

To Study The Correlation Between Self Job Satisfaction And Other Dimensions Of Nurses Working In Public & Private Hospitals

¹*Hem Raj*

¹*Research Scholar, Ph.D (Mgt), Sri Sai University (Himachal Pradesh)*

²*K.K. Parmar*

²*Head of Department. (Mgt), Sri Sai University, Palampur (Himachal Pradesh)*

ABSTRACT : The present study was related to the job satisfaction among nurses of Himachal Pradesh working in both public and private hospitals. The main objective of the present study was to measure the level of job satisfaction among nurses in hospitals. A structured questionnaire was used to collect the data with a convenient sample size of 480 nurses (240 nurses from private and 240 from public) were taken from both public and private hospitals. In the present study, Pearson correlation technique was used to identify the correlation between self satisfaction and other dimensions of nurses working in public and private hospitals of Himachal Pradesh with the help of statistical package of social sciences (SPSS) software.

Results: A positive correlation was found between job satisfaction of nurses working in public and private hospitals and other variables i.e. (*Ability Utilization, Achievement, Activity, Advancement, Authority, Organizational Policies and Practices, Compensation, Co-workers, Creativity, Independence, Moral Values, Recognition, Responsibility, Security, Social Service, Social Status, Supervision-Human Relations, Supervision-Technical, Variety, Working Conditions*) at the 0.01 significance level.

Key words: *Job Satisfaction; Nurses; Healthcare; Hospitals*

1 INTRODUCTION: Nursing has been known as the oldest of the arts and the youngest of the profession in the modern time. Job satisfaction greatly determines the productivity and efficiency of human resource for health. It literally means: ‘the extent to which health professionals like or dislike of job’. Job satisfaction is said to be linked with employee’s work environment, job responsibilities and powers and time pressure among various health professionals. As such it affects employee’s organizational commitment and consequently the quality of health services (Bahalkani, H.A., et al 2011)¹

Nurses are the pillar of healthcare and they play a vital role in healthcare industry. Indeed they are important link between the physician, therapists, patients' family and other paramedical staff. The complete involvement of a nurse results in inter recovery of the patient right from the admission of the patients to the discharge of patient, nurses in there care, guidance and information. Hospital is a health care entity of health care delivery system besides an organization for the training of health worker and nurses. (Malhotra, A.K. 2009)²

Job satisfaction in nursing profession is essential for the patients and hospitals because satisfaction yields the quality outcomes. Shortage of patients and nurses ratio creates dissatisfaction. On the other hand nurses job satisfaction results in increased productivity, profits, loyalty and turnout (Newman, K., & et.al.2001).³

Job satisfaction is highly important for both employees and employer. Generally in most of the countries like Australia and Canada are facing high shortage of nurses and as per estimates 13500 nurses and 113000 nurses each year were needed to meet the nursing services. Similarly 20% nursing workforce is estimated to be below the requirements in USA (Reineck, C. & Furino, A. 2005).⁴

In the era of Liberalization, Privatization Globalization and Modernization, we need skilful, technical trained manpower which plays significant role in the hospital to provide health services throughout the world but only, these determinants cannot make the organization profitable and successful.

2 REVIEW OF LITERATURE: The undernoted review of literature can help to draw significant conclusions and a guiding map for this study. Some of the important studies have been reviewed as under:-

Hoppock, R (1935) in a study of job satisfaction observed that degree of their satisfaction with their jobs indicated relationships between job satisfaction and emotional adjustment, religion, social status, interest, age, fatigue, size of community and other factors. The results showed that proportion of dis-satisfied workers is probably less than a third.⁵

In a similar study Nahm, H. (1940) found in his research on job satisfaction of nursing indicated that 60% of the nurses had a high degree of job satisfaction, 20% were dissatisfied and 20% had failed to make an adjustment to the work situation. The significant factors affecting

satisfaction and dissatisfaction were interest in the work, general adjustment of the individual, relationship with superiors, family and social relationships, hours of work, income, opportunities for growth and ambitions.⁶

Carmel, Sara, et al. (1988) found in their research that on nurses autonomy and job satisfaction that Nurses' autonomy is structurally limited by physicians' close supervision and control. A prolonged physicians' strike in Israel in 1983 created a special situation where for three months nurses had to provide primary health care services without physicians. This study, undertaken at the end of the strike, focuses on nurses' comparative perceptions of autonomy and job satisfaction with relation to role performance during the strike and in usual work conditions. The strike situation increased the normal work load of the nurses, but it also gave many nurses the opportunity to initiate and carry out special programs in their clinics and communities.⁷

The majority of nurses reported that in general they are satisfied with their work and perceived it as autonomous. The increase in routine as well as self-initiated activities was found to be positively but weakly correlated with an increase in job satisfaction and in the perception of role autonomy during the strike.⁸

Yamashita, M. (1995) found in their study on job satisfaction among Japanese nurses reported a positive correlation between age and years of experience and its various factors of job satisfactions like working conditions and salary. In the above, study only four variables are studied and correlated i.e. age, years of experience; working conditions and salary, whereas the present study is also intended to correlate other factors like demographic, job security, relationship with fellow workers, relationship between superior and subordinate, recognition, quantum of work, rate of pay, working hours, shift of work, salary, working environment, etc.⁹

Knoop, R. (1995) found in their study on relationships among job involvement, job satisfaction and organizational commitment for nurses found that involvement in work and job of nurses was not related to overall satisfaction but only to two specific facets satisfaction with work and promotion opportunities. In contrast, the degree of relationship between overall and various facets of satisfaction and commitment and between involvements was moderately high.¹⁰

Ajamieh, A. R. A., et al. (1996) revealed in their research on Job satisfaction correlates among Palestinian nurses in the West Bank found that significant relationships between job

satisfaction and the demographic characteristics of marital status, distance travelled to work, number of years the nurse worked as an registered nurses, and extended family responsibilities.¹¹

Al-Aameri, A. S. (2000) found in their study that nurses in public hospitals are slightly satisfied and committed to their hospitals. Besides, satisfied nurses tend to have a higher degree of commitment than less satisfied ones. A strong positive correlation between job satisfaction and organizational commitment was also found.¹²

In similar study, Healy, C. M., & McKay, M. F. (2000) found in their research on nursing stress: the effects of coping strategies and job satisfaction in a sample of Australian nurses, that a significant positive relationship between nursing stress and mood disturbance, and a significant negative relationship between nursing stress and job satisfaction. The use of avoidance coping and the perception of work overload were found to be significant predictors of mood disturbance. No evidence was found to indicate that the use of humour had moderating effect on the stress - mood relationship but there was support for the influence of job satisfaction upon relationship.¹³

Fako, T. T., & Forchen, N. (2000) in their paper job satisfaction among nurses in Botswana examines the extent of job satisfaction and dissatisfaction in hospitals, clinics and health posts in Botswana. The analyses explored the effects of background variables, work context variables, resources variables, recognition and support variables, and union membership on job satisfaction. The findings showed that nurses were generally not satisfied with their jobs, age, basic level of education, level of nursing training, level of income, extent of satisfaction with income, type of health facility, adequacy of telecommunication facilities and overall health since posting were found to have strong and positive associations with job satisfaction. Adequacy of equipment, recognition from supervisors, and overall health before posting had moderate and positive effects on job satisfaction. Satisfaction with current workstation had a positive but weak relationship with job satisfaction. No relationship was found between job satisfaction and other work environment variables such as adequacy of transport, opportunity for in-service training and relationships with peers. Similarly, workload was not found to be an important determinant of job satisfaction among nurses, nor was community involvement and membership of nursing organizations.¹⁴

Shields MA, Ward M. (2001) found in their research on improving nurse retention in the National Health Service in England: the impact of job satisfaction on intentions to quit that nurses who reported overall dissatisfaction with their jobs have a 65% higher probability of intending to quit than those reporting to be satisfied. However, dissatisfaction with promotion and training opportunities are found to have a stronger impact than workload and pay. Recent policies, which focus heavily on improving the pay of all NHS nurses, will have only limited success unless they are accompanied by improved promotion and training opportunities. Better retention will, in turn, lead to reduced workload.¹⁵

El Gilany, A., & Al Wehady, A. (2001) observed in their research on job satisfaction of female Saudi nurses that more than 87% and 92% of nurses were satisfied with their work place and the role assigned respectively. The majority of them preferred one-shift duty because of social and family obligations. To increase their satisfaction there is a need to improve social attitude towards the nursing profession and to provide more comfortable working conditions.¹⁶

Finn, C (2001) found in his paper on autonomy: an important component for nurses' job satisfaction that the actual level of satisfaction with autonomy was 4.6, on a scale of 1 for very dissatisfied to 7 for very satisfied. The mean for job satisfaction was 4.3, with the job components, professional status and interaction. There was discontentment with the other two job components, which were task requirements and organizational policies. Demographic comparisons showed that nurses who were preceptors had significantly less job satisfaction than the other nurses at the hospital.¹⁷

3 OBJECTIVE OF THE STUDY: To examine the correlation between job satisfaction with other dimensions of nurses in Public & Private hospitals.

4 RESEARCH METHODOLOGY: The state of Himachal Pradesh located in Northern part of India in the lap of Himalayan. Due to hilly state the population of Himachal Pradesh is 68, 70,000. The state was divided into four zones to provide health services. The respondents (nurses) for this study were selected for government and private hospital in Himachal Pradesh. For the current study sample size was taken from four zones of Himachal Pradesh. Convenient sampling techniques were used to collect the data from both public and private hospitals in Himachal Pradesh. For research purpose 240 nurses were taken from private hospitals and 240

nurses from public hospitals. The Total sample size was 480 nurses from both public and private sector hospitals in the state, which comes to about 40 % sample.

Exclusion criteria- < 20 bedded hospital

Inclusion criteria- > 20 bedded hospital

The data was collected from the both public and private hospitals nurses by way of a structured questionnaire. For the purpose of data collection a well design structured questionnaire namely Minnesota Satisfaction Questionnaire (MSQ Long Form) was used to collected the data from both public and private hospitals nurses.

41 RELIABILITY AND VALIDITY: Reliability means degree of accuracy in collected data. It shows the consistency of results. For the measurement of reliability the most common technique is 'Cronbach Alpha', which is used in this study. The data was collected from the both public and private hospitals nurses by way of a structured questionnaire. For the purpose of data collection a well design structured questionnaire namely Minnesota Satisfaction Questionnaire (MSQ Long Form) was used to collected the data from both public and private hospitals nurses. For the research purpose we have considered 20 variables i.e. (*Ability Utilization, Achievement, Activity, Advancement, Authority, Organizational Policies and Practices, Compensation, Co-workers, Creativity, Independence, Moral Values, Recognition, Responsibility, Security, Social Service, Social Status, Supervision-Human Relations, Supervision-Technical, Variety, Working Conditions*). We have correlated these variables with each other after testing the hypothesis.

5 DATA ANALYSIS AND INTERPRETATION: Correlation between job satisfactions and other dimension of job satisfaction of nurses working in Public and Private Hospitals (Total sample 480)

| Variables | Correlation(r) | p value |
|----------------------|--------------------|---------|
| General Satisfaction | 1 | |
| Ability Utilization | 0.35 ^{**} | 0.00 |
| Achievement | 0.13 ^{**} | 0.00 |
| Activity | 0.36 ^{**} | 0.00 |
| Advancement | 0.49 ^{**} | 0.00 |
| Authority | 0.18 ^{**} | 0.00 |

| | | |
|---------------------------------------|--------------------|------|
| Organizational Policies and Practices | 0.18 ^{**} | 0.00 |
| Compensation | 0.46 ^{**} | 0.00 |
| Co-worker | 0.38 ^{**} | 0.00 |
| Creativity | -0.004 | 0.93 |
| Independence | 0.28 ^{**} | 0.00 |
| Moral Value | 0.23 ^{**} | 0.00 |
| Recognition | 0.34 ^{**} | 0.00 |
| Responsibility | 0.22 ^{**} | 0.00 |
| Security | 0.30 ^{**} | 0.00 |
| Social Service | 0.12 ^{**} | 0.00 |
| Social Status | 0.13 ^{**} | 0.00 |
| Supervision Human Relation | 0.14 ^{**} | 0.00 |
| Supervision Technical | 0.12 ^{**} | 0.00 |
| Variety | 0.20 ^{**} | 0.00 |
| Working Condition | 0.09 [*] | 0.04 |

The above table represents the correlation between general satisfactions and other dimension of job satisfaction of nurses working in public and private hospitals

Correlation - General Satisfaction and Utilization

When general satisfaction of nurses correlated with ability utilization, we found significant and positive correlation ($r=0.35$, $p<0.01$) at 0.01 level of significance. Therefore, *hypothesis H₁* that there exists no significant relationship between general satisfaction and ability utilization of working nurses in public and private hospitals was rejected.

Correlation - General Satisfaction and Achievement

When general satisfaction of nurses correlated with achievement, we found significant and positive correlation ($r=0.13$, $p<0.01$) at 0.01 level of significance. Therefore, *hypothesis H₂* that there exists no significant relationship between general satisfaction and achievement of working nurses in public and private hospitals was rejected.

Correlation - General Satisfaction and Activity

When general satisfaction of nurses correlated with activity, we found significant and positive correlation ($r=0.36$, $p<0.01$) at 0.01 level of significance. Therefore, *hypothesis H₃* that there exists no significant relationship between general satisfaction and activity of working nurses in public and private hospitals was rejected.

Correlation - General Satisfaction and Advancement

When general satisfaction of nurses correlated with advancement, we found significant and positive correlation ($r=0.49$, $p<0.01$) at 0.01 level of significance. Therefore, *hypothesis H₄* that there exists no significant relationship between general satisfaction and advancement of working nurses in public and private hospitals was rejected.

Correlation - General Satisfaction and Authority

When general satisfaction of nurses correlated with authority, we found significant and positive correlation ($r=0.18$, $p<0.01$) at 0.01 level of significance. Therefore, *hypothesis H₅* that there exists no significant relationship between general satisfaction and authority of working nurses in public and private hospitals was rejected.

Correlation - General Satisfaction and Organizational Policies and Practices

When general satisfaction of nurses correlated with org Policies and Practices, we found significant and positive correlation ($r=0.18$, $p<0.01$) at 0.01 level of significance. Therefore, *hypothesis H₆* that there exists no significant relationship between general satisfaction and organizational Policies and Practices of working nurses in public and private hospitals was rejected.

Correlation - General Satisfaction and Compensation

When general satisfaction of nurses correlated with compensation, we found significant and positive correlation ($r=0.46$, $p<0.01$) at 0.01 level of significance. Therefore, *hypothesis H₇* that there exists no significant relationship between general satisfaction and compensation of working nurses in public and private hospitals was rejected.

Correlation - General Satisfaction and Co-worker

When general satisfaction of nurses correlated with co-worker, we found significant and positive correlation ($r=0.38$, $p<0.01$) at 0.01 level of significance. Therefore, *hypothesis H₈* that there

exists no significant relationship between general satisfaction and co-worker of working nurses in public and private hospitals was rejected.

Correlation - General Satisfaction and Creativity

When general satisfaction of nurses correlated with creativity, we found non significant and negative correlation ($r=-0.004$, $p>0.05$) at 0.05 level of significance. Therefore, *hypothesis H₉* that there exists no significant relationship between general satisfaction and creativity of working nurses in public and private hospitals was accepted.

Correlation - General Satisfaction and Independence

When general satisfaction of nurses correlated with independence, we found significant and positive correlation ($r=0.28$, $p<0.01$) at 0.01 level of significance. Therefore, *hypothesis H₁₀* that there exists no significant relationship between general satisfaction and independence of working nurses in public and private hospitals was rejected.

Correlation - General Satisfaction and Moral Value

When general satisfaction of nurses correlated with Moral value, we found significant and positive correlation ($r=0.23$, $p<0.01$) at 0.01 level of significance. Therefore, *hypothesis H₁₁* that there exists no significant relationship between general satisfaction and Moral value of working nurses in public and private hospitals was rejected.

Correlation - General Satisfaction and Recognition

When general satisfaction of nurses correlated with recognition, we found significant and positive correlation ($r=0.34$, $p<0.01$) at 0.01 level of significance. Therefore, *hypothesis H₁₂* that there exists no significant relationship between general satisfaction and recognition of working nurses in public and private hospitals was rejected.

Correlation - General Satisfaction and Responsibility

When general satisfaction of nurses correlated with responsibility, we found significant and positive correlation ($r=0.22$, $p<0.01$) at 0.01 level of significance. Therefore, *hypothesis H₁₃* that there exists no significant relationship between general satisfaction and responsibility of working nurses in public and private hospitals was rejected.

Correlation - General Satisfaction and Security

When general satisfaction of nurses correlated with security, we found significant and positive correlation ($r=0.30$, $p<0.01$) at 0.01 level of significance. Therefore, *hypothesis H₁₄* that there exists no significant relationship between general satisfaction and security of working nurses in public and private hospitals was rejected.

Correlation - General Satisfaction and Social Services

When general satisfaction of nurses correlated with social services, we found significant and positive correlation ($r=0.12$, $p<0.01$) at 0.01 level of significance. Therefore, *hypothesis H₁₅* that there exists no significant relationship between general satisfaction and social services of working nurses in public and private hospitals was rejected.

Correlation - General Satisfaction and Social Status

When general satisfaction of nurses correlated with social status, we found significant and positive correlation ($r=0.13$, $p<0.01$) at 0.01 level of significance. Therefore, *hypothesis H₁₆* that there exists no significant relationship between general satisfaction and social status of working nurses in public and private hospitals was rejected.

Correlation - General Satisfaction and Supervision Human Relation

When general satisfaction of nurses correlated with supervision human relation, we found significant and positive correlation ($r=0.14$, $p<0.01$) at 0.01 level of significance. Therefore, *hypothesis H₁₇* that there exists no significant relationship between general satisfaction and supervision human relation of working nurses in public and private hospitals was rejected.

Correlation - General Satisfaction and Supervision Technical

When general satisfaction of nurses correlated with supervision technical, we found significant and positive correlation ($r=0.12$, $p<0.01$) at 0.01 level of significance. Therefore, *hypothesis H₁₈* that there exists no significant relationship between general satisfaction and supervision technical of working nurses in public and private hospitals was rejected.

Correlation - General Satisfaction and Variety

When general satisfaction of nurses correlated with variety, we found significant and positive correlation ($r=0.20$, $p<0.01$) at 0.01 level of significance. Therefore, *hypothesis H₁₉* that there

exists no significant relationship between general satisfaction and variety of working nurses in public and private hospitals was rejected.

Correlation - General Satisfaction and Working Condition

When general satisfaction of nurses correlated with working condition, we found significant and positive correlation ($r=0.09$, $p<0.05$) at 0.05 level of significance. Therefore, *hypothesis H₂₀* that there exists no significant relationship between general satisfaction and working condition of working nurses in public and private hospitals was rejected.

6 RESULTS AND DISCUSSIONS

In current study, it observed that general satisfaction of nurses correlated with ability utilization ($r=0.35$, $p<0.01$), achievement ($r=0.13$, $p<0.01$), activity ($r=0.36$, $p<0.01$), advancement ($r=0.49$, $p<0.01$), authority ($r=0.18$, $p<0.01$), Org. Policies and Practices ($r=0.18$, $p<0.01$), compensation ($r=0.46$, $p<0.01$), co-worker ($r=0.38$, $p<0.01$), creativity ($r=-0.004$, $p>0.05$), independence ($r=0.28$, $p<0.01$), Moral value ($r=0.23$, $p<0.01$), recognition ($r=0.34$, $p<0.01$), responsibility ($r=0.22$, $p<0.01$), job security ($r=0.30$, $p<0.01$), social services ($r=0.12$, $p<0.01$), social status ($r=0.13$, $p<0.01$), supervision human relation ($r=0.14$, $p<0.01$), supervision technical ($r=0.12$, $p<0.01$), variety ($r=0.20$, $p<0.01$), working condition ($r=0.09$, $p<0.05$). Since the value of r is less than 1, the variables are correlated with each other.

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