

A STUDY ON REMOTE WORK WELFARE MEASURES UNDERTAKEN BY AA EXPORT & IMPORT

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ABSTRACT

Remote Work Welfare measures increase the productivity of organization and promote healthy relations thereby maintaining peace. Facilities like housing schemes, medical benefits, and education and recreation facilities for employees' families help in raising their standards of living. Most of the companies are afraid of reopening their offices and going back to the traditional way of working as they understand the responsibility and the risks of the Covid-19. WFH may result in more productivity and is more time-efficient as it removes the need to travel to the office, which also results in more savings from the employee; WFH needs certain things to be successful. Primary objective of this study is to study the effectiveness of Remote Work Welfare measures undertaken by AA Export & Import during pandemic time. Secondary objectives are to understand the WFH facilities provided by AA Export & Import, assess the working conditions and nature of the job during work from home, understand the direct monetary & healthcare benefits provided by AA Export & Import and understand the mental stress management measures made by AA Export & Import. Simple random sampling method has been used in the research work. Multiple choice questions have been chosen to collect the responses from 180 employees from multiple companies in Chennai. The data collected has been analyzed through various statistical tools like Karl Pearson's Correlation, Chi-square test and One-way Anova test. Numerous new findings have been derived from this research has helped to provide few suggestions for the improvement in the Remote Work Welfare measure activities.

INTRODUCTION

In March 2020, the World Health Organisation (WHO) declared COVID-19 a pandemic, and soon enough, many countries around the world started announcing lockdowns and strict social distancing, respiratory hygiene and handwashing protocols to control the global and rapid spread of the disease. While many essential service providers had to still travel to their workplaces every day, most other offices transitioned to work from home for all employees. This meant that all kinds of professionals, from those working in IT to journalists and moviemakers, shifted from structured workstations to the confines of their homes. Nine months on, the offices that can still function perfectly without requiring the physical presence of their employees are choosing to continue to do so. Such a huge and prolonged shift was always likely to have a deep impact on all the affected professionals globally. A new study published in the Journal of Occupational and Environmental Medicine highlights some of the major health issues that have arisen due to working from home.

REVIEW OF LITERATURE

Callejas et al. (2020) This paper analyzes policy and practice changes implemented by the child welfare system in Miami-Dade County in response to the COVID-19 crisis. Rapid ethnographic assessment (REA) was used to capture multiple perspectives during a rapidly unfolding pandemic. The assessment highlights how system fragmentation complicates effective responses to public health emergencies, while the transition to remote services provides insight into ways that traditional accessibility barriers may be alleviated beyond the pandemic. We provide recommendations for improving family experiences and preparing for future crises, envisioning ways that peer specialists, in particular, may offer a model for enhanced family support. This study emphasizes the unique benefits of anthropological theory and applied methods in assessing and improving public sector systems.

Rosema.et.al.(2004)Welfare practice in rural and remote areas has some particular challenges for professionals. There is a developing body of knowledge about the differences between urban and rural welfare practice, and some evidence that remote practice is experienced differently from rural practice. This article provides an introductory discussion of the differences and similarities of rural and remote practice in Australia using material gathered from two exploratory studies of social work and welfare professionals in Victoria and the Northern Territory. While there were many similarities about satisfaction with lifestyle and the work role, major differences were related to the emphasis on ethical dilemmas in the ruralarea, strong dissatisfaction with organisations and employment conditions expressed by the remote practitioners, and a lack of professional support and networking which was particularly noted in the remote area.

OBJECTIVE OF THE STUDY

- To study the WFH facilities provided by AA Export & Import.
- To assess the working conditions and nature of the job during work from home.
- To study the direct monetary & healthcare benefits provided by AA Export & Importwhile working WFH.
- To study the mental stress management measures made by AA Export & Import.
- To provide suggestions for the improvement in the Remote Work Welfare measureactivities

Need for the study

- Remote Work Welfare measures increase the productivity of organization andpromote healthy relations thereby maintaining peace.
- Facilities like housing schemes, medical benefits, and education and recreation facilities for employees’ families help in raising their standards of living. This makesemployees to pay more attention towards work and thus increases their productivity.

Scope of the study

- The study on the Remote Work Welfare measures provides an attempt to know the extent of satisfaction of the employees towards those measures offered by AA Export& Import .
- The study would provide an idea about the various expectations of the Remote WorkWelfare measures offered and suggest the necessary changes to be done.
- The study also helps to get the opinion to the management about the various welfaremeasures offered to the employees while they work from home.

DATA ANALYSIS AND FINDING

AGE-WISE CLASSIFICATION OF THR RESPONENTSTABLE : AGE CLASSIFICATION:

Particular	Number of respondents	Percentage
Below 30	53	29
31-40	60	33
41-50	37	21
51 and above	30	17

Source: Primary Data

CHART : AGE CLASSIFICATION

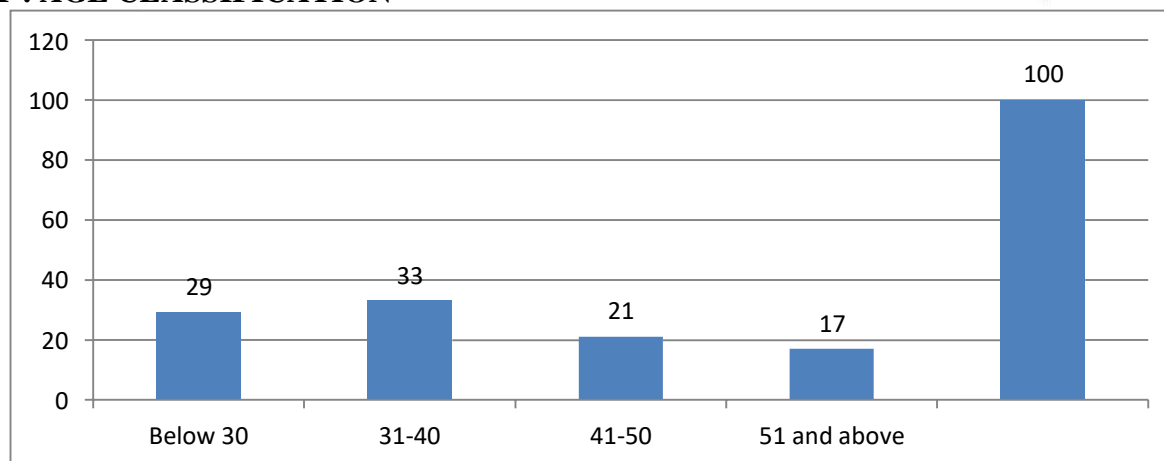


Table 1 shows that there are 33 % of the respondents at the age of 31-40 years, 29% of the respondents at the age below 30 years, 21% of the respondents are between 41-50 years and 17% of the respondents are at the age of above 51 years. Therefore 33 % of the respondents are at the age of 31-40 years.

TABLE : WORKING CONDITIONS AND NATURE OF THE JOB DURING WFH

S. No.	Particulars	HS	%	S	%	N	%	DS	%	HDS	%	TOTAL
1	My organization provided facilities for setting up the home workspace	109	61	53	29	18	10	0	0	0	0	180
2	WFH benefits were provided through monetary reimbursements	96	53	51	28	30	17	3	2	0	0	180
3	My company provided many healthcare benefits	138	77	22	12	20	11	0	0	0	0	180
4	My company changed/added new healthcare benefits during pandemic time	147	82	18	10	15	8	0	0	0	0	180
5	There is a clear change in work style/nature during WFH	157	88	18	10	5	2	0	0	0	0	180
6	Worked more hours than usual during WFH	155	86	10	6	15	8	0	0	0	0	180
7	It is very stressful due to the new work culture	124	69	30	17	18	10	8	4	0	0	180
8	My organization initiated programs to address the stress faced by you	96	53	49	28	35	19	0	0	0	0	180

SOURCE: PRIMARY DATA

CHART : WORKING CONDITIONS AND NATURE OF THE JOB DURING WORKFROM HOME

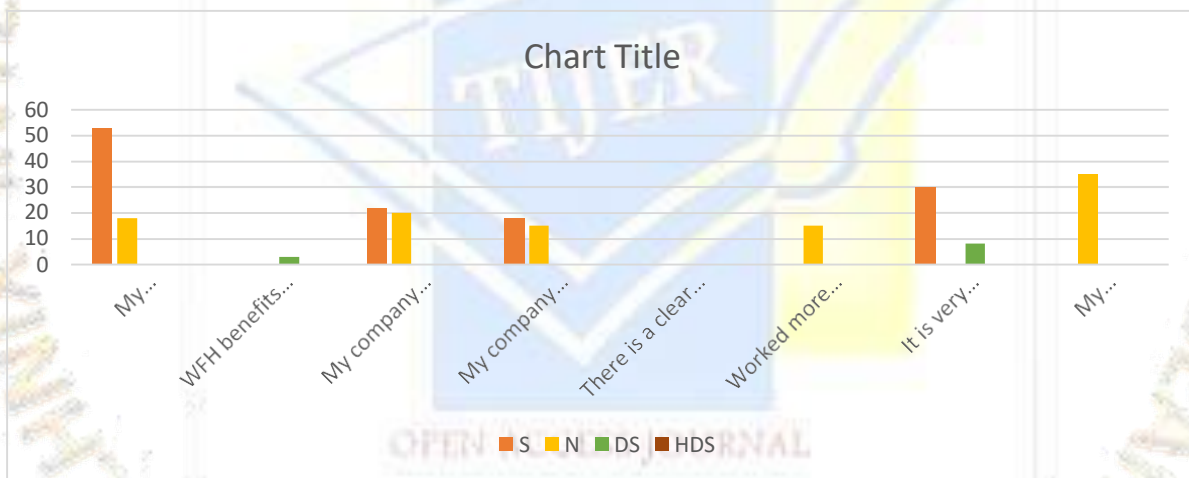


Table 7 shows that 61% of the respondents said that their organization provided facilities for setting up the home workspace 53% of the respondents feel that WFH benefits were provided through monetary reimbursements. 77% of the respondents feel that their company provided many healthcare benefits.82% of the respondents said that their company changed/added newhealthcare benefits during pandemic time.88% of the respondents said that there is a clear change in work style/nature during WFH.86% of the respondents said that they worked morehours than usual during WFH69% of the respondents say that it is very stressful due to the new work culture.53% of the respondents said their organization initiated programs to address the stress faced by them.

CHI- SQUARE TEST I – (χ^2)Chi-square is the sum of the squared difference observed (o) and the expected (e) data (or the deviation, d), divided by the expecteddata in all possible categories.

Null hypothesis (Ho):

There is a significance relationship between age and working condition.

Alternate hypothesis (H1):

There is a no significance relationship between age and working condition.

Case Processing Summary

	Cases					
	Valid		Missing		Total	
	N	Percent	N	Percent	N	Percent
AGE	180	100.0%	0	0.0%	180	100.0%

Chi-Square Tests

	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	159.826 ^a	9	.000
Likelihood Ratio	157.051	9	.000
Linear-by-Linear Association	81.626	1	.000
N of Valid Cases	180		

a. 8 cells (50.0%) have expected count less than 5. The minimum expected count is 1.80. Hence, the Alternate hypothesis [H1] is accepted

INFERENCE:

Since the calculated value is age than the tabulated value, we accept the alternate hypothesis and hence there is a relationship between the age and working condition.

SIGNIFICANCE DIFFERENCE BETWEEN MENTAL STRESS AND AGE

ONE-WAY ANOVA CLASSIFICATION

Null hypothesis (Ho):

There is a no significance difference between mental stress and age.

Alternate hypothesis (H1):

There is significance difference between mental stress and age.

Test of Homogeneity of Variances

MENTAL STRESS

Levene Statistic	df1	df2	Sig.
1170.000	3	177	.000

ANOVA

MENTAL STRESS

	Sum of Squares	Df	Mean Square	F	Sig.
Between Groups	21.867	3	10.933	266.500	.000
Within Groups	4.800	177	.041		
Total	26.667	180			

Calculated value = 266.500 Tabulated value = 3.09

$F = F_{cal} > F_{tab}$ $F = 266.500 > 3.09$

Hence, the Alternate hypothesis [H1] is accepted

INFERENCE:The calculated value of F is age than the tabulated value. Hence, we reject the null hypothesis and conclude that there is no significance difference between the mental stress and age

FINDINGS:

33 % of the respondents are at the age of 31-40 years..

61% of the respondents said that their organization provided facilities for setting up the home workspace

53% of the respondents feel that WFH benefits were provided through monetary reimbursements.

77% of the respondents feel that their company provided many healthcare benefits. 82% of the respondents said that their company changed/added new healthcare benefits during pandemic time.

88% of the respondents said that there is a clear change in work style/nature during WFH.

86% of the respondents said that they worked more hours than usual during WFH 69% of the respondents say that it is very stressful due to the new work culture.

SUGGESTIONS

During WFH, employees are prone to burnout, loneliness and may struggle to maintain a strict routine outside of the office. The stress of the pandemic, along with tense and difficult political situations in many countries, has also contributed to poorer overall mental health. Companies can instruct its employees to take an extra day off as a time for “collective wellbeing”.

As many employees are facing the problem of workloads, companies should reduce the workload of the employees.

Companies could guarantee that employees who have to take time off because they are sick will continue to receive 100% of their wages for up to eight weeks.

Anybody unable to work beyond this period, either because they are ill or have to care for loved ones, qualifies for 60% of pay.

CONCLUSION

Many companies and organizations have already been practicing WFH even before the outbreak of COVID-19 which offered flexibility to their employees.

Companies have began strategizing measures to ease life in this pandemic time for its employees. While it was about making work from home more convenient early on, as the months wore on, the focus shifted to the mental and physical impact of COVID, what with employees and their near-and dear ones reeling under its effect amid the country's crumbling healthcare sector