



The Relationship Between Quality of Work Life and Job Satisfaction Among Nurses in a Teaching Hospital in 2020

Maryam Dargahpour¹, Parisa Jalali², Mohsen Mohammadi^{3*}

¹ Department of Health Management and Economics, School of Public Health, Shahid Sadoughi University of Medical Sciences, Yazd, Iran

² Department of Health, Bam University of Medical Sciences, Bam, Kerman

³ Department of Epidemiology and Biostatistics, School of Public Health, Shahid Sadoughi University of Medical Sciences, Yazd, Iran

ARTICLE INFO

Article History:

Received: 2 Jun 2022

Revised: 27 Jul 2022

Accepted: 21 Sep 2022

*Corresponding Author:

Mohsen Mohammadi

Department of Epidemiology and Biostatistics, School of Public Health, Shahid Sadoughi University of Medical Sciences, Yazd, Iran.

Email:

mohsen2019@ymail.com

Tel:

+98-9187459987

ABSTRACT

Background: Job satisfaction and the quality of work life are measured as indicators of organizational development in many studies. Work's nurses affected from this two variables. This research aims to study the relationship between quality of work life and job satisfaction among nurses.

Methods: This was a descriptive analytic study. Research population included 538 nurses in Golestan hospital in Ahvaz in 2020. 111 nurses were selected through simple random sampling. Data collection instruments were Walton quality of work life and Whiskey and Chrome job satisfaction questionnaires. The reliability and validity were measured. Data were analyzed through descriptive statistics, Pearson correlation analysis, independent t-test and ANOVA in SPSS₂₀.

Results: In this study, 32.40 % of the participants were male and 67.60 % were female. Quality of work life and job satisfaction showed a significant and moderate correlation ($r = 0.36$, $P\text{-value} < 0.001$). Results indicated a significant correlation between job satisfaction and components of quality of work life ($P\text{-value} < 0.05$), except for the general atmosphere of working life ($P\text{-value} > 0.05$). There was no significant correlation between the study's variables and demographic characteristics.

Conclusion: There is a significant relation between the quality of work life and job satisfaction. Job satisfaction among nurses in Ahvaz hospitals can be increased by implementing programs to improve the quality of work life.

Key words: Quality of work life, Job satisfaction, Nurses, Hospital, Cross-sectional study.

Citation

This paper should be cited as: Dargahpour M, Jalali P, Mohammadi M. The Relationship Between Quality of Work Life and Job Satisfaction Among Nurses in a Teaching Hospital in 2020. Evidence Based Health Policy, Management & Economics. 2022; 6(3): 188-96.



Introduction

These days concept of quality of work life has developed, it has been the subject of much scientific research in Western countries. Although managers of organizations have recently paid attention to work life, it has dramatic effects on improving employees' job satisfaction, as well as reducing their absenteeism and delay (1).

This term encompasses a range of theoretical concepts with the aim of addressing organizational problems (2). Until the mid-1970s, the focus was solely on work plan and its improvement (3). The life quality of employees has become an important issue in many organizations, including health organizations since the 1970s (4).

Quality of work life is one of the techniques of organizational growth that tries to provide the three factors of motivation and satisfaction, acceptance of responsibility and a sense of commitment to work (5). If a member of the organization really feels that his/her quality of work life has improved, he/she finds more energy to do his/her job. This, in turn, motivates him/her to work better and results in a better quality of work life (6).

Generally, the quality of work life is the mental image and employees' perception of organizations regarding the physical and psychological acceptance of the working atmosphere (7, 8).

Assessing the quality of work life expresses that the organizational feeling of the individual is very important. This is because it can affect the quality of nursing care (9). Job satisfaction is a multidimensional structure for which theorists have offered several definitions. They include the employee's pleasant or unpleasant view of work, a positive emotional attitude towards the job, and the perceived feelings and emotions resulting from work experiences (10).

Western societies believe that work satisfaction and quality are highly correlated. This phenomenon can also be true in healthcare.

Job satisfaction reveals personal feelings about job. In other words, the tendency, desire, interest, talent and readiness to respond to the job indicate a quasi-working environment. This cannot be called job satisfaction (11). The importance of job

satisfaction is that it reduces pressure regarding mental health of employees and provides the necessary basis for their physical, mental and social health. In addition, promoting job satisfaction increases employees' commitment to the organization reduces the likelihood of absenteeism and leaving the job (12,13).

Based on the research, the worst elements of any organization are people who not only do not have job satisfaction but also their compulsion has forced them to stay in the organization (14)

Because of the importance of their responsibilities in the field of prevention, care and treatment, health care organizations have an important position in society. Accordingly, job dissatisfaction of medical staff will reduce the quality of services provided. This will cause patients' dissatisfaction and in attention to comments and requests. (15).

Among healthcare providers, nurses are very important because of their special role. Nurses' job dissatisfaction causes a vicious cycle in the care system as it may lead to the leaving of the job and lack of the nursing staff. This will increase workload, unpleasant work shifts, etc. (16). In research, job satisfaction of nurses has been the most important factor in keeping them in their job (17).

Every year, a lot of hospital employees leave their works because of job discontent. Furthermore to wasting money regarding training costs, it leads to losing techniques, proficiency and human resources (18).

The concepts of behavior and life quality are significantly different in different societies and even in ethnic groups. Therefore, finding ways to understand the interrelationship between these two phenomena in any society in order to motivate and choose the appropriate management method is very important (19).

People cannot always rely on the direct relationship between satisfaction and performance, even if this correlation is accepted. Recognizing the factors that create satisfaction for different people with different cultures, beliefs, and tastes is



a very difficult and complex task (20).

In recent decades, in addition to satisfaction, another term has emerged, named the quality of work life. It describes a deeper concept of satisfaction. It answers the question, what is the relationship between quality of work life and job satisfaction?(21, 22). Psychologists and management scientists have considered quality of working life a structure which is related to the employees' well-being. This is different from job satisfaction (23, 24.).

Considering the importance of quality of work life and job satisfaction and the lack of such research in the nursing community of Ahvaz city, the goal of this research is to appraise the relationship between quality of work life and job satisfaction among nurses.

Materials and Methods

This study was a descriptive-analytical study. This research population was nurses working in Golestan hospital in Ahvaz, in 2020. One third of the nurses in Ahvaz's teaching hospitals were working in Golestan hospital. It is a general center with 462 beds.

According to the statistics, there were 538 nurses in total. Our sample size was 119.80 nurses did not answer questionnaires. Simple random sampling method was used. First, the ratio of nurses working in each ward of the hospital to the total number of nurses was determined. Then, some nurses from each ward were selected for the sample.

Data collection tool was a questionnaire.

This tool consisted of three parts: Demographic characteristics: Measuring the variables of age, sex, wedded status, work experience, studies and organizational position. The quality of work life questionnaire had 32 questions and the answer to all questions was based on a five-point Likert scale. Work life quality questionnaire was derived from 8 components of Walton model. It included fair and enough salary, secure and in good shape job atmosphere, contributing chances for advancement, constant safety regarding dimension of legalism in the structure, dimension of job and

living environment, integration and societal attachment in the organization and advance of stuff competence. In the Work Life Quality and Job Satisfaction questionnaire, questions were scored on a 5-point Likert scale (very low, low, and somewhat, high and very high) with the score of 1 to 5, respectively. The sum of scores for the quality of work life for each person is 135-27. A score of less than 45 shows a poor quality of job life, among score of 46-90 indicates an average quality of work life, and a score of more than 90 indicates a high quality of work life.

Whiskey and Chrome job satisfaction questionnaire examines the 5 components of the nature of work, supervisor, co-worker, promotion and paymen (25). This questionnaire has 39 questions. The reliability of this instrument has been obtained by Cronbach's alpha method as 0.89. Moreover, the validity of this questionnaire has been proven (26, 27).

The scores's sum for each person's job satisfaction is 195-39. A score below 65 is considered low job satisfaction, 130-66, average, and above 130, it is considered high job satisfaction. Reliability of this tool with Cronbach's alpha method was 0.77 (28).

After collecting and extracting data, authors used mean and standard deviation for descriptive analysis. Data were analyzed through descriptive statistics, Pearson correlation analysis, independent t-test and ANOVA in SPSS20.

This research with ethics code of IR.Ajums.REC.1393.391 from Ahvaz University of Medical Sciences has been approved. All stages of data collection have been done with the permission and informed consent of the participants.

Results

Completed questionnaires were 111 with an answer rate of 0.93. More than 50 % of the participants were in the age group of 20-30. The number of women was almost twice the men. More than half of the nurses in this hospital had less than 5 years of work experience. Furthermore, 95 % of nurses had a bachelor's grade. The percentage of



single and married nurses was almost equal (53.10% single, 46.90% married (Table 1).

The mean of quality of work life was 56.65 that this score showed a moderate level in Golestan hospital. Nurses' job satisfaction was also average with a mean score of 68.11 (Table 2).

Among the components of quality of work life, the development of staff capabilities with a score of 10.46 had the highest score. This score indicates the moderate status of this component in Golestan hospital. The components of equitably and enough salary and secure and in good shape job atmosphere had a poor status. Other elements of

the quality of work life were at an average level (Table 3).

In this study, it was a significant relationship between quality of work life and job satisfaction between Golestan hospital nurses ($P\text{-value} > 0.001$). No significant relationship was observed between demographic characteristics and quality of work life and job satisfaction. The present study demonstrated that there was a positive and significant relationship between the components of quality of work life and job satisfaction.

$P\text{-value} < 0.05$. (Table 4)

Table 1. Baseline characteristics of the participants (N= 111)

Variable name	Categories	Frequency	Percentage
Age	20-30	65	58.50
	31-40	35	31.50
	> 40	11	10.00
Sex	Male	36	32.40
	Female	75	67.60
Marital status	Single	59	53.10
	Married	52	46.90
Education level	High school diploma	9	8.10
	Associate degree	4	3.60
	Bachelor's degree	95	85.50
	Master's degree	3	2.80
Work experience	< 5	61	54.90
	5-10	25	22.50
	11-15	14	12.60
	> 15	11	10.00
Work position	Nurse	95	86.40
	Supervisor	16	13.60

Table 2. Quality of work life and job satisfaction score in nurses

Variable name	Mean	Standard deviation
Quality of life	56.65	7/84
Fair and adequate payment	6.90	2.14 Low
Safe and hygienic work environment	6.54	2.10 Low
Providing opportunities for growth and security	7.08	2.25 Average
Rule of law	9.40	2.67 Average
The general atmosphere of work life	7.35	2.03 Average
Social integration and cohesion	7.28	1.91 Average
Development of human capabilities	101.21	2.76 Average

**Table 4.** Correlation of quality of work life components with job satisfaction in nurses

elements of Quality of Work Life	Correlation Coefficient	P*	Status
Equitably and enough salary	0.25	0.009	Low
Secure and hygienic job atmosphere	0.25	0.007	Low
Contributing chances for advancement and constant safety	0.31	0.001	Average
Rule of law	0.35	0.001	Medium
The general atmosphere of work life	0.29	0.002	Low
Social integration and cohesion	0.27	0.004	Low
Development of human capabilities	0.24	0.010	Low

*P-value \leq 0.001 is completely significant.

Discussion

Results indicated a significant correlation between job satisfaction and elements of quality of work life, except for the general atmosphere of working life. There was no significant correlation between study variables and demographic characteristics.

In this study, the authors estimated the nurses' quality of work life to be moderate, which was aligned with the results of the portal research (29). Work life is based on a person's feelings about different things in the workplace, as well as the current experience in work and personal areas of life. From this point of view, the findings of this research regarding the quality of work life, is very important. Therefore, managers must design and properly implement a system for the quality of work in hospitals. Hospital managers should transform the quality of nurses' work life as a type of organizational culture based on which nurses feel ownership, self-governance, responsibility and self-esteem. This is because it will ultimately increase the efficiency of the organization and promote job satisfaction (29).

There was a positive and significant relationship between quality of work life and job satisfaction. The results were consistent with the findings of Hu (29), Fury (30) and Kruger et al. (31,32,33,34).

There was a positive and significant relationship between the components of quality of work life and job satisfaction. In the same direction, in Tabassum's study (35), there was a significant relationship between all elements of quality of work life and job satisfaction. There was also a significant relationship between the components of

quality of life and job satisfaction in the research by Osman and Chekling (36). Accordingly, it can be said that if organizations improve all sides of the quality of work life, their employees would experience justice, progress, success, security, growth and promotion to show their abilities and creativity. In general, they feel satisfied with their job, and there will be an increase in their performance, growth and dynamism.

Development of human capabilities had the highest score among the components of quality of work life, which was at the average level in Golestan hospital. There was a significant positive and weak relationship between human resource development and job satisfaction (the lowest correlation coefficient than other components), which was consistent with the findings of Tavakoli et al. (37) in Khorasan Gas Company. This indicates that the average desirability of this component is in two organizations. Due to the positive relationship between this component and job satisfaction, the authors recommend that the nurses' scope of work be designed in such a way that they develop a wide range of different skills. Therefore, developing resources lead to developed skills of nurses.

Social integration and cohesion among nurses were at an average level. The findings as well as revealed that there was a positive and direct relationship between social integration, cohesion and job satisfaction. This was consistent with the results of Hamid and Bakhshandeh's study (38). Non-prejudice against race and gender, creating a sense of sociality in the organization, freedom of individuals to express their ideas and feelings in



the form of trade unions, and creating the ground for intellectual and practical participation of employees regarding rules are things that are suggested to create organizational integrity.

Nurses assessed the component of legalism in the organization as weak in the hospital. Also, there was a direct and significant relationship between legalism and job satisfaction, which is aligned to the findings of the research by Saedi et al. (39). Therefore, the researchers suggest avoiding discrimination between employees. The law should be the criterion for protecting the rights of the individual, and a unit for filing complaints and lawsuits should be established.

Social dependence and work life in terms of score showed an average level of dependence among respondents. The findings also showed a positive and direct relationship between social dependence and work life, and job satisfaction. This was consistent with the findings of Hamid and Bakhshandeh (38). Therefore, the work should be designed and implemented for employees in such a way that their need for self-esteem is satisfied. The organization should increase self-esteem, and consequently, performance by creating a healthy competitive atmosphere (appropriate quality ...).

Respondents estimated a moderate level for work life atmosphere. A significant relationship defection between the elements of the general atmosphere of work life and job satisfaction was inconsistent with the research by Tavakoli et al. (37), in which these components had a significant relationship. For improving the situation of this component, and consequently, the quality of work life, the employees' work should be designed in such a way that it does not prevent them from performing their family duties and responsibilities and social roles.

The component of contributing chances for advancement and constant safety had a moderate status among the nurses. It had a positive and significant relationship with job satisfaction, which was according to the results of Gypsy and Theodorax research (34). Increasing the quality of work life and the performance of Golestan hospital nurses provide the potential for capacity building

by creating opportunities to reveal the skills learned and ensure sustainable job security and income security.

Nurses also assessed the fair and adequate payment component as weak. The existence of a positive and significant relationship between payment and job satisfaction was consistent with the results of Lilidahi and Single's research. The researchers suggest increasing the quality of work life in the eyes of the staff by paying salaries and wages on time and according to the individual's standards. In addition, it should be according to the theory of wage equality in that organization and similar organizations to motivate employees.

The component of safe and hygienic work environment had the lowest score, which the nurses estimated as weak. The existence of a positive and significant relationship between safe and healthy job environment and job satisfaction was consistent with the results of Guderzund Chegini's research (40). This paper shows the similarity of this component between the nurses of Golestan hospital in Ahvaz and hospitals in Rasht. The authors suggest creating a safe and healthy environment. It includes moderate levels of temperature, humidity, ventilation, light and sound in for physical working conditions. So, a safe and healthy work environment will be created, and nurses can provide services with ease and in full health and satisfaction.

Moreover, the lack of significant relationship between gender, educational qualification and marriage, and the quality of work life is similar to Dargahi's study (29).

Recognizing the factors related to the quality of work life for employees is of great significance. Considering the positive and meaningful relationship they have with job satisfaction, authorities can improve job satisfaction by changing these components towards the growth of the organization.

Limitation

Non-cooperation of nurses in completing the questionnaires, which caused frequent visits of researchers to Golestan hospital and the



distribution of questionnaires through intern students in this hospital, was one of the limitations of this project.

Suggestions

In the future, the authors suggest carrying out research on the relationship between the formation of teams and social groups with job satisfaction, the relationship between equal pay and job satisfaction, the relationship between nurses' job independence and their job satisfaction, the relationship between discrimination in the job atmosphere and job satisfaction, the relationship between providing conditions for continued education while working and experiencing job satisfaction, the relationship between stable job security and job satisfaction. A comparative research of public and private hospitals in terms of having a secure and in a good shape job atmosphere should also be conducted.

Conclusion

There was a positive and significant relationship between quality of work life and job satisfaction. By implementing programs to improve the quality of work life, it is possible to provide the basis for increasing job satisfaction among nurses in Ahvaz hospitals.

Acknowledgments

The authors would like to thank all the people who contributed to the data collection process and the respected reviewers for improving the quality of the study.

Conflict of interests

The authors declared no conflict of interests.

Authors' Contributions

Mohammadi M and Dargahpour M designed research; Mohammadi M and Jalali P conducted research; Dargahpour M and Mohammadi M analyzed data; and Jalali P and Dargahpour M wrote the paper. Jalali P and Dargahpour M had primary responsibility for final content. All authors read and approved the final manuscript.

Funding

Not applicable.

References

1. Dolan S L, Garcia S, Tzafrir Sh, Cabezas C. Predictors of quality of work and poor health among primary health-care personnel in Catalonia. *International Journal of Health Care Quality Assurance*. 2008; 21(2): 203-18. doi: 10.1108/09526860810859058.
2. Martel JP, Dupuis G. Quality of work life: Theoretical and methodological problems and presentation of new model and measuring instrument. *Soc Indic Res*. 2006; 77(2): 333-68. doi: 10.1007/s11205-004-5368-4.
3. Koonmee K, Singhapakdi A, Virakul B, Lee DJ. Ethic institutionalization, quality of work life , and employee job related. *J Business Res*. 2010; 63(1): 20-6.
4. Khaghanizadeh M, Ebadi A, Cirati nair M, Rahmani M. Relationship between job stress and quality of work life of nurses in selected hospitals of the armed forces. *J Mil Med*. 2008; 10(3): 175-84. [In Persian]
5. Bazaz Jazayeri SA, Pardakhtchi MH. Creating model of assessing quality of life of staffs in organization. *Management Science Journal*. 2007; 2(5): 123-51. [In Persian]
6. Sirgy MJ, Efraty D, Siegel Ph, Lee DJ. A new measure of Quality of Work Life (QWL) based on need satisfaction and spillover theories. *Social Indicators Research*. 2001; 55(3): 241-302. doi: 10.1023/A:1010986923468.
7. Rahimi H, Rajaeipour S, Salimi GH. A study on the quality of work life of faculty members of Isfahan public universities. *Research in Curriculum Planning*. 2007; 1: 41-54. [In Persian]
8. Johnsrud LK. Measuring the quality faculty and administrative work life: Implication for college and university campuses. *Research in Higher Education*. 2003; 43(3): 380-95. doi: 10.1023/A:1014845218989.
9. Vanaki Z, Vagharseyyedin SA. Organizational commitment, work environment conditions, and life satisfaction among Iranian nurses. *Nurs Health Sci*. 2009; 11(4): 404-9. doi: 10.1111/j.1442-2018.2009.00473.x. [In Persian]
10. Liu LF. Job satisfaction of certified nursing



- assistants and its influence on the general satisfaction of nursing homeresidents: An exploratory study in southern Taiwan. *Geriatr Nurs.* 2007; 28(1): 54-62. doi: 10.1016/j.gerinurse.2006.08.017.
11. Cohen SG, Chang L, Ledford GE. A hierarchical construct of self management leadership and its relationship to quality of work life and perceived work group effectiveness. *Personnel Psychology.* 2006; 50(2): 275-308. doi: 10.1111/j.1744-6570.1997.tb00909.x.
 12. Xu Y, Li ZX, Liu X. Behavior theory and skill of outpatient department nursing administration. *Zhonghua Hu Li Za Zhi.* 1996; 31(3): 131-3.
 13. Cain JM, Schulkin J, Parisi V, Power ML, Holzman GB, Williams S. Effects of perceptions and mentorship on pursuing a career in academic medicine in obstetrics and gynecology. *Acad Med.* 2001; 76(6): 628-34. doi: 10.1097/00001888-200106000-00015.
 14. Hasanzade H, Mirsepasi N, Faghihi A, Najafbagy R. Designing a framework for entrepreneur-oriented human resource management in the public sector. *Public Administration Perspaective.* 2019; 10(2): 159-85. doi: 10.52547/JPAP.2019.96510. [In Persian]
 15. Schiestel Ch. Job satisfaction among Arizona adult nurse practitioners. *J Am Acad Nurse Pract.* 2007; 19(1): 30-4. doi: 10.1111/j.1745-7599.2006.00187.x.
 16. Cortese CG. Job satisfaction of Italian nurses; *An. Nursing. Management.* 2007; 15(3): 303-12. doi: 10.1111/j.1365-2834.2007.00694.x.
 17. Pourreza A, Ahmadi B, Sadeghifar J, Mohammadi M, Veysi M. Assessing the actual cost of femoral and forearm fracture surgery using activity-based costing approach. *Journal of Hospital.* 2019; 17(4): 81-90. [In Persian]
 18. Mogharab M, Riyasi HR, Hedayati H, Mogharab M. Work life quality of nurses working in educational hospitals affiliated to Birjand University of Medical Sciences, 2012. *Modern Care, Scientific Quarterly of Birjand Nursing and Midwifery Faculty.* 2013; 10(1): 84-90. [In Persian]
 19. Adams R, Bessant J, Phelps R. Innovation management measurement: A review. *International Journal of Management Reviews .* 2006; 8(1): 21-47. doi: 10.1111/j.1468-2370.2006.00119.x.
 20. Aiken LH, Smith HT, Lake ET. Lower medicare mortality among a set of hospitals known for good nursing care. *Medical Care.* 1994; 32(8): 771-87. doi: 10.1097/00005650-199408000-00002.
 21. Bloom N, Kretschmer T, Van Reenan J. *Work-life balance, management practices and productivity*, University of Chicago Press. 2009.
 22. Cimete G, Gencalp NS, Keskin G. Quality of life and job satisfaction of nurses. *Journal of Nursing Care Quality.* 2003; 18(2): 151-8. doi: 10.1097/00001786-200304000-00009.
 23. Hirkas K. Clinical supervision, burnout, and job satisfaction among mental health and psychiatric nurses in Finland. *Issues Ment Health Nurs.* 2005; 26(5): 531-56. doi: 10.1080/01612840590931975.
 24. Zakerian SA, Teymuri GhH, Ahmadnezhad I, Abbassinia M, Rahmani A, Asghari M. Investigating the dimensions of quality of work life and its relation to job satisfaction in an automotive industry. *Journal of Ergonomics.* 2014; 1(3): 36-46. [In Persian]
 25. Torkzadeh J. Ahmadi Pour Shirazi N. Mezginezhad S. The correlations of the value and cultural orientations with the satisfaction of nurses with the quality of work life in the hospitals affiliated to Shiraz University of Medical Sciences. *Journal of Clinical Nursing and Midwifery.* 2020; 8(4): 560-71. [In Persian]
 26. Purgaz A, Nastiezaie N, Hezare Mogadam M. Job satisfaction of nurses working in hospitals in Zahedan. *Nursing And Midwifery Journal.* 2010; 8(3). [In Persian]
 27. Dargahi H, Gharib M, Goodarzi M. Quality of work life in nursing employees of Tehran University Of Medical Sciences hospitals. *Hayat.* 2007; 13(2): 13-21. [In Persian]
 28. Hua J. A study of relationship on bureau of investigation officials, quality of work life, work pressure and job satisfaction. *Public Affairs*



- Management. 2006.
29. Fourie AS. Predicting satisfaction with quality of work life 2004. Available from URL: <https://uir.unisa.ac.za/handle/10500/1004>. Last access: 20 December, 2021.
30. Lillydahl JH, Singell LD. Job satisfaction, salaries and unions: The determination of university faculty compensation. *Economics of Education Review*. 1993; 12(3): 233-43.
31. Kloep M, Tarifa F. Working conditions, work style and job satisfaction among Albanian teachers. *Journal of International Review of Education*. 2005; 40(16): 327-41. doi: 10.1007/BF01103691.
32. Koustelios A, Kouli O, Theodorakis N. Job security and job satisfaction among Greek fitness instructors. 2003; 97(1): 192-4. doi: 10.2466/pms.2003.97.1.192.
33. Tabassum A. Interrelations between quality of work life dimensions and faculty member job satisfaction in the private universities of Bangladesh. *European Journal of Business and Management*. 2012; 4(2): 78-89.
34. Othman A, Chek Lieng M. Relationship between Quality of Work Life (Qwl) and job satisfaction: malacca. *International Conference*. 2009; 51-55
35. Tavakoli A, Lagzian M, Davoudnia A, Alizadeh Zoeram A. Investigating the relationship between the Walton,s quality work life factors and job satisfaction. *Transformation Management Journal*. 2013; 5(9): 89-103. doi: 10.22067/pmt.v5i9.28872. [In Persian]
36. Asgari MH, Nojbaee SS, Rahnama O. The relationship between quality of work life and performance of Tonekabon guidance schools teachers. *Journal of Basic and Applied Scientific Research*. 2012; 2(3): 2569-75. [In Persian]
37. Saedi S, Khalatbari J, Murray Najafabadi N. Relationship between quality of work life and organizational health with job satisfaction. *Journal of Modern Industrial/Organization Psycholo*. 2010; 1(4): 55-64. [In Persian]
38. Goudarzvand Chegini M, Mirdoozandeh SG. Relationship between quality of work -life and job satisfaction of the employees in public hospitals in Rasht. *Zahedan Medical Science Journal*. 2012; 14(2): 108-11. [In Persian]
39. Raeissi P, Rajabi MR, Ahmadizadeh E, Rajabkhah K, Kakemam E. Quality of work life and factors associated with it among nurses in public hospitals, Iran. *Journal of the Egyptian Public Health Association*. 2019; 94: 25. doi: 10.1186/s42506-019-0029-2.