PREDOMINANT WORKAHOLIC CHARACTERISTICS INFLUENCING THE MARRIED WOMEN NURSES IN THEIR WORK PERFORMANCE – AN ANALYTICAL STUDY

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Abstract

Workaholism is characterized by the behavioral pattern of over-investment of time and energy in the field of work. Workaholics work so hard out of an inner longing, need, or drive, and not because of external factors such as financial rewards, career viewpoint, organizational culture, or poor marriage. Workaholic nurses had higher risks for impaired awakening, destitute sleep, and workplace sleepiness which affect the well being. So the hospitals have to focus on the important Workaholic characteristics and the study is conducted among the 500 nurses working in private hospitals to know the opinion regarding Workaholic characteristics. Using 14 statements. The tabulated data was analyzed using factor analysis to determine the predominant characteristics influencing the variables selected and four aspects were extracted and termedas Work priority and Salary Oriented, Anytime Work-Oriented Thinking, Responsible Task oriented and the last factor is Willingness to work overtime. In this aspect, this article focuses on the primary Workaholic characteristics that hospitals should concentrate in today's Pandemic situation.

Key words – Workaholics, Subjective well being, Financial rewards, Exhaustion, Burnout

I. INTRODUCTION

Workaholics work harder than their job prescription requirements and they put much more effort into their jobs than is expected by the people with whom or for whom they work and in doing so they neglect their life outside their job. Workaholics, compared to others, is viewed as working extensive hours, usually at the expense of personal activities and social endeavors, both of which are necessary for optimal functioning. Those people who indulge themselves in work day and night are often defined as "workaholics". It is essential to empower nurses with the right education and skills in handling crisis so that they can confidently deal with challenges. As nurses are committed to serve the society and the biggest challenge faced today is to cure and care for the people affected with COVID 19.The successive decrease in the number of professionally active nurses is affected by such issues as lack of employment in the profession despite obtained qualifications, financially-motivated emigration, and leaving the profession Workaholic is defined by some scholars as the individual who invests a great deal of constant time and energy in work activities as a result of their internal motivation. Workaholic nurses tend to be achievement-oriented, proactive and have strong self-improvement requirements. Therefore, for workaholics who are eager to show themselves or prefer to embrace challenges that the work field is undoubtedly a perfect arena.

II.   LITERATURE REVIEW

Intention to Stay

The concept of intention to stay refers to the probability that an employee plans to remain with the organization (Gary, 2012). The desire to keep working reflects the level of employee commitment to the company and the willingness to keep working (Hewitt, 2004). According to Castle et al (2007) in Siahan (2014) the desire of employees to stay in the company is influenced by personal characteristics, characteristics related to roles in the company, characteristics of company facilities, opportunities for employee turnover, and job characteristics. According to Konovsky and Cropanzano, 1991 (in Mahdani and Haekal, 2016), it has three adjusted indicator items, namely: 1) Intention to remain in the organization indefinitely, 2) Intention to quit the organization, and 3) Intention to get a new job.

Tineke Hagen, Stefan Bogaerts & Elien De Caluwé(2022) stated that the aim of this two-wave study is to investigate whether burnout, work engagement and workaholism can be empirically distinguished in one model and whether this model shows structural stability over a period of 2 years (i.e. whether the distinguish ability between the constructs holds across time). The study was conducted among 118 judges in the Netherlands who completed questionnaires measuring burnout, work engagement and workaholism. The results showed that these are relatively distinguishable constructs, despite a considerable overlap of professional efficacy loading on work engagement (instead of burnout; as hypothesized), absorption loading on workaholism (in addition to work engagement; as hypothesized) and exhaustion loading on workaholism (in addition to burnout), which represents a new finding. Possible outcomes and their practical implications for the judiciary are formulated on the basis of this model.

DianaMalinowskaand Aleksandra Tokarz (2022) conducted two studies to examine the association of two workaholism components (drive to work and work enjoyment) with life and work values. Study 1 examined whether life values that are lower on the ideal value hierarchy predict the drive to work; and whether life values that are higher on the hierarchy predict work enjoyment. Study 2 tested the hypotheses that extrinsic work values predict the drive to work, whereas intrinsic work values predict work enjoyment. The results of study 1 showed that moral values, which represent higher order life values, were negatively correlated with the drive to work and positively correlated with work enjoyment. Work enjoyment was also negatively associated with vital values, which have a low position on the ideal life values hierarchy. Hypotheses about the relationships between the two workaholism components and life and work values were not fully confirmed.

Heba Khodary Allam, Mai Salah Helmy(2021) stated that the purpose of this research was to compare the prevalence of workaholics among the academic staff of practical and theoretical Faculties in Egyptian universities using the Dutch workaholism Scale (DUWAS) and to determine associated sleep problems. Also, it studied the added impact of E-learning on the prevalence of workaholism frequency during the COVID-19 pandemic. A cross-sectional study was conducted among 336 participants. Work addiction was assessed using DUWAS (17 items) as well as questionnaires on personal, occupational characteristics, and sleep problems. DUWAS scale was repeated after six months during COVID 19 pandemic to investigate the impact of E-learning on the workaholic behavior of the studied groups. The study revealed that the prevalence of workaholism was 33%; 32.8% and 33.7% were listed for the faculties of Medicine and Arts, respectively. After the COVID-19 pandemic, workaholic frequency was significantly increased to be 46.4%. Adjusted logistic regression analysis showed that workaholism had negatively impacted sleep in terms of difficulty initiating sleep, difficulty maintaining sleep, and insufficient sleep. This study reported a high prevalence of workaholism in university staff in Egypt especially after COVID -9 pandemic and using E-learning.

ModestaMorkevičiūtė, AuksėEndriulaitienė (2021) is to systematically review the scientific literature on the relationship between organizational factors and employ-ees'workaholism. The results of the studies examine the link between organizational aspects and employees' workaholism which are scattered and far from consistent. Therefore, the principal purpose of the current paper is to systematically review the scientific literature on the relationship between organizational factors and employees' workaholism. Job demands were confirmed as the most important organizational factor predicting the increased levels of workaholism. Therefore, compulsive behaviors of workaholics could be offset by adjusting performance standards and creating the organizational environment which prevents the employees from pushing themselves in vain.

III. STATEMENT OF PROBLEM

Work drive refers to the actions caused by internal pressure, which is to fulfill job obligations or complete important work tasks.It seems that workaholicsmight be working harder than others but do not receive more rewards for their efforts. A host of employees give up their leisure time and then invest it in work, though some of them are required to overwork involuntarily, majority of them choose to do so initially including the nurses.Nurses are particularly at risk of being affected by professional burnout because of the unique patient – caregiver relationship, which requires strong emotional involvement. The studies shows that nurses with the highest scores for workaholism tended to work excessively and compulsively, and reported that they have trouble in sleeping, feeling tired at work, and having difficulties to wake up, as well as showing signs of fatigue in the morning. In this aspect, the hospitals can also focus on the major workaholic characteristics followed by the nurses so that the steps can be taken to balance the work and life.

IV. OBJECTIVES

1. To examine the participants' socioeconomic and demographic profiles.
2. To identify the major workaholic characteristics influencing the nurses.

V. RESEARCH METHODOLOGY

Sources of data and Sampling

The information for the research were collected from 500 married women nurses of various private hospitals by employing a Stratified Random Sampling method in Erode District. The study was conducted with the help of a well-structured questionnaire based on their age, education, gender, occupation, marital status, income and other variables. The secondary data was gathered from Internet web resources and from top journals.

Tools for Analysis

The goal of factor analysis is to find the underlying variables that describe the outline of correlations within a range of variables. It starts with a large number of variables and tries to minimize the correlations between the variables by focusing on a small number of factors. It then looks for connections where variables are maximally and minimally correlated with one another, and accordingly, groups the factors. At the end of the procedure, a pattern of relationship appears and the various factors are extracted by grouping of related variables and the extracted factors are named relatively. In this study, Principal Component Factor analysis is applied with Varimax Rotation

VI. RESULTS AND DISCUSSION

The major workaholic characteristics considered by the nurses in their work performance was studied by measuring the concept through 14 Statements. The opinion of the respondents on these aspects were collected through a five point scaling and finally, to determine the results,

factor analysis was used, and comprehensive analysis and discussion were conducted at all stages.

Table 1
Workaholic characteristics

S. No	Workaholic characteristics
1	I work for more than 40 hours in a week
2	I am not bothered about the work-life balance as I much attached to work
3	I measure my success with the salary and work according to that
4	I constantly wait for promotion and salary rise as it increases the quality of life
5	I constantly think about the work during the off hours or week ends
6	I am willing to take up the tasks even if I am over burdened with lot of work
7	I am interested in talking about the work all the time
8	I work even in lunch and break times to complete the work
9	I am always work oriented and don't have any hobbies
10	I not satisfied with the work and expecting more perfection at sometimes
11	I am worried always that if I don't work hard I will lose my job
12	I am excited to work for the hospitals than my family
13	I take the complete responsibility for the outcome of my work performance
14	I feel stressed and impatient with my colleagues who are not giving priority in their work

Table No 1 shows the major variables of Workaholic characteristics and the opinion of the bank employees regarding these variables is being collected using scaling technique. Factor analysis is frequently preferred by social scientists to guarantee that variables have been used to measure a certain concept by grouping variables. In this research, the Kaiser-Meyer-Olkin (KMO) test is used to measure the sampling fitness of data for factor analysis.

Table 2
KMO andBartlett'sTest

Kaiser-Meyer-Olkin Measure of Sampling Adequacy		.656
Bartlett'sTest of Sphericity	Approx.Chi-Square	1.534E3
	D.F	91
	Sig.	.000

Table 2 presents the data from Bartlett's Sphericity test and Kaiser Meyer Olkin sample adequacy metrics, which were used to assess the factor model's viability. It also indicates the large value of KMO statistics (0.656), representing that factor analysis could be a good tool for examining the correlation matrix.

Table3
Total Variance Explained

Component	Initial Eigen Values			Extraction Sums of Squared Loadings			Rotation Sums of Squared Loadings		
	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %
1	5.761	41.153	41.153	5.761	41.153	41.153	3.324	3.324	23.745
2	2.364	16.889	58.042	2.364	16.889	58.042	3.189	3.189	46.526
3	1.703	12.164	70.206	1.703	12.164	70.206	2.986	2.986	67.853
4	1.257	8.979	79.184	1.257	8.979	79.184	1.586	1.586	79.184
5	.962	6.873	86.058						
6	.570	4.070	90.128						
7	.414	2.959	93.087						
8	.353	2.525	95.611						
9	.262	1.869	97.481						
10	.190	1.358	98.839						
11	.107	.766	99.605						
12	.022	.160	99.766						

| 13 | .018 | .130 | 99.895 | | | | | | |
| 14 | .015 | .105 | 100.000 | | | | | | |

The Eigen values are given by the 'Initial Eigen values' in Table 3. The "Total Variance" given to a factor is indicated by its Eigen value. The first component accounted for a variation of5.761, or41.153 percent, the second factor showed a variance of2.364, or16.889 percent, the third factor1.703or 12.164per cent and fourth factor showed a variance of 1.257 or 8.979per cent according to the extraction sum of squared loadings. When these four components added together, the total percentage of variance was79.184 % .The four components with Eigen values larger than 1.00 are regarded to be the extracted components. Only elements with Eigen values larger than 1.00 are included in this procedure, while the remaining factors are removed from the model.

Table 4
Rotated Component Matrix

S.No.	Factors	1	2	3	4
1	I work for more than 40 hours in a week				.743
2	I am not bothered about the work-life balance as I much attached to work				
3	I measure my success with the salary and work according to that	.925			
4	I constantly wait for promotion and salary rise as it increases the quality of life		.593		
5	I constantly think about the work during the off hours or week ends		.793		
6	I am willing to take up the tasks even if I am over burdened with lot of work			.563	
7	I am interested in talking about the work all the time	.744			
8	I work even in lunch and break times to complete the work			.861	
9	I am always work oriented and don't have any hobbies	.932			
10	I not satisfied with the work and expecting more perfection at sometimes			.641	
11	I am worried always that if I don't work hard I will lose my job		.863		
12	I am excited to work for the hospitals than my family		.841		
13	I take the complete responsibility for the outcome of my work			.753	

	performance					
14	I feel stressed and impatient with my colleagues who are not giving priority in their work	.671				

Extraction Method: Principal Component Analysis.
Rotation Method: Varimax with Kaiser Normalization

a. Rotation converged in 8 iterations.

Table 4 depicts the result of the VARIMAX factor rotation approach. Identification of variables with substantial loadings on a similar component enhances interpretation. As a result, factors with large factor loadings in each component (values more than 0.5) were chosen.All loading factors with a loading value of less than 0.5 are excluded. Table 5 lists the factors that were chosen and named them separately.

Table5
Naming of Statements Extracted

Factor	Va. No.	Statements	Rotated Factor Loadings
I 41.153% Work priority and Salary oriented	3	I measure my success with the salary and work according to that	.925
	7	I am interested in talking aboutthe work all the time	.744
	9	I am always work oriented and don't have any hobbies	.932
	14	I feel stressed and impatient with my colleagues who are not giving priority in their work	.671
II	4	I constantly wait for promotion and salary rise as it increases the quality of life	.593

16.889% Anytime Work-Oriented Thinking	5	I constantly think about the work during the off hours or week ends	.793
	11	I am worried always that if I don't work hard I will lose my job	.863
	12	I am excited to work for the hospitals than my family	.841
III 12.164% Responsible &Task oriented	6	I am willing to take up the tasks even if I am over burdened with lot of work	.563
	8	I work even in lunch and break times to complete the work	.861
	10	I not satisfied with the work and expecting more perfection at sometimes	.641
	13	I take the complete responsibility for the outcome of my work performance	.753
IV 8.979 % Willingness to work overtime	1	I work for more than 40 hours in a week	.743

Factor 1 is the most important factor which explained 41.153 % of the variation and the variables 3, 7, 9, 14 are highly correlated with each other and named as Work priority and Salary Oriented. Factor 2 is the next most important factor which explained 16.889 % of the variation and the variables 4,5,11,12 are highly correlated with each other and named as Anytime Work-Oriented Thinking.

Factor 3 is the next factor which explained 12.164 % of the variation and the variables 6,8,10,13 are highly correlated with each other and named as Responsible &Task oriented and the last factor accounted for a variance of 8.979 % and is named as Willingness to work over time.

VII. FINDINGS AND SUGGESTIONS

It is evident from the analysis that the Crucial workaholic characteristics influencing the nurses extracted from the 14 variables are Work priority and Salary Oriented as the first factor, Anytime Work-Oriented Thinking is the second factor, Responsible Task oriented is third factor and the last factor is Willingness to work overtime.

VIII. SUGGESTIONS

It was found from the analysis that out of fourteen variables considered for theanalysis it is grouped into 4 major factors.

1. Hospitals can focus on Workaholic nurses and encourage them to focus on their family during non-working hours.
2. Hospitals can identify these category of nurses and can make them to work extra in case of necessary situations.

IX. CONCLUSION

"Working around the clock" has in effect gained normality within modern working environment. Therefore, for workaholics who are eager to show themselves or prefer to embrace challenges indicating that the work field is undoubtedly a perfect arena. Workaholics experience higher work involvement, more work-life imbalance, and less life satisfaction than non-workaholics. Workaholics might be working harder than others but do not receive more rewards for their efforts. Hospitals have to focus on the Workaholic nurses and the major workaholic characteristics so that the nurses can be given breaks in their so as to balance their family life.

This paper highlights on major workaholic characteristics of nurses in which hospital management can focus on them so that they can work extra during the various Pandemic Situations.

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