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THE RELATIONSHIP BETWEEN WORKAHOLICS WHIT ORGANIZATIONAL COMMITMENT AND ITS DIMENSIONS AND WORK-FAMILY CONFLICT AND ITS DIMENSIONS AMONG GOVERNMENT HOSPITAL DOCTORS SHIRAZ

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ABSTRACT

The aim of this study was to determine the relationship between organizational commitment and the dimensions of workaholics and work-family conflict and its dimensions among government hospital doctors Shiraz.The population of the research specialists with at least 5 years of experience and expertise in public hospitals serve Shiraz is formed.Cluster sampling was then that the first cluster (12 state hospitals) 3 clusters were randomly selected And these clusters altogether 85 members. Using the relevant questionnaire was evaluated.The research is correlation analysis of data Pearson correlation coefficient was used.According to the hypothesis, the coefficients of addiction to work with any of the dimensions of organizational commitment and the hypothesis was not confirmed there was no significant overall direction and dimensions except emotional factor is negative And in the expected direction, but the addiction to work positively correlated with work-family conflict and its dimensions were significantly related to that hypothesis is confirmed.

Keywords: addiction to work, organizational commitment, work-family conflict

INTRODUCTION:

A very important issue in modern literature, writers like Dickens's work is on people, Hardy, Lawrence and Zola modern industrial work on the characters and the relationships between individual men and women have stated.Even economists who tend to have the economic functions of the theory are not willing to do, what effect on individuals. The book "The

Wealth of Nations" by Adam Smith, who has studied more complex industrial applications, the relationship between car production and raises man (O,Brayan 2003).With all the good features to work described Nabhnjaryhayy world there is a person employed, those around him, the organization and even the whole society will suffer. The importance of job-oriented business, has wide implications (O,Brayan, 2003). One of these anomalies is addicting.Medical, including jobs that are associated with the upper outer and inner motivations and the addiction to work may be seen in people working in the profession. Workaholism, a condition that can be problematic for one enjoyable or boring and that some people consider it a disease. In many cases the term is used incorrectly in the case of energy, in addition to having a good relationship with colleagues, enjoy the activities of non-profit, adequate rest and a proper presence in the family and society, a lot of time for consider work. These people, normal people who are planning their difference from others.Since people addicted to work than other people more time to devote to work and work even when not engaged mentally with their work It should be expected that they have fewer opportunities to get into other activities and aspects of life, including family life and social relations; and as the most important issue for these people, labor,It is possible to get to work everything else in your life, from your daily routine elimination. Research in the field of organizational factors affecting the work-family conflict has shown the will to work can be adversely affected by their family (Geryzoak, 2000, 2002; Williams, 1994) and causes of work - are family.People who are very active, they always reflect job to do, and usually an organization in which they work, their commitment, we can expect that these people than other people, the addiction have more work (Burke, 2006).Ots (1971), users who need to work so much and they are so extreme that it may be a serious threat to health, happiness, personal, interpersonal relationships and social roles they created to define the is. However, in most cases, addiction to work in a high-paying job, but it may have been in those extreme sports, music and art, and it is also true pay (Gholipour, 2008).People who are working in organizations may, in addition to external rewards, incentives are also internal and that they may enjoy the work and the result of their involvement and their addiction is. Although the term addiction to work, today's specialists, but less research to improve the understanding of this phenomenon has taken place (Sanir and Harpaz, 2006).

RESEARCH METHOD:

Due to the fact that the relationship between workaholism simple organizational commitment and work-family conflict has been studied, the research is descriptive and co relational.

The population and study population

The population of the research specialists with at least 5 years of experience and expertise in public hospitals serve Shiraz is formed.Cluster sampling was then that the first cluster (12 state hospitals) 3 clusters were randomly selected. The clusters altogether 85 members.Visiting the hospitals selected questionnaires available to the doctor that if they were work experience includes, put that in the end we managed to restore 70 completed questionnaires.

Research tools

Addiction Test: The test for measuring addiction to work out the risk of addiction to using the oldest tool measurement is confirmed experimentally in 1992 by Robinson and have been tested.25 question test to detect addiction to work. The scale indication of participants' views about the work.

Work-family conflict questionnaire

To measure work-family measure of work-family conflict by Carlson et al (2000) used a 18-point questionnaire next six.

Statistical analysis methods

The results obtained were recorded in SPSS 20 software and to investigate the hypothesis, that the relationship between workaholics and work-family conflict and organizational commitment and its aspects and dimensions of the Pearson correlation coefficient was used.

RESULTS

Table 1: Distribution of respondents according to age

PERCENT	ABUNDANCE	AGE
%50	35	40-30
%35.7	25	50-40
%11.4	8	60-50
%2.9	2	70-60
%100	70	**Total**

Table 2: Distribution of subjects by gender

Percent	Abundance	Sex
41/4	29	**Female**
58/6	41	**Man**
100	70	**Total**

Table 3: frequency, mean, standard deviation, minimum and maximum scores of addiction to work, organizational commitment and work-family conflict among physicians

maximum score	Minimum scores	Standard deviation	Average	Abundance	Indicators / Variables	
86	41	9.97	58.49	70	**Total**	**Workaholics**
27	10	4.133	19.24	70	**According to the organization and the goal**	**Organizational Commitment**

21	8	2.489	16.09	70		
20	5	2.448	14.54	70		
68	29	8.020	49.87	70	**Emotional desire to join the organization**	**Organizational Commitment**
15	3	3.173	9.19	70	**Having a strong desire to always stay organized**	**Work-Family Conflict**
14	3	2.791	8.09	70		
12	3	2.283	7.79	70	**Total**	
14	3	2.211	7.67	70		
11	3	1.908	5.89	70	**Interferometer-based work in family time**	
12	3	2.306	7.40	70		
66	22	9.849	46.01	70	**Family interaction based on imposed work**	

Table 4: Distribution of scales belief in the organization and acceptance of goals

Scores		Many people earn these scores	Percent	Percent correct	Density
	10	**4**	**5.7**	**5.7**	**5.7**
	12	**2**	**2.9**	**2.9**	**8.6**
	13	**2**	**2.9**	**2.9**	**11.4**
	14	**3**	**4.3**	**4.3**	**15.7**
	15	**3**	**4.3**	**4.3**	**20.0**
	16	**4**	**5.7**	**5.7**	**25.7**
	17	**3**	**4.3**	**4.3**	**30.0**
	18	**6**	**8.6**	**8.6**	**38.6**
	19	**3**	**4.3**	**4.3**	**42.9**
	20	**5**	**7.1**	**7.1**	**50.0**
	21	**6**	**8.6**	**8.6**	**58.6**
	22	**15**	**21.4**	**21.4**	**80.0**
	23	**7**	**10.0**	**10.0**	**90.0**
	24	**4**	**5.7**	**5.7**	**95.7**
	25	**2**	**2.9**	**2.9**	**98.6**
	27	**1**	**1.4**	**1.4**	**100.0**
	Total	**70**	**100.0**	**100.0**	

Table 5: Distribution of subscales emotional desire to join the organization

Score		Abundance	Percent	Percent correct	Density
	8	**1**	**1.4**	**1.4**	**1.4**
	11	**1**	**1.4**	**1.4**	**2.9**
	12	**4**	**5.7**	**5.7**	**8.6**
	13	**4**	**5.7**	**5.7**	**14.3**
	14	**8**	**11.4**	**11.4**	**25.7**
	15	**7**	**10.0**	**10.0**	**35.7**
	16	**13**	**18.6**	**18.6**	**54.3**
	17	**11**	**15.7**	**15.7**	**70.0**
	18	**11**	**15.7**	**15.7**	**85.7**
	19	**6**	**8.6**	**8.6**	**94.3**
	20	**1**	**1.4**	**1.4**	**95.7**
	21	**3**	**4.3**	**4.3**	**100.0**
	Total	**70**	**100.0**	**100.0**	

Table 6: Distribution of scales having a strong desire to stay connected to the organization

Score		Abundance	Percent	Percent correct	Density
	5	1	1.4	1.4	1.4
	9	1	1.4	1.4	2.9
	10	3	4.3	4.3	7.1
	11	1	1.4	1.4	8.6
	12	7	10.0	10.0	18.6
	13	5	7.1	7.1	25.7
	14	11	15.7	15.7	41.4
	15	14	20.0	20.0	61.4
	16	16	22.9	22.9	84.3
	17	8	11.4	11.4	95.7
	18	1	1.4	1.4	97.1
	20	2	2.9	2.9	100.0
	Total	70	100.0	100.0	

Table 7: Distribution of sub-scale interference in family-based work time

Score	Abundance	Percent	Percent correct	Percent correct
3	4	5.7	5.7	5.7
4	1	1.4	1.4	7.1
5	1	1.4	1.4	8.6
6	15	21.4	21.4	30.0
7	5	7.1	7.1	37.1
8	5	7.1	7.1	44.3
9	1	1.4	1.4	45.7
10	8	11.4	11.4	57.1
11	3	4.3	4.3	61.4
12	21	30.0	30.0	91.4
13	2	2.9	2.9	94.3
14	3	4.3	4.3	98.6
15	1	1.4	1.4	100.0
Total	70	100.0	100.0	

Table 8: Distribution of sub-scale interference in family-based work imposed

Score	Abundance	Percent	Percent correct	Density
3	6	8.6	8.6	8.6
4	2	2.9	2.9	11.4
6	17	24.3	24.3	35.7
7	4	5.7	5.7	41.4
8	12	17.1	17.1	58.6
9	5	7.1	7.1	65.7
10	9	12.9	12.9	78.6
11	5	7.1	7.1	85.7
12	7	10.0	10.0	95.7
13	2	2.9	2.9	98.6
14	1	1.4	1.4	100.0
	70	100.0	100.0	

Table 9: Distribution of time-based work in a scale interference with family

Score		Abundance	Percent	Percent correct	Percent correct
	3	2	2.9	2.9	2.9
	4	2	2.9	2.9	5.7
	5	2	2.9	2.9	8.6
	6	17	24.3	24.3	32.9
	7	13	18.6	18.6	51.4
	8	15	21.4	21.4	72.9
	9	7	10.0	10.0	82.9
	10	3	4.3	4.3	87.1
	11	4	5.7	5.7	92.9
	12	3	4.3	4.3	97.1
	13	1	1.4	1.4	98.6
	14	1	1.4	1.4	100.0
	Total	70	100.0	100.0	

Table 10: Frequency Interference in behavior-based family

Score		Abundance	Abundance	Percent correct	Density
	3	5	7.1	7.1	7.1
	4	2	2.9	2.9	10.0
	5	3	4.3	4.3	14.3
	6	24	34.3	34.3	48.6
	7	2	2.9	2.9	51.4
	8	4	5.7	5.7	57.1
	9	17	24.3	24.3	81.4
	10	9	12.9	12.9	94.3
	11	1	1.4	1.4	95.7
	12	3	4.3	4.3	100.0
	Total	70	100.0	100.0	

First hypothesis: the addiction to work with commitment and that there is a significant dimension.

Table 11: Correlation between addiction to work with commitment and its dimensions

Organizational Commitment					
Normative	Commitment	Affective commitment	General	Row	Workaholics
-0.003	-0.138	0.047	-0.026	correlation coefficient	
0.983	0.291	0.701	0.416	Significance level	

The second hypothesis: the addiction to work with work-family conflict and its dimensions have a significant relationship.

Table 12: Correlation between workaholism and work-family conflict and its dimensions

Significant	Correlation	Work-Family Conflict	Ro
0/01	0/43	General	Workaholism
0/01	0/333	Time-based work interference with family	
0/01	0/340	Interference in family-based work imposed	
0/169	0/146	Work interference in family-based treatment	
0/05	0/249	Family interaction based on work time	
0/01	0/329	Family interaction based on imposed work	
0/05	0/293	Interference in the work of family-based treatment	

DISCUSSION AND CONCLUSION

Analysis and research hypotheses

As was observed between workaholism first hypothesis stated that there is a significant relationship with organizational commitment. The results indicate that there is no significant relationship between workaholism and organizational commitment. According to this table, between workaholism and later affective commitment, continuance commitment and normative commitment levels are not significant. The findings are inconsistent with the findings made in the past. The findings are inconsistent with the findings made in the past. Given the above, it may be said in this class, the institutional commitment that a person's attitude and the necessity to comply with the organization And the risk of addiction to the work of professional commitment is perhaps a special case in which there is a correlation between these two variables is In other words, doctors who are committed to the organization, but their unusually busy due to the lack of awareness of this problem is employment in private sector jobs (office) to occur. As the second hypothesis stated was observed between workaholism and work-family conflict and its dimensions have a significant relationship. The results above prove this hypothesis. These are the findings or results of Mam and Blass (2001), Robinson (2003), Rousseau and Waters (2006), Brady, Vevendavych (2008) and Kadkyoiks and the Hawak (2012) are in line. In this Dezfuli and colleagues (2013), in reviewing "the negative relationship between workaholism and work-family conflict and there is a significant positive relationship. The results Doksbery and Higgins (2006) showed that in the family, Conflict as a major source of stress for people with negative consequences such as increased health risks for working parents, depression, anxiety, moodiness and ill-treatment of his wife and children, was weaker than the duties of parents, Decreased life satisfaction and poorer mental health was linked. Work-family conflict as a major issue that affects both employees and employers is known. Robinson (2003) it argues that extreme working life in a culture that values productivity efforts, is inscribed on the rise. In such extreme cultural relationship between work and potential work-family conflict is clear and understandable. More research on work-family conflict is based on the assumption that Decreased life satisfaction and poorer mental health was linked. Work-family conflict as a major issue that affects both employees and employers is known Robinson (2003)

multiple roles (Chapman et al., 1994; Foran et al., 1992; Goff et al., 1990; Hammer et al., 1997) (As to the role theory (Katz and Kahn, 1978) and a lack of role (Goode, 1960) is shown) creates a greater pressure (Marquez, 1977). When work and family are in conflict areas and lead to conflict, the negative results of work and family, it is predictable. Finally, it should be noted that sometimes makes the atmosphere of national culture Issues and problems of work-family conflict is a failure, or failure to account Issues and problems of work-family conflict is a failure, or defect considered a possibility that certain cases of work-family conflict questionnaire with a response other than the fact that.

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