RESEARCH ARTICLE

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Contribution to the Evaluation of the Quality of Life at Work (QwI) By Pensioners in Algerian Enterprises

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ABSTRACT

The issue of the work is an integral part of the strategic objectives of companies, enterprises, employees, it must be taken into account in the daily functioning of concepts in order, in particular, to anticipate the consequences of economic and social changes in society. The quality of life at work (QWL) is the space of balance between economic and social satisfaction during and after employees' retreat and the performance of enterprises. It is considered as a life philosophy adopted by the enterprises aiming at improving working conditions, well-being, relational and organizational factors. In order to act effectively, QWL must be part of a continuous improvement process: it is measured, acted upon, and its effects and developments are observed. Unfortunately, this is the phenomenon of the missing piece in the reality of work since it is rarely considered a major concern and only occasionally appears on the dashboard of company management and their managers. Our aim is to try to assess the quality of work life through the retired staff of national companies. Thus, based on the feedback of the retreat staff, who have come to decide on actions and recommendations that meet the expectations of enterprises and society in terms of sustainable development. Then each manager finds an answer to his concerns, a decision support, or even to determine what measures to adopt to prevent the prejudices encountered, to materialize another time. In this way, they are able to suggest improvements to the deficiencies observed in the workplace and engage in a process of continuous improvement.

Introduction

The Quality of Life at Work (QWL) is a philosophy of life adopted by the enterprise aimed at improving working conditions, well-being, relational and organizational factors [1,2,3]. It aims to recognize and support employees' commitment to work [4,5]. Good quality of life at work plays an important role in human resources management and even in the life of active employees and after retreat [6,7]. It is an essential component of sustainable development in nations and an encompassing concept, broader in scope than the notions of physical and mental health. It refers to a general sense of satisfaction and fulfilment in and through work that goes beyond the absence of health impairment [8].

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It must guarantee the health, safety and well-being of workers before and after retreat. Henceforth, safety, security and well-being at work and after retirement are priorities to be considered by managers in all activities [9,10,11]. To be effective, QWL must be a part of a continuous improvement process: measuring, acting, observing effects and changes [12,13]. This, quality of life at work designates and groups under the same heading the actions that make it possible to reconcile both the improvement of working conditions for employees and the overall performance of enterprises, especially when their organizations are changing.

From now on, any change in the state of an entity has consequences on the state of the entities connected to it and, through contamination, on the

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entire system. In return, the system considered as a whole interferes on each of the entities that compose it [14]. Thus, a healthy business consists of directives, rules, procedures, morals, resources and practices that provide for the physical and mental health of employees and society in general. In turn, these contribute to the achievement of sustainable development, production or service objectives, organizational efficiency and the well-being of society. As a result, the issue of work must be an integral part of the strategic objectives of society, of the company, of the employee and must be taken into account in the day-to-day operation of the concepts in order, to anticipate the consequences of economic and social changes in society [15-17].

Quality of life at work is the area of balance between economic, social and health satisfaction during and after employees' retreat and the performance of enterprises. Moreover, work is the pinnacle of the life and development of society, and workers are the basis of the various activities.

According to the definition of the International Labour Office (ILO), occupational hygiene is the science and art of detecting, assessing and controlling the nuisances and factors in the working environment that may affect the health and wellbeing of workers and members of the community. Therefore, our objective is to try to assess the quality of life at work through the retreated staff of national enterprises.

Methodology

Among the objectives of occupational health and safety we find the promotion and maintenance of the highest possible degree of physical, mental and social well-being of workers in all occupations on the one hand [18,19] and the prevention of adverse effects on the health of workers due to their working conditions in posterity on the other hand [20,21]. To do this, several approaches have been proposed in the literature and the tools used depend mainly on the nature of the data and knowledge available to build a behavioural model of the real system including the phenomenon of behaviour.

In this work, we have chosen to focus on an approach guided by data, or even the reality of retired staff. The method of work envisaged is based on the feedback, a posteriori approach, of the events manifested in the various national companies [22,23], figure 1.

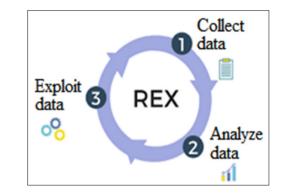


Figure 1. Approach Considered

Above all, this approach is a learning tool for organizations, building a memory of knowledge about quality of life at work.

All the information gathered in the field is presented in simple cross-tabulated tables, the aim of which is to provide an overview of the distribution of these deficiencies observed in workplaces within the different companies, categories and nature of employees on the one hand. Then, to analyze these results in order to be able to decide on actions and recommendations that meet the expectations of companies and society on the other hand. Then to determine what measures should be adopted to prevent the harm from occurring a second time, at least mitigate it, or even suggest improvements to the deficiencies observed in the workplace. This is a process in which the manager observes with his own eyes the mapping of working conditions for a well-defined period of time and thus proposes solutions to the observed deficiencies and suggests improvements based on real information.

This approach must be a source of progress and continuous improvement in the face of concrete realities. The quality of this analysis is fundamentally based on the information that safety can gather in the field. The technique envisaged is a questionnaire distributed to retired staff at the various post offices during the payment period, generally on the 24th and 25th of each month (Annex 1). The questionnaire is now a quantifiable data collection technique presented as a series of questions asked in a specific order. It also allows for the collection of a large number of testimonials and opinions. The information obtained can be analyzed through tables or graphs. We acquired 500 respondents with twelve variables. The questions asked are very simple and legible to have precise and unambiguous answers. These answers are processed by the XL software.

Results and Discussion

Breakdown of the employees by gender

Finding: We note that the number of men questioned is 274 (54.8%) and the number of women is 226 (45.2%). In addition, we note that the number of males decreases significantly between the ages of 60-65, probably due to the number of deaths in this category or to disability: The majority of retreats do not benefit from their pensions (Figure 2).

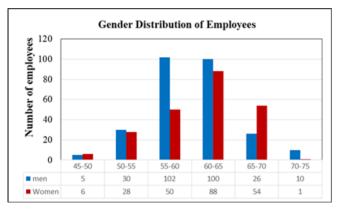
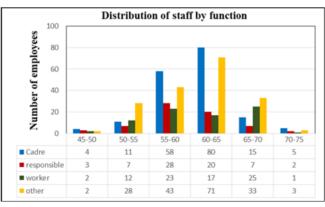
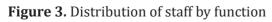


Figure 2. Gender Distribution of Employees

Breakdown of the employees by function

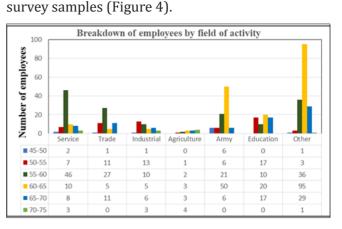
Finding: We find a certain heterogeneity, which seems to us a very normal way at the post office level. However, the category of blue-collar workers is small compared to other categories. Itcan be interpreted by the continuity in exercise of this category despite their age, death or invalidity. This is an indicator of the poor quality of work life (Figure 3).

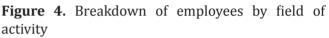




Breakdown of employees by field of activity

Finding: Requires a separate study to understand this phenomenon while increasing the number of





Distribution of the employees according to the number of accidents

Finding: We note that the majority of employees have had at least three or more accidents during their working life. This proves that safety and health in our companies are deficient: insufficient quality of life at work (Figure 5).

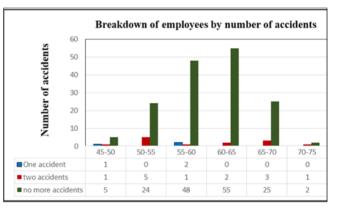
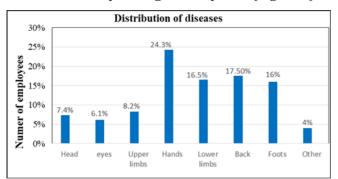


Figure 5. Breakdown of employees by number of accidents

Breakdown of the employees by type and location of injury

Finding: We note that men sex is the most affected by occupational injuries. This is logical given the activities allocated to men. However, we note that the injuries at the level of the rights predominate (24, 3%), in second position comes the lower part of the body, respectively the male back with (17.5%), the lower limbs with (16.5%) and the feet with (16%). In our opinion, in addition to a lack of individual protection means, there is a flagrant lack of industrial hygiene and respect for ergonomic rules in the different postures: a deficient Occupational



Health and Safety management system (Figure 6).

Figure 6. Distribution of Enrolment by Gender and Location of Injury

Breakdown of the workforce according to the groups' sick leaves

Finding: We find that there is a disproportion between the two sexes. The female sex is more concerned by sick leave than the male sex. This can be interpreted by maternity leave (Figure 7).

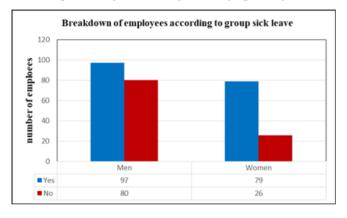


Figure 7.Breakdown of employees by Group Sick Time off

Distribution of the workforce affected by illness after retreat

Finding: We find that around 50% of retirees are sick, a slight difference between the two sexes, especially women. This can be explained by the function occupied, generally women work in administrations (Figure 8).

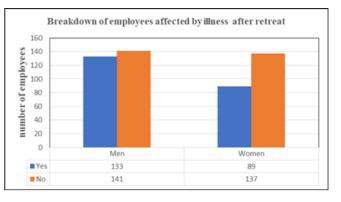


Figure 8. Distribution of employees Affected by Illness after Retreat

The presence of an occupational health or safety department

Finding: Despite the increase in the number of recorded accidents, we note that 90% of employees (44% women and 46% men) approve of the existence of occupational health and safety services in companies. However, these services are deficient (total absence of prevention and protection). This proves that health and safety in our Algerian companies are deficient and that health, safety and QWL are the last concerns of our leaders (Figure 9).

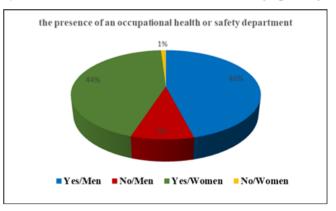


Figure 9. Distribution of notices concerning the presence of an OHS department

Respect for the hierarchy of HSE rules and laws

Finding: We find that more than 79% (50% of men and 39% of women) declare respect for hierarchy in HSE rules and laws, although there was an increase in accidents and illnesses in our study. This can be explained by the lack of a culture of safety and rigor in practice and the lack of means of prevention (Figure 10).

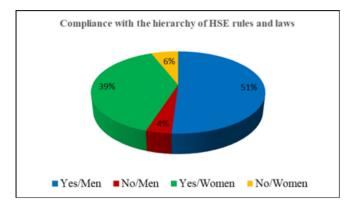
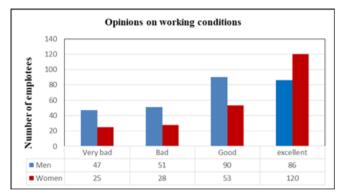
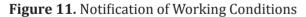


Figure 10. Compliance with the hierarchy of HSE rules and laws

Notices concerning working conditions

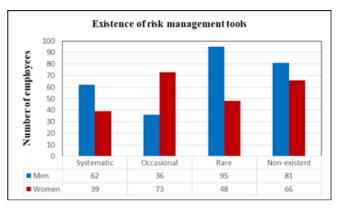
Finding: We note that more than 50% of employees consider that working conditions are good or excellent despite the disparity in the management of health and safety at work and the accidents recorded. In our view, in-depth studies are needed, increasing the number of respondents and making a distinction between companies in order to be able to draw up a representative risk map on a national scale (Figure 11).

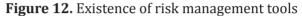




Existence of risk management tools

Finding: We find contradictions in the opinions, especially between 2.10 and 2.11. In our opinion, one of the questions is not understood by the questioned ones; otherwise the answers are in our opposite direction (Figure 12).





The influence of the career of work on the health of retirees

Finding: We find that the work profession affects women's health more than men's (16% for men and 19% for women), which is logical, given that women are affected by maternity leave, moreover, they occupy positions that are not compatible with their physical structures (Figure 13).

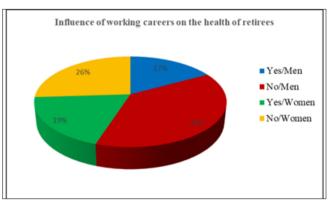


Figure 13. Influence of Working Career on Retiree Health

Distribution of diseases

Finding: We find that hypertension is the most dominant (31.7%). In our opinion, this is due to the age of the study sample. It is influenced by the quality of life at work: insufficient work hygiene, stressful life, etc.

In second place comes back pain with 12%. In our opinion, this scourge is due to poor working conditions, an activity not suited to the employee's abilities and the complicated social climate experienced in companies. Diabetes with 10.3%, in our opinion, is due to sedentary work and insufficient rest periods. MSD with 9.8%, in our opinion this is due to poor working conditions and adapted postures. 36.2% is an amalgam of diseases, of which 2.4% are occupational cancers due to exposure to chemicals (Figure 14).

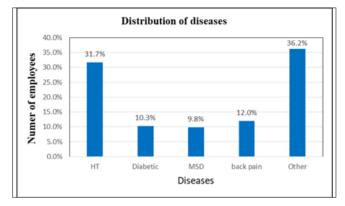


Figure 14. Distribution of diseases that are prevalent among pensioners

Conclusion

The results of our study lead us to say that despite the presence of HSI services in companies and law, the situation is alarming and there is a disparity in the management of occupational health and safety. As a result, controls and visits by the institutions concerned must be imposed and on a regular basis.

The health of the enterprise is the health of the national economy and the health and well-being of its pensioners. From now on, the quality of life at work is the balance between economic, social and health satisfaction during and after retirement of employees and the performance of companies. Consequently, the Algerian company must make health and safety at work and well-being a priority in its daily management in the same way as the other functions of the company.

The good quality of life at work plays an important role in human resources management and even in the life of employees after retirement. It is an essential component of sustainable development in nations. As a result, every company, regardless of its size and sector of activity, must meet its obligations in terms of health and safety at work.

Good management is about ensuring the health, safety and well-being of all employees on an equal footing with the other functions of the company.

To conclude, we recommend the following:

-Achieve a better control of professional risks at company level;

-To respect the physical integrity of each person, through a good evaluation and the implementation of preventive

actions, taking into account the organization of work and its technical and human components;

-Helping to ensure compliance with the legislation in force;

-To improve working conditions and the well-being of employees;

-To engage in a process of continuous and sustainable improvement in terms of health and safety at work;

-And, more generally, to improve working conditions in a continuous and sustainable manner and thus to develop a sustainable preventive safety culture in all entities.

References

- [1] Straume LV, Vittersø J. Well-Being At Work: Some Differences Between Life Satisfaction And Personal Growth As Predictors Of Subjective Health And Sick-Leave. J Happiness Stud 2015; 16(1):149-68.
- [2] Janine LC, Paulo LD, Anderson de SS. Quality of Working Life and Occupational Stress: A Brazilian Perspective. IJBMER, 2017; 8(5).
- [3] Ana AVB, Morin EM. Emotional intelligence and quality of working life at federal institutions of higher education in Brazil. Open Journal of Soc Sci 2019; 79(2): 255-74.
- [4] Chandranshu S. Factors affecting quality of work life: Empirical evidence from indian organizations. AJBMR 2012; 1(11): 31-40.
- [5] Tahreemet Y, Shazia K. Organizational cynicism, work related quality of life and organizational commitment in employees. Pak J Commer Soc Sci 2015; 9(2): 568-82.
- [6] Tania S, Gilles G. Extending employment beyond retirement age: The case of health care managers in quebec. Public Pers Manag 2005; 34(2): 195-214.
- [7] Eleanor D, Susan C. Psychological and psychosocial predictors of attitudes to working past normal retirement age. Employee Relations 2011; 33(3): 249-68.
- [8] Mary BL, Amy SW, Jerry G. Exploring the relationship between mission statements and work-life practices in organizations. Organization Studies 2011; 32(3): 427-50.
- [9] David EG. Human resource management and employee well-being: Towards a new analytic framework. hum. Resour Manag J 2017; 27(1): 22-

38.

- [10] Hugh B. Land use planning and health and wellbeing. Land Use Policy 2009; 26: S115-23.
- [11] Aditya J, Stavroula L, Gerard IJMZ. Managing health, safety and well-being: Ethics, responsibility and sustainability. Springer 2018.
- [12] Warner BW, Debra AN. Organization development: A process of learning and changing. FT Press 2015.
- [13] Jagdeep S, Harwinder S. Continuous improvement philosophy: Literature review and directions. Benchmark Int J 2015; 22(1): 75-119.
- [14] Choi SL, Yusof WMM, Kowang OT, Low Hock H. The impact of transformational leadership style on job satisfaction. World Appl Sci J 2014; 29(1): 117-24.
- [15] Jean LER. Déploiement d'un système de management du risqué. Technique de l'ingénieur, Réf. : G9200 V1. October 2012.
- [16] Terry AB, Misty B. Working after retirement: Features of bridge employment and research directions. Work, aging and retirement 2015; 1(1): 112-28.

- [17] Robert D. The world of work: industrial society and human relations. Taylor & Francis 2017.
- [18] Annalena W, Laurenz LM, Tanja M. Emotional exhaustion and workload predict clinician-rated and objective patient safety. Front. Psychol 2015; 5(1573): 1-13.
- [19] Shengli N. Ergonomics and occupational safety and health: An ilo perspective. Appl Erg 2010; 41(6): 744-753.
- [20] Barack O. United states health care reform: Progress to date and next steps. JAMA 2016; 316(5): 525-32.
- [21] Mario DG, Luca DG, Veronica DM, Federica M, Sara C, Alessia G, et al. Allergens in occupational allergy: Prevention and management focus on asthma. Allergy and immunotoxicology in occupational health. Springer. Singapore, 2017: 47-62.
- [22] Salmi S, Chaib R. Feedback a learning tool for future organizations. World J Eng 2017; 14(6): 545-49.
- [23] Guide des bonnes pratiques: Retour d'expérience; Sécurité industrielle à l'attention des PME/PMI; ICSI November 2008.