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THE EFFECT OF VOCATIONAL ADJUSTMENT ON WORK STRESS

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ABSTRACT

The current research aims to show the effect of Vocational Adjustment in reducing the work pressures that the research sample is exposed to, represented by the doctors working in the hospitals of the Medical City Department, whose number is (221) doctors, who represent the research sample from the total community of (521) doctors distributed over four hospitals (m. Ghazi Al-Hariri Specialized Surgery / m. Baghdad Educational / m. Burns Specialist / m. Digestive System and Liver Education) to represent the research community, and in light of this, a hypothetical chart was built showing the influence relationship between the variables concerned with the research and a set of main and sub-hypotheses was derived from it, and from In order to achieve the goal of the research, answer its questions, test its hypotheses and verify their validity, the researcher adopted the questionnaire as a main tool for the purpose of data and information collection, which included (32) paragraphs supported by structured questions for the research sample as an auxiliary tool. , standard deviation, coefficient of variation, Pearson correlation coefficient), and the results were extracted using the computer program (SPSS V.25) and the statistical analysis program (Amos V.25) and used the method of (Stepwise) to find out the effect between the variables.

The research reached a set of results, perhaps the most important of which is the presence of a significant effect of Vocational Adjustment in reducing stress, as the surveyed hospitals when they have Vocational Adjustment , and every doctor works according to the specialization and in line with the nature and a positive work environment, this will have an effective and influential role In contributing to reducing the work pressures to which the doctor is exposed during work, the research presented a set of recommendations, the most prominent of which is that hospital administrations should pay actual attention to the advancement of the levels of the work environment by paying attention to the material aspects in the workplace and using and developing modern work methods and attention to developing training programs and organizing hours Shift work The research concluded with a number of proposals for subsequent future studies.

Keywords: *Vocational Adjustment, work stress, medical city district hospitals*

INTRODUCTION

The health sector is one of the vital and important sectors that is witnessing serious attempts to develop and modernize it with the aim of providing high-quality health services to citizens of all segments, and which suffers from several obstacles that negatively affect the performance of medical staff, which requires standing on the most important problems that health institutions suffer from professional pressures resulting from Several reasons

The Corona (19-Covid) pandemic has revealed many weaknesses that health institutions suffer from, especially in the Iraqi environment. Therefore, the focus of attention of researchers in the field of behavioral and administrative sciences has focused on searching for mechanisms and factors that can contribute to reducing occupational pressures, and among these behavioral variables are Vocational Adjustment, which contributes to achieving harmony and interaction

between employees. By interacting with others on the grounds that the work environment affects them in terms of the effort they make as well as the level of comfort, satisfaction and belonging to the organization

THE FIRST AXIS: METHODOLOGICAL FRAMEWORK OF THE RESEARCH

1. Research Problem

Due to the high uncertainty, ambiguity and unplanned dynamic changes in the global environment and the Iraqi environment in particular, organizations have increased their interest in improving the work environment and the prevailing and influential values and trends it may contain until it has become a top priority in a society that directly affects the lives of Individuals working economically, culturally and psychologically, so achieving acceptable levels of Vocational Adjustment among workers and directing the organization towards success and excellence by providing appropriate physical and mental working conditions is an important indicator of success in overcoming occupational pressures. Therefore, the research problem is embodied in the difficulty of compatibility of doctors in their work and organization, which is negatively reflected in the increase in work pressures that may

prevent their stability at work. Therefore, the following questions can be asked:

1. What is the level of Vocational Adjustment of doctors working in the surveyed hospitals?
2. What is the level of work stress for doctors working in the surveyed hospitals?
3. What is the effect of the dimensions of Vocational Adjustment in reducing work stress in the surveyed hospitals?

2. The Research Importance

The importance of the research stems from the following:

- a) The importance of studying the variables that were touched upon (Vocational Adjustment , work pressures) in that they discuss important topics in the field of organization and organizational behavior.
- b) The importance of the place of application, which is the health sector, represented by the hospitals of the Medical City Department, and the role of this sector in society because it is one of the important sectors in Iraq. Conducting such research and its consequences can reach recommendations that enhance the role of Vocational Adjustment in reducing the overall The pressures on doctors.

- c) The importance of the research stems from the importance of the community and the research sample, who are doctors, and how their work environment can enhance or discourage Vocational Adjustment, especially under the conditions of the Corona pandemic (19-Covid) and in general in the conditions in which Iraq has lived for many years of deterioration.

3. Research Objectives

The research seeks to achieve the following objectives:

- a) Identifying the level of Vocational Adjustment among the sample of doctors in the hospitals under research and providing the necessary recommendations to enhance it.
- b) Diagnosis of work stress levels in the surveyed hospitals.
- c) Recognize the nature of the relationship and the effect between Vocational Adjustment and work pressures

4. Research Hypotheses

The research hypotheses were formulated in the light of the hypothesis and the objectives of the research, and in accordance with the theoretical references for Vocational Adjustment, and work pressures, which will be subject to testing,

analysis and moral treatment, and then they will prove their validity or not.

The main hypothesis between the dimensions of the occupational adjustment variable and the work stress variable.

A- There is a significant effect of the nature of work dimension in reducing work stress.

B - There is a significant effect of the work environment dimension in reducing work stress.

C- There is a significant effect of the dimension of the relationship with colleagues in reducing work pressures.

D- There is a significant effect of the relationship with the supervisor dimension in reducing work stress.

5: The hypothetical research scheme:

The research scheme presents an expressive picture of the idea of the research and explains the nature of the relationships and trends of influence between its variables, and it can be clarified through Figure (1) and according to the following variables:

- a) Vocational Adjustment : Addressing the Vocational Adjustment by relying on the (Nan, 2019) model, which is an (independent) explanatory variable.
- b) Work stress: a study of work stress by relying on the (Chen:2020) model, which is an explanatory variable (continued).

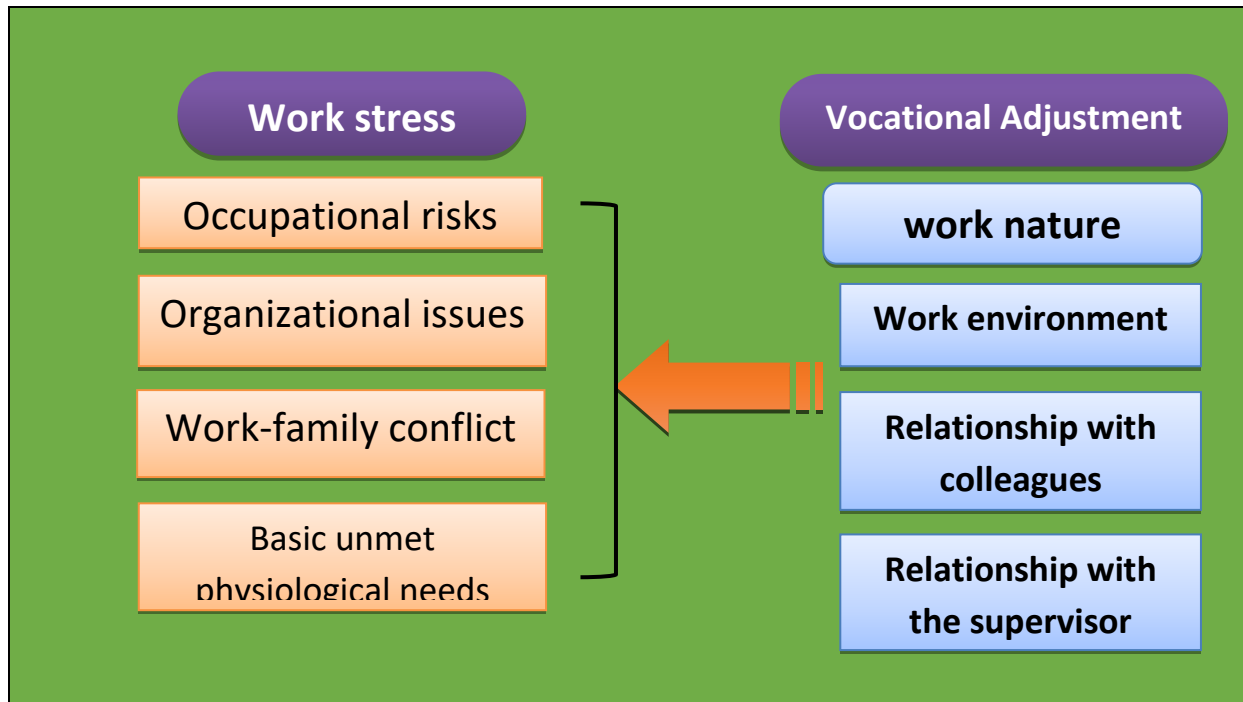


Figure (1) Hypothesis Research Scheme

6. Research Limits

The research scopes its limits (cognitive, field, human, temporal)

- Cognitive limits: they are embodied in three axes: Vocational Adjustment as an independent variable and work stress as a dependent variable.
- Field boundaries: The research was tested with its hypothetical model in the Medical City Department and included hospitals (M. Martyr Ghazi Al-Hariri for Specialized Surgery / M. Baghdad Education / M. Burns Specialist / M. Gastroenterology and Liver Education) as a place for application as a research community.
- Human limits: A random sample of doctors working in the hospitals under study was selected.

- Time limits: It was represented by the duration of preparing the theoretical and practical side of the research. The theoretical side took from the twelfth month of the year (2021) until the completion of its preparation. As for the practical side, it extended from 3/28/2022 to 5/15/2022, as it took a process Preparing and judging the questionnaire, obtaining approvals, distributing the questionnaire in the hospitals under investigation and retrieval, due to the need for interpretation of its paragraphs for each respondent.

7. Community sample and research

The statistical community consists of (521) people, depending on the data of the

Division of Human Resources, the Statistics and Planning Department, and the owners unit in each of the hospitals surveyed. The size of the research sample was determined according to Stephen Thompson's equation. (221) forms were received, as there are no forms that were neglected by the sample.

THE SECOND AXIS: THE THEORETICAL FRAMEWORK

First: Vocational Adjustment

Occupational compatibility is a fundamental concept rooted historically and philosophically within the concepts of organizational psychology, and during the past years, many researchers have expanded and clarified the concept, so that it can serve as a pivotal concept to increase understanding and strengthen the link between the individual and his professional environment (2014: 217,. Hassan,. et al The first appearance of merging the terms “adjustment” and “vocational” in the concept of “professional adjustment” was in the late eighties in a study (Rosenfeld, 1989), and credit is also attributed to (Schkade & Schultz: 1992) in creating the concept. Theories to explain the concept, including the Minnesota theory of compatibility with work, which is one of the most prominent theories from which researchers began to develop the concept (Welder,.etal,.2019:4), and in the

nineteenth century the term compatibility expanded through allocation across disciplines, especially Through psychology and sociology until it became popular in the behavioral and organizational literature, so it is a subject for many fields. It has been used by psychologists, sociologists, management and behavioral scientists (Hocenski, 2021:27)), it refers to the individual's satisfaction with his work and the components of his environment and his relationship With those around him from work leaders and colleagues, which is an important matter for the individual to carry out his work tasks to the fullest extent, Vocational Adjustment is linked to success at work and compatibility with the work environment in which he works. Therefore, the concept of occupational compatibility focused on establishing a match and harmony between the working individual and the work environment by promoting the acquisition of satisfactory work habits, increasing the physical and emotional ability of the individual to meet the physical and emotional requirements of the work environment, and addressing attitudes and behaviors that may limit the satisfactory performance of work (Charlton & Wofford 2022:157)) Occupational adjustment is not an inborn trait but an acquired trait that culminates in a process of socialization that begins at birth in which the family, social and

educational environments play a critical role in acquiring appropriate behavioral, emotional and motivational traits and addressing psychological factors such as self-confidence, self-control, social skills, and confidence in the individual's ability to Meeting changing business demands (Strauder 2021:52, etal.), and Yorketal2021:3 sees it as a process of coherence and consistency. The individual interacts with the various social relationships that exist in the work environment, including colleagues and bosses, with the aim of enhancing job satisfaction.

Second: Dimensions of Vocational Adjustment

As the research adopted the dimensions that identified (Na-Nan, 2019) in measuring Vocational Adjustment as it fits with the objectives of the research and the application environment, in addition to the presence of previous studies that applied it in various organizations, so the current research agreed with it, which are as follows:

A- The dimension of the nature of the work

This dimension is one of the most important dimensions that achieve Vocational Adjustment and one of the most important axes of professional work in any field. The objectives of the organization must first determine

the nature of the work necessary for economic activity, for example, there are industrial, service, commercial and other institutions. Knowing the nature of work contributes to determining the organization's needs for the type of human resources and the needs necessary to perform tasks efficiently and effectively (Taha, Tariq, 2006: 225) and the nature of work affects the extent of harmony The worker with tasks and activities, as the increase in working hours, the speed of work and the increase in production will be at the expense of his nerves and psychological comfort. 11)

B- Work environment:

One of the basic features of the environment of organizations today is of a rapidly changing nature, which increasingly requires individuals working in organizations to achieve harmony and interaction in such environments, for example, the compatibility of workers' capabilities with new technology and learning new work methods and behaviors in order to continue In performing work tasks (Hanson et al., 2005: 25), providing favorable work environments for the workforce has become an obligation for organizations to help them perform their jobs in a better way and contribute positively to the

productivity of organizations, so the work environment is a place where workers perform their duties and are available All tools and resources to perform their duties (Edward & Purba, 2020:1554), and Okoshi. Etal., 2013) described a positive work environment as leading to a successful career path and achieving a work-life balance and thus conducive to work and family stability, and a positive work environment also leads To create cohesive work teams and positive relationships between colleagues and management, which helps workers to overcome all the obstacles they face. Et al., 2022:3), in contrast to a negative work environment which includes a physically unsuitable environment, too noisy, lack of equipment, inadequate lighting system, excessive workload, lack of benefits, inadequate organizational support, long working hours and conflicts with co-workers and managers Kim ,et al., 2020:15) (as such conditions can cause psychological and occupational stress, which may lead to lower levels of their job performance. Therefore, it is very important to identify the factors that may negatively affect the performance of workers' tasks. (Sarıköse., et al., 2022: 2).

C- Relationship with the supervisor

This dimension refers to the extent to which employees perceive the informational, emotional and material support of supervisors and officials, where informational support refers to the supervisors' knowledge of their abilities and experiences in addition to reward, punishment, feedback and direction they practice to improve the efficiency of workers, and material support includes the time that supervisors provide for their employees as well as items, equipment and financial aid They need to perform their tasks, and emotional support expresses some of the actions that supervisors appreciate, pay attention to, love and respect them and provide them with the necessary assistance to enable their employees to overcome difficulties such as stress and conflicts that they face at work (Özkara, 2022:789)), so the supervisor's support and cooperation is one of the factors Contribute to the success of the organization as good relations between workers and supervisors are important in helping them to familiarize them with their jobs in the workplace Taş., et al., 2021:153)), as this relationship contributes to increasing job satisfaction rates, which contributes to

reducing burnout and tension within the organization (2020: 479) (Taş & Özkara).

D- Relationship with co-workers

Co-workers' relationships are an important source of positive influence on workers' satisfaction, which is reflected in their Vocational Adjustment (Ariani, D.W 2015:37)). This dimension is represented in the worker's relationship with his colleagues and the formation of cooperation and competition with his colleagues, which creates an atmosphere of creativity and development. Therefore, the relationships between co-workers Work in organizations are as follows: (Gürel, 2012: 41)

- 1- Helping co-workers who were unable to get along with work
- 2- Helping co-workers who have a heavy workload.
- 3- Helping new employees to fit in and adapt to the environment.
- 4- Helping co-workers who have a problem in their work.

Positive co-worker relationships are extremely important because they provide moral support to workers and have a positive impact on worker happiness. The formation of

relationships between worker and co-workers will lead to positive friendships in the workplace that will benefit the mental and physical health of workers(Na-Nan., et al.,2018: 107) He (Ramayah, etal, .2011:145) pointed out that the harmonious relations of workers have a great role in overcoming all the obstacles and pressures they are exposed to in the organization, and also makes their positive relations more responsible and enthusiastic in their work, which ultimately leads to an increase in their job performance. Workers who have positive relationships and work environment are more productive and have a contribution to achieving the expected goal of the organization and these relationships affect the worker's decision to leave his job or resign

Third: The Concept of Work Stress

Work stress is an important concept in managerial and organizational fields and one of the areas of interest to many researchers and is frequently studied in many research papers at both theoretical and applied levels (Minavand, et al., 2013: 94)). There is a large number of concepts, theories and practices related to work stress, which includes research in many fields (Fila, M. J. 2014: 157). Therefore, scientific interest in stress has grown and

flourished in many sciences such as engineering, physical, medical and psychological sciences, administrative and organizational sciences, and they proposed their concepts and methodologies. Which has an important role in the development of the concept (Easa, 2021:64)), which makes the concept more complex and multifaceted scientific has defined it (3BABARINDE & AYOTUNDE, 2022:) on the basis of the external environment surrounding the individual, as it is seen as any stimulus that stems from the internal environment Or external factors that bypass the sources of compatibility of the individual or the social system causing physical, psychological and social risks at work. In the study) CROSSWELL, A. D., & LOCKWOOD, K. G. 2020) defined it on the basis of the extent of the body's response (emotional, cognitive, behavioral, physiological) to external stimuli and forces causing stress, while Adzakpah., et al., 2016: 2)) defined it on the basis that it is the product of interactions, as it is seen as the emotional and physical reactions resulting from interactions between workers and their work environment when job requirements exceed capabilities and resources.

Fourth: The Dimensions of Work Stress

As the research adopted dimensions in the study (Chen, elat., 2020) to measure work

stress as it is more consistent with the goals and directions of the research and the most appropriate with the Iraqi environment and with the research sample being, in addition to the presence of previous studies that applied it in the Iraqi environment and in various organizations, so the current research agreed with her as follows:

A- Occupational hazard:

Occupational risks include a variety of hazards, including chemical, biological, psychological and physical hazards such as X-ray hazards, harmful chemicals, cold, noise, safety hazards, insufficient lighting and other hazards. Chemical hazards are the hazards resulting from handling chemicals in their various forms (solid – liquid – gaseous), 2017:11 (ILO). Biological hazards are “microorganisms and other vectors of plant or animal origin that can cause adverse health effects. to workers (EU-OSHA, 2019,. 16), and biological hazards are among the most common risks that hospital staff face and pose a threat to human health. All workplaces contain the possibility of exposure to various forms of biological hazards, especially through Transmission of infectious diseases from one person to another (Jones, A. 2021:8). Physical hazards include all physical factors

present in an environment. Concrete frameworks that can be controlled through different means and preventive measures because they are known, specific, measurable and detectable (Yaguibou, et al., 2021:95).

B- Organizational Issues:

Organizations in human society are the main elements. Organizations must not only be flexible and adaptable to the changing environment, but must also have the ability to identify the problems that they may face because they are subject to many problems, whether internal or external problems. Some problems are simple and some are complex that require firm decisions. These problems are called organizational problems (Dalvi, M, R, 2013: 646)). Stress at work occurs as a result of some wrong administrative practices that organizations suffer from, especially in the health sector, and they include weak organizational policies, inflexible rules, and problems of unorganization of work (workload and role conflict). And role conflict) and excessive monotony in work and problems of the organizational structure and poor communication between different levels (Krishna, et al., 2015:280).

C- Work-Family Conflict:

(Rohe & Holmes: 1966) is among the first researchers who pointed out that private life events can affect the health of human resources and thus their sense of stress, which leads to conflicts due to the imbalance of roles between responsibilities in family life and the responsibilities of the workplace (Hamid ,et al., 2019:4), and academics have studied the interaction between these two areas of what was called the work-life conflict or the work-family conflict for decades and saw it as "a form of conflict between roles where the role in work and the family field is mutually incompatible in some respects , where professional responsibilities and duties interfere with family obligations, and family obligations also conflict with working life (Abdullah,etal.,2021:3).

D- Unmet Basic Physiological Needs:

In the field of psychology and organizational behavior, a need is defined as a deficiency in something in which the integrity of physical or psychological life lies, and thus the differentiation of needs. Some of them are organic, biological, or physiological, and some are material. The other is Psychological Need psychological obliges a person to live

a better life (Abd al-Moneim al-Hanafi, 2003: 377). These physiological needs are the basic requirements for the survival of workers such as food, water, sleep, oxygen and all the other things we need to keep our bodies working as they should. Strength the longer the deprivation period (Aruma & Hanachor, 2017:19).

THE THIRD AXIS: THE PRACTICAL FRAMEWORK

First: Descriptive analysis of the surveyed hospital data

1- Presenting the responses to the independent variable Vocational Adjustment and its dimensions at the individual and overall levels for each of the hospitals surveyed and analyzed.

The independent variable measured Vocational Adjustment in the surveyed hospitals through four (dimensions of the nature of work, work environment, relationship with colleagues, relationship with supervisor) and through (16) paragraphs, and through the means and methods of descriptive analysis adopted in the analysis of primary data and after it was confirmed by During the exploratory factor analysis and the reliability coefficient, as the data of Table (1) indicate the positive opinions of the respondents regarding this variable, which

led to the independent variable having the highest value of the arithmetic mean of the Baghdad Teaching Hospital with an arithmetic mean (3.675) and at a good level and that the consistency value of the answers is acceptable, which Reflected by the value of the standard deviation (0.475), the coefficient of variation (12.93) and the relative importance (1), which indicates the quality of most of the respondents in all the hospitals under study. As for the lowest arithmetic mean for the variable of Vocational Adjustment , it was for (Martyr Ghazi Hariri Hospital for Specialized Surgeries), which amounted to (3.005) and at the average level of weak adoption and with a standard deviation of (0.460) that reflects the lack of dispersion of the sample answers, and at the level of dimensions they are as follows:

1- After the nature of the work, he achieved the highest arithmetic mean for (Baghdad Teaching Hospital), which reached (3.788), with a good level indicating the good adoption of the dimension and with a standard deviation of (0.682) indicating convergence in their answers and with a coefficient of difference (18.00) and with relative importance (1). Most of the employees in Baghdad Teaching Hospital gain good experience in their work that is being carried out as a result that these works have come according to their field of work

and job specialization, and most doctors have a feeling of frustration when their tasks assigned to them are not completed in a timely manner. This matter is not found well in the other surveyed hospitals, especially the hospital (the digestive system and liver), as it came with the lowest arithmetic mean, as it reached (2.520) and indicates the weak adoption of this dimension and with a standard deviation of (0.677) that reflects the lack of dispersion of the sample answers.

2- Work environment: the highest overall value of (for Burns Specialized Hospital) came as its mean was (3.308), with a mean level and standard deviation (0.811), which is an acceptable dispersion of answers with a coefficient of difference (24.52) and a relative importance (2). It is noted from the results that all hospitals The respondents were not at the required level in the work environment, especially for the hospital (Gastroenterology and Liver), as it was lower in an arithmetic mean by (2.520) and at a weak level and with a standard deviation of (0.677). Which is supposed to greatly facilitate the process of communication between the medical staff and the communication of the upper management with the middle and executive management, as well as that the processes of training and development of workers were not at the required level that helps to develop the levels of workers in

order to adapt to the developments taking place little by little.

3- The relationship with colleagues and in total, the arithmetic mean of the dimension reached (4.069), which is a high value, and this indicates that the answers of the sample were acceptable and at a good level indicating the good adoption of this dimension and with a standard deviation of (0.636) that shows an acceptable consistency in the answers of the research sample towards this dimension and with a coefficient A difference of (15.63) and of relative importance (2) and this indicates that the nature of the relationship between colleagues at work within the Baghdad Teaching Hospital is good or characterized by positive relations and good dealing, in addition to sharing and exchanging functional experiences among them and in most cases the nature of work as a team One work, which in turn will help to exchange knowledge and enhance confidence among them, but this matter was not good in the rest of the surveyed hospitals, especially for (Specialized Burns Hospital), where the arithmetic mean reached (2.962) and at a weak level and with a standard deviation of (0.419)

4- The relationship with the supervisor, the highest value for the dimension came for (Baghdad Teaching Hospital), as its

mean was (4.139), which is a very high value, while the dispersion in the answers was acceptable with a standard deviation (0.692), a coefficient of difference (16.72) and a relative importance (1) As for the lowest arithmetic mean, it was for (The Martyr Ghazi Hariri Hospital for Specialized Surgeries), which reached (3.589), with a good level and with a standard deviation of (0.722), which is an acceptable dispersion of answers, which indicates a good relationship between the supervisor and the doctors working in the surveyed hospitals, the relationships built

On respect, cooperation, understanding and appreciation, which is reflected in motivating the positive behavioral practices of the sample members. While there is an appreciation for all the efforts that are implemented by the medical staff, but there are some problems that doctors suffer from in their relationship with the supervisor, especially when it comes to the discussion with the higher management about the tasks assigned to them, meaning that there is a weakness in the communication process between the upper management

Table (1) Arithmetic means, standard deviation, coefficient of variation, and the relative importance of the dimensions of Vocational Adjustment

Baghdad Education				Ghazi Hariri for Specialized Surgery				Digestive system and liver				burn specialist				Dimensions	r
Relative importance	Variation coefficient	standard deviation	Arithmetic mean	Relative importance	Variation coefficient	standard deviation	Arithmetic mean	Relative importance	Variation coefficient	standard deviation	Arithmetic mean	Relative importance	Variation coefficient	standard deviation	Arithmetic mean		
3	18.00	0.682	3.788	3	27.85	0.741	2.661	3	26.87	0.677	2.52	3	24.51	0.811	3.309	work nature	1
4	24.08	0.651	2.704	3	27.85	0.741	2.661	3	26.87	0.677	2.52	4	24.52	0.811	3.308	Work environment	2
1	15.63	0.636	4.069	1	17.23	0.536	3.111	2	24.69	0.805	3.26	1	14.15	0.419	2.962	Relationship with colleagues	3
2	16.72	0.692	4.139	2	20.12	0.722	3.589	1	23.26	0.884	3.8	2	18.89	0.763	4.039	Relationship with the supervisor	4
1	12.93	0.475	3.675	3	15.31	0.46	3.005	2	14.78	0.447	3.025	4	16.53	0.563	3.405	general medium	

Second - Presentation of the variable responses adopted, work pressures and its dimensions at the individual and total levels for each of the hospitals surveyed and analyzed.

The mediator variable measured work stress in the surveyed hospitals, through four (occupational risks, organizational issues, work conflict - family and unmet basic physiological needs) and across (16) paragraphs, and through table (2) shows the means and methods of descriptive analysis adopted in the analysis of primary data. And after it was confirmed through exploratory factor analysis and the stability coefficient, which led to the independent variable work stress having the highest value for the arithmetic mean of the Baghdad Teaching Hospital, as its mean reached (3.551) with a good level and standard deviation (0.325), while the lowest mean for the work stress variable was The Martyr Ghazi Hariri Hospital for Specialized Surgery had a score of (3.338), an average level and a standard deviation of (0.366), and at the level of dimensions, they are as follows:

1- **Occupational risks:** it was the highest value of the dimension for (Specialty Burns Hospital), as its arithmetic mean was (3.519) with a good level and a standard deviation of (0.515) reflecting the convergence of their answers and with a coefficient of difference (14.63) and with

relative importance (1). As for the lowest arithmetic mean, it was For (Martyr Ghazi Hariri Hospital for Specialized Surgeries) it reached (3.257), with an average level and a standard deviation of (0.560).

2- Organizational issues: In general, the highest value for Baghdad Teaching Hospital came, as its mean was (3.867), which is a high value, and this indicates that the sample answers were acceptable with a standard deviation of (0.698), a coefficient of difference (18.05) and a relative importance (1), As for the lowest arithmetic mean, it was for the Burns Specialist Hospital, which amounted to (3.346), with a mean level and a standard deviation of (0.845), which indicates homogeneity in the sample responses.

3- Work-family conflict: the highest value of the dimension came within the answers of the researched sample for (Gastrointestinal and Liver Hospital), as the arithmetic mean was (3.740) and at a good level and with a standard deviation of (0.917), meaning that the sample answers are of high homogeneity. With a coefficient of difference (24.52) and a relative importance (4), that is, most of the surveyed hospitals, especially the digestive system hospital, in which doctors suffer from conflict between work and family. As for the lowest arithmetic mean, it was for (Martyr Ghazi Hariri Hospital for Specialized Surgeries), which amounted to

(3.146), with an average level and a standard deviation of (0.577).

4-Basic unmet physiological needs: In total for the dimension, the highest value came within the answers of the researched sample for (Baghdad Teaching Hospital), where the arithmetic mean reached

(3.653), a good level, a standard deviation (0.622), a coefficient of difference (17.03) and a relative importance (2). The lowest mean was for the Hospital (Gastrointestinal System and Liver), which reached (3.320), with an average level and a standard deviation of (0.772).

Table (2) Arithmetic means, standard deviation, coefficient of variation, and the relative importance of the dimensions of work stress

Baghdad Education				Ghazi Hariri for Specialized Surgery				Digestive system and liver				burn specialist				Dimension S	r
Relative importance	Variation coefficient	standard deviation	Arithmetic mean	Relative importance	Variation coefficient	standard deviation	Arithmetic mean	Relative importance	Variation coefficient	standard deviation	Arithmetic mean	Relative importance	Variation coefficient	standard deviation	Arithmetic mean		
3	17.81	0.612	3.436	2	17.19	0.56	3.257	1	17.50	0.574	3.28	1	14.63	0.515	3.519	Occupational risks	1
4	18.05	0.698	3.867	4	21.66	0.782	3.611	2	20.45	0.777	3.8	4	25.25	0.845	3.346	Organizational issues	2
1	15.45	0.502	3.25	3	18.34	0.577	3.146	4	24.52	0.917	3.74	3	21.94	0.806	3.673	Work-family conflict	3
2	17.03	0.622	3.653	1	15.96	0.533	3.339	3	23.25	0.772	3.32	2	20.59	0.689	3.346	Basic unmet physiological needs	4
1	9.15	0.325	3.551	2	10.96	0.366	3.338	4	14.63	0.517	3.535	3	12.45	0.432	3.471	general medium	

Second: Testing The Research Hypothesis

Test the effect between the research variables

Test the main hypothesis between the dimensions of occupational compatibility in reducing work stress

To test the main hypothesis that states (there is a significant effect between the dimensions of Vocational Adjustment in

reducing work stress), the analysis will be conducted according to a simple linear regression model, as follows:

$$\text{Work pressure} = 2.395 + 0.321 (\text{occupational fit})$$

It is evident from the table (3) that:

The calculated (F) value was (65,781). And it is greater than the tabular value (F) of (3.94) at the level of significance (0.05), so we reject the null hypothesis and the alternative hypothesis is accepted, which

states (there is a significant effect between Vocational Adjustment in reducing work stress), which indicates that Vocational Adjustment has an impact. It is clear in reducing work pressures, that is, hospitals' interest in providing a healthy work environment and nature, and attention to the nature of the relationship between colleagues and work supervisor in a positive manner that is dominated by understanding, love and trust, this will have an effective and influential role that contributes to reducing work pressures, and this was confirmed by a study (Saleh: 2010) that the Vocational Adjustment of doctors working in hospitals is one of the important indicators of their success in performing their tasks and duties with patients, with their colleagues and with their superiors. Especially if the professional incompatibility persists as a result of physical and psychological work conditions, bad social relations and an inappropriate work environment.

Through the value of the Adjusted Determination Coefficient (R^2) of (0.227), it is clear that Vocational Adjustment explains 23% of the variables that occur on work stress, while the remaining percentage (77%) is due to other variables that are not included in the research model. The calculated value (t) of the marginal slope coefficient of the occupational adjustment variable (8.111) was recorded.

It is greater than the tabular value (t) (1.984) at the level of significance (0.05), and this indicates the significance of the marginal slope coefficient of the occupational adjustment variable. One will lead to an increase in work pressure by (32%), and the value of the constant (α) was recorded in equation (2.395), meaning when the occupational compatibility is equal to zero, the work pressure will not be less than this value.

To test the validity of the sub-hypotheses emanating from the main hypothesis, this will be done according to the following:

1. Test the first sub-hypothesis

And to test the first sub-hypothesis, which stipulates the following (there is a significant effect of the nature of work dimension in reducing work stress), the analysis will be carried out according to a simple linear regression model, as follows:

Work pressure = 3.091 + 0.119 (nature of work)

It is clear from table (3) the following:

The calculated (F) value achieved its value (18,880), which is greater than the tabular value (F) of (3.94) at the level of significance (0.05), so we reject the null hypothesis and the alternative hypothesis is accepted, which states (there is a significant effect of the dimension of the nature of work in reduce work stress). Which indicates that the surveyed hospitals

the more they seek to pay attention to the nature of work in terms of consideration

The quality of the tasks and procedures for the doctor with the amount of work available whenever this contributes positively to reducing work stress, and through the value of the Adjusted Determination Coefficient (R^2) of (0.075) it is found that the nature of the work dimension explains (8%) of the variables that occur on the Work pressures. The remaining percentage (92%) is due to other variables not included in the research model, as the calculated value (t) of the marginal slope coefficient for the dimension of the nature of work was recorded (4.345). It is greater than the tabular value (t) of (1.984) at the level of significance (0.05), and this indicates the significance of the marginal slope coefficient for the dimension of the nature of the work. By one unit, it will increase work pressure by 12%. The value of the constant (α) was recorded in equation (3.091), meaning when the dimension of the work nature is equal to zero, the work pressure will not be less than this value.

2. Second sub-hypothesis test

To test the second sub-hypothesis, which states (there is a significant effect of the work environment dimension in reducing work stress), the analysis will be conducted according to a simple linear regression model, as follows:

Work pressure = 3.524-0.017 (Working environment)

The calculated (F) value achieved its value (0.230). It is smaller than the tabular value (F) of (3.94) at the level of significance (0.05), so we accept the null hypothesis and the alternative hypothesis is rejected, which states (there is no significant effect of the dimension of the work environment on work stress) and this indicates that the work environment does not contribute to reducing work pressures, meaning that all the surveyed hospitals have a poor working environment that takes into account all the requirements that must be provided to the doctor during his work. Also, the nature of the work of hospitals and the continuous pressures of work on them has led to the senior management's lack of attention to the behavioral and recreational aspects that the doctor needs from time to time to get rid of tension and burning at work, and therefore as a result of this decline in attention to the work environment, this contributed negatively to the lack of influence on the work environment. In reducing work stress, and this is what the study (Madi, Bertal: 2021) emphasized the need to pay attention to the work environment as it is an important factor among the factors leading to pressures in the field of work, so the lack of interest in improving me. The work force generates work pressures on

workers, especially during the period of the Corona pandemic (19-Covid)

3. Third sub-hypothesis test

In order to test the third sub-hypothesis, which stipulates the following (there is a significant effect of the dimension of the relationship with colleagues in reducing work stress), the results came as follows:

$$\text{Work pressure} = 2.591 + 0.246 (\text{relationship with colleagues})$$

It is evident from Table (3) that:

The calculated value of (F) achieved a value of (73,702). And it is greater than the tabular value (F) of (3.94) at the level of significance (0.05), so we reject the null hypothesis and accept the alternative hypothesis, which states (there is a significant effect of the dimension of the relationship with colleagues in reducing work stress). That is, the more interest and care there is in the nature of the relationship between co-workers, the more positively this contributes to reducing work pressures. Through the value of the Adjusted Factor of Determination (R^2) of (0.248), it is clear that the dimension of the relationship with colleagues explains about (25%) of the variables that occur on work stress, while the remaining percentage (75%) is due to other variables not included in the work. The research model, as the calculated value (t) of the marginal slope coefficient of the dimension of the relationship with colleagues was recorded

(8.585). And it is greater than the tabular value (t) of (1.984) at the level of significance (0.05), and this indicates the significance of the marginal slope coefficient of the dimension of the relationship with colleagues, as shown by the value of the marginal slope coefficient (β) of (0.246) that an increase in the relationship with colleagues by one unit will lead to an increase in work pressure by 25%. The value of the constant (α) was recorded in equation (2.591), meaning when the dimension of the relationship with colleagues is equal to zero, the work pressure will not be less than this value.

4. Fourth sub-hypothesis test

To test the fourth sub-hypothesis, which stipulates the following (there is a significant effect of the dimension of the relationship with the supervisor in reducing work stress)

$$\text{Work pressure} = 2.275 + 0.307 (\text{relationship with supervisor})$$

The calculated (F) value was (135,321). And it is greater than the tabular value (F) of (3.94) at the level of significance (0.05), so we reject the null hypothesis and the alternative hypothesis is accepted, which states (there is a significant effect of the dimension of the relationship with the supervisor in reducing work stress) and this indicates that the relationship With the supervisor, the strong and effective influence in reducing work pressures, that

is, when the surveyed hospitals take care and take into account the nature of the relationship between the supervisor and the doctor and try to be close to the doctors and treat the problems they suffer from, this will have an effective and influential role in reducing work pressures. As it appears through the value of the Adjusted Determination Coefficient (R^2) of (0.379) that after the relationship with the supervisor explains 38% of the variables that occur on work stress, while the remaining percentage (62%) is due to other variables that are not included in the search form. Where the value of (t) calculated for the marginal slope coefficient of the dimension of the relationship with the

supervisor (11.633) was recorded. It is greater than the tabular value (t) of (1.984) at the level of significance (0.05), and this indicates the significance of the marginal slope coefficient of the relationship with the supervisor dimension, as shown by the value of the marginal slope coefficient (β) of (0.307) that an increase in The relationship with the supervisor by one unit will lead to an increase in work pressure by (31%). The value of the constant (α) was recorded in equation (2.275), meaning that when the dimension of the relationship with the supervisor is equal to zero, the work pressure will not be less than this value.

Table (3) Arithmetic means to analyze the impact of occupational adjustment dimensions on work stress

the decision	Sig	(t)	(F)	Adjusted (R^2)	(R^2)	R	Dimensions of the occupational compatibility variable		dependent variable
Acceptance of the alternative hypothesis	0.000	4.345	18.880	0.075	0.079	0.282	3.091	(α)	work nature
							0.119	(β)	
Accept the null hypothesis	0.632	0.480-	0.230	0.004-	0.001	0.032	3.524	(α)	Work environment
							0.017-	(β)	
Acceptance of the alternative hypothesis	0.000	8.585	73.702	0.248	0.252	0.502	2.591	(α)	Relationship with colleagues
							0.246	(β)	
Acceptance of the alternative hypothesis	0.000	11.633	135.321	0.379	0.382	0.618	2.275	(α)	Relationship with the supervisor
							0.307	(β)	
Acceptance of the alternative hypothesis	0.000	8.111	65.781	0.227	0.231	0.481	2.395	(α)	Vocational Adjustment
							0.321	(β)	
Tabular (F) value = 3.94 /// Tabular (t) value = 1.984 /// Sample size = 221									
Number of accepted null hypotheses = 1									
Number of alternative hypotheses accepted = 4									

CONCLUSIONS

This topic presents the most prominent conclusions reached by the researcher by analyzing the theoretical side and the results reached through the practical side, which can be summarized as follows:

1. The work environment showed shortcomings in most of the surveyed hospitals, except for the Specialized Burn Hospital, due to the hospitals' lack of communication and technology systems, as well as the failure of the senior management to pay great attention to the social and recreational activities of the medical staff, which in turn achieve Vocational Adjustment and reduce work pressures.
2. That the most sub-dimension of the variable of Vocational Adjustment represents the dimension of the relationship with the supervisor as it is a relationship characterized by mutual understanding, respect and appreciation for the performance of tasks and understanding of the difficulties of work in most of the surveyed hospitals.
3. Doctors suffer from poor meeting the basic physiological needs in most of the surveyed hospitals due to the lack of material and financial needs that fit the efforts made by doctors.

4. The most work pressure that doctors suffer from is represented in the dimension of organizational issues in most of the surveyed hospitals, due to the lack of regulation of many technical matters related to working hours and defining work shift schedules, as well as poor job stability.
5. Vocational Adjustment affects the reduction of work pressures, as the more doctors agree in their work, the less work pressures. However, there are some inter-relations that have not been achieved, which is the impact of the work environment in reducing work pressures, due to external organizational and technical reasons. From the will of doctors, including the nature of the organizational structure and the availability of systems and technology.

RECOMMENDATIONS

Through the conclusions of the research, it is possible to come up with recommendations aimed at improving the work environment in order to reach steps that will reduce the work pressures that the research sample is exposed to, and the most prominent recommendations are:

1. Hospital administrations should pay real attention to improving the standards of the work environment by

paying attention to the material aspects in the workplace, using and developing modern work methods, and paying attention to the development of training programs.

2. Expressing a feeling of appreciation and cooperation among co-workers, real communication and relieving work pressures that achieve altruism and the highest results through cooperation with each other.
3. The need to work on organizing shift work hours, which most often cause insomnia and psychological burnout, and at the same time, if not addressed, will cause mistakes due to the difficulty of concentrating for long working hours, and the need to compensate the doctors for the overtime working hours.
4. Activating an effective communication system that allows medical staff the freedom to communicate complaints and threats to their subordinates on the one hand, and ensures that their complaints reach officials to take remedial measures against them
5. The need to reconsider the wages, salaries, compensation and incentives for doctors in the surveyed hospitals, because poor compensation generates psychological pressure for them and they feel that their efforts and the risks

they are exposed to are not commensurate with the cash and in-kind compensation they receive.

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