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Caregivers of People with Disability at the Workplace and How Job Satisfaction is Affected?

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Abstract
Caregivers of people with disabilities are employees who work in organizations either in the public or private sector that led a differentiated life from those who are not in the role of caregivers of people with disabilities. The stress and various challenges faced by caregivers with people with disabilities have affected their careers. The various challenges they have to face in the workplace affect the level of job satisfaction among them. Job Satisfaction can be defined as a measure of employee’s contentedness with their job, whether or not they like the job, or individual aspects or facets of the jobs, such as the nature of work or supervision, and they can balance their work life and personal life. Therefore, this concept paper would like to uncover whether the issue of job satisfaction occurs among these caregivers. In addition, this paper aims to discuss the factors that can affect job satisfaction among these caregivers. The findings of previous research and with reference to the Model of work satisfaction by Lent and Brown (2006) and Model of Proactive Behavior by Crant (2000), show that there are job satisfaction issues among caregivers and it also reveals the factors that can affect job satisfaction among them. Finally, this paper also discusses why research related to job satisfaction among caregivers needs to be conducted and its relation to the field of human resource development.

Keywords: Job Satisfaction, Caregiver, People with Disability, Employees, Human Resource Development.

Introduction
Caregiver of people with disability has a role in the provision of care for people who are unable to care for themselves, for example, children, disabled people, or the elderly (Koopmanschap et al., 2008). The limitations faced by people with disability forced them to depend entirely on the caregiver for their lives. People with disability according to the Americans with Disabilities Act (ADA), (1990), is an individual with a disability that covers adults and children/youth with “a physical or mental impairment that substantially limits one or more major life activities” or who have a “record of” or are “regarded as” having such an impairment. These caregiver hold two major roles in their life – being a caregiver and at the
same time an employee in an organizations or businesses. One study of Danish caregivers reported that parents of children with an ADHD diagnosis showed lower workforce participation and earnings (Kvist et al., 2013). The life of employees as a caregiver of people with disabilities is markedly different from those without people with disabilities in their lives. Caring for children with special health care needs amplifies these work-family challenges (Perrin et al., 2007). Employees as caregivers of people with disabilities are said to have a higher level of stress compared to employees without them. The caregiver faces enormous pressure in caring for people with disabilities because they need more care and attention. The impact they experience is enormous living the life of caregivers who at the same time need to focus on their careers. The struggles, adaptations, and successes of these employed parents are related to their ability to achieve work–family fit; their flexibility in the work, family, and child care domains of their lives; and their access to sources of family support. Ultimately, fit, flexibility, and family support resources may relate to the quality of work and parenting roles experienced by these challenged employed parents Work–Family fit (Brennan et al., 2007).

These issues that are related to their lives have had a huge impact on their work life and have disrupted their level of job satisfaction. Lu et al (2012) defined job satisfaction as not only how an individual feels about their job but also the nature of the job and the individuals’ expectation of what their job should provide. Most studies only examined how the caregiver’s life affects their careers in general and does not discuss job satisfaction issues specifically, and job satisfaction related studies are mostly conducted on employees who are not among those who play the role of caregivers for people with disability. Most studies like, Matthews et al (2011); Emlen (2010); George et al (2008); Wright, Crettenden and Skinner (2015); Brennan and Brannan (2005); Freedman et al (1995); Porterfield (2002); Rosenzweig et al (2002); Rosenzweig and Huffstutter (2004) only focuses on the caregiver’s life and the impact on their career in general and not specifically on job satisfaction. While the study by Liu et al. (2016); Mas-Machuca, Berbegal-Mirabent and Alegre, (2016); Prentice (2019); Chauhan and Solanki (2014); Babalola (2016) which emphasizes the study of job satisfaction among those who do not hold a role as a caregiver.

Besides that, most of the past studies focused only on respondents who have children with special needs or caring for adults with special needs separately. The two most common types of care recipients are children and the elderly (Kossek et al, 2001). Several studies have focused on caregiving outcomes associated with these two types of care recipients (e.g., Emslie et al., 2004). This shows that studies on caregivers that cover all people with disabilities are very rarely conducted. Those studies are mostly conducted through qualitative methods. In addition, previous studies only discussed the factors that affect job satisfaction such as self efficacy, outcome expectancy, perceived organizational support, job autonomy, personality traits, and learning goal orientation that were done on respondents who were not caregivers of people with disabilities.

This concept paper will discuss job satisfaction among caregivers of people with disabilities as well as the factors that affect job satisfaction. In addition, this paper will also reveal why it is important for research on caregivers to be conducted and how it is related to the field of human resource development. Job Satisfaction is an important thing to be given attention by the organization to ensure that their employees are always happy and satisfied.
A high level of job satisfaction indicates that employees are willing to do any task assigned to them and it affects organizational stability and organizational development. Therefore, employers need to ensure that caregivers get good attention and always support them to ensure that caregivers are always satisfied with their work.

Model of Work Satisfaction by Lent and Brown (2006) is very compelling to explore because the model has variables that can affect work satisfaction such as (a) work/educational satisfaction, (b) personality and affective traits, (c) goals and goal-directed activity, (d) self-efficacy, (e) work conditions and outcomes, and (f) goal-relevant environmental supports, resources, and obstacles. The Model of Proactive Behavior by Crant (2000) also shares the same function as the model by Lent and Brown that can be integrated for a more in-depth study related to job satisfaction among caregivers of people with disabilities.

Theoretical Background

**Job Satisfaction**

Job satisfaction is defined as a person's perceived enjoyment or liking of his or her work, either in a global or facet aspect of work (e.g., pay or environment), involving a combination of cognitive and affective elements (Lent, 2008). The definition of job satisfaction is that it incorporates multidimensional mental responses to a person’s profession, and that these distinct responses have psychological, emotional and behavioral elements (Hulin & Judge, 2003). Job satisfaction has been an important research topic for many years (Donohue & Heywood, 2004) because it affects the wellbeing of employees both physically and emotionally. A major reason for wide research on job satisfaction is that most of the employees have to spend most of the time in their life on a job.

Job satisfaction scales vary in the extent to which they assess the affective feelings about the job or the cognitive assessment of the job (Hulin & Judge, 2003). Affective job satisfaction is a subjective construct representing an emotional feeling individuals have about their job (Thompson & Phua, 2012). As a company's superior, it becomes their duty to understand the issues that occur and deal with them properly. It must be understood that those who have people with disability under their care have a different life of living as people with disability need more attention and care to ensure their livelihood needs to be fulfilled and their welfare is on guard. In addition, scholars (Axelrod, 1999; Fischer & Sousa-Ponza, 2009; Kim, 1994; Lent, 2008; Lent & Brown, 2013a; Specter, 1997; Swanson & Schneider, 2013) believed that job satisfaction may be indices of an integral part of work adjustment and overall mental health, physical health and even longevity.

**Factors Influencing Job Satisfaction**

Through previous studies, it was found that there are several factors that have a relationship with job satisfaction. These factors are, self-efficacy, expectancy outcome, perceived organizational support, job autonomy, personality traits and goal learning orientation. Self efficacy is a belief in employees that they believe in their ability to do their job. Self-efficacy refers to personal beliefs about one’s ability to perform the behaviors necessary to achieve one’s work-related goals (i.e., goal self-efficacy) or, more generally, to perform tasks required for success in one’s work environment (task self-efficacy). If goal-setting and progress are key argentic routes to work and educational satisfaction, then it is
important to consider the variables that foster them (Lent & Brown, 2006). Lent & Brown (2006) stated that self-efficacy is significant to work satisfaction. Self-efficacy has also been found to predict job satisfaction in employed workers (Caprara, Barbaranelli, Borgogni & Steca, 2003). Higher self-efficacy also has been associated with higher job satisfaction (Judge & Bono, 2001) and lower turnover intentions (Zellars et al., 2001).

Outcome expectations are shaped by information received through past performance experiences, observational learning, social encouragement and persuasion, and physiological and affective states and reactions (Lent & Brown, 2013). Expected outcomes have been found to explain unique variance in job satisfaction apart from self-efficacy (e.g., Singer & Coffin, 1996) and situational and dispositional affect (Weiss, Nicholas & Daus, 1999). According to Eisenberger, Huntington and Hutchison (1986), the concept of POS refers to “employees developed global beliefs concerning the extent to which the organization values their contributions and cares about their well-being.” In other words, POS stands for employee’s beliefs about a certain degree of the organization’s commitment toward their employees. Perceived organizational support has been studied in relation to various organizational outcomes, such as affective attachment and obligation to the organization (Shore & Wayne, 1993), job performance (Eisenberger, Fasolo & Davis-LaMastro, 1990), job retention (Eisenberger et al., 2002), employee turnover (Maertz et al., 2007), withdrawal behavior (Eder & Eisenberger, 2008) and job satisfaction (Eisenberger et al., 1997).

Russo (2017) asserted that job autonomy enables individual employee to determine ways to perform their assigned tasks and search for appropriate strategies to deal with routine and non-routine work situations (i.e., job complexity). Job autonomy may be conceptualized as the extent to which a job allows freedom, independence, and discretion to schedule work, make decisions, and choose among methods to perform tasks (Dysvik & Kuvaa, 2011; Humphrey et al., 2007). Such a conceptualization of job autonomy is in line with self-determination theory which proposes that satisfaction of the need for autonomy is essential for a range of employee outcomes (Deci & Ryan, 2000; Gagne & Deci, 2005). Personality is defined as a collection of stable traits that represent “endogenous basic tendencies of thinking, feeling, and acting that are shaped largely by biology and lead to characteristic ways of adapting to the different environmental setting in which individuals interact” (Brown & Hirschi, 2013, p. 300). Meta-analyses have shown that personality traits are related to various occupational criteria including job performance, training proficiency, and job satisfaction (Barrick & Mount, 1991; Connolly & Viswesvaran, 2000; Salgado, 1997; Tett, Jackson & Rothstein, 1991). Goal learning orientation is an activity to achieve the goal that has been set. Goal pursuit and progress represent key ways in which people contribute to their own well-being (Cantor & Sanderson, 1999), where it is an element or characteristic described through predictor goal directed activity according to Lent and Brown (2006). Goal-specific environmental support and resources (e.g., social and material support for one’s central goals) are likely to promote satisfaction (Cantor & Sanderson, 1999).

**Model of Work Satisfaction**

Social Cognitive Career Theory (SCCT), (Lent, Brown, & Hackett, 1994) was originally designed to help explain interest development, choice, and performance in career and educational domains. These three aspects of career/academic development were presented in distinct but overlapping segmental models. Work satisfaction model by Lent and Brown (2006),
presents a fourth social cognitive model aimed at understanding satisfaction experienced in vocational and educational pursuits.

The model draws on the developments made by both organizational and vocational psychologists and attempts to unify the two perspectives while also incorporating dispositional and situational approaches to understanding wellbeing at work. The initial process model proposed a series of causal relationships between predictor variables including: (a) personality and affective traits; (b) goal-relevant environmental supports, resources, and obstacles; (c) self-efficacy; (d) expected work conditions and outcomes; and (e) goals and goal-directed activity and explained the direct and indirect influences these had on an individual’s experience of work satisfaction (Lent & Brown, 2006a).

Model of Proactive Behavior
Proactive behavior involves acting in advance for a future situation, rather than just reacting. It means taking control and making things happen rather than just adjusting to a situation or waiting for something to happen. At the individual level, proactivity refers to the phenomena in which an individual self-initiates actions to master and change one’s situation or external environment (e.g., Crant, 2000; Parker et al., 2006). Proactivity has been examined from several different perspectives, including initially as an individual difference perspective (Bateman & Crant, 1993), followed by a behavioral perspective (Frese, Kring, Soose & Zempel, 1996; Parker, Williams & Turner, 2006), and more recently, a goal process perspective (Bindl et al., 2012; Frese & Fay, 2001; Grant & Ashford, 2008).

Proactive behavior is defined as “self-initiated and future-oriented action that aims to change and improve the situation or oneself” (Parker, Williams & Turner, 2006, pp. 636). This definition indicates three defining elements that are argued to underpin multiple forms of proactive behavior (voice, taking charge, proactive socialization, etc.): self-initiation, future-focus, and change-orientation (Frese & Fay, 2001; Parker et al., 2006). First, proactive behavior is self-initiated, which means that this behavior is enacted without being told to or without requiring an explicit instruction. Second, proactive behavior is future-focused, which means that this behavior aims to deal with anticipated problems or opportunities with a long-term focus. Third, proactive behavior is change-oriented, involving not just reacting to a situation but being prepared to change that situation or oneself in order to bring about a different future.

Integrated Model
Both these models and theories have been used for studies related to job satisfaction since time immemorial. Where, it discusses not only job satisfaction in general but explains the factors that can affect job satisfaction in particular. According to Lent and Brown (2006), the model includes the domain of educational or academic satisfaction, that is, enjoyment of one’s role or experiences as a student. Work satisfaction is included because, in SCCT, school and work are viewed as dovetailing developmental spheres, with adjustment in each being subject to similar causal determinants. A more general, integrative model may therefore help to explain satisfaction in both spheres, though research on the model would require context or role-specific measures. Therefore, for convenience, the model mostly refers to “work satisfaction”. Consistent with this perspective, meta-analytic results have indicated that proactivity is strongly related to subjective career satisfaction (job and career satisfaction) (Ng
et al., 2005). Proactivity is associated with job satisfaction because proactive people tend to create conditions more conducive to personal success at work.

The combination of these two models enables the study related to job satisfaction to be conducted not only in general but specifically through predictors. Work Satisfaction Model by Lent and Brown 2006 which explains factors that can affect work satisfaction instead of job satisfaction. Work satisfaction is a study related to satisfaction by employees in a large organization or work environment in general. Lent (2008) pointed out that “work satisfaction may be considered the more inclusive term because it can include satisfaction with one’s job globally, the specific facets or conditions of one’s work, or the larger work environment in which one’s job is embedded” (p. 483), but he also stated that most of the literature pertaining to this area involves job satisfaction over a general or nonspecific time frame of enjoyment in work. While the job satisfaction study is a study in a more specific environment or work environment that justifies this study to be suitable for a more specific examination on caregivers’ satisfaction. Job satisfaction is typically assessed by self-report. In other words, satisfaction is an idiographic appraisal because individuals are typically assumed to provide the best source of information about their own job satisfaction (Lent, 2008).

Thus, the Model of Proactive Behavior by Crant 2000, in support of the Model by Lent and Brown 2006 for a job satisfaction study specifically. While predictors or factors that can affect job satisfaction can be explained very well by the Model of Work Satisfaction (Lent & Brown, 2006) such as self efficacy, outcome expectancy, perceived organizational support, job autonomy, personality traits, and learning goal orientation.

Caregiver of People with Disability and Job Satisfaction

Job Satisfaction among Caregivers

The stress in the life of a caregiver of people with disabilities greatly affects their working life. Caregivers are often faced with ethical issues such as not being present at work due to frequent fatigue of caring for people with disabilities throughout the night, taking unplanned leave, and coming late to work. Child care difficulties affect employee absenteeism, ability to focus at work, stress-related health problems, marital and parental satisfaction (Galinsky, 1992), and even basic well-being (Noor, 2003). 78% of adults caring for children with special needs have had to come to work late, leave early or take a short time off or a long-term absence at some point while working and being a caregiver (National Alliance for Caregiving and the American Association of Retired People, 2009).

Employees also often face the issue of lack of flexibility in their work which leads to increased stress. Exceptional caregiving responsibilities are often time consuming, occur during the workday, and require flexibility in schedule and time. Flexibility has been conceptualized as “a puzzle of many pieces that comes mainly from the parent’s immediate environment of work, family, and childcare” (Emlen 2010, p. 40). Additionally, workplace flexibility positively affected mental and physical health of caregivers with exceptional care responsibilities (Earle & Heymann, 2011). Caregivers need time flexibility such as giving the freedom to manage their own work schedule where it will allow caregivers to carry out tasks as required by the organization and at the same time be able to manage people with disabilities in their lives. Working parents with autistic children tend to work fewer hours because they need to have more time taking care of their autistic child. For example, they
need to bring their children to the clinic for medical appointments frequently. This will result in an increase of absence from work (Chung et al., 2007; Kuhlthau & Perrin, 2001). Flexible working hours benefit tends to be the solution for this problem (Sitimin et al., 2017).

The consequences of having a bad record prompted organizations or employers to possess a negative perception of caregivers and consider them to be employees with problems. Caregivers often report being subjected to discrimination and exclusion due to their association with child/youth with disability (Rosenzweig, Malsch, Brennan, Mills & Stewart, 2010). These employees also often fall victim to workplace discrimination when they are often ignored by employers from promotion and career development. It has been demonstrated that these parents work less hours (Cidav, Marcus & Mandell, 2012; Matthews et al., 2011), have fewer training and development opportunities (Matthews et al., 2011), have reduced opportunities for promotions (Matthews et al., 2011), and are less likely to be involved in the labor force as compared to parents raising children without disabilities (Cidav et al., 2012).

The stress of caregivers’ life with people with disabilities have led them to decide to quit work, where they feel the employers or organizations do not understand their situation. Nearly 24% of families with children who have special health care needs choose to cut back or stop working (U.S. Dept. of Health and Human Services, 2008). 48% reported having quit a job at some time to care for their children/ youth (Rosenzweig & Huffstutter, 2004b).

From the issues discussed, it shows that caregivers have issues with job satisfaction because their negative response to their work indicates that they are not contented with their work. Job satisfaction has also been linked to worker productivity, commitment and reduced turnover intentions (Judge et al., 2001; Griffeth et al., 2000; Meyer et al., 2002). At the individual level, low level of job satisfaction and an abnormal state of nervousness are dangers to mental and physical wellbeing, personal satisfaction, goal accomplishment and self-awareness. In the working environment, these situations can decrease the quality and amount of work and lead to increased absenteeism and turnover (Khuwaja, 2004).

**Self efficacy and Outcome Expectancy**

Self-efficacy is defined as individuals’ beliefs about their capabilities to produce designated levels of performance (Bandura, 1994), and it can be seen as a personal resource. Several studies have shown that self-efficacy acts as a buffer in the stressor-strain relationship (Grau, Salanova & Peiró, 2001). Higher self-efficacy also has been associated with higher job satisfaction (Judge & Bono, 2001) and lower turnover intentions (Zellars, Hochwartier, Perrewe, Miles & Kiewitz, 2001). This view entails expectancy value beliefs (e.g., ratings of work-relevant outcomes and their importance to the individual; Mitchell, 1982), which can also be indexed as outcome expectations, or beliefs about the likelihood of receiving particular future work outcomes (Lent, Brown & Hackett, 1994). Expected outcomes have been found to explain unique variance in job satisfaction apart from self-efficacy (e.g., Singer & Coffin, 1996) and situational and dispositional affect (Weiss et al., 1999).

Following the negative response by the organizations to the caregivers could cause them to be less motivated and confident in their work. This seems to be to a large extent affecting their productivity. Over one third of fathers reported that caring had impacted on
their job opportunities or career progression, particularly those whose children had more severe disabilities (Wright et al., 2015). Family members often report being subjected to discrimination and exclusion due to their association with child/youth with disability (Rosenzweig et al., 2010). One study of Danish caregivers reported that parents of children with an ADHD diagnosis showed lower workforce participation and earnings (Kvist et al., 2013). A person with lower competence expectations does not expect to be able to have solutions for certain problems at work (Heinrich, 2004), which can lead to dissatisfaction (Kocak & Eves, 2010). Job satisfaction has also been linked to worker productivity, commitment and reduced turnover intentions (Judge et al., 2001; Griffeth et al., 2000; Meyer et al., 2002).

**Perceived Organizational Support (POS) and Job Autonomy**

According to Eisenberger et al (2002) the concept of POS refers to “employees developed global beliefs concerning the extent to which the organization values their contributions and cares about their well-being.” In other words, POS stands for employee’s beliefs about a certain degree of the organization’s commitment toward their employees. (Eisenberger, 1986). Whereas work flexibility is synonymous with work autonomy. The degree to which the job provides substantial freedom, independence, and discretion to the individual in scheduling the work and determining the procedures to be used in carrying it out (Hackman & Oldham, 1975, p. 162). Job Autonomy is the degree of independence and freedom related to the job, which is required or allowed to conduct daily activities of job (Stamps & Piedmonte, 1986).

Challenges in the workplace often occur when employers or organizations find themselves unable to understand the status of employees as a caregiver of people with disability, as a result, these employees often feel that their employers do not support them and cannot tolerate the freedom in working hours. Furthermore, one-half of the parents reported that their employers were unsympathetic toward their family circumstances and would make hurtful comments when parents would request a schedule change or time off to care for their child (George et al., 2008). Exceptional caregiving responsibilities create distractions, disruptions, and absences from the job, they may be judged by co-workers and supervisors as faulty employees as well (Rosenzweig et al., 2009). The struggles, adaptations, and successes of these employed parents are related to their ability to achieve work–family fit; their flexibility in the work, family, and child care domains of their lives; and their access to sources of family support. Ultimately, fit, flexibility, and family support resources may relate to the quality of work and parenting roles experienced by these challenged employed parents (Brennan et al., 2007).

**Personality Traits**

Larsen and Buss (2005) define personality as the set of mental abilities and frameworks inside the individual that are made and moderately continuing and that affect his cooperation with, and conformity to the intrapsychic, physical and social circumstances. According to Funder (2004), personality is a singular’s trademark example of thought, emotions, and behavior, together with the psychological components concealed or not behind those patterns. Understanding someone’s personality is important to administrators because this learning is additionally helpful for putting individuals into employment and it gives them clues about how that individual is prone to act and feel in a mixture of
circumstances. The dispositional elements continually allude to the five-factor model of personality (Kumar & Bakhshi, 2010).

The challenges of life faced by caregivers with people with disability greatly change the personality of caregivers in the workplace where it leads to negative things in them that affect their careers. Negative affectivity is considered as a personality trait (Judge et al., 1997).

**Learning Goal Orientation**

Learning goal orientation is a desire to develop the self by acquiring new skills, mastering new situation, and improving one’s competence (Don Vandewalle, 1997). Mastery goals means that learning, understanding, and solving problems are ends in themselves whereas performance goals means that the purpose of achievement behavior is to demonstrate high ability and to be positively perceived by others (Ames & Archer, 1988a, 1988b; Duda & Nicholls, 1992). Papaioannou and Christodoulidis (2007) found that teachers’ job satisfaction was positively related to mastery goals, unrelated to performance-approach goals and negatively related to performance-avoidance goals.

Employees as caregivers of people with disabilities are not interested in improving their knowledge and skills because they feel demotivated and do not have the courage to do that. In interviews with 18 Welsh mothers of children with disabilities, Shearn and Todd (2000) found that most had their ability to work negatively impacted. Most of them wanted to work for financial reasons. Also, most had experienced feelings of frustration related to the inability to use their skills and because work provided them with a sense of identity. Previous studies have shown that parents of individuals with developmental disabilities have decided not to pursue graduate school, forgo occupational development and advancement opportunities, or have changed their occupational goals (Barnett & Boyce 1995; Case-Smith, 2004; Freedman, Litchfield & Warfield, 1995; Parish, 2006; Porterfield, 2002).

**The Important for Future Study**

The related studies such as, Liu et al (2016); Machuca et al (2016); Prentice (2019); Chauhan and Solanki (2014); Babalola (2016) are focused on employees who play the role of teachers, police, army nurses who do not play the role of caregiver. Only a few concentrated studies on job satisfaction among employees as a caregiver for people with disability. In this regard, this shows that the study of job satisfaction on employees who take a role as caregiver for people with disabilities has to be expanded and inclusive to ensure that the issues they face are highlighted and addressed. This is agreed by Pettey (2015), stating that employees as a caregiver for people with disability are unique populations and their issues must be addressed. Similarly, studies on predictors self efficacy, outcome expectancy, perceived organizational support, job autonomy, personality traits, and learning organizational support have been conducted on employees who do not at the same time play the role of caregiver.

While studies that examine caregivers only focus on their issues in the workplace rather than the issue of job satisfaction in particular, as shown in studies by (Matthews et al., 2011; Emlen, 2010; George et al., 2008; Wright et al., 2015; Brennan and Brannan, 2005; Freedman et al., 1995; Porterfield, 2002; Rosenzweig, Brennan and Ogilvie, 2002; Rosenzweig and Huffstutter, 2004).
Most studies related to caregivers of people with disability are conducted on those who have children with disability or adults with disability separately. There is a lack of study on caregivers who are taking care of people with disability to include children and adults in one study. The two most common types of care recipients are children and the elderly (Kossek et al., 2001). Several studies have focused on caregiving outcomes associated with these two types of care recipients (e.g., Emslie et al., 2004). Studies in Malaysia are mostly specific to the study of the needs and interests of special children and it is more specific to the types of disabilities such as the study of children with autism, Down syndrome, vision, hearing, cerebral palsy and dyslexia (Chu, Mohd Normal, McConnell, Tan & Joginder Singh, 2018; Alias et al., 2015; Marshall et al., 2018; Tan, 2015). In addition, there are also studies related to the challenges faced by people with disabilities themselves in the field of employment (Saidi et al., 2018; Jaafar et al., 2017; Isaruddin et al., 2018). There is a lack of research on caregivers as employees who take care of people with disabilities as a whole that includes all types of disabilities.

The Impact of Study to Human Resource Development (HRD) Area

With the exposure of caregivers’ life with people with disabilities, has shown it is related to the issue of job satisfaction. An in-depth study related to job satisfaction needs to be conducted on the caregiver to discover the level of job satisfaction the caregiver experiences. In addition, knowing the factors that affect job satisfaction among these caregivers, can help the employer or organization to address the issues faced by the caregiver. It is the responsibility of the employer or organization to ensure that their employees are always given attention by looking after their welfare.

Human Resource Development (HRD) are significant determinants of occupation satisfaction as indicated by (Kooij, 2010). HRD intends to create and unleash human expertise through employees’ capabilities (Swanson and Holton, 2008). HRD key role is to improve organization performance through workers’ capacities and abilities (Swanson, 1987). Ethics in HRD is the belief that organizations are built on the human competencies of employees. Organizations are human-made entities that rely on human expertise in order to establish and achieve their goals (Swanson, 2008). Employees are the most important asset in an organization. Through HRD theory by Swanson 2008, it is stated that organizational progress is based on human resource efficiency and therefore it is very important to take care of their well-being by meeting the needs of employees.

The HRD function need to take cognisant that employees as a caregiver to people with disabilities have similar bright potential and future as other employees and can influence organizational developments. They should be well and fairly regarded to be of value to the organizations as contributors to its wellbeing. Notions that they are problematic must be cast away. Fitting projects or training can be designed and implemented for these workers to build inspiration and motivation, create abilities and knowledge that will contribute to organizations capabilities and capacities. This way, a study in the future can be directed on job satisfaction with regards to employees as a caregiver of people with disability.

The discoveries of the study may likewise support the Malaysian government, particularly the Ministry of Human Resources in a joint effort with the Department of Social Welfare to create approaches explicitly for workers as a caregiver of people with disabilities.
Among the forms of support that can be provided are for instance developing a policy that requires the organization or employer to ensure flexibility to caregivers in managing their working hours, assigning special annual leave to caregivers, or job security protection to caregivers who are always concerned about being fired. With the policies issued by the ministry, then the employer or organization will comply and ensure that the job satisfaction and security of caregivers are met.

Conclusion
Life issues and challenges in the workplace have affected the level of job satisfaction among employees as caregiver of people with disability. Employees with valuable knowledge and aptitudes in their fields are required by their organizations and they will consistently be valued by the organization. Job Satisfaction is an important thing to be given attention by the organization to ensure that their employees are always happy and satisfied. A high level of job satisfaction indicates that employees are willing to do any task assigned to them and it affects organizational stability and organizational development. Therefore, employers need to ensure that caregivers get good attention and always support them to ensure that caregivers are always satisfied with their work.

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