

Job-Involvement Among Health Care Providers In The Palestinian Society

Rasmia Al-Hour, Renad Ishtay, Donia Hroub, Lana Abu Awwad, Nadeen AL-Khateeb & Shorouq Abu Yaqoub

Abstract

The study aims to measure job-involvement among health care providers in Hebron and Bethlehem Governorates. The study adopted the descriptive approach and the questionnaire, which is appropriate to the exploratory nature of the research. The sample composed of three hundred sixty-eighty participants stratifiedly selected. Job-involvement among health care providers was evaluated using an index of a 25-item scale. A 5-point Likert scale (Always to Never) was used to assess the job-involvement among the sampled population. Findings showed that health care providers experienced a moderate level of job-involvement (M 3.31, SD 0.44). More than half of the participants (66.2%) scored a moderate level of job-involvement. The study explored the demographic breakdown over job-involvement among health care providers with the aim of identifying any differences. Findings showed that qualification and profession do not show any significant differences. However, it was found that gender, authority, age, and professional experience were significant variables. The study suggested that management might be able to increase the level of job-involvement with increasing the inter-actions with health care providers through staff meetings.

Keywords: Job-involvement, job satisfaction, self-management, organizational commitment.

1. Introduction

Job involvement presented the phenomenon of job involvement by discussing various data about the impact of job design elements on job involvement (Lodahl & Kejner, (1965). Job involvement is an important element that has a significant impact on individual employees' and organizational outcomes (Lawler, 1986).

Li & Long (1999) define job involvement as the degree to which one shows emotional or mental identification with his or her job. Job involvement can be elaborated as engagement regarding the internalization of values regarding the righteousness of work or the significance of work in the value

of the individual (Lodahl & Kejner, 1965). This shows that researchers were working on this long ago and many organizations have applied the research findings. Most researchers agreed on this fact: job involvement is a different construct from other associated constructs, which include organizational commitment, job satisfaction, and intrinsic motivation (Thornton & Shore, 1990).

The importance of employee involvement has been widely recognized since McGregor's Theory of Y Management Style. And the aim of employee involvement is to provide an environment in which employees feel comfortable enough to participate in management discussion and decision-making.

Employee involvement is used by managers to motivate employees by giving them importance and making them feel that they are making a contribution to help improve their organization. In order to involve employees, organizations can adopt activities such as: suggestion systems, work teams, improvement meetings, quality circles, and regular discussions with superiors.

2. Background and Literature Review

2.1 The Concept Of Job Engagement

The beginning of the term "job involvement" dates back to the beginning of the year (1921), as shown by studies conducted on human resources in organizations, which aimed to indicate the level of individuals' readiness to achieve the goals of the organization. (Pernin,2007) explained that the US military had a role in highlighting the idea of organizations and their commitment to them during World War II, through the willingness of military personnel to do the impossible for the welfare of the organization, and thus studies and research were conducted to search for a relationship and description that represented the employee's emotional connection with the organization and with other individuals. Thus the term "job involvement" was born (Almantawi, 2007).

In a study conducted at the Hawthorne Electricity Factory in the period between (1924–1922), it appears that the increase in the productivity of individuals comes through the motivation of workers, as the organization worked to improve the organizational climate of the factory, which led to increased productivity and job engagement (Madi, 2014).

2.2 Definition Of Job Involvement

Both (Lodahl & Kejner, 1965) defined job involvement as the degree to which the individual is psychologically connected to work and its role in shaping the individual's self-perception. importance in his life." Areeshah (1995: 57) defines it as the degree of psychological connection of the individual to his job, and it is considered one of the intellectual beliefs of the individual towards his job.

Hence, the importance of job involvement lies in the fact that it increases the individual's commitment to his work, increases his satisfaction with his job, improves the work environment in the organization, motivates employees, directs the behavior of individuals, and reduces absenteeism and delays (Al Shanti, 2015).

On the other hand, Al-Najjar (1995: 128) sees that it expresses the degree of psychological connection to the work, so that he is seriously involved in it, and the worker whose preoccupation and integration are high in his work performs the various activities and activities included in his work with diligence, activity, and impulsion.

2.3 Terms Of Job Involvement

Mahmoud (2013) indicated in his study that there are several conditions for achieving job involvement, as shown in Figure (4.2). However, Gallab (2011: 449) refers to three levels of job involvement, which are as follows

2.3.1 Participating In The Suggestion

Being absorbed in the proposal represents a slight change compared to the trend towards control, as it encourages individuals to present ideas aimed at developing the way in which the work is performed, and they are also rewarded for that, since the control remains in the hands of the management in accepting or not accepting those ideas.

2.3.2 Workplace Involvement

Job involvement represents a more important change. Individuals can develop and use skills. Individuals have greater autonomy in their work and receive appropriate feedback on the work they are doing. The role of supervisors is to focus on support rather than guidance.

2.3.3 Excellent Involvement

It occurs when an organization gives its people a sense of participation in its overall performance.

2.4 Elements Of Job-Involvement

Marcus & House (1973) explained that there are several elements that must be present to achieve job-involvement, which are:

2.4.1 Empowerment

Empowerment refers to the degree of decision-making that can be dealt with by the employee while working in the organization.

2.4.2 Information

Data means, the quantity and quality of business operations, such as unit outputs, costs, revenue, profitability, and customer reactions.

2.4.3 Knowledge

It refers to the level at which the employee can evaluate and generate various conclusions based on this information.

2.4.4 Rewards

The financial or non-financial benefits provided to employees for their services improve organizational performance. These bonuses are also an important tool to motivate employees.

2.5 Types Of Job-Involvement

Simpson (2009: 108) refers to four types of job-involvement, that are:

2.5.1 Personal Immersion: It represents the employment and embodiment of the physical, cognitive, and emotional state of the employee while carrying out the tasks.

2.5.2 Absorption Vs. Fatigue: Fatigue represents a group of psychological characteristics and symptoms such as exhaustion, sarcasm, and low efficiency in response to chronic organizational stressors.

2.5.3 Job Involvement: It refers to positivity, achievement, and the state of mind related to work, and it can be distinguished through enthusiasm, sincerity, and immersion. Enthusiasm refers to high levels of energy and intellectual flexibility during work, and sincerity refers to high integration into work, defending the organization, inspiration, pride, and challenge, while being fully focused and absorbed in the work, so that the employee's time passes quickly and finds it difficult to separate himself from work.

2.5.4 Employee Engagement: It refers to employees' integration, satisfaction, and enthusiasm for their jobs and the work entrusted to them.

2.6 Job-Involvement Success Factors

To ensure the success of the job-involvement, the following must be available:

2.6.1 Availability of the individual's ability and desire to work.

2.6.2 The presence of a value framework among working people that encourages the individual to immerse himself in the job.

2.6.3 The personal differences between individuals must be considered in terms of their education level, job level, gender, and strength of need and control.

2.6.4 The job's fit with his qualifications and personality (Al-Wahidi, 2013).

2.7 The Importance Of Job-Involvement

Sakovska (2013: 14) summarized the importance of job-involvement as follows:

2.7.1 Organizational Effectiveness

Job involvement has a positive impact on organizational performance indicators (customer satisfaction, productivity, profitability, employee turnover, job security).

2.7.2 Individual Labor Production

Global levels of job-involvement help working individuals to take initiatives and pursue learning goals, as working individuals who are busy with the work of new knowledge develop and respond to opportunities, break out of the norm, and are preoccupied with advice, in addition to high levels of job satisfaction and high commitment to the organization.

2.7.3 Retention of Employees

Several studies have found evidence showing the extent of the impact of job-involvement on the intentions of working individuals to leave work. In a study conducted by the consulting organization (Towers & Perrin, 2005), it was found that 71% of the study sample had no desire to leave work because of their high immersion towards their jobs.

2.7.4 Organizational Defense

Working individuals who are busy in their jobs may be lawyers and defenders of their organizations, and this means that they will be more willing to recommend their organizations as suitable places to work or recommend the products and services of the organization. This in turn will help the organization through free marketing practiced by their members towards it, as well as improve public awareness towards the organization.

2.7.5 Customer Retention

When working individuals feel their importance and their influence in the organization, this effect will be reflected in the quality of their work and customer satisfaction.

2.7.6 Organizational Change That Is Successful

Employee engagement plays an important role in implementing organizational change. Individuals who have a high level of engagement will be interested and influential in making the organization able to implement change and adapt to environmental changes.

2.7.7 Psychological Results

Many studies indicate that the relationship between working individuals and employers has become of a material nature, and therefore, this change in the relationship pattern will generate frustration for many working individuals and, consequently, their loss of confidence towards their organizations, and questions will be raised about the significance of their work. Here, job involvement can play an important role in helping them overcome this condition and providing them with opportunities to invest in their psychological state.

2.7.8 Good Health And Well-Being

Job-involvement can affect positive feelings and health. In a study conducted by Gallup, the study found that 62% of working individuals who are busy in their jobs have a positive impact on their health level (Sakovska, 2013).

Many previous studies have focused on job-involvement and its indicators. In a recent study, Kusumayuda & Maryati (2021) aimed to analyze employee job stress, employee turnover intention, and job involvement. This study's object was PKU Muhammadiyah Hospital in Yogyakarta, and the subjects were nurses of PKU Muhammadiyah Hospital as many as 125 people. Data analysis techniques employed Descriptive Analysis and Structural Equation Modeling. The study's results descriptively showed that nurses' stress levels were high, nurses' work engagement levels were low, and nurses' desire to switch was high. Quantitative study results revealed that: Job stress had a significant effect on job involvement, Job involvement significantly affected turnover intention, Job stress had a significant influence on turnover intention, and there was indirect impact between work stress and turnover attention mediated by job involvement.

The study of Elahi & Mansouriet (2021) aimed to determine the effect of education based on human care theory on nurses' caring behaviors and job involvement. The data was collected from 110

intensive care unit nurses from Nemazee Hospital, Shiraz, Iran, who were randomly allocated to control and intervention groups. The intervention group received a 6-h workshop based on Watson's human care theory using a collaborative and role-playing approach and a 1-month follow-up period through presenting weekly preplanned care and caregiving scenarios. The control group received routine hospital training. Majority of the participants were married women and had Bachelor of Science degree in Nursing. The participants' age ranged from 21 to 52 years. After the education, caring behaviors and job involvement scores significantly increased in the intervention group compared to the control group ($p < 0.001$).

Purwork *et al.* (2020) determined the effect of self-efficacy, job involvement, the stress of work burnout on nurses of International Hospitals at Jakarta. The object of this research is nurses who work at International Hospitals. This study was conducted on 129 respondents using a quantitative descriptive approach. The results of this study show that the workload variable has a significant negative effect on the stress of work, job involvement has a significant positive effect on the stress of work and burnout has a significant positive effect on the stress of work. The approach used in this study is the Structural Equation Model (SEM) with a Smart-PLS analysis tool. Therefore, the results of this research test state that there is a joint effect between self-efficacy, job involvement and burnout variables on the stress of work at international hospitals.

In a descriptive comparative study of a nurse's job involvement and its relationship to continuing in her current employment, Grov *et al.* (2020) looked into how involved nurses are in their jobs and whether they plan to stay in their current positions. He employed a descriptive comparative study with a cross-sectional design in this research. The study included 297 nurses from the Community Health Service and the Specialist Health Service, and nurses in the Community Health Service. Nurses in community health services have more permanent positions than nurses in specialist health services, indicating that community health services have the same opportunities as specialist health services to keep nurses in their existing positions.

In another study Janati *et al.* (2019) evaluated the relationships between organizational commitment, job satisfaction, organizational justice, and self-efficacy among nurses. This study was conducted on 401 Iranian nurses randomly selected through two-stage cluster sampling. Self-administered questionnaires were used to collect data, and the results show that organizational commitment had significant positive relationships with self-efficacy and job satisfaction, while

organizational justice had a significant positive relationship with job satisfaction. Moreover, job satisfaction had a mediating role in the relationship between organizational justice and organizational commitment.

The study of Khosravizadeh *et al.* (2018) aimed to measure the role of organizational climate in job involvement of nursing staff. The present descriptive analytical study was done in 2017. To randomly select a specific proportion of nurses from each of Qazvin teaching hospitals, stratified sampling was used. In total, 340 nurses were selected. Data were collected using 3 questionnaires: Halpin and Kraft Organizational Climate Questionnaire, Job Involvement Questionnaire (Kanungo), and Allen and Myer Organizational Commitment Questionnaire. For data analysis, confirmatory factor analysis and structural equation modeling were used applying AMOS-24 software. The results of path analysis showed the effect of organizational climate on the nurses' job involvement. Moreover, organizational climate influenced organizational commitment through the mediation of job involvement. According to values obtained for degree of freedom based on chi-square, goodness-of-fit index, root mean square error of approximation, and comparative fit index were in the defined range; therefore, the validity of the conceptual model was approved.

Finally, Sung & Lee (2017) provided basic data that required to improve nursing resource management and nurse organizations. The data was collected using a questionnaire. The participants were 294 nurses who were working at eight hospitals in Korea. Data analysis was done using t-test, ANOVA, Scheffe test, Pearson correlation coefficient, and step-wise multiple regression analysis with SPSS. The Results show there were significant correlations between self-leadership, clinical competence, job satisfaction, and job involvement. Job satisfaction, self-leadership, length of clinical career, and length of career in the current department were all factors influencing job involvement. Satisfaction was the most influential factor, with an explanatory power of 41%. at the end. Findings show that to strengthen job involvement, identification and management of factors that affect job satisfaction and self-leadership are required and relevant training and strategies should be developed and used.

To sum up, most of the previous studies used a descriptive comparative study with a cross-sectional like (Mansouri *et al.*, 2021), (Grover *et al.*, 2020), (Janati *et al.*, 2019), (Kaur *et al.*, 2019), and (Sung & Lee, 2017). However, some of these studies used structural Equation Modeling as we seen in (Kusumayuda & Maryati, 2021), (Purwoko *et al.*, 2020), and (Khosravizadeh *et al.*, 2018).

In the current study, a quantitative approach, using a questionnaire were used. The study considered the first one, which proposes job involvement among health care providers in the Palestinian society, to the author's knowledge.

3. Statement Of The Problem

Many of health associations face many challenges in reaching a great level in job involvement of their employees. For this reason, these organizations use a lot of means and spend a great quantity of money just to train and habilitate the employees for a greater level. They also give them an amazing opportunities and makings just to keep up the best level in self-management of their own employees. Based on the previous explanation, the study aims at investigating job involvement among health care providers in the Palestinian society, exploring the factors that contributed to job involvement, and exploring the demographic breakdown over job involvement among health care providers, with the aim of identifying any differences.

4. Significance

Previous studies have shown an association between work outcomes, work quality, organizational efficiency and the employees' job involvement. Job involvement would not only result in timely presence at work, employees' feeling of success in their job, and a sense of goal attainment and optimism about the organization but also would lead to the belief of congruency between personal and organizational goals. Some jobs are more likely to provide both internal and external motivations to enhance peoples' job involvement (Gholipoor *et al.*, 2007).

We have done this research to increase knowledge about it. Therefore, the importance of the study is defining job involvement and knowing the level of job involvement among health care providers at Bethlehem and Hebron Governorates.

This study is one of the modern topics required during the last ten years because of its role in achieving human development. And it's the first of its kind to the researcher knowledge and one of the leading studies in Palestinian development.

5. Objectives

- 5.1 Exploring the job-involvement level among health care providers in the Palestinian society.
- 5.2 Addressing the indicators of job-involvement among health care providers in the Palestinian society?
- 5.3 Exploring the demography breakdown over job-involvement among health care providers with the aim of identifying any statistical significant differences.

6. Questions

The study aims to answer the following questions:

- 6.1 What is the job-involvement level among health care providers in the Palestinian society?
- 6.2 What are the indicators of job-involvement among health care providers in the Palestinian society?
- 6.3 Are there any statistically significant differences in job-involvement among health care providers according to gender, age, qualification, professional experience, authority, and profession.

7. Hypotheses

Taking into consideration, the set objectives, questions and variables of the study, the study addresses the main hypotheses:

- 7.1 There are no statistically significant differences at $\alpha \leq 0.05$ in the level of job involvement among health care providers according to gender.
- 7.2 There are no statistically significant differences at $\alpha \leq 0.05$ in the level job involvement among health care providers according to qualification.
- 7.3 There are no statistically significant differences at $\alpha \leq 0.05$ in the level of job involvement among health care providers according to authority.

7.4 There are no statistically significant differences at $\alpha \leq 0.05$ in the level of job involvement among health care providers according to profession.

7.5 There is no statistically significant correlation at $\alpha \leq 0.05$ between age and level of job involvement among the health care providers.

7.6 There is no statistically significant correlation at $\alpha \leq 0.05$ between professional experiences and level of job involvement among the health care providers.

8. Definition of Terms

8.1 Job involvement: It is the degree to which the individual integrates with the job he performs and senses its importance, and therefore the matter - here - is linked to both the mental and emotional aspects. And its affected by factors like the emotional level, and the positive impact on the individual like happy feeling and high self-esteem, on the other hand when the level of involvement decrease, the negative impact on the individual's feelings becomes clear, such as anxiety, distress, depression, and a sense of despair (Al-Maghribi, 2004: 14 Khan *et al.*, 2011).

8.2 Self-management: They are the ways that help one take advantage of his time, exploit his skills and invest his energies in achieving his goals, and find a balance in his life between desires, goals and duties, as stated in a study (Al-Qahtani, 2001).

8.3 Organizational commitment: Organizational commitment is defined as the relative strength of an employee's identification with and involvement in a particular organization (Mowday *et al.*, 1979).

9. Methodology And Design

9.1 Approach

The study uses a quantitative approach, using a questionnaire, which is appropriate to the exploratory nature of the research.

9.2 Population and Sampling

The target population consists of health care providers in Hebron and Bethlehem Governorates, in the West Bank during 2022, which includes 8968 persons; the population is comprised of 5403 males and 3565 females, as indicated in table no. 3.1 (Palestinian Central Bureau of Statistics, 2022).

Three hundred sixty-eight health care providers were stratifiedly selected, based on gender and Governorate. The sample population consists of health care providers working in Hebron and Bethlehem Governorates at the time of the survey. The sample size was calculated using the sampling web of <http://www.surveysystem.com/sscalc.htm>, sample size calculator, with a margin error of 0.05, as indicated in table no. 3.1, and appendix (A).

9.3 Instrumentation

The index of a 25-item scale was used to measure job-involvement among health care providers, that was developed by the research team, based on Lodahl & Kejner job-involvement scale, which was originally developed in 1965, taking into consideration the cultural appropriateness in the Palestinian society. A 5-point Likert scale (ranging from always to never) was used to measure responses. The survey was conducted through face-to-face interviews in Hebron and Bethlehem Governorates, in the West Bank. The sampling survey instrument sought background information about participants' which included gender, age, qualification, professional experience, authority, and profession, appendixes (A, B).

9.3.1 Instrument Validity

Validation of the instrument proceeded in two distinct phases. The initial phase involved a group of referees and expert arbitrators, who provided some comments on the tool. The second phase involved the implementation of a pilot study (N=20) to validate the survey using exploratory factor analysis. Factor loading for all items exceeded 0.60 (0.64 to 0.87), which means that those items are suitable in measuring every item of job-involvement among health care providers, as indicated in table no. 3.8.

9.3.2 Instrument Reliability

The reliability was tested using Cronbach's Alpha and Guttman Split-Half Coefficients to ascertain reliability and consistency of the survey. Cronbach's Alpha and Guttman Split-Half for the survey instrument was 0.87 and 0.86, respectively, indicating very good reliability and consistency, as indicated in table no. 3.9.

9.4 Sample Socio-demographic Characteristics

The demographic breakdown of the participants was based on gender, age, qualification, professional experience, authority, and profession. In total, three hundred sixty-eight health care providers were conducted. Respondents were between 21 and 60 years of age (M 30.45, SD 8.27). Males represented 60.3% of the participants, while the remaining 39.7% were females; almost 82.9% of the participants were well-educated (Bachelor or above). Non-Governmental participants represented 59.5%, while the remaining 40.5% were governmental employees; the majority were nurses (60.6%); and their professional experience was between 1 and 35 years (M 7.15, SD 7.22), as indicated in tables' no. 3.2-3.7.

9.5 Data Analysis

The questionnaire items were rated on a 1–5 Likert scale (1=Never to 5=Always), the highest score indicates a high level of job-involvement among health care providers. Descriptive statistics gauged level of job-involvement among the sampled population. Additionally, the following statistical techniques were measured: Regression, T test, One-way analysis of variance, Tukey test, Cronbach's Alpha, Guttman Split-Half Coefficient and Factor Analysis using SPSS.

10. Findings

10.1 Job-Involvement among health care providers?

The mean score of job-involvement among health care providers as reported by the sample of three hundred sixty-eight participants was moderate (M 3.31, SD 0.44). More than half of the participants (66.2%) scored a moderate level of job-involvement, as indicated in table no. 4.1.

10.2 Job-involvement indicators among health care providers?

Furthermore, findings revealed the indicators of job-involvement among health care providers ranked in a descending order as follows, “I work with all my capabilities to achieve the required tasks in my work” (M 4.20, SD 0.98); “I usually go to work early to get things ready” (M 4.16, SD 0.93). “I work hard to advance my work” (M 4.07, SD 1.04); “I feel my job is part of my life” (M 3.97, SD 0.98), and “I feel belonging to my job” (M 3.92, SD 0.99).

Additionally, health care providers indicated that they give a lot of attention to their job (M 3.86, SD 0.98); they actively accept their job (M 3.74, SD 1.06), they find themselves at their job (M 3.73, SD 1.14); they like people to talk about their accomplishments at work (M 3.51, SD 1.16); and they put the interests of the work ahead of their personal interests (M 3.50, SD 1.22), as indicated in table no. 4.2.

10.3 Differences in job-involvement among health care providers according to demographic breakdown?

Furthermore, the study explored the demographic breakdown over job-involvement among health care providers with the aim of identifying any differences. Findings showed that qualification and profession do not show any significant differences, as indicated in tables' no. 4.5-4.8. However, it was found that gender, authority, age, and professional experience were significant variables, as indicated in tables' no. 4.3-4.4, 4.9.

In relation to gender, the differences were in favor of the male participants (M 3.38, SD 0.42) compared to (M 3.21, SD 0.46) for the female participants: T-test value was (3.585, P=0.000), as indicated in table no. 4.3. As for the authority, the differences favored the nongovernmental participants (M 3.38, SD 0.40), compared to (M 3.21, SD 0.49) for the governmental participants: T-test value was (3.589, P=0.000), as indicated in table no. 4.4.

Finally, findings indicated that there is a statistically significant inverse correlation between age and job-involvement among health care providers, Beta-value was (-0.557, P=0.000), however, a statistically significant positive correlation was found between professional experience and job-involvement among health care providers, Beta-value was (0.553, P=0.000), as indicated in table no. 4.9.

11. Conclusion And Recommendations

The study contributes towards explaining importance of employee involvement in job. The findings also suggested that management might be able to increase the level of job involvement with increasing the inter-actions with health care providers in staff meetings. health care provides could be interviewed to determine their perceptions of manage-men’s ability to address these issues.

Therefore, the higher-level managers of the health care society are suggested to implement some strategies to increase the employees’ job involvement and organizational commitment.

Creating an effective feedback system, holding meetings for the employees to express their views, establishing programs to improve the employees skills in decision-making and problem solving, holding work groups and committees to strengthen the team working, providing workshops on communication skills for the employees, supervisors and managers, and increasing the employees involvement in organizational policy making are among the applicable strategies for promoting the employees organizational commitment and job involvement.

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13. Appendixes

Table no. (3.1). Distribution of the study population and sample by governorate and gender

Governorate	Gender	Population	Sample
Bethlehem	Males	1540	63
	Females	1385	57
Hebron	Males	3863	159
	Females	2180	89
Total		8968	368

Table no. (3.2). Sample distribution by gender

Gender	N	Percent %
Male	222	60.3
Female	146	39.7
Total	368	100

Table no. (3.3). Sample distribution by qualification

Qualification	N	Percent %
Diploma or below	63	17.1
Bachelor	269	73.1
Master or above	36	9.8
Total	368	100

Table no. (3.4). Sample distribution by profession

Profession	N	Percent %
Doctor	59	16.0
Nurse	223	60.6
Administrative	86	23.4
Total	368	100

Table no. (3.5). Sample distribution by authority

Authority	N	Percent %
Governmental	149	40.5
Non-Governmental	219	59.5
Total	368	100

Table no. (3.6). Sample distribution by age

Variable	N	Min.	Max.	Mean	Std. Deviation
Age	368	21	60	30.45	8.27

Table no. (3.7). Sample distribution by experience

Variable	N	Min.	Max.	Mean	Std. Deviation
Experience	368	1	35	7.15	7.22

Table no. (3.8). Factor analysis of job-involvement scale among health care providers

No.	Items	Extraction
1.	I usually go to work early to get things ready	0.64
2.	I feel very happy in my job	0.68
3.	I Avoid taking on long duties and responsibilities at the same time	0.64
4.	I get depressed when I fail at my job	0.63

5.	I lie down at night thinking about the next day	0.67
6.	I will stay overtime to finish my job, even if I don't get paid for it	0.65
7.	The greatest satisfaction in my life comes from my job	0.78
8.	Sometimes I don't find anything to do in my job	0.64
9.	The amount of work I do is too much	0.63
10.	I put the interests of my work ahead of my personal interests	0.67
11.	I would like to change my current job	0.67
12.	I work hard to advance my work	0.64
13.	I am looking forward to the end of work	0.64
14.	I work with all my capabilities to achieve the required tasks in my work	0.78
15.	I love my job more than my colleagues	0.69
16.	I feel that some of the tasks I do, do not fit my job	0.64
17.	I feel belonging to my job	0.66
18.	The allotted working time does not allow me to do everything that is expected of me	0.69
19.	I like people to talk about my accomplishments at work	0.68
20.	I actively accept my job	0.86
21.	I give a lot of attention to my job	0.87
22.	It annoys me that I sacrifice my free time in order to accomplish the requirements of my work	0.68
23.	I feel my job is part of my life	0.64
24.	I keep thinking about my job even after I finish work	0.68

25.	I find myself at my job	0.65
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Table no. (3.9). Reliability of job-involvement scale among health care providers

Model	No. of items	Alpha
Cronbach's Alpha	25	0.87
Guttman Split-Half	25	0.86

Table no. (4.1). Number, mean, standard deviation, and percentage of job-involvement among health care providers

Variable	N	Mean*	Std. Deviation	Percent %
Job-involvement total score	368	3.31	0.44	66.2

*Mean out of 5 points.

Table no. (4.2). Mean scores, standard deviation, and percentage for the indicators of job-involvement among health care providers ranked in a descending order

Job-involvement indicators	Mean*	Std. Deviation	Percent %
I work with all my capabilities to achieve the required tasks in my work	4.20	0.98	84.0
I usually go to work early to get things ready	4.16	0.93	83.2
I work hard to advance my work	4.07	1.04	81.4
I feel my job is part of my life	3.97	0.98	79.4
I feel belonging to my job	3.92	0.99	78.4
I give a lot of attention to my job	3.86	0.98	77.2
I actively accept my job	3.74	1.06	74.8
I find myself at my job	3.73	1.14	74.6
I like people to talk about my accomplishments at work	3.51	1.16	70.2

I put the interests of my work ahead of my personal interests	3.50	1.22	70.0
I am looking forward to the end of work	3.48	1.12	69.6
The amount of work I do is too much	3.46	1.10	69.2
I feel very happy in my job	3.27	1.11	65.4
I will stay overtime to finish my job, even if I don't get paid for it	3.26	1.29	65.2
It annoys me that I sacrifice my free time in order to accomplish the requirements of my work	3.26	1.12	65.2
I get depressed when I fail at my job	3.22	1.18	64.4
I keep thinking about my job even after I finish work	3.17	1.24	63.4
I lie down at night thinking about the next day	3.06	1.28	61.2
I feel that some of the tasks I do, do not fit my job	3.04	1.16	60.8
The greatest satisfaction in my life comes from my job	3.03	1.20	60.6
The allotted working time does not allow me to do everything that is expected of me	3.00	1.07	60.0
I love my job more than my colleagues	2.93	1.14	58.6
I Avoid taking on long duties and responsibilities at the same time	2.86	1.19	57.2
I would like to change my current job	2.74	1.35	54.8
Sometimes I don't find anything to do in my job	2.17	1.15	43.4
Total	3.31	0.44	66.2

***Mean out of 5 points.**

Table no. (4.3). T-test for the differences in job-involvement among health care providers according to gender

Gender	N	Mean*	Std. Deviation	DF	T-value	Sig.
Male	222	3.38	0.42	366	3.585	0.000
Female	146	3.21	0.46			
Total	368	3.31	0.44			

*Mean out of 5 points.

Table no. (4.4). T-test for the differences in job-involvement among health care providers according to authority

Authority	N	Mean*	Std. Deviation	DF	T-value	Sig.
Governmental	149	3.21	0.49	366	-3.589	0.000
Non-Governmental	219	3.38	0.40			
Total	368	3.31	0.44			

*Mean out of 5 points.

Table no. (4.5). One-way analysis of variance for the differences in job-involvement among health care providers according to qualification

Source	DF	Sum of squares	Mean square	F-value	Sig.
Between groups	2	0.238	0.119	0.588	0.556
Within groups	365	73.760	0.202		
Total	367	73.997	-----		

Table no. (4.6). Mean scores and standard deviation for the differences in job-involvement among health care providers according to qualification

Qualification	N	Mean*	Std. Deviation
Diploma or below	63	3.37	0.44
Bachelor	269	3.30	0.43

Master or above	36	3.29	0.57
Total	368	3.31	0.44

*Mean out of 5 points.

Table no. (4.7). One-way analysis of variance for the differences in job-involvement among health care providers according to profession

Source	DF	Sum of squares	Mean square	F-value	Sig.
Between groups	2	1.003	0.501	2.507	0.083
Within groups	365	72.995	0.200		
Total	367	73.997	-----		

Table no. (4.8). Mean scores and standard deviation for the in job-involvement among health care providers according to profession

Profession	N	Mean*	Std. Deviation
Doctor	59	3.39	0.49
Nurse	223	3.27	0.42
Administrative	86	3.37	0.46
Total	368	3.31	0.44

*Mean out of 5 points.

Table no. (4.9). Regression coefficients between age, professional experience and job-involvement among health care providers

Variables	N	Beta	Sig.
Age	368	-0.557	0.000
Professional experience	368	0.553	0.000

R Square=0.137

Appendix (A). Sample Size Calculator

Research Aids

Research Aids

- Sample Size Calculator
- Sample Size Formula
- Significance
- Survey Design
- Correlation

"Best Survey Software"



TopTenReviews selected The Survey System as the Best Survey Software.

"The Survey System gains our highest marks for survey creation, analysis and administration methods, making it the best survey software in our ranking... This is the only product in our lineup that offers all features and tools we considered. For these reasons, The Survey System earns our TopTenREVIEWS Gold Award." [Read More](#)

Sample Size Calculator

This Sample Size Calculator is presented as a public service of Creative Research Systems [survey software](#). You can use it to determine how many people you need to interview in order to get results that reflect the target population as precisely as needed. You can also find the level of precision you have in an existing sample.

Before using the sample size calculator, there are two terms that you need to know. These are: **confidence interval** and **confidence level**. If you are not familiar with these terms, [click here](#). To learn more about the factors that affect the size of confidence intervals, [click here](#).

Enter your choices in a calculator below to find the sample size you need or the confidence interval you have. Leave the Population box blank, if the population is very large or unknown.

Determine Sample Size

Confidence Level: 95% 99%

Confidence Interval:

Population:

Sample size needed:

CONFLICTS OF INTEREST

The authors declare no conflicts of interest regarding the publication of this paper.

HOW TO CITE THIS PAPER?

Al-Hour, R., Ishtay, R., Hroub, D., Abu Awwad, L., AL-Khateeb, N. & Abu Yaqoub, S. (2022). Job-Involvement Among Health Care Providers In The Palestinian Society. International Humanities Studies, 8(4), 41-75.

ABOUT THE AUTHORS

Rasmia Al-Hour, Renad Ishtay, Donia Hroub, Lana Abu Awwad, Nadeen AL-Khateeb & Shorouq Abu Yaqoub, Bachelor of Science in Nursing, Department of Nursing, Faculty of Health Professions, Al-Quds University, Main Campus, Jerusalem- Abu Dies, Palestine. Email: roro212200@gmail.com