


Chapter 7

Organizational Culture and the Quality of Work Life of Healthcare Providers in Pakistan: A Systems–Based Perspective

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ABSTRACT

This chapter examines the perception of quality of work life (QWL) among healthcare providers in private-sector tertiary care hospitals in Karachi, Pakistan. The research involved 42 healthcare providers from three hospitals, using in-depth interviews. The findings revealed that QWL is a combination of a well-paying job, a good work-life balance, a comfortable working environment, supportive leadership, and family support. Organizational factors affecting QWL include fair monetary compensation, increased workload, lack of infrastructure, decision-making autonomy, and feedback from leadership. Emotional and practical support from colleagues

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significantly influences QWL by mitigating workplace stress. Family expectations were recognized as a factor influencing QWL, as healthcare providers frequently encounter challenges in fulfilling unrealistic demands. Initiatives to improve QWL include introducing confidential mental health services, support facilities, and personal development skills. The results are shown using the 5Ss framework: Self, Society, State, Systems, and Spirituality. Key themes include workload and burnout, leadership behavior, infrastructure gaps, peer and familial support, and a lack of recognition. The chapter proposes human-centered and policy-driven interventions to improve QWL in resource-constrained healthcare settings. Healthcare organizations should establish wellness committees to promote a positive work culture and improve QWL.

ELEVATING THE DISCUSSION: WHY HEALTHCARE WORKFORCE WELL-BEING MATTERS

Quality of work life (QWL) refers to the quality of time healthcare providers (HCPs) spend at work. It is a multidimensional concept that includes job satisfaction, pay, relationships with colleagues, and overall well-being. QWL also reflects the ability of employees to influence decisions, participate openly, and align their work with organizational goals, factors linked to higher satisfaction and lower burnout. A positive QWL not only supports individual health and performance but also enhances retention, reduces turnover, and strengthens organizational stability.

Healthcare professionals, particularly doctors and nurses, form the backbone of health systems. Yet the high stress of their roles, compounded by organizational pressures, often compromises their QWL, harming both providers and the quality of care. As Randy Pausch aptly said, “*Put on your own oxygen mask before assisting others.*” Prioritizing QWL is, thus, essential for effective leadership, workforce sustainability, and safe, high-quality patient care.

Most research on QWL has been conducted in Western contexts using quantitative tools, leaving a gap in understanding within Pakistani healthcare organizations. This chapter addresses that gap by exploring physicians’ lived experiences across specialties and settings. Understanding these perspectives can help identify factors that shape QWL and guide human-centered design approaches, where providers themselves contribute to solutions. Such approaches can inform sustainable policies that foster innovation, efficiency, and staff well-being, ultimately improving patient outcomes and system performance.

The study that forms the basis of this chapter was, therefore, a first step toward building evidence-based interventions that enhance the QWL of healthcare providers, laying the foundation for future research on its role in patient-centered care.

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