

The Relationship between Quality of Work Life and Organizational Citizenship Behavior among Nurses at El-Mansoura Health Insurance Hospital

Heba Abd El-Latif Mohamed El-Sayed⁽¹⁾, Magda Abd El-Hamid Abd El-Fattah⁽²⁾,
Wafaa Moustafa Mohamed⁽³⁾

⁽¹⁾ B.sc.N. Mansoura University, ⁽²⁾ Assistant Prof. of Nursing Administration, Faculty of Nursing, Cairo University, ⁽³⁾ Lecturer of Nursing Administration, Faculty of Nursing, Zagazig University

Abstract

Background: A high quality of work life (QWL) is essential for all organizations to continue to attract and retain employees. Quality of work life is a comprehensive program which is designated to increase employee satisfaction. **Aim of the study:** to explore the relationship between quality of work life (QWL) and organizational citizenship behavior (OCB) among nurses. **Subjects & Methods: Research design:** Descriptive, correlational design was utilized. **Setting:** This study was conducted at El-Mansoura health insurance hospital. **Subjects:** include convenience sample of nurses (N=250). **Tools of data collection:** 1st tool: Quality of work life (QWL) questionnaire and 2nd tool: Organizational citizenship behavior questionnaire. **Results:** The majority of the study participants had low quality of work life. On the other hand nearly to half of them had a low level of organizational citizenship behavior, And there was a highly statistical significance between total quality of work life and organizational citizenship behavior **Conclusion:** There was a positive correlation between total Quality of work life and Organizational citizenship behavior and there was a highly statistically significant relation between total level of the quality of work life and organizational citizenship behavior of the studied participants. **Recommendations:** Creating healthy work conditions for nurses and provide freedom to act according to their expectation as a professional and regular meeting must be conducted periodically between supervisors and their staff nurses to discuss and solve their problems.

Key Words: Quality of work life; citizenship; Organizational citizenship behavior

Introduction:

In today's competitive work environment, keeping key talented employees is a major challenge for any organization in order to compete in the real market ⁽¹⁾. Nursing is very demanding career. In nursing, nurse's work not only has tons of things to get done, but also forced to make some decisions. Most of nurses have a lot of things they are responsible for, and to make quick decisions about patient care and well-being. In order to improve quality of care of patients it's important to improve quality of working life of the staff especially nurses. Quality of working life affecting different faces of nurses such as their productivity, patient satisfaction, commitment, and quality of their life There are many predictors for nursing quality of working life such as; managerial support, interpersonal relationships and workload⁽²⁾.

Quality of work life is the quality of relationship between employees and the total working environment, with human dimensions, technical and economic consideration. QWL is necessary for this competitive environment for maintaining qualified and skilled employees. High QWL

would help to fulfill employee's needs, there by fulfill the organizational goals effectively and Initially, QWL concept was used only for job redesigning process by considering social- technical system approach, but gradually this concept was broadened by considering large interventions. Focusing on improving QWL to increase the contentment and satisfaction of employees can result in various advantages for both employees and organization⁽³⁾.

Quality of nursing work life defined as "the degree to which nurses were satisfied regarding their important personal needs (growth, opportunity, safety) as well as organizational requirements (increased productivity, decreased turnover) through their experiences in their work organization while achieving the organization's goals."⁽⁴⁾.

Engaged employee having behaviors that enhance efficient and effective working of the organization. These behaviors are known as organizational citizen behavior (OCB) which can be defined as employee behavior that is discretionary, not directly and explicitly identified by the formal reward system. It shares in the efficient functioning of the

organization as well as worker performance. The significant role of work engagement occurs when it comes to retaining employees and improving OCB. In order to enhance work engagement, organization is advised to share employees in the process of decision making, communicate information to employees, educate employees, and use suitable reward systems. Also, a high quality relationship between supervisors and staff has to be maintained and teams have to be considered based on their objectives and on the social aspects of their team work⁽⁵⁾.

Organizational citizenship behavior means the willingness of employees to go beyond the formal specifications roles, also known as extra-role behaviors, but had impact on the performance of organization. It refers to money making and efficient investment with favorable outcomes for individuals, organizations and society as a whole. Organizational citizenship behavior refer to behaviors that are intended to assist colleagues, supervisor or the organization and include acts such as improving work environment morale, volunteering for work that is not aspect of the job description, as well as recommended improvements in the functioning of the organization. An organizational citizenship behavior is a term that include anything positive and constructive that staff perform, which supports co-workers and benefits the organization⁽⁶⁾.

Organizational citizenship behavior has been viewed as pro-motive behaviors that demonstrate the actor's desire to maintain a relationship with the target and contribute to the target's success. Organizational citizenship behavior (OCB) is referred to as a set of discretionary workplace behaviors that exceed one's basic job requirements. They are often described as behaviors that go beyond the call of duty. This condition could be leaded to remove conflict among employees. Organizational citizenship behavior is also very important for healthcare institutions and healthcare workers and this importance has certain reasons. It is not always possible to recover poor quality in health services. Patients need special care and positive behaviors of healthcare workers more. Moreover, today's healthcare

institutions are exposed to competitive conditions, just like in other sectors⁽⁷⁾.

Significance of the study:

A high Quality of work life (QWL) is essential for healthcare organizations. With High QWL organizations can achieve better productivity, become highly competitive and can seek ways to address the issues of recruitment and retention^(8, 9, 10, 11). Meanwhile, the absence of quality of work life for nurses' results in absenteeism, stress, conflict and turnover and contributing to lack of organizational citizenship behavior (OCB) among nurses⁽¹²⁾. Therefore, the organizational citizenship behavior (OCB) amongst the most important factors that can direct behaviors, attitudes and interactions of nurses toward high quality services, So, organizational citizenship behavior (OCB) is considered to be a reflection of the employees' commitment to their organization and encourage teamwork, promotes organizational communication, develops organizational environment, and reduces nurses errors⁽¹³⁾.

During the investigator clinical experience in the selected hospital observed that nurses have demonstrably withdrawn their enthusiasm for productive work, and have committed themselves to a critical minimum effort. So, it is hoped that the findings would create an awareness of some of the possible explanation of the resignation from the job whilst nurses still continue to work. In addition, a better understanding of the relationship between quality of work life and organizational citizenship behavior among nurses at El-Mansoura health insurance hospital could lead to the hospital managers taking proactive steps towards improving quality of work life (QWL) for nurses and increase organizational citizenship behaviors that could benefit the nurses as well as the hospital.

Aim of the study:

This study will explore the relationship between quality of work life (QWL) and organizational citizenship behavior among nurses at El-Mansoura health insurance hospital.

Research Questions:

To fulfill the aim of the study, the following research questions are formulated

1. What is the level of quality of work life (QWL) among nurses at El-Mansoura health insurance hospital?
2. What is the level of organizational citizenship behavior among nurses at El-Mansoura health insurance hospital?
3. What is the relationship between quality of work life and organizational citizenship behavior among nurses at El-Mansoura health insurance hospital?

Subjects and Methods:

The aim of this study was to explore the relationship between quality of work life (QWL) and organizational citizenship behavior (OCB) among nurses at El-Mansoura health insurance hospital.

Subjects and methods of this study will be presented under the following designs; technical, operational, administrative, and statistical design.

Research design:

Descriptive, correlational design was conducted to achieve the aim of the present study and to answer research questions.

Study setting:

This study was carried out at El-Mansoura health insurance hospital which contains 6 floors and include 300 beds.

Study subjects:

To collect data for the present study, convenience sample of nurses (250) working in El-Mansoura Health Insurance Hospital at the time of the study. The participants' enrollment will be as the following predetermined inclusion criteria:-

1. Working at least for one year in the current place.
2. Agree to participate in the current study.
3. Both male and female was included.
4. All the educational levels were included.

Tools and data collection:

The data was collected through the following tools which was developed by the investigator and it was included the following parts.

Tool (I): Demographic data of the participants' sheet. It was included participant gender, the level of education, years of experience, the type of unit they are working in, work schedules (full or part-time, shift worked, number of working hours per each shift & Quality of work life (QWL)

questionnaire which guided by the National Institute for Occupational Safety and which consist of (36) items that classified into (6) dimensions such as, the moral working conditions, the characteristics of the job, wages and bonuses, The Team Work, the chief's method in supervision & participating in making decisions; each dimension consist of (6) items. This part aims at assessing quality of work life (QWL) ⁽¹⁴⁾.

Tool (II): Modified Organizational citizenship behavior among nurses. OCB questionnaire. The items included in this scale will be based on the definitions of the five dimensions of OCB, namely; conscientiousness, sportsmanship, civic virtue, courtesy and altruism, each dimension consist of five items except civic virtue consist of four items. The nurses were asked to complete the questionnaire and identified their attitudes about how OCB items that observed in their work setting. The respondents was provided their responses to these items using a 5 point Likert Scale from (1= to no extent) to (5=to a great extent). ⁽¹⁵⁾

Scoring system:

1-(QWI) questionnaire:

The responses were scored for four factors personality questionnaire, quality of work life questionnaires items use a five point likert scale range from (strongly disagree, disagree, not sure, agree, strongly agree) the scored as (5,4,3,2,1) respectively for each items.

2-Organizational citizenship behavior questionnaires

scoring system items use a five point likert scale range from (1= to no extent) to (5=to a great extent). The scores of the items were summed up and the total divided by the number of the items giving a mean score for the part. These scores were converted into percent score. The domain was considered to be high score indicates a high degree if the percent score was 60% or more and a lower degree indicates low degree if less than 60%.

Content validity and reliability :

The pilot study served to assess the reliability of the scales used in the data collection tool. Cronbach Alpha coefficient was calculated to assess the reliability

through measuring their internal consistency. The results showed ranged from 0.91 to 0.95. Reliability of the test was high.

Field work:

The field work of this study was executed in five months started from beginning of September, 2014 and was completed by the end of January, 2015. The first phase of the work was the preparatory phase that was done by meeting with unit heads, head nurses and staff nurses to clarify the objective of the study and the applied methodology. The second phase was done by meeting subjects and giving the same instructions; each subject was given the opportunity to fill-in the questionnaire under guidance and supervision of the researcher which ranged from 25 to 30 minutes. The researcher collected data by herself through meeting all nurses of each unit in the morning shift and evening shift in different days. The second phase of the work was took two month and included reviewing of literature related to the topic and theoretical knowledge of various aspect of the problem using national and international journals text book, articles.

Pilot study:

A pilot study was carried out to test the tool feasibility, clarity and to estimate the time consumed for filling in the forms .The study was carried out 10% of participant nurses from El-Mansoura health insurance hospital (25 nurses). Nurses were selected randomly. A brief explanation of the purpose of the study and then provided every participant with a copy of the study tool. The time consumed in answering the tool were about 25 to 30 minutes. The data collected from the pilot study were reviewed and used without any modifications and included from the study Sample.

Administrative and ethical considerations:

To carry out the study in the selected setting, official approval permission for collection of data was obtained from manager of El-Mansoura health insurance hospital by providing an official letter from the Dean of the College of Nursing. The researcher fully explained the aim of the research to the

nurses to get better cooperation during the implementation phase of the research; also an individual oral consent was obtained from each participant in the study after explaining the purpose of the study.

Statistical analysis:

The data were analyzed by using SPSS, (Statistical Package for Social Sciences), software program version 15. Data were presented using descriptive statistics in the form of frequencies and percentage, mean and standard deviation (SD) were used, chi-square and person R tests were also used to examine the relation between the study variables

A significant level value was considered when $p \leq 0.05$ and a highly significant level value were considered when $p \leq 0.001$.

Results:

Table(1): Revealed that, all the studied nurses were female, age ranged between 20 and 40 years with Mean +SD(27.54±7.09)years, with more than two third of them(69.2%) have being at the age of 20-29 years. The majority (81.2%) was having a Secondary nursing education and more than two third of them their experience was mostly more than 10 years, with Mean +SD (12.78±5.67) years and the majority of the studied nurses (90.4%) were married.

Table (2) present the main factors which contribute to nurses' dis-satisfaction with quality of nursing work life, the majority percentage of dissatisfaction was regarding to Moral working conditions (19.5%). While the minority percentage of dissatisfaction regard to years of experience was (6.8%).

Figure(1): display the percentage of distribution of studied participants regarding the quality of work life .It shows that the majority of the nurses in the study sample (86.4%) had low quality of work life, while only (13.6%) had moderate quality of work life.

Table (3): present the main factors which contribute to nurses' non organizational citizenship behavior, the majority percentage of organizational non citizenship was regarding to sportsmanship (34.4%). While the minority percentage of organizational non citizenship was regarding to years of experience (12.5%).

Figure (2): This figure illustrated that only (10%) of the study participants had a high level of organizational citizenship behavior. While nearly to half of them (47.2%) had a low level of organizational citizenship behavior.

Table(4): Shows that there was a positive correlation ($P\text{-value}<0.05$) between total Quality of work life and Organizational citizenship behavior based on conscientiousness ,civic virtue and altruism. And there was a highly statistical significance between total quality of work life and organizational citizenship behavior ($P\text{-value}<0.05$).

Discussion:

Quality of work life is a major issue for employees, and how organizations deal with this issue is both of academic and practical significance. So, it is not any wonder that thousands of studies have revolved around the concept of job satisfaction and stress as core concepts. From the other side, organizational citizenship behaviors are considered as some voluntary and optional behaviors which are not parts of people's formal tasks; but doing them cause improving organizational roles and tasks effectively. The easiest resource for changing is human resource. The managers have not considered any facilities for their employees to have a better work life. So employees are unsatisfied of their work and its effects on their efficiency Barot⁽¹⁶⁾.

Regarding the characteristics of the total studied sample: The current study shows that, all the studied nurses age ranged between 20 and 40 years old, with more than two third of them at the age of 20-29 years old. The majority was having a secondary nursing education and more than two third of them their experience was more than 10 years, and the majority of the studied nurses were married. The possible explanation for increase number of nurses who have secondary nursing education related to the number of nursing schools is more than the number of nursing faculties in Egypt. The findings of the present study are in agreement with those in a study carried by Awosusi⁽¹⁷⁾ who study an Assessment of Quality of Working-Life of Nurses in Two

Tertiary Hospitals in Ekiti State, Nigeria, and found that the majority of the respondents were married and it is in disagreement with the respondents working experience, it shows that the majority have 2-5 years working experience, while few have about 6-10 years working experience.

Regarding main Factors Which Contribute to nurses Dis-Satisfaction with Quality of Nursing Work Life: The present study showed that the majority percentage of dissatisfaction of the participants was regarding to moral working conditions. While the minority percentage of dissatisfaction regard to years of experience, it seems that employees with greater work experience feel less occupational stress and more stability in their job and thus experience a better QWL. These findings are in disagreement with those found in the study done by (Moradi et al.⁽¹⁸⁾ who study Quality of Working Life of Nurses and its Related Factors, shows that nurses with more work experience had a better QWL.

Concerning the distribution of studied participants regarding the quality of work life: The present study shows that the majority of the nurses in the study sample had low quality of work life. This is may be related to inadequate salaries, increasing nursing workload, lack of communication between upper management and staff nurses, absence code of ethics in the organization and many nurses were dissatisfied. The present study findings are in agree with those findings in the study done by Morsy⁽¹⁹⁾ who study Relationship Between Quality Of Work Life And Nurses Job Satisfaction At Assiut University Hospitals, and it was found that more than two thirds of the nurses had low quality of work life . Also, Almaki et al.⁽²⁰⁾ who is study Quality Of Work Life And Turnover Intention In Primary Healthcare In Saudi Arabia showed that the nurses were dissatisfied with their work life. This study in disagree with the findings in the study done by Funnell⁽²¹⁾ with title Opinions of Registered Nurses about Quality of Working Life in Victoria's Public Hospitals, in Australia, Nurses in this study generally felt positive about their overall quality of working life, which is reflective of other studies suggesting

that nurses' quality of work life may be at a reasonable level.

Regarding main factors which contribute to nurses' non organizational citizenship behavior (OCB): The present study shows that the main factors which contribute to nurses' non organizational citizenship behavior, the majority percentage of organizational non citizenship was regarding to sportsmanship. While the minority percentage of organizational non citizenship was regarding to years of experience This findings are similar to those found in the study done by Altuntas & Baykal⁽²⁰⁾ who study Organizational Citizenship Behavior Levels of Nurses and Effective Factors, which find that OCB was affected by certain personal characteristics like age, work position, and institutional experience as well as by professional characteristics such as intentional choice of the nursing profession, working method, shift, satisfaction level of job, and the intention to leave the job.

Concerning percentage distribution of studied participants regarding organizational citizenship behavior: The present study illustrated that the lowest percentage of the study participants had a high level of organizational citizenship behavior. On the other hand more than two third had a moderate level of organizational citizenship behavior and less than half of them had a low level of organizational citizenship behavior. This related to non-sportsmanship behavior among nurses and social status while 90.4% were married and have more responsibilities which lead to stress because they are unable to balance between work responsibilities and home responsibilities, this findings are in disagree with those found in the study done by Altuntas & Baykal⁽²²⁾, in Istanbul with title Organizational Citizenship Behavior Levels of Nurses and Effective Factors, which found that self-assessment of nurses for their organizational citizenship behaviors which revealed that OCB levels of nurses were quite high.

Concerning correlation between quality of work life and organizational citizenship behavior of the studied participants: The present study shows that there was a positive correlation between total Quality of work life and Organizational citizenship behavior

based on conscientiousness, civic virtue and altruism. And there was a highly statistical significance between total quality of work life and organizational citizenship behavior; this means that as quality of work life becomes better among the study participants, nurses produce more organizational citizenship behavior. This finding similar to those found in the study done by Sandhya⁽²³⁾ who conduct A Study On The Effect Of Quality Of Work Life (QWL) On Organizational Citizenship Behavior (OCB) – With Special reference to College Teachers in Thrissur District, Kerala, in India, which found that There is a significant relationship between the Quality of Work Life and Organizational Citizenship Behavior based on Altruism & Conscientiousness.

Conclusion:

In the light of the current study findings, it was concluded that the majority of the nurses in the study sample had low quality of work life, while only (13.6%) had moderate quality of work life; minority of the study participants had a high level of organizational citizenship behavior. and nearly to half of them had a low level of organizational citizenship behavior and there was a positive correlation between total Quality of work life and Organizational citizenship behavior and there was a statistically significant relation between total level of the quality of work life and organizational citizenship behavior of the studied participants.

Recommendations:

In view of the study finding the proposed recommendations are as follows:

- There should be regular promotion of participants as well as encourage and allow them for educational advancement.
- Participants should be given opportunities to participate in decisions and actions affecting their jobs.
- Creating healthy work conditions for nurses and provide freedom to act according to their expectation as a professional.
- Regular meeting must be conducted periodically between supervisors and their staff nurses to discuss and solve their problems.

- Hospitals *managers* and policy makers should encourage the professional growth of nurses through the provision of a systematic career ladder.

Table (1): Distribution of personnel characteristics of the studied sample (N=250).

Variable	Frequency	%
Age in years		
20-	173	69.2
30-	65	26.0
40-	12	4.8
Mean +SD	27.54±7.09	
Educational qualification		
Secondary nursing education	203	81.2
Technical nursing education	20	8.0
Bachelor of nursing	27	10.8
Years of experience		
< 10	89	35.6
10-	152	60.8
20-	9	3.6
Mean +SD	12.78±5.67	
Social status		
Single	20	8.0
Married	226	90.4
Widow	4	1.6

Table (2): Main Factors Which Contribute to nurses Dis-Satisfaction with Quality of Nursing Work Life

Main Factors Which Contribute to nurses Dis-Satisfaction with QWL	Number Of Dis-Satisfied Nurses	Relative Percent Of Dis-Satisfied Nurses	Number Of Satisfied Nurses	Percent Of Total Satisfied Nurses	Cumulative Percent Of Satisfied Nurses
Characteristics of the job	90	7.8%	70	31.1%	31.1%
Wages and bonuses	218	18.9%	68	30.2%	61.3%
Social status	195	16.9%	31	13.8%	75.1%
Educational qualification	197	17.1%	24	10.7%	85.8%
Age in years	152	13.2%	21	9.3%	95.1%
Years of experience	78	6.8%	11	4.9%	100.0%
Moral working conditions	225	19.5%	0	0.0%	100.0%

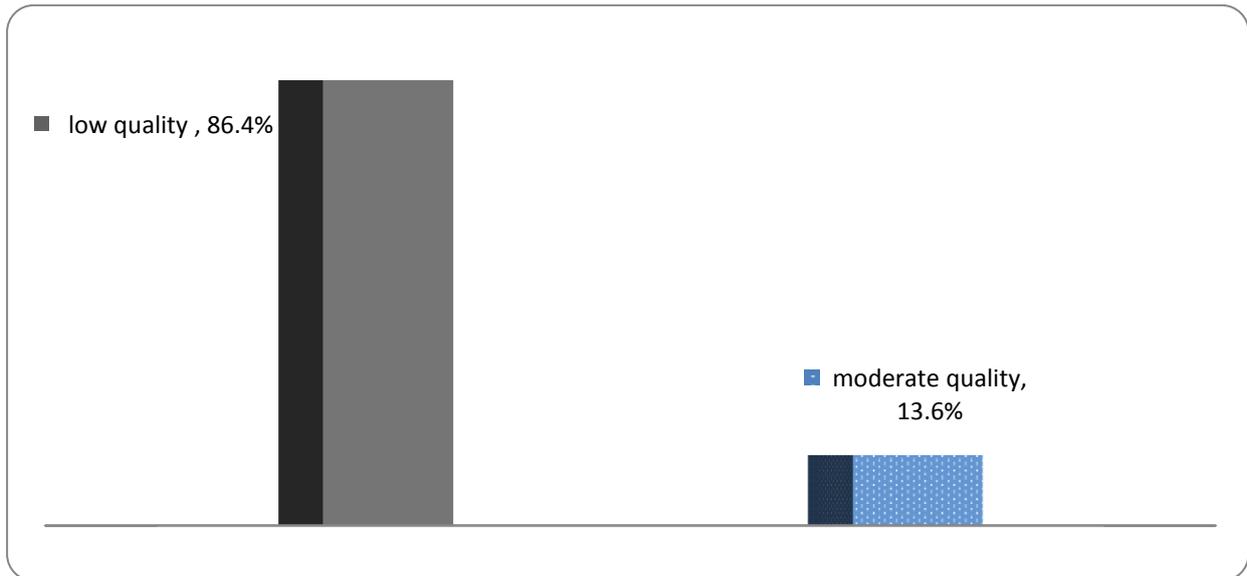


Figure (1): Percentage distribution of studied participants regarding the quality of work life.

Table (3) : Main Factors Which Contribute to nurses’ non organizational citizenship behavior.

Main Factors Which Contribute to nurses organizational citizenship	Number Of organizational non citizenship Nurses	Relative Percent Of organizational non citizenship	Percent Of Total citizenship	Cumulative Percent Of organizational citizenship Nurses
Educational qualification	97	18.3%	31%	31%
Years of experience	66	12.5%	25%	56%
Age in years	85	16.1%	20%	76%
Social status	99	18.7%	16%	92%
Sportsmanship	182	34.4%	8%	100%

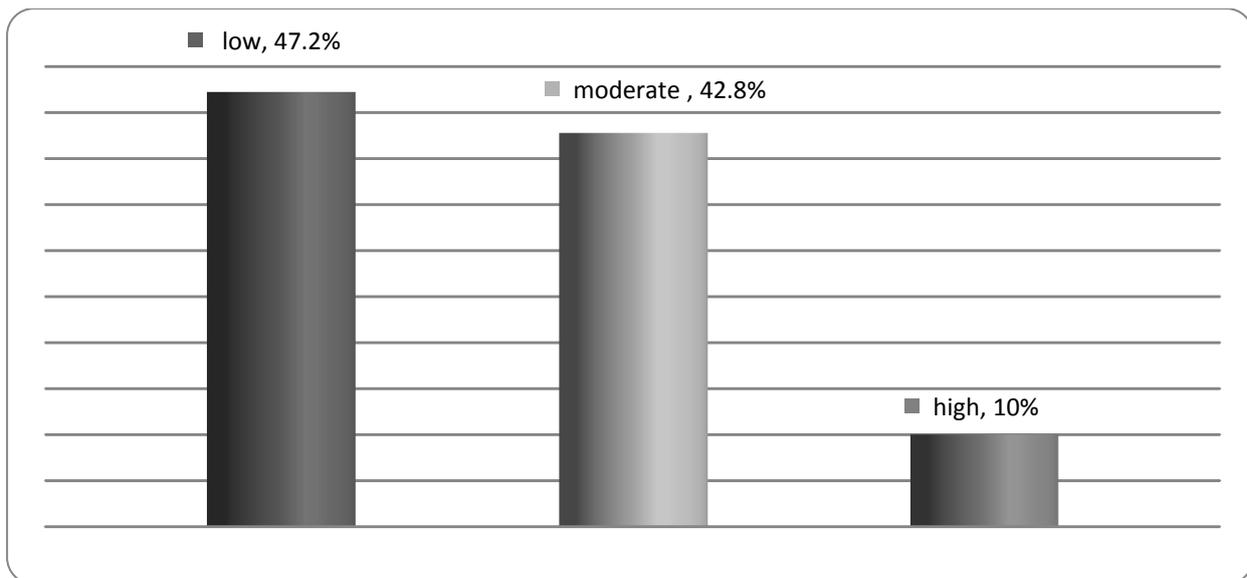


Figure (2): percentage distribution of studied participants regarding organizational citizenship behavior.

Table (4): Correlation between quality of work life and organizational citizenship behavior of the studied participants (N=250).

	The Moral Working Conditions		The characteristics of the job		Wages and bonuses		The Team Work		The chief's method in supervision		Participating in making decisions		Total Quality	
	R	P value	r	P value	R	P value	r	P value	R	P value	R	P value	r	P value
Altruism	.135(*)	.033	.237(**)	.000	-.149(*)	.018	.143(*)	.024	.099	.118	.135(*)	.033	.131(*)	.039
Conscientiousness	.133(*)	.036	.235(**)	.000	-.015	.807	.143(*)	.023	.109	.085	.191(**)	.002	.180(**)	.004
Courtesy	.171(**)	.007	.304(**)	.000	-.139(*)	.028	.033	.607	.098	.120	.004	.946	.101	.111
Sportsmanship	-.006	.922	-.023	.719	-.001	.985	.040	.533	-.046	.472	.083	.191	.007	.915
Civic Virtue	.069	.278	.109	.084	.032	.615	.191(**)	.002	.174(**)	.006	.141(*)	.026	.172(**)	.006
Total	.178(**)	.005	.307(**)	.000	-.099	.120	.188(**)	.003	.151(*)	.017	.190(**)	.003	.205(**)	.001

** Correlation is significant at the 0.01 level (2-tailed).

* Correlation is significant at the 0.05 level (2-tailed).

References:

- Kumar, N.: Role of Perceived Organizational Support and Organizational Justice on Employee Turnover Intentions: A Literature Review. *International Journal of Management and Social Science Research Review*;2014Vol1(5),accessedatNov,2015.at:<https://www.researchgate.net/publication/28108543>
- Said, N.B., Nave, F. & Motas, F.: The Quality of Working Life among Nurses in Pediatric Setting. *The European Proceedings of Social & Behavioural Sciences* 2015; Published by Future Academy www.FutureAcademy.org.uk. accessed at, 3/15/2017,12:00AM.
- Nanjundeswaraswamy, T.S.: Review of Literature on Quality of Worklife *International Journal for Quality Research* 2013; Vol 7(2) ,Pp: 201–214, accessed at,12/25/2014, 3:58PM.
- Roos, J.: Quality of work life in health services magnetism and mentorship 2012,(P:5),accessedat,4/26/2015,1:56.
- Ariani D.: The relationship between employee engagement, organizational citizenship behavior, and counterproductive work behavior. *International Journal of Business Administration* 2013; 4(2): 131-144.
- Abed, F. & Elewa, A.H.: The Relationship between Organizational Support, Work Engagement and Organizational Citizenship Behavior as Perceived by Staff Nurses at Different Hospitals, *Journal of Nursing and Health Science* 2016; vol 5(4), Pp:113-123,accessed at,3/10/2017,7:15PM.
- Ali, N.: Effect of Organizational Justice on Organizational Citizenship Behavior: A Study of Health Sector of Pakistan. *Review Pub Administration Manag* 2016; 4:198. doi:10.4172/2315-7844.1000198,accessed at,3/20/2017,5:40 PM.
- Akdere, M.: Improving quality of work life : Implications of human resources. *The business review, Cambridge* 2006; 6(1), 173-177.
- Amini, A. and Mortazavi, S.: The impact of the broadcasting mistake management culture in a healthy organization on the quality of the personnel work life. *J .clin. Diagn ,Res.* 2013; 7: 507-512.
- Lee, Y.W., Dai, Y.T., Park C.G. & McCreary L.L.: Predicting quality of work life on nurses'intention to leave. *J.Nurs.Scholarsh.* 2013 45:160-168.
- Schmidt, D.R., Paladini M., Biato, C., Pais, J.D. & Oliveira, A.R.: Quality of working life and burnout among nursing staff in intensive care units. *Rev.Bras.Enferm.* 2013; 66:13-17.
- Hassan, S. & Faisal, S.: Quality of Work Life and Organizational Commitment among Nurses in Elgalaa Military Hospital Issue(3), 2011.
- Dargahi, & Shaham et al.: Organizational Citizenship Behavior among Iranian nurses ,*Iran Public Health* 2012; Vol(41) No(5) PP(85-90).
- NIOSH ,Quality of work life questionnaire.National Institute for Occupational Safety and Health; (2002).

15. Netemeyer R.G., Boles J.S., McKee D.O., Mcmurrian R.: An investigation into the antecedents of organizational citizenship behavior in a personal selling context. *J Mark*, 1997 ;61 (3): 85-98.
16. Barot, M. et al.: Relationship between the Quality of Work life and Organizational Citizenship Behavior 2014; 11/26/2016 1:15 PM.
17. Awosusi, O.: Assessment of Quality of Working-Life of Nurses in Two Tertiary Hospitals in Ekiti State, Nigeria 2010; Vol. 4 (2), (Pp 113-124), accessed, 3/22/2015, 7:52 AM.
18. Moradi, T. et al.: Quality of Working Life of Nurses and its Related Factors Nurse Midwifery Stud 2014; 3(2): Pp(1-15).
19. Morsy, S. & Esmail, H.: Relationship Between Quality of Work Life and Nurses Job Satisfaction at Assiut University Hospitals, *Al-azhar medical journal* 2015; vol., 13, no (1), PP:163-171, accessed, 1/13/2017, 12:30 PM.
20. Almalki, M.J. et al.: Quality of work life among primary health care nurses in the Jazan region, Saudi Arabia: a cross-sectional study, *Human Resources for Health* 2012; Vol.10 (30), Pp: 23, accessed, 6/10/2014, 1:42 PM.
21. Funnell, R.: Opinions of Registered Nurses about Quality of Working Life in Victoria's Public Hospitals 2010; P:(171), accessed at 12/13/2016, 10:20 PM
22. Altuntas, S. & Baykal, U.: Organizational Citizenship Behavior Levels of Nurses and Effective Factors, *Journal of health and nursing management* 2014; Vol.1, No.(2), Pp.(8998), accessed, 1/17/2017, 10:06 PM.
23. Sandhya Nair, G.S.: A Study on The Effect of Quality of Work Life (QWL) on Organizational Citizenship Behavior (OCB) With Special reference to College Teachers in Thrissur District, Kerala 2013; Vol. 6 No. 1(pp 34 - 46), accessed at 3/12/2015, 7:59 PM.