



Analysis of the Relationship Between Quality of Work Life and Nurse Productivity

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Abstract

This study aims to analyze the relationship between Quality of Work Life and nurse work productivity, as well as to identify the dimension most dominantly associated with nurse work productivity at RSUP Dr. Tadjuddin Chalid Makassar. This is a quantitative study utilizing a cross-sectional design. The sample was selected using a purposive sampling technique. Data analysis was conducted using Chi-square tests, correlation analysis, and multiple linear regression. The results indicate that all dimensions of Quality of Work Life are associated with nurse work productivity. The compensation dimension emerged as the variable most dominantly associated with nurse work productivity compared to the other dimensions. These findings suggest that enhancing Quality of Work Life plays a role in boosting nurse work productivity. The study implies a need to strengthen hospital policies focused on improving Quality of Work Life particularly through a fair compensation system supported by participation, conflict resolution, career development, communication, a sense of security, and a sense of pride thereby enabling continuous improvement in nurse work productivity and the quality of nursing care.

Introduction

The presence of employees is a crucial element for an organization's continuity, as its progress or decline depends on the roles played by the people within it (Brown et al., 1993; Hakimi, 2025; Akande, 2025). No matter how sophisticated an organization's facilities and infrastructure may be, the organization itself would be meaningless without employees. Employees are individuals hired by an organization who receive wages or a salary. Alitty (2018) defines an employee as an individual who works for an employer whether on a permanent or non-permanent basis under a written or unwritten employment agreement, to perform specific tasks or activities designated by the employer.

Given that employees are a vital corporate asset, enhancing employee productivity is a priority to ensure that operational activities run effectively and efficiently (Ositadimma et al., 2025; Primandari et al., 2025; Mustafaa & Lleshia, 2024). Hasibuan (2019) states that productivity refers to an increase in output relative to input. An increase in productivity is made possible only through improved efficiency (regarding time, materials, and labor), better work systems and production techniques, and enhanced workforce skills.

Data from the Ministry of Manpower indicates that labor productivity in Indonesia steadily increased between 2018 and 2023, measured by the ratio of inputs (working hours and costs)

to outputs (work results in the form of goods or services). This rise in productivity is driven by various factors, the most dominant being internal policies established by employers.

The increase in productivity figures in Indonesia can be seen in the following table:

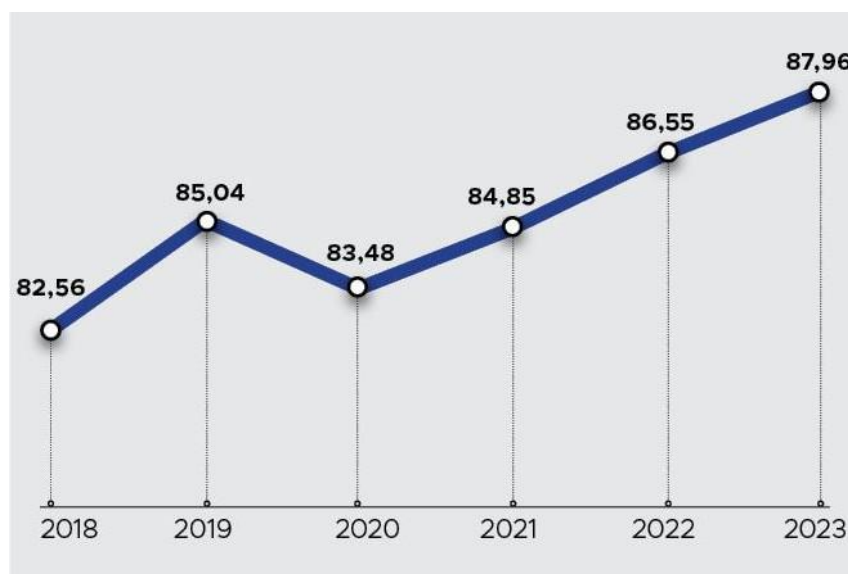


Figure 1. Indonesia's Labor Productivity, 2018–2023

Source: Ministry of Manpower, 2024

Figure 1 shows that labor productivity in Indonesia across all sectors both private and public has continued to rise, reaching 87.96% in 2023. In contrast, a decline occurred in 2022 due to the impact of the COVID-19 pandemic. Quality of Work Life (QWL) is a significant factor influencing employee productivity. Herlina & Nawawi (2020) define QWL as the combined effectiveness of individuals and the organization, emphasizing participation in problem-solving and decision-making.

Implementing QWL is considered highly effective for boosting productivity, including within hospital environments (Aras et al., 2026; Revathi & Hemamalini, 2026; Kurniawan et al., 2025). Previous studies by Sunaryadi (2021), Hidayah et al. (2024), and Takwa et al. (2024) have identified a positive relationship between QWL components and the work productivity of hospital nurses. Therefore, QWL components warrant close attention, as hospitals are a vital part of the healthcare system. Hospitals provide comprehensive healthcare services encompassing promotive, preventive, curative, and rehabilitative care. Staffed by both medical and non-medical personnel, hospitals are responsible for delivering quality healthcare to the public. These employees require proper management, education, training, QWL development, and appropriate compensation to foster work motivation (Abrori et al., 2024; Akinwale et al., 2024; Awoitau et al., 2024).

Hospitals that neglect QWL factors struggle to recruit or retain staff who meet organizational needs and find it difficult to enhance the performance of existing employees (Suaib et al., 2019; Mohamad et al., 2026; Duan et al., 2026;). Furthermore, organizations that overlook QWL face high employee turnover, as staff prefer to work for employers that offer more promising QWL conditions (Very & Hadi, 2019).

Dr. Tadjuddin Chalid General Hospital (RSUP) in Makassar is a government hospital in South Sulawesi Province that continuously strives to deliver high-quality services and ensure patient satisfaction. These efforts are pursued through various means, one of which is by boosting nurse work productivity. The implementation of "Quality of Work Life" (QWL) encompassing components such as participation, conflict resolution, career development, communication, fair compensation, and a sense of security serves as the framework for this study to examine the

productivity of nurses, particularly those assigned to inpatient wards. Nurses working in inpatient wards interact more frequently with patients, thereby necessitating a high level of performance (Browning et al., Qabban et al., 2026; Chang et al., 2026).

Quality of Work Life (QWL) for nurses is a multifaceted concept comprising various components essential to their well-being and job satisfaction (Suryani, 2026). Key components include work-life balance, job design, work context, and the work environment. The quality of nursing care is directly correlated with nurse performance; research indicates that effective nurse performance leads to high-quality service, which significantly influences patient satisfaction (Ariya & Sarun, 2024). Consequently, work-life balance involving an equilibrium between professional responsibilities and personal life is crucial, as it directly impacts nurses' work engagement and overall satisfaction (Ahmed et al., 2024). Job design refers to the structuring of roles and responsibilities; when well-organized, it can foster higher job satisfaction and improved performance. Thus, QWL measurements can serve as an evaluative tool to sustainably enhance nurse work productivity.

Methods

Research Type and Design

This study is an observational study utilizing a cross-sectional design. This design is employed to examine the relationship between risk factors and outcomes through observation or data collection at a single point in time (Notoatmodjo, 2018). The study aims to analyze the relationship between the dependent variable nurse work productivity and independent variables, which include participation, conflict resolution, career development, communication, fair compensation, job security, and a sense of pride. All these variables were measured simultaneously within the study sample.

Research Location and Timing

The study was conducted at RSUP Dr. Tadjuddin Chalid Makassar, located at Jalan Paccerakkang No. 67, Makassar City, South Sulawesi Province. Data collection took place from September to October 2025.

Population and Sample

The study population consisted of all nurses working at Dr. Tadjuddin Chalid General Hospital, Makassar, totaling 217 individuals. A sample represents a subset of the population's size and characteristics under study (Sugiyono, 2019). Sampling was conducted using a probability sampling technique, specifically simple random sampling, where every member of the population had an equal chance of being selected for the sample, without regard to population strata. The study respondents were 68 nurses working at Dr. Tadjuddin Chalid General Hospital, Makassar, and met the sample criteria.

Inclusion criteria included nurses working at Dr. Tadjuddin Chalid General Hospital, holding a valid Nursing Professional Diploma and Registration Certificate (STR), actively providing nursing services during the study, being able to communicate well, and willing to participate by signing an informed consent. Meanwhile, exclusion criteria included nurses who refused to be respondents, were on leave due to illness, pregnancy, childbirth, or other reasons during the research period, were not present at the time of data collection, and were undergoing orientation or training so that they had not yet carried out nursing duties independently.

Operational Definitions of Variables

The operational definitions of each variable in the study are presented in Table 1.

Table 1. Operational Definitions of Research Variables

Variable	Indicators	Measurement Tools	Objective criteria	Scale
Participation (X1)	Collaboration with other employees; participation in meetings; delegation of authority	Questionnaire	Adequate if score >7; inadequate if score <7	Ordinal
Conflict resolution (X2)	Openness; exchange of views; leadership involvement	Questionnaire	Adequate if score >7; inadequate if score <7	Ordinal
Career development (X3)	Consideration of competence; training and education; promotion based on performance evaluation	Questionnaire	Adequate if score >7; inadequate if score <7	Ordinal
Communication (X4)	Face-to-face meetings; group meetings; publications	Questionnaire	Adequate if score >7; inadequate if score <7	Ordinal
Fair compensation (X5)	Alignment of salary with the job; provision of rewards; incentives	Questionnaire	Adequate if score >7; inadequate if score <7	Ordinal
Job security (X6)	Trust in the company; clarity of employment status	Questionnaire	Adequate if score >7; inadequate if score <7	Ordinal
Sense of pride (X7)	Corporate identity; upholding the company's reputation; corporate concern for the community and social environment	Questionnaire	Adequate if score >7; inadequate if score <7	Ordinal
Work productivity (Y)	Work quantity; work quality; punctuality; attendance; ability to work collaboratively	Measurement Tools	Adequate if score >12; inadequate if score <12	Ordinal

Data Collection Techniques

Data were collected through surveys and a literature review. The survey was conducted by administering questionnaires directly to nurses at RSUP Dr. Tadjuddin Chalid Makassar. The literature review involved examining books, journals, and previous studies relevant to this research.

Research Instrument

The research instrument consisted of a Likert-scale questionnaire with three response options: "good" (score of 3), "fair" (score of 2), and "poor" (score of 1). The independent variable, Quality of Work Life (QWL), was measured using 21 statements covering seven dimensions: participation, conflict resolution, career development, communication, fair compensation, job security, and a sense of pride. Each dimension was measured using three statements.

The dependent variable nurse productivity was measured using five statements reflecting the quantity or ability to complete work, quality or optimal patient care, timeliness, attendance, and the ability to work collaboratively. Thus, the research instrument comprised 26 statements formulated based on theories and indicators identified in the literature review.

Validity and Reliability Tests

Validity testing was used to determine the instrument's ability to accurately measure the research variables. The validity of each instrument item was assessed based on the correlation coefficient between the item score and the total score. An instrument item was considered valid if it exhibited a positive correlation coefficient of ≥ 0.30 (Sugiyono, 2019).

Reliability testing was conducted to assess the instrument's precision, stability, and consistency in measuring the research variables. Instrument reliability was evaluated using the Cronbach's alpha value. A construct or variable was considered reliable if it had a Cronbach's alpha value > 0.70 (Ghozali, 2020).

Data Processing

Primary data obtained via questionnaires were processed in four stages. The first stage was editing, which involved checking the completeness of the data and responses in each questionnaire. The second stage was coding, which entailed assigning codes to each variable to facilitate data processing and analysis. The third stage was data entry, involving the input of coded data aligned with their respective measurement scales into a computer program. The final stage was tabulation, which involved organizing the data into tables based on variable groups. The tabulated data were subsequently analyzed using the SPSS program.

Data Analysis

Data analysis was conducted quantitatively using univariate, bivariate, and multivariate analyses. Univariate analysis was employed to describe the characteristics of each research variable in the form of frequency distributions.

Bivariate analysis was performed using the chi-square test to assess the relationship between each independent variable and nurses' work productivity. The analysis was carried out with the aid of the Statistical Product and Service Solutions (SPSS) program. Relationships between variables were considered significant if the p-value was less than 0.05 ($p < 0.05$), whereas a p-value greater than 0.05 ($p > 0.05$) indicated the absence of a significant relationship.

Prior to multivariate analysis, classical assumption tests were conducted, covering normality, multicollinearity, and heteroscedasticity. The normality test was used to determine whether the dependent variable, independent variables, or both followed a normal distribution. Data normality was assessed using Normal Probability Plots (P-P Plots) and the Kolmogorov-Smirnov statistical test. The multicollinearity test was performed to assess the presence or absence of correlation among independent variables based on tolerance values and the Variance Inflation Factor (VIF). The heteroscedasticity test was conducted to determine the equality of residual variances across observations. The model is considered free from heteroscedasticity if there is no discernible pattern and the data points on the graph are scattered both above and below the zero mark on the Y-axis.

Once the classical assumptions were met, a multivariate analysis was conducted using multiple linear regression to determine the direct effect of each independent variable on nurses' work productivity and to identify the variable with the most dominant influence based on its regression coefficient.

Research Ethics

The study was conducted following the receipt of institutional recommendations and authorization from RSUP Dr. Tadjuddin Chalid Makassar. The research adhered to principles regarding informed consent, privacy protection, and the confidentiality of respondent data. Respondents meeting the inclusion criteria received a comprehensive explanation of the study's objectives and procedures prior to signing the consent form. Data collection took place only after obtaining respondent consent and did not involve recording or other methods that could

compromise privacy. All respondent information was kept confidential and reported solely as aggregated group data, in accordance with the consent provided.

Important note regarding usage: the operational definition categorizes productivity as "sufficient" or "insufficient" using an ordinal scale; however, the multivariate analysis employs multiple linear regression, a method that typically requires a continuous numerical dependent variable. If productivity is analyzed categorically, logistic regression would be more appropriate. Furthermore, the specific score thresholds of 7 and 12 are not currently assigned to any category, as the table lists only ">" and "<" signs. These thresholds require clarification for instance, by using "≥" and "<" to align with the research instrument's guidelines.

Result and Discussion

Univariate Analysis Results

Univariate analysis aims to examine the frequency distributions of respondents and the frequency distributions of categorical variables. This analysis yields only the distributions and percentages for each variable; it does not yet examine potential relationships.

Distribution of Respondents by Gender

The results of the analysis regarding respondent characteristics by gender are presented in the following table:

Table 2. Frequency Distribution by Gender

Sex	Frequency	Percentage
Male	11	16%
Female	57	84%
Total	68	100%

Source: Primary Data, 2025

Based on Table 2 above, the majority of respondents in this study were female, totaling 57 individuals (84%), while male respondents numbered 11 (16%).

These findings indicate that the nursing staff composition at RSUP Dr. Tadjuddin Chalid Makassar is predominantly female. This situation aligns with the general characteristics of the nursing workforce, where the nursing profession both nationally and globally is largely comprised of women due to historical factors and career preferences within the healthcare sector.

Distribution of Respondents by Age

The results of the analysis regarding respondent characteristics by age are presented in the following table:

Table 3. Frequency Distribution by Age

Age	Frequency (Number of People)	Percentage (%)
20 - 25 Years	17	25%
26 - 30 Years	8	12%
31 - 35 Years	19	28%
36 - 40 Years	11	16%
> 40 Years	13	19%
Total	68	100%

Source: Primary Data, 2025

Table 3 above shows that the largest group of nurses falls within the 31–35 age range, comprising 19 individuals (28%). This is followed by the 20–25 age group with 17 individuals

(25%), the >40 age group with 13 individuals (19%), the 36–40 age group with 11 individuals (16%), and the 26–30 age group with 8 individuals (12%). This distribution pattern indicates that the majority of nurses are in their productive years, a stage characterized by generally optimal physical capabilities, work experience, and readiness to perform nursing duties. The prevalence of the 31–35 age group also suggests that a significant portion of respondents are in a phase of professional maturity, typically associated with a high level of adaptability and performance stability in nursing care.

Distribution of Respondents by Length of Service

The results of the analysis of respondent characteristics based on length of service are presented in the following table:

Table 4. Frequency Distribution Based on Length of Service

Years of service	Frequency (People)	Percentage (%)
0 - 3 Years	26	38%
3 - 5 Years	18	26%
5 - 10 Years	4	6%
> 10 Years	20	29%
Total	68	100%

Source: Primary data, 2025

The distribution of respondents based on tenure indicates that the largest group consists of nurses with 0–3 years of experience, totaling 26 individuals (38%). The next group comprises nurses with over 10 years of experience (20 individuals or 29%), followed by those with 3–5 years of experience (18 individuals or 26%), while the smallest group consists of nurses with 5–10 years of experience (4 individuals or 6%). This pattern reveals that the nursing workforce at RSUP Dr. Tadjuddin Chalid Makassar is dominated by two segments: relatively new staff and those with over a decade of experience. The presence of these two dominant groups suggests a balanced human resource mix, combining adaptable junior nurses with senior nurses who possess mature professional experience and competence. This distribution likely influences productivity dynamics and service quality, as the interaction between new and experienced nurses typically fosters learning and collaboration within the work environment.

Crosstabulation Results

Crosstabulation analysis was conducted to provide an overview of the distribution of nurse productivity based on respondent characteristics. In this study, the characteristics analyzed included gender, age, and length of service. The presentation of crosstabulations aims to identify patterns of productivity distribution across each group of respondent characteristics, thereby providing preliminary information regarding potential relationships among these variables.

Crosstabulation Results: Gender and Productivity

Table 5. Crosstabulation Results: Gender and Productivity

Sex	Productivity			
	Less Productive		Produktif	
	n	%	n	%
Female	22	38.6%	35	61.4%
Male	3	27.3%	8	72.7%
Total	25	36.8%	43	63.2%

Source: Primary Data, 2025

Based on the cross-tabulation of gender and nurse productivity, it was found that the majority of female nurses fell into the productive category specifically 35 individuals (61.4%) while 22 individuals (38.6%) fell into the less productive category. Among male nurses, 8 individuals (72.7%) were in the productive category, and 3 individuals (27.3%) were in the less productive category. Overall, the majority of respondents in this study fell into the productive category, totaling 43 individuals (63.2%), while 25 individuals (36.8%) fell into the less productive category.

Crosstab Results for Age and Productivity

Table 6. Crosstab Results for Age and Productivity

Kurang Produktif	Produktif			Total
n	%	n	%	n
3	17.6%	14	82.4%	17
3	37.5%	5	62.5%	8
8	42.1%	11	57.9%	19
3	27.3%	8	72.7%	11
8	61.5%	5	38.5%	13
25	36.8%	43	63.2%	68

Source: Primary Data, 2025

Based on the results of the cross tabulation between age and nurse productivity, it can be seen that the 20–25 year age group has the highest productive proportion, namely 14 people (82.4%), followed by the 36–40 year age group with 8 people (72.7%), the 26–30 year old group with 5 people (62.5%), and the 31–35 year old group with 11 people (57.9%). Meanwhile, in the age group over 40 years, the majority of respondents were in the less productive category, namely 8 people (61.5%), while those in the productive category were 5 people (38.5%).

These results show a tendency that productivity is more common in nurses who are in the young to adult productive age group, especially in the 20-40 year age range. On the other hand, in the age group over 40 years, the proportion of nurses in the less productive category is greater than in the productive category. This condition indicates that productive age is a phase where physical abilities, adaptability to work demands, and resilience in carrying out nursing service activities are still in optimal condition. Work productivity is not solely determined by age, but is also influenced by various other factors such as work motivation, health conditions, workload, and the quality of work life that each nurse has.

Work Period and Productivity Crosstab Results

Table 7. Results of Crosstab Work Period and Productivity

Years of service	Less productive (n)	Less productive (%)	Productive (n)	Productive (%)	Total (n)	Total (%)
0–3 years	7	26,9	19	73,1	26	100,0
>3–5 years	6	33,3	12	66,7	18	100,0
>5–10 years	1	25,0	3	75,0	4	100,0
>10 years	11	55,0	9	45,0	20	100,0
Total	25	36,8	43	63,2	68	100,0

Source: Primary data, 2025

Cross-tabulation of nurses' tenure and productivity reveals that the majority of nurses with 0–3 years of experience fall into the productive category (19 individuals or 73.1%), while 7

(26.9%) are classified as less productive. A similar pattern is observed in the 3–5 year tenure group, where 12 nurses (66.7%) are productive, and in the 5–10 year group, where 3 nurses (75.0%) are productive. Conversely, among nurses with more than 10 years of experience, the majority fall into the less productive category (11 individuals or 55.0%), while 9 (45.0%) are productive.

Descriptively, these results indicate a tendency for higher productivity among nurses with up to 10 years of experience, whereas the proportion of less productive nurses is relatively higher in the group with over 10 years of experience. These findings suggest that longer tenure does not necessarily correlate with higher levels of productivity.

Validity and Reliability Test Results

Validity Test Results

The validity test is used to determine the accuracy of the question or statement indicators presented in a research questionnaire. This study employs the Pearson correlation test using SPSS version 25 software. A questionnaire item is considered valid if the calculated r-value exceeds the r-table value (0.239) at a significance level of 0.05 (Ghozali, 2020).

Table 8. Validity Test Results for QWL Dimensions and Work Productivity Questionnaire

Questionnaire	No	<i>r-calculated</i>	<i>r-table</i>	Sig.	Criteria
<i>Quality of Work Life</i>	1	0,514	0,239	0,000	Valid
	2	0,760	0,239	0,000	Valid
	3	0,836	0,239	0,000	Valid
	4	0,881	0,239	0,000	Valid
	5	0,725	0,239	0,000	Valid
	6	0,835	0,239	0,000	Valid
	7	0,821	0,239	0,000	Valid
	8	0,781	0,239	0,000	Valid
	9	0,624	0,239	0,000	Valid
	10	0,738	0,239	0,000	Valid
	11	0,728	0,239	0,000	Valid
	12	0,680	0,239	0,000	Valid
	13	0,816	0,239	0,000	Valid
	14	0,822	0,239	0,000	Valid
	15	0,875	0,239	0,000	Valid
	16	0,710	0,239	0,000	Valid
	17	0,836	0,239	0,000	Valid
	18	0,790	0,239	0,000	Valid
	19	0,811	0,239	0,000	Valid
	20	0,876	0,239	0,000	Valid
	21	0,646	0,239	0,000	Valid
Work Productivity	1	0,795	0,239	0,000	Valid
	2	0,794	0,239	0,000	Valid
	3	0,869	0,239	0,000	Valid
	4	0,525	0,239	0,000	Valid
	5	0,445	0,239	0,000	Valid

Source: SPSS output, 2025

The validity test results for the 26 questionnaire items indicate that all proposed research instruments are suitable for measuring the research variables, as the calculated r-value exceeds the r-table value (0.239) and the significance value is less than 0.05.

Reliability Test Results

The reliability test assesses the extent to which a research measurement tool is reliable. If a measurement tool is used twice to measure the same phenomenon and the results are relatively consistent, the tool is considered reliable. In this study, variable reliability was assessed by examining the Cronbach's Alpha value. A construct or variable is considered reliable if it yields a Cronbach's Alpha value greater than 0.70. The reliability test results are presented in the following table:

Table 9. Reliability Test Results for QWL Dimensions and Work Productivity Questionnaire

No.	Research variables	Cronbach's alpha	Reliability coefficient standards	Description
1	Participation (X1)	0,778	0,70	Reliable
2	Conflict Resolution (X2)	0,827	0,70	Reliable
3	Career Development (X3)	0,791	0,70	Reliable
4	Communication (X4)	0,782	0,70	Reliable
5	Compensation (X5)	0,839	0,70	Reliable
6	Sense of Security (X6)	0,813	0,70	Reliable
7	Sense of Pride (X7)	0,818	0,70	Reliable

Source: SPSS output, 2025

Table 9 above shows that all Cronbach's Alpha values for each variable exceed 0.70; therefore, it can be concluded that all research variables are reliable and suitable for use in the study.

Classical Assumption Tests

Normality Test

In this study, data normality was assessed using two methods: the Normal Probability Plot (P–P Plot) and the Kolmogorov–Smirnov (K–S) statistical test. These two methods complement each other: the graphical test is used to visually observe the data distribution pattern, while the Kolmogorov–Smirnov test is used to statistically assess data normality. The results of the Normal Probability Plot test are shown in the following figure:

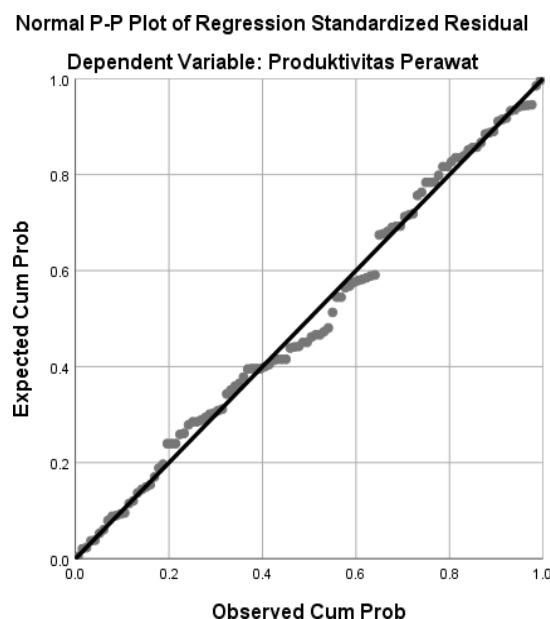


Figure 2. Normality Test Results (P-Plot)

Source: SPSS Output, 2026

Based on the results of the data normality test using the Normal Probability Plot (P–P Plot), it is evident that the data points are distributed around and follow the diagonal line. This distribution pattern indicates that the regression model residuals are normally distributed or approximate a normal distribution. Furthermore, the results of the Kolmogorov-Smirnov normality test are presented in the following table:

Table 10. Kolmogorov-Smirnov Normality Test Results

One-Sample Kolmogorov-Smirnov Test		
		Unstandardized Residual
N		68
Normal Parameters ^{a,b}	Mean	.0000000
	Std. Deviation	.78248158
Most Extreme Differences	Absolute	.080
	Positive	.040
	Negative	-.080
Test Statistic		.080
Asymp. Sig. (2-tailed)		.200 ^{c,d}
a. Test distribution is Normal.		
b. Calculated from data.		
c. Lilliefors Significance Correction.		
d. This is a lower bound of the true significance.		

Source: SPSS output, 2026

The Kolmogorov–Smirnov normality test result shows an Asymp. Sig. value of 0.200, which is greater than the established significance level of $\alpha = 0.05$. This indicates that the residual data do not deviate from a normal distribution. Thus, it can be concluded that the data in this study are normally distributed and satisfy the normality assumption. Multiple linear regression as part of multivariate analysis.

Multicollinearity Test

The study is considered free from multicollinearity if the Tolerance value is > 0.10 and the VIF value is < 10 .

Tabel 11. Hasil Uji Multikolinearitas

No.	Variable	<i>Tolerance</i>	VIF
1	Participation (X1)	0,807	1,240
2	Conflict Resolution (X2)	0,621	1,612
3	Career Development (X3)	0,667	1,498
4	Communication (X4)	0,603	1,659
5	Compensation (X5)	0,410	2,437
6	Sense of Security (X6)	0,442	2,261
7	Sense of Pride (X7)	0,542	1,845

Source: SPSS output, 2025

The table above shows that all independent variables have Tolerance values greater than 0.10 and VIF values less than 10. Thus, it can be concluded that there is no evidence of multicollinearity in the regression model.

Heteroscedasticity Test

The heteroscedasticity test aims to determine whether there is unequal variance of the residuals across observations in the regression model. The presence of heteroscedasticity is indicated if the data points form a specific pattern (such as a wave-like shape or a pattern that widens and then narrows). Conversely, if there is no clear pattern and the points are scattered above and below the zero line on the Y-axis, then heteroscedasticity is not present. The results of the heteroscedasticity test are shown in the following figure:

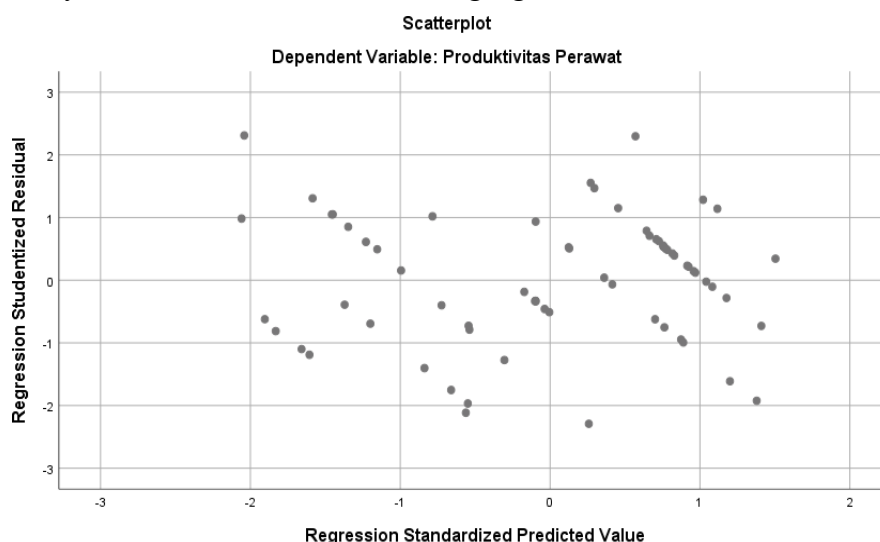


Figure 3. Heteroskedasticity Test Results (Scatterplot). Source: SPSS Output, 2025.

Figure 3 shows that the data points are randomly distributed and do not form a specific pattern; furthermore, the points are scattered both above and below the zero mark on the Y-axis. Based on these test results, it can be concluded that heteroskedasticity is not present; therefore, the regression model is deemed suitable for use as it satisfies the assumption regarding heteroskedasticity.

Bivariate Analysis Results

Bivariate analysis was conducted to determine the relationship between the independent and dependent variables. In this study, the chi-square test was used to examine whether a relationship exists between the "quality of work life" dimension and nurse productivity, based on the asymptotic significance (2-sided) value. A relationship is considered to exist if the p-value is < 0.05 , and not to exist if the p-value is > 0.05 .

Relationship between the "participation" aspect of quality of work life and the productivity of nurses at RSUP Dr. Tadjuddin Chalid Makassar

Table 12. Relationship between the participation aspect and nurse productivity

Participation	Less Productive (n)	Less Productive (%)	Productive (n)	Productive (%)	Total (n)	Total (%)	p-value
Poor	19	50%	19	50%	38	100%	0.011
Adequate	6	20%	24	80%	30	100%	
Total	25	37%	43	63%	68	100%	

Source: SPSS output, 2025

Based on Table 12, it is observed that among respondents with a low level of participation, 19 individuals (50%) fell into the "less productive" category, while another 19 (50%) fell into the "productive" category. Meanwhile, among respondents with a sufficient level of participation, the majority 24 individuals (80%) fell into the "productive" category, with 6 individuals (20%) falling into the "less productive" category.

The Chi-Square test yielded a p-value of 0.011 ($p < 0.05$), indicating a relationship between participation and productivity. These results suggest that increasing nurses' participation in work execution and decision-making within the work environment has the potential to support increased work productivity.

The relationship between quality of work life specifically the conflict resolution aspect and the productivity of nurses at RSUP Dr. Tadjuddin Chalid Makassar.

Table 13. Relationship between the conflict resolution aspect and nurse productivity

Conflict Resolution	Less Productive (n)	Less Productive (%)	Productive (n)	Productive (%)	Total (n)	Total, (%)	p-value
Poor	16	57%	12	43%	28	100%	0.004
Adequate	9	23%	31	78%	40	100%	
Total	25	37%	43	63%	68	100%	

Source: SPSS output, 2025

Based on Table 13 it is observed that among respondents with a low level of conflict resolution, 16 individuals (57%) fell into the "less productive" category, while 12 individuals (43%) fell into the "productive" category. Meanwhile, among respondents with an adequate level of conflict resolution, the majority fell into the "productive" category specifically 31 individuals (78%) whereas 9 individuals (23%) fell into the "less productive" category.

The Chi-Square test yielded a p-value of 0.004 ($p < 0.05$), indicating a relationship between conflict resolution and nurse work productivity. These results imply that effective conflict resolution, supported by open communication, can foster increased work productivity among nurses.

Relationship between quality of work life (specifically the career development aspect) and the productivity of nurses at RSUP Dr. Tadjuddin Chalid Makassar.

Table 14. Relationship between the career development aspect and nurse productivity

Career Development	Less Productive, n	Less Productive, %	Productive, n	Productive, %	Total, n	Total, %	p-value
Poor	19	56%	15	44%	34	100%	0.001
Adequate	6	18%	28	82%	34	100%	
Total	25	37%	43	63%	68	100%	

Source: SPSS output, 2025

Based on Table 14 among respondents with a low level of career development, 19 individuals (56%) fell into the "less productive" category, while 15 individuals (44%) fell into the "productive" category. Meanwhile, among respondents with an adequate level of career development, the majority fell into the "productive" category specifically 28 individuals (82%) whereas 6 individuals (18%) fell into the "less productive" category.

The Chi-Square test yielded a p-value of 0.001 ($p < 0.05$), indicating a relationship between career development and nurse work productivity. These results imply that greater opportunities for career development lead to increased productivity.

Relationship between quality of work life (communication aspect) and nurse productivity at RSUP Dr. Tadjuddin Chalid Makassar

Table 15. Relationship between the communication aspect and nurse productivity

Communication	Less Productive, n	Less Productive, %	Productive, n	Productive, %	Total, n	Total, %	p-value
Poor	18	58%	13	42%	31	100%	0.001
Adequate	7	19%	30	81%	37	100%	
Total	25	37%	43	63%	68	100%	

Source: SPSS output, 2025

Based on Table 15 it is observed that among respondents with a low level of communication, 18 individuals (58%) fell into the "less productive" category, while 13 individuals (42%) fell into the "productive" category. Meanwhile, among respondents with an adequate level of communication, the majority 30 individuals (81%) fell into the "productive" category, whereas 7 individuals (19%) fell into the "less productive" category.

The "hi-Square test yielded a p-value of 0.001 ($p < 0.05$), indicating a relationship between communication and nurse work productivity. These results imply that better communication within the work environment tends to lead to increased nurse productivity. Effective communication facilitates clearer information exchange, coordination, and task execution, thereby minimizing errors in the delivery of nursing care. Such conditions also foster effective collaboration among nurses and with other healthcare professionals in providing patient care.

Relationship between quality of work life (compensation aspect) and nurse productivity at RSUP Dr. Tadjuddin Chalid Makassar

Table 16. Relationship between the compensation aspect and nurse productivity

Compensation	Less Productive, n	Less Productive, %	Productive, n	Productive, %	Total, n	Total, %	p-value
Poor	16	64%	9	36%	25	100%	0.000
Adequate	9	21%	34	79%	43	100%	
Total	25	37%	43	63%	68	100%	

Source: SPSS Output, 2025

Based on Table 16 it is observed that among respondents receiving low compensation, 16 individuals (64%) fell into the "less productive" category, while 9 individuals (36%) fell into the "productive" category. Conversely, among respondents receiving adequate compensation, the majority 34 individuals (79%) fell into the "productive" category, while 9 individuals (21%) fell into the "less productive" category.

The Chi-Square test yielded a p-value of 0.000 ($p < 0.05$), indicating a relationship between compensation and nurse work productivity. These results suggest that better compensation received by nurses tends to lead to increased work productivity. Adequate compensation can encourage nurses to perform optimally in carrying out their duties and responsibilities. Furthermore, providing compensation that aligns with workload and contributions can boost morale, thereby resulting in increased productivity.

Relationship between quality of work life (specifically the sense of security aspect) and nurse productivity at RSUP Dr. Tadjuddin Chalid Makassar

Table 17 Relationship between the sense of security aspect and nurse productivity

Job Security	Less Productive, n	Less Productive, %	Productive, n	Productive, %	Total, n	Total, %	p-value
Poor	19	54%	16	46%	35	100%	0.005

Adequate	6	18%	27	82%	33	100%	
Total	25	37%	43	63%	68	100%	

Source: SPSS output, 2025

Based on Table17 it is observed that among respondents with a low level of perceived job security, 19 individuals (54%) fell into the "less productive" category, while 16 individuals (46%) fell into the "productive" category. Meanwhile, among respondents with an adequate level of perceived job security, the majority fell into the "productive" category specifically 27 individuals (82%) whereas 6 individuals (18%) fell into the "less productive" category.

The Chi-Square test yielded a p-value of 0.005 ($p < 0.05$), indicating a relationship between perceived job security and nurse work productivity. These results imply that the greater the sense of security nurses feel regarding their work, the more likely their work productivity is to increase. A sense of security at work provides nurses with peace of mind as they carry out their duties and responsibilities. This condition enables nurses to focus better on service delivery, thereby allowing work productivity to be maintained and enhanced.

Relationship between quality of work life (specifically the aspect of pride) and the productivity of nurses at RSUP Dr. Tadjuddin Chalid Makassar

Table 18. Relationship between the aspect of pride and nurse productivity

Pride in the Organization	Less Productive, n	Less Productive, %	Productive, n	Productive, %	Total, n	Total, %	p-value
Poor	17	46%	20	54%	37	100%	0.046
Adequate	8	26%	23	74%	31	100%	
Total	25	37%	43	63%	68	100%	

Source: SPSS Output, 2025

Based on Table 18 it is observed that among respondents with a low level of pride, 17 individuals (46%) fell into the "less productive" category, while 20 individuals (54%) fell into the "productive" category. Meanwhile, among respondents with a sufficient level of pride, the majority fell into the "productive" category specifically 23 individuals (74%) whereas 8 individuals (26%) fell into the "less productive" category.

The Chi-Square test yielded a p-value of 0.046 ($p < 0.05$), indicating a relationship between pride and nurses' work productivity. These results imply that the higher the pride nurses feel toward their workplace, the more their work productivity tends to increase. Pride in the organization can encourage nurses to make their best contributions when performing their duties. Furthermore, a sense of belonging to and appreciation for the organization can foster work commitment, which has a positive impact on productivity.

Multivariate Analysis Results (Multiple Linear Regression)

Multiple linear regression analysis was used to examine the relationship between the independent variable quality of work life and the dependent variable nurses' productivity. This analysis aimed to assess the magnitude of the influence of each independent variable on productivity, both partially and simultaneously, and to identify the most dominant variable influencing nurses' productivity.

Table 19. Model Summary (Coefficient of Determination)

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	0.892 ^a	0.795	0.771	0.82687

Source: SPSS output, 2026

Based on the multiple linear regression analysis results, an Adjusted R-Square value of 0.771 was obtained. This indicates that 77.1% of the variation in nurse work productivity at RSUP Dr. Tadjuddin Chalid Makassar can be explained by the Quality of Work Life variable, which encompasses participation, conflict resolution, career development, communication, compensation, job security, and a sense of pride. Meanwhile, the remaining 22.9% is influenced by factors outside the research model that were not examined in this study.

Table 20. Multiple Linear Regression Results (Coefficients)

Independent Variable	Regression Coefficient (β)	t-Statistic	Sig.
Participation (X1)	0.143	2.060	0.048
Conflict Resolution (X2)	0.296	3.124	0.003
Career Development (X3)	0.161	2.055	0.047
Communication (X4)	0.156	2.034	0.035
Compensation (X5)	0.397	4.350	0.000
Job Security (X6)	0.234	2.427	0.018
Pride in the Organization (X7)	0.185	2.030	0.050

Source: SPSS Output, 2026

Based on the multiple linear regression analysis, it is evident that all independent variables under study namely participation, conflict resolution, career development, communication, compensation, job security, and sense of pride have a significant relationship with the work productivity of nurses at RSUP Dr. Tadjuddin Chalid Makassar, as all significance values indicate $p \leq 0.05$.

The participation variable (X1) has a regression coefficient (β) of 0.143, with a t-statistic of 2.060 and a significance level of 0.048. This indicates that participation has a positive and significant relationship with nurses' work productivity; meaning that the higher the nurses' participation in work execution and decision-making, the more their work productivity increases.

The conflict resolution variable (X2) has a regression coefficient (β) of 0.296, with a t-statistic of 3.124 and a significance level of 0.003. These results indicate that conflict resolution has a positive and significant relationship with nurses' work productivity. Conflict resolution conducted openly, fairly, and constructively can create a conducive work environment, thereby supporting increased work productivity among nurses.

The career development variable (X3) has a regression coefficient (β) of 0.161, with a t-statistic of 2.055 and a significance level of 0.047. This indicates that career development has a positive and significant relationship with nurses' work productivity. The better the career development opportunities provided to nurses, the more their work productivity tends to increase.

The communication variable (X4) has a regression coefficient (β) of 0.156, with a t-statistic of 2.034 and a significance level of 0.035. These results indicate that communication has a positive and significant relationship with nurses' work productivity. Effective communication among nurses and with leadership facilitates smooth coordination and task execution, thereby contributing to increased work productivity.

The compensation variable (X5) has the highest regression coefficient (β) of 0.397, with a t-statistic of 4.350 and a significance level of 0.000. These results indicate that compensation has a positive and significant relationship with nurses' work productivity and is the most dominant variable influencing it. This suggests that providing appropriate compensation whether in the form of salary, rewards, or incentives plays a crucial role in boosting nurses' work productivity.

The job security variable (X6) has a regression coefficient (β) of 0.234, with a t-statistic of 2.427 and a significance level of 0.018. These results indicate that job security has a positive and significant relationship with nurses' work productivity. The greater the sense of security nurses feel in performing their duties, the more their work productivity tends to increase.

The pride variable (X7) has a regression coefficient (β) of 0.185, with a t-statistic of 2.030 and a significance level of 0.050. This indicates that a sense of pride has a positive and significant relationship with nurses' work productivity. Feeling proud of the organization can enhance nurses' commitment and motivation to deliver their best performance, thereby supporting increased work productivity.

Thus, it can be concluded that all dimensions of Quality of Work Life namely participation, conflict resolution, career development, communication, compensation, job security, and sense of pride significantly influence the work productivity of nurses at RSUP Dr. Tadjuddin Chalid Makassar. Compensation is the most dominant variable, followed by conflict resolution, job security, sense of pride, career development, communication, and participation.

Hypothesis Testing

Based on the results of the bivariate and multivariate analyses (multiple linear regression), a summary of the hypothesis testing was obtained, as presented in the following table:

Table 21. Summary of Hypothesis Testing Results

Hypothesis	Statement	Result
H1	Participation is related to nurses' work productivity.	Accepted
H2	Conflict resolution is related to nurses' work productivity.	Accepted
H3	Career development is related to nurses' work productivity.	Accepted
H4	Communication is related to nurses' work productivity.	Accepted
H5	Compensation is related to nurses' work productivity.	Accepted
H6	Job security is related to nurses' work productivity.	Accepted
H7	A sense of pride is related to nurses' work productivity.	Accepted

The results of this study demonstrate that all proposed hypotheses were empirically supported. This means that all dimensions of Quality of Work Life namely participation, conflict resolution, career development, communication, compensation, job security, and a sense of pride exhibit a positive and significant relationship with the work productivity of nurses at RSUP Dr. Tadjuddin Chalid Makassar.

These findings indicate that the better the quality of work life perceived by nurses, the higher their work productivity becomes. Among all Quality of Work Life dimensions, compensation shows the most dominant relationship. This suggests that providing appropriate compensation whether in the form of salary, rewards, or incentives is a primary factor driving increased nurse productivity. Nurses tend to demonstrate higher productivity when they receive compensation perceived as fair and commensurate with their workload and contributions to the organization.

The relationship between the participation aspect of quality of work life and the productivity of nurses at RSUP Dr. Tadjuddin Chalid Makassar

The study results indicate a relationship between the participation aspect of quality of work life and the work productivity of nurses at RSUP Dr. Tadjuddin Chalid Makassar. Effective participation reflects nurses' involvement in various work processes, such as expressing opinions, collaborating in teams, and accepting delegated authority and responsibilities. Such involvement can foster a sense of ownership regarding the work, thereby encouraging nurses to perform their duties more optimally.

According to Cascio (2006), participation is a dimension of Quality of Work Life that plays a role in creating a work environment supportive of organizational effectiveness. Employees given the opportunity to participate in organizational processes tend to exhibit greater commitment, responsibility, and work motivation. In nursing services, involving nurses in decision-making and problem-solving can also enhance their sense of being valued as part of the organization, ultimately leading to increased work productivity. This view is supported by Christianus (2020) as well as Herlina and Nawawi (2020), who explain that participation constitutes a form of mental and emotional involvement by individuals in organizational activities. Such involvement can boost work motivation, strengthen a sense of responsibility toward the job, and foster more effective task execution.

These findings align with the study by Hidayah et al. (2024), which indicates a link between participation and nurses' work productivity. Nurses who have the opportunity to contribute to work processes find it easier to foster collaboration, enhance organizational commitment, and complete tasks optimally. Improving the quality of work life by strengthening participatory aspects can be achieved by providing nurses with greater scope to share ideas, participate in decision-making, and exercise authority commensurate with their competencies. Such measures are expected to enhance nurses' work productivity while simultaneously supporting the quality of nursing care at RSUP Dr. Tadjuddin Chalid Makassar.

The relationship between the quality of work life specifically the conflict resolution aspect and the productivity of nurses at RSUP Dr. Tadjuddin Chalid Makassar.

The research results indicate a relationship between the conflict resolution aspect of quality of work life and the work productivity of nurses at RSUP Dr. Tadjuddin Chalid Makassar. Conflict resolution conducted openly and constructively can create a more conducive work atmosphere, enabling nurses to perform their duties with greater focus, comfort, and effectiveness. Conversely, poorly managed conflict has the potential to create workplace tension, which can affect nurses' morale and productivity.

According to Cascio (2006), conflict resolution is a dimension of Quality of Work Life that plays a role in fostering harmonious working relationships within an organization. Conflict is inherently natural in a work environment, particularly in healthcare settings that involve diverse professions and high job demands. The organization plays a crucial role in providing conflict resolution mechanisms that are fair, transparent, and problem-oriented, ensuring that conflicts do not escalate into obstacles to work performance.

This perspective aligns with conflict management concepts, which explain that open communication, healthy exchanges of opinion, and leadership involvement in resolving issues are factors that can create a more positive work environment. When nurses feel heard and supported by leadership in addressing workplace issues, they find it easier to collaborate with colleagues and maintain their performance in delivering patient care.

These findings also align with the study by Hidayah et al. (2024), which states that conflict resolution is an aspect of quality of work life linked to nurse productivity. Effective conflict management not only helps maintain harmonious working relationships but also fosters a sense of security and comfort at work. Such conditions allow nurses to concentrate better on their tasks, improve coordination among team members, and support the achievement of optimal work productivity.

The relationship between the quality of work life specifically the career development aspect and the productivity of nurses at RSUP Dr. Tadjuddin Chalid Makassar.

Research findings indicate a relationship between the career development aspect of quality of work life and the work productivity of nurses at Dr. Tadjuddin Chalid General Hospital, Makassar. Career development offers nurses opportunities to enhance their competence,

expand their knowledge, and cultivate the skills necessary for delivering nursing care. Opportunities for professional growth can also boost work motivation, as nurses perceive clear career prospects within the organization.

According to Cascio (2006), career development is a dimension of Quality of Work Life that plays a role in increasing employee satisfaction and organizational commitment. Organizations that provide opportunities for education and training, conduct competency-based assessments, and offer clear career paths encourage employees to continuously improve their capabilities and deliver their best performance. In the context of nursing care, career development not only benefits individual competence but also contributes to improving the quality of care provided to patients.

This view is supported by Pertiwy et al. (2020), who state that well-managed career development can enhance work productivity while simultaneously reducing the potential for burnout and frustration. Opportunities to develop professional skills increase nurses' motivation in performing their duties, boost their self-confidence, and drive them to achieve optimal performance.

The results of this study align with the research by Hidayah et al. (2024), which states that career development is an aspect of quality of work life associated with nurses' work productivity. Equal opportunities to participate in training, acquire competency development, and pursue a transparent career path can boost nurses' motivation and organizational commitment. Continuous career development is also a crucial effort in preparing nurses to handle advancements in science and technology, as well as increasingly complex healthcare service demands, thereby enabling sustained improvements in work productivity.

The relationship between the communication aspect of quality of work life and the productivity of nurses at RSUP Dr. Tadjuddin Chalid Makassar

The study results indicate a relationship between the communication aspect of quality of work life and the work productivity of nurses at RSUP Dr. Tadjuddin Chalid Makassar. Effective communication supports the smooth execution of tasks, strengthens coordination among nurses, and minimizes errors in the delivery of nursing care. Clear and open information sharing also helps nurses understand their responsibilities, allowing work to be completed more effectively and efficiently.

According to Cascio (2006), communication is a dimension of Quality of Work Life that plays a role in creating a conducive work environment. Open communication whether through face-to-face meetings, group discussions, or the dissemination of organizational information can strengthen coordination, enhance cooperation, and foster harmonious relationships among employees. In a hospital setting, good communication is a vital factor in ensuring service continuity, facilitating interprofessional collaboration, and supporting the achievement of organizational goals.

The results of this study align with the research by Hidayah et al. (2024), which states that communication is an aspect of quality of work life associated with nurses' work productivity. Effective communication accelerates information flow, simplifies coordination during task execution, and reduces misunderstandings that could hinder service delivery. These conditions foster a more conducive work environment, enabling nurses to perform optimally when providing care to patients. Effective communication must be maintained and enhanced through the clear dissemination of information, regular meetings, and the fostering of open interpersonal communication between nurses and leadership. A work environment supported by effective communication facilitates coordination, strengthens teamwork, and boosts nursing productivity at RSUP Dr. Tadjuddin Chalid Makassar.

The relationship between the compensation aspect of quality of work life and the productivity of nurses at RSUP Dr. Tadjuddin Chalid Makassar

The research results indicate a relationship between the compensation aspect of quality of work life and the work productivity of nurses at RSUP Dr. Tadjuddin Chalid Makassar. Among all the Quality of Work Life dimensions studied, compensation emerged as the variable exerting the most dominant influence on nurses' work productivity. This situation demonstrates that compensation is the factor most heavily considered by nurses in boosting work morale, sustaining motivation, and enhancing productivity while delivering nursing care services.

According to Cascio (2006), compensation is a crucial component of Quality of Work Life because it reflects the organization's recognition of the contributions made by employees. Providing fair compensation that aligns with job responsibilities enhances job satisfaction, strengthens organizational commitment, and encourages employees to deliver their best performance. In a hospital setting, compensation is understood not merely as the provision of a salary but also encompasses performance-based rewards, incentives, and other forms of appreciation capable of boosting nurses' work motivation.

This view is supported by Ayuni (2023), who explains that compensation plays a role in increasing work motivation and productivity. Nurses who feel they receive rewards commensurate with their workload and responsibilities are more driven to work optimally and provide high-quality care to patients. Conversely, a compensation system that fails to meet expectations can affect work morale and lead to a decline in productivity.

These findings also align with the study by Hidayah et al. (2024), which states that compensation is linked to nurses' work productivity. The dominant role of compensation in this study indicates that organizational rewards remain the primary factor influencing work productivity compared to other Quality of Work Life dimensions. This highlights the need for hospital management to prioritize providing compensation that is fair, transparent, and aligned with workload. Providing appropriate rewards not only boosts nurses' work productivity but also contributes to retaining competent nursing staff and supports the improvement of service quality at RSUP Dr. Tadjuddin Chalid Makassar.

The relationship between the "sense of security" aspect of quality of work life and the work productivity of nurses at RSUP Dr. Tadjuddin Chalid Makassar

The research results indicate a relationship between the sense of security aspect of quality of work life and the work productivity of nurses at RSUP Dr. Tadjuddin Chalid Makassar. A sense of security at work enables nurses to perform their duties with greater composure, focus, and responsibility, free from concerns regarding working conditions or job continuity. This state positively impacts the delivery of nursing services, thereby allowing work productivity to be maintained and enhanced. According to Cascio (2006), a sense of security is a dimension of Quality of Work Life related to meeting employees' needs for protection, job security, and a safe working environment.

Organizations capable of guaranteeing workplace safety, clarifying employment status, and providing protection against various occupational risks foster a sense of comfort among employees as they carry out their duties. In nursing services, a sense of security is a crucial factor, given the high job demands and various risks nurses face while caring for patients. These findings align with the study by Hidayah et al. (2024), which states that a sense of security is an aspect of Quality of Work Life linked to nurses' work productivity. Nurses who perceive organizational protection whether through job security or a safe working environment tend to demonstrate better motivation and concentration in performing their tasks. Such conditions support the delivery of more effective services while simultaneously boosting work productivity.

A sense of security at work must be continuously fostered by providing a safe working environment, ensuring clear employment status, and offering adequate protection for nurses in the practice of their profession. Attention to these aspects not only provides nurses with a sense of comfort but also supports increased work productivity and the quality of nursing services at RSUP Dr. Tadjuddin Chalid Makassar.

The relationship between the "pride" aspect of quality of work life and nurse productivity at RSUP Dr. Tadjuddin Chalid Makassar

The study results indicate a relationship between the aspect of pride within the quality of work life and the work productivity of nurses at RSUP Dr. Tadjuddin Chalid Makassar. Pride in the organization can encourage nurses to make their best contributions while carrying out their duties and responsibilities. Nurses who take pride in their workplace tend to demonstrate higher levels of loyalty, commitment, and motivation, thereby enabling them to provide optimal service.

According to Cascio (2006), pride is a dimension of Quality of Work Life shaped by a strong organizational identity, a good reputation, and the organization's concern for the social environment. Employees who feel proud to be part of their organization possess a stronger sense of belonging. This sentiment drives employees to safeguard the organization's reputation, increase their sense of responsibility toward their work, and strive for peak performance as a contribution to the organization.

These findings align with the study by Hidayah et al. (2024), which states that pride is an aspect of Quality of Work Life linked to nurse productivity. Pride in the organization not only influences work motivation but also strengthens commitment to delivering quality care. Nurses who take pride in their hospital tend to be more enthusiastic about performing their duties, upholding the organization's image, and actively participating in the achievement of the hospital's goals.

Pride in the organization must be continuously fostered by strengthening organizational identity, enhancing the hospital's reputation, and creating a work environment that cultivates a sense of belonging among all nurses. Such efforts are expected to boost nurse commitment and productivity while simultaneously supporting improvements in the quality of care at RSUP Dr. Tadjuddin Chalid Makassar.

Conclusion

Based on the research findings regarding the relationship between quality of work life and nurse productivity at RSUP Dr. Tadjuddin Chalid Makassar, the following conclusions can be drawn: (1) There is a relationship between the participation dimension and nurse productivity at RSUP Dr. Tadjuddin Chalid Makassar; higher levels of nurse participation in work execution and decision-making tend to lead to increased productivity; (2) There is a relationship between the conflict resolution dimension and nurse productivity at RSUP Dr. Tadjuddin Chalid Makassar; open and constructive conflict resolution fosters a conducive work environment, thereby tending to increase nurse productivity; (3) There is a relationship between the career development dimension and nurse productivity at RSUP Dr. Tadjuddin Chalid Makassar; opportunities to develop competence through education, training, and career progression encourage increased nurse productivity; (4) There is a relationship between the communication dimension and nurse productivity at RSUP Dr. Tadjuddin Chalid Makassar; effective communication among nurses and with leadership facilitates the smooth execution of tasks, tending to boost nurse productivity; (5) There is a relationship between the compensation dimension and nurse productivity at RSUP Dr. Tadjuddin Chalid Makassar; fair compensation that aligns with workload can enhance nurse motivation and productivity; (6) There is a relationship between the sense of security dimension and nurse productivity at RSUP Dr. Tadjuddin Chalid Makassar; a sense of security regarding both the work environment and job

stability enables nurses to perform their duties more optimally, leading to increased productivity; (7) There is a relationship between the sense of pride dimension and nurse productivity at RSUP Dr. Tadjuddin Chalid Makassar; pride in the organization fosters greater commitment, loyalty, and motivation among nurses in delivering care, resulting in improved productivity. (8) Among all the dimensions of Quality of Work Life examined, the compensation dimension is the variable most dominantly associated with nurse productivity at RSUP Dr. Tadjuddin Chalid Makassar.

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