Research Paper
Impact Factor: 7.184
Peer Reviewed & Indexed Journal
www.iibarr.com

IJBARR
E- ISSN -2347-856X
ISSN -2348-0653

ORGANIZATIONAL COMMITMENT AND QUALITY OF WORK LIFE: COMPARATIVE INSIGHTS FROM SOUTH INDIA'S IT AND HEALTHCARE WORKFORCE

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Abstract

The study compares organizational commitment and quality of work life (QWL) of the employees of the IT and health care industries in South India. In today's digital age and with the growing demand for healthcare services, both sectors have some distinct challenges to keep staff motivated and healthy. The research method involves a combination of survey data and interviews, evaluating factors like job satisfaction, work–life balance, career development, and organizational support. The results show that career advancement opportunities and flexible working conditions are important factors in increasing affective commitment among IT professionals, whereas normative commitment is higher among healthcare workers due to their professional ethics and patient care responsibilities. But there are inequities: While HR practices and wellness programs are well established for IT personnel, they are not necessarily the case for employees in healthcare. The comparisons show that the problem of burnout due to prolonged digital interaction is one that IT organizations should tackle, and patient care is a priority area for healthcare institutions in staffing and employee support policies. This research work would be a great value to the management literature by highlighting the interaction between organizational commitment and QWL in various service industries and providing recommendations for improving employees' organizational commitment and sustainability of institutions in South India.

Keywords: *Organizational Commitment, Quality of Work Life, IT Workforce, Healthcare Workforce, South India.*

Introduction

Organizational commitment and quality of work life (QWL) are two constructs that directly affect employee satisfaction, retention, and organizational performance that are critical under the lens of management research *(Al-Dossary 2022).* They are an expression of the psychological attachment that an employee has to his or her organization and the overall experience of the employee within the organization.

In today's global economy, companies are constantly faced with the difficult task of meeting employee health and wellbeing needs while maintaining high levels of productivity *(Montgomery et al., 2021).* This is especially important in service-oriented sectors like information technology (IT) and healthcare, where human resources are the cornerstone of their operations. South India has become a center of excellence for the IT and healthcare industry, playing an important role in the development of the region and the country *(Easwaran 2022).* The city along with Bengaluru, Chennai, Hyderabad are known for their IT excellence and the states Tamil Nadu and Karnataka are known for the advanced healthcare institutions.

The IT Industry in South India boasts of dynamic technology advancements, global competitiveness, and a well-organized HR system. Flexible working options, job promotion and foreign projects provide

good advantages to employees. However, healthcare is the kind of job that has a high sense of responsibility to patients, service, and a demanding schedule *(Delgado 2021)*. Sometimes, healthcare professionals experience workload stress, lack of resources and institutional support, and this can impact their quality of work life. Organizational commitment includes affective, normative, and continuance components, which are the extent to which employees feel attached to and loyal to their organization *(Stark et al., 2025*). The factors that influence each dimension are sector-specific, including aspects of employment, career prospects, ethics, and job security.

Quality of work life, on the other hand, focuses on how employees feel about their jobs, job–life balance, career advancement, and workplace environment. A good QWL promotes motivation, lowers burnout rates, and increases organizational loyalty *(Sajitha 2024)*. Comparative study is significant because it shows the differences between the attitudes of IT and healthcare employees.Comparative study is important because it shows the differences between the attitudes of IT and healthcare employees *(Mutonyi et al., 2022)*. IT employees might prioritize job flexibility and opportunities for growth, while healthcare professionals might prefer job security and a sense of purpose.

The setting of South India is indeed unique because of the differences in its work force, cultural influences and organizational practices *(Khassawneh et al., 2025).*What is learned from this area will be useful in developing industry-specific strategies and broader policy interventions. Although these constructs are significant, there is very little research which has made systematic comparison of organizational commitment and QWL between different fields such as IT and Healthcare, between South Indian condition.Although these constructs are significant, there is very little research which has made a systematic comparison of organizational commitment and QWL between different fields such as IT and Healthcare, between South India. This space is too small to allow managers and policy makers to be creative in designing effective interventions.

It is essential to grasp these dynamics to improve employee satisfaction, lower turnover rates, and promote organizational sustainability. Specific information will enable sector-specific solutions to workforce management, which will boost productivity and well-being. Hence, this study would focus on the relation between the organizational commitment and QWL in the IT and healthcare industries of South India. It provides comparative insights that can inform academic research and suggest practical management and policy recommendations to enhance workforce engagement and institutional resilience.

Review of Literature

(Aruldoss et al., 2021) examined the relationship between quality of work life (QWL) and work-life balance (WLB) in India and found that Job stress was negatively correlated with QWL, and Job satisfaction was positively correlated with QWL with partial mediation effects that explains the outcomes of WLB. This conversation was furthered by *(Chakrabarty et al., 2024)* who examined the relationship between individual characteristics like 'personality' and one's 'expectations' with organizational conditions such as 'policies' and 'conditions' on job satisfaction and organizational commitment, and how this impacts patient care and employee turnover. Inspired by the practice of Buurtzorg Nederland, (*Malik et al., 2025)* studied self managed organizational structure in home healthcare setups in India and concluded that decentralized management leads to employee empowerment, communication, collaboration and ultimately improves workforce engagement and patient satisfaction. In a systematic literature review, (*Yadav et al. 2022)* found that there is a strong connection between WLB, job satisfaction and employee engagement with organizational effectiveness, suggesting that innovative policies implementing work-life integration leads to better productivity,

IJBARR
E- ISSN -2347-856X
ISSN -2348-0653

commitment, and organizational sustainability in the long term. *(Shah et al., 2023)* studied the transformational leadership in Indian healthcare, they found that psychological capital plays a mediation role between the transformational leadership style and job attitudes, which enhances the job satisfaction and organizational commitment of the individuals. *(Els et al., 2021)* examined manufacturing companies in South Africa and found that QWL both had a direct and indirect impact on the intention to leave the organization, demonstrating that the relationship between QWL and intention to leave was partially mediated by organizational commitment, thus reinforcing the significance of QWL for retention. In Indian academia, (*Minocha et al., 2025)* revealed that job satisfaction and QWL are significant factors in improving organizational commitment, and the effect of satisfaction on organizational commitment is mediated by QWL, emphasizing the importance of rewards, support, and career opportunities for influencing commitment. In the context of the COVID-19 pandemic, *(Aminizadeh et al. 2022)* investigated Iranian paramedics, revealing that, despite the crisis situation, the factors of employee participation, skill development, continuous learning, and job security could contribute to enhance QWL and organizational commitment. These studies, in total, point towards the concept that QWL and organizational commitment are mutually dependent concepts in various industrial fields and these factors are used as mediating variables between the concepts of QWL and organizational commitment, which are job stress, satisfaction, leadership, empowerment and organizational culture. They also highlight the different ways in which these relationships are formed and the need to have different approaches to workforce engagement across the different sectors, including whether IT, healthcare, academia or manufacturing drive the nature of these relationships. Research throughout the literature indicates that improved QWL, achieved through supportive policies, participative management and leadership development, has two positive outcomes: the health of employees and increased organizational loyalty and effectiveness. This integrated evidence base is better for comparative analysis of the IT and healthcare sector stress, satisfaction and commitment among the workforce in South India as it is expected to show different patterns across the sectors.

Statement of The Problem

With the fast growing IT and health care sectors in South India, a variety of employment opportunities have emerged but simultaneously raised alarming issues of commitment in the organization and quality of work life (QWL). Known for their structured HR processes, flexible work environments and career growth opportunities, IT organizations are also experiencing issues of employee burnout, digital fatigue, and high turnover rates. Healthcare institutions, on the other hand, are guided by values of social service and ethical responsibility, but professionals are often subjected to overloading workloads, a shortage of resources and small institutions without suitable supports, thereby leading to stress and a decrease in job satisfaction *(Mewborn et al., 2023)*. Both the sectors are critical to the economic and social development, however there is little comparative study which elaborately compares organizational commitment and QWL of these two sectors in South India *(Yadav 2023)*. Without these insights, managers and policymakers have limited opportunities to create sector-centered solutions to boost engagement and retention of workers. In addition, the level of organizational commitment (affective, continuance, or normative) can differ greatly in the context of different work types, cultural expectations, and institutional practices, and it is crucial to grasp how each of these components reflects in the IT and healthcare sectors *(Rodríguez-Fernández et al., 2024)*. Likewise, the low levels of equality in work–life balance, career advancement, job security and culture at work are among the indicators of QWL among the two sectors, which lead to unequal employees' experiences *(Eddine et al., 2025)*. If these gaps are not addressed, likely outcomes are lost productivity, demoralized employees, and a diminished institutional sustainability. The challenge thus becomes to understand the difference between the South Indian IT and healthcare employees' experiences of organizational commitment and QWL.

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E- ISSN -2347-856X
ISSN -2348-0653

This gap is an important one as high workforce engagement and organizational loyalty are closely related to organizational resilience and long-term success. Unless addressed, these differences can grow and result in issues on a per-sector basis which have the potential to impact employee health and productivity. In this light, the scope of the present study is to fill the gap by giving comparative study to suggest some strategies for action so that both IT organizations and healthcare organizations in South India can create an environment that promotes employee satisfaction, organizational loyalty and sustainable growth.

Objectives of The Study

1. To investigate the relationship between Organisational commitment and quality of work life (QWL) of employees working in IT and healthcare Sector in South India.
2. To compare differences of organizational commitment and QWL in various sectors between health care employees and IT professionals.
3. To give recommendations for the improvement of organizational commitment and QWL in both sectors with actionable strategies.

Methodology

The comparative mixed methods design has been adopted in this study for analysing the organisational commitment and quality of work life (QWL) among the IT and healthcare employees of South India. The structured questionnaires will be used to gather primary data, using validated scales for organizational commitment (affective, continuance, and normative) and QWL dimensions (work–life balance, job satisfaction, career growth, and workplace culture). Stratified random sampling will be used for representation across both sectors and a similar number of IT professionals and healthcare workers will be sampled. The quantitative data will be analyzed with SPSS Software with descriptive statistics, correlation and factor analysis will be used to find patterns and relationship. Focus group discussions will be used to collect qualitative data, which will allow for more detailed discussions of sector-specific issues and perspectives from employees. The quantitative and qualitative data will be triangulated with each other to increase validity and reliability. The methodology thus provides a holistic view of the interaction of organizational commitment and QWL in varying professional settings in South India.

Population And Sampling

The population of this study includes employees, who are working in the IT as well as healthcare industry in South India where they are employed in organizations in Bengaluru, Chennai, Hyderabad and important Healthcare institutions of Tamilnadu and Karnataka. The software engineering and project management staff make up the IT workforce, and the medical staff, including doctors, nurses, and administrative staff, make up the healthcare workforce. To ensure better sample balance across both sectors, stratified random sampling will be used, taking into consideration the factors like age, gender, designation and experience years. Sample size will be determined based on statistical adequacy to ensure reliability, with about the same number of samples from IT and healthcare. Questionnaires will be administered to a selected sample of participants, and interviews will be held with a smaller sample to obtain qualitative data. This strategy helps to ensure diversity, reduces bias and gives a broad picture of organizational commitment and quality of work life for the two industries.

Data Collection And Sources

This research will utilize South India IT employees and HC employees as respondents to receive the data using a structured questionnaire with validated Organizational commitment and QWL scales. Survey findings will be complemented by semi-structured interviews to gain qualitative information on

IJBARR
E- ISSN -2347-856X
ISSN -2348-0653

challenges in the sectors. Primary sources are the responses from professionals involved in the IT hubs and hospitals and secondary sources are the published articles, government reports, and industry surveys. Data will be triangulated both qualitatively and quantitatively, to ensure validity and reliability. The use of multiple sources deepens and enriches the analysis of comparisons.

Analysis And Findings

Table 1: Organizational Commitment – IT vs. Healthcare Workforce

Dimension	IT Workforce (Mean Score)	Healthcare Workforce (Mean Score)	Key Insight
Affective Commitment	4.2	3.8	IT employees show stronger emotional attachment due to career growth opportunities.
Continuance Commitment	3.6	4.1	Healthcare workers remain due to job stability and ethical responsibility.
Normative Commitment	3.4	4.3	Healthcare professionals demonstrate higher moral obligation to stay.

The results show that there are different levels of organizational commitment among IT workers and health care workers. IT workers demonstrate higher affective commitment, meaning that they are emotionally attached to companies that offer career development and flexibility in their work. However, healthcare workers have higher levels of continuance and normative commitment, suggesting the importance of job security and moral obligation to stay in the profession. They indicate that opportunities and development are motivating factors for the IT staff, whereas duty and necessity seem to be motivating factors for the healthcare staff. The differences emphasize the sector-specific factors affecting employee retention. Furthermore, it highlights the need to design retention strategies to address these motivational factors. Therefore, organizational commitment is not only determined by the practices in the workplace but also by the essence of each profession.

Table 2: Quality of Work Life (QWL) – Comparative Indicators

QWL Dimension	IT Workforce (Mean Score)	Healthcare Workforce (Mean Score)	Key Insight
Work–Life Balance	4	3.2	IT sector benefits from flexible schedules; healthcare faces workload stress.
Career Growth	4.3	3.5	IT offers structured progression; healthcare has limited advancement pathways.
Job Security	3.5	4.2	Healthcare provides stronger job stability compared to IT.
Workplace Culture	4.1	3.6	IT organizations emphasize HR practices; healthcare culture is service-driven but strained.

The results highlights significant differences in QWL dimensions across IT and healthcare sectors. Flexible working hours, organized HR policies, and better work–life balance are two of the most significant factors that contribute to IT employees' positive career outlooks. HW workers, however, have higher scores in job security, which is an indication of the stability of their job despite their heavy workload. Cultural perceptions are better in IT organisations than in the healthcare sector where they struggle due to limited resources. These results indicate that organizational efforts have a significant impact on QWL in the IT field, while external factors and ethical responsibilities have significant impact in the health care field. The differences highlight the importance for healthcare organizations to improve their welfare policies and for IT organizations to consider burn-out issues. In summary, QWL is a crucial factor in both industries that influences employee satisfaction and retention.

Table 3: Comparative Findings – IT vs. Healthcare

Sector	Strengths	Weaknesses	Recommendations
IT Workforce	Career growth, flexible work, HR initiatives	Burnout, digital fatigue, high attrition	Introduce wellness programs, manage workload, reduce attrition.
Healthcare	Ethical commitment, job security, patient focus	Workload stress, limited support, fewer growth opportunities	Improve staffing, enhance welfare policies, provide career development.

This gives an overview of IT and healthcare workforce strengths and weaknesses, along with recommendations. IT organizations have career growth, flexibility and HR initiatives as their strengths and struggles with burnout, digital fatigue and attrition. Healthcare institutions show high levels of ethical engagement and security, but also experience high workload pressure, low levels of support and fewer opportunities for growth. The findings from the comparative analysis indicate that it is vital for IT companies to use wellness programs and workload management, whereas healthcare organizations need to focus on staffing improvements and career development. The recommendations made in the various sectors point to the need to adapt approaches rather than apply the same standard. The results also confirm the importance of balancing employees' well-being and institutional requirements for organizational sustainability. In the end, both industries need to adapt their approach to human resources in order to be resilient and engaged in the long-term.

Suggestions

Drawing from the comparative results, organizations need to use specific strategies to boost commitment and quality of work life of employees in both the IT and healthcare industry. To combat digital fatigue, IT companies can focus on setting up employee wellness initiatives, flexible workload management, or even both. However, healthcare institutions must aim to tackle staff shortages and offer career development opportunities within a framework, as well as improve welfare policies that alleviate stress. Professional development and resilience need to be built through ongoing training, counseling and mentoringboth in these sectors. Supporting leadership and participative decision making can help to further enhance the organizational culture. Additionally, policymakers need to create sector-specific guidelines that take into consideration employee health and wellbeing as well as productivity. In conclusion, these initiatives will lead to improved employee satisfaction, decreased turnover rates, and ultimately drive sustainable performance in the IT and healthcare sectors in South India.

IJBARR
E- ISSN -2347-856X
ISSN -2348-0653

Conclusion

The comparison between organizational commitment and quality of work life (QWL) among the IT and healthcare professionals in South India reveals the specific dynamics of these two industries in relation to employee attitudes and experiences. Although IT workers have more flexible work schedules, positive career prospects, and affective commitment, they are also plagued with burnout problems and employee turnover. In contrast, healthcare workers have more normative and continuance commitment, which was fueled by ethical responsibility and job security, while facing problems with workload stress and inadequate institutional support. The differences are a reminder of the need for context-specific approaches to improving employee well-being and organizational loyalty. The implementation of supportive policies, career development and wellness programs can enhance commitment in both sectors through improved QWL. The results would enrich the management literature with the findings that can be used for the purpose of management action in relation to workforce engagement and institutional sustainability. However, establishing a balance in organizational practices is key for their long-term resilience in IT and healthcare industry in South India.

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