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Implementation of family friendly policies in Malaysia Siti Nur Amirah Shaari, Wan Normeza Wan Zakaria, Roselainy Abdul Rahman

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Abstract

This study will conducted to identify the factors of implementing family friendly policies to support the extensive implementation of family friendly policies in Malaysian Hospital. Policy practices in federal government will examined through document analysis and interview with government officer. Data from private and government hospitals in Klang Valley will gather using questionnaire.

Keywords: Family friendly policies; human capital; work life balance; work life conflict

1. Introduction

The Malaysia Government has formulated various development policies for holistic human capital development for better quality of life. Some example of policies is the National Family Policy, National Social Welfare Policy, National Policy on Women, National Social Policy and National Child Policy. Through these policies, support for family well-being and social stability are implied.

With the changing demographics and the increase in dual-earner families, employees are increasingly having to juggle and balance both work and family responsibility as well as deal with job-related demands that could place strains and stress on the execution of family roles. With responsibilities for multiple roles, employees are more likely to experience inter role or work-family conflict involving dissenting demands (Aminah & Maznah, 2003). Researchers have documented the experience of work-family conflict among employed women and men, and have provided evidence of adverse effects of such conflict on their well-being in both work and family domains (Aminah, 2004; Spector et al., 2002). As employees increasingly face challenges in balancing work with family commitments, the workplace must provide support and practical solutions to their stressful lives. The government could also play a part by assisting organizations that are willing to implement such policies in areas such as providing guidance or counselling, tax relief and other monetary incentives.

According to Kwong & Lee (2008) to attract or retain productive employees, organizations need to look into implementing human resource policy changes, especially family friendly ones or risk losing their precious human capital to more understanding organizations (Kwong & Lee, 2008). Organizations should review their human resource policies with a view to integrate more family friendly practices to provide for their employees' needs. Family friendly policy is defined as institutionalized structural and procedural arrangement as well as a set of formal and informal practices aimed to design, create and maintain family friendly work environments that allow individuals to balance their work and family duties within their workplace (Darch- Zahavy & Somech, 2008).

In particular, the work environment constitutes an important factor in the recruitment and retention of health professionals, and the characteristics of the work environment affect the quality of care both directly and indirectly. However, the health sector is very concerned about developing a more friendly work environment because of the large number of female employees (WHO, 2010). By promoting work life balance, more can be done to improve quality of the work environment in the health professions (WHO, 2010).

2. Problem statement

The phrase "family friendly policy" (FFP) has increasingly become a popular issue of discussion and of particular interest especially among female employees. Participation rate of female workers was estimated at 39.4% in 2006 (kwong & Lee, 2008). It has increased to 47.9% in 2011 and is targeted to achieve 55% under the 10th Malaysia Plan (PEMANDU, 2013). Family friendly policies are a way to support and recognize the changing needs of employees at different points in their careers and lives. The challenge for organizations is to provide a better workplace for employees by recognizing and reducing unnecessary burdens on employees' family life (Kwong & Lee, 2008). Demanding workload among health workers likely to make them experience exhaustion and fatigue, which may negatively influence their

motivation to respond to the demands of the other domains such as family as argued by Aryee et al. (2005). According to Abd Razak et al., (2011) work family conflict is assured to be a common phenomenon among doctors in Malaysia. Health workers are exposed to a broad range of occupational health risks because of the nature of their work and many health workers move to where they can find better conditions for work and life (WHO, 2010). In the Malaysia Economy Transformation Program one of the NKEA identified is the healthcare sector which was targeted "based' on their potential to contribute to GNI and create multiplier effect cross the economy" ((JPM ETP, 2012).

In Malaysia based on the research findings, there are many organizations, especially in the private sector that have not fully implemented FFP. There is evidence that there are some FFP practices implemented although these are more evident in the government sector rather than private organization (Aminah, 2011). Kwong & Lee (2008) found less than 12% of organizations had provided flexible working arrangement; less than 20% provided child care facilities although more than 80% had acceptable wage and benefit scheme in terms of mandatory maternity leave. Subramanian et al (2010), found that there is an increase the number of women in workforce but there is also a lack of awareness and urgency among employer on what are the practical needs of employees. In another survey (The Malaysian Reserve, 2013) conducted by the Malaysian Employer Federation (MEF) on 199 companies, they found that only 12% of Malaysian Companies had flexible working arrangement (FWA) when compared to the Multinational Companies in which FWA was common. Realizing the importance for workplace reform, the Malaysian Women's Summit in 2007 and 2008 highlighted the urgent need for more FFP at the work place. There is a need to understand what are the factors that will encourage the Malaysian organizations to put into place a more wide ranging Family Friendly practices.

3. Methodology

The Malaysian government is committed towards holistic human capital development and the study will identify factors that promote the implementation of FFP. The research will provide information about factors to support wider implementation of FFP in Malaysian hospitals that will contribute to work life balance

The study will employ sequential mixed method approach (Creswell, 2003). It will be conducted in two phases. In phase one, qualitative data collection and analysis, using individual and focus group interviews, will explore the issues related to the implementation of family friendly policies in the organizations. In phase two, data will be collected quantitatively. Based on the findings from Phase one, a survey questionnaire will be designed, questionnaire will used in this study as the instrument to collect the data. The questionnaires, then will be distributed to the respondents, The respondents will be human resource officers or top management in selected Malaysian hospitals from Government and private sectors. The population in this study will consist of employers from private and Government Hospital in Kuala Lumpur, Putrajaya and Selangor.

The qualitative data will be analysed to get meaningful data chunks. Data will be grouped and regrouped until various categories can be formed by using constant comparative method. Data will be organized and managed by using NVivo software. Quantitative data will be analysed by using SPSS package, which will carry out confirmatory factor analysis. Factor analysis is a multivariate statistical procedure that has many uses which is, factor analysis reduces a large number of variables into a smaller set of variables (factors of implementation of FFP), underlying dimension between measured variables and latent construct, thereby allowing the formation and refinement of theory and provide construct validity evidence of self-reporting scales (Williams, 2012).

4. Theoretical framework

Several theories were used by work-family scholars to explain the reasons organizations adopt FFP such as the Institutional Change Theory and Rational Choice Perspective (Thompson, et al., 2006; Appelbaum, et al., 2005; Sutton & Noe, 2005; korpa, 2011).

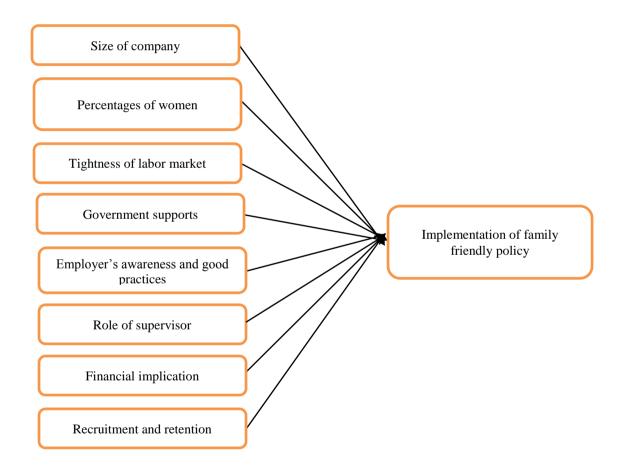
Rational Choice Perspective explains implementation of FFP in organizations using the assessment of contributions and gain and the calculation of profit and cost. Organizations will implement and maintain the FFP in their workplaces if the gain is bigger than the contribution. Rational Choice perspective focuses more on the internal environmental factors of an organization, The rational choice theory suggests that employees will adopt family friendly policies outside what is legitimately required of them if the benefits of doing so surpass the costs (Appelbaum, et al., 2005). The benefits considered may not be in terms of direct financial returns, but be based on efficiency considerations. When organizations adopt FFP it will help employees to manage their work and personal lives (Appelbaum, et al., 2005). This may enable employers to easily recruit and retain productivity employees, may reduce lateness, unplanned absences or even unapproved absences and may encourage employees to put extra effort beyond what is required in their job description (Appelbaum, et al., 2005). In this way FFP may enable organizations to protect their investments in employee skills and knowledge and may produce greater performance for the company (Appelbaum et al., 2005).

There are three types of factors distinguished in Institutional Change Theory which are normative, mimetic and coercive factors. Institutional theory defines how organizations adopt policies and practice in response to pressures on

them from forces in the institutional environment such as state regulations, societal and professional norms and expectations (Thompson, et al, 2005). Normative pressure, mimetic pressure and coercive pressure are the three pressures organizations will experience (Sutton & Noe, 2005). Normative pressure recommends that internal groups insist the organization adopt a specific FFP in order to make the organization legitimate (Sutton & Noe, 2005). Mimetic pressure cause organizations to change as a result of imitating a competitor and the organization seeks legitimacy by mimicking successful competitors (Sutton & Noe, 2005). According to Appelbaum et al., (2005) studies have reported that if certain workplace policies have become widely established in a particular organizational field or industry, other organizations will be under institutional pressure to respond similarly to their environment. Finally, coercive pressures are usually government mandated rules that force organizations to adopt or review their FFP. In this regard, the pressure often comes in the form of laws (Sutton & Noe, 2005). The implementation of FFP can take place without deep persuasion of the management of their effectiveness and chances to improve the economic indicators of an organization (Wood S et al, 2010).

5. Conceptual framework

Based on previous study we identify eight factors that can influence the implementation of family friendly policy practices which is size of company, percentages of women, tightness of labor market, government supports, employer's awareness and good practices, role of supervisor, financial implication and recruitment and retention. From the eight factors we come out with conceptual framework for this study.



Conclusion

The findings of previous research have indicated that there still exist an execution gap in terms of the full implementation of FFP in various organizations in the government and private sectors in Malaysian. Thus, there is a need to find out what are the issues pertinent to the employers and the organizations in implementing FFP. However, what factors and support is required to encourage employers to fully implement FFP has to be examined so as to enhance implementation of wide ranging family friendly practices.

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