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JOB SATISFACTION AND FACTORS RELATED TO THE DISSATISFACTION AMONG HOSPITAL STAFF: A LITERATURE REVIEW

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ABSTRACT:

Job satisfaction among hospital staff is an important concern from the perspective of hospital staff and patients. hospital staff job satisfaction is interrelated with the quality of health care, the quality of the workforce attracted to healthcare as a career, patient satisfaction with the services they receive, patient compliance, and continuity of care. Moreover, dissatisfaction leads to increased absenteeism, lower productivity, and increased turnover, each of which raises costs to the health care services system.This study aimed to review the previous studies related to hospital staff satisfaction and determine factors related to the dissatisfaction among hospital staff in private and public hospitals.As conclusion, the general consensus is that a variety of elements significantly influence job satisfaction, where variance is explained by personality characteristics in conjunction with work-related variables.

Key wards:Job satisfaction,hospital staff,career, dissatisfaction, productivity.

INTRODUCTION:

Human recourses recent days are the key success factor, therefore healthcare organizations put a lot of thought and effort to discover the degree of job satisfaction in order to enhance their productivity and attain overall healthcare organizations goals and objectives.[1,2] Therefore, healthcare organizations are concerned about the relations between human recourses and the level of job satisfaction and considered to be critical issue in relation with hospitals performance and improvement.[3] There are many factors affect Human recourses job satisfaction. Job satisfaction derives from intrinsic factors that are related to work itself or extrinsic factors which are related to instrumental values.[4,5]

There are strong relationship between job satisfaction and job performance, performance is defined as behavior that accomplishes results or whether an employee is doing well at his job or not. understanding job performance for each staff members essential as organizational decisions are based on individual performance, leading to an organizational success.[6,7]

There are two types of individual job performance. First one is the task performance or the in-role performance, and the other is the contextual

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performance or the organizational citizenship behaviors (OCBs). The importance of job satisfaction and performance of the employees is not limited to a particular organization, whilst it is important for any types of organizations Many studies concluded that positive staff perception leads to improved staff motivation, which in turn, leads to higher organizational commitment.[8,9]

In the last decade, health care services are undergoing dramatic changes in organization and financing. Hospital staff have come under increasing pressure to see more patients, meet increased administrative requirements, and keep up with government regulations. These changes are occurring while reimbursement is decreasing or remaining unchanged in real terms.[10,11]

Hospital staff jobs have shifted away from loyal patients, full autonomy, job security, and a luxurious income toward increased bureaucracy, decreased autonomy, diminished prestige, and deep personal dissatisfaction.[12]

Several recent articles and editorials have reported that the level of discontent among Hospital staff is rising.[13] In the United States, many primary care physicians believe that managed care has eroded satisfaction with medical practice. As the intensity of managed care controls increases, physicians may become even more dissatisfied with their jobs.[14] Throughout their career physicians face for developmental tasks, as becoming a skilled physicians involves assuming and mastering many professional responsibilities for the proper care of patients while taking on many social and/or personal obligations such as marriage, parenthood and financial independence.[15]

The main causes of stress at work are the inadequate demands of a job in relation to the worker's abilities, frustrated aspirations and dissatisfaction with regard to valued goals. The identification of individual stresses in daily medical practice has practical importance to practicing physicians because it allows them to manage their professional lives as well, to minimize dissatisfaction in their work environment.[15]

In the Richardson and Burke study of over 2000 physicians in Canada, job satisfaction correlated with self-rated quality of care and self-assessed patient relations.[16] In this Canadian study, physicians overall job satisfaction was 3.45 (SD 1.06) on a Likert's scale 1-5. Job satisfaction associated negatively with subjective stress (r -0.28). But very little of variance was accounted for by differences in work. Another study included a sample of 333 consultant doctors in Scotland, and concluded that coping and stress appraisal act as mediators between personality and emotional distress.[17]

The 'job enjoyment' approach is an interesting methodological approach to job satisfaction. Instead of asking

whether respondents are satisfied with their job or to what extent they are satisfied with their job, it enquires about respondents' opinions regarding factors that make their work more or less enjoyable. This approach thus allows researchers to study and conclude which factors increase or decrease job satisfaction. Work autonomy ('independence of work') is the factor that mostly makes the respondent's current job enjoyable, mentioned by some 74% of male and 71% of female wage and salary earners.[18] Since 1984, the factor of 'pleasant customers' has been mentioned more frequently as something that increases enjoyment at work, while 'certainty of employment relationship' has diminished in importance. In the same period, more people mention 'time pressure and tight deadlines', 'difficult customers', 'uncertainty about continuity of work', 'relations with superiors' and 'enforced pace of work' as the factors decreasing enjoyment at work. 'Lack of advancement and development opportunities' is less cited as a factor that decreases work enjoyment.[18]

Epidemiologists have long been aware that social and environmental factors can contribute to the incidence of many human diseases. Predictably, as the single activity occupying most people's waking time is work, pressures, strains, and stresses within the workplace have been identified as being a potentially important health factor. Numerous theories now exist, developed from a wide range of perspectives, postulating a direct link between organizational/ workplace stress and wellbeing.[19] There is growing evidence that current trends in employment conditions may be eroding levels of job satisfaction and directly damaging the physical and mental health of employees.[20] Previous meta-analyses have reported important relationships between important life/work characteristics and job satisfaction, most notably life satisfaction and job performance.[21]

A systematic review and meta-analysis of 485 studies with a combined sample size of 267 995 individuals was conducted, evaluating the research evidence linking self-report measures of job satisfaction to measures of physical and mental wellbeing.[22] Results revealed that the overall correlation combined across all health measures was r = 0.312 (0.370. Job satisfaction was most strongly associated with mental/psychological problems; strongest relationships were found for burnout (corrected r = 0.478), self-esteem(r = 0.429), depression (r = 0.428), and anxiety(r = 0.420). The correlation with subjective physical illness was more modest (r = 0.287).(22)

This systematic review indicated that the job satisfaction level is an important factor influencing the health of workers. Organizations should include the development of stress management policies to identify and eradicate work practices that cause most job dissatisfaction as part of any exercise aimed at improving employee health.[22]

Occupational health clinicians should consider counseling employees diagnosed as having psychological problems to critically evaluate their workand help them to explore ways of gaining greater satisfaction from this important aspect of their life.

There is a large body of research which suggests that occupational stress may be related to the development of cardiovascular disease (CVD) independently of other known risk factors.[23,24] However, such research has primarily focused on two models, one emphasizing high job demands and low job control, and the other emphasizing effort-reward imbalance.[25-31] Few studies have examined the association between job satisfaction and CVD mortality or other risk factors, despite its recognition as a particular form of occupational stress and its identification with individual well-being in social science literature.[32-34] another definition of job satisfaction as a ‘‘pleasurable or positive emotional state resulting from the appraisal of one’s job or job experiences’’.[35] More specifically, the concept of job satisfaction is the discrepancy between what an individual expects, needs or values about their job compared with how much of this the job actually delivers. Early evidence suggested that there were negative associations between levels of job satisfaction and heart disease mortality rates and job satisfaction and a variety of CVD risk factors.[24] These studies supported the contention that low satisfaction and self-esteem at work predisposed men to heart disease. Research conducted in the United States from the same period reported work satisfaction to be the strongest predictor of the Longevity Quotient the number of years a person actually lived divided by the actuarially expected number of years remaining at the time of the initial examination. Such evidence, however, was not unanimous and later studies have not supported the earlier findings. [36, 37]

Study Aim and methods: The focus of our study is toreview the previous studies related to hospital staff satisfaction and determine factors related to the dissatisfaction among hospital staff in private and public hospitals.

In order to extract relevant research from the published literature to achieve this aim the electronic databases and online medical, management and psychological search engines, namely Science direct, Pub Med, Google scholar and Cochrane were searched. Keywords are ‘physicians' satisfaction’, ‘job satisfaction’ and ‘job stress’ with synonyms and phrases were used as appropriate.

Methodological Issues of Studies Reviewed: The measurement of job satisfaction can be as simple as a single-item scale asking individuals to rate their satisfaction overall, or as complex as multi-item scales addressing work satisfaction, environment satisfaction, and many of their subcomponents.[16,17]

Literature identifies a vast variety of instruments of varying designs for measuring the level of physicians satisfaction perceived. Most of the studies used the Likert summated rating scales in which each individual item must measure something that has an underlying measurement continuum. Such scales usually have the format "how satisfied are you with (specific aspects of the job)?" and respondents answer on a scale from "very satisfied" to "very dissatisfied".[38 -43]

Other studies used descriptive questions, in which the respondent relates the degree to which those characteristics are present in his or her job where the answers would be in the form of "almost never" to "almost always available", or "this feeling occurs very often" to "this feeling never occurs".[44]

Most physicians' satisfaction scales are sent by mail and self-administered by physicians and rarely researchers refer to liaisons for the distribution of the scale [38,43,45]. Whereas, the overall response rate in most of the surveys involving a large number of physicians was as high as 75% while the lowest reached a level of 49% , yet in a study on job satisfaction among dermatologists it reached a high of 93% where the population under study was 98 physicians.[46]

Some researchers described the dimensions of job satisfaction and divided them into intrinsic and extrinsic satisfaction. Intrinsic related to one's work, its meaningfulness, feeling of growth and advancement, working atmosphere, administration and supervision. Extrinsic satisfaction related to financial rewards and benefits. These facets are not adequate to cover the-specific cause of satisfaction related to the work of physicians which led to the hypothesizing physician's job satisfaction facets.[47,48]

A research piece from the Netherlands,[49] Comprising a systematic review of different instruments used to measure job satisfaction in hospitals, concluded that only a few of these instruments have shown both high reliability and validity. Assessing the internal consistency, construct validity and responsiveness of these instruments, researchers concluded that, from the 29 instruments analyzed; only seven of them were reliable and valid enough to assess job satisfaction in hospital environment. These findings implied that not all of the instruments used to gauge job satisfaction are reliable and valid for that purpose. They also seem to underline that there is no unique instrument to measure job satisfaction. As research indicated, one may assess job satisfaction using different numbers of items and different answer scales.[49]

Much research has focused on identifying the components of job satisfaction that pertain to the Weld of medicine. One such attempt was made by the Society of General Internal Medicine (SGIM) Career Satisfaction Study Group, which developed a model

of job satisfaction based on 10 distinct job facets (autonomy, relationships with colleagues, relationships with patients, relationships with staff, personal time, intrinsic values, community, pay, administration, and resources) in addition to global measures of job, career, and specialty satisfaction.[50] This 10-facet model was employed in the Physician Work life Survey, a national survey of working physicians. The results of this large-scale project have identified a number of variables considered to relate to physician satisfaction, such as specialty choice, type of practice, and intentions to with draw from practice.[51-55] While physicians were found to be generally satisfied, some variation existed among specialties on various facets. Generally, work relationships, day-to-day practice issues, and patient care were found to correlate positively with satisfaction, while dissatisfaction was found to be associated with pay and relationships with the community.[51,54]

Other researchers have attempted to classify physician job satisfaction. One study created a 17-item instrument that measured five facets of satisfaction: patient care, work-related burden, income-prestige, personal rewards, and professional relations with colleagues. The authors found that the components most related to job satisfaction were caring for patients, professional relationships, and personal rewards. Components associated with job dissatisfaction were work-related burden and income dissatisfaction.[56] Similar results were found in the Community Tracking Study Physician Survey, a series of nationally representative telephone surveys completed by the Center of Studying Health Systems Change, where physicians expressed overall satisfaction with their medical careers, although satisfaction levels declined marginally over the three time periods.[57] Using these same data, other studyfound that specialists in geriatric medicine, neonatal–prenatal, dermatology, and pediatric specialties were significantly more likely than specialists in family medicine to be satisfied with their careers, while those in otolaryngology, obstetrics & gynecology, ophthalmology, orthopedic surgery, and internal medicine were significantly less satisfied than those in family medicine.[58]

Other independent research projects have confirmed that physicians in general are satisfied with their careers, but that increased patient expectations and regulatory controls are creating negative effects on perceptions of increased time pressure and erosion of autonomy.[59]

Factors influencing job satisfaction: Research on job satisfaction is extensive both in the discipline of vocational psychology and in industrial-organizational psychology. An argument can be made that job satisfaction represents the pinnacle of each of these disciplines, in that determining what variables contribute to job satisfaction is the ultimate goal of research. A number of job satisfaction theories exist and each incorporates varying aspects of

work satisfaction and environment satisfaction.[60] Job satisfaction has been studied as it relates to a range of variables, including occupation, work outcomes, personality characteristics, and well-being.[61,62]

A study was undertaken to assess job satisfaction among health care workers (HCWs) who work with disabled patients and to identify the factors that contribute to their job satisfaction. The study sample consisted of doctors, nurses, physiotherapists, and other HCWs (social workers, work and speech therapists, and psychologists). Results revealed that the overall job satisfaction was reported by 22.4% of the respondents and was associated with hospital politics, personal relationships and the feeling of being able to provide a good quality of care. Profession, age, and gender did not affect job satisfaction.[63]

Research exploring the prediction of job satisfaction is extensive. Recently, theorists have proposed that job satisfaction may be equally affected by issues related to work and by personality characteristics. One research revealed that personality traits as a whole correlate (r= .41) with job satisfaction. [62] Extraversion, agreeableness, and conscientiousness were each positively related to job satisfaction, whereas neuroticism was negatively related. Similarly, individuals who have a positive affect or mood also tend to report greater job satisfaction, as researchers found that 36% of the variance in job satisfaction can be attributed to an individual's affect.[64,65]

This more recent research relating personality elements to job satisfaction has been accompanied by more traditional research pertaining to job performance, work commitment, and work outcomes. Individuals who perform at high levels in their jobs, are committed to their work organization, are secure in their jobs, and are satisfied with their income tend to report higher job satisfaction.[61,66,67]

In the United States, a number of empirical studies have explored the unique factors that contribute to their job satisfaction.[68] During the study was conducted in the University of Maryland in USA, a random sample of 763 physicians was surveyed to examine the relation of 18 critical work related factors to job satisfaction. On the whole, physicians reported that they were satisfied with their careers and believed that caring for patients, sense of accomplishment, continuity of care, autonomy, and personal time were the five most important factors for their personal job satisfaction. Regression analyses were run to determine the role of each of the 18 critical factors in predicting job satisfaction. Dissimilar to the self-report, the five most significant predictors were sense of accomplishment, creativity, income satisfaction, security, and autonomy. Additional regression analyses were run using the 18 critical factors to predict job satisfaction across the six major medical

specialties. Significant factors varied greatly depending on specialty area, suggesting that physician job satisfaction may be better understood in terms of specialty rather than as a whole.[68]

One study that focused on physician specialty areas brings up an important consideration when studying physicians. While they are often seen as one unified group, physicians are identified in the medical community according to their area of specialization. After graduating medical school, students enter a track to become trained in one of over 100 possible specialties or subspecialties, each of which has unique expectations and work tasks. Specialty training lasts three to eight years beyond the typical four years of medical school. Recently, there has been an increasing push in the medical community to help students make more effective specialty decisions, especially because this decision can have a profound relationship with both job and life satisfaction.[58]

Many previous studies identified several domains of influence in physician satisfaction: income, relationships, autonomy, practice environment, and the market environment.[50,57,69] Relationships include those with patients, colleagues, nurses, and other staff autonomy relates to a physician's sense of control over his or her work, as well as his or her perceived ability to provide needed services to patients. The practice environment comprises a constellation of factors, including practice size, practice ownership, involvement with bureaucracy, and administrative tasks. The market environment includes managed care penetration and the supply and organization of hospital and physician services in the area. Of these factors, autonomy, income, and practice type have the strongest effects on physician satisfaction.

Shared values, fair decision-making processes, fair treatment, and administrative competence are likely to be important aspects of trust in the organization. The study of trust in healthcare is growing, as is study of trust in other arenas.A few studies aimed at patients' trust in health plans or physicians have been conducted.[70-72]

A study aimed to measure Korean physicians' job satisfaction and to examine the relationship between trust in Health Insurance Review Agency (HIRA) and job satisfaction. The sample was representative of Korean office-based physicians; 1593 office-based physicians in Korea were surveyed by mail over a 4-week period using a self-administered questionnaire. Multivariate analysis using logistic regression was performed to investigate predictors of physicians' job satisfaction and to examine whether trust in HIRA was related to job satisfaction. Results revealed that the job satisfaction of physicians was very low. The payment denial rate was not related to job satisfaction. Physicians who trusted HIRA were more likely to be satisfied with their job. A study concluded that

physicians who trusted in the HIRA were more likely to report satisfaction. These results emphasize that trust in the HIRA is key to physicians' job satisfaction.[73]

A study in UK addresses some possible factors contributing to job satisfaction. This study analyzed a number of possible influences on job satisfaction including individual well-being, working hours, work orientation, financial variables, and the employment contract, and market and job mobility. His findings fail to provide strong support for explanations of job satisfaction primarily in terms of socio-technical rewards of the job, although low influence in the workplace did emerge as a significant factor. All but one of the indirect measures developed to represent qualitative features of the workplace remained statistically insignificant, the measure of workplace influence being the exception.[74]

Much more important were factors related to the contractual features of the job. Having the 'right package' - contractually assured promotion opportunities, annual pay increments, bonuses and, above all, a job that was regarded as permanent - significantly boosted the job satisfaction score, with a marginal increment for not having to work unpaid overtime. There was also little support for the view that job satisfaction rises in a closely linear association with earnings; rather, jobs enabling financial expectations - at whatever level these were set - to be met, were more important. Having a recognized career path was also a highly significant factor relating to job satisfaction. High levels of work stress and a desire to work fewer hours - an aspiration held by a third of the sample of respondents - together accounted for well over a half of a standard deviation in job satisfaction scores.[75]

The key point of that previous UKstudies is that his conclusions are not intended to demonstrate that intrinsic rewards do not matter in analyzing job satisfaction. However, they may matter significantly less than is sometimes assumed once a greater range of influences is introduced. What is needed is an expansion of the range of causality.[76] Differences in job satisfaction between groups and individuals are extremely complex and require more research, especially in relation to the measures used to gauge job satisfaction. In the UK, the need to control for workplace influences and to gather more reliable survey data on quality of working life issues are seen as two critical areas to address.

Researches indicated that factors related job satisfaction for primary health care (PHC) provider included solo versus group practice, work content, variety of the work, ability to obtain services for their patients, teaching, urban versus rural practice, relationship with their patients, job control and procedure.[77,78]

The 1978 Alma Ata declaration by the World Health Organization emphasized the importance of primary health care.[79] The job satisfaction of the primary health care physician is a critical

factor for health systems because the primary care level is responsible for providing medical care to a greater proportion of the population than any other care level.[80] The perception of health care practitioners may affect the way that they treat patients both medically and personally.[81]

Primary health care physicians usually live among their patients, deal with 90% of health care problems and need to address them in global terms, specifically the physical, psychological and social dimensions.[82] The role demands high levels of skill and motivation, yet despite this, general practitioners (GPs) are often perceived as second rank doctors by medical students, administrators and specialists. Hence, many GPs feel both geographically and professionally isolated, with a demanding job and unsatisfactory status.[83] Also, job satisfaction levels could be related to the quality and efficiency of the care given.[80]

A study aimed to explore Job dissatisfaction among the primary health care (PHC) providers who gives the life-saving care to rural population, in rural setting of Iran to determining the predictor's factors of the PHC providers' job dissatisfaction and providing appropriate strategies to address these factors can most likely improve their performance and diminish the problem. The data were collected from 290 of the PHC providers worked full-time in Kurdistan rural health-house by a survey for identifying the individual, environmental, and work factors that influence job satisfaction. Results revealed that only 17% of the participants' overall job satisfaction was high. Furthermore, the developed model presented statistically significant differences between job satisfaction and village population size, satellite villages covered, and distance between health-house and city center.[77]

A study evaluated the extent of job satisfaction of primary health care physicians working in Capital Health Region in Kuwait. A population-based study was conducted during July 2004. Out of 95 questionnaires distributed to all physicians working in primary health care centers, Capital Region during the study period, 89 questionnaires were received. Results revealed that the overall satisfaction was 61.8% and significantly the higher the age the higher the job satisfaction. There were no significant differences in overall job satisfaction for nationality, sex, marital status and number of children. The GPs were less satisfied with their rate of pay but more satisfied with their colleagues. The study concluded that the job satisfaction of primary health care physicians is critical for improvement of health systems. The results of this study showed that GPs were less satisfied with the rate of pay and the amount of variety in work. Young physicians appear to need more attention.[78]

Job satisfaction as an indicator of job quality: Although job satisfaction emerged as an indicator of job quality, two approaches were followed in order to assess the adequacy of using job satisfaction as an indicator of the quality of work. First, the authors explored whether differences between countries in terms of job satisfaction can be explained by job quality-related variables, such as working time, wages, etc. Secondly, the authors studied the relationship between certain objective measures of job quality and job satisfaction.[84] In both cases, 'job satisfaction has no apparent relevant relation to other objective indicators of job quality, which makes this indicator of little adequacy for evaluating job quality'. A Spanish research paper concluded that there is little or no correlation between job satisfaction and job quality. Paradoxically, in a context of pronounced objective differences in quality among jobs, the authors found a coexistence of high levels of job satisfaction, with only a small range of variation between the maximum and minimum levels of job satisfaction.[84]

Abundant evidence suggests that physician satisfaction is optimal for the delivery of quality health care, so the growing body of literature that purports an increase in dissatisfaction among physicians has raised concern.[85] Recent studies have shown that physician dissatisfaction is significantly associated with a perceived inability to obtain medically necessary services for patients, a lack of freedom to make clinical decisions, inadequate time to spend with patients, being unable to maintain ongoing relationships with patients, and patient satisfaction.[86,87] Health policies and physicians' job dissatisfaction contribute to lowering the quality of primary care, and may be detrimental to health outcomes.[12,69,88,89]

When financial stress is a source of dissatisfaction, physicians may change the insurance mix of their patients, increase patient volume, and reduce support services. Physicians dissatisfied with the liability risks and costs may take specific steps to reduce their exposure, such as restricting the scope of their practice, avoiding high-risk patients, or engaging in "defensive medicine." It is very important to know physicians' satisfaction levels, the causes of their dissatisfaction, and possible ways to improve satisfaction.[12]

Job satisfaction is found to be significantly linked to absenteeism and turnover.[90,91] There is evidence that job satisfaction positively influences organizational citizenship behavior.[92] The link between job satisfaction and direct performance is found to be unequivocal.[93] Despite the fact that the direction of causal relationship between individual performance and job satisfaction is disputable, it means whether happy workers are productive workers or vice versa.

CONCLUSION:

In the healthcare field a number of comprehensive longitudinal studies have

been performed, which are dedicated to the investigation of job satisfaction of hospital staff includingphysicians and nurses. As conclusion, the general consensus is that a variety of elements significantly influence job satisfaction, where variance is explained by personality characteristics in conjunction with work-related variables.

Job satisfaction may be measured in many different ways; therefore, many studies are not measuring the same phenomenon. Most of questionnaire include the following variables: predictor: range of procedures, outcome: overall job satisfaction and several confounding variables: age, solo versus group practice, population served; number of medical services offered; teaching; constraints to medical care services; balance of personal and professional commitments, and relation with other HCWs.

Some studies concluded that to ensure quality of care, it is vitally important to maintain a certain level of physician morale. Other studies have shown that when physician morale plummets, doctor-patient communication suffers.

An organization's efficiency depends to a large extent on the morale of its employees. Behavioral and social science research suggests that job satisfaction and job performance are positively correlated. Job satisfaction and morale among medical practitioners is a current concern worldwide. Poor job satisfaction leads to increased physician turnover, adversely affecting medical care. Recent research into some determinants of job satisfaction has examined individual factors as well as the organization's role.

A vast number of published studies have suggested a link between job satisfaction levels and health. The sizes of the relationships reported vary widely.

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