2002.
- [10] J.P. Meyer and N.J. Allen, "A three-component conceptualization of organizational commitment," *Human resource management review*, vol. 1, no. 1, pp. 61-89, 1991.
- [11] F. Luthans, *Organizational Behavior*. McGraw-Hills International Edition, 2005.
- [12] E.E. Lawler, "Strategies for Improving the Quality of Work Life," *American Psychologist*, vol. 37, pp. 486-693, 1982.
- [13] L.S. Beh and R.C. Rose, "Linking QWL and Job Performance : Implications for Organizations," *Performance Improvement*, Proquest, vol. 46, no. 6, p. 30, 2007.
- [14] J.M. Ivancevich, R. Kanopaske, and M.T. Matterson, *Organizational Behavior and Management*. Seven Edition. McGraw-Hill. Gina Gania (penerjemah). *Perilaku dan Manajemen*. Jilid 1, edisi 7. Jakarta: Erlangga, 2007.
- [15] M. Hassan, Ul, R. Kibria, and K. Nawas, "The Effects of Personal Characteristics on Organizational Commitment Through Job Satisfaction: An Empirical Study of Pakistan's Financial Sector," *Middle-East Journal of Scientific Research*, vol. 16, no. 7, pp. 942-951, 2013.
- [16] M.T. Tsai, C.L. Tsai, and Y.C. Wang, "A Study on The Relationship Between Leadership Style, Emotionall, Self-Efficacy and Oganizational Commitment : A Case Study of The Banking Industry in Taiwan," *African Journal of Business Management*, vol. 5, no. 13, pp. 5319-5329, 2011.
- [17] R.L. Mathis and J.H. Jackson, *Human Resource Management*. Edisi 12. Cengage Learning, 2007.
- [18] N. Hasanmoradi, "Relationship between The Quality of Work Life and Job Satisfaction among The Teachers of Public and Non -Public School in Tehran," *International Journal of Arts & Sciences*, vol. 4, no. 25, pp. 279-285, 2011.
- [19] R.M. Steers, "Antecedent and Outcomes of Organizational Commitment," *Administrative Science Quarterly*, vol. 22, no. 5, pp. 46-56, 1977.
- [20] M.R.F. Parvar, S.M. Allameh, and R. Ansari, "Effect of Quality of Work Life on Organizational Commitment by SEM. (Case Study: OICO Company)," *International Journal of Academic Research in Business and Social Sciences*, vol. 3, no. 10, pp. 135 - 144, 2013.
- [21] Neeta, "Organizational Citizenship Behavior of Faculties in Private Engineering Colleges W.E.F Lucknow," *IJMBS*, vol. 3, no. 1, pp. 116-123, 2013.
- [22] K.K. Sofiah, P. Padmashantini, and K. Gengeswari, "A Study on Organizational Citizenship Behavior in Banking Industry," *International Journal for Innovation Education and Research*, vol. 2, no. 7, pp. 73 - 82, 2014.