



# The effects of leisure time satisfaction levels of healthcare workers on job motivations during COVID-19 pandemic

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## Abstract

The study investigated the effect of leisure time satisfaction levels of healthcare workers on their job motivations during COVID-19 pandemic. 147 healthcare workers (mean age, 34.13±9.24years; 57.8% (n=85) women and 42.2% (n=62) men) from a Turkish public hospitals who worked in pandemic hospitals in Istanbul during the COVID-19 global epidemic, were participated in the study voluntarily. Questionnaire method was used in conducting this study. The questionnaire consisted of three parts such as demographic information form, leisure time satisfaction scale and job motivation scale. SPSS v.21.0 (SPSS Inc., Chicago, IL, USA) statistical program was used to analyze the data. Frequency, T-Test, Anova, Regression and Correlation Analyzes were performed. Results show that the satisfaction of healthcare workers from their leisure time affected their job motivation positively, while leisure time satisfaction and job motivation differed by demographic variables.

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**Keywords:** COVID-19; global epidemia; leisure time; pandemia; job motivation

## 1. Introduction

### 1.1. Introduce the problem

Wuhan in China became the center of an outbreak of pneumonia of an unknown cause in December 2019, which raised intense concern not only within China but internationally. Health authorities carried out an immediate investigation in order to characterize and control the spread of the disease. Their investigation included the isolation of people who were suspected to have the disease, close monitoring of contacts, epidemiological and clinical data collection from patients, and development of diagnostic and treatment

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procedures (Wang et al., 2020). This outbreak of pneumonia was identified and officially named severe acute respiratory distress syndrome coronavirus 2 (SARS-COV-2), by the World Health Organization (WHO) and the International Virus Taxonomy Committee, and the name of the disease designated as COVID-19 (Kebapçı, 2020). Thus, Coronavirus disease was identified as an infectious disease caused by a newly discovered coronavirus. Most people infected with the COVID-19 virus will experience mild to moderate respiratory illness and recover without requiring special treatment. Older people, and those with underlying medical problems like cardiovascular disease, diabetes, chronic respiratory disease, and cancer are more likely to develop serious illness (Who, 2020).

Throughout the pandemic period, healthcare professionals continued to fight the disease with great devotions and efforts, even though they faced the risks of being infected and transmitting the virus. Hospitals continued in their struggles to curb the outbreak, by establishing special pandemic departments and in addition to the current medical staff at the infectious disease department, volunteer medical staff were recruited from multiple other departments (Chen et al., 2020). The COVID-19 pandemic resulted in putting healthcare professionals across the world in an unprecedented situation, forcing them to make almost impossible decisions and to work under extreme pressures. These health professionals came under increased risk of moral injury and mental health problems as they battled with the various challenges of COVID-19 pandemic (Greenberg et al., 2020). Thus, they needed to engage themselves in different activities in their free time, in order to reduce or if possible, avoid mental stress (Chen et al., 2020), as a way to curb the pressures caused by the pandemic during these periods. They also needed to have good and quality leisure time for job motivation and individual performances.

With the developing technology and changing living standards, the role of leisure time in the social structure has become undeniably important (Henderson, 2010). Leisure time satisfaction is defined as the positive feelings that individuals gain as a result of meeting their individual needs by participating in leisure time activities (Siegenthaler, 1997). Leisure time satisfaction consists of six subscales: Psychological, Educational, Social, Relaxation, Physiological and Aesthetic (Öztaş, 2018). The fact that there are many socio-demographic, socio-cultural, psychological and economic factors affecting leisure time satisfaction and that it differs from individual to individual reveals that this concept is very broad (Iso-Ahola and Weissinger, 1990; Siegenthaler and O'Dell, 2000). Having a positive relationship between leisure time satisfaction, job satisfaction, work-social life balance, motivation, and quality of life makes leisure time activities even more important for the individual (Pearson, 1998; Siegenthaler and O'Dell, 2000).

**2.** Job motivation is the desire to strive to achieve organizational goals based on the needs of individuals (Robbins 2006). Motivation is an important indicator for employees to be excited and determined to perform their jobs at a high level, and it provides a focus to achieve the determined goals (Gökçe et al., 2010). One of the most important issues in

motivation is to identify the needs of employees which differ from person to person. Diversity and continuity of needs cause complex and continuity of behavior and changes that are in accordance with individual differences in order to create an effective motivation, which could affect motivation significantly (Karakaya and Ay, 2007). As the previous literature shows, the motivation level of healthcare workers can affect organizations, namely health institutions, positively or negatively (Ekingen et al.,2017; Koyuncuoglu, 2016). Employees' dissatisfaction at work can lead to a large number of individual and organizational consequences, such as a decrease in their performance level, a tendency for absenteeism, providing faulty health care, and an increase in the rate of entry and exit (Küçüközkan, 2015). Based on the previous literature, the aim of this study was to determine the relationship between the leisure time satisfaction of Healthcare Professionals and their job motivation during the COVID-19 pandemic. As a consequence, the research question of the study was “*What were the effects of leisure time satisfaction levels on healthcare workers on job motivations during COVID-19 pandemic?*”

### 3. Method

#### 3.1. Study Design

The relational scanning model was used in this study. It was carried out by combining the results of two questionnaires; A Motivation Scale and Leisure Satisfaction Scale (LSS). The study was conducted in accordance with the Declaration of Helsinki. Additionally, approval was obtained from the Istanbul University Cerrahpaşa Social and Human Sciences Research Ethics Committee and the Scientific Research Platform of the Turkish Ministry of Health General Directorate of Health Services.

#### 3.2. Participants

The participants of the study were chosen from pandemic public hospitals in Istanbul, during the COVID-19 global epidemic. The data were collected by simple random sampling method. A total of 147 medical staff, 57.8% (n = 85) female and 42.2% (n = 62) male, with an average age of 34.13 ( $\pm$  9.24) years were participated to the study. The time interval in which the study was conducted was determined considering the three months after the first case of the epidemic. At the end of three months, data were collected over a one-week period. Data Collection Personal Information Form was filled by participants to learn about the demographic information of the health care workers. This form made provision for information like age, gender, marital status, occupation, educational status, working time, weekly leisure time and leisure time evaluation frequencies.

A Motivation Scale consisting of 20 items was used to measure the job motivation of the health care workers. Motivation scale was developed by Özgür (2006). The job motivation

scale consisted of two subscales: intrinsic motivation and extrinsic motivation. The total reliability coefficient of the Motivation Scale applied in the study was Cronbach's Alpha value of 0.86. This value was found to be 0.84 for the Intrinsic Motivation subscale and 0.81 for the Extrinsic Motivation subscale.

Leisure Satisfaction Scale (LSS) was also used in this study which was adapted to Turkish language by Gökçe and Orhan (2011). The scales was developed by Beard and Ragheb (1980) and its short form was adapted by Idyll Arbor Inc (2002). The scale consisted of 24 items and it was a 5-point Likert type. The short form of the scale had a Cronbach Alpha coefficient of 93. It was consisted of six subscales: psychological, educational, sociological, relaxation, physiological and aesthetic. The reliability coefficient of the Leisure Time Satisfaction Scale was determined as 0.89.

### 3.3. Data Analysis

The variables data from the anthropometric tests were analyzed using the SPSS v.20.0 (SPSS Inc., Chicago, IL, USA) software program. Skewness and Kurtosis values were examined for the normality distributions of the data. Since the values were between -1 and +1, it was determined that the data showed a normal distribution (Büyükoztürk, 2012). The results were presented as Means±SD. Frequency, Anova and Regression analyzes were conducted in the study. The statistical significance level was at  $p < 0.05$ .

## 4. Results

The demographic information of the healthcare workers who participated in this study is shown in Table 1. 57.8% of the participants were women and 42.2% were men. 44.9% of the participants were single and 55.1% were married. Considering the education of the participants, 15.6% of them had high school education and below, 11.6% had undergraduate education, 42.2% had graduate education and 30.6% had postgraduate education. Considering the experience of the participants in the profession, 28.6% of them worked for 0-3 years, 30% for 4-9 years, 23.1% for 10-20 years and 17.7% for 21 years or more. It was found that 19% of the participants had 1-3 hours, 15% 4-6 hours, 16.3% 7-9 hours and 49.7% 10 hours and more weekly leisure time. The frequency of leisure time evaluation of the participants showed 11.6% as never, 58.5% as sometimes and 29.9% as often (Table 1).

Table 1. The demographic information of healthcare workers participating in the study.

		Frequency	Percentage %	Valid Percentage %
Gender	Women	85	57.8	57.8
	Men	62	42.2	42.2
Marital Status	Single	66	44.9	44.9
	Married	81	55.1	55.1
Education Status	High School	23	15.6	15.6
	Under Graduate	17	11.6	11.6
	Graduate	62	42.2	42.2
	Postgraduate/Doctorate	45	30.6	30.6
Occupational Year	0-3	42	28.6	28.6
	4-9	45	30.6	30.6
	10-20	34	23.1	23.1
	21 and more	26	17.7	17.7
Occupation	Doctor	44	29.9	29.9
	Nurse	58	39.4	39.4
	Other	45	30.6	30.6
Weekly Leisure Time	1-3	28	19.0	19.0
	4-6	22	15.0	15.0
	7-9	24	16.3	16.3
	10 Hours and more	73	49.7	49.7
Leisure Time Evaluation Frequency	Never	17	11.6	11.6
	Sometimes	86	58.5	58.5
	Often	44	29.9	29.9

Table 2. Comparison of LSS Scores by Weekly Leisure Time.

	Weekly Leisure Time	N	Mean	Standard Dev.	F (p)	Difference (LSD)
Psychological	Between 1-3 <sup>1</sup>	28	3.63	1.216	2.480 (.034)*	4>3
	Between 4-6 <sup>2</sup>	22	3.56	0.768		
	Between 7-9 <sup>3</sup>	24	3.36	2.545		
	10 hours and more <sup>4</sup>	73	4.32	0.927		
Educative	Between 1-3	28	3.78	0.937	1.00 (.135)	-
	Between 4-6	22	3.42	1.012		
	Between 7-9	24	3.71	0.363		
	10 hours and more	73	3.69	0.737		
Social	Between 1-3 <sup>1</sup>	28	3.37	0.740	3.587 (.015)*	3>1,2 4>1,2
	Between 4-6 <sup>2</sup>	22	3.39	1.068		
	Between 7-9 <sup>3</sup>	24	3.86	0.571		
	10 hours and more <sup>4</sup>	73	3.82	0.741		
Relaxation	Between 1-3	28	4.10	0.661	1.480 (.223)	-
	Between 4-6	22	4.02	0.414		
	Between 7-9	24	3.75	0.751		
	10 hours and more	73	3.97	0.623		
Physical	Between 1-3	28	3.41	1.016	.899 (.444)	-
	Between 4-6	22	3.63	0.675		
	Between 7-9	24	3.26	0.802		
	10 hours and more	73	3.66	1.406		
Aesthetic	Between 1-3	28	3.67	0.744	1.328 (.268)	-
	Between 4-6	22	3.95	0.815		
	Between 7-9	24	3.81	0.730		
	10 hours and more	73	3.60	0.799		

\*p&lt;0.05

One-Way Analysis of Variance (ANOVA) was applied to determine the differences of Leisure Time Satisfaction Scale and Motivation Scale subscale scores when compared to Weekly Leisure. The findings showed that Psychological Domain scores from the leisure time satisfaction scale /subscale scores significantly differed between groups [ $F_{(146, 4)}=2.480$ ,  $p<.05$ ]. After the Post-Hoc analysis (LSD); It was observed that the psychological domain scores of those with 10 hours of free time per week ( $X=4.32$ ), were significantly higher than those with 7-9 hours and more ( $X=3.36$ ) (Table 2).

It was determined that Social Domain scores from the leisure time satisfaction scale, subscale scores significantly differed between groups [ $F_{(146, 3)}=3.587$ ,  $p<.05$ ]. After the Post-Hoc analysis (LSD); Social Domain scores of those with 7-9 hours of free time per week ( $X=3.86$ ) were found to be significantly higher than the leisure time of those between

1-3 hours ( $X=3.39$ ) and 4-6 hours ( $X=3.39$ ). Also; Social Domain scores of those who have 10 hours or more free time per week ( $X=3.82$ ) were found to be significantly higher than the scores of those with free time between 1-3 hours ( $X=3.37$ ) and those with 4-6 hours of free time ( $X=3.39$ ) (Table 2).

Table 3. Comparison of Motivation Scale Scores by Weekly Leisure Time.

Weekly Leisure Time		N	Mean	Standard Dev.	F (p)	Difference (LSD)
Intrinsic Motivation	Feeling valuable	Between 1-3	28	4.16	0.748	2.146 (.097)
		Between 4-6	22	4.17	0.589	
		Between 7-9	24	3.91	0.917	
		10 hours and more	73	3.80	0.794	
	Organizational commitment	Between 1-3	28	3.50	1.032	.938 (.424)
		Between 4-6	22	3.83	1.062	
		Between 7-9	24	3.54	0.962	
		10 hours and more	73	3.42	1.013	
	Total	Between 1-3	28	3.87	0.861	1.574 (.198)
		Between 4-6	22	4.04	0.770	
		Between 7-9	24	3.78	0.844	
		10 hours and more	73	3.63	0.806	
Extrinsic Motivation	Fee-Rewarding	Between 1-3	28	2.34	1.000	1.727 (.164)
		Between 4-6	22	2.75	1.221	
		Between 7-9	24	2.11	1.056	
		10 hours and more	73	2.55	1.022	
	Team Work	Between 1-3	28	3.81	0.660	1.417 (.240)
		Between 4-6	22	3.69	0.585	
		Between 7-9	24	3.48	0.640	
		10 hours and more	73	3.71	0.542	
	Working Environment-Physical Condition	Between 1-3	28	3.77	0.770	1.356 (.259)
		Between 4-6	22	3.60	0.671	
		Between 7-9	24	3.50	0.613	
		10 hours and more	73	3.80	0.721	
Total	Between 1-3	28	2.93	0.848	1.494 (.219)	
	Between 4-6	22	3.35	0.775		
	Between 7-9	24	3.01	0.785		
	10 hours and more	73	3.00	0.727		

\* $p>0.05$

In the analysis, there were no significant differences found in the comparisons of the differences of the Motivation Scale with respect to weekly leisure time ( $p>.05$ ). In

addition, it was observed that Motivation Scale and Leisure Satisfaction Scale scores did not differ significantly by frequency of weekly leisure time (Table 3).

Table 4. The Comparison of LSS Scores According to Occupational Year.

	Occupational Year	N	Mean	Standard Dev.	F (p)	Difference (LSD)
Psychological	Between 0-3 years	42	4.02	1.967	1.825 (.145)	-
	Between 4-9 years	45	3.44	1.083		
	Between 10-20 years	34	3.44	1.076		
	Between 21 years/ more	26	3.41	0.913		
Educative	Between 0-3 years	42	3.76	0.544	1.947 (.125)	-
	Between 4-9 years	45	3.55	1.097		
	Between 10-20 years	34	3.87	0.537		
	Between 21 years/ more	26	3.47	0.668		
Social	Between 0-3 years	42	3.85	0.576	.842 (.473)	-
	Between 4-9 years	45	3.63	1.049		
	Between 10-20 years	34	3.67	0.670		
	Between 21 years/ more	26	3.56	0.743		
Relaxation	Between 0-3 years	42	3.91	0.682	.157 (.925)	-
	Between 4-9 years	45	3.97	0.612		
	Between 10-20 years	34	4.00	0.630		
	Between 21 years/ more	26	4.00	0.606		
Physical	Between 0-3 years	42	3.77	1.756	.987 (.401)	-
	Between 4-9 years	45	3.52	0.818		
	Between 10-20 years	34	3.49	0.810		
	Between 21 years/ more	26	3.28	0.820		
Aesthetic	Between 0-3 years	42	3.67	0.785	2.282 (.082)	-
	Between 4-9 years	45	3.83	0.734		
	Between 10-20 years	34	3.82	0.700		
	Between 21 years/ more	26	3.37	0.900		

\*p>0.05

One-Way Analysis of Variance (ANOVA) was applied to determine the differences of Leisure Time Satisfaction Scale and Motivation Scale, subscale scores according to the Occupational Year. The findings showed that there were no significant differences ( $p>0.05$ ) (Table 4).



Table 5. The Comparison of Motivation Scale Scores According to Occupational Year.

	Occupational Year	N	Mean	Standard Dev.	F (p)	Difference (LSD)		
Intrinsic Motivation	Feeling valuable	Between 0-3years <sup>1</sup>	42	3.87	,815	3.651 (.014)*	4<2 4<3	
		Between 4-9 years <sup>2</sup>	45	4.15	,638			
		Between 10-20years <sup>3</sup>	34	4.05	0.866			
		21years and more <sup>4</sup>	26	3.56	0.767			
	Organizational commitment	Between 0-3years <sup>1</sup>	42	3.47	0.977	3.321 (.022)*	4<2 4<3	
		Between 4-9 years <sup>2</sup>	45	3.76	1.019			
		Between 10-20years <sup>3</sup>	34	3.62	0.875			
		21years and more <sup>4</sup>	26	3.01	1.109			
	Total	Between 0-3years <sup>1</sup>	42	3.70	0.833	4.645 (.004)*	4<1 4<2 4<3	
		Between 4-9 years <sup>2</sup>	45	3.98	0.756			
		Between 10-20years <sup>3</sup>	34	3.91	0.761			
		21years and more <sup>4</sup>	26	3.29	0.832			
	Extrinsic Motivation	Fee-Rewarding	Between 0-3years	42	2.44	1.036	.555 (.646)	-
			Between 4-9 years	45	2.48	1.104		
			Between 10-20years	34	2.32	1.072		
			21years and more	26	2.68	1.047		
Team Work		Between 0-3years	42	3.65	0.702	.618 (.604)	-	
		Between 4-9 years	45	3.76	0.544			
		Between 10-20years	34	3.72	0.533			
		21years and more	26	3.58	0.558			
Working Environment-Physical Condition		Between 0-3years	42	3.81	0.699	.441 (.724)	-	
		Between 4-9 years	45	3.68	0.851			
		Between 10-20years	34	3.63	0.558			
		21years and more	26	3.71	0.657			
Total		Between 0-3years	42	2.98	0.799	.818 (.486)	-	
		Between 4-9 years	45	3.09	0.797			
		Between 10-20years	34	3.17	0.767			
		21years and more	26	2.88	0.688			

\*p<0.05

It was determined that the scores of the intrinsic motivation subscale of the Motivation Scale, Feeling of Self-Value, showed significant differences between the groups. [ $F_{(146, 3)}=3.651$ ,  $p<.05$ ]. After the Post-Hoc analysis (LSD); the scores of people working in the occupation for more than 21 years ( $X=3.56$ ) were found to be significantly lower than the scores of those working in the occupation between 4-9 years ( $X=4.15$ ) and the scores of those working in the occupation between 10-20 years ( $X=4.05$ ) (Table 5).

It was determined that Organizational Commitment scores, one of the intrinsic motivation subscale of the Motivation Scale, significantly between groups [ $F_{(146, 3)}=3.321$ ,  $p<.05$ ]. After the Post-Hoc analysis (LSD); Organizational Commitment scores ( $X=3.01$ ) of

those working in the occupation for more than 21 years were significantly lower than the scores of those working in the occupation between 4-9 years ( $X=3.76$ ) and the scores of those working in the occupation between 10-20 years ( $X=3.62$ ). It was determined that the intrinsic motivation total scores of the Motivation Scale significantly differed between groups [ $F(146, 3)=4.645, p<.01$ ]. After the Post-Hoc analysis (LSD); the intrinsic motivation total scores of the people working in the occupation for more than 21 years ( $X = 3.29$ ) were significantly lower than the scores of those working in the profession between 0-3 years ( $X=3.70$ ), the scores of those working in the profession between 4-9 years ( $X=3.98$ ) and the scores of those working in the profession between 10-20 years ( $X=3.91$ ). In other comparisons, there was no significant difference found ( $p>.05$ ). (Table 5).

Table 6. The Comparison of LSS Scores According to Occupation.

	Occupation	N	Mean	Standard Dev.	F (p)	Difference (LSD)
Psychological	Doctor	44	3.57	2.159	.103 (.902)	-
	Nurse	58	3.56	0.926		
	Other	45	3.68	0.822		
Educative	Doctor <sup>1</sup>	44	3.32	0.797	6.857 (.001)*	1<2
	Nurse <sup>2</sup>	58	3.84	0.763		1<3
	Other <sup>3</sup>	45	3.78	0.690		
Social	Doctor <sup>1</sup>	44	3.30	0.928	8.625 (.000)*	1<2
	Nurse <sup>2</sup>	58	3.89	0.624		1<3
	Other <sup>3</sup>	45	3.82	0.724		
Relaxation	Doctor	44	3.94	0.580	.060 (.941)	-
	Nurse	58	3.97	0.606		
	Other	45	3.98	0.716		
Physical	Doctor	44	3.34	0.876	1.719 (.183)	-
	Nurse	58	3.50	0.775		
	Other	45	3.79	1.695		
Aesthetic	Doctor	44	3.68	0.874	.045 (.956)	-
	Nurse	58	3.69	0.700		
	Other	45	3.73	0.807		

\* $p<0.05$ 

One-Way Analysis of Variance (ANOVA) was applied to determine the differences of leisure time satisfaction scale and motivation scale and subscale scores according to professions (Table 5). It was determined that the Educational Field scores from the leisure time satisfaction scale, subscale scores significantly differed between the groups [ $F(147, 2)=6.857, p<.01$ ]. After the Post-Hoc analysis (LSD); Doctors' Educational Field scores

( $X=3.32$ ) were significantly lower than the scores of the nurses ( $X = 3.84$ ) and the scores of other health workers ( $X=3.78$ ). It was observed that Social Domain scores, one of the subscale scores of the Leisure Time Satisfaction Scale, differed significantly between the groups [ $F(147, 2)=8.625, p<.01$ ]. After the Post-Hoc analysis (LSD); Social Domain scores of doctors ( $X=3.30$ ) was significantly lower than the nurses 'scores ( $X=3.89$ ) and other healthcare workers' scores ( $X=3.82$ ). (Table 6).

Table 7.The Comparison of Motivation Scale Scores According to Occupation.

		Occupation	N	Mean	Standard Dev.	F (p)	Difference (LSD)
Intrinsic Motivation	Feeling valuable	Doctor	44	3.83	0.835	.618 (.540)	-
		Nurse	58	3.98	0.647		
		Other	45	4.00	0.910		
	Organizational commitment	Doctor	44	3.65	1.019	1.240 (.293)	-
		Nurse	58	3.35	0.992		
		Other	45	3.59	1.036		
	Total	Doctor	44	3.76	0.866	.224 (.799)	-
		Nurse	58	3.72	0.701		
		Other	45	3.83	0.931		
Extrinsic Motivation	Fee-Rewarding	Doctor	44	2.70	1.030	1.687 (.190)	-
		Nurse	58	2.32	1.081		
		Other	45	2.43	1.054		
	Team Work	Doctor	44	3.52	0.496	2.643 (.075)	-
		Nurse	58	3.78	0.560		
		Other	45	3.73	0.687		
	Working Environment-Physical Condition	Doctor	44	3.50	0.687	2.893 (.059)	-
		Nurse	58	3.82	0.640		
		Other	45	3.78	0.785		
	Total	Doctor	44	3.20	0.660	2.390 (.095)	-
		Nurse	58	2.88	0.790		
		Other	45	3.09	0.822		

\* $p>0.05$

In the analysis, there were no significant differences found in the comparisons of the differences of the Motivation Scale by occupations ( $p>.05$ ) (Table 7).

Table 8. Simple Linear Regression Analysis Showing the Prediction of LLS Scores on Intrinsic Motivation Scores.

	B	$\beta$	t	p	Binary r	Partial r
Constant	2.029		4.842	.000*		
Psychological	-.029	-.049	-.589	.557	-.050	-.041
Educative	-.219	-.208	-1.892	.061	-.158	-.133
Social	.287	.277	2.972	.003*	.244	.209
Relaxation	.047	.036	.401	.689	.034	.028
Physical	-.180	-.256	-3.486	.075	-.283	-.246
Aesthetic	.551	.525	6.245	.000*	.467	.440

The dependent variable: Intrinsic Motivation R= .552 R<sup>2</sup>= .305 R<sup>2</sup>adj= .275, F (6,140)= 10.221, p:.000

\*p&lt;0.05

The simple linear regression model in which all independent variables were included in the equation predicted the Intrinsic Motivation scores significantly [ $F(6, 140) = 10.221, p < .01$ ]. In the model, 30% of the variance in Intrinsic Motivation scores were explained ( $R^2 = .305$ ). When the standardized regression coefficients were examined, it was found that Social Domain ( $\beta = .277, p < .01$ ) and Aesthetic Field ( $\beta = .551, p < .01$ ) scores positively predicted Intrinsic Motivation scores (Table 8).

Table 9. Simple Linear Regression Analysis Showing the Prediction of LLS Scores on Extrinsic Motivation Scores.

	B	$\beta$	t	p	Binary r	Partial r
Constant	2.009		4.519	.000*		
Psychological	-.060	-.107	-1.137	.258	-.096	-.091
Educative	-.171	-.173	-1.397	.165	-.117	-.111
Social	.201	.207	1.965	.051	.164	.157
Relaxation	.012	.010	.096	.924	.008	.008
Physical	-.006	-.009	-1.07	.915	-.009	-.009
Aesthetic	.300	.305	3.205	.002*	.261	.255

The dependent variable: Extrinsic Motivation R= .332 R<sup>2</sup>= .110 R<sup>2</sup>adj= .072, F (6,140)= 2.889, p:.011

\*p&lt;0.05

The simple linear regression model in which all independent variables were included in the equation predicted the Extrinsic Motivation scores significantly [ $F(6, 140) = 2.889, p < .05$ ]. In the model, 11% of the variance in Intrinsic Motivation scores were explained ( $R^2 = .110$ ). When the standardized regression coefficients were examined, it was

found that Aesthetic Field ( $\beta = .305, p < .01$ ) scores positively predicted Extrinsic Motivation scores (Table 9).

## 5. Discussion

This study was conducted to investigate the effect of leisure time satisfaction levels of healthcare workers on their job motivation during the COVID-19 pandemic. In literature, it was focused that leisure time satisfaction had a positive effect on psychological health (Pearson, 1998; Pearson, 2008). So, in the findings obtained from the study, considering the weekly leisure time of the participants, it was determined that the psychological and social scale scores from the leisure time satisfaction scale, subscale scores significantly differed between the groups ( $p < .05$ ). It was concluded that employees who have more free time per week had higher psychological and social subscales.

When the LSS scores of the health workers by Occupational Years were compared, there were no significant differences found, but significant differences were found in motivation values ( $p < .05$ ). The intrinsic motivation of the health workers who worked for 21 years or more was found to be lower than those with less working years. Health workers of 21 years and over were found to have lower levels of self-value and organizational commitment from the intrinsic motivation subscales. According to the occupational group, it was determined that the Educational and Social Field scores from the leisure time satisfaction scale, subscale scores differed significantly between the groups ( $p > .05$ ). It was determined that the Educational and Social Domain scores of doctors were lower than the scores of nurses and other healthcare workers. It can be said that leisure time satisfaction is affected by professional status (Pearson, 1998). Simple linear regression analysis was applied to examine whether the scores of Leisure Time Satisfaction Scale predicted motivation. In line with the data obtained, 30% of the variance in Intrinsic Motivation scores was explained in the model. When the standardized regression coefficients were examined, it was determined that the Social and Aesthetic dimension positively predicted the Internal Motivation scores. Besides, it was determined that Leisure Satisfaction significantly predicts Extrinsic Motivation scores in simple linear regression model and 11% of the variance in Extrinsic Motivation scores was explained. When the standardized regression coefficients were examined, it was determined that the Aesthetic dimension scores, one of the independent variables included in the model, positively predicted the Extrinsic Motivation scores. Consequently, it has been observed from these results that healthcare workers who had higher leisure time satisfaction during the COVID-19 Pandemic period had higher job motivation. So we observed that healthcare professionals who play an active role in combating pandemic in particular, do not spare enough time for leisure time

activities or have information about evaluating leisure time activities in order to enjoy more satisfaction from their free time.

In similar studies, Pearson (1998) found job satisfaction and leisure time satisfaction as significant positive predictors of psychological health in a study conducted on 189 male employees. In another study conducted on 155 women, it was determined that leisure time satisfaction had an effect on psychological health, and it was determined that excessive workload (Role overload) negatively affected leisure time satisfaction (Pearson, 2008). It has been determined that leisure time satisfaction contributes directly and indirectly to life satisfaction (Brown, & Frankel 1993; Ho, 1996). However, it can be said that individuals who feel bad at work enjoy less leisure time, relaxless and do not participate in activities that will satisfy them (Cakirpaloglu and Cech, 2019).

Studies show that leisure time activities have different results for individuals. It has been determined that it has a positive effect not only on social life but also in providing motivation in business life and in establishing participatory and social relations (Ragheb and Tate, 1993). In addition, according to the result of the correlation analysis performed for the relationship between leisure time satisfaction and happiness, a positive relationship was found (Öztaş, 2018). While motivation factors are undoubtedly country specific, financial incentives, career development and management issues are key factors. However, financial incentives alone are not sufficient to motivate healthcare professionals (Willis-Shattuck et al., 2008).

When we looked at studies carried out on the job motivation of healthcare workers outside the pandemic, it was observed that there were many internal and external motivation factors that affected the job motivation of employees (Franco, 2004; Leshabari et al., 2008; Willis-Shattuck, 2008; Mbindyo et al., 2009; Lambrou, 2010). Thus, it can be said that increasing the quality of the job, respecting the work of the healthcare staff, giving authority and responsibility, creating an organizational environment where good relations are established can increase the internal motivation, satisfaction levels and performances of the employees. In addition, things like wages, premiums, extra opportunities, good working conditions, etc. can also increase the internal motivation, satisfaction levels and performances of the employees, and have a positive effect on their performances through external motivating factors (Aslan and Doğan, 2020).

## 6. Conclusions

We concluded that the satisfaction of healthcare workers from their leisure time positively affects their job motivation, especially in the COVID-19 pandemic, where job motivation is more important. It is important for healthcare professionals to be able to create environments that can distract themselves from this stress, especially when they are under greater stress, and to provide special training on these issues. Suggestions and

plans for quality leisure time should be presented through regular in-service trainings and healthcare professionals should be trained to apply these plans to their own lives.

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