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ASSESSMENT OF FACTORS AFFECTING JOB SATISFACTION AND ITS ASSOCIATION WITH ANTICIPATED TURNOVER: THE CASE OF HEALTH PROFESSIONALS IN ARSI ZONE, OROMIA REGION, ETHIOPIA 2016

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Abstract *The purpose of the present study is to assess factors affecting job satisfaction and its association with anticipated turnover the case of health professionals in Arsi Zone. Descriptive and analytical cross sectional research designs were employed in this study. Primary data was collected using questionnaires from 305 respondents working in selected health centres and hospitals. The collected data was analysed using both descriptive statistics and inferential statistics. The results of the data analysis showed that not enough salary, poor relationship with the staff, non-availability of medical equipment and drugs, and poor training opportunity were found significantly associated with job dissatisfaction. Furthermore, job satisfaction was found to be significantly associated with intention to leave their current job (p value 0.000). From this, it is concluded that different factors affect employee job satisfaction and non-satisfied employees have an intention to leave their jobs. Based upon the findings, recommendations like the government may give attention to the salary of health professionals, managers of health facilities work towards creating good relationship among staffs, and health facilities in collaboration with pharmaceutical fund and supply agent have to fulfill the necessary drugs and medical equipment were forwarded.*

Keywords: *Job Satisfaction, Health Professional, Arsi Zone*

Background

Job satisfaction is the degree to which employees have a positive affective orientation towards employment by an organisation. Job satisfaction has been conceptualised both globally (general satisfaction with a job) and dimensionally (satisfaction with specific dimensions of a job such as remuneration, promotion, and relationships with colleagues). Job satisfaction has been linked to health worker motivation, stress, burnout, absenteeism, intention to leave, and turnover (Tella, Ayeni, & Popoola, 2007).

The evidence from researches shows correlations of job satisfaction and productivity. Dissatisfaction with one's job may result in higher employee turnover, absenteeism, slowness, and grievances. On the other hand, improved job satisfaction results in increased productivity (Chaulagain & Khadka, 2012). Regarding this issue, a study conducted in six African countries has shown significant numbers of key health professionals leaving from the public sector to the private sector within the countries or leaving the countries altogether for jobs abroad (Awases, Gbary Nyoni, & Chatara, 2003). According to this study, between 26% and 68% of the respondents declared an intention to migrate and their profile indicated that most of them are in productive age groups of young upcoming professionals in whom heavy investments have been made (Awases *et al*., 2003).

Statement of the Problem

Job satisfaction is an essential element for the maintenance of the workforce of any organisation. It affects the lives of all workers including health professionals. It is also a factor that determines whether an employee will remain in a position or seek work elsewhere. Although turnover provides the organisation with new ideas and is a normal process, a high turnover rate leads to the inability of an organisation to provide quality care (Sarker, 2013; Eker, Tuzun, Dasakapan, & Surenkok, 2004).

Given the critical role that healthcare professionals play in determining the efficiency, effectiveness, and sustainability of healthcare systems, it is paramount to understand what motivates them and to what extent they are satisfied with the organisation and other contextual variables. This is important to maximise employee productivity by considering and

addressing the factors that compromise their job satisfaction (Brunetto & Farr-Wharton, 2002).

Studies done in three African countries (Tanzania, Malawi, and South Africa) showed a correlation between health workers job satisfaction and intention to leave their jobs (Blaauw *et al*., 2013). Beside, studies done among healthcare professionals in Jimma University, specialised hospitals and public hospitals in west Shoa zone have identified determinants of health professional job satisfaction (Yami, Hamza, Hassen, Jira, & Sudhakar, 2012; Mengistu & Bali, 2015).

From the above studies, it is understood that healthcare services and health professionals are the backbones of every country's health system. According to Arsi Zone progressive human resource report, 25% of health professionals have left from public health facilities in the zone (Arsi Zone Health Office Report, 2007). On the other hand, the coverage of the zonal health facilities has increased from 25% to 85% in the last 10 years (Arsi Zone Health Office Report, 2007). Despite increase in the number of health facilities, the health professional coverage of the zone is 80% (Arsi Zone Health Office, 2008) where human power is the backbone for the provision of quality healthcare for the population. Given this fact, as far as my knowledge goes, no study was conducted on this area in Arsi Zone. Given the noticeable lack of studies addressing factors affecting job satisfaction and its association with intent to leave among different healthcare professionals in public health facility setting, this study has attempted to address this issue among health professionals in public health facilities found under Arsi Zone health office.

Objectives of the Study

General Objective

- The general objective of this study is to assess factors affecting job satisfaction and its association with anticipated turnover among health professionals in Arsi Zone.

Specific Objectives

- Assess factors affecting job satisfaction among health professionals in Arsi Zone.
- To see the association between job satisfaction and anticipated employee turnover.

Research Methodology

Study Area and Period

The study was conducted in public health facilities found in Arsi zone from 1- 15 April 2016. Arsi zone has 25 rural and one urban woreda health offices under it. Currently there are 102 fully functional health centres and four hospitals (Arsi Zone Health Office, 2016).

Study Design

A cross-sectional quantitative descriptive and analytical study was conducted on health professionals working in selected health facilities under Arsi zone health office.

Research Population, Sampling Techniques and Sample Size Calculation

The population of the study was health professionals working in selected public health facilities found under Arsi zonal health office, who were on their job during data collection time. Those health professionals included nurses, pharmacists, laboratory technicians, mid-wives, anesthetists, and physicians.

Sample size was calculated using single population proportion sample size calculation formula.

$$n - \frac{(Z_{\alpha/2})^2 P(1-p)}{d^2}$$

where n = minimum sample size

P = estimated proportion of health professional's job satisfaction (0.35) is taken from similar studies done in west Shoa Zone, Oromia, Ethiopia.

d = the margin of sampling error tolerated (5%),

$Z\alpha/_2$ = the standard normal variable at 1−α % Confidence level (5% = 1.96)

$$n = (1.96)^2 * \frac{0.35(1-0.35)}{(0.05)^2} = 349$$

Adding 10% of non-response rate the total sample size required for this study was 384.

By using correction formula, n final=n/ 1+n/N,

$nfinal$=384/1+ 384/1495 =305 is the final number of health professionals who was included in the study.

Data Collection Procedure

Primary data from health professionals working in public health facilities found in Arsi Zone were used. Data was collected using self-administered questionnaires after explaining the purpose of the study and getting consent. The data collection tool was developed by the principal investigator in English. The content of the questionnaire included socio-demographic characteristics, lists of factors for job satisfaction.

Data Quality Control

To check the logical order and understandability of the questionnaire a pretest was conducted on 5% of the sample at Assela Health Centre. Timely and continuous supervision was made by the principal investigator and supervisors. During the data collection and at the end of each day, the data was checked for the consistency and completeness.

Variables

Dependent Variable

- Job satisfaction

Independent Variable for Job Satisfaction

Demographic Characteristic

- Age
- Educational level
- Marital status
- Religion
- Residence

Job Design Related Factors

- Work burden
- Professional qualification
- Service years
- Availability of medical equipment

Income Related Satisfaction

- monthly income

Working Environment Related factors

- Physical working environment

Relationships Related factor

- Relationship with the manager
- Relationship with the staff

Administration Related factor

- Recognition for the work
- Vacation time adjusted whenever needed

Different benefits related factors

- Training opportunity
- Pay for off – work job
- Different benefits

Methods of Data Analysis

The collected data was coded, entered, cleaned, and analysed in STATA version 13 (College Station, Texas 77845 USA).

In order to see the association of job satisfaction with other variables especially future turnover chi square test was used. Bivariate logistic regression was used to calculate crude odds ratio (COR) at 95 % CI for those independent variables with p value <=0.05 cut off point. The COR was used to show the magnitude and strength of association between independent variables and the dependent variable without considering for confounder and interaction with other variables. Association was significant at a two sided p- value <= 0.05 and 95% CI.

Multivariate logistic regression model was used for identifying factors associated with employee job satisfaction. The logistic regression model was built with back ward elimination method by taking variables with p value <= 0.05 during bi variate analysis. Finally, multicollinearity among independent variables in the final regression model was checked using variance inflation factor (VIF) and presence of multicollinearity was declared at VIF > 10.

Ethical Consideration

During the data collection, a letter from Arsi University and a cooperation letter from Arsi Zone Health Office were used as introductory means to get permission to collect data from health professionals in selected health facilities. The data collection processes were conducted by informing the respondents the right they have to participate or not in the research activities to respond the questionnaire.

Data Presentation, Analysis and Interpretation

Association of Job Satisfaction with Anticipated Turnover

Table 1: Chi Square Table Showing Association Between Employee Job Satisfaction and Anticipated Turnover

Job satisfaction	Anticipated turnover		Total	Chi Square	P value
	Leave the institution	Stay in the institution			
Satisfied	37	68	105	36.32	0.000
Not satisfied	142	58	200		
Total	176	126	305		

As shown in Table 1, employee job satisfaction and anticipated turnover are significantly associated (p value = 0.000).

Similar studies done in Jimma zone and West Shoa zone among health professionals have reported a significant association between intention to leave from their job and job satisfaction where professionals who were not satisfied in their jobs had the intention to leave their jobs (Mengistu & Bali, 2015; Kalifa, *et al*., 2016). In addition to these, studies conducted in different African countries (Papua New Guinea, Tanzania, Malawi, and South Africa) have identified a significant negative association between job satisfaction and intention to leave their current job where satisfied clients were not planned to leave their current work (p <0.05) (Blaauw *et al*., 2013; Delobelle *et al*., 2010; Jayasuriya).

Factors Affecting Employee Job Satisfaction at the Bivariate and Multivariate Logistic Regression

Table 2: Factors Associated with Employee Job Satisfaction at the Bivariate and Multivariate Logistic Regression

Variable		COR[95%CI]	AOR[95% CI]
Marital	Single	1	
	Married	1.66[1.02,2.70]*	
Sex	Male	1	
	Female	3.57[2.03,5.88]*	
Educational level	Diploma	1	1
	Degree and above	4.11[2.46,6.88] *	6.22[3.16,12.25] *
Relation with the manager	Very good	1	
	Good	2.23[1.32,3.78] *	
	No relation	9.82[2.84,33.89] *	
Salary	Good	1	1
	Poor	68.8[9.20,515.66]*	68.73[8.11,582.01] *
Relation with the staff	Very good	1	1
	Good	4.47[2.49,8.01]*	5.91[2.73,12.84] **
	No relation	1.75[0.42,7.21] ***	0.34[0.05,2.25] ***
Availability of drugs and medical equipment	Good	1	1
	Poor	3.35[1.42,7.89]*	9.19[2.97,28.42] **
	Not available	17.18[4.06,72.69]*	12.88[1.92,88.07]**
Training opportunity	Good	1	1
	Poor	3.38[1.85,8.17]*	3.45[1.45,8.18] **
	No training	3.31[1.84,5.94]*	1.89[0.89,3.99] ***
Recognition for the work done	Very good	1	
	Good	1.71[0.95,3.76] ***	
	Poor	6.95[2.60,18.59]*	
	No recognition	1.66[0.58,4.75] ***	
Skill use	Yes	1	
	No	10.73[3.26,35.40]*	
Vacation time adjusted when needed	Yes	1	
	No	2.07[1.28,3.36]*	
General work environment	Very good	1	
	Good	2.86[1.01,8.07]**	
	Bad	6.98[2.31,21.08]*	

* Significance at p value <0.01 ** Significant at <0.05 *** Non significant

Based on the final fitted multi-variate model, professionals with degree and above degree are 6.22 times more not satisfied from their job than diploma professionals (AOR= 6.22; 95% CI: 3.16, 12.25) controlling the effects of salary, relationship of respondents with the staff, availability of drugs and equipment, and training opportunity of respondents. Similarly, respondents who replied the salary paid to them is poor were 68.73 times more not satisfied than those who replied salary paid is good 68.73 [8.11,582.01] controlling the effects of educational level, relationship of respondents with the staff, availability of drugs and equipment, and training opportunity of respondents. Regarding availability of medical equipment and drugs those who replied not available and poorly available were 12.88 and 9.19 times more not satisfied on their job than those who replied good availability (AOR= 12.88; 95% CI: 1.92, 88.07) and (AOR= 9.19; 95% CI: 2.97, 28.42) respectively controlling the effects of salary, relationship of respondents with the staff, educational level, and training opportunity of respondents. Concerning training opportunity, those who replied poor training opportunity were 3.45 times more not satisfied than those who replied good training opportunity (AOR= 3.45; 95% CI: 1.45, 8.18) controlling the effects of salary, relationship of respondents with the staff, educational level, and availability of drugs and equipment, while those who no training opportunity were 1.89 times more not satisfied than those who replied good training opportunity but this is not significant (AOR= 1.89; 95% CI: 0.89, 3.44) controlling the effects of salary, relationship of respondents with the staff, educational level, and availability of drugs and equipment

We found that employees who responded the salary paid to them is poor were not satisfied in their job than the corresponding respondents replied salary is good. This result is in agreement with studies conducted in West Shoa zone of Oromia regional state in Ethiopia, studies conducted among health professionals in Jimma University and study conducted among health professionals in Harari region where poor salary payment to health professionals was significantly associated with job satisfaction (Yami *et al*., 2011, Mengistu & Bali, 2015, Geleto, Baraki, Atomsa, & Dessie, 2015).

Similar result was also obtained in study in England among nurses where those who responded salary paid is not enough were not satisfied with their job (Lephalala, Ehlers, & Oosthuizen, 2008). Thus, a low level of satisfaction payment is a common problem among all studies of employees' satisfaction. This result might be because people are sensitive to salary issues due to their impact on living standards. Besides, there might be high salary expectation of employees and comparing government payment with private and non-governmental organisations payment which is higher.

Besides the salary issue employees who are degree and above are found to be more not satisfied in their job as compared to diploma health professionals. A study conducted in Brazil has also reported educational level of employee has an effect on their job satisfaction (Chaulagain & Khadka, 2012). This increased non-satisfaction in their jobs among degree and above degree health professionals might be due to their high salary expectation as compared to the actual payment. Furthermore, there might not be a chance for further professional development for these employees.

On the other hand, employees who have very good relationship with other staffs are more satisfied in their job. Our result is consistent with the study conducted in England where employees who responded not satisfied on their jobs were only minority groups who didn't have good relationship with other staffs (Eker *et al*., 2004). Similarly, other independent studies conducted in England, Brazil, and Nepal have also confirmed that staffs with good relationship with other staffs were satisfied in their work and this made the quality of service to increase (Adams & Bond, 2000; Chaulagain & Khadka, 2012; Kavanaugh *et al*., 2006). Increased job satisfaction with good staff relationship might be, as there is good relationship among staffs it will result support of superiors and subordinates which in turn create a feeling of good social networks among coworker and serves as a fuel for job satisfaction

Regarding availability of drugs and medical equipment, those who replied medical equipment are poorly available and not available are not satisfied in their job. This could be because as a health professional if someone is unable to help a patient, that is critically ill, will make them not satisfied in their job.

Beside the above mentioned salary and other issues, respondents have also mentioned they are not satisfied in their job because there is poor training opportunity available. The same reason was also reported in similar studies done in West Shoa zone and Jimma University (Yami *et al*., 2011, Mengistu & Bali, 2015). Similarly, study done on leave medical laboratory professionals in seven sub-Saharan African countries indicated that professional development/ training opportunities as the most important factor for satisfaction at their current job (Marinucci *et al*., 2013). This is because training opportunities refreshes their skill and build up the confidence of healthcare providers and increases their creativity. It also motivates individuals as it is highly related with benefit and reliving workers from work tension. Hence, lacking training opportunity will lead to not satisfied in their job.

Conclusions and Recommendations

Conclusions

The results of the study show that majority of respondents are not satisfied in their job. Similarly, most of the respondents plan to leave their current job. On the other hand, salary of employee, staff relationship, availability of drugs/medical equipment and training opportunity statistically significantly affect health professional's job satisfaction.

Recommendations

From the research findings, we can conclude that

- Salary has an effect on employee job satisfaction, so we recommend government to give attention to the salary of health professionals.
- Relationship among staffs has an effect on employee job satisfaction, so the managers of health facilities should work towards creating good relationship among staffs. The health facilities in collaboration with pharmaceutical fund and supply agent (PFSA) have to fulfill the necessary drugs and medical equipment.
- Health facilities and other concerning bodies facilitate appropriate training opportunity for their staffs.

References

Adams, A., & Bond, S. (2000). Hospital nurses job satisfaction: Individual and organizational characteristics. *Journal of Advanced Nursing, 33*, 536-543.

Arsi Zone Health Office (2015). Annual human resource for health report.

Arsi Zone Health Office (2016). Six month progressive report.

Awases, M., Gbary A., Nyoni, J., & Chatara, R. (2003). *Migration of health professionals in six countries: A Synthesis Report.* World Health Organization Regional Office for Africa, Brazzaville, Congo.

Blaauw, D., Ditlopo, P., Maseko, F., Chirwa, M., Mwisongo, A., Bidwell, P., Thomas, S., & Normand, C. (2013). Comparing the job satisfaction and intention to leave of different categories of health workers in Tanzania, Malawi, and South Africa. *Glob Health Action, 6*(19287). Retrieved from http://dx.doi.org/10.3402/gha.v6i0.19287

Brunetto, Y., & Farr-Wharton, R. (2002). Using social identity theory to explain the job satisfaction of public sector employees. *International Journal of Public Sector Management, 15*(7), 534-551.

Chaulagain, N., & Khadka, D. K. (2012). Factors influencing job satisfaction among healthcare professionals at Tilganga Eye Centre, Kathmandu, Nepal. *International Journal of Scientific & Technology Research, 1*(11). ISSN 2277-8616.

Cohen, L., Manion, L., & Morrison, K. (2007). *Research method* (6th Ed.). London: Rout-ledge.

Eker, L., Tuzun, E. H., Dasakapan, A., & Surenkok, O. (2004). Predictors of job satisfaction among physiotherapists in Turkey. *Journal of Occupational Health, 46,* 500-550.

Geleto, A., Baraki, N., Atomsa, G. E., & Dessie, Y. (2015). Job satisfaction and associated factors among healthcare providers at public health institutions in Harari region, eastern Ethiopia: A cross- sectional study. *BMC Res Notes*, *8*(394). DOI 10.1186/s13104- 15- 1368- 5

Kavanaugh, J., Duffy, J. A., & Lilly, J. (2006). The relationship between job satisfaction and demographic variables for healthcare professionals. *Management Research News, 29,* 304-325.

Lephalala, R. P., Ehlers, V. J., & Oosthuizen, M. J. (2008). Factors influencing nurses' job satisfaction in selected private hospitals in England. *Curationis, 31*(3), 60-69.

Marinucci, F., Majigo, M., Wattleworth, M., Paterniti, A. D., Hossain, M. B., & Redfield, R. (2013). Factors affecting job satisfaction and retention of medical laboratory professionals in seven countries of Sub-Saharan Africa. *Human Resources for Health, 11*(38).

Mengistu, M. M., & Bali, A. G. (2015). Factors Associated to Job Satisfaction Among Healthcare Workers at Public Hospitals of West Shoa Zone, Oromia Regional State, Ethiopia: A cross sectional study. *Science Journal of Public Health, 3*(2), 161-167.

Sarker, M. A. B. (2013). Department of Healthcare Administration, Nagoya University Graduate School of Medicine, 65, Tsurumai-Cho, Nagoya 466-8550, and Japan.

Tella, A., Ayeni, C. O., & Popoola, S. O. (2007). Work motivation, job satisfaction, and organizational commitment of library personnel in academic and research libraries in Oyo State, Nigeria. *Library Philosophy and Practice*. ISSN 1522- 0222.

Yami, A., Hamza, L., Hassen, A., Jira, C., & Sudhakar, M. (2011). Job satisfaction and its determinants among health workers in Jimma university specialized hospital, southwest Ethiopia. *Ethiop J Health Sci.*, *20,* Special Issue.