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Motivation, Satisfaction, and Engagement of Older Employees During the COVID-19 Pandemic

Maja Rožman*

University of Maribor, Faculty of Economics and Business, Razlagova ulica 14, 2000
Maribor, Slovenia
maja.rozman1@um.si

Dijana Oreški

University of Zagreb, Faculty of organization and informatics, Pavlinska ul. 2, 42000
Varaždin, Croatia
dijoresk@foi.hr

Vesna Čančer

University of Maribor, Faculty of Economics and Business, Razlagova ulica 14, 2000
Maribor, Slovenia
vesna.cancer@um.si

Abstract:

Research Question (RQ): Are there statistically significant differences in work motivation, satisfaction, and engagement among older employees before the COVID-19 pandemic and during the COVID-19 pandemic?

Purpose: The aim of the paper is to examine if there are statistically significant differences in work motivation, satisfaction, and engagement among older employees before the COVID-19 pandemic and during the COVID-19 pandemic. The aim of the paper is also to identify which factors contribute to increasing work motivation, satisfaction, and engagement during the COVID-19 pandemic.

Method: The differences in work motivation, satisfaction, and engagement among older employees before and during the COVID-19 pandemic were tested with the non-parametric test for two related samples. To analyze the differences between individual statements, we used the non-parametric Wilcoxon signed-rank test.

Results: The results show statistically significant differences in work motivation, satisfaction, and engagement among older employees before the COVID-19 pandemic and during the COVID-19 pandemic.

Organisation: The results significantly impact a more detailed review of the creation of new working conditions for employees during the COVID-19 pandemic and especially in the period after the COVID-19 pandemic.

Society: During the COVID-19 pandemic, companies and society can focus on how to constructively manage the new challenges that the COVID-19 pandemic brings to companies and what they can learn from it. For companies and leaders or human resource managers, in particular, the pandemic can be used as a starting point for positive and future-oriented developments.

Originality: With our findings, we contribute to the discussion on a constructive and future-oriented approach to the COVID-19 pandemic, both for practices around the management of

employees as well as for future research. Also, our research highlights which factors increase work motivation, work satisfaction and work engagement during COVID-19 and how to create appropriate working conditions during and after the COVID-19 pandemic to keep employees motivated, satisfied, and engaged.

Limitations/further research: Our sample was limited to Slovenian companies and older employees. Also, in our research we limited ourselves on work motivation, work satisfaction and work engagement. Therefore, for further research we propose examining differences in other constructs relating to employees before and during the COVID-19 pandemic in Slovenian companies, as well as the differences in constructs between Slovenia and other countries.

Keywords: work motivation, work satisfaction, work engagement, older employees, COVID-19.

1 Introduction

The COVID-19 pandemic is also unleashing a new era of change for businesses. Companies globally are experiencing unprecedented workforce disruption. Businesses must navigate coronavirus's financial and operational challenges while rapidly addressing the needs of their people, customers and suppliers (Yawson, 2020, p. 1). Caused by the Sars-Cov-2 virus, known as coronavirus, COVID-19 has become a pandemic spread throughout the world. This led to the isolation of many regions and drastically impacted the economy (Bayuni, 2020, 2-3). This makes people work more online to keep themselves productive and maintain their performance amid the outbreak (Fachriansyah, 2020, p. 3). The coronavirus outbreak has forced companies to reevaluate how contact centers are leveraged, how employees deliver relevant customer experiences, where they work, and how digital channels can support business continuity through the crisis and beyond (Agrawal et al., 2020; Stergioua and Farmaki, 2021). Consumer demand patterns are shifting, global supply chains are disrupted and remain under pressure, and different regions, markets, and governments are responding uniquely to the COVID-19 crisis (Agrawal et al., 2020, p. 15). Companies must continuously adapt to new and uncertain market conditions. The global COVID-19 pandemic has forever changed our experiences as customers, employees, citizens, humans and our attitudes and behaviors are changing as a result. The crisis is fundamentally changing how consumers buy and accelerating structural changes in the consumer goods industry (Tovmasyan & Minasyan, 2020). Once the immediate threat of the virus has passed, companies will need to consider the impact of these changes on the way we design, communicate, build and run the experiences that people need and want. Even before COVID-19, many companies faced considerable IT challenges (D'Auria & De Smet, 2020). Now, COVID-19 is pushing companies to operate in new ways rapidly and IT is being tested as never before. Working as usual may be difficult for employers and employees due to the impacts of COVID-19 (Brassey & Kruyt, 2020, p. 5-6). One of the proposed measures for allowing employees to safely return to the workplace is to introduce staggered shifts or hours. This would reduce the likelihood of large numbers of people travelling at peak times and hopefully reduce the risk of COVID-19 infection. During the COVID-19, companies use flexible forms of employee work (Yawson, 2020) (e.g., working from home, part-time hours, job sharing) (Chua et al., 2022, p. 3). Flexible work arrangement refers to a work environment and schedule that is not restricted by traditional work practices (Chua et al., 2022). A flexible work arrangement offers time and location

flexibility for employees to engage in work-related tasks (Adekoya et al., 2022, p. 8). Flexible work arrangement includes flexi-time, contractual working, work shifts (Siddiqui, 2020, p. 14), job sharing, telecommuting or remote working and a compressed workweek, while the most common one is work from home, where employees work full-time from their home (Adekoya et al., 2022; Chua et al., 2022). All changes during the COVID-19 are also reflected in employees' motivation, satisfaction and work engagement. The coronavirus pandemic has led to a significant amount of the workforce working from home. Many employees have also found themselves working more flexibly in terms of the hours or days they work, often due to balancing work and other responsibilities such as home schooling or childcare (Wiradendi Wolor et al., 2020). Before the pandemic, flexible working uptake was slow, and it is generally considered that the overall demand for flexible working outstripped supply in the pre-COVID-19 world. However, there are now early indications that many employees will wish to continue to undertake some degree of homeworking (or flexible working in general) after the current restrictions have passed (Spurka & Straub, 2020). Flexible working describes a type of working arrangement that gives a degree of flexibility on how long, where, when, and at what times employees work (Sulaymonov, 2020). According to Sulaymonov (2020) and Yawson (2020), there are many forms of flexible working, including home working, part-time or reduced hours, job shares, flexi-time, compressed or annualized hours, career breaks, staggered start and finish times or self-rostering (Sulaymonov, 2020; Yawson, 2020). It has already been shown (see e.g., Spurka & Straub, 2020; Tovmasyan & Minasyan, 2020; Yawson, 2020) that flexible working conditions lead to better motivation, satisfaction and also, engagement of employees. Employees' work motivation, satisfaction and engagement affect their work efficiency and productivity and play an essential role in the organization's success. This is also important during the COVID-19. COVID-19 has forced us to think about how we work and what is the most valuable factor in the workplace. Therefore, the aim of the paper is to examine if there are statistically significant differences in work motivation, satisfaction and engagement among older employees before the COVID-19 pandemic and during the COVID-19 pandemic. The aim of the paper is also to identify which factors contribute to increasing work motivation, satisfaction, and engagement during the COVID-19 pandemic.

2 Literature review

2.1 Work motivation

Motivation is a process that drives a person to achieve organizational goals with maximum work results. Motivation factors have a direct relationship with performance, and employees who have high motivation can also deliver high performance (Pancasila et al., 2020, p. 1-3). According to employees, the organization's motivation policy affects their work efficiency and plays an essential role in the organization's success. The motivation policy is essential in organizations. If employees are satisfied and feel that the organization values their contribution, they will work better (Ferfaglia & Markič, 2020; Spurka and Straub, 2020; Tovmasyan & Minasyan, 2020). If employees feel that the organization does not evaluate

their efforts and they do not feel appreciated, the efficiency of their work performance will decrease. One of the most important lessons learned is that companies and workers desire flexibility (Agility PR Solutions, 2020; Adekoya et al., 2022; Jeske, 2022; Pwc, 2020; Tavares et al., 2021). PwC's Remote Work Survey asked US financial services (FS) companies about flexibility. The survey was made on 50 executives and 144 employees at US FS firms during the period from June 1 to June 12, 2020. It found that 69 % expect almost two-thirds of their workforce to be working from home once a week in the future (Pwc, 2020). Also, nearly half (48 %) of the US employees surveyed by communications consultancy of the Grossman Group (Agility PR Solutions, 2020) said they wanted to continue working from home after the pandemic and that the shift to remote work had positively impacted their view of the company. According to Tovmasyan and Minasyan research (2020), 90 employees from Armenia participated in the survey, studying what motivates employees during COVID-19. Most of them said that the organization's motivation policy affects their work efficiency, and they have an essential role in the organization's success. They mentioned their organization's material and nonmaterial incentives: salary, reward, flexible work schedule, independence, and freedom to make decisions. The main reasons employees leave the job may be the low salary, conflicts in the team, and the impossibility of career advancement. The analysis shows that the organization's motivation policy is an essential tool for affecting the effectiveness of employees' work. The statistical testing also shows the significant relationship between the influence of the motivation policy used by the organization on work motivation and having an essential role in the organization's success (Tovmasyan & Minasyan, 2020). There are also some advantages for working at home. There is no need for a dress code, there are no expenses spent on transportation, companies do not spend a lot of money on office space rent, utility bills and other costs. This pandemic changes the way of businesses, there is no need to keep one at the workplace till the end of the workday and waste their time, employer can motivate employees to do the same work in less amount of time and more productively, so they will work not for time, but a result. It means that the COVID-19 pandemic changed attitudes of work and motivation, revealing the advantages and disadvantages of working in offices and remotely (Spurka and Straub, 2020; Sulaymonov, 2020; Tovmasyan and Minasyan, 2020). So, during the pandemic, many companies made the work mode more flexible to motivate people in the best way (Sulaymonov, 2020; Tovmasyan and Minasyan, 2020;). Therefore, we hypothesize that:

Hypothesis 1 (H1): There are statistically significant differences in work motivation among older employees before the COVID-19 pandemic and during the COVID-19 pandemic.

2.2 Work satisfaction

Work satisfaction is an important dimension of employee well-being in its own right but is also a desired indicator of organizational success (Culbertson, 2009, p. 12). Work satisfaction is one of the most used and indicative indices of well-being experienced in work contexts, and it reflects the extent to which employees find their expectations fulfilled by their work experience (Rafferty & Griffin, 2009). According to Menezes (2012), there is a positive

association between the level of work satisfaction in a workplace and the level of employee engagement in a workplace and also, there is a positive association between the level of work satisfaction in a workplace and its productivity. Wiradendi Wolor et al. (2020) made research on 200 employees from Indonesia. The results of this study show that e-training, e-leadership, and work-life balance during COVID-19 have positive effect on work satisfaction and also on work motivation. In contrast, the authors Toscano and Zappalà (2020) emphasize that in remote work during the COVID-19 pandemic, social isolation is negatively related to remote work satisfaction. On the other hand, Bellmann and Hübler (2020) in their research, compare employees working from home with those who want to work at home, and they found out that the former are happier and more satisfied. Under flexible work arrangements, employees are given greater scheduling freedom in fulfilling their job responsibilities and may therefore meet personal or family needs and achieve better work-life balance. Therefore, this leads to higher work satisfaction. In addition, Nagel (2020, p. 16) found that people working exclusively from home during the COVID-19 pandemic have greater work satisfaction. Festing and Kraus (2020) examine the impact of the COVID-19 pandemic on global employees (in January 2020, n = 524, they surveyed the same sample again in April 2020, n = 344), and they compared the results of job and career satisfaction from prior to and after the outbreak of the pandemic. Interestingly, for the overall sample, both job satisfaction and career satisfaction increased after the outbreak of COVID-19. Therefore, it seems that despite the important implications of the crisis, most of the investigated global employees still see positive effects on a personal level. In addition, Nagel (2020) explains that the increase in technology use in everyday work and changes in working hours implies that employees could be working in new ways, using technology to a greater extent, and taking on more autonomy. Moreover, people working from home have a lower risk of being infected with COVID-19, leading to greater work satisfaction. Therefore, we hypothesize that:

Hypothesis 2 (H2): There are statistically significant differences in work satisfaction among older employees before the COVID-19 pandemic and during the COVID-19 pandemic.

2.3 Work engagement

In the present business situation during the COVID-19 pandemic, employee engagement has become one of the utmost prominent primacies for human resource managers and practitioners in organizations due to lockdown (Chanana & Sangeeta, 2020, p. 4-6). Today, the business setup is changing concerning the global pandemic of COVID-19 (Nagel, 2020, p. 1). Human resource managers persistently evolve innovative, creative, and effective ways to engage employees healthier during this difficult time (Harter, 2020; Kozole & Gračner, 2020). Employee engagement is a workplace attitude that allows all adherents of an organization to give their excellence every day, committed to their organization's goals and values. In addition, employees who are well engaged in a company will lead to productivity in the place of work, and this generates higher customer satisfaction and, absolutely, developments in sales and profit in the company (Chanana & Sangeeta, 2020). Schaufeli et al. (2002) explained work engagement as a positive and work-related state of mind, which is

considered by strength, dedication, and absorption. According to May et al. (2004), engagement is closest to job involvement, well-being, and emotions (May et al., 2004). Gallup's survey (Gallup, 2021) across 112.312 business units shows that in early March 2020, as work and life were first disrupted due to COVID-19, the overall well-being of Americans declined sharply. Engaged employees are at risk if their well-being is low. Engaged employees who are struggling or suffering in their overall lives have a 61 % higher rate of burnout often or always. In 2020, 47 % of employees strongly agreed that their organization cares about their overall well-being. Approximately half of the employees participating in this survey strongly agreed their organization did a good job of communicating a plan of action in response to COVID-19 (47 %), that they felt well-prepared to do their jobs (51 %), and that their supervisor kept them informed (47 %) (Gallup, 2021). Engaged employees always care about their effort, work, and performance, and employees want to feel that their work, efforts, and performance could make a difference. Employee engagement is usually understood as an inner state of mind, that is, physically, emotionally, and mentally, that binds together the commitment, satisfaction, and work effort in an employee (Chanana & Sangeeta, 2020, p. 18). Engaged employees lead to productivity in the workplace, generating higher customer satisfaction and positive increases in sales and profit in organizations. Confidence and communication among both employees and organizations are also essential. This unification between the enterprise and the employee is a necessity as both are able to best in performance (Sarangi & Nayak, 2016, p. 21). Due to lockdown, most of companies provide the facility to their employees to work from home. But work from home is difficult for employees as they do not feel the organizational climate at home, as lack of concentration due to frequent invasion of family members, work-life conflicts arise. They do not have proper equipment and tools (computer, mouse, printers, scanners, headphones, webcam, internet connection, and dedicated workspace, a quiet place to work). Most employees feel stressed due to rising cases of COVID-19 in the world. They are not sure about their job security and also their salary. Due to these problems, employees cannot concentrate or focus on their work, so there is a need for employee engagement (Chanana & Sangeeta, 2020). On the other hand, the flexible working environment during the COVID-19 leads to higher work engagement (Nagel, 2020, pp. 7). In 2020, Gallup tracked 190 organizational employee engagement surveys from April through July 2020 across more than 300,000 employees in 18 industries. Each organization's survey results in 2020 were compared with similar organizations' employee engagement as measured before the pandemic in 2019. Gallup found the median survey response rate during COVID-19 was 86 %, as compared to a median response rate of 85 % pre-COVID-19. Overall levels of engagement and average growth in engagement were not compromised for organizations implementing employee engagement measures and interventions during COVID-19 (Harter, 2020). Also, Chanana and Sangeeta (2020) emphasize that company support and digital tools keep employee engagement high and working from home during COVID-19 efficient and productive. Research from Towers Watson (2020) found that 90 % of companies surveyed believe their culture improved during COVID-19, while 83 % believe their employee experience is better. Human resources (HR) is

not far behind, with 63 % of HR professionals surveyed believing their organizational culture has improved. Therefore, we hypothesize that:

Hypothesis 3 (H3): There are statistically significant differences in work engagement among older employees before the COVID-19 pandemic and during the COVID-19 pandemic.

3 Method

3.1 Participants

Our empirical research includes two paired samples of older employees for two periods: before the COVID-19 pandemic (1086 older employees) and during the COVID-19 pandemic (328 older employees). The first data collection before the COVID-19 pandemic was part of a broader research, in which, among other things, we also studied work motivation, work satisfaction and work engagement. Regarding these multidimensional variables, we used the same measuring instrument during the COVID-19 pandemic and the same database of companies. The empirical research before the COVID-19 pandemic was conducted from November 2017 to January 2018. The empirical research during the COVID-19 pandemic was conducted from March 2021 to May 2021. We obtained information about the companies from the Agency of the Republic of Slovenia for Public Legal Records and Related Services. We included 1.000 companies in the final sample based on a random selection. We used random sampling, which is characterized by the fact that each unit in the population has an equal and independent chance of being selected into the sample (Kumar, 2005, 169). We asked the owner to distribute questionnaires among older employees in each company. In the survey during the COVID-19 pandemic were involved 47.9 % employees aged from 50 to 55 years, 41.1 % of employees aged from 56 to 61 years, and 11.0 % employees aged over 62 years. The companies in which employees are employed were manufacturing (18.9 %); trade, maintenance and repair of motor vehicles (16.5 %); financial and insurance activities (15.3 %); professional, scientific, and technical activities (14.6 %); information and communication activities (11.9 %); other diversified business activities (5.5 %); real estate business (6.7 %); health and social care (5.2 %); catering (2.7 %); transport and storage (1.5 %); other activities (1.2 %). The survey before the COVID-19 pandemic involved 41.8 % of employees aged from 56 to 61 years, 38.4% of employees aged from 50 to 55 years, and 19.3 % of employees aged from 62 to 67 years. The lowest percentage is presented by employees aged over 68 (0.6 %) years. The companies in which employees are employed were from manufacturing (30.3 %); trade, maintenance, and repair of motor vehicles (16.4 %); financial and insurance activities (11.0 %); professional, scientific, and technical activities (10.9 %); information and communication activities (7.6 %); construction (4.4 %); other diversified business activities (3.4 %); real estate business (3.4 %); catering (2.8 %); health and social care (2.4 %); supply of electricity, gas, and steam (2.2 %); transport and storage (1.8 %); agriculture and hunting, forestry, fishing (1.2 %); water supply, sewage and waste management, environmental rehabilitation (1.0 %); other activities (0.7 %) and mining (0.4 %).

3.2 Research instrument

For research instrument, we used a questionnaire (closed type). Items for work motivation were adopted from Islam and Ismail (2008) and Bhatti et al. (2016). Items for the work satisfaction were adopted from Hayday (2003). Items for the work engagement were adopted from Robinson et al. (2004) and Gallup (2006). The respondents indicated their agreement to the listed statements, at a 5-point Likert-type scale from 1– completely disagree to 5– completely agree. The reliability of measurement scales was assessed within the scope of internal consistency with Cronbach’s alpha coefficient (Chronbach, 1951, p. 24). Cronbach’s alpha coefficient for the construct work motivation is 0.893, for the construct work satisfaction is 0.917, and for the construct work engagement it is 0.934. Thus, all measurement scales proved high reliability (all values of Cronbach’s alpha > 0.80).

3.3 Statistical analysis

Arithmetic means and medians were calculated for answers considering the work motivation, work satisfaction, and work engagement among employees before the COVID-19 pandemic and during the COVID-19 pandemic. The Kolmogorov-Smirnov and Shapiro-Wilk tests were used to verify the normality of the data distribution (Tabachnick & Fidell, 2013, p. 34). We found that the data for work motivation, work satisfaction, and work engagement are not normally distributed ($p < 0.001$), therefore, we have tested the hypotheses relating to the differences among employees before the COVID-19 pandemic and during the COVID-19 pandemic, with the non-parametric test for two related samples. To analyze the differences between rankings of individual statements, we used the non-parametric Wilcoxon signed-rank test.

Figure 1 shows the research model.

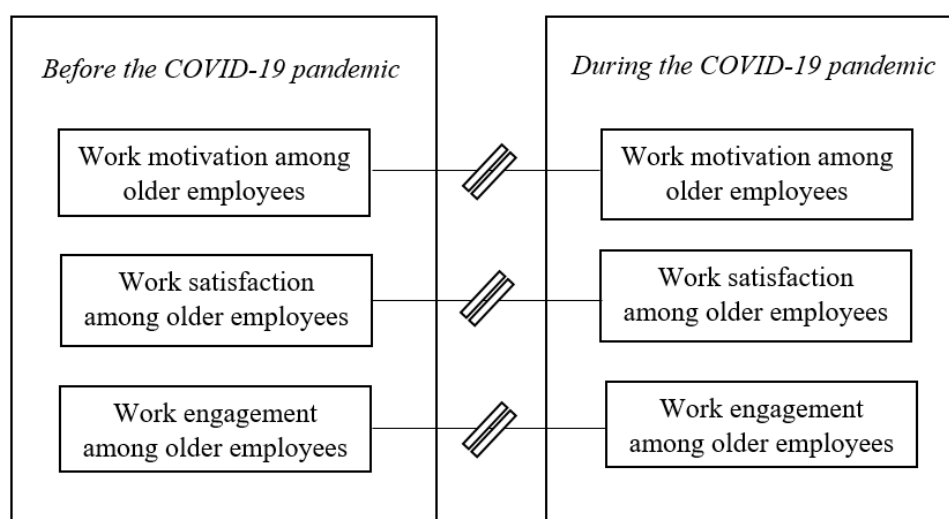


Figure 1. Research model

4 Results

Table 1 shows descriptive statistics for work motivation among older employees before the COVID-19 pandemic and during the COVID-19 pandemic.

Table 1. Descriptive statistics for work motivation among older employees before the COVID-19 pandemic and during the COVID-19 pandemic

Work motivation	Before the COVID-19 pandemic			During the COVID-19 pandemic		
	Mean	Median	Std. Deviation	Mean	Median	Std. Deviation
The employer gives us compliments for the well-done work.	3.22	3.00	1.266	3.57	4.00	0.961
The employer gives me the possibility of flexibility in the workplace.	3.46	4.00	0.971	3.62	4.00	1.019
The employer gives me the possibility of autonomy at work.	3.58	4.00	0.766	3.78	4.00	1.154
The employer gives me the opportunity to provide diverse tasks.	3.90	4.00	0.899	3.30	3.00	1.220
The employer allows me to do my work at my own pace.	3.46	4.00	1.018	3.72	4.00	1.037
The company gives me the opportunity to do work from home.	2.68	2.00	1.140	3.81	4.00	1.331
The employer gives me the possibility of advancement.	3.23	3.00	1.079	3.03	3.00	1.100
The employer gives me the possibility for training and education.	3.57	4.00	1.026	3.41	4.00	1.073
In the company prevails the possibility of equal treatment of employees by age.	3.84	4.00	1.102	3.93	4.00	0.971
In the company prevails the possibility of cooperation with other employees and the allocation of work.	3.70	4.00	0.915	3.36	3.00	1.065
In the company prevail respect among employees.	4.13	4.00	0.811	4.16	4.00	0.768
In the company prevail good relationships in the workplace.	3.94	4.00	0.904	3.96	4.00	0.850
In the company is established intergenerational cooperation, thereby reducing the burden on the workplace.	3.67	4.00	0.947	3.59	4.00	0.976

The results in Table 1 show that the means for answers about the work motivation of older employees during the COVID-19 pandemic indicate that, on average, older employees had the highest agreement with the statements describing respect among employees, good relationships in the workplace, possibility of equal treatment of employees by age and opportunity to do work from home. Also, results show that the means for answers about the work motivation of older employees during the COVID-19 pandemic indicate that, on average, older employees had the lowest agreement with the statement regarding the possibility of advancement. Also, results show that the means for answers about the work

motivation of older employees before the COVID-19 pandemic indicate that, on average, older employees had the highest agreement with the statements regarding respect among employees, good relationships in the workplace and the opportunity to provide diverse tasks. The means for answers about the work motivation of older employees before the COVID-19 pandemic indicate that, on average, older employees had the lowest agreement with the statements describing the opportunity to do work from home, compliments for the well-done work and the possibility of advancement. Also, the median for answers about the work motivation of older employees during the COVID-19 pandemic is higher than before the COVID-19 in the statements describing compliments for the well-done work and the opportunity to do work from home. Table 2 shows the results of statistically significant differences in work motivation among employees before the COVID-19 pandemic and during the COVID-19 with a non-parametric test – Wilcoxon signed-rank test.

Table 2. Statistically significant differences in work motivation among older employees before the COVID-19 pandemic and during the COVID-19 pandemic

Work motivation		Older employees		
		Mean rank	Z	Asymp. Sig. (2-tailed)
The employer gives us compliments for the well-done work.	Negative ranks	111.74		
	Positive ranks	122.90	-3.472	0.001
The employer gives me the possibility of flexibility in the workplace.	Negative ranks	91.09		
	Positive ranks	114.33	-2.853	0.004
The employer gives me the possibility of autonomy at work.	Negative ranks	107.93		
	Positive ranks	109.06	-5.890	0.000
The employer gives me the opportunity to provide diverse tasks.	Negative ranks	121.54		
	Positive ranks	100.90	-4.399	0.000
The employer allows me to do my work at my own pace.	Negative ranks	109.56		
	Positive ranks	122.04	-2.247	0.025
The company gives me the opportunity to do work from home.	Negative ranks	97.29		
	Positive ranks	129.39	-7.919	0.000
The employer gives me the possibility of advancement.	Negative ranks	116.40		
	Positive ranks	110.39	-0.825	0.409
The employer gives me the possibility for training and education.	Negative ranks	115.01		
	Positive ranks	108.49	-2.203	0.001
In the company prevails the possibility of equal treatment of employees by age.	Negative ranks	103.06		
	Positive ranks	126.86	-4.214	0.000
In the company prevails the possibility of cooperation with other employees and the allocation of work.	Negative ranks	104.78		
	Positive ranks	110.92	-3.263	0.001
In the company prevail respect among employees.	Negative ranks	94.35		
	Positive ranks	113.55	-1.281	0.200
In the company prevail good relationships in the workplace.	Negative ranks	96.23		
	Positive ranks	118.28	-1.046	0.269
In the company is established intergenerational cooperation, thereby reducing the burden on the workplace.	Negative ranks	96.89		
	Positive ranks	114.36	-0.142	0.887

Table 2 shows that mean ranks of work motivation among older employees before the COVID-19 pandemic and during the Covid-19 pandemic statistically significantly differ in most (i.e., 69.2 %) statements. There are statistically significant differences in nine statements, but there are no statistically significant differences in the four statements relating

to the possibility of advancement, respect among employees, good relationships in the workplace and established intergenerational cooperation, thereby reducing the burden on the workplace. Based on the results of the non-parametric Wilcoxon signed-rank test ($p < 0.05$), we confirmed hypothesis 1: There are statistically significant differences in work motivation among older employees before the COVID-19 pandemic and during the COVID-19 pandemic. Table 3 shows the results of descriptive statistics for work satisfaction among older employees before the COVID-19 pandemic and during the COVID-19 pandemic.

Table 3. Descriptive statistics for work satisfaction among older employees before the COVID-19 pandemic and during the COVID-19 pandemic

Work satisfaction	Before the COVID-19 pandemic			During the COVID-19 pandemic		
	Mean	Median	Std. Deviation	Mean	Median	Std. Deviation
At my workplace, I am satisfied with the working hours and distribution of work obligations.	3.40	3.00	1.037	3.56	3.00	1.204
In the company, I am satisfied with the organization of work tasks tailored to the elderly.	3.08	3.00	1.156	3.51	3.00	1.051
In the company, I am satisfied with enabling the flexible workspace (for example, working from home).	3.37	3.00	0.992	3.60	4.00	0.988
In this company, I am satisfied with the balance between my work and private life.	3.36	4.00	1.016	3.78	4.00	1.289
I am satisfied with the level of self-regulation of work speed that is enabled.	3.43	3.00	0.997	3.62	4.00	0.990
In the company, I am satisfied with the number of programs in the context of active aging and a healthy lifestyle.	3.19	3.00	1.250	3.60	4.00	1.288
I am satisfied with the intergenerational cooperation and, thus, the distribution of work in the company.	3.55	4.00	0.989	3.52	4.00	0.956
At my workplace I am satisfied with flexible working hours.	3.06	3.00	1.167	3.67	4.00	1.299
I am satisfied with the provision of job-sharing, which reduces the burden on the workplace.	3.52	4.00	1.000	3.53	4.00	0.946
I am satisfied with the interpersonal relationships in the company.	4.04	4.00	0.891	4.06	4.00	0.806
I am satisfied with the leadership in the company.	3.71	4.00	1.175	3.73	4.00	1.076

The results in Table 3 show that the means for answers about the work satisfaction among older employees during the COVID-19 pandemic indicate that, on average, older employees had the highest agreement with the statements related to the satisfaction with the interpersonal relationships in the company, with the balance between their work and private life, with the leadership in the company, with flexible working hours, with the level of self-regulation of work speed that is enabled, with enabling the flexible workspace (for example, working from home), and with the number of programs in the context of active aging and a healthy

lifestyle. Also, results show that the means for answers about the work satisfaction of older employees during the COVID-19 pandemic indicate that older employees are low satisfied with the intergenerational cooperation and, thus, the distribution of work in the company. In addition, the means for answers about the work satisfaction among older employees before the COVID-19 pandemic indicate that, on average, older employees had the highest agreement with satisfaction with the interpersonal relationships in the company and satisfaction with the leadership in the company. Also, the means for answers about the work satisfaction among older employees before the COVID-19 pandemic indicate that, on average older employees are low satisfied with the flexible working hours and with the organization of work tasks tailored to the elderly. Also, the median for answers about the work motivation of older employees during the COVID-19 pandemic are higher as compared with time before the COVID-19 in the satisfaction with enabling the flexible workspace (for example, working from home), satisfaction with the level of self-regulation of work speed that is enabled, satisfaction with the number of programs in the context of active aging and a healthy lifestyle, and satisfaction with flexible working hours. Table 4 shows the results of statistically significant differences in work satisfaction among older employees before the COVID-19 pandemic and during the COVID-19.

Table 4. Statistically significant differences in work satisfaction among older employees before the COVID-19 pandemic and during the COVID-19 pandemic

Work satisfaction		Older employees		
		Mean rank	Z	Asymp. Sig. (2-tailed)
At my workplace, I am satisfied with the working hours and distribution of work obligations.	Negative ranks	104.62		
	Positive ranks	119.35	-2.678	0.007
In the company, I am satisfied with the organization of work tasks tailored to the elderly.	Negative ranks	109.03		
	Positive ranks	128.13	-5.871	0.000
In the company, I am satisfied with enabling the flexible workspace (for example, working from home).	Negative ranks	112.64		
	Positive ranks	121.21	-3.903	0.000
In this company, I am satisfied with the balance between my work and private life.	Negative ranks	117.16		
	Positive ranks	116.08	-2.987	0.003
I am satisfied with the level of self-regulation of work speed that is enabled.	Negative ranks	104.37		
	Positive ranks	120.15	-2.173	0.030
In the company, I am satisfied with the number of programs in the context of active aging and a healthy lifestyle.	Negative ranks	119.22		
	Positive ranks	123.88	-2.904	0.004
I am satisfied with the intergenerational cooperation and, thus, the distribution of work in the company.	Negative ranks	108.58		
	Positive ranks	112.90	-2.045	0.046
At my workplace I am satisfied with flexible working hours.	Negative ranks	111.12		
	Positive ranks	130.27	-5.026	0.000
I am satisfied with the provision of job-sharing, which reduces the burden on the workplace.	Negative ranks	109.62		
	Positive ranks	117.11	-0.925	0.355
I am satisfied with the interpersonal relationships in the company.	Negative ranks	89.95		
	Positive ranks	107.96	-1.215	0.224
I am satisfied with the leadership in the company.	Negative ranks	105.61		
	Positive ranks	117.08	-1.036	0.300

The results in Table 4 show that mean ranks of work satisfaction among older employees before the COVID-19 pandemic and during the COVID-19 pandemic statistically significantly differ in most (72.7 %) statements. There are statistically significant differences in eight statements, but there are no statistically significant differences in the three statements relating to satisfaction with the provision of job-sharing, which reduces the burden on the workplace, the interpersonal relationships in the company and with the leadership in the company. Based on the non-parametric Wilcoxon signed-rank test ($p < 0.05$), we confirmed hypothesis 2: There are statistically significant differences in work satisfaction among older employees before the COVID-19 pandemic and during the COVID-19 pandemic. Table 5 shows the results of descriptive statistics for work engagement among older employees before the COVID-19 pandemic and during the COVID-19 pandemic.

Table 5. Descriptive statistics for work engagement among older employees before the COVID-19 pandemic and during the COVID-19 pandemic

Work engagement	Before the COVID-19 pandemic			During the COVID-19 pandemic		
	Mean	Median	Std. Deviation	Mean	Median	Std. Deviation
I do my work with passion.	3.60	4.00	1.020	4.19	4.00	0.967
I am engaged to the quality of my work.	4.16	4.00	0.804	4.28	4.00	0.986
I am engaged to achieve successful business results.	4.07	4.00	0.901	4.13	4.00	0.851
I feel connection with the company in which I worked.	3.63	4.00	1.124	3.72	4.00	1.006
I am aware of the importance of innovation for our company, and I am helping to develop the company	3.92	4.00	0.973	4.01	4.00	0.918
I trust in my colleagues and the manager	4.04	4.00	0.879	4.12	4.00	0.903
I feel that my work and job are important.	3.69	4.00	1.127	3.94	4.00	1.039
I am proud to be employed in this company.	3.79	4.00	1.043	3.83	4.00	0.964
I believe in the successful development and operation of our company.	4.00	4.00	0.900	4.15	4.00	1.029
I feel very good at my workplace.	3.41	4.00	1.270	3.55	4.00	1.206

The results in Table 5 show that the means for answers about the work engagement among older employees during the COVID-19 epidemic indicate that, on average, older employees had the highest agreement with the statements describing engagement to the quality of work, doing work with passion, believing in the successful development and operation of company and engagement to achieve successful business. In addition, the means for answers about the work engagement of older employees before and during the COVID-19 pandemic indicate that older employees had the lowest average agreement with the statement: »I feel very good at my workplace. The means for answers about the work engagement among older employees before the COVID-19 pandemic indicate that, on average, older employees had the highest agreement with the statements describing engagement in the quality of their work, engagement to achieve successful business results and trust in colleagues and the manager.

Table 6 shows the results of statistically significant differences in work engagement among older employees before the COVID-19 pandemic and during the COVID-19.

Table 6. Statistically significant differences in work engagement among older employees before the COVID-19 pandemic and during the COVID-19 pandemic

Work engagement		Older employees		
		Mean rank	Z	Asymp. Sig. (2-tailed)
I do my work with passion.	Negative ranks	137.02		
	Positive ranks	118.95	-6.077	0.000
I am engaged to the quality of my work.	Negative ranks	99.87		
	Positive ranks	100.99	-2.137	0.042
I am engaged to achieve successful business results.	Negative ranks	96.01		
	Positive ranks	103.21	-0.074	0.941
I feel connection with the company in which I worked.	Negative ranks	102.13		
	Positive ranks	119.32	-2.201	0.028
I am aware of the importance of innovation for our company, and I am helping to develop the company	Negative ranks	103.46		
	Positive ranks	113.54	-0.612	0.541
I trust in my colleagues and the manager.	Negative ranks	95.35		
	Positive ranks	109.23	-2.171	0.030
I feel that my work and job are important.	Negative ranks	111.00		
	Positive ranks	112.62	-3.207	0.001
I am proud to be employed in this company.	Negative ranks	108.96		
	Positive ranks	118.04	-0.536	0.592
I believe in the successful development and operation of our company.	Negative ranks	109.42		
	Positive ranks	101.17	-1.983	0.046
I feel very good at my workplace.	Negative ranks	119.54		
	Positive ranks	126.60	-2.076	0.038

Table 6 shows that mean ranks of work engagement among older employees before the COVID-19 pandemic and during the COVID-19 pandemic differ. There are statistically significant differences in seven statements, but there are no statistically significant differences in the three statements relating to engagement to achieve successful business results, being aware of the importance of innovation for company and helping to develop the company and being proud to be employed in company. Based on the results of the non-parametric Wilcoxon signed-rank test ($p < 0.05$), we confirmed hypothesis 3: There are statistically significant differences in work engagement among older employees before the COVID-19 pandemic and during the COVID-19 pandemic.

5 Discussion

The non-parametric – Wilcoxon signed-rank test results showed statistically significant differences in most statements describing work motivation, satisfaction, and engagement among older employees before the COVID-19 pandemic and during the COVID-19 pandemic. The results are in line with Tovmasyan and Minasyan's research (2020) in which employees during COVID-19 mentioned that the motivation incentives used in their company

are salary, reward, flexible work schedule, independence, and freedom to make decisions. In our research, we found out that older employees during the COVID-19 face higher work motivation than before COVID-19 in Slovenian companies. This was confirmed by the possibility of equal treatment of employees by age, the opportunity to do work from home, doing work at their own pace, the possibility of autonomy at work, the possibility of flexibility in the workplace, and compliments for the well-done work. Also, we found out that older employees during COVID-19 are less motivated regarding the opportunity to provide diverse tasks, the possibility for training and education, the possibility of cooperation with other employees, and the allocation of work as before COVID-19 in Slovenian companies. Our findings are also in line with the research of Nagel (2020), Wiradendi Wolor et al. (2020), and Bellmann and Hübler (2020) in which authors found that flexible work, better work-life balance, e-training, e-leadership during COVID-19 have a positive effect on work satisfaction. In our research, we found out that older employees during the COVID-19 pandemic face higher work satisfaction than before COVID-19 in Slovenian companies. They are more satisfied with the balance between work and private life, with flexible working hours, with the level of self-regulation of work speed that is enabled, with enabling the flexible workspace (for example, working from home), with the number of programs in the context of active aging and a healthy lifestyle, with the working hours and distribution of work obligations, and with the organization of work tasks tailored to the elderly. Also, we found out that older employees during the COVID-19 pandemic are less satisfied with the intergenerational cooperation and, thus, the distribution of work in the company as before COVID-19. Additionally, our findings are in line with the research of Harter (2020) and Towers Watson (2020), in which authors found out that employees can be engaged not only before the COVID-19 but also during COVID-19 if employers consider the proper management of employees during the COVID pandemic. Based on our research we also found that older employees are engaged during the COVID-19 and they are engaged to the quality of their work, they do their work with passion, they believe in the successful development and operation of the company, they are engaged to achieve successful business results, they trust in colleagues and the manager, they are aware of the importance of innovation for the company, and they are helping to develop the company, they feel that their work and job are important, they are proud to be employed in their company, they feel a connection with their company, and they feel very good at the workplace. Figure 2 presents the research model, completed with the results of the hypotheses' verification based on the conducted research on Slovenian companies.

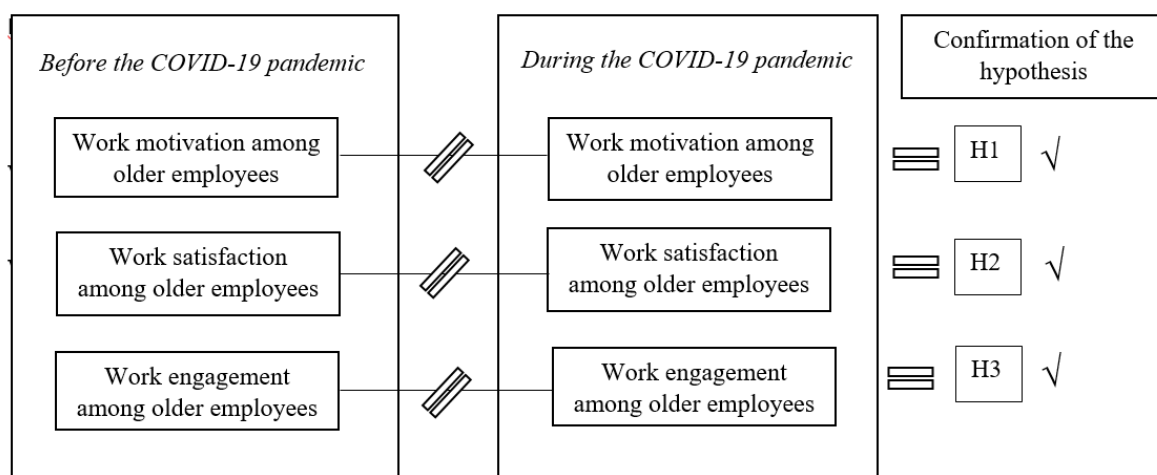


Figure 2. Results of the verification of hypotheses

Based on the results, we recommend that not only during the COVID-19 pandemic but also after the COVID-19 pandemic, companies should make the workplace more flexible. Popular alternative arrangements, including compressed workweeks, flexible work schedules, part-time work, job sharing, and telecommuting, are used to enhance work motivation, satisfaction, and engagement. Also, during the COVID-19 and after the COVID-19 pandemic, employers should ask employees about personal motivations and improve the work environment with a positive organizational climate. Also, attention needs to be paid to training and education opportunities for older employees, increased opportunities for advancement, opportunities to provide diverse tasks, and intergenerational cooperation. Employers should start a mentorship program in their companies. Employees that receive training and skill development feel more valued by their company and will be more engaged. Encouraging upskilling and cross-training will benefit both the company and the employees greatly. In addition, employees will be motivated to work and perform well in the company where they work if the company thinks of their safety. Companies that dare to make policies and decisions to provide security for older employees are very important to keep growing positive motivation from their employees, especially amid the pandemic COVID-19 virus. Therefore, the company becomes a central role in increasing employees' motivation, satisfaction, and engagement in completing their work and a sense of security for employees. We also suggest that employers ensure effective communication with their employees. Employers should provide employees with an internal communication channel to report what they see and feel within the company. So, how employers behave during critical moments leaves a lasting mark on their companies and people. Therefore, consistent and effective communication and interaction with employees can strengthen the company and enhance its culture. Misinformation in the media has created particular challenges for organizations responding to virus outbreak. Employers should become the source of accurate, timely, and appropriate information for their employees. Employers should consider creating their own news channels in the workplace based on credible sources of information. Employers should be very cautious about making harsh, unpopular decisions about personnel reduction. The crisis will pass, but inappropriate decisions or behavior of company leaders in a time of crisis

will have a lasting negative impact on business. During COVID-19 and after COVID-19 pandemic, fair workload distribution and regular reviews of workload and objectives are important. After the COVID-19 pandemic, we suggest that companies organize regular team meetings and social spaces to maintain connections and build relationships. Short-term flexible working may also support the return to the normal workplace. There may be limitations to public transport (and employees with concerns about using it), and to maintain social distancing, there will need to be limitations on the number of people who may be able to work in any single office building. The following forms of flexible working can support social distancing and help maintain hygiene, therefore supporting a safe return to the workplace:

- Homeworking: Where they can do so effectively, organizations should allow employees to continue to work from home.
- Staggered hours: A staggered hours system may allow workers some discretion, within prescribed limits, in fixing the time when they start and finish work. For example, some employees may work 7am-3pm with others working 10am-6pm. Staggered shifts or hours can help avoiding large groups of people arriving and leaving offices at the end of the day.
- Compressed hours: Compressed hours allow employees to work their normal contracted hours over a reduced number of days. A typical pattern would involve working four longer days and not working on the fifth day. This pattern could reduce the number of employees in the office on some days.
- Adjusted shift rotations: Where employees work in shifts, for example, a rotating shift pattern where one group of employees takes over from another on rotation, processes can be introduced to reduce contact between different shifts and their employees. Handovers should be undertaken by the same individuals while observing social distancing. The same teams should rotate in order so that they always follow the same individuals. Groups starting and leaving work should do so on a phased basis to reduce interaction or crowds forming in certain locations.

According to Chanana and Sangeeta (2020), Farrell et al. (2020), Matli (2020), Spurka and Straub (2020), and Tovmasyan and Minasyan (2020), companies can learn from situation caused by the COVID-19 pandemic. For example, higher work motivation, satisfaction, or engagement could in part be due to the implications for employees of using digital means instead of traveling and working from the office. It creates more flexibility to combine work and private life and opens the opportunity to stay longer in one place. Using the digital infrastructure and new work routines that are currently being built to meet the challenges of COVID-19 could enable companies to create more flexible workplaces. Farrell et al. (2020) emphasize that technological innovation in the workplace has led to many examples of changes in how work is organized and how employees perform their duties (Farrell et al., 2020). The homeworking arrangement offers both employers and employees various benefits, such as no necessity to commute to and from workstations and work and-life balance advantages (Nagel, 2020). During the COVID-19 pandemic, employees had to trust leaders to

take the right direction and to make tough decisions for the future. A key part of trust in leadership is transparency, where employees have visibility into what is happening within their company. This is particularly important during a work-from-home scenario, where employees are reliant on leaders to make crucial decisions for the future of their jobs and the company. A key part of this has been communication between management and employees on how the company is tackling COVID-19. By way of examples, in some companies, discussions have centered on the effects to the company, strategic plans for acquiring clients, and re-shuffling of roles, etc. (Chanana and Sangeeta, 2020; Wiradendi Wolor et al., 2002).

6 Conclusion

Our findings highlight the need for companies to be aware of the extent and factors associated with work motivation, work satisfaction, and work engagement during the COVID-19 pandemic. Our research shows that there are statistically significant differences in most variables describing work motivation, satisfaction, and engagement among older employees before the COVID-19 pandemic and during the COVID-19 pandemic. Also, our research highlights which factors increase work motivation, work satisfaction and work engagement during COVID-19 and how to take care of these constructs during the COVID-19 and after the COVID-19 pandemic to keep employees motivated, satisfied, and engaged. We also presented the measures with which companies can increase work motivation, satisfaction, and engagement among employees during the COVID-19 pandemic and after the COVID-19 pandemic.

The contribution to science refers to the use of a measuring instrument that we implemented at Slovenian companies and thus we came to new insights about the motivation, satisfaction, and commitment of older employees during the COVID-19 pandemic. The above contributed to new views on creating appropriate working conditions after the COVID-19 pandemic, especially for older employees.

Our research suggests that management researchers and practitioners need to pay careful attention to creating suitable work conditions for older employees after the COVID-19 pandemic to increase work motivation, satisfaction, and engagement. Thus, our research shows statistically significant differences in work motivation, work satisfaction and work engagement among older employees before the COVID-19 and during the COVID-19 pandemic. During the COVID-19 pandemic, companies can focus on how to constructively manage the new challenges that the COVID-19 pandemic brings to companies and what they can learn from it. For companies and leaders or HRM in particular, the pandemic can be a starting point for positive and future-oriented developments.

Our sample was limited to Slovenian companies and older employees. Also, in our research we limited ourselves on work motivation, work satisfaction and work engagement. Therefore, for further research, we propose the examination of differences in other constructs relating to employees (for example, leadership, work commitment, employee relations, the well-being of employees) before and during the COVID-19 pandemic in Slovenian companies, and also the

examination of differences in constructs between Slovenia and other countries. Also, for further research, we propose the examination of differences in other constructs during the COVID-19 pandemic and after the COVID-19 pandemic. With our findings, we contribute to the discussion on a constructive and future-oriented approach to the COVID-19 pandemic, both for practices around the management of global employees as well as for future research.

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References

1. Adekoya, O.D., Adisa, T.A., & Aiyenitaju, O. (2022). Going forward: remote working in the post-COVID-19 era. *Employee Relations*, Vol. ahead-of-print No. ahead-of-print. <https://doi-org.ezproxy.lib.ukm.si/10.1108/ER-04-2021-0161>
2. Agility PR Solutions. (2020). Employees put the brakes on returning to offices—nearly half now want to WFH permanently. Retrieved from <https://www.agilitypr.com/pr-news/public-relations/employees-put-the-brakes-on-returning-to-offices-nearly-half-now-want-to-wfh-permanently/>
3. Agrawal, S., De Smet, A., Lacroix, S., & Reich, A. (2020). *To Emerge Stronger from the COVID-19 Crisis, Companies Should Start Reskilling Their Workforces Now*. Washington: McKinsey & Company.
4. Bayuni, E. (2020). COVID-19 lockdown? It's not the economy. It's people's health and lives! Retrieved from <https://www.thejakartapost.com/academia/2020/03/17/covid-19-lockdown-its-not-the-economy-stupid-its-peoples-health-and-lives.html>
5. Bellmann, L., & Hübler, O. (2020). Job Satisfaction and Work-Life Balance: Differences between Homework and Work at the Workplace of the Company. Retrieved from <http://ftp.iza.org/dp13504.pdf>
6. Bhatti, O. K., Aslam, U. S., Hassan, A., & Sulaiman, M. (2016). Employee motivation: An Islamic perspective. *Humanomics*, 32(1), 33–47. <https://doi.org/10.1108/H-10-2015-0066>
7. Brassey, J., & Kruyt, M. (2020). *How to Demonstrate Calm and Optimism in a Crisis. Organization Practice*. New York: McKinsey & Company.
8. Chanana, N., & Sangeeta, M. (2020). Employee engagement practices during COVID-19 lockdown. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7536939/pdf/PA-9999-e2508.pdf>
9. Chronbach, L. J. (1951). Coefficient alpha and the internal structure of tests. *Psychometrika*, 16, 297–334.
10. Chua, S. J. L., Myeda, N. E., & Teo, Y. X. (2022). Facilities management: towards flexible work arrangement (FWA) implementation during Covid-19. *Journal of Facilities Management*, Vol. ahead-of-print No. ahead-of-print. <https://doi-org.ezproxy.lib.ukm.si/10.1108/JFM-09-2021-0101>
11. Culbertson, S. (2009). Do satisfied employees mean satisfied customers? *Academy of Management Perspectives*, 23(1), 76–77. <https://doi.org/10.5465/amp.2009.37008005>
12. D'Auria, G., & De Smet, A. (2020). Leadership in a Crisis: Responding to the Coronavirus Outbreak and Future Challenges. Retrieved from <https://www.mckinsey.com/business-functions/organization/our-insights/leadership-in-a-crisis-responding-to-the-coronavirus-outbreak-and-future-challenges>
13. Fachriansyah, R. (2020). Work-from-home policy in effect at major Jakarta companies over virus concerns. Retrieved from <https://www.thejakartapost.com/news/2020/03/15/work-from-home-policy-in-effect-at-majorjakarta-companies-over-virus-concerns.html>

14. Farrell, L., Newman, T., & Corbel, C. (2020). Literacy and the workplace revolution: a social view of literate work practices in Industry 4.0. Discourse: Studies in the Cultural Politics of Education. Retrieved from https://www.researchgate.net/publication/341154956_Literacy_and_the_workplace_revolution_a_social_view_of_literate_work_practices_in_Industry_40
15. Festing, M., & Kraus, S. A. (2020). The impact of the COVID-19 pandemic on global employees. Retrieved from https://academ.escpeurope.eu/pub/IP%202020-19-EN_CHAIR.pdf
16. Ferfoglia, P., & Markič, M. (2020). Primerjava zadovoljstva zaposlenih s kakovostjo delovnega in življenjskega okolja. *Revija za univerzalno odličnost*, 4, 309–324. <https://doi.org/10.37886/ruo.2020.019>
17. Gallup, G. (2006). Q12 Meta-Analysis. The relationship between engagement at work and organizational outcomes. Retrieved from <https://www.hrbartender.com/images/Gallup.pdf>
18. Gallup. (2021). U.S. Employee Engagement Rises Following Wild 2020. Retrieved from <https://www.gallup.com/workplace/330017/employee-engagement-rises-following-wild-2020.aspx>
19. Harter, J. (2020). U.S. Employee Engagement Reverts Back to Pre-COVID-19 Levels. Retrieved from <https://www.gallup.com/workplace/321965/employee-engagement-reverts-back-pre-covid-levels.aspx>
20. Hayday. (2003). Questions to Measure Commitment and Job Satisfaction. Retrieved from <https://www.employment-studies.co.uk/system/files/resources/files/mp19.pdf>
21. Islam, R., & Ismail, A. Z. H. (2008). Employee motivation: A Malaysian perspective. *International Journal of Commerce and Management*, 18(4), 344–362. <https://doi.org/10.1108/10569210810921960>
22. Jeske, D. (2022). Remote workers' experiences with electronic monitoring during Covid-19: implications and recommendations. *International Journal of Workplace Health Management*, 15(3), 393–409. <https://doi-org.ezproxy.lib.ukm.si/10.1108/IJWHM-02-2021-0042>
23. Kozole, M. & Gračner, T. (2020). Menedžment dobrega počutja. *Revija za univerzalno odličnost*, 1, 31–47. <https://doi.org/10.37886/ruo.2020.003>
24. Kumar, R. (2005). *Research methodology: a step-by-step guide for beginners*. Los Angeles: Sage.
25. Matli, W. (2020). The changing work landscape as a result of the Covid-19 pandemic: insights from remote workers life situations in South Africa. *International Journal of Sociology and Social Policy*, 40(9/10), 1237–1256. <https://doi.org/10.1108/IJSSP-08-2020-0386>
26. May, D. R., Gilson, R. L., & Harter, L. M. (2004). The psychological conditions of meaningfulness, safety and availability and the engagement of the human spirit at work. *Journal of Occupational and Organizational Psychology*, 77(1), 11–37. <https://doi.org/10.1348/096317904322915892>
27. Menezes, L. M. (2012). Job satisfaction and quality management: an empirical analysis. *International Journal of Operations & Production Management*, 32(3), 308–328. <https://doi.org/10.1108/01443571211212592>
28. Nagel, L. (2020). The influence of the COVID-19 pandemic on the digital transformation of work. *International Journal of Sociology and Social Policy*, 40 (9/10), 861–875. <https://doi.org/10.1108/IJSSP-07-2020-0323>
29. Pancasila, I., Haryono, S., & Sulisty, B. A. (2020). Effects of Work Motivation and Leadership toward Work Satisfaction and Employee Performance: Evidence from Indonesia. *Journal of Asian Finance, Economics and Business*, 7(6), 387–397. <https://doi.org/10.13106/jafeb.2020.vol7.no6.387>
30. Pwc. (2020). Financial services firms look to a future that balances remote and in-office work. Retrieved from <https://www.pwc.com/us/en/industries/financial-services/library/balancing-remote-and-in-office-work.html>
31. Rafferty, A. E., & Griffin, M. A. (2009). Job satisfaction in organizational research. In D. A. Buchanan & A. Bryman (Eds.), *The Sage handbook of organizational research methods* (pp. 196–212). Sage Publications Ltd.
32. Robinson, D., Perryman, S., & Hayday, S. (2004). The drivers of employee engagement. Retrieved from <http://www.employmentstudies.co.uk/report-summary-drivers-employee-engagement>

33. Sarangi, P., & Nayak, B. (2016). Employee engagement and its impact on organizational success— A study in manufacturing company, India. *IOSR Journal of Business and Management*, 18(4), 52–57. <https://doi.org/10.9790/487X-1804015257>
34. Schaufeli, W. B., Martinez, I. M., Pinto, A. M., Salanova, M., Bakker, A. B. (2002). Burnout and engagement in university students: A crossnational study. *Journal of Cross-Cultural Psychology*, 33(5), 464–481. <https://doi.org/10.1177/0022022102033005003>
35. Siddiqui, D. A. (2020). Relationship between flexible working arrangements and job satisfaction mediated by Work-Life balance: Evidence from public sector universities employees of Pakistan. *International Journal of Human Resource Studies*, 10(1), 104–127. doi: 10.2139/ssrn.3510918
36. Spurka, D., & Straub, C. (2020). Flexible employment relationships and careers in times of the COVID-19 pandemic. *Journal of Vocational Behavior*, 119, 1–5. <https://doi.org/10.1016/j.jvb.2020.103435>
37. Stergioua, D. P., & Farmaki, A. (2021). Ability and willingness to work during COVID-19 pandemic: Perspectives of front-line hotel employees. *International Journal of Hospitality Management*, 93, 1–4. <https://doi.org/10.1016/j.ijhm.2020.102770>
38. Sulaymonov, A. (2020). Flexible Working Practices: Urgency or Future? *Modern Economy*, 11(7), 1342–1350. doi: 10.4236/me.2020.117095.
39. Tabachnick, B. G., Fidell, L. S. (2013). *Using multivariate statistics (6th Edition)*. Boston: Pearson Education.
40. Tavares, F., Santos, E., Diogo, A., & Ratten, V. (2021). Teleworking in Portuguese communities during the COVID-19 pandemic. *Journal of Enterprising Communities: People and Places in the Global Economy*, 15(3), pp. 334–349. <https://doi-org.ezproxy.lib.ukm.si/10.1108/JEC-06-2020-0113>
41. Toscano, F., & Zappalà, S. (2020). Social Isolation and Stress as Predictors of Productivity Perception and Remote Work Satisfaction during the COVID-19 Pandemic: The Role of Concern about the Virus in a Moderated Double Mediation. *Sustainability*, 12(23), 2–14. <https://doi.org/10.3390/su12239804>
42. Tovmasyan, G., & Minasyan, D. (2020). The Impact of Motivation on Work Efficiency for Both Employers and Employees also During COVID-19 Pandemic: Case Study from Armenia. *Business Ethics and Leadership*, 4(3), 25–35. [https://doi.org/10.21272/bel.4\(3\).25-35.2020](https://doi.org/10.21272/bel.4(3).25-35.2020)
43. Towers Watson, W. (2020). Deeper Dive into the Employee Experience Implications of COVID-19. Retrieved from <https://www.willistowerswatson.com/assets/covid-19/NA-COVID-19-ClientWebcast-April-22-Final.pdf>
44. Wiradendi Wolor, C., Solikhah S., Fidhyallah, N. F., & Lestari, D. P. (2020). Effectiveness of E-Training, E-Leadership, and Work Life Balance on Employee Performance during COVID-19. *Journal of Asian Finance, Economics and Business*, 7(10), 443–450. doi: 10.13106/jafeb.2020.vol7.no10.443
45. Wiradendi Wolor, C., Solikhah, S., Susita, D., & Martono, S. (2020). How to Maintain Employee Motivation Amid The Covid-19 Virus Pandemic. *International Journal of Economics and Business Administration*, 8(4), 78–86. doi: 10.35808/ijeba/570
46. Yawson, R. (2020). Strategic flexibility analysis of HRD research and practice post COVID-19 pandemic. *Human Resource Development International*, 23(4), 406–417. <https://doi.org/10.1080/13678868.2020.1779169>

Maja Rožman, PhD is an assistant professor in the field of quantitative economic analyses at the University of Maribor, Faculty of Economics and Business, Department of Quantitative Economic Analyses, Institute of Operational Research; maja.rozman1@um.si. Her research work is focused on structural equation modelling and on contemporary management problems in organizations, especially in the field of human resource management. She is interested in quantitative methods in economics and business sciences. As a researcher and member of the Institute of Operations Research she is currently involved in several international research projects. Also, she is a member of Croatian Science Foundation-funded project: “SIMON: Intelligent system for automatic selection of machine learning algorithms in social sciences.

Dijana Oreški, PhD, is an associate professor at the University of Zagreb, Faculty of Organization and Informatics. Her research work is focused on data science and machine learning algorithms implementation, especially in the social sciences. She is head of the Laboratory for data mining and intelligent systems. During her academic career she has served as an editor of Journal of Information and Organizational Sciences. She is member of program committees of several scientific conferences. She has been participating on several national and international research projects. She is leader of Croatian Science Foundation-funded project: “SIMON: Intelligent system for automatic selection of machine learning algorithms in social sciences”.

Vesna Čančer, Ph.D. in economic and business sciences, is a full professor of quantitative methods in business science at the University of Maribor's Faculty of Economics and Business. Her research interests include research methodology, decision analysis, and creative problem solving, with applications in entrepreneurship, human resource management, Industry 4.0, and information and communication technology. She is a member of the research group P5-0023 entitled Entrepreneurship for Innovative Society and the head or a member of many research projects. The author can be contacted at vesna.cancer@um.si.

Povzetek:

Motivacija, zadovoljstvo in zavzetost starejših zaposlenih v času COVID-19 pandemije

Raziskovalno vprašanje (RV): Ali obstajajo statistično značilne razlike v delovni motivaciji, zadovoljstvu in zavzetosti med starejšimi zaposlenimi pred COVID-19 pandemijo in med COVID-19 pandemijo?

Namen: Namen prispevka je preveriti, ali obstajajo statistično značilne razlike v delovni motivaciji, zadovoljstvu in zavzetosti med starejšimi zaposlenimi pred COVID-19 pandemijo in med COVID-19 pandemijo. Cilj prispevka je tudi ugotoviti, kateri dejavniki prispevajo k povečanju delovne motivacije, zadovoljstva in zavzetosti v času pandemije COVID-19.

Metoda: Razlike v delovni motivaciji, zadovoljstvu in zavzetosti med starejšimi zaposlenimi pred COVID-19 pandemijo in med COVID-19 pandemijo smo testirali z neparametričnim testom za dva odvisna vzorca. Za analizo razlik med posameznimi trditvami smo uporabili neparametrični Wilcoxonov signed-rank test.

Rezultati: Rezultati kažejo, da obstajajo statistično značilne razlike v delovni motivaciji, zadovoljstvu in zavzetosti med starejšimi zaposlenimi pred COVID-19 pandemijo v primerjavi s časom med COVID-19 pandemijo.

Organizacija: Rezultati pomembno vplivajo na podrobnejši pregled ustvarjanja novih delovnih pogojev za zaposlene v času pandemije COVID-19 in še posebej v obdobju po pandemiji COVID-19.

Družba: Med COVID-19 se lahko podjetja in družba osredotočijo na to, kako konstruktivno obvladati nove izzive, ki jih podjetjem prinaša COVID-19 pandemija. Za podjetja in vodje oziroma zlasti za managerje se lahko pandemija uporabi kot izhodišče za pozitiven in v prihodnost usmerjen razvoj.

Originalnost: Z našimi ugotovitvami prispevamo k razpravi o konstruktivnem in v prihodnost usmerjenem pristopu k pandemiji COVID-19, tako za prakse v zvezi z upravljanjem zaposlenih kot tudi za prihodnje raziskave. Naša raziskava prav tako poudarja, kateri dejavniki povečujejo delovno motivacijo, zadovoljstvo pri delu in delovno zavzetost med COVID-19 in kako ustvariti ustrezne delovne pogoje med COVID-19 in po pandemiji COVID-19, da ostanejo zaposleni motivirani, zadovoljni in zavzeti.

Omejitve/nadaljnje raziskovanje: Omejili smo se na slovenska podjetja in starejše zaposlene. Prav tako smo se v naši raziskavi omejili na delovno motivacijo, zadovoljstvo in zavzetost. Zato za nadaljnje raziskave predlagamo preučitev razlik v drugih konstruktih pred pandemijo COVID-19 in zaposlenih v času pandemije COVID-19 v slovenskih podjetjih oz. tudi preučitev razlik v konstruktih med Slovenijo in drugimi državami.

Ključne besede: delovna motivacija, zadovoljstvo, zavzetost, starejši zaposleni, COVID-19.

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Manifestations of Islamophobia During COVID-19

Maja Pucelj*

Faculty of Organisation Studies Novo mesto, Ulica talcev 3, 8000 Novo mesto, Slovenia
maja.pucelj@fos-unm.si

Abstract:

Background and Originality: Did the level of Islamophobia increase during COVID-19, and in what forms did Islamophobia manifest during the mentioned period? This article aims to find out, through a systematic review, whether Islamophobia has increased during COVID-19 and in what forms Islamophobia has manifested during COVID-19. The originality of the research is reflected in a thorough systematic review of the available literature in the field of Islamophobia at the time of COVID-19. The article's topic, which is relatively new and consequently under-researched, focused on examining the rise and manifestations of Islamophobia during COVID-19 to identify relevant societal challenges of the future.

Method: A systematic review of Islamophobia during COVID-19 was conducted in the following databases: Scopus, ProQuest Dissertations & Theses Global, Web of Science, Google Scholar, Base (Open Access), Springer Nature, JSTOR, ScienceDirect, SAGE, Wiley Online Library, and Emerald. Additional articles from other sources were identified by examining reference lists of studies found during database searches.

Results: Based on inclusion and exclusion criteria, our systematic review found 19 articles published in English between January 2020 and January 2022. We found that the level of Islamophobia jumped during COVID-19 and that Islamophobia shifted to online media during the strict lockdown but remained present in physical form.

Organization: Although the implications of the research for organizations are indirect, knowledge of the manifestations of Islamophobia during COVID-19 may provide employers with an understanding of the plight of Muslims employed in organizations and enable them to take specific measures to alleviate the psychological distress of their Muslim employees.

Society: It is important for society to work for peaceful coexistence and mutual understanding in a pluralistic, democratic society and to make additional efforts to reduce the level of Islamophobia, hate speech and hate crimes against Muslims and to condemn all forms of discrimination and persecution against Muslims.

Limitations/further research: As a limitation of our study, we must point out the relatively small amount of relevant literature on the studied topic, which is due to the relatively short period of study of Islamophobia in the COVID-19 period. We suggest that for further research, researchers should also focus on the manifestation of Islamophobia during the COVID-19 period in physical form, as the various research studies that we were able to find and evaluate for this systematic review focused mainly on the online implications of Islamophobia.

Keywords: islamophobia, COVID-19, Muslims, social media, physical attacks, systematic review, hate speech, hate crimes.

1 Introduction

COVID-19 has affected our lives in many ways and manifested itself in many undesirable forms, ranging from the negative impact of the coronavirus on the lives of individuals,

* Korespondenčni avtor / Correspondence author

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causing many deaths, to the impact on the world economy and employment, quality of life in society in the form of restrictions on social rights, such as the right to protection from poverty and social exclusion, the right to housing and education, and limitations on medical care, and has also been shown in an increase in hate speech and crimes and other acts of violence such as stigmatization, discrimination and xenophobia.. Due to the imposed COVID-19 closures and compartmentalization of daily life in Europe (as well as the significant increase in fake news), the manifested forms of hate have shifted from the physical to the online and social media but continue to exist in both forms.

COVID-19 has also raised a number of social issues, such as the distrust of science and medicine, where we have witnessed distrust of official scientific research because of alleged links to the pharmaceutical lobby. This distrust was also reflected in increased attention to various conspiracy theories or the words of non-experts on various social networks. The aforementioned conspiracy theories or "fake news" have also led to an increase in discrimination, hate speech, and hate crimes, with various scholars focusing on researching Sinophobia or discrimination against the Chinese during COVID-19 (e.g., Roche, 2020; Zhang & Xu, 2020; Gao, 2021), but paying less attention to the rise in Islamophobia. Islamophobia is a manifestation of the fear of Islam and Muslims in general, which also manifests itself in concrete actions against immigration, in the field of asylum policy, in the distortion of the media image, or in the form of physical attacks on visible Muslim communities. Islamophobia is also primarily a manifestation of fear of terrorism and is reflected in various forms such as hate speech and crime and other violent acts such as stigmatization, discrimination, and xenophobia. As we perceived the spread of hateful messages on virtual social media during COVID-19, we decided to conduct a systematic review to answer the following two research questions:

RQ1: Did the level of Islamophobia increase during COVID-19?

RQ2: In what forms did Islamophobia manifest itself during COVID-19?

2 Theoretical framework

Islamophobia was originally developed as a concept by political activists in the late 1990s to draw attention to rhetoric and actions directed at Islam and Muslims in Western liberal democracies (Bleich, 2012, p. 179). As the Merriam-Webster Dictionary states, Islamophobia is an irrational fear of, aversion to, or discrimination against Islam or people who practice Islam (Merriam-Webster Dictionary, Islamophobia) and is, as noted by Lambert and Githens-Mazer (2010, p. 57), an unfounded fear of Muslims and Islam, which manifests itself in such a form that individuals are victims of spitting, repression, verbal abuse, discrimination in the workplace, violence, or are victims of damage to their homes, due to the fact that their houses are painted with graffiti or set on fire, or are even faced with more horrific consequences, including serious injury or even death just because they are (or perceived to be) Muslims. Awan & Zempi (2020, p. 2) define Islamophobia as:

A fear, prejudice and hatred of Muslims or non-Muslim individuals that leads to provocation, hostility and intolerance by means of threatening, harassment, abuse, incitement and intimidation of Muslims and non-Muslims, both in the online and offline world. Motivated by institutional, ideological, political, and religious hostility that transcends into structural and cultural racism which targets the symbols and markers of a being a Muslim.

Islamophobia can manifest itself as latent, institutional Islamophobia or as overt Islamophobia. Latent, institutional Islamophobia is harder to detect than overt Islamophobia and can be found in statistics on the unemployment rate or the poverty rate that Muslims face. Negative perceptions of Islam and Muslims in the West are not a new phenomenon, but stem from negative images of Muslims (Turks) from the past, which, as Ahmed Pašić (2009, p. 37) notes, are transferred to the present with the help of the mass media, education system and different centres of power. The existence of Islamophobia in Europe is confirmed by various studies (e.g., Kallis, 2015; Abdelkader, 2017; Perocco, 2018, etc.). Forms of Islamophobia in the European Union vary from verbal threats to physical attacks on people and property. However, Hoarau and Sasnal (2013, pp. 1–2) note that there are large differences between European countries in terms of Islamophobia, which are often related to the number of Muslims in that country: the larger the Muslim minority, the greater the level of discrimination. All forms of non-acceptance of Muslims, from Islamophobia, social marginalization, social exclusion and discrimination to hate speech and hate crimes and other forms of violence, reflect in sadness, mental distress, feelings of uneasiness, fear, humiliation, isolation, anger, and helplessness and finally manifest in poor or even unsuccessful integration. Ramberg (2004, p. 6) notes that Islamophobia, whether it is an everyday form of racism and discrimination or a more violent form, constitutes a violation of human rights and threatens social cohesion.

As primarily a public health crisis, COVID-19 has generated different challenges, other than the virus itself, ranging from economic and political to psychological and social challenges and harms. As we can see from history, in changed societal circumstances, such as in the case of COVID-19, we can observe pandemonium, caused by misinformation and due to the fact that the governments were not sufficiently prepared to handle such a health crisis, increased levels of fear and anxiety, and an increase in hateful emotions within the population (Chandra et al., 2021, p. 1). Ahuja & Banerjee (2021, p. 1) and Kanika & Banerjee (2020, p. 1) agree and state that historically looking, infectious disease outbreaks, including the plague, influenza, cholera, HIV, etc., generated stigma, prejudice, “othering” and xenophobia, against certain communities. The COVID-19 also reflected in an increase of hateful rhetoric on virtual media, produced by right-wing politics/individuals, which is confirmed by Rajan and Venkatraman (2021, p. 1). Another negative aspect of COVID-19 is the effect of discrimination on minority communities, which was acknowledged by Abbasi et al. (2021, p. 334), who state that discernment or discrimination generated fear in the minority communities.

Mitoma & Marcus (2020, p. 132) state that before the outbreak of COVID-19, we could note in reports a rise in racist, anti-Semitic, and Islamophobic hate, where they point to far-right terrorist attacks, which occurred from Norway to New Zealand, the surge of hate speech in U.S. schools after the 2016 election, and the return of tropes and conspiracy theories. Because COVID-19 increased concerns about a surge in hate speech hate acts and racism, we decided to conduct the present research review to see whether levels of Islamophobia did increase during COVID-19 and in which forms Islamophobia manifested during that time.

3 Method

The current study is a systematic review of the literature on the topic of the potential rise of Islamophobia during COVID-19 and its manifestations in the aforementioned period. We used the following databases to gather relevant articles to which we had full access: Scopus, ProQuest Dissertations & Theses Global, Web of Science, Google Scholar, Base (Open Access), Springer Nature, JSTOR, ScienceDirect, SAGE, Wiley Online Library and Emerald. Additional articles from other sources (Google) were also identified by examining the reference lists of the studies located through the database search.

The search term consisted of two sets of keywords – Islamophobia and COVID-19. The keywords were associated with the Boolean operator “and”. The names and abstracts of the publications resulting from the search strategy were screened for relevancy. If the titles and abstracts did not provide a satisfactory level of information, we scanned the full text to determine whether the publication meets the inclusion criteria. For two reasons the identification process was carried out twice: (1) to ensure that all relevant publications were included and (2) to categorize possible nonrelevant publications. Figure 1 below represents our research model.

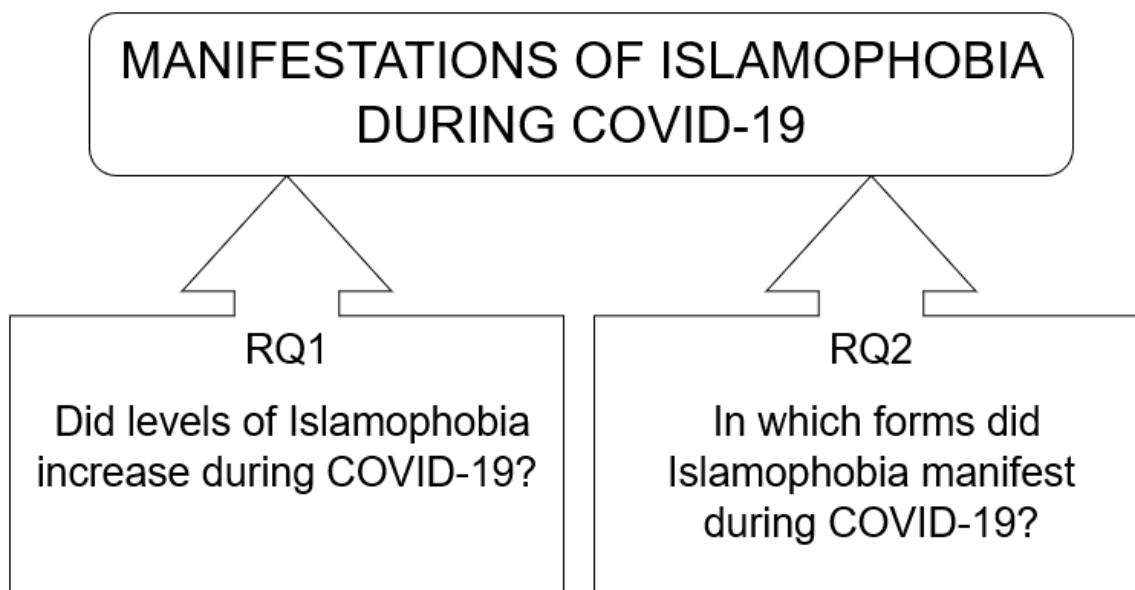


Figure 1. Research model

Through the systematic literature review, we identified 19 articles with the following exclusion criteria: (1) year of publication, which was limited from January 2020 to January 2022, (2) language, which we limited to English, (3) research duplicated in different database searches, (4) lack of appropriate research methodology and/or were newspaper articles, (5) if the identified relevant publications have reported on the results of the same study, we included in the analysis only the publication with the most extensive coverage of the reported study. We also excluded that research that we had (5) no full access to or which (6) focused just on researching Islamophobia with no connection with the COVID-19 situation. We also limited the number of articles dealing with the increase of Islamophobia in India, because the majority of the studies about Islamophobia during COVID-19 in that country related to the surge of Islamophobia after the Tablighi Jamaat congregation held by Muslims in India, so we included in the analysis only the publication with the most extensive coverage of the reported study. We included in our research different types of research, reviews, meta-analyses, conference papers, case studies, books, book chapters, and theses or dissertations, where we imposed no restriction to age, gender or nationality, which correspond to the field of analysis, i.e., Islamophobia during COVID-19. The reliability of the results was checked using intra-rater evaluation performed by repeated search intervals over a five-day period. By conducting repeated analysis, we found no difference from the findings of the primary search. Due to the review and summarization of exclusively professional and scientific literature the validity of the research is reliable, with the exclusion of possible generalizations and subjective opinions of the authors of the reviewed research. Our systematic literature reviews resulted in an agenda for further research.

The selection of relevant academic research was carried out in accordance with the inclusion criteria defined in the review protocol. The review of the relevant academic research was

conducted in three steps. In the first step the author checked the inclusion criteria on the basis of the titles and keywords of the studies. If the decision to include a piece of research based on this data could not be taken, in the second step the author checked inclusion criteria on the basis of the summaries. If the author was still in doubt about the inclusion or exclusion of the research, the introduction and conclusion of the study (and also, if necessary, the content) were also checked in the third step. The process of selecting relevant academic research is shown using a diagram in Figure 2 below.

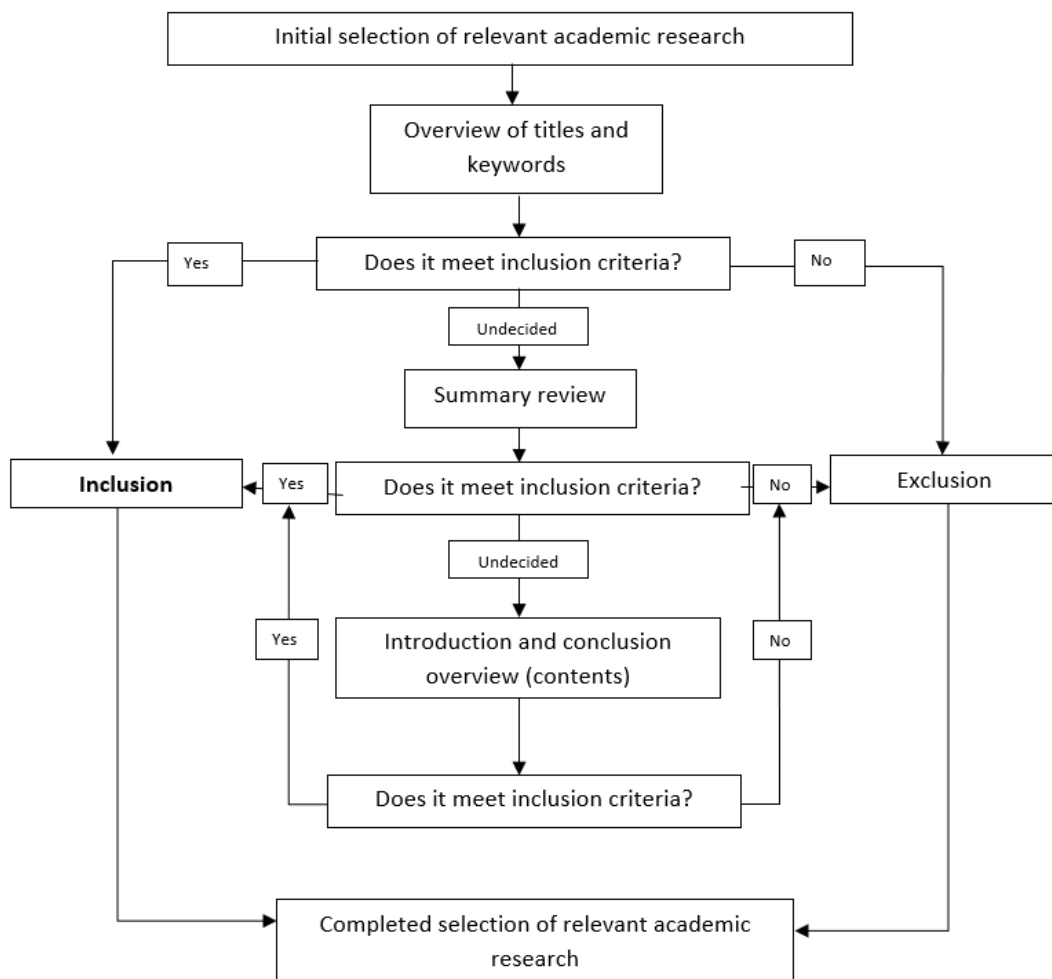


Figure 1. Choice of Primary Studies

Tabel 1 below lists the reviewed papers through the used exclusion factors, Tabel 2 details the reviewed papers and Tabel 3 lists the Database/Journal name, type of publication and number of papers extracted.

Table 1. List of reviewed papers through use of exclusion factors

<i>Database</i>	<i>Number of articles found</i>	<i>Exclusion factors used</i>	<i>Number of articles chosen for detailed examination</i>
Scopus	9	The content of the article did not match the inclusion criteria (we excluded research papers that we did not have full access to or that did not directly focus on the topic of Islamophobia during COVID-19)	4
ProQuest Dissertations and Theses	316	The content of the article did not match the inclusion criteria (no correlation with the COVID-19 situation or Islamophobia)	1
Web of Science	3	The content of the article did not match the inclusion criteria (duplicated articles)	1
Base	20	The content of the articles did not match the inclusion criteria (duplicated articles; the identified relevant publications have reported on the results of the same study, so we included only the publication with the most extensive coverage of the reported study in the analysis)	2
Springer Nature	272	The content of the articles did not match the inclusion criteria (no correlation with the COVID-19 situation or Islamophobia; the identified relevant publications have reported on the results of the same study, so we included only the publication with the most extensive coverage of the reported study in the analysis, which was already listed in the previous database search...)	0
JSTOR	98	The content of the article did not match the inclusion criteria (no correlation with the COVID-19 situation or Islamophobia)	0
ScienceDirect	42	The content of the article did not match the inclusion criteria (no correlation with the COVID-19 situation and/or Islamophobia; no full access...)	0
SAGE	80	The content of the article did not match the inclusion criteria (no correlation with the COVID-19 situation and/or Islamophobia)	1
Wiley Online Library	42	The content of the article did not match the inclusion criteria (no correlation with the COVID-19 situation and/or Islamophobia)	0
Emerald	27	The content of the article did not match the inclusion criteria (no correlation with the COVID-19 situation and/or Islamophobia)	0
Google Scholar	3,370	The content of the articles did not match the inclusion criteria (duplicated articles; no correlation with the COVID-19 situation or Islamophobia; the identified relevant publications have reported on the results of the same study, so we included only the publication with the most extensive coverage of the reported study in the analysis, which was already listed in the previous database search...)	3
Google	2,940,000	The content of the articles did not match the inclusion criteria (all above mentioned exclusion criteria were used)	7

Table 2. Details of the reviewed papers

Database/ Journal	Reference	Title of the article	Issues, design (and sample)	Measurement tool	Findings
Database: Scopus Journal: Al-Shajarah	Chandra et al. (2021)	"A Virus Has No Religion": Analyzing Islamophobia on Twitter during the COVID-19 Outbreak	The first large-scale quantitative study linked Islamophobia with COVID-19 (Outbreak with CoronaBias dataset, with a focus on anti-Muslim hate spanning four months, with over 410,990 tweets from 244,229 unique users).	Mixed-methods approach	The authors revealed the existence of anti-Muslim rhetoric around COVID-19. The authors created an understanding of anti-Muslim sentiments that are not directly coherent with terrorism but can harm the community in a dire manner in the Indian sub-continent.
Database: Scopus Journal: Journal of Arab and Muslim Media Research	Rajan & Venkatraman (2021)	Insta-hate: An exploration of islamophobia and right-wing nationalism on instagram amidst the COVID-19 pandemic in India	This study positioned itself within the theoretical framework of Stuart Hall's encoding and decoding theory to uncover the visual and textual codes used to create stigma and blatant stereotypes that dehumanize and demonize certain communities using social media.	Semiotic analysis of the Instagram pages of Hindu_Secret and Hindu_he_hum	The study found encoded stereotypes of threat in the use of colour, religious structures, clothes, and other physical markers of cultural identity in generating content for Islamophobia .
Database: Scopus Journal: International Journal of Criminology and Sociology	Bakry et al. (2020)	Arguing islamophobia during COVID-19 outbreaks: A consideration using Khusūs Al-Balwā	This article aims to provide an argument against Islamophobia with consideration of Khusūs Al Balwa.	Mixed-methods approach	The authors researched how the threat of Islamophobia continued to surface due to COVID-19 . Islam was considered as the source of the virus .
Database: Scopus Journal: Frontiers in Psychiatry	Ahuja & Banerjee (2021)	The "Labeled" Side of COVID-19 in India: Psychosocial Perspectives on Islamophobia During the Pandemic	This commentary highlights the social contexts of increase in Islamophobia in India during the pandemic and discusses the possible psychological explanations and public health impact, as well as outlining some ways to mitigate it focusing on collectivism.	Commentary	The author finds that the pandemic has further instigated Islamophobia , and consequent discrimination.
Database: ProQuest Dissertations & Theses Global Journal: /	Fadiga (2021)	Islamophobia in France: A Case Study of Islamophobic Practices and Racial Discrimination in Face of the Global Pandemic of COVID-19	The aim of this research was to analyse the sets of historically inequitable institutions and policies legitimizing the socio-economic discrimination experienced by Muslim minorities in French society.	Case study	The author states that prevailing anti-Muslim prejudices have continued to deepen social inequalities, and evermore in the face of COVID-19 . The historical shifts from collective fears of secularization and the history of imperialism and colonialism have set the stage for prevailing anti-Muslim prejudices in French society.

“continued”

<i>Database/ Journal</i>	<i>Reference</i>	<i>Title of the article</i>	<i>Issues, design (and sample)</i>	<i>Measurement tool</i>	<i>Findings</i>
Database: Web of Science Journal: Al- Shajarah	Ushama (2021)	Islamophobia in India during the covid-19 crisis: A surge of stigmatization, vilification and murder	This article discusses how zealots have exploited COVID-19 to amplify Islamophobia in India.	Qualitative content analysis	Qualitative content analysis of publications, speeches, websites, news bulletins, periodicals, YouTube and social media reveals a surge of anti-Muslim rhetoric and activity during the COVID-19 crisis.
Database: BASE Monograph	Awan et al. (2021)	Covid-19: What are the Drivers of the Islamophobic Infodemic Communications on Social Media?	The Online Islamophobia Project examined the interaction between miscommunications and conspiracy theories in relation to key factors such as anonymity, membership length, peer groups and postage frequency, within the context of the current COVID-19 pandemic and Islamophobia on social media.	Mixed-methods approach	The researchers found that: <ul style="list-style-type: none"> - different forms of Islamophobia and anti-Muslim hatred found on social media reinforce negative views about Muslims; - significantly higher mean Anger score for General Islam compared to Anti-Vaxx; - the pandemic has seen a widespread influx of anti-Muslim hate, including attacks and abuse (online and offline), which has been fuelled by the media who have perpetuated Islamophobia through peddling fake news stories.
Database: BASE RSIS Commentaries	Mahzam (2020)	Disinformation: the spreading of Islamophobia	COVID-19-related disinformation campaigns designed to stoke Islamophobic sentiment are fuelling an uptick in hate attacks targeting Muslims in some countries. The unprecedented conditions created by the ongoing pandemic offer fresh opportunities for extremists to exploit and require timely interventions.	Commentary	Levels of Islamophobia increase around certain events. Muslims were perceived as the allegedly key purveyors of the COVID-19 virus. The spread of COVID-19-related hate speech has further exacerbated these divisions, and also contributed to an upsurge in anti-Muslim hate crimes in recent weeks.
Database: SAGE Journal: SAGE Journals	Poole & Williamson (2021)	Disrupting or reconfiguring racist narratives about Muslims? The representation of British Muslims during the Covid crisis	This article examines British newspaper coverage of Muslims during the first wave of the coronavirus crisis.	Mixed-methods approach	Muslims were negativized in mainstream media representation in the UK. In the context of the reporting of coronavirus, racist discourses have been reshaped as Muslim key workers are distinguished in the reporting from other Muslims.

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Database/ Journal	Reference	Title of the article	Issues, design (and sample)	Measurement tool	Findings
Database: Google Scholar Journal: Ilkogretim Online Elementary Education Online	Abbasi et al. (2021)	The Innovative Role of the Islamic World to Counter the Phenomenon of Western “Islamophobia” during the Post-Corona Era	This article focuses on the examination of prejudice against Islam and Muslim community immigrants in the Western world.	Mixed- methods approach	Numerous extremist groups were trying to use COVID-19 as a weapon to initiate the attacks against the Muslims . The pandemic has <u>increased nationalism, fanned tensions worldwide and caused a rise in racism and religious enmity, together with anti-minorities violence in so many places</u> . Also, such trends have highlighted ‘Islamophobia’ . Muslims are being targeted freely ; their shrines are being destroyed ; the Holy Messenger (PBUH) is being insulted; their divine book, the Holy Quran, was being burnt, all under the shadow of freedom of expression.
Database: Google Scholar Journal: Journal of the British Islamic Medical Association	Shahid (2020)	The Pandemic of Islamophobia	The study was focused on researching how COVID-19 has shone a spotlight on pre-existing intersecting and compounding inequalities and injustices. Data showed that Muslims in the UK are more likely to die from COVID-19. However, when social deprivation and ethnicity were controlled for, that excess risk diminishes. This was consistent with structural discrimination and racism being key drivers of health disparities from COVID-19 among Muslims in the UK.	A syndemics approach	Islamophobia and COVID-19 interacted synergistically at the population level and contributed to excess burden of illness in the Muslim community . The study also found increased levels of Islamophobia during the pandemic .
Database: Google Scholar Transcript Religious Fundamentalism in the Age of Pandemic, Nina Käsehage (ed.)	Lucini (2021)	Dismantling Prejudices on Muslim Communities in Italy in Times of Pandemic: not just Religious Fundamentalism	A reflection on the role that perceptions and cultural aspects of a crisis, such as that cause from the COVID-19 virus could generate in ethnic communities such as the Muslim one	Mixed- methods approach	At the geographical level, the most violent online messages of an Islamophobic nature were present throughout the country , with a greater presence in large cities and a lower spread in the south. It is interesting to note that the intolerant or hateful words associated with the interpretation of Muslims as a threat were the following but fundamentalist: jihadist, Moroccan, cutthroat, Bedouin, Abdullah. These words revealed how some part of the collective perceptions on Muslims were based on the cultural interpretation of news and experiences rather than a reflection from a more general perspective or a geopolitical level where it was supposed to place the definition of fundamentalist.

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<i>Database/ Journal</i>	<i>Reference</i>	<i>Title of the article</i>	<i>Issues, design (and sample)</i>	<i>Measurement tool</i>	<i>Findings</i>
Database: Google	Vox- Osservatorio italiano sui diritti (2020)	Map of intolerance	The map of intolerance focuses on the key challenges that emerged during COVID-19.	Mixed-methods approach	After women, Muslims were the most affected category – Islamophobia was at the top of the online hate scale. Later versions of the mentioned studies have shown that the trend related to Islamophobia is constantly rising and peaks, when dramatic events (e.g. terrorist attacks or crimes) committed by Muslims occur.
Database: Google Institute for Freedom of Faith & Security in Europe	Rose (2021)	Pandemic Hate: COVID-related Antisemitism and Islamophobia, and the Role of Social Media	Considering anti-Semitism and Islamophobia as joint and intersecting phenomena, this report investigates the ways in which, eighteen months after the start of the pandemic, anti-Jewish and anti-Muslim narratives continued to be created, spread and accessed on social media	Mixed-methods approach	As pandemic restrictions intensified in Western Europe, so too did a wave of COVID-related anti-Semitism and Islamophobia , proliferating on social media.
Database: Google Report	Lenzner (2021)	Xenophobia, Islamophobia, Antisemitism, and Racism in Germany, Austria, and the Netherlands	Research about xenophobia, Islamophobia, anti-Semitism, and racism in Germany, Austria, and the Netherlands	Mixed-methods approach	During the few last years, xenophobia, racism, and Islamophobia have increased . Not only in society but also in the political discourse. Government and the public sphere were under pressure to react to brutal acts and attacks of hatred committed. These crimes were often committed by right-wing extremists or by terrorists, often with an Islamist background. The number of crimes, especially by the right-wing, was seriously alarming. A statistic from the German Interior Ministry found that in 2020 right extremist crimes were at their highest level since 2001.
Database: Google Expertise	MEND (2020)	COVID-19 and Islamophobia online	The research aimed to explore the current dangers posed in online spaces on account of the current COVID-19 pandemic, as well as highlighting potential mechanisms for mitigating these harms.	Expertise	Recent months have witnessed the rise of anti-Chinese sentiment and prejudice against individuals from other East Asian countries, as well as the reinforcement of other forms of racial prejudices, including Islamophobia . The COVID-19 crisis has been used to create ‘others’ of Muslims, blaming them for the spread of the virus . The spread of fake news online has contributed to this extremely worrying trend.

“to be continued”

»continued«

<i>Database/ Journal</i>	<i>Reference</i>	<i>Name of the article</i>	<i>Issues, design (and sample)</i>	<i>Measurement tool</i>	<i>Findings</i>
Database: Google Report	OIC Islamophobia Observatory (2021)	Islamophobia Monitoring	The report monitored Islamophobia in years 2020–2021.	Report	Islamophobic incidents in France rose sharply in 2020 - there were 235 attacks on Muslims in France in 2020, up from 154 the previous year, a 53% jump . - In Spain the racial and ethnic discrimination had worsened in the last few years, fuelled by far-right politicians and fake news. The report said religion-related discrimination had increased considerably, with North African and Indo-Pakistani communities hardest hit because of the increased stigmatization, Islamophobia and being likened to terrorists. Although the coronavirus lockdown limited public life, the number of criminal offenses, including defacing spaces with Nazi symbols, writing threats, and ripping off women's headscarves, rose again.
Database: Google Report	Bayrakli & Hafez (2021)	European Islamophobia Report 2020	Report on the state of Islamophobia in Europe in 2020.	Report	While physical Islamophobia has decreased , at the same time, Islamophobia has moved to the private sphere and is being spread especially in social media . The state of Islamophobia in Europe not only has not improved, but has worsened, if not reached a tipping point.
Database: Google Research briefing report	Awan & Khan- Williams (2020)	Coronavirus, fear and how Islamophobia spreads on social media	The aims and objectives of this report were to try and provide a snapshot of trends of anti-Muslim bigotry and Islamophobic narratives circulating on social media in relation to COVID-19. The objectives were to provide an overview of how these narratives are formed and how they impacted communities both online and offline.	Report	Different forms of online hate speech could be identified: from racial harassment, religiously motivated abuse including Islamophobic abuse and directed abuse more generally which targets someone because of their disability, gender, culture, race and beliefs.

Table 3. Database/Journal name, type of publication and number of papers extracted

<i>Serial</i>	<i>Database</i>	<i>Type of publication</i>	<i>Number of Papers</i>	
1.		Journal: Al-Shajarah	1	
2.	Scopus	Journal: International Journal of Criminology and Sociology	1	
3.		Journal: Journal of Arab and Muslim Media Research	1	
4.		Journal: Frontiers in Psychiatry	1	
5.		ProQuest Dissertations & Theses Global	Dissertation	1
6.	Web of Science	Journal: Al-Shajarah	1	
7.	Base	Monography	1	
8.		RSIS Commentaries	1	
9.	SAGE	SAGE Journals	1	
10.	Google Scholar	Ilkogretim Online - Elementary Education Online	1	
11.		Journal of the British Islamic Medical Association	1	
12.		Transcript Religious Fundamentalism in the Age of Pandemic, Nina Käsehage (ed.)	1	
13.	Google	Vox-Osservatorio italiano sui diritti	1	
14.		Institute for Freedom of Faith & Security in Europe	1	
15.		Report Xenophobia, Islamophobia, Antisemitism, and Racism in Germany, Austria, and the Netherlands	1	
16.		Expertise COVID-19 and Islamophobia online	1	
17.		Islamophobia Monitoring	1	
18.		European Islamophobia Report 2020	1	
19.		Research briefing report	1	
TOTAL NUMBER OF PAPER/REPORTS/EXPERTISE EXTRACTED			19	

4 Results

4.1 Result concerning the increased levels of Islamophobia during COVID-19

Islamophobia is present all over the (mainly Western) world. Zalta (2016, p. 534) notes that its consequences can be traced to the stereotyping of Muslims, which is based on the ignorance of the heterogeneity of the Islamic tradition and the rejection of Islam as a European (and consequently Slovenian) religion. In recent years Islamophobia has been spreading rapidly as an ideology, as a result of mass media reporting, terrorist attacks in major western (European) cities, and mass migrations of refugees and migrants from the Middle East and North Africa in recent years.

However, because every global crisis has deepened social disparities and tensions due to increased fear and insecurities, reflected in hate speech and crimes and cases of racism against different types of social groups (minorities, migrants, refugees, asylum seekers), we wanted to explore if increased levels of Islamophobia can be noted during COVID-19 and if so, the forms in which Islamophobia manifested during that time.

We found that COVID-19 was often portrayed as a disease which was produced and can be attributed to Others. The blame for coronavirus infections was first attributed to the Chinese, followed by the targeting of Muslims. The latter is confirmed by MEND (2020), which states

that it was possible to discern the reinforcement of other forms of racial prejudices, including Islamophobia. The COVID-19 crisis has been used to create ‘others’ of Muslims, blaming them for the spread of the virus. The spread of fake news online is contributing to this extremely worrying trend (MEND, 2020). The aforementioned is also confirmed by Ushama (2021), who highlights deliberate misinformation by campaigns and outrages, which include blaming Muslims for the contagion, denying them medical treatment, official justification by doctors to murder Muslim coronavirus patients, and the vandalization, boycott and destruction of Muslim homes, stalls and shops — all under cover of the COVID-19 lockdown. Bakry et al. (2020) examined the theory that Islam was considered the source of the virus, which suddenly went viral, even with the hashtag #coronajihad. The research also found that performance of religious rituals by certain groups ignoring social distancing can be one of the triggers besides anti-Islamic propaganda and conspiracy (Bakry et al., 2020). Furthermore, Awan et al. (2021) found that general Islamophobia evokes greater general anger or is a greater expression of anger than responses to anti-vax content. The negative perception of Muslims is also confirmed by Poole & Williamson (2021), who found that Muslims are negativized in mainstream media representation within the UK.

Chandra et al. (2021) confirmed the existence of anti-Muslim rhetoric around COVID-19 and created an understanding of anti-Muslim sentiments that are not directly coherent with terrorism but can harm the community in a dire manner. On the other hand, the research, conducted by Rajan & Venkatraman (2021) found encoded stereotypes of threat in the use of colour, religious structures, clothes, and other physical markers of cultural identity in generating content for Islamophobia. The existence of Islamophobic rhetoric during COVID-19 was also confirmed by the following research: Ushama (2021), Fadiga (2021), Bakry et al. (2020), Ahuja & Banerjee (2021), Ahuja & Banerjee (2021), Fadiga (2021), Awan et al. (2021), Mahzam (2020), Poole & Williamson (2021), Abbasi et al. (2021), Shahid (2020), Lucini (2021), Vox-Osservatorio italiano sui diritti (2020), Rose (2021), Lenzner (2021), MEND (2020), OIC Islamophobia Observatory (2021) and Bayrakli & Hafez (2021).

Very important findings can be found in Shahid’s study (2020), which indicated that Islamophobia and COVID-19 interact synergistically at the population level and contribute to the excess burden of illness in the Muslim community. At the biological level, the convergence of the pathophysiological processes of SARS-CoV-2 and embodiment of Islamophobia produces excess morbidity and mortality. The hostile environment further institutionalizes Islamophobia and worsens COVID-19 outcomes through policies on immigration and security. The media is a particularly important institutional force that entrenches Islamophobia through shaping public perception. During the pandemic, divisive media narratives that blame and scapegoat Muslims for transmitting infection were widespread. This is in addition to fake news and conspiracy theories on social media which have been linked with increased levels of Islamophobia during the pandemic (Shahid, 2020). The increased levels of Islamophobia during COVID-19 were also confirmed by Ushama (2021), Bakry et al. (2020), Ahuja & Banerjee (2021), Fadiga (2021), Awan et al. (2021),

Mahzam (2020), Abbasi et al. (2021), Vox-Osservatorio italiano sui diritti (2020), Rose (2021), Lenzner (2021), MEND (2020), OIC Islamophobia Observatory (2021) and Bayrakli & Hafez (2021), through which we confirmed the first research question.

Lenzner (2021) states that during the last few years, xenophobia, racism, and Islamophobia have increased, not only in society but also in the political discourse. Fadiga (2021) states that prevailing anti-Muslim prejudices have continued to deepen social inequalities. Bayrakli & Hafez (2021) found that the state of Islamophobia in Europe not only has not improved, but has worsened, if not reached a tipping point. These new developments warrant making the daily reality of Islamophobia visible with a greater urgency than ever before and urge us not to be silent in the face of the increasing pressure on the human rights of Muslims in Europe and beyond (Bayrakli & Hafez, 2021).

This complies with the finding of Mahzam (2020) that Islamophobia increases around certain events. Content portraying Muslims as the allegedly key purveyors of the COVID-19 virus was also prevalent on other social media platforms such as Facebook, Telegram and WhatsApp. The spread of COVID-19-related hate speech has further exacerbated these divisions, and also contributed to an upsurge in anti-Muslim hate crimes (Mahzam, 2020). The aforementioned concurs with the findings of Abbasi et al. (2021), who found that numerous extremist groups were trying to use COVID-19 as a weapon to initiate attacks against Muslims. This pandemic has increased nationalism, fanned worldwide tensions, and caused a rise in racism and religious enmity, together with violence directed against minorities in so many places (Abbasi et al., 2021). The OIC Islamophobia Observatory (2021) confirms this, while pointing out the increase in Islamophobic incidents in France, a 53% increase in attacks on Muslims in France and worsened racial and ethnic discrimination in Spain. Religion-related discrimination had increased considerably with North African and Indo-Pakistani communities hardest hit because of the increased stigmatization, Islamophobia and being likened to terrorists. Although the coronavirus lockdown limited public life, the number of criminal offenses, including defacing spaces with Nazi symbols, writing threats, and ripping off women's headscarves rose again.

4.2 Result about the forms in which Islamophobia manifested during COVID-19

The systematic review of existing literature in Table 1 revealed that Islamophobia during the strict lockdown moved **into online media** (which was confirmed by Awan et al. (2021), Lucini (2021), Vox-Osservatorio italiano sui diritti (2020), Chandra et al. (2021) and MEND (2020)), but nevertheless **also stayed present in a physical form**, which was confirmed by Awan et al. (2021) and by Chandra et al. (2021), who state that, while being present in the online space, the rise in Islamophobia also could be noted in increased hate crimes in the real/physical world. Bayrakli & Hafez (2021) state that the pandemic had quite different effects on the role of Islamophobia, because on the one hand physical Islamophobia has decreased with the imposed COVID-19 restrictions, while on the other hand Islamophobia moved into social media.

Nevertheless, the examined studies focus mainly on examining Islamophobia expressed online, because the world faced lockdowns due to the coronavirus pandemic and also because of the simplicity with which fake news was created and thus enabled different channels (such as news media channels, social media, online chat platforms, etc.) in proliferating hate (Rajan & Venkatraman, 2021). As Chandra et al. (2021) noted, a large number of positive COVID-19 cases, which increased after the religious gathering of Tablighi Jamaat, resulted in the formation of anti-Muslim communities around following hashtags: #coronajihad and #tablighijamaatvirus on Twitter.

Meanwhile the study conducted by Rajan & Venkatraman (2021) revealed that polarizing and Islamophobic content circulating on the two Instagram pages/accounts, use colour, religious structures, clothes, and physical features to encode stereotypes of threat towards the Muslim community in India, which has influenced attitudes towards Muslims as spreaders of coronavirus. MEND (2020) added that hate speech which occurs online and social media offences are increasing concerns, due to the fact that the anonymity of such users is exploited for posting or sharing messages with hateful content and, as mentioned already, highlight the need for efficient tackling of hateful rhetoric on social media platforms. Awan & Khan-Williams (2020) state that online hate speech can manifest itself in different forms, while Islamophobia (as religiously motivated abuse) is a form of ‘cyber harassment’, ‘cyber bullying’, ‘cyber abuse’, ‘cyber incitement/threats’ and ‘cyber hate’. From the MEND (2020) study, it can be concluded that following the ‘trigger event’ in the case of COVID-19, the ‘new’ digital form of **anti-Muslim bigotry has become even more striking and prevalent within social media**, which has resulted in mutually **reinforcing the relationship between offline attacks and online hate speech**.

5 Discussion

COVID-19 has affected our lives in many ways, manifesting itself in many undesirable forms, ranging from the negative consequences of COVID-19 on individual lives, causing many deaths, to the impact on the global economy and employment, and on the quality of life in society in regard to social rights limitations, including the right to be protected against poverty and social exclusion, the right to housing and education, and limitations to medical care. COVID-19 has also negatively affected many people in connection with their mental health by creating new barriers for those people suffering from mental illness and substance use disorders. (Panchal et al., 2021).

The findings of the MEND research (2020) show that pandemics (e.g., the outbreak of Ebola in 2013–16 and Zika in 2015-16, COVID-19) present a unique moment, which can be used for spreading misinformation when the public dissemination of information is slowed down. Furthermore, predominantly due to spreading of misinformation and the present fear for individuals’ health, it was possible to perceive the rise of Sinophobia or discrimination against Chinese people, which took place at the beginning of COVID-19, due to the fact that COVID-19 was stereotypically associated through coronavirus with the Chinese. However, due to the

increased level of fear and insecurities, which reflected in an increase in hate speech and crimes and cases of racism against different types of social groups (minorities, migrants, refugees, asylum seekers), Muslims also became the target of discriminatory perceptions and manifestations. This was confirmed by Voloder (2020), who states that with the intensified pandemic situation, we could see a rise in instances of racism directed towards minorities, migrants, refugees, asylum seekers, and Muslims. This corresponds with a study by Monash University (2020), which pointed out that the primary target of hate speech during COVID-19 were people of Chinese or East Asian origin, while the authors point out the proliferation of Islamophobic incidents. The study of Rajan & Venkatraman (2021) confirmed the aforementioned by stating that “the psychosocial fear of the disease translated into a widespread subscription to racist and Islamophobic acts. This was heightened by an increased engagement with social media and television news channels during the lockdown”. Ivić & Petrovič (2020) also state that the consequence of the mentioned rhetoric also manifested in the rise of xenophobia and other types of discrimination, one of them being Islamophobia.

Al-Qazzaz (2020) agrees that COVID-19 reflected itself in different challenges – not only the spread of virus, but also, in societal ills, which was evident in the rise of Islamophobia online and in the media, in anti-Muslim harassment and in physical violence against Muslims, while adding that: “In the midst of mass lockdown procedures, economic collapse and overall uncertainty, hateful people, especially those associated with the far right, have targeted and blamed Muslims for the spread of COVID-19.”. Javed et al. (2021) agree, stating that the COVID-19 lockdowns resulted in increased activity on online social networks and the spreading of unfiltered and unreliable information on social networks such as WhatsApp, Twitter, Facebook, etc. Hamead (2020) also states that during lockdown due to COVID-19, we could see anti-Muslim rhetoric present in social and news media. Rajan & Venkatraman (2021) add that Twitter and Instagram were virtual places where misinformation about the pandemic was spread.

As we confirmed with the present systematic research review, we have seen increased levels of Islamophobia during COVID-19, which was confirmed with the studies we examined: Ushama (2021), Bakry et al. (2020), Ahuja & Banerjee (2021), Fadiga (2021), Awan et al. (2021), Mahzam (2020), Abbasi et al. (2021), Vox-Osservatorio italiano sui diritti (2020), Rose (2021), Lenzner (2021), MEND (2020), OIC Islamophobia Observatory (2021), Bayrakli & Hafez (2021), Lenzner (2021) and Fadiga (2021). Nevertheless, it is interesting that the Advisory Council on Youth expressed its concerns about the increase and normalization of structural Islamophobia across Europe, with which Poole & Williamson (2021) agree, stating that during COVID-19, we have seen worrying growth and normalization of extreme right-wing politics across different Western countries, as well as the normalization of anti-Muslim sentiment (Hamead, 2020, p. 94). This coincides with the opinion of Motl (in: RTVSLO, 2019), who pointed out that in recent years, we have witnessed a worrying normalization of hate speech in Slovenian society. We have seen the normalization of hate speech in different aspects – it has appeared in online and offline

discussions throughout society, as well as manifesting itself in in political discourse. Cerase et al. (2016) state that the internet played a crucial role in the normalization of racism, by taking advantage of social media to spread hate speech. If we put these findings aside, the results of the present systematic research review become understandable, due to the fact that (as stated by Rajan & Venkatraman, 2021) online communication enables the possibility of creating fake news and also provides access to the masses, with the use of different channels (such as news media channels, social media, online chat platforms, etc.) with the aim to proliferate hate. As we have seen, during the strict lockdown Islamophobia moved into online media (which was confirmed by Awan et al. (2021), Lucini (2021), Vox-Osservatorio italiano sui diritti (2020), Chandra et al. (2021) and MEND (2020)), but nevertheless also remained present in a physical form, which was confirmed by Awan et al. (2021), Chandra et al. (2021) and Bayrakli & Hafez (2021), which also answers the second research question.

But regardless of the form in which Islamophobia is currently manifested, by exhibiting Islamophobia we are communicating that we do not accept Muslims in our society and that we reject both Islam and religion and Muslims as members of that religion. Any manifestations of non-acceptance of Muslims, from Islamophobia, social marginalization, social exclusion and discrimination to hate speech/actions and even violence, evoke in Muslims sadness, mental distress, feelings of discomfort, fear, humiliation, isolation, anger, helplessness and rejection by society. Such manifestations can be also noted in poor or even unsuccessful integration, and lead to extreme actions that have manifested themselves in recent years in radicalization, the departure of individuals to the Middle East and joining Islamic State fighters, or through terrorist attacks. Ramberg notes that Islamophobia, whether an everyday form of racism and discrimination or a more violent form, constitutes a violation of human rights and threatens social cohesion (Ramberg, 2004, p. 6). The aforementioned also manifested in Shahid's study (2020), where the author notes that Islamophobia and COVID-19 interact synergistically at the population level and contribute to the excess burden of illness in the Muslim community and at the biological level, the convergence of the pathophysiological processes of SARS-CoV-2 and embodiment of Islamophobia produces excess morbidity and mortality. Therefore, it is necessary to raise awareness among all social actors about the dangers of Islamophobia/hate speech and try to prevent or at least limit such forms of non-acceptance of Islam/Muslims, as otherwise groups of people who feel resentment towards the West will grow and consequently and they may begin to isolate or even resort to deviant practices, while the aforementioned negative impact could also reflect in the deterioration of the mental and physical health of Muslims.

6 Conclusion

COVID-19 had different implications on our life, ranging from the health concerns connected to the spread of the virus, to the increase of fear, which manifested itself in an increase in hateful, racist and discriminatory rhetoric. As Banaji and Bhat (2020) note, it was naively assumed that a life-threatening situation would result in bringing people together, due to the

fact that it simply manifested itself in an additional perspective of hate speech. Through the conducted systematic review of existing research, we wanted to ascertain whether levels of Islamophobia increased during COVID-19 pandemic and in what forms Islamophobia manifested itself during that time. The research could serve as an agenda for further research. We conducted a systematic review of the available literature through the following databases: Scopus, ProQuest Dissertations & Theses Global, Web of Science, Google Scholar, Base (Open Access), Springer Nature, JSTOR, ScienceDirect, SAGE, Wiley Online Library, Emerald and Google. Through the use of different exclusion and inclusion criteria, we found 19 articles, which were published in English from January 2020 to January 2022. The result of our research showed that the levels of Islamophobia surged during COVID-19 and that Islamophobia moved into online media during the strict lockdown, but nevertheless also stayed present in a physical form. This is reflected in the fact that despite the coronavirus lockdown, which limited public life, the number of physical criminal offenses, including defacing spaces with Nazi symbols, writing threats, and ripping off women's headscarves, rose during COVID-19.

This research review article represents a comprehensive study of the available literature on the topic of Islamophobia during COVID-19. The originality of the research is reflected in an in-depth systematic review of the available literature in the field of Islamophobia at the time of COVID-19. The topic of the article, which is still relatively new and consequently under-exploited, focused on the study of the rise and manifestations of Islamophobia during the COVID-19 in order to address the relevant societal challenges of the future.

The research impact on organizations is indirect, but nevertheless, knowledge about the manifestations of Islamophobia during COVID-19 can facilitate employers' understanding of the plight of Muslims employed in organizations and give them a possibility to adopt certain measures that alleviate the mental plight of their Muslim employees during a pandemic situation. While throwing light onto the problem of surging levels of Islamophobia during COVID-19, which also manifests in a deterioration of mental and physical health or even excess morbidity and mortality, it is important that society makes a commitment to peaceful coexistence and mutual understanding in a pluralistic democratic society. Society has to direct additional effort towards lowering levels of Islamophobia (regardless of the form in which it presents), hate speech and hate crimes directed at Muslims, and condemning all forms of discrimination and persecution against them. Because we have seen how the spread of fake news and conspiracy theories online reflected in an increase of hateful rhetoric and how anti-Muslim prejudices, which occurred during the spread of COVID-19, have continued to deepen social inequalities and increased pressure on the human rights of Muslims in Europe and beyond, it is crucial that we start looking for appropriate solutions for more successful identification and prosecution of hate speech on online social networks too, not only in physical forms. Furthermore, political representatives should abandon the hateful, aggressive and toxic political debates and give more attention to increasing respectful and non-hostile rhetoric.

As a limitation of our research, we have to point out the relatively low amount of relevant existing literature on the examined topic, which can be attributed to the rather short period of examining of Islamophobia during COVID-19. We suggest that future research also focuses on the manifestation of Islamophobia during COVID-19 in a physical form, due to the fact that the different research studies that we were able to find and evaluate for the purpose of this systematic review research were focusing primarily on the online implications of Islamophobia. We also assess that further research is needed in the field of (online and physical) hate crime and hate speech, in order to ensure an in-depth understanding of the phenomenon and ensure that appropriate action is taken in order to tackle such worrying levels of hate.

Having in mind Shahid's study (2020), which noted that Islamophobia and COVID-19 interact synergistically at the population level and contribute to the excess burden of illness in the Muslim community and at the biological level, the convergence of the pathophysiological processes of SARS-CoV-2 and embodiment of Islamophobia produces excess morbidity and mortality, we believe that it is of crucial importance that we make (as stated by the Advisory Council on Youth (2021) a commitment to achieve peaceful coexistence within a pluralistic democratic society.. This is reflected in the means of recognizing the consequences generated by reproducing hostile stereotypes about different religious groups which occur in national legislation or/and the public discourse (Advisory Council on Youth, 2021). It is crucial, that, as noted from the IFSW Human Rights Commission (2021), we condemn all forms of discrimination and persecution against Muslims and try to involve all organizations and governments across the world in joining such fight to try to end such abhorrent behaviour. Additional effort must be put into raising awareness on the topics of discrimination, diversity, addressing hate and the impact of such manifestations of hate on the mental and physical well-being of Muslims.

However, a precondition for the implementation of the mentioned ways to eliminate Islamophobia is the desire of society to remove Islamophobia from the societal environment and to accept Muslims into their society, with the prerequisite of course, that Muslims want to achieve integration. However, in the absence of such a desire, the adoption of laws, media awareness and assistance from civil society will not bring the desired effect and as such can "only" offer a limited scope of support measures. Nevertheless, if the society (on the other hand) intensifies nationalist sentiments and consequently Islamophobic sentiments, as we have witnessed in recent years, the desired effect will be absent. In any case, raising public awareness about Muslims' (religious) way of life is a very good starting point for eliminating or at least reducing high levels of Islamophobia.

References

1. Abbasi, M. U. R., Saleem, H. H., Ejaz, T., Ullah, S., H. Mushtaq, H. M., & Abbasi, M. (2021). The Innovative Role of the Islamic World to Counter the Phenomenon of Western

- "Islamophobia" during the Post-Corona Era. *İlköğretim Online* 20(3), 326–340. doi: 10.17051/ilkonline.2021.03.32
2. Abdelkader, E. (2017). *A Comparative Analysis of European Islamophobia: France, UK, Germany, Netherlands, and Sweden*. Retrieved from: <https://escholarship.org/content/qt870099f4/qt870099f4.pdf>
 3. Advisory Council on Youth (CCJ). (2021, September 21). Statement by the Advisory Council on Youth (CCJ) on European Action Day Against Islamophobia. Retrieved from <https://www.coe.int/en/web/youth/-/european-action-day-against-islamophobia>
 4. Ahuja, K. K. & Banerjee, D. (2021, January 22). The “Labeled” Side of COVID-19 in India: Psychosocial Perspectives on Islamophobia during the Pandemic. *Frontiers in Psychiatry* 11. doi: 10.3389/fpsy.2020.604949. Retrieved from <https://www.frontiersin.org/articles/10.3389/fpsy.2020.604949/full>
 5. Al- Qazzaz, K. (2020, October 1). Islamophobia is on the rise during COVID-19. *Policy Options Politiques*. Retrieved from <https://policyoptions.irpp.org/magazines/october-2020/islamophobia-is-on-the-rise-during-covid-19/>
 6. Awan, I., Carter, P., Sutch, H., & Lally, H. (2021) *Covid-19: What are the Drivers of the Islamophobic Infodemic Communications on social media?* Project Report. Birmingham: Birmingham City University.
 7. Awan, I. & Khan-Williams, R. (2020). Coronavirus, Fear and How Islamophobia Spreads on Social Media. Research Briefing Report 2020. Retrieved from <https://antimuslimhatredworkinggroup.files.wordpress.com/2020/04/research-briefing-report-7-1.pdf>
 8. Awan, I. & Zempi, I. (2020). *A Working Definition of Islamophobia: A Briefing Paper– November 2020*. Retrieved from <https://www.ohchr.org/Documents/Issues/Religion/Islamophobia-AntiMuslim/Civil%20Society%20or%20Individuals/ProfAwan-2.pdf>
 9. Bakry, M., Syatar, A., Hajar, I. H., Mundzir, C., Arif, M., & Amiruddin, M. M. (2020). Arguing Islamophobia during COVID-19 Outbreaks: A Consideration Using Khuṣūṣ Al-Balwā. *International Journal of Criminology and Sociology* 9, 2757–2765.
 10. Banaji, S. & Bhat, R. (2020, September 30). How anti-Muslim disinformation campaigns in India have surged during COVID-19. *The LSE Blog*. Retrieved from <https://blogs.lse.ac.uk/covid19/2020/09/30/how-anti-muslim-disinformation-campaigns-in-india-have-surged-during-covid-19/>
 11. Bayrakli, E. & Hafez, F. (Eds.). (2021). *European Islamophobia Report*. Austria: Leopold Weiss Institute. Retrieved from <chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/viewer.html?pdfurl=https%3A%2F%2Fislamophobiareport.com%2Fislamophobiareport.pdf&clen=105122186&chunk=true>.
 12. Bleich, E. (2012). Defining and Researching Islamophobia. *Review of Middle East Studies*, 46(2), 179–188.
 13. Cerase, A., D’Angelo, E., & Santoro, C. (2016). Monitoring racist and xenophobic extremism to counter hate speech online: Ethical dilemmas and methods of a preventive approach, *Freedom from Fear*, 2016(11), 111–119.
 14. Chandra, M., Reddy, M., Reddy M., Sehgal S., Gupta S., Buduru A.B., & Kumaraguru P. (2021). *"A Virus Has No Religion": Analyzing Islamophobia on Twitter during the COVID-19 Outbreak*. Retrieved from: <https://www.scopus.com/record/display.uri?eid=2-s2.0->

- 85114795427&origin=resultslist&sort=plf-f&src=s&st1=covid-19+islamophobia&sid=8493fb81c519964541113f85900bff2b&sot=b&sdt=b&sl=36&s=TITLE-ABS-KEY%28covid-19+islamophobia%29&relpos=1&citeCnt=0&searchTerm=
15. Fadiga, H. M. (2021). *Islamophobia in France: A case study of Islamophobic practices and racial discrimination in face of the global pandemic of Covid-19*. Retrieved from: <https://www.proquest.com/pqdtglobal/docview/2604898735/fulltextPDF/DA8EDEA5DCB74911PQ/1?accountid=31309>
 16. Gao, Z. (2021, October 4). Sinophobia during the Covid-19 Pandemic: Identity, Belonging, and International Politics. *Integrative Psychological and Behavioral Science*. Retrieved from <https://link.springer.com/article/10.1007/s12124-021-09659-z>
 17. Hamead, T. (2020). *Veils, Plagues, and Burials: The Blighted Sri Lankan Muslim Body*. Retrieved from: <https://www.proquest.com/pqdtglobal/docview/2423876504/DA8EDEA5DCB74911PQ/3?accountid=31309>
 18. Hoarau, M. & Sasnal, P. (2013). *The Rise of Islamophobia in Europe*. Retrieved from: [https://www.files.ethz.ch/isn/164842/Bulletin%20PISM%20no%2056%20\(509\),%2027%20May%202013.pdf](https://www.files.ethz.ch/isn/164842/Bulletin%20PISM%20no%2056%20(509),%2027%20May%202013.pdf)
 19. IFSW. (2021, February 4). *IFSW HRC Highlights Concerns on Increasing Islamophobia*. Retrieved from <https://www.ifsw.org/ifsw-hrc-highlights-concerns-on-increasing-islamophobia/>
 20. Ivić, S. & Petrovič, R. (2020). The Rhetoric of Othering in a Time of Pandemic: Labeling COVID-19 as a ‘Foreign Virus’ in Public Discourse. *Kultura Polisa* 17(43), 421–433.
 21. Javed, R.T., Usama, M., Iqbal, W., Qadir, J., Tyson, G., Castro, I., & Garimella, K. (2021, November 15). A deep dive into COVID-19-related messages on WhatsApp in Pakistan. *Social Network Analysis and Mining* 12(5). Retrieved from <https://link.springer.com/article/10.1007/s13278-021-00833-0>
 22. Kallis, A. (2015). *Islamophobia in Europe: The radical right and the mainstream*. Retrieved from: https://www.researchgate.net/publication/311935510_Islamophobia_in_Europe_The_radical_right_and_the_mainstream
 23. Kanika K. A. & Banerjee, D. (2020). *The “Labeled” Side of COVID-19 in India: Psychosocial Perspectives on Islamophobia during the Pandemic*. Retrieved from: <https://www.frontiersin.org/articles/10.3389/fpsy.2020.604949/full>
 24. Lambert, R. & Githens-Mazer, J. (2010). *Islamophobia and Anti-Muslim Hate Crime: UK Case Studies*. London: European Muslim Research Centre and University of Exeter.
 25. Lenzner, M. (2021) *Xenophobia, Islamophobia, Antisemitism, and Racism in Germany, Austria, and the Netherlands*. Geneva: Geneva International Centre for Justice. Retrieved from https://www.gicj.org/images/Xenophobia_Islamophobia_Antisemitism_and_Racism_in_Germany_Austria_and_the_Netherlands.pdf
 26. Lucini, B. (2021). Dismantling Prejudices on Muslim Communities in Italy in Times of Pandemic: not just Religious Fundamentalism. In N. Käsehage (Eds.), *Religious Fundamentalism in the Age of Pandemic* (pp. 221–250). Bielefeld: transcript Verlag.
 27. Mazham, R. (2020, May 13). CO20091 | Global Health Security: COVID-19 and Its Impacts – Disinformation: The Spreading of Islamophobia. *RSIS*. Retrieved from <https://www.rsis.edu.sg/rsis-publication/icpvtr/global-health-security-covid-19-and-its-impacts-disinformation-the-spreading-of-islamophobia/>
 28. MEND. (2020, May). COVID-19 and Islamophobia Online. Retrieved from <https://www.mend.org.uk/uploads/2020/05>

29. Merriam-Webster Dictionary. *Islamophobia*. Retrieved from <https://www.merriam-webster.com/dictionary/Islamophobia>.
30. Mitoma, G. & Marcus, A. S. (2020). Human Rights Before and After COVID-19: Getting Human Rights Education out of Quarantine. *Journal of International Social Studies* 10(2), 127–140.
31. Monash University (2020, July 30). *Hate speech during COVID-19*. The University of Queensland. Retrieved from <https://polsis.uq.edu.au/event/5655/hate-speech-during-covid-19-monash-university>
32. OIC Islamophobia Observatory. (2021). *Islamophobia Monitoring*. Retrieved from https://www.oic-oci.org/upload/islamophobia/2021/MB_August_2021.pdf
33. Panchal, N., Kamal, R., Cox, C., & Garfield, R. (2021, February 10). *The Implications of COVID-19 for Mental Health and Substance Use*. KFF. Retrieved from <https://www.kff.org/coronavirus-covid-19/issue-brief/the-implications-of-covid-19-for-mental-health-and-substance-use/>
34. Pašić, A. (2009). *Perspektive in dileme muslimanskih skupnosti v kontekstu evropskih integracijskih procesov* (Doctoral Dissertation). Ljubljana: Faculty of Humanities.
35. Perocco, F. (2018). *Anti-Migrant Islamophobia in Europe. Social Roots, Mechanisms and Actors*. Retrieved from <https://www.scielo.br/j/remhu/a/cKtRfYWVyHHrTvHdvRQzYZj/?format=pdf&lang=en>
36. Poole, E. & Williamson, M. (2021, July 2). *Disrupting or reconfiguring racist narratives about Muslims? The representation of British Muslims during the Covid crisis*. Journalism. Retrieved from <https://doi.org/10.1177/14648849211030129>
37. Rajan B. & Venkatraman S. (2021). *Insta-hate: An exploration of islamophobia and right-wing nationalism on Instagram amidst the COVID-19 pandemic in India*. Retrieved from: <https://www.scopus.com/record/display.uri?eid=2-s2.0-85105541488&origin=resultslist&sort=plf-f&src=s&st1=covid-19+islamophobia&sid=8493fb81c519964541113f85900bff2b&sot=b&sdt=b&sl=36&s=TITLE-ABS-KEY%28covid-19+islamophobia%29&relpos=2&citeCnt=2&searchTerm=>
38. Ramberg, I. (2004). *Islamophobia and its consequences on Young People*. Retrieved from: <https://rm.coe.int/16807037e1>.
39. Roche, G. (2020). *The Epidemiology of Sinophobia*. Retrieved from https://press-files.anu.edu.au/downloads/press/n6884/pdf/epidemiology_sinophobia.pdf
40. Rose, H. (2021). *Pandemic Hate: COVID-related Antisemitism and Islamophobia, and the Role of Social Media*. München: Institute for Freedom of Faith and Security in Europe.
41. RTVSLO (2019, August 8). *"Po novem kazniv že govor ali zapis, ki sam po sebi predstavlja grožnjo ali žalitev"*. Retrieved from <https://www.rtvsi.si/slovenija/po-novem-kazniv-ze-govor-ali-zapis-ki-sam-po-sebi-predstavlja-groznjo-ali-zalitev/496480>
42. Shahid, H. J. (2020). The Pandemic of Islamophobia. *Journal of the British Islamic Medical Association* 6(2), 1–4.
43. Ushama, T. (2021). *Islamophobia in India During the Covid-19 Crisis: A Surge of Stigmatization, Vilification and Murder*. Retrieved from: <https://journals.iium.edu.my/shajarah/index.php/shaj/article/view/1227/453>
44. Voloder, S. (2020, May 3). *Islamofobija u vrijeme pandemije Covid-19*. Aljazeera. Retrieved from <https://balkans.aljazeera.net teme/2020/5/3/islamofobija-u-vrijeme-pandemije-covid-19>

45. Vox-Osservatorio italiano sui diritti (2020). *La nuova Mappa dell'Intolleranza 5*. Retrieved from <http://www.voxdiritti.it/la-nuova-mappa-dellintolleranza-5/>
46. Zalta, A. (2016). *Islamophobia in Slovenia: National Report 2016*. Retrieved from: <http://www.islamophobiaeurope.com/wp-content/uploads/2017/03/SLOVENIA.pdf>
47. Zhang, Y. & Xu, F. (2020). *Ignorance, Orientalism and Sinophobia in Knowledge Production on COVID-19*. Retrieved from <https://onlinelibrary.wiley.com/doi/pdf/10.1111/tesg.12441>

Maja Pucelj is an assistant professor at the Faculty of Organisation Studies. She graduated from the Faculty of Public Administration and the Faculty of Management and finished her master's degree at the Faculty of Government and European Studies and the Faculty of European Law. She completed her first doctorate at Alma Mater Europaea - ISH in the field of humanities and is currently completing her second doctorate at the Faculty of Government and European Studies in the field of international studies with an emphasis on human rights. Her research interests include human rights, gender, integration of Muslims, hate speech and particularly the intersections between these areas. She has authored or co-authored numerous academic publications.

Povzetek:

Manifestacije islamofobije v času soočanja s COVIDOM-19

Ozadje in izvirnost: Ali se je raven islamofobije v času soočanja s COVIDOM-19 povečala in v kakšnih oblikah se je islamofobija manifestirala v omenjenem obdobju? Namen pričujočega članka je skozi sistematični pregled literature ugotoviti, kako se je islamofobija manifestirala v času soočanja s COVIDOM-19 in v kakšnih oblikah se je islamofobija v omenjenem obdobju manifestirala. Izvirnost raziskave se odraža v temeljitem sistematičnem pregledu razpoložljive literature s področja islamofobije v času soočanja s COVIDOM-19. Tema članka, ki je relativno nova in posledično premalo raziskana, se je osredotočila na preučevanje vzpona in pojavov islamofobije v času soočanja s COVIDOM-19, da bi identificirali pomembne družbene izzive za nastajajoče izzive.

Metoda: Opravljen je bil sistematičen pregled literature na temo islamofobije v času soočanja s COVIDOM-19 v naslednjih bazah podatkov: Scopus, ProQuest Dissertations & Theses Global, Web of Science, Google Scholar, Base (Open Access), Springer Nature, JSTOR, ScienceDirect, SAGE, Wiley Online Library in Emerald. Dodatne članke iz drugih virov smo odkrili s preučevanjem referenčnih seznamov literature, najdenih med iskanjem po bazi podatkov.

Rezultati: Na podlagi meril za vključitev in izključitev je bilo v sistematični pregled literature vključenih 19 člankov, objavljenih v angleškem jeziku v obdobju med januarjem 2020 in januarjem 2022. Ugotovili smo, da se je raven islamofobije v času soočanja s COVIDOM-19 povečala in da se je islamofobija v času popolnega zaprtja družbe premaknila na spletne medije, vendar je hkrati ostal prisoten tudi v fizični obliki.

Družba: Čeprav so posledice pričujoče raziskave za organizacije posredne, lahko poznavanje manifestacij islamofobije v času soočanja s COVID-19 delodajalcem omogoči razumevanje stiske muslimanov, zaposlenih v organizacijah, in jim omogoči, da sprejmejo posebne ukrepe za lajšanje psiholoških stisk zaposlenih muslimanov. Pomembno je, da si družba prizadeva za mirno sobivanje in medsebojno razumevanje v pluralistični, demokratični družbi ter si še naprej prizadeva zmanjševati islamofobijo (v kakršni koli obliki), sovražni govor in zločine iz sovraštva proti muslimanom ter obsoja vse oblike diskriminacije in preganjanje muslimanov.

Omejitve/nadaljnje raziskovanje: Kot omejitev naše študije moramo izpostaviti razmeroma majhno količino relevantne literature na preučevano tematiko, kar je posledica relativno kratkega obdobja preučevanja islamofobije v času soočanja s COVIDOM-19. Predlagamo, da se za

nadaljnje raziskave raziskovalci osredotočijo tudi na manifestacijo islamofobije v času soočanja s COVIDOM-19 v fizični obliki, saj so se različne raziskovalne študije, ki smo jih lahko našli in ovrednotili za ta sistematični pregled literature, osredotočale predvsem na posledice islamofobije, kot se je manifestirala na spletu.

Ključne besede: islamofobija, COVID-19, muslimani, družbeni mediji, fizični napadi, sistematični pregled, sovražni govor, zločini iz sovraštva.

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Perception Levels of Employees' Organizational Performance in a Healthcare Organization

Siniša Jolić*

Department of Dermatovenereology and Angiology, "Kikinda General Hospital", Đure
Jakšića 110, 23300, Kikinda, Republic of Serbia
drsinisajolic@gmail.com

Slobodan Mirosavljev

M.D.FACS International SOS-medical director
slobodan777@yahoo.com

Vesna Turkulov

Infectious Diseases Clinic; Clinica Center of Vojvodina; Hajduk Veljkova 1-9, 21000 Novi
Sad, Republic of Serbia
vesna.turkulov@mf.uns.ac.rs

Jovan Jolić

Student at the Faculty of Mechanical Engineering of University of Novi Sad and student of
Management Faculty of the University »Union-Nikola Tesla«, Cara Dušana 62-64, 11158
Belgrade, Republic of Serbia
jovan.jolic@gmail.com

Slavica Mitrović Veljković

Faculty of Technical Sciences, University of Novi Sad; Trg Dositeja Obradovića 6, 21000
Novi Sad, Republic of Serbia
mslavica@uns.ac.rs

Jelena Raut*

Faculty of Technical Sciences, University of Novi Sad; Trg Dositeja Obradovića 6, 21000
Novi Sad, Republic of Serbia
jelena.raut@yahoo.com

Abstract:

Background and Originality: The subject of the research is the definition and analysis of the process of organization in a health organization, as well as the perception of employees in terms of performance of the organization. The aim of the research is to determine the manner of organizing, i.e., the phase in the process of designing the organizational structure in the health organization, as

well as to determine the level of perception of organizational performance of employees in that organization.

Method: The subject research was conducted through a standardized questionnaire (Griffithsetall, 2006), which contains 8 questions related to the basic demographic data of employees and 30 questions related to the subject of the research.

Results: Proving research questions and hypotheses in the research leads to the conclusion that clearly defined roles and responsibilities, the existence of an appropriate pace of work, deep understanding of the wishes and needs of patients by employees and employee motivation to work affect the success of a health organization, that is, the manner of organizing affects its business success, while the work environment is not one of the factors that affect the success of a health organization.

Society: Considering the impact on society, through the defined measures proposed above, this research paper proposes a way to preserve the functioning of a health organization, meet the wishes and needs of patients and preserve one of the basic human needs, and that is the right to an adequate treatment.

Limitations / further research: The proposal for future research is reflected in increasing the sample of examinees and repeating research in health organizations across the country.

Keywords: health organization, organizational structure, organizational structure design, perception of organizational performance, manner of organizing.

1 Introduction

Organizing is a managing activity based on allocating jobs to certain groups of employees within a company. Williams (2011, p. 1348) says that therefore create an atmosphere of specialized groups and individuals responsible for certain kinds of jobs and in that way increase the efficacy of business which contributes to better decision making.

Griffiths (2006, p. 677) says that the goal of organizing is to make an adequate organizational structure which encompasses activities and relationships, and when it is formed it is necessary to manage human resources in the proper manner to do successful business in the long run.

Modern approach of organizing sees organizing as a collection of resources and abilities, which as its goal have the creation of key competencies. Jones et al.'s (2007, p. 142) understanding the way in which organizations perform their business activities is the first step in learning how to control and change organizations so that they can effectively create new resources.

As can be seen in the study Cox et al.'s (2003, p. 184), managers and employees who possess the knowledge about organizational design and changes can analyse the structure and culture of the organization in which they work, of diagnosing problems and of adapting, for the organization to reach its goals. The process of organizing differs in cases if the organization is just being founded, or if it already exists in the market, in which case only a reorganization is done. Managing function is a necessary function in every company today, and therefore it is becoming more and more important in healthcare institutions too.

As Ferguson (2003, p. 87) states, when considering and researching health management, it must be said that it developed relatively late compared to general management because it had

not succeeded completely in solving numerous dilemmas which were consequences of certain theoretical and conceptual discords. When it comes to healthcare management, or rather, healthcare system management, the management health institutions or health programs, projects, and health teams, next to general principles of management, it is also very important to consider all the specificities of working within a healthcare system. One definition cited by Dovijanić (2003, p. 26) that considers all important elements of a healthcare system states that healthcare management can refer to the sum of all measures undertaken to plan, organize, implement and evaluate many elements integrated into the healthcare system, where measures are needed in order for the healthcare policies to become strategies, strategies to become plans/actions, so the action needed for decision making concerning implementation of healthcare programs could be determined and thus enable the healthcare infrastructure to develop in such a way as to provide efficient and effective implementation of a healthcare program. A Cox (1993, p. 98; 2000, p. 37) states in his research, failures of work design and management are known to challenge both employee health and organizational behaviour and the healthiness and performance of the organization. Such failures are often referred to as “work and organisational factors”. In the occupational health literature and are the focus of much attention in relation to the assessment and reduction of work-related risk at both the individual and organizational levels.

Employee satisfaction is considered weighty when it comes to defining organizational success. Employee satisfaction is a central concern. Naseem et al. (2011, p. 52) argue that the need to increase employee satisfaction is critical because it is key to the business success of any organization. It is very important to observe the relationship between employee satisfaction, both in other sectors and in the health sector and examine the impact of employee satisfaction on organizational success.

The subject of this research paper is defining and analysing the organization process in a healthcare institution, as well as the review of employees' perception considering the organizational performance. The goal of the research is determining the manner of organizing, or rather the phase in the process of designing an organizational structure within a healthcare institution, as well as establishing the perception level of organizational performance of the institution's employees.

Based on the defined goal and subject of the research, one hypothesis has been established:

***H** – Organizational manner affects the success of a healthcare institution business.*

As healthcare management, or rather manner of organizing has a very specific and fixed responsibility for a good functioning of healthcare system and its parts, it can be concluded that the greatest responsibility for implementing the determined tasks on all levels of healthcare system falls on managers. That is in fact the main reason of defining the general hypothesis the way it was defined above.

2 Theoretical starting points

It can be claimed that healthcare management is highly developed nowadays. In the more developed countries, healthcare system is starting to be looked at as a healthcare industry, having in mind certain similarities with industry, such as building complexes, staff, and equipment concentration and so on. For observing the development of healthcare management, next to observing the development of general management (theories, principles, schools), it is needed to track all that affects the development of healthcare management in certain institutions, like the manner of organizing in a healthcare institution, work pace, the understanding of needs of patients, work environment and management support. For the observing of healthcare management to be as adequate as possible, it is suggested to begin with its definition, goals, and functions.

Mićović (2008, p. 58) defined healthcare management as a process which includes planning, organizing, directing, controlling, and coordinating of resources, as well as the development of healthcare system based on the participation of the community and on health needs of people, to improve and better patients' health.

In Brouwer et al.'s (2002, p. 182) context, healthcare management is basically a system of functions and tasks, implemented by individuals, on various levels of organization, with the goal of better health of the patients. In recent years, there have been two important shifts in perspective. First, research in occupational epidemiology has shifted its focus from the influence of ill health on absenteeism and returns to work toward its impact on performance, with a corresponding focus on the assessment of work-related health. Second, according to the author Black (2008, p. 47) indices of morbidity and mortality have shown that in general work is good for your health and well-being. For this reason, there is a great emphasis on adequate management and organization within health institutions.

It is a fact that employee satisfaction is the deepest care in a sector such as healthcare. It is a multifactorial construct. Employee satisfaction includes basic factors, learning factors and performance factors. According to the author Matzler (2007, p. 1097), the main factors are minimum requirements that cause dissatisfaction thrill factors increase satisfaction only when performance is high. Employee satisfaction plays a significant role in improvement operational performance organization and quality of the services they provide. There is no doubt that employee satisfaction is key to achieving quality and profitability, especially in the service industry. Yee et al. (2010, p. 114) say that employee loyalty is an important factor for improvement quality of services that are interconnected with the client customer satisfaction and loyalty and gives progress to make the company profitable in the industry. An imperative relationship exists between the employee and organization. This employee organization relationship plays important role in the success of any organization. Has the need for development in it. Managers are believed to develop role relationship in which actions and decisions should be promoted by interest organizations. Employee involvement and contribution to the organization is the result of interest. Coyle-Shapiro et al. (2007, p. 173)

says that the quality of employee relationship organization demands fulfilment of needs, quality of interaction, comfort, and identification. Employee satisfaction is job satisfaction. Job satisfaction is an important factor in work organization. Both of you they are significantly related. Therefore, Dawal et al.'s (2009, p. 3) claim that it is necessary to maintain job satisfaction so that employees can be motivated. In the study of job satisfaction, job rotation, work methods, problem solving, and goal setting are important factors to consider that job satisfaction is also influences by employees age, marital status, and work experience. According to Shi et al. (2022, p. 35), differentiation of individual employment characteristics can affect how employees feel about their job environment and the relationship between employee satisfaction and financial performance may not be easy noticeable because the customer conforms to it satisfaction.

As previously stated, the goal of the research is determining the manner of organizing, or rather the phase in the process of designing the organizational structure in a healthcare institution, as well as determining the level of perception of organizational performance of the institution's employees. Modern approach to organizing considers organizing to be the sum of resources and abilities, which as a goal have the creation of key competencies. Like Peteraf (1993, p. 57) says, in today's theoretical approaches an idea was created of a unique group of resources and abilities and their organizational transformation, primarily through the existing organizational design or redesign, and in that way the making of a competitive difference or a more efficient organization.

The most important organizational principles according to Fayol, Godwin et al. (2017, p. 82) which are still applied today, are:

- unity of command – it is necessary for every employee to receive orders from only one manager,
- unity of goals – all employees should work toward achieving common goals,
- command range – talks about the number of employees governed by one boss,
- hierarchy – there must be an order which regulates authorities concerning management,
- centralization – there is a designated manager with all the competencies on every step of the hierarchy ladder,
- authority – the main characteristic of every manager should be authority.

The detailed distribution of work defines work tasks beginning with every single worker, then, based on the similarity of jobs and common work tasks, they are organized into work groups, followed by organizational units, the range of duties and authorities is defined, a hierarchy is constituted and in that way a picture of the organizational structure of an organization is created. Human resources are the most important element of every organization, as well as their attitude towards the organization, work means and their interpersonal relationships. More and more importance is given to motivation and satisfaction of employees, as well as to the effort of identifying individual goals with the goals of the

organization, by uniting people, having them work together and trying to actually achieve business success.

The function of organizing is important for every company, and same goes for the healthcare system. The function of organizing does not end with defining the organizational structure, it is necessary throughout the life cycle of a company, primarily because of the dynamics of modern business. It is very complex and demands great responsibility of those who participate in its creation, more precisely the management of the organization, or rather the management of the healthcare system.

According to the Mašić, et al. (2017, p. 65), the organizational structure represents the distribution of jobs within an organization. Managerial decisions related to the structural elements which change the organizational structure are called the designing of an organizational structure.

Organizational structure is the means of achieving company's goals. It adjusts all the potential, or rather material and human resources, and points them towards a predetermined goal. The managers decide about organization design. The decision refers to the organizational structure which agrees with organization strategy and the environment in which the members of the organization will carry out the strategy. In this way, according to the Chan (2008, p. 49) organization design puts the managers in the position in which they have to simultaneously follow what happens within the organization, and what happens outside of it.

For the organization structuring to be completed, it is necessary to know which jobs should be done. The task of the organization represents the starting point for analysis. Analysis begins with it and ends with its elementary parts. According to Olivares et al. (2022, p. 73), it develops in stages, beginning with single components and their dissection, to determining lower and more numerous single elements.

According to the Mitrović and Melović (2013, p. 178), withing the organizational structure design, it is necessary to take care of the following activities:

- Is the given structure defined so that it is directed towards the realization of the goals of the organization?
- Are the resources necessary for the realization of goals used efficiently within a given structure?
- Is the given structure flexible enough to adjust to new changes in the market?
- Does the structure enable the improving of employees' knowledge?
- Does the structure enable adequate informing and communicating?

Managers make decisions about organization design. The decision refers to the organizational structure that fits the strategy and environment in which the members of the organization will realize the strategy. Hence design organization puts managers in the position in which they

have to simultaneously follow what happens within the organization, and what happens outside of it.

3 Method

Cox et al. (2003, p. 195), say that failures of work design and management are known to challenge both employee health and employee's health and organisational behaviour and the healthiness and performance of the organisation. For subject research, a standardized questionnaire was used by Griffithsetall (2006, p. 677). This instrument is referred to as the Work Organisation Assessment Questionnaire (WOAQ). The European Commission and the governments of most of the Member States of the European Union, have enacted programs to ensure that enterprises address the challenge posed by failures of work design and management and that they have the knowledge and tools to do so (ETUC). The approach adopted by the European Commission, and in Great Britain by the Health and Safety Executive (HSE), is based on an adaption of the traditional risk management paradigm for health and safety (Griffithsetall, 2006, p. 883). The SMS approach is based on the development of a standard questionnaire tool for the assessment of problems at work by employees in terms of perceived failures of work design and management which used by Griffithsetall (2006). It can be argued that the tool is most useful as a means of identifying »hot spots« in organizations and informing subsequent discussions between managers and other employees over the exact nature of those problems and reasonable ways of dealing with them.

The questionnaire that was used in the subject research was translated into the Serbian language and adapted to it, in accordance with the prevailing cultural norms.

Karimi et al. (2015, p. 323) state that the most common problems detected in the literature of full risk assessment were the facts that questionnaires are either very long and detailed or unable to detect the hazardous problem in a work setting. In response to the evidenced need for a short, valid stress risk assessment, WOAQ (Validity and Model-Based Reliability of the Work Organisation Assessment Questionnaire Among Nurses) was developed, which can be found in Griffiths et al.'s research (2006, p. 679). The methodology developed in WOAQ was based on the identification and collection of employee opinions on their work and health.

The research was conducted in the health institution of secondary health protection in Vojvodina. The sample consists of 120 examinees. Questionnaires were distributed among the institution's employees, and to get the most objective results, the research also included employees from various sectors, that is from work units and different levels of organizational structure, from managers to executors. The questions were answered by health workers of all profiles and competencies and various medical specialties – specialists, subspecialists, resident doctors, general practitioners, nurses with bachelor's degree, trained nurses, as well as those employed in the managing unit, technical staff of the hospital and all else who perform jobs outside of field of medicine. The choice of employees who answered the questionnaire

was not formed according to a certain criterion; the research was done based on a random sample.

The questionnaire has eight questions which relate to the basic demographic information about the employee and thirty questions which relate to the research subject. Next to every item there is a rating scale (Likert scale), with points 1-5, which are supposed to be circled, in accordance with the degree to which the examinee agrees with the stated claims. The scale is as follows: 1 - I do not agree at all, 2 - I mostly do not agree, 3 - I am undecided, I neither agree nor disagree, 4 - I agree, 5 - I completely agree.

After the analysis of main characteristics of examinees, demographic, as well as educational and work status related, the examinees were supposed to answer 30 questions, created based on the Griffithsetall (2006, p. 679) questionnaire. Hereafter, the derived results will be presented.

4 Results

Out of 120 examinees in the research, 15 % were male and 85 % were female. When it comes to the age of the examinees, 20 % of them belong to the group of 21-30 years old, 27 % belongs to the group of those who are 31-40 years old, 23 % of them belong to the group of 41–50-year-olds, 26 % belong to the group of 51–60-year-olds, and 4 % belong to the group of 61–70-year-olds. From those who participated in the research, 19 % of them have up to 5 years of service, 13 % have 6-10 years of service, 15 % have 11-15 years of service, 12 % have 16-20 years of service, 11 % have 21-25 years of service, 8 % have 25-30 years of service, 14 % have 31-35 years of service, and 8 % have 36-40 years of service. When analysing the examinees' education, the following result emerges: 67 % of them have only high school education, 11 % have an associate degree, 12 % have a university degree, and 10 % of examinees have finished their specialization studies, subspecialisation studies, have a master's degree or a PhD. Out of those who participated in the research, 19 % have had an education in the field of technical sciences, 68 % of them have an education in the field of natural sciences, and 13 % have an education in the social sciences. When analysing the time frame which shows how long the examinees have worked in the current organization, 6 % of them have worked there less than 6 months, 3 % of them have worked 6 months to a year, 8 % have worked 1-2 years, 13 % of them have worked 3-5 years, and 70 % of them have worked there longer than 5 years. When it comes to the status of the examinees in the organization, 25 % of them have been promoted within the organization and 75 % have remained at the same position in the organization. Looking at the managerial-organizational structure of the organization, according to the examinee sample, 4 % of examinees is on a higher level in the managerial-organizational structure (administrative management, chief physician, deputy chief physician, adviser, assistant), 16 % of them are at the middle level (technical manager, sector manager, office manager, head nurse), 6 % of them is on the lower level (department chiefs, head nurses od departments) and 74 % of examinees are not managers.

In continuation, results derived from the examinees' answers will be presented. For better visibility, the examinees' answers will be shown in Table 1, with stated claims and the degree of the examinees' agreement with the claim.

Table 1. Examinees' answers analysis

Claim	1 – I do not agree with the stated claim at all	2 – I mostly do not agree with the stated claim	3 – I am undecided, I neither agree nor disagree with the stated claim	4 – I mostly agree with the stated claim	5 – I completely agree with the stated claim
1. In the organization there are clearly defined rooms for breaks.	29 %	12 %	19 %	19 %	21 %
2. The work environment is motivating for work.	25 %	21 %	21 %	33 %	10 %
3. In the organization there are clearly defined roles and responsibilities.	8 %	7 %	32 %	31 %	22 %
4. During work hours there is exposure to physical danger.	18 %	22 %	17 %	26 %	28 %
5. In the organization there is support by the management.	15 %	18 %	30 %	28 %	8 %
6. The work pace is appropriate in the organization.	1 %	12 %	28 %	32 %	17 %
7. There is feedback as far as work performance goes.	8 %	16 %	38 %	26 %	12 %
8. The amount of work I have is acceptable.	18 %	9 %	23 %	31 %	19 %
9. In the organization there is a system of safety at work.	11 %	16 %	27 %	20 %	26 %
10. I get on well with my colleagues.	2 %	0 %	8 %	33 %	56 %
11. The employees appreciate the participation of the manager in monitoring the work done by the workers.	7 %	10 %	44 %	26 %	1 %
12. There are consultations concerning the changes at work.	8 %	12 %	31 %	32 %	17 %
13. I am prepared enough for my current job.	1 %	5 %	11 %	35 %	48 %
14. There is variety in the tasks I do.	5 %	3 %	10 %	35 %	47 %
15. There is influence of family/social life on the job.	16 %	17 %	27 %	24 %	16 %
16. The attitudes of higher management are felt on the job.	6 %	12 %	33 %	32 %	17 %
17. In the organization there are clear lines of reporting connected to work.	5 %	11 %	32 %	39 %	13 %
18. Equipment from IT sector that I use is adequate.	10 %	15 %	35 %	29 %	11 %
19. There is influence of work on family/social life.	10 %	12 %	27 %	28 %	23 %
20. Workspace is adequate.	12 %	12 %	27 %	33 %	16 %
21. There is chance of advancement.	8 %	9 %	30 %	33 %	20 %
22.					
23. There is good communication with the manager.	5 %	11 %	37 %	25 %	22 %
24. There are opportunities for learning new skills in the organization.	9 %	13 %	28 %	30 %	20 %

25. There is flexibility of work hours.	18 %	8 %	24 %	32 %	18 %
26. There are possibilities for using one's own skills on the job.	5 %	6 %	27 %	37 %	25 %
27. The organization recognizes my contribution to the work.	11 %	7 %	34 %	30 %	18 %
28. There are clearly defined goals, values, and procedures of the organization.	5 %	7 %	29 %	28 %	31 %
29. When the job needs to be done, teamwork is more important than hierarchy.	3 %	7 %	15 %	21 %	54 %
30. Chiefs and managers do what they preach.	9 %	9 %	42 %	27 %	13 %
31. All employees have a deep understanding for needs and wishes of the patients.	3 %	4 %	31 %	28 %	24 %

In Table 1, the examinees' answers to all 30 stated claims can be seen, delivered in percentages. As previously stated, the choice of examinees was not formed according to a certain criterion, rather the research was done based on the principle of random source and encompassed employees from different sectors, and all skills profiles.

The stated hypothesis is:

H – Organizational manner affects the success of a healthcare institution business.

“The manner of organizing affect the success of business of a healthcare institution” is connected to almost all the answers in this questionnaire, but several specific claims can be filtered out or chosen which are more or less connected to this hypothesis, so the analysis will take into account research answers from the claims 7, 11, 12, 16, 17, 28 and 29. Concerning claim 7, most examinees (38 %) answered that they were not sure that there is feedback concerning work performance. Concerning claim 11, most examinees (44 %) answered that they were not sure that employees appreciate the participation of the manager in the monitoring of jobs done by workers. Concerning claim 12, most examinees (32 %) answered that they mostly agreed with the claim that there are consultations connected to the changes at work. Concerning claim 16, most examinees (33 %) answered that they were not sure about the claim the attitudes of higher management are felt in work. Concerning claim 17, most examinees (39 %) answered that they mostly agreed with the claim that in the organization there are clear lines of reporting connected to the work. Concerning claim 28, most examinees (54 %) answered that they completely agreed with the claim that when the job needs to be done, teamwork is more important than hierarchy. Concerning claim 29, most examinees (42 %) answered that they were not sure that chiefs and managers do what they preach.

In the organization there are clearly defined roles and responsibilities, the biggest number of examinees answered that they were not sure, that is 38 % of examinees, while 31 % of examinees mostly agreed with the claim, and 22 % of them completely agreed with it. In totality, 53 % of examinees agrees with the stated claim.

Work pace is adequate in the organization, 28 % examinees answered that they were not sure, 32 % of examinees answered that they mostly agreed, and 17 % of examinees answered that they agreed completely with the stated claim. Therefore, it can be concluded that most examinees agree with the given claim, in totality of 49 % considering the answers of the examinees that mostly agree or agree completely with the given claim.

When it comes to the *All employees have a deep understanding for needs and wishes of the patients*, the answers given show that 7 % of examinees did not agree with the claim, 31 % of examinees were not sure, while the greatest number of examinees with the percentage of 38 % mostly agreed with the claim, and 24 % of examinees completely agreed with the claim. The conclusion is that 62 % of examinees gave a positive answer to the given claim.

Concerning the *The work environment is motivating workwise*, 33 % of examinees mostly agreed, 21 % did not agree at all, while 25 % of examinees mostly did not agree, which represents the totality of 43 % of examinees who answered negatively about the given claim.

Considering the *In the organization there is management support*, most examinees, that is 30 % said that they were not sure, 33 % of examinees answered negatively, while 36 % of examinees answered positively in relation to the stated claim.

When we analyse the most specific, or rather the most representative chosen questions connected to the stated hypothesis, with the greatest percentage of examinees' answers, 6 claims stand out, and these are claims 3, 5, 7, 11, 16 and 29, where the examinees gave answers that they were not sure, and which were related to work performance and manager role in the work.

When it comes to the answer where the examinees mostly agreed with the stated claim, the greatest number of examinees answered the claims 2, 6, 12, 17 and 30, which have to do with work environment, attitude towards patients, work pace, consultations and reporting concerning work.

Finally, the answer where the examinees completely agree, concerning claim 28, the greatest number of examinees answered positively and certified that teamwork is more important than hierarchy.

The claims in which the greatest percentage of examinees answered that they agreed completely are claims 10, 13, 14 and 28, which have to do with interpersonal relations, or rather attitudes towards colleagues, teamwork, variety of tasks, and expertise in the work they do.

The biggest percentage of examinees who answered that they did not agree with the claim at all refers to claims 1, 8 and 24, which refer to rooms for break, acceptable amount of work and work hours flexibility.

Based on the answers, it can be concluded that in the organization there is no such organizational structure or organizational culture defined which advocates the existence of feedback and hence a two-way communication, which is very important for efficient work of employees and influences a great deal the success of organization's business. The existence of feedback affects work considerably, of those who are subordinate and of those who are superordinate as well. While subordinate employees can get the information about how they can improve their work performance, and therefore the performance of the whole organization, they can obtain information about the optimal way of doing work because it is precisely the employees working on jobs that get instructions that can speak best about the manner of doing their tasks. Except for the fact that most examinees stated that they mostly agreed with the claim that there are lines of reporting concerning work, the examinees were not sure that the attitudes of higher management are felt in work, which caused that the examinees were also not sure that chiefs and managers do as they preach, which reflects directly in the motivation of the employees. The existence of lines of reporting is also connected to the (non)existence of feedback in the organization. It is very good for the success of organization's business the fact that the examinees mostly agreed with the claim that there are clear lines of reporting concerning work. It is bad if connected with the examinees' answers that they are not sure about existence of feedback about work performance, and if there are no lines of reporting that go from lower to higher levels of hierarchy but only from higher to lower levels of hierarchy. It can be concluded that although the examinees were not sure that attitudes of the management are felt in work and that chiefs and managers perform what they preach, they do however think that teamwork is more important than hierarchy, which leads to the conclusion that there is an organizational culture that creates and cultivates relations between employees, although it might not be achieved through direct influence of higher management.

It can be concluded that almost half of the examinees think that there are clearly defined roles and responsibilities in the organization, which directly affects the success of organization's business. The existence of clearly defined roles and responsibilities creates such an organizational climate in which every employee has their clearly defined work tasks, which allows for the responsibility for the unfinished, as well as the finished task, not to be placed on other employees, but on the employee who was given the tasks, which further affects the motivation of the employees. If the employee doesn't do/does their task, both sanctions and rewards are given only to them for the (un)finished work. Almost half of the examinees mostly or completely agree with the claim that work pace is adequate, which confirms that there are clearly defined roles and responsibilities in the organization and that the employees manage to finish their tasks within the timeframes they were given. That is also an important factor that affects the success of organizing, and of organization's business, and it is reflected in the greater motivation of the employees. There is no "overflow" of responsibility for (un)finished tasks from one employee to another, and there are no rewards for (un)finished tasks. A large part of examinees (62 %) stated that they have deep understanding for needs and wishes of the patients, which is confirmed by the conclusions of the previous hypotheses

which say that the employees are motivated for performing their tasks. As it can be concluded from the answers that the employees are indeed motivated for doing work, a question arises about which factors affect the motivations of employees and the answer is that one of those factors is not work environment.

4 Conclusion

The most important and basic task, in the very centre of organizing a healthcare institution is providing service, or rather healing patients. The healthcare system alone according to its organizational structure, its professional, legal, and financial position, requires proper reforms and changes, to preserve its functioning in meeting the needs of the patients and preserving the security of one of the basic human needs for adequate medical help.

In Karimi (2015, p. 323), Australian employees using the conventional second order model and a bifactor model of WOAQ. In their research, they used two scales. The scale is relatively short, with 28 items. The WOAQ second-order model included a general measure of WOAQ at a higher order and five subfactors at the first order, each representing different dimensions of work organization risk assessment. To improve work, or rather, to improve efficiency and effectiveness in a healthcare organization, it is necessary to choose and apply scientifically and practically proven methods. Due to everything stated above, it is believed that today it is of vital importance that such a complex system should be governed, organized, directed and lead by a manager, with their team, for the organization to be more effective and efficient, which is a continuous and dynamic process that constantly grows, develops, and improves itself. The five subfactors are »quality of relationships with management«, »reward and recognition«, »workload issues«, »quality of relationships with colleagues« and »quality of physical environment«. The most important difference was detected when the conventional second-order model failed to recognize the low and differentially directed loading of the “quality of relationship with management”. In their research, the subfactor “reward and recognition” was identified as implausible by both models. These results have great practical implications. It shows that in the context of community nursing, although the general measure of WOAQ is a valid and reliable measure of the organizational risk assessment, the most important plausible subscales are »quality of physical environment«, “quality of relationship with the colleagues” and “the workload issues”. Based on the findings, the two subscales of “the quality of relationship with management” and “reward and recognition” are not that critical in such contexts. However, close evaluation of the reported work setting indicates that these findings should not be a surprise. These findings can perhaps be explained by the nature of the community nursing work environment because, although the nurses belong to a larger organization, they work in different, small branches with their own immediate managers/supervisors. Also, Karimi (2015, p. 325) said that the »reward and recognition« factor is strongly tied to the management relationship, and only items representing a variety of tasks, an opportunity for learning, and using the new skills appeared as important indicators of this subscale. Ultimately, this would assist management in identifying problem areas, which

may cause harm to their employees and the organization and allow proper action to be accomplished to prevent future occurrences of similar events.

One more very interesting study is by Karimi (2020, p. 224). The current study has taken a novel approach to assess the validity of a psychosocial hazard assessment tool (WOAQ) for use in healthcare organizations and specifically for community nurses and paramedics. The results support the validity of WOAQ for use in community nurses and paramedics and that the tool can be used to support risk management approaches to identify and control relevant workplace hazards. They said that the higher score for the item »relationship with colleagues« suggests that for paramedics these relationships may be problematic and reflect the close nature of their work with another individual during their working shifts. According et al.'s (2014, p. 1363), it also supports the unique nature of occupational groups and the need for identification of local issues to inform the development of accurately targeted workplace risk management strategies. Community nurses reported more problems with workload compared with paramedics. The items captured for the workload issue construct consisted of pace of work, workload, and the impact of work on family and family on work. According to Hegg-Deloye et al. (2014, p. 244), the differences in demographic characteristics of both organizations may provide some insights into this finding. In the current study, a greater proportion of paramedics reported working part time in comparison with the community nurses. Thus, the ability for the paramedics to manage their home life may negate some of the other issues faced by workload. Schluter et al.'s (2011, p. 31), the sex breakdown of the sample may provide additional insights, as the predominantly female nurse respondents, who worked full time, may be juggling a range of care responsibilities in combination with their work which is in line with previous findings on this population.

In accordance with the given results, it can be concluded that the organization's employees are motivated for performing their tasks, which is confirmed by the examinees' answers that teamwork is more important than hierarchy, as well as the answers that they have good relations with their colleagues, that their tasks are varied, and that they are prepared for performing their tasks based on their skills. The organization should work on improving the relationships between different hierarchical levels, so the employees can feel that their role in the organization is really appreciated by higher management and organizational culture should be cultivated because it creates a quality two-way communication in an organization, which increases the employees' motivation a great deal. As motivation is crucial for the success of every organization because human capital is the core of every organization, the organization needs to dedicate some work to workspace, rooms for break, as well as to considering more flexible work hours. Those are precisely the dimensions that can, according to the examinees' answers, increase employees' motivation and hence their results, and finally improve the overall performance of the organization.

When it comes to limits of the research, it has to be noted that 120 examinees participated in the research and one of the suggestions for future research studies is for the sample size to be

larger and for the research itself to be repeated in other healthcare institutions in the Republic of Serbia.

Based on everything stated above, it can be concluded that the success of every organization lies in the clearly defined functions and responsibilities, as well as in establishing precise goals. For the goals to be realised, it is necessary for the company to define the strategy through the process of planning, which will be implemented through work organizing, appointing responsibilities, distribution of work, coordination of activities and controlling the finished tasks. Also, an adequate reform can improve the existing efficiency and effectiveness of the healthcare system (reforms inside the healthcare system and within healthcare institutions of primary, secondary, and tertiary level), but that requires a new approach, especially in the manner of organizing and management within the whole healthcare system and the need for applying methods and models of modern management in health.

References

1. Black, C. (2008). *Working for a Healthier Tomorrow*, London: TSO.
2. Brouwer, W.B., van Exel, N.J., Koopmanschap, M.A., Rutten, F.F. (2002). Productivity costs before and after absence from work: as important as common? *Health Policy*, 61, 173–187. [https://doi.org/10.1016/S0168-8510\(01\)00233-0](https://doi.org/10.1016/S0168-8510(01)00233-0)
3. Chan, Y. E. (2008). Why haven't we mastered alignment? The importance of the informal organization structure. *MIS Quarterly executive*, 1(2).
4. Coyle-Shapiro, J. A., Shore, L. M. (2007). The employee-organization relationship: Where do we go from here? *Human resource management review*, 17(2), 166-179. <https://doi.org/10.1016/j.hrmr.2007.03.008>
5. Cox, T., Griffiths, A., & Randall, R. (2003). *A risk management approach to the prevention of work stress. The handbook of work and health psychology*, 2nd edition. Online ISBN: 9780470013403, DIO: 10.1002/0470013400
6. Cox, T. *Stress research and stress management: putting theory to work*. Sudbury: HSE Books, 1993.
7. Cox, T., Griffiths, A., Rial-González E. *Research on work-related stress*. Luxembourg: Office for Official Publications of the European Communities, 2000.
8. Dawal, S. Z., Taha, Z., Ismail, Z. (2009). Effect of job organization on job satisfaction among shop floor employees in automotive industries in Malaysia. *International Journal of Industrial Ergonomics*, 39(1), 1-6. <https://doi.org/10.1016/j.ergon.2008.06.005>
9. Dovijanić, P. (2003). *Savremena organizacija zdravstvene službe i ustanova*. Obeležja.
10. Ferguson, E., & Cox, T. (1993). Exploratory factor analysis: A users' guide. *International journal of selection and assessment*, 1(2), 84-94. <https://doi.org/10.1111/j.1468-2389.1993.tb00092.x>
11. ETUC, UNICE, UEAPME, CEEP. *Work-related stress: framework agreement on work-related stress*, 8 October 2004. Available at <http://europa.eu.int/>
12. Godwin, A., Handsome, O. E., Ayomide, W. A., Enobong, A. E., & Johnson, F. O. (2017). Application of the Henri Fayol principles of management in startup organizations. *IOSR Journal of Business and Management*, 19(10), 78-85.

13. Griffiths, A., Cox, T., Karanika, M., Khan, S., & Tomás, J. M. (2006). Work design and management in the manufacturing sector: development and validation of the Work Organisation Assessment Questionnaire. *Occupational and Environmental Medicine*, 63(10), 669-675. <http://dx.doi.org/10.1136/oem.2005.023671>
14. Griffiths, D., Sigona, N., & Zetter, R. (2006). Integrative paradigms, marginal reality: refugee community organisations and dispersal in Britain. *Journal of ethnic and migration studies*, 32(5), 881-898. <https://doi.org/10.1080/13691830600704529>
15. Hegg-Deloye, S., Brassard, P., Jauvin, N., Prairie, J., Larouche, D., Poirier, P., Tremblay, A., Corbeil, P. (2014). Current state of knowledge of posttraumatic stress, sleeping problems, obesity and cardiovascular disease in paramedics. *Emergency Medicine Journal*, 31(3), 242–7. <http://dx.doi.org/10.1136/emmermed-2012-201672>
16. Jones, T. M., Felps, W., & Bigley, G. A. (2007). Ethical theory and stakeholder-related decisions: The role of stakeholder culture. *Academy of management review*, 32(1), 137-155. <https://doi.org/10.5465/amr.2007.23463924>
17. Karimi, L., Oakman, J. (2020). The Work Organisation Assessment Questionnaire: validation for use with community nurses and paramedics. *JBI Evidence Implementation*, 18(2), 222-230. doi: 10.1097/XEB.0000000000000222
18. Karimi, L., Meyer, D. (2015). Validity and model-based reliability of the Work Organisation Assessment Questionnaire among nurses. *Nursing Outlook*, 63(3), 318-330. <https://doi.org/10.1016/j.outlook.2014.09.003>
19. Mašić, B., Nešić, S., Nikolić, D., & Dželetović, M. (2017). Evolution of knowledge management. *Industrija*, 45(2).
20. Matzler, K., Renzl, B. (2007). Assessing asymmetric effects in the formation of employee satisfaction. *Tourism Management*, 28(4), 1093-1103. <https://doi.org/10.1016/j.tourman.2006.07.009>
21. Mićović, P. (2009). Zdravstveni menadžment. *Zdravstvena zaštita*, 38(5), 73-78.
22. Mitrović, S., & Melović, B. (2013). Principi savremenog menadžmenta. *Novi Sad: Fakultet tehničkih nauka*.
23. Naseem, A., Sheikh, S. E., Malik, K. P. (2011). Impact of employee satisfaction on success of organization: Relation between customer experience and employee satisfaction. *International journal of multidisciplinary sciences and engineering* 2(5), 41-46.
24. Oakman, J., Macdonald, W., Wells, Y. (2014). Developing a comprehensive approach to risk management of musculoskeletal disorders in nonnursing healthcare sector employees. *Applied Ergonomics* 45(6), 1634–1640. <https://doi.org/10.1016/j.apergo.2014.05.016>
25. Olivares Gil, A., Arnaiz Rodríguez, A., Ramírez Sanz, J. M., Garrido Labrador, J. L., Ahedo García, V., García Osorio, C., ... & Galán Ordax, J. M. (2022). Mapping the scientific structure of organization and management of enterprises using complex networks. *International Journal of Production Management and Engineering*, 10(1), 65-76. doi: 10.4995/ijpme.2022.16666
26. Peteraf, M. A. (1993). The cornerstones of competitive advantage: a resource-based view. *Strategic management journal*, 14(3), 179-191. <https://doi.org/10.1002/smj.4250140303>
27. Shi, O. H., Gursoy, D., Chi, C. G. (2022). Tourists' attitudes towards the use of artificially intelligent (AI) devices in tourism service delivery: moderating role of service value seeking. *Journal of Travel Research* 61(1), 170-185. <https://doi.org/10.1177/0047287520971054>
28. Schluter, P, Turner, C., Huntington, A., Bain, C., McClure, R. (2011) Work/life balance and health: the nurses and midwives e-cohort study. *International Nursing Review* 58(1), 28–36. <https://doi.org/10.1111/j.1466-7657.2010.00849.x>

29. Williams, B. K. (2011). Adaptive management of natural resources—framework and issues. *Journal of environmental management*, 92(5), 1346-1353.
<https://doi.org/10.1016/j.jenvman.2010.10.041>
30. Yee, R. W., Yeung, A. C., Cheng, T. E. (2010). An empirical study of employee loyalty, service quality and firm performance in the service industry. *International Journal of Production Economics*, 124 (1), 109-120. <https://doi.org/10.1016/j.ijpe.2009.10.015>

Siniša Jolić was born in Šibenik, Croatia. Specialist practice in Dermatology/Venereology and Angiology, Palliative care physician and Specialist in Engineering Management. He works as a Chief physician of the Department of Dermatovenereology at the Kikinda General Hospital. Member of the Medical Chamber of Serbia, with a valid license for independent work and Member of the Croatian Medical Chamber with valid PERMIT (license) for independent work. Member of the Presidency of the Association of Doctors of Vojvodina-Serbian Medical Association for a four-year term as of 2020. Author and co-author of several published works in domestic and foreign journals in the field of medicine he practices.

Slobodan Mirosavljev is general and trauma surgeon. Medical manager. After many years of national and international work as trauma surgeon Slobodan found new passion in becoming a lecturer about surgical trauma approach as well as passionate organizer of numerous surgical ERTC courses. Last 5 years continued his professional work as a senior ICRC surgeon in Geneva and later as a surgeon and medical manager in international SOS and ICARUS.

Vesna Turkulov was born in Novi Sad. She is a full professor at the University of Novi Sad, Faculty of Medicine. Her narrower area of interest in infections of the central nervous system and HIV infection. She was the head of the department, then the head of the department and from 2012-2021. Years she was the manager of the Clinic for Infectious Diseases of the Clinical Center Vojvodina in Novi Sad. From 2015-2016., she was an assistant director Clinical center of Vojvodina for health activity. Winner of a large number of recognitions, plaques, awards for meritorious work. She is the author of the one monograph, and several textbooks and practicums and of over 250 scientific research papers published in national and international journals and conferences. Also, she participated in a number of national and international projects as a member and coordinator. Speaks English.

Jovan Jolić was born in Kikinda, Serbia. Graduated in 2016 from “Dušan Vasiljev” gymnasium in Kikinda, majoring in informatics. Enrolled in the Faculty of the University “UNION Nikola Tesla – Faculty of Management” in Sremski Karlovci in 2018, for the bachelor’s degree in engineering management. Graduated in 2022.

Slavica Mitrović Veljković was born in Pljevlja. She is a full professor at the University of Novi Sad, Faculty of Technical Sciences, Department of Industrial Engineering and Management and teaches the following courses: Principles of engineering management, Managerial decision making, Decision making and Change Management, Entrepreneurship and Managerial skills. She is the author of the book Principles of modern management and of over 100 scientific research papers published in national and international journals and conferences. Also, she participated in a number of national and international projects. Speaks English and Italian.

Jelena Raut was born in Novi Sad. She completed her undergraduate, master’s and doctoral academic studies at the Faculty of Technical Sciences at the University of Novi Sad, Department of Industrial Engineering and Management. She is the author of numerous scientific research papers, with a narrower sphere of interest in entrepreneurial ecosystems and digital entrepreneurial systems.

Povzetek:

Stopnje dojetanja organizacijske uspešnosti zaposlenih v zdravstveni organizaciji

Raziskovalno vprašanje (RQ): Predmet raziskave je opredelitev in analiza procesa organizacije v zdravstveni organizaciji ter percepcija zaposlenih glede uspešnosti organizacije.

Namen: Cilj raziskave je ugotoviti način organiziranja, to je fazo v procesu oblikovanja organizacijske strukture v zdravstveni organizaciji, ter ugotoviti stopnjo zaznavanja organizacijske uspešnosti zaposlenih v tej organizaciji.

Metoda: Raziskava je bila izvedena s pomočjo standardiziranega vprašalnika (Griffithsetall, 2006), ki vsebuje 8 vprašanj, povezanih z osnovnimi demografskimi podatki zaposlenih in 30 vprašanj, povezanih s predmetom raziskave.

Rezultati: Dokazovanje raziskovalnih vprašanj in hipotez v raziskavi vodi do ugotovitve, da jasno opredeljene vloge in odgovornosti, obstoj ustreznega tempa dela, poglobljeno razumevanje želja in potreb pacientov s strani zaposlenih ter motivacija zaposlenih za delo vplivajo na uspešnost dela. Zdravstvena organizacija, torej način organiziranosti, pa vpliva na njeno poslovno uspešnost, medtem ko delovno okolje ni dejavnik, ki vplival na uspešnost zdravstvene organizacije.

Organizacija: Zdravstveni sistem po svoji organizacijski strukturi, strokovnem, pravnem in finančnem položaju potrebuje ustrezne reforme in spremembe, da bi ohranil svoje delovanje pri zadovoljevanju potreb pacientov in ohranitvi ene od osnovnih človekovih potreb, po pravici do ustreznega zdravljenja. Za izboljšanje dela v zdravstveni organizaciji se je treba lotiti in uporabljati znanstveno dokazane in v praksi preverjene metode. Nujno je, da kompleksen sistem, kot je zdravstvena organizacija, upravlja, organizira, usmerja in vodi vodja s svojo ekipo, da bi bila organizacija bolj učinkovita in uspešna. Gre za kontinuiran proces, ki je dinamičen in nenehno napreduje, se razvija in izboljšuje.

Družba: Glede na vpliv na družbo, skozi zgoraj opredeljene ukrepe, ta raziskava predlaga način, kako ohraniti delovanje zdravstvene organizacije, zadovoljiti želje in potrebe pacientov ter ohraniti eno od osnovnih človekovih potreb, to je pravico do ustreznega zdravljenja.

Izvirnost: Predmet raziskave je preučevanje stopenj percepcije zaposlenih glede uspešnosti organizacije, obstajajo razlike v percepciji splošnih demografskih značilnosti zaposlenih. Zato so opredeljene nadaljnje usmeritve glede na organizacijsko strukturo in kulturo zdravstvenega zavoda.

Omejitve/prihodnje raziskave: Predlog za prihodnje raziskave se kaže v povečanju vzorca preiskovancev in ponavljanju raziskav v zdravstvenih organizacijah po državi.

Ključne besede: zdravstvena organizacija, organizacijska struktura, načrtovanje organizacijske strukture, percepcija uspešnosti organizacije, način organiziranja.

