

FACTORS INFLUENCING JOB SATISFACTION AMONG HEALTHCARE PROFESSIONALS IN DHQ TOBA TEK SINGH

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ABSTRACT

Introduction: Job satisfaction is used to measure how pleased an employee is with the job. High job satisfaction can improve the enthusiasm of the staff and is beneficial to the success and progress of the organization. It can lead to lower turnover and high-quality service. Healthcare staff with low job satisfaction may suffer from medical problems themselves and individual employee health may influence the overall stability of the healthcare staff. **Objective:** The main objectives of this study were to identify the factors influencing the job satisfaction and to determine the level of job satisfaction. **Study Design:** Descriptive comparative research design was used in this research. **Setting:** This research was conducted in DHQ hospital Toba tek singh. **Method:** A questionnaire was designed to be filled by the nurses working in the hospital. The gathered data was processed and analyzed by SPSS to examine their results and results have been showed in tables and graphs. **Result:** The sample size of this research was 168 nurses working in hospitals to identify the level of job satisfaction and its association with demographic information. 77% nurses agreed if they could choose the career again, they would make the same decision. 79% told that this profession has more advantages than disadvantages. 70%, however, told that there are too much expectations from nurses during duty.

Keywords: Job Satisfaction, job performance, nurses, healthcare workers

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INTRODUCTION

Job satisfaction is used to measure how content an employee is with the job. High job satisfaction can improve the enthusiasm of the staff and is beneficial to the success and progress of the organization. It can lead to lower turnover and high-quality service. Healthcare staff with low job satisfaction may suffer from medical problems themselves and individual employee health may influence the overall stability of the healthcare staff. Dissatisfied employees are more likely to leave the organization, and as a result, the remaining employees may engage in counterproductive activities such as low-quality service and cause damage to equipment.

There are several factors are associated with job satisfaction. job satisfaction was associated with professional accomplishment, freedom of expression and appreciation. An investigation undertaken by Atif et al revealed that age,

educational background, years of service and income were significantly associated with job satisfaction among doctors. Other studies also mentioned that general outlook on the industry, gender, occupation, areas of work, urban versus rural setting, professional knowledge and sufficient number of staffs significantly affect job satisfaction. Although work stress, work-family conflict has each been found to be associated with job satisfaction, there is little literature exploring the relationship of job satisfaction with these factors when taken together. In this study, we will analyses the impact of sociodemographic factors, work stress and work family conflict on job satisfaction among the healthcare.¹

Many other factors which affects the job satisfaction are often categorized into extrinsic and intrinsic ones. Intrinsic factors are related to the work itself (such as the ability to develop one's skills, sense of autonomy, success, achievement

and control); whereas extrinsic factors are not directly related to work itself (such as, salary, relationships with colleagues). As well as autonomy and cohesion with colleagues, many factors such as task variety, feedback, promotional opportunities, task identity (professional status), working conditions, collaboration with the staff and strength of the organizational culture have been associated with job satisfaction. Demographic variables, job characteristics and organizational environment factors contribute to job satisfaction. Most healthcare professionals are rather satisfied with their freedom of action to treat patients and the kind of their relationships with patients; furthermore, their most dissatisfaction is related to their leisure time and their work improvement and promotion.²

The lack of valid evidence in the diverse areas of defining and measuring job satisfaction and its relation with other concepts such as functionality and job efficiency, absence and the like, indicates that most of researches and studies used to determine job satisfaction have failed to determine its dimensions, aspects and factors accurately and completely. Many other factors like knowledge, beliefs, feelings, and experiences of health system employees about the factors affecting job satisfaction, and to gauge the congruence of their attitudes with these aspects found in the literature in order to identify potential aspects of job satisfaction.

This is especially essential since representatives in a healthcare conveyance framework are relied upon to give quality patient care while working in a profoundly distressing condition. The proof from distributed research focuses to explicit determinants and relates of employment satisfaction and efficiency. Different investigations have set up that disappointment with one's activity may result in higher worker turnover, non-attendance, lateness and complaints. Enhanced employment satisfaction, then again, results in expanded profitability.³

Each individual has one of a kind needs and wants that should be fulfilled, which are identified with the conduct they display, and these assume a noteworthy job in their inclinations in various territories, for example, their work environment. Social, social and occupation factors all impact workers' conduct.

Objectives of the research study

- To identify the factors influencing the job satisfaction among healthcare workers
- To determine the level of job satisfaction among healthcare workers

LITERATURE REVIEW

Mathauer et al, 2006, explored about the Job satisfaction is important in anticipating contexts accuracy, motivational and as well as workers inspirational elements.⁴ In the event that inspiration is characterized as the readiness to apply and keep up exertion towards accomplishing authoritative objectives, at that point well-working frameworks should try to help factors, for example, assurance and satisfaction, which anticipate inspiration. A study of services of health in 29 nations demonstrated that low inspiration was viewed as the second most vital health workforce issue after staff shortages.

Researched about the Early hypothesis in specialist satisfaction and inspiration recognized pay as a "cleanliness" factor as opposed to an inspiration factor.⁵ This implies essential compensation satisfaction must be available to keep up continuous occupation satisfaction, yet this independent from anyone else won't give satisfaction and expanded measures of pay won't add to an expanding dimension of employment satisfaction. Be that as it may, some examination done in Africa proposes that pay increments and different upgrades in pay, with regards to exceedingly lacking pay and advantages, may to be sure add to workforce maintenance

As indicated work satisfaction can be accomplished when a worker winds up one with



the association, performs to the best of their capacity and shows responsibility; in addition, work satisfaction and execution are decidedly affected by remunerations.³ In addition, it was distinguished different components impacting work satisfaction, for example, the requirement for the board to make a situation that energizes worker contribution and oversees worry in the work environment.

As indicated in most South African organizations there is a low dimension of worker work satisfaction, bringing about an absence of pledge to execution and the accomplishment of authoritative objectives.⁶ In South Africa, human asset supervisors have work satisfaction and profitability at the highest priority on their rundown of concerns. This suggests work satisfaction influences representatives' execution and duty.

It is consequently basic that directors give careful consideration to workers' frames of mind as employment satisfaction can decay more rapidly than it creates. Administrators should be proactive in enhancing and keeping up representatives' life satisfaction and not just satisfaction in the workplace as employment satisfaction is a piece of life satisfaction, which means a person's life outside work may have an impact on one's emotions at work.⁷

The dimension of employment satisfaction crosswise over different gatherings may not be predictable, but rather could be identified with various factors. This enables supervisors to anticipate which bunches are probably going to show conduct related with disappointment. More established representatives are commonly happy with their employments despite the fact that this may change as their odds of headway get lessened and they confront the truth of retirement. The executives likewise will in general be happy with their employments, presumably because of better compensation, better working conditions and occupation content.⁸

As per Maslow's hypothesis (1970), individuals' needs run from an essential to an abnormal state. These necessities are available inside each person in a chain of importance, to be specific physiological, well being and security, social, status and self-realization needs. Inability to fulfill one need may affect the following dimension of need. Low request needs takes need before the higher request needs are actuated, with the goal that needs are fulfilled in arrangement. As indicated by this hypothesis, individuals who are attempting to endure are less worried about requirements on the more elevated amounts than individuals who have time and vitality to know about more elevated amount needs.

Cleanliness factors are highlights of the activity, for example, strategies and practices, compensation, advantages and working conditions, comparing to Maslow's lower request of requirements. Enhancing these elements may diminish work disappointment and, in this manner, expanding of inspirations. Deficient cleanliness components may prompt disappointment, and yet sufficient cleanliness factors don't really prompt employment satisfaction. Cleanliness factors should be attached first, and the inspirations can pursue. Associations can't stand to overlook cleanliness factors as representatives will be commonly troubled and consequently prone to look for different chances, while unremarkable workers may remain on, and trade off the association's prosperity.

Bergh and Theron (2000) portray this model as an intuitive model that creates representatives and the workplace to accomplish most extreme fit in the workplace. The model affirms that the activity ought to be intended to have attributes to empower conditions for high inspiration, satisfaction and execution. There are five center attributes of the activity that impact workers' conduct and frame of mind, specifically, expertise assortment, errand character, undertaking hugeness, self-sufficiency and input. The

connection between center occupation qualities and work results is directed by representatives' development require quality, learning, expertise, and setting satisfaction, accordingly the connection between center employment attributes and work results may vary.

This hypothesis accentuates the correlation of existing conditions against some standard by utilizing the connection between two factors (sources of info and results). Information sources are what an individual adds to a trade, while results speak to what an individual gets from a trade. Value hypothesis recommends that people appoint loads to different data sources and results as per their very own impression of relative significance. As per Dolea and Adam,⁹ value hypothesis is a procedure of occupation satisfaction that centers around people's impression of how decently they are dealt with contrasted with others. This suggests, if individuals see their treatment as less good than that of others with whom they think about themselves, they are probably going to be less persuaded to perform better. This hypothesis subsequently places that individuals contrast the proportion of their yields with contributions with the proportion of yields to contributions of others.

DATA AND METHODOLOGY

Present research study was descriptive and quantitative in nature, so descriptive. This research was conducted in the DHQ hospital Toba Tek Singh. For this purpose, a questionnaire was developed by using the five likert scale. Data was collected randomly from 168 nurses working in the hospital. Briefly interview survey method was used for the collection of data. The nurse's questionnaires consisted on different questions. Each item has five response options like strongly disagree, disagree, agree, neutral and strongly agree against their perceptions and experiences.

RESULTS AND DISCUSSION

Above table shows the results of reliability statistics of Cronbach's Alpha test. The reliability

of is .812 which is greater than .7 which showed the reliability.

The results revealed that respondents who have age 21 to 30 years are 86, between age 31-40 years age are 66 and 16 nurses age is greater than the 40

Table 4.1 Cronbach's Alpha Reliability Statistics

Cronbach's Alpha Reliability Statistics	No; of Items
.812	22

Table 1 Demographic Information

Demographic Information	Results		
	Frequency	%	
Age	21-30 years	86	51.2
	31-40 years	66	39.3
	Above 40	16	9.5
Marital Status	Single	76	45.2
	Married	85	50.6
	Widow	2	1.2
	Divorced	5	3.0
Job Status	Doctor	31	18.5
	Nurse	125	74.4
	Other	12	7.1
Experience	1-5 hours	86	51.2
	6-10 hours	49	29.2
	Above 10 hours	33	19.6

Table 2. Factors Influencing the Job Satisfaction among Healthcare professionals

Statements	Strongly disagree	disagree	Neutral	Agree	Strongly agree
	Freq %	Freq %	Freq %	Freq %	Freq %
If I could choose the career again, I would make the same decision	6 3.6	11 6.5	19 11.3	77 45.8	55 32.7
My job has more advantages than disadvantages	2 1.2	9 5.4	26 15.5	83 49.4	48 28.6
My income is a reflection of the work I do	2 1.2	12 7.1	40 23.8	71 42.3	43 25.6
There is no personal growth in my work	1 0.6	38 22.6	53 31.5	63 37.5	13 7.7
I would like to change my career	27 16.1	53 31.5	48 28.6	26 15.5	14 8.3
In general, I am satisfied with my work	3 1.8	44 26.2	59 35.1	52 31	10 5.9
I have sufficient opportunity to develop in my profession	4 2.4	25 14.9	88 52.4	45 26.8	6 3.6



The variation in my work is satisfactory	5 3	21 12.5	70 41.7	69 41.1	3 1.8
My work is mentally stimulating	1 .6	9 5.4	65 38.7	82 48.8	11 6.5
I experience frustration in my work due to limited resources	1 .6	13 7.7	47 28	82 48.8	25 14.9
Too much is expected from me at work	3 1.9	12 7.1	35 20.8	75 44.6	43 25.6
I enjoy the status in the community as a healthcare professional	3 1.9	20 11.9	83 49.4	53 31.5	9 5.4
I am entrusted with great responsibility in my work	6 3.1	28 16.7	68 40.5	57 33.9	9 5.4
I have sufficient time for each patient	46 27.4	70 41.7	21 12.5	26 15.5	5 2.4
My patients co-operate because they understand my working conditions	55 32.7	58 34.5	32 19	20 11.9	3 1.8
There are many non-clinical tasks that I have to do	7 4.2	25 14.9	48 28.6	75 44.6	13 7.7
I have enough freedom to decide how I do my work	14 8.3	62 36.9	64 38.1	23 13.7	5 3
I spend more time doing what could be done by others with less experience & training	10 6	82 48.8	58 34.5	17 10.1	1 .6
I have a good working relationship with my colleagues	2 1.2	23 13.7	53 31.5	71 42.3	19 11.3
There is an atmosphere of co-operation between staff & management	1 .6	25 14.9	62 36.9	71 42.3	9 5.4
There is a clear channel of communication at my workplace	3 1.9	18 10.7	65 38.7	73 43.5	9 5.4
I am happy with the management style in my hospital	3 1.9	17 10.1	43 25.6	73 43.5	32 19

years.76 nurses were found single, 85 nurses and doctors were married, 2 were widow and 5 nurses and doctors were those who was divorced. The showed that data was collected from 31 doctors, 125 nurses took participation as

a respondent to provide their valuable information to researcher and 12 respondents were included in others means they were neither doctors nor nurses. The respondent's whose experience is 1 to 5 years are 86. The respondents whose experience is 6-10 years are 49 and the respondents whose experience is more than 10 years are 33. Mostly respondents having experience between 1 to 5 years.

The results indicated that 6 respondents strongly disagreed with the given statement that they choose the same profession again if they have chance and gain selection opportunity to choose profession in life. 11 respondents disagreed with the given statement; 19 respondents marked the neutral response. 77 respondents agreed with statement and only 55 respondents agreed with the given statement. 2 respondents strongly disagreed with the given statement that they their job has more advantages and less disadvantages. 9 respondents disagreed with the given statement; 26 respondents marked the neutral response. 83 respondents agreed with statement and only 48 respondents agreed with the given statement. 2 respondents strongly disagreed with the given statement that their income reflects what they do. 12 respondents disagreed with the given statement; 40 respondents marked the neutral response. 71 respondents agreed with statement and only 43 respondents agreed with the given statement. 1 respondent strongly disagreed with the given statement that there is no personal growth in my work. 38respondents disagreed with the given statement; 53 respondents marked the neutral response. 63 respondents agreed with statement and only 13 respondents agreed with the given statement. 27 respondents strongly disagreed with the given statement that they would not like to change profession. 53respondents disagreed with the given statement; 48 respondents marked the neutral response. 26 respondents agreed with statement and only 14 respondents agreed with

the given statement. 3 respondents strongly disagreed with the given statement that they satisfied with their work. 44 respondents disagreed with the given statement; 59 respondents marked the neutral response. 52 respondents agreed with statement and only 10 respondents agreed with the given statement. 21 respondents disagreed with the given statement; 70 respondents marked the neutral response. 69 respondents agreed with statement and only 3 respondents agreed with the given statement.

9 respondents disagreed with the given statement; 65 respondents marked the neutral response. 82 respondents agreed with statement and only 11 respondents agreed with the given statement. 1 respondent strongly disagreed with the given statement that they felt frustrated during the work. 13 respondents disagreed with the given statement; 47 respondents marked the neutral response. 82 respondents agreed with statement and only 25 respondents agreed with the given statement. 12 respondents disagreed with the given statement; 35 respondents marked the neutral response. 75 respondents agreed with statement and only 43 respondents agreed with the given statement. 83 respondents marked the neutral response. 53 respondents agreed with statement and only 9 respondents agreed with the given statement. 28 respondents disagreed with the given statement; 68 respondents marked the neutral response. 57 respondents agreed with statement and only 9 respondents agreed with the given statement. 70 respondents disagreed with the given statement; 21 respondents marked the neutral response. 26 respondents agreed with statement and only 5 respondents agreed with the given statement.

55 respondents strongly disagreed with the given statement that patients cooperate with them. 58 respondents disagreed with the given statement; 32 respondents marked the neutral

response. 20 respondents agreed with statement and only 3 respondents agreed with the given statement. 7 respondents strongly disagreed with the given statement that non-clinical tasks also done by them. 25 respondents disagreed with the given statement; 48 respondents marked the neutral response. 75 respondents agreed with statement and only 13 respondents agreed with the given statement. 62 respondents disagreed with the given statement; 64 respondents marked the neutral response. 23 respondents agreed with statement and only 5 respondents agreed with the given statement. 82 respondents disagreed with the given statement; 58 respondents marked the neutral response. 17 respondents agreed with statement and only 1 respondent agreed with the given statement. 23 respondents disagreed with the given statement; 53 respondents marked the neutral response. 71 respondents agreed with statement and only 19 respondents agreed with the given statement. 25 respondents disagreed with the given statement; 62 respondents marked the neutral response. 71 respondents agreed with statement and only 9 respondents agreed with the given statement. 18 respondents disagreed with the given statement; 65 respondents marked the neutral response. 73 respondents agreed with statement and only 9 respondents agreed with the given statement. 17 respondents disagreed with the given statement; 43 respondents marked the neutral response. 73 respondents agreed with statement and only 32 respondents agreed with the given statement.

CONCLUSION

The study showed clear results that there were lots of factors affecting the job satisfaction. These factors include but not limited to working environment, frustration, income, career selection, experience, education, atmosphere, co-operation etc. these factors also affecting the patients care. 77% nurses agreed if they could choose the career again, they would make the same decision. 79% told that this profession has

more advantages than disadvantages. 70%, however, told that there are too much expectations from nurses during duty

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