Original Research Article

Job satisfaction among Nurses in the University of Port-Harcourt Teaching Hospital, Port-Harcourt, Nigeria

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Abstract

Job satisfaction among Nurses has been identified as important factor and a key to achieving the Millennium Development Goals (MDGs) in sub-Saharan African. It is therefore paramount to understand what motivates Nurses and to what extent they are satisfied with the organizations they work with and other contextual variables, this study therefore seeks to provide information to fill in the gaps about job satisfaction among health professionals especially Nurses in the Niger Delta region of Nigeria. A descriptive cross sectional design was adopted to explore the level of job satisfaction and organizational commitment among Nurses who were randomly selected from the twelve departments in the University of Port- Harcourt Teaching Hospital (UPTH). The study revealed that more than half of the respondents were satisfied with their jobs (51%) however, low pay and poor working conditions were the principal causes of dissatisfaction and low motivation. The management of the hospital should gear efforts towards correcting this lapse in order to achieve its organizational goal.

Keywords: Nurses, Job satisfaction, MDGs, UPTH.

Introduction

The technological trend has made it possible for health professionals to make comparison on the international platform which to a large extent has been the bane of the dissatisfaction that health professionals in the third world countries face and as such made the movement of health personnel in search of better standard of living and life quality, higher salaries, access to advanced technology and more stable political conditions in different places worldwide inevitable (Dodani & LaPorte, 2005). In the recent past, more attention has been on the noticeable shortage of health workers in countries with the poorest health indicators including Nigeria, and the likely impact of this on the countries’ ability to fight diseases and improve the health of her citizens. (WHO, 2006; Chen, Evan, Anand, Boufford, Brown, Chowdhury et al, 2004; Narasimhan, Brown, Pablos-Mendez, Adams, Dussault, Elzinga et al, 2004). The World Health Organisation (WHO) has affirmed that achieving the Millennium Development Goals (MDGs) in sub-Saharan
African will become a mirage except the current workforce in some of the countries is scaled up by as much as 140% (UN, 2009). This shortage in workforce has been linked to mostly the rush from the third world countries to the developed countries of the world where the work environment is much better.

All over the world, health services are affected by many factors such as human resources, delivery system and health infrastructures. Among these, human resources are a vital component in delivering health services. The relevance of job satisfaction on public health cannot be over-emphasised, this is because organizational and employees’ health and well-being rest a great deal on job satisfaction (Faragher, Cass & Cooper, 2005) and because employees in a healthcare delivery system are expected to provide quality patient care while working in a highly stressful environment (Dolan, 1987). In fact, a country’s human capital constitutes its most formidable asset and resource in the strive toward sustainable development in all its facets. Job satisfaction among professionals including those in the health sector is an important predictor of individual well-being, general life satisfaction and job performance. It is an important factor in patient care, and where there is job satisfaction it will have a positive impact on patient outcomes and health systems outcomes (Yami, Hamza, Hassen, Jira & Sudhakar, 2011). In his own summation, Spector (1997) states that job satisfaction influences people’s attitude towards their jobs and various aspects of their jobs. The result of this includes better performance and a reduction in withdrawal and counter-productive behaviours (Morrison 2008). Job satisfaction among Nurses has been identified as a key factor in nurses’ turnover with the empirical literature suggesting that it is related to a number of organizational, professional and personal variables (Kekana, Du Rand, & Van Wyk, 2007).

Though there are many studies that have been conducted to assess the job satisfaction among health care professionals but given the critical role that Nurses play in determining the efficiency, effectiveness and sustainability of health care systems in Nigeria and elsewhere, it is paramount to understand what motivates them and to what extent they are satisfied by the organization and other contextual variables. This study sort to provide the needed information to fill in the gaps on job satisfaction among Nurses in Nigeria and the Niger Delta region of the country in particular. This study therefore, assessed the level of job satisfaction and organizational commitment among Nurses in the University of Port- Harcourt Teaching Hospital (UPTH)

**Methodology**

**Study design**

A descriptive cross sectional design was adopted for this study and it explored the level of job satisfaction and organizational commitment among nurses in the University of Port- Harcourt Teaching Hospital (UPTH)

**Study setting**

The study was carried out in the University of Port- Harcourt Teaching Hospital located in Obio-Akpor Local Government Area in Port-Harcourt, Rivers State. The hospital, which is situated along the East-West Road of the city, is one of the major tertiary health institutions in the Niger Delta Region of Nigeria. It delivers services at primary, secondary and tertiary level and has over 300 nursing staff and treats over 150,000 outpatients, over 10,000 inpatients and performs over 3,000 surgical operations per year.

**Study population**

The study population consisted of Nurses who were recruited from the twelve departments in the University of Port-Harcourt Teaching Hospital where they work.

**Sampling techniques and sample size**

Simple random sampling was employed to select a total of 317 Nurses who had worked for at least a year from all the twelve departments in the hospital in December 2012. The number of Nurses selected from each department was done in proportion to the number of Nurses in each department. A total of 271 questionnaires were returned.
Study instrument

A structured self-administered questionnaire was used to collect data from the selected participants. The questionnaire consisted of two (2) sections. Section A consisted of the socio-demographic characteristics of the participants while Section B measured job satisfaction and consisted of an adaptation of the Organization Commitment Scale (OCS), consisting of 30 job satisfaction statements measured on a two-point scale (‘True’ or ‘False’), developed by Meyer et al in 1993.

Data Analysis

Each copy of the questionnaire was scrutinized for completeness, coded and entered into the computer. The SPSS Version 20.0 was used in analyzing the data. Descriptive and inferential statistical analyses were employed. Data was also summarized using graphic presentations for the interpretation of findings. The Chi-square test was used to assess relationship between job satisfaction and organisational commitment among the nurses in UPTH. \( P \)-values less than 0.05 were considered significant.

Ethical Considerations

Respondents were intimated of the goals and objectives of the study before they were recruited for the study. They were assured of confidentiality of information provided by not writing their name on the filled questionnaire. The questionnaires were given numbers to facilitate their entry and analysis and also to ensure anonymity of the respondents. They were also told that they were free to withdraw from the study at any point they felt like doing so.

Results

**Socio-demographic characteristics of respondents**

More of the respondents (63.1%) were less than 40 years, 95.9% were females and 32.1% of them claim to be of Igbo extraction; majority (62.4%) were single with 21.4% of them working in Internal Medicine Department (Fig.1) and a little less than half (49.1%) had also worked in the hospital for 1-5 years (table 1).

![Table 1: Socio-demographic characteristics of respondents (n=271)](https://example.com/table1.png)

| s/n | Item                | Frequency (%) |
|-----|---------------------|---------------|
| 1   | Gender              |               |
|     | Female              | 260 (95.9)    |
|     | Male                | 11 (4.1)      |
| 2   | Tribe               |               |
|     | Igbo                | 87 (32.1)     |
|     | Yoruba              | 28 (10.3)     |
|     | others              | 156 (57.6)    |
| 3   | Marital status      |               |
|     | Single              | 169 (62.4)    |
|     | Married             | 90 (33.2)     |
|     | Divorce/Separated   | 6 (2.2)       |
|     | Widowed             | 6 (2.2)       |
| 4   | Length of stay      |               |
|     | 1-5 Years           | 133 (49.1)    |
|     | 6-10 Years          | 66 (24.4)     |
|     | 11-15 Years         | 39 (14.4)     |
|     | 16-20 Years         | 18 (6.6)      |
|     | 21-25 Years         | 6 (2.2)       |
|     | >25 Years           | 9 (3.3)       |
Respondents level of job satisfaction and dissatisfaction

Respondents were asked questions to know their level of job satisfaction, 35% of them claimed that they were satisfied with their job while 16% claimed to be very satisfied with their job (fig. 2). A total of 24.7% respondents reported that they were dissatisfied with their jobs and topping the list of reasons given for this was: low pay (25.5%); poor working conditions (23.6%) and workload and poor promotion rate (22.5%) (fig. 3). Respondents were also asked how often they were reluctant to go to work; 27.3% claimed not so often; 23.2% claimed that they felt reluctant quite often and 22.9% claimed they rarely felt reluctant to come to work (table 2). However, 22.5% of the respondents said that the reasons they felt reluctant to come to work was the same as those given for dissatisfaction, for 16.6% of them it was underachievement, 12.5% of them could not really tell why they felt reluctant to go to work, while 16.6% said personal reasons, 23.6% felt reluctant for unspecified reasons and 8% of them did not give an answer.

![Fig 1. Respondents Department](image)
Table 2. Respondents’ responses about how often they felt reluctant to come to work (n=268)

| s/n | Statement       | Freq (%) |
|-----|----------------|----------|
| 1   | Almost everyday | 16 (5.9) |
| 2   | Quite often    | 63 (23.5)|
| 3   | Not so often   | 74 (27.6)|
| 4   | Rarely         | 62 (23.1)|
| 5   | Never          | 53 (19.8)|

Factors affecting respondents’ organizational commitment

Sixty-three (23.4%) of the respondents were satisfied with remunerations while 74.8% were not, 37.0% of them felt motivated to work for the hospital while 61.6% did not. Good co-workers relationship was reported by 52.6% while 47.0% felt otherwise; 59.2% are comfortable with the type and amount of work they were given to do, however, 106 (39.1%) didn’t feel the same way. Working conditions were good enough for 49.7% of the respondents but was not for 49.4%. Also, while 64.1% respondents were satisfied with the supervision they received, 35.6% were dissatisfied.

Respondents’ responses on necessary provisions to enhance performance and productivity in the hospital

Respondents claimed that to enhance productivity some necessary provisions need to be in the hospital, this includes: adequate working equipment (41%); better working conditions (14.4%) and prompt and higher remuneration (14.1%) (table 3)

Table 3. Respondents’ responses on things needed to improve productivity of the nurses
Respondents’ response on the best thing about nursing

More of the respondents (70.2%) are of the opinion that assisting humanity by offering care to the sick is the best thing about the nursing job, 5.5% claimed that it was the opportunity to help others and make people happy that makes the nursing job worth-while and few (3.6%) were of the view that nursing as a job gives them satisfaction (table 3).

Table 3. Respondents’ responses on the best thing about the nursing profession

| s/n | Statement                                                        | Percentage |
|-----|-----------------------------------------------------------------|------------|
| 1   | Assisting humanity by offering care to the sick                  | 70.2       |
| 2   | Opportunity to help others and make people happy                  | 5.5        |
| 3   | Gives satisfaction                                               | 3.6        |
| 4   | Without nurses, there is no hospital                             | 3.3        |
| 5   | Putting smiles on the faces of people                             | 2.6        |
| 6   | Smart and neat dressing                                          | 2.2        |
| 7   | Deals with one’s conscience                                       | 1.8        |
| 8   | Brings fulfilment                                                | 1.8        |
| 9   | Enjoy working with other members of the health team              | 1.5        |
| 10  | Meeting new people                                               | 1.0        |
| 11  | The pay is good                                                  | 1.0        |
| 12  | It improves health of the population                              | 0.7        |
| 13  | It saves lives                                                   | 0.7        |
| 14  | Nothing excites me about the job                                  | 2.9        |
Respondents’ responses on the things they do not like about the nursing profession

Respondents also gave reasons for the things they do not like about the nursing profession. The following are the top reasons given by respondents: night shift of the nursing profession (16.3%); exposure to infections (13.4%) and lack of appreciation (12.7%).

Table 4: Respondents’ responses on the things they do not like about nursing profession

| s/n | Statement                                      | Percentage |
|-----|------------------------------------------------|------------|
| 1   | Night shift of the nursing profession          | 16.3       |
| 2   | Exposure to infections                         | 13.4       |
| 3   | Lack of appreciation                           | 12.7       |
| 4   | Too demanding and stressful                    | 11.2       |
| 5   | Poor working conditions and equipment          | 9.8        |
| 6   | Poor salary                                    | 9.4        |
| 7   | Being looked down on by other medical personnel| 8.0        |
| 8   | Death of a patient                             | 5.8        |
| 9   | Poor rate of promotion                         | 4.3        |
| 10  | Poor supervision                               | 2.2        |
| 11  | Lack of facilities                             | 1.1        |
| 12  | Everything for another                         | 1.1%       |

*Multiple responses

Discussion

The results of this study showed that more of the respondents were females; this may be due to the fact that the nursing profession is generally viewed as women’s profession especially in Nigeria. This is similar to the findings of Lengu, Gundo, Maluwa & Mbirimtengerenji (2013) which showed that all the Nurses that participated in their study were females. Majority are of Igbo extraction; this is not unexpected since the study site is the south-south region of the country and it shares boundaries with the south-eastern states of the country, a region predominately occupied by the Igbos. Majority of the respondents also were single, this is different from the study of Lengu, et al (2013) which showed that virtually all Nurses that participated in their study were married. The number of years the majority of respondents in this study have worked in the hospital is similar to that of the Nursing respondents in the study conducted by Lengu and his team (Lengu, Gundo, Maluwa & Mbirimtengerenji, 2013).

Respondents level of job satisfaction and dissatisfaction

A little above half of the respondents were either satisfied or very satisfied with their job, this is similar with the results of other studies which showed that majority of the respondents were satisfied with their job (Omolase, Seidu, Omolase & Agborubere, 2010; Yami, Hamza, Hassen, Jira & Sudhakar, 2011; Blaauw, Ditlopo, Maseko, Chirwa, Mwisongo, Bidwell, Thomas & Normand, 2013). Reasons giving in this study for job dissatisfaction included: low pay, poor working conditions and workload and poor promotion rate. This is found to be true in most studies conducted among health workers in the past in both the developed and developing countries of the world (Stewart, 1983; Trends and insights 2004; Barnes, 1998; Government of Ethiopia and the World Bank, 2004; Agyepong, 2004; Sveinsdottir, Biering & Rahel, 2006; Pillay, 2008; Mbindyo, Blaauw, Gilson, English, 2009; Pillay, 2009; Chirwa et al, 2009; Lorber and Skela-Savič, 2012).

The study also revealed that more than a quarter of the respondents claimed either to often felt reluctant to come or daily felt reluctant to come to work. This disposition may further confirmed the assertion that job satisfaction is dependent on various variables which includes structure, size, pay, working conditions and leadership (Nolan & Grant, 1995; O'Rourke, Allgood, Vanderslice & Hardy, 2000; Finn, 2001; Sempane & Roodt,..
2002; Lu, While & Barriball, 2005) some of which are already established in this study. The respondents gave various reasons why they felt reluctant to come to work, personal reason top the list of reasons giving, this also confirmed previous assertion that job dissatisfaction is often linked to personal reasons (Lu, While & Barriball, 2005).

**Factors affecting respondents’ organizational commitment**

Respondents in this study were asked questions on factors affecting their commitment to the organization that employed them. The results revealed that only (23.4%) of the respondents were satisfied with their remuneration. This finding is not unexpected since studies in the past have also revealed that there is a relationship between job dissatisfaction and remuneration (Nolan, Nolan & Grant, 1995; O'Rourke, Allgood, Vanderslice & Hardy, 2000; Finn, 2001; Sempaile & Roodt, 2002; Lu, While & Barriball, 2005). More than half of the respondents in this study felt motivated to work for the University of Port Harcourt Teaching Hospital (UPTH). This result is supported by the findings of Angerami et al. (2000) which revealed that nurses’ motives to remain in their jobs is related to their attachment to the nursing profession, even though their work was not recognized and they were poorly paid but differs from the assertion of Moore (2001) which found that a sense of professionalism is directly related to their intention to quit despite the impact of restructuring changes on hospital and Nurse conditions, poor management communication style, and burnout.

Also, more than half of the respondents were comfortable with the type and amount of work they were given to do in UPTH, this is good since it has been found that there is a strong relationship between professional satisfaction and patient satisfaction and outcomes. Conversely other studies showed that Nurses who were not satisfied at work were also found to distance themselves from their patients and their nursing chores, resulting in poor quality of care (Clark, 1985; Linn, Brook, Weisman & Nathanson, 1985; Leiter, Harvie, Frizzell, 1998; Demerouti, Bekker, Nachreiner & Schaufeli, 2000; Tzeng, 2002). These finding will help policy makers and management know areas they need to concentrate attention on for improvement if the goal of increased productivity and service improvement is to be achieved. Almost half of the respondents were satisfied with the working condition and more than a quarter are satisfied with the supervision they received. This finding is contrary to what is obtainable in the health sector that has been riddled with series of strikes in the last few years as a result of poor working conditions which has been confirmed to be a perquisite for absolute commitment to their job (Davenport, 1999; Pillay, 2009)

**Respondents’ suggestions on necessary provisions to enhance performance and productivity in the hospital**

Respondents made suggestions on things needed to enhance performance and productivity, this included: adequate working equipment; better working conditions and prompt and higher remuneration. These are necessary for improvement in productivity which to a large extent is lacking in most developing countries including Nigeria since it has been asserted that improvement of remuneration and working conditions of health care staff working in health centres and rationalization of work would lead to increased job satisfaction and contribute to the overall quality of health services (Bodur, 2002). This finding is similar to the findings of a study conducted in Ethiopia where respondents made suggestions which included motivation of staff through different incentives such us bonuses, house allowances, salary increment, establishing good administration management systems and improving hospital facilities and infrastructure in order to enhance performance and productivity in the hospital (Alemshet, Leja, Alima, Challi & Morankar, 2011)

**Respondents’ views on what they love or hate about Nursing profession**

Respondents expressed various views about what they love or hate about nursing as a profession; topping the list is assisting humanity and night shift respectively. This result revealed that the
The core purpose of nursing profession is the major reason Nurses are in the profession, one would expect then that they should be able to give their best to their job and the issue of night shift has to do with the working environment. The managerial prowess needs to be strengthened and looked into if the best will ever be gotten from Nurses (Jurgensen, 1978; Kaldenberg & Regrunt, 1999; Judge & Church, 2000; Bodur, 2002; Bravendam Research Incorporated, 2002).

**Conclusion**

This study revealed that more than half of the respondents were satisfied with their job with low pay and negative attitudes towards working conditions as the principal causes of dissatisfaction and low motivation; the management of the hospital should gear effort towards correcting this lapse in order to achieve its organizational goal.

**Recommendations**

The following are hereby recommended if these goals will be achieved:
1. Provision of adequate working equipment with better facilities
2. Better working conditions with healthier working relationship amongst co-workers and in-service training of workers
3. Prompt and higher remuneration with motivational incentives
4. More hands and better manpower with better supervision to reduce the tedious of night shifts
5. Better appreciation and recognition of nurses by other members of the health team

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