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3.1 Introduction:

From Natural science to Social and science research is a guide to give guidance to all the researchers in their field for going top on the field and helpful for development in their field. Research means ‘To search again’ for the help of research anyone can get right way or solution to understand their problems.

The nature of social research is scientific. When any researcher is finding anything for their research problem, he uses scientific aspect for it. He always believes to keep scientific aspect, objectivity, honesty, perfectness, pureness and freedom. There are some ethics for the scientific research and which is under:

(1) To compare of variables in relation to research problem.
(2) To know the relation of the variables in relation to research problem.
(3) To find out the effect of variables in relation to research problem.
(4) To keep control on some variables and check the effect of that kind of variables in relation to research problem.

Problem is not born from nothing but it is born form the curiosity of the person. The main objective of pure research is hypotheses, sampling, variables, data collection, reliability and validity of tools, data analysis and statistical analysis etc. to planning of research in advance. For this type of planning is helpful to researcher for getting their goals.

3.2 Title:

Work motivation and Values among doctors, teachers and Administrators

3.3 Objectives:

(1) To study of Work motivation among doctors, teachers and Administrators in relation to gender.
(2) To study of Work motivation among doctors, teachers and Administrators in relation to type of profession.
(3) To study of Work motivation among doctors, teachers and Administrators in relation to gender and type of profession.
(4) To study of Values among doctors, teachers and Administrators in relation to gender.
(5) To study of Values among doctors, teachers and Administrators in relation to type of profession.
(6) To study of Values among doctors, teachers and Administrators in relation to gender and type of profession.

3.4 Hypotheses:
(1) There is no significant difference between the Dependence among doctors, teachers and Administrators in relation to Gender.
(2) There is no significant mean difference between the Dependence among doctors, teachers and Administrators in relation to Type of profession.
(3) There is no significant mean difference between the Dependence among doctors, teachers and Administrators in relation to Gender and Type of profession.
(4) There is no significant mean difference between the Organizational orientation among doctors, teachers and Administrators in relation to their Gender.
(5) There is no significant mean difference between the Organizational orientation among doctors, teachers and Administrators in relation to their Type of profession.
(6) There is no significant mean difference between the Organizational orientation among doctors, teachers and Administrators in relation to their Gender and Type of profession.
There is no significant difference between the Work group relations among doctors, teachers and Administrators in relation to Gender.

There is no significant mean difference between the Work group relations among doctors, teachers and Administrators in relation to Type of profession.

There is no significant mean difference between the Work group relations among doctors, teachers and Administrators in relation to Gender and Type of profession.

There is no significant mean difference between the Psychological incentives among doctors, teachers and Administrators in relation to their Gender.

There is no significant mean difference between the Psychological incentives among doctors, teachers and Administrators in relation to their Type of profession.

There is no significant mean difference between the Psychological incentives among doctors, teachers and Administrators in relation to their Gender and Type of profession.

There is no significant mean difference between the Material incentives among doctors, teachers and Administrators in relation to their Gender.

There is no significant mean difference between the Material incentives among doctors, teachers and Administrators in relation to their Type of profession.

There is no significant mean difference between the Material incentives among doctors, teachers and Administrators in relation to Gender and Type of profession.

There is no significant mean difference between the Job Situations among doctors, teachers and Administrators in relation to their Gender.

There is no significant mean difference between the Job Situations among doctors, teachers and Administrators in relation to their Type of profession.
(18) There is no significant mean difference between the Job Situations among doctors, teachers and Administrators in relation to their Gender and Type of profession.

(19) There is no significant difference between the Religious value among doctors, teachers and Administrators in relation to Gender.

(20) There is no significant mean difference between the Religious value among doctors, teachers and Administrators in relation to Type of profession.

(21) There is no significant mean difference between the Religious value among doctors, teachers and Administrators in relation to Gender and Type of profession.

(22) There is no significant mean difference between the Social value among doctors, teachers and Administrators in relation to their Gender.

(23) There is no significant mean difference between the Social value among doctors, teachers and Administrators in relation to their Type of profession.

(24) There is no significant mean difference between the Social value among doctors, teachers and Administrators in relation to their Gender and Type of profession.

(25) There is no significant difference between the Democratic value among doctors, teachers and Administrators in relation to Gender.

(26) There is no significant mean difference between the Democratic value among doctors, teachers and Administrators in relation to Type of profession.

(27) There is no significant mean difference between the Democratic value among doctors, teachers and Administrators in relation to Gender and Type of profession.

(28) There is no significant mean difference between the Aesthetic value among doctors, teachers and Administrators in relation to their Gender.
(29) There is no significant mean difference between the Aesthetic value among doctors, teachers and Administrators in relation to their Type of profession.

(30) There is no significant mean difference between the Aesthetic value among doctors, teachers and Administrators in relation to their Gender and Type of profession.

(31) There is no significant difference between the Knowledge value among doctors, teachers and Administrators in relation to Gender.

(32) There is no significant mean difference between the Knowledge value among doctors, teachers and Administrators in relation to Type of profession.

(33) There is no significant mean difference between the Knowledge value among doctors, teachers and Administrators in relation to Gender and Type of profession.

(34) There is no significant mean difference between the Hedonistic value among doctors, teachers and Administrators in relation to their Gender.

(35) There is no significant mean difference between the Hedonistic value among doctors, teachers and Administrators in relation to their Type of profession.

(36) There is no significant mean difference between the Hedonistic value among doctors, teachers and Administrators in relation to their Gender and Type of profession.

(37) There is no significant difference between the Power value among doctors, teachers and Administrators in relation to Gender.

(38) There is no significant mean difference between the Power value among doctors, teachers and Administrators in relation to Type of profession.

(39) There is no significant mean difference between the Power value among doctors, teachers and Administrators in relation to Gender and Type of profession.
There is no significant mean difference between the Family Prestige value among doctors, teachers and Administrators in relation to their Gender.

There is no significant mean difference between the Family Prestige value among doctors, teachers and Administrators in relation to their Type of profession.

There is no significant mean difference between the Family Prestige value among doctors, teachers and Administrators in relation to their Gender and Type of profession.

There is no significant mean difference between the Health value among doctors, teachers and Administrators in relation to their Gender.

There is no significant mean difference between the Health value among doctors, teachers and Administrators in relation to their Type of profession.

There is no significant mean difference between the Health value among doctors, teachers and Administrators in relation to their Gender and Type of profession.

There is no significant mean difference between the Economic value among doctors, teachers and Administrators in relation to their Gender.

There is no significant mean difference between the Economic value among doctors, teachers and Administrators in relation to their Type of profession.

There is no significant mean difference between the Economic value among doctors, teachers and Administrators in relation to their Gender and Type of profession.

3.5 Variables:

In the present study two level of Gender (Male and Female) and Three Level of Type of profession (Doctors, Teachers and Administrators)
will be taken as independent variables. The score of Work motivation and Values of Doctors, Teachers and Administrators will be taken as dependent variables. In this study the independent & dependent variables has been show in the below table:

**Detail of Variables**

<table>
<thead>
<tr>
<th>No</th>
<th>Name of Variables</th>
<th>Types of Variables</th>
<th>Grade of Variables</th>
<th>Name of the level</th>
</tr>
</thead>
</table>
| 1  | Gender            | Independent        | 2                  | 1. Male
|    |                   |                    |                    | 2. Female         |
| 2  | Type of profession| Independent        | 3                  | 1. Doctors
|    |                   |                    |                    | 2. Teachers
|    |                   |                    |                    | 3. Administrators |
| 3  | Work motivation   | Dependent          | 6                  | 1. Dependence
|    |                   |                    |                    | 2. Organizational orientation
|    |                   |                    |                    | 3. Work group relations
|    |                   |                    |                    | 4. Psychological incentives
|    |                   |                    |                    | 5. Material incentives
|    |                   |                    |                    | 6. Job Situations  |
| 4  | Values            | Dependent          | 10                 | 1. Religious
|    |                   |                    |                    | 2. Social
|    |                   |                    |                    | 3. Democratic
|    |                   |                    |                    | 4. Aesthetic
|    |                   |                    |                    | 5. Knowledge
|    |                   |                    |                    | 6. Hedonistic
|    |                   |                    |                    | 7. Power
|    |                   |                    |                    | 8. Family Prestige
|    |                   |                    |                    | 9. Health
|    |                   |                    |                    | 10. Economic      |

**3.5.1 Independent variables :**

(1) Gender: (Male and Female)

(2) Type of profession: (Doctors, Teachers and Administrators)

**3.5.2 Dependent variabl :**

The score of Work motivation and Values.

**3.5.3 Controlled variables :**

(1) In the present study selection of samples is only from Hospitals, Educational Institutes and Government and Private Sectors.

(2) In this study only Doctors, Teachers and Administrators were taken.

(3) Limited samples were taken for this study.

(4) The selection of sample only from Ahmedabad District.
3.6 Sample:

3.6.1 Population:

In the present study to measure Work motivation and Values of Doctors, Teachers and Administrators who are working in Hospitals, Educational Institutes and Government and Private Sectors was randomly selected for the sample.

3.6.2 Selection of sample:

In the present study sample will be selected randomly. I will take 270 Male (90-Doctors, 90-Teachers and 90-Administrators) who are working in different Hospitals, Educational Institutes and Government and Private Sectors of Ahmedabad District and 270 Female (90-Doctors, 90-Teachers and 90-Administrators) who are working in different Hospitals, Educational Institutes and Government and Private Sectors of Ahmedabad District, so total 540 samples will be selected for this study.

Approximately 600 samples will be selected in each category for the research study. After disposing off incomplete and unclear details, a total of 540 samples will be selected as per final study.

3.6.3 Experimental design:

In the present study we will take total 540 Doctors, Teachers and Administrators (Male and Female). For breakup of the sample of present study, I can use 2x3 experimental designs and which is under:

**Table-3.6.3.1 : Experimental Design (2x3)**

<table>
<thead>
<tr>
<th>Type of Profession</th>
<th>Gender (A)</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male (A1)</td>
<td>Female (A2)</td>
</tr>
<tr>
<td>Doctors (B1)</td>
<td>90</td>
<td>90</td>
</tr>
<tr>
<td>Teachers (B2)</td>
<td>90</td>
<td>90</td>
</tr>
<tr>
<td>Administrators (B3)</td>
<td>90</td>
<td>90</td>
</tr>
<tr>
<td>Total</td>
<td>270</td>
<td>270</td>
</tr>
</tbody>
</table>

Gender: Male (A₁) and Female (A₂)

Type of profession: Doctors (B₁), Teachers (B₂) and Administrators (B₃)
3.7 Tools:

The main objective of the present study is a study of Work motivation and Values among Doctors, Teachers and Administrators (Male and Female). In the present study I can use two questionnaires, (1) Work motivation Questionnaire and (2) Personal Values Questionnaire.

3.7.1 Data sheet:

In the data sheet of the present study I can include normally Name, Sex, Qualification, Age, Religion, Type of job, Type of profession of residency, Experience, Monthly Income, Type of Family, Married or Unmarried, Category etc. items included in data sheet to measure Work motivation and Values among Doctors, Teachers and Administrators (Male and Female).

3.7.2 Work Motivation Questionnaire:

In order to measure the work motivation of the doctors, teachers and Administrators, I will use a “Work motivation Questionnaire” by K. G. Agrawal was used.

3.7.2.1 Scoring:

All the items were Likert type which were rated on five point scale., science the item were Likert type, summated scoring is done by assigning 5 to the most positive response and 1 to the extreme negative response. So in this way scores 5, 4, 3, 2, 1 were given to each item; alternative a, b, c, d, e can also be assigned respectively.

3.7.2.2 Reliability and Validity:

Reliability of Work motivation Questionnaire is 0.994 which is very high and Validity of Work motivation Questionnaire is 0.67.

3.7.3 Personal Values Questionnaire:

In order to measure the Value of the doctors, teachers and Administrators, I will use a “Personal Values Questionnaire” by G.P. Sherry and A.P. Verma was used.
3.7.3.1 Administration of the PVQ:

PVQ may be administered individually as well as in a group. It should be filled out under the standard instructions. First the respondents should fill up the personal data blank printed on the front page. But they should be clearly instructed not to fill up the cage which is meant for the investigator. When all the respondents have filled up the blank they should be asked to turn over the page. The investigator should read out the instructions printed on the page of personal data sheet of the PVQ loudly and clearly. The respondents should follow him carefully. He should explain the mode of filling out the PVQ very carefully, preferably with the help of a board if one is available there. When he is sure that they have understood the mode of recording their responses, he should permit them to turn over the page and ask them to record their responses. He should invigilate the respondents while they are filling up the PVQ lest they should consult one other.

3.7.3.2 Scoring:

The responses are to be scored as follows: (1) 2 for tick mark ‘√’ showing the most preferred value under the stem, (2) 0 for a cross ‘X’ showing the least preferred value under the stem and (3) 1 for the blank ‘Unmarked’ item showing the intermediate preference for the value.

3.7.3.3 Validity: The validity of the personal values questionnaire is 0.64.

3.7.3.4 Reliability:

Reliability of a tool is generally defined as the ration of true variance to the scores. Two indices of reliability of the PVQ were found out. Firstly, its reliability was determined by Hoyt’s method using analysis of variance which method is as efficient as Kuder Richardson’s but less cumbersome. Secondly, two test-retest reliabilities were determined one after an interval of 11 month and the other of 3 months. Thus three sets of reliability
coefficients for the PVQ are available at present and they are presented in below table:

<table>
<thead>
<tr>
<th>No.</th>
<th>Values</th>
<th>Test-Retest Reliabilities</th>
<th>Analysis Variance Reliabilities</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>11 Months</td>
<td>3 Months</td>
</tr>
<tr>
<td>1</td>
<td>Religious Value</td>
<td>0.52</td>
<td>0.82</td>
</tr>
<tr>
<td>2</td>
<td>Social Value</td>
<td>0.45</td>
<td>0.66</td>
</tr>
<tr>
<td>3</td>
<td>Democratic Value</td>
<td>0.62</td>
<td>0.57</td>
</tr>
<tr>
<td>4</td>
<td>Aesthetic Value</td>
<td>0.47</td>
<td>0.65</td>
</tr>
<tr>
<td>5</td>
<td>Economic Value</td>
<td>0.67</td>
<td>0.70</td>
</tr>
<tr>
<td>6</td>
<td>Knowledge Value</td>
<td>0.59</td>
<td>0.63</td>
</tr>
<tr>
<td>7</td>
<td>Hedonistic Value</td>
<td>0.61</td>
<td>0.54</td>
</tr>
<tr>
<td>8</td>
<td>Power Value</td>
<td>0.55</td>
<td>0.53</td>
</tr>
<tr>
<td>9</td>
<td>Family Prestige Value</td>
<td>0.57</td>
<td>0.85</td>
</tr>
<tr>
<td>10</td>
<td>Health Value</td>
<td>0.53</td>
<td>0.64</td>
</tr>
</tbody>
</table>

3.8 Data collection:

For the data collection of the study I can get information about Doctors, Teachers and Administrators (Male and Female) and then I meet to them directly and conversant with an importance of the present study. Than I can give questionnaire to all the Doctors, Teachers and Administrators (Male and Female) who are working in different Hospitals, Educational Institutes and Government and Private Sectors of Ahmedabad District and data was collected.

3.9 Procedures of research:

In procedures of research first in relation to main objective I can select right questionnaire and after that I can get information about Doctors, Teachers and Administrators (Male and Female) and I meet to them directly and conversant with an importance of the present study. In order to measure Work motivation “Work motivation Questionnaire” and for Values “Personal Values Questionnaire” was used. All tests are in Hindi so at first I can translate both test in Gujarati and Pilot study was done and then we measure the reliability and validity of test. I visited many of Doctors, Teachers and Administrators (Male and Female) who are working in different Hospitals, Educational Institutes and Government and Private Sectors of Ahmedabad District. There were I meet to them directly.
and tests were given and data was collected. At last 270 Male (90-Doctors, 90-Teachers and 90-Administrators) and 270 Female (90-Doctors, 90-Teachers and 90-Administrators) who are working in different Hospitals, Educational Institutes and Government and Private Sectors of Ahmedabad District were selected finally.

3.10 **Statistical analysis :**

After scoring of every test which is filling up by Doctors, Teachers and Administrators I can get raw scores and then by help of raw scores I can complete data analysis. First I check which option which was selected by Doctors, Teachers and Administrators and help of them I can give a score to every sentence and at last I get a raw score.

Thus, in relation to main objective of the present study all the data was collected from the Doctors, Teachers and Administrators (Male and Female) who are working in different Hospitals, Educational Institutes and Government and Private Sectors of Ahmedabad District and then scoring was done for the help of manual of the questionnaire and at last for getting results I can used 2x3 “F” test (ANOVA) method for statistical analysis of the present study.

In the next chapter-4 in relation to variables of the present study like Gender and Type of profession results and interpretation was given.