



QUALITY OF LIFE OF IT EMPLOYEES: A DEEPER PERSPECTIVE

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ABSTRACT **Background:** In the present day, work stress and its effect on the quality of life (QoL) among individuals is a major emerging mental health problem. With factors like the pandemic and working from home, workers in the IT sector have been finding it very hard to cope with the problems associated with finding an adequate work-life balance. Additionally, not having a psychologist or a counsellor in their workplaces to help them ventilate or talk about their issues in a comfortable space and time has been difficult. Aim: To understand the overall QoL of IT employees and if it varies based on their age, work experience, and sex. **Method:** This study aims to understand the quality of life among IT employees (N=60) and compare the scores based on their years of experience as well as differences between sex. The study also aims to understand what difficulties they are facing and what they think could be the solution to these difficulties. WHO-Quality of Life Questionnaire along with a few open-ended questions were asked to the participants to assess the variables. Individuals above 21 years of age who are currently working in the IT industry were approached for the study. ANOVA was employed on SPSS to tabulate the results. **Results and Conclusion:** The study reveals that environmental quality of life correlates with age of the individual and years of work experience. Older individuals and individuals with more than 15 years of work experience have better quality of life. Physical health, psychological health and social relationships does not correlate with gender, age, marital status or years of work experience.

KEYWORDS : IT employees, quality of life, work-life balance, job stress

INTRODUCTION

Quality of life refers to the degree to which an individual's experiences in life can satisfy their physical and psychological wants and needs. Many times people misunderstand quality of life as being similar to life satisfaction or even well-being. However, quality of life includes various other aspects as well. Quality of life includes both subjective and objective aspects. The objective aspects look at how society has prefixed categories for what all an individual needs to have a good quality of life which could be monetary, materialistic, happiness, a good family, etc. the subjective dimension on the other hand assesses what the individual believes will give them a good quality of life (Felce & Perry, 1995). This is not based on any pre-fixed dimension. It can be judged based on various viewpoints which would vary across individuals. The various domains in the quality of life as defined by Ruzevicius in 2014 include the physical state, psychological state, material state, education and self-development, social relation, self-expression possibilities and leisure, as well as safety and the environment (Ruzevicius, 2014).

In the current day and age, work stress has stemmed to be one of the most prevalent problems (Ruzevicius, 2014). There is an increase in the pressure to earn more and with that, there is also a change in the perception of social roles of people. In the present times, there is an increased number of working mothers, single parents and dual-income couples which was not that common 10-15 years ago. Due to this, there is also an increase in the pressure to balance work life with family life and in most cases the family life is at stake (Hämmig & Bauer, 2009). The increase in workload has led to a decrease in the work-life balance among individuals especially those in IT companies with extended work hours and screen exposure.

Based on the theory of quality of life, there are three major domains of QoL (Ventegodt et al., 2003):

1. The subjective quality of life is an individual's perception of their own life in terms of their satisfaction and happiness
2. The existential quality of life means the level of respect and harmony within..
3. The objective quality of life means how one's life is perceived by the outside world influenced by the culture we live in. It reveals about a person's ability to adapt to the cultural values i.e., social status or symbols

The impact of work life imbalance and COVID scenario disrupted the psychological and physical health of many employees affecting their QoL. Therefore, the identification of employees at high risk for health problems and psychological difficulties would allow the employer to

more effectively target personalized wellness interventions to these high-risk employees with significant health problems and poor quality of life (Clark et al., 2011).

This study will help understand if there is a significant correlation between quality of life of IT employees on the four major domains of QoL: Physical Health, Psychological, Social Relationships and Environment along with their age, marital status, sex and work experience. The open-ended questions would allow us to target the exact problems faced by employees and their expectations of how mental health professionals can help to combat these issues effectively.

METHOD

Participants

Participants were a sample of 50 individuals who are employees in any IT company above 21 years of age who were recruited online. Participants who filled out the questionnaire were asked to pass it on to others they know who fit the criteria. Only individuals who have been working in any IT company, above 21 years of age for any period were selected for this study. Of the 50 individuals who participated in the study, 34 were male, and 16 were female.

Procedure

The participants for the study were identified using the method of snowball sampling. One questionnaire consisting of all scales was created using Google Forms. The initial set of participants was sent the Google Form through emails and was asked to pass it on to others who fit the criteria. All data were collected from December 2022 to January 2023. The form contained necessary demographic details like name (initials), age, sex, occupation, number of years in the IT company and marital status. It also included an informed consent sheet that delineated all the ethical guidelines that have been considered in this study. This was followed by the WHO-Quality of Life Questionnaire-BREF (WHOQOL-BREF) which contains 26 questions along with three open-ended questions to assess the difficulties employees are facing in terms of their quality of life and how mental health professionals can take part in eliminating these difficulties.

No monetary compensation was provided for completing the scale. The participants were debriefed immediately after the data collection process, and any negative feelings, if they arose, were provided proper closure. The Google Form took approximately 10-15 minutes to complete, and all instructions were explicitly mentioned along with the scales.

Measures

WHOQOL-BREF (World Health Organisation, 2012). The World

Health Organisation Quality of Life-BREF Questionnaire contains a total of 26 questions that assess four facets of an individual's perceived or subjective quality of life. These four dimensions are physical health, psychological health, social relationships, and the environment. It is cross-culturally valid and available in multiple worldwide languages. It is self-rated, and the individual must consider a time frame of two weeks while responding. Higher scores indicate higher quality of life and domain-wise scoring is also possible. All responses are scored on a five-point Likert scale.

Open-ended Questions: Along with the questionnaire, three open-ended questions were asked of the participants which were as follows:

1. What are the barriers you face to managing the problems at your workplace?
2. How do you think you can manage these difficulties effectively?
3. What are your expectations or suggestions for mental health professionals to help with your difficulties?

Data Analysis

The data was analysed using the SPSS software. Descriptive statistics was employed for all variables followed by Pearson's Product Moment Correlation for depicting correlation between age and QoL, Independent sample t-test for sex and marital status with QoL and ANOVA for work experience and QoL as will be further delineated in the results section. The open-ended questions were summarised and mentioned in the discussion section.

RESULTS & DISCUSSION

The descriptive analysis (Table 1) for the socio-demographic variables of the study revealed that the mean age of the individuals who participated in the study was 43 years, the majority of them male (68%) and a majority of them married (68%).

Table 1: Socio-demographic characteristics

Variables	Group	N	%
Age			
Sex	Male	34	68%
	Female	16	32%
Marital Status	Married	34	68%
	Unmarried	16	32%
Work Experience	Less than 5 years	11	22%
	5-10 years	6	12%
	10-15 years	3	6%
	More than 15 years	30	60%

The correlation analysis (Table 2) revealed a significant positive correlation between the age of the person and environmental quality of life ($r=0.369^{***}$, $p<0.01$). All dimensions of quality of life had significant positive correlations with each other. The independent sample t-test analysis showed that there were no significant differences between the groups based on marital status $t=48.0$ (Student's statistic), p value = 0.110, $p>0.05$ and based on sex $t=48.0$ (Student's statistic), p value = 0.484, $p>0.05$.

Table 2: Depicting the correlation between age and QoL

	Physical Health	Psychological Health	Social Relationships	Environment
Age	0.276	0.251	0.251	0.369**

* $p<.05$; ** $p<0.01$

The ANOVA analysis (Table 3) revealed that there are significant differences between the groups based on years of work experience and environmental quality of life ($F=3.99$, $p<0.01$). Post hoc testing was performed based on Tukey HSD, the findings indicated that there were significant differences based on Environmental QoL between less than 5 years and more than 15 years with an observed mean difference of -3.12 between these two groups (i.e., less than 5 years and more than 15 years work experience).

Table 3: Depicting ANOVA analysis of years of work experience and QoL

	F	df1	df2	P
Physical Health	1.26	3	46	0.299
Psychological Health	1.68	3	46	0.184

Social Relationships	1.68	3	46	0.184
Environment	3.99	3	46	0.013**

$p<.05$; ** $p<0.01$

Barriers to the quality of life as identified by the participants include maybe balancing work and family life, unable to multitask, not being able to prioritise tasks effectively, and long working hours. They also mentioned a lack of time to relax and enjoy, unable to meet friends, no time for self, uncertainty about the future, a fast-changing environment and an inability to control distractions.

An increase in age and years of work experience revealed that there is a significant increase in the environmental quality of life but not in terms of physical health, psychological health and social relationships. Older individuals would be more financially secure and have higher levels of physical security, freedom, a better home environment, better physical transportation and access to improved leisure activities as compared to younger individuals. These are all dimensions of environmental quality of life. The environmental barriers identified by them could be combatted better in old age and with job security.

Another factor contributing to this could be that since older adults may be spending more time with family and living with them rather than living alone which contributes to a better quality of life (Greenhaus et al., 2003). This could be due to better economic stability at that age and due to a better position in their work life as well.

However, as all IT employees have similar job responsibilities and work timings and lifestyle, their age or work experience might not be correlating with the other facets of QoL. People of all age groups seem to be having difficulty with their physical pain, sleep, energy levels, negative feelings, body image, and personal relationships.

The results also revealed that both sexes and both married and unmarried people are experiencing the same levels of quality of life so even these do not act as supportive factors as there are rising dual-income couples and single working mothers in the present day as well (Hämmig & Bauer, 2009).

The participants mentioned that they could manage the barriers better through better planning, better access to mental health, prioritizing activities, more physical exercises, stress buster activities and separating professional and personal life. They also mentioned belief in self, going with the flow, staying positive and taking breaks when required.

CONCLUSION

In the present day and age where IT is becoming the sector which employs such a huge majority of the population, it is important to understand their health. This research helps us identify that employees in the IT sector no matter what their age, sex, marital status or number of years of work experience, are facing a toll on their physical, social and psychological quality of life.

Mental health professionals may need to investigate how we can contribute to help them receive the support that they need. The long working hours, lack of work-life balance, increased exposure to screen time, economic instability, and competitive environment may lead to this overall sense of dissatisfaction. The priority right now is raising awareness to reach out for help, helping them with a space for ventilation, conducting workshops and better access to professionals.

Future research should look at the prominent barriers to quality of life in this niche population and how these can be addressed by mental health professionals.

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