



Original Article

Impact of Job Satisfaction on Greek Nurses' Health-Related Quality of Life



Panagiotis Ioannou, Vassiliki Katsikavali, Petros Galanis, Emmanuel Velonakis, Danai Papadatou, Panayota Sourtzi*

Department of Public Health, University of Athens, Athens, Greece

ARTICLE INFO

Article history:

Received 10 October 2014

Received in revised form

17 February 2015

Accepted 31 July 2015

Available online 20 August 2015

Keywords:

health
job satisfaction
nursing staff
quality of life
survey

ABSTRACT

Background: Employee job satisfaction and its relationship with health and quality of life has been an issue of major concern over the past decades. Nurses experience difficult working conditions that affect their job satisfaction, health, and quality of life.

Methods: A cross-sectional study was undertaken in three general hospitals and their respective health centers. Stratified random sampling by level of education was used, and 508 nurses and nursing assistants were included. A self-administered anonymous questionnaire, which included the Measure of Job Satisfaction, the 36-item Short Form Health Survey, as well as demographic details, education, and work conditions data, was used.

Results: Greek nurses were found to be dissatisfied with their job according to the total score of the job satisfaction scale, although personal satisfaction and satisfaction with support had had higher scores. Their general health was reported as average, because of physical and mental health problems, low vitality, low energy, and increased physical pain. Multivariate linear regression analysis revealed that males and those wishing to stay in the job had higher physical and mental health. Increased job satisfaction was related to increased physical and mental health.

Conclusion: Although Greek nurses are not satisfied with their work, those with high levels of job satisfaction had better health-related quality of life. The findings suggest that improvement of the work environment would contribute to a healthier and more satisfied nursing workforce.

Copyright © 2015, Occupational Safety and Health Research Institute. Published by Elsevier Ltd. This is an open access article under the CC BY-NC-ND license (<http://creativecommons.org/licenses/by-nc-nd/4.0/>).

1. Introduction

Employee job satisfaction, regardless of occupation or sector of employment, has been an issue of concern and of thorough research during the past decades. The degree of employee satisfaction is evaluated in relation to the overall working environment. For overall working environment, we refer to the employee's interest in the job, the rewards obtained, the interpersonal relationships with colleagues and management, the work hazards, including stress and fatigue, and other profession-specific factors.

More recently, job satisfaction has been studied in relation to the employees' health and quality of life [1,2]. The working environment involves a plethora of risks for the psychosomatic integrity of the employees. It is therefore considered necessary that safe

and satisfying working conditions are indispensable for both quality and quantity of employee performance.

Nurses experience difficult professional conditions (work schedules, plethora of patient/work load, infectious environments). Professional burnout, the impact of shift work, musculoskeletal disorders, job satisfaction, and many other factors are often studied separately or in combination in order to examine their impact and propose solutions for improving the working conditions [3,4]. In Greece, although studies have been conducted on specific work hazards [5–8] and on job satisfaction [9–11], no researcher has explored the impact of job satisfaction on nurses' health and well-being. How satisfied is the contemporary Greek nurse with his or her work, and how this affects his or her health and quality of life, was the main focus of the present study.

* Corresponding author. 123 Papadiamantopoulou Street, 11527 Athens, Greece.
E-mail address: psourtzi@nurs.uoa.gr (P. Sourtzi).

Table 1
Descriptive statistical analysis of the subscales of MJS ($N = 508$)

Subscales MJS	Mean	Standard deviation	Cronbach α
Personal satisfaction	3.36	0.63	0.85
Satisfaction with work load	2.68	0.62	0.81
Satisfaction with support	3.23	0.69	0.88
Satisfaction with education	2.64	0.84	0.82
Satisfaction with salary and prospects	2.42	0.62	0.83
Total job satisfaction scale	2.89	0.53	0.94

MJS, Measure of Job Satisfaction.

The aim of the study was threefold: (1) to investigate the degree of job satisfaction of Greek nurses working in public hospitals and primary healthcare centers and determine the factors that affect it; (2) to study the health-related quality of life and the factors that affect it; and (3) to study the relationship between job satisfaction and the health-related quality of life.

2. Materials and methods

A cross-sectional study was conducted in two public tertiary general hospitals and one county general hospital, and in their respective primary health centers, which were under these hospitals' administration.

2.1. Sample

The study population comprised all nursing staff, including registered nurses, health visitors, and assistant nurses regardless of the employment contract. The study sample was a level of education-stratified random sample of the total nursing population in the three hospitals and three primary health centers. The final sample comprised 508 participants (response rate 68.46%).

2.2. Measurements

An anonymous questionnaire was prepared for this study. It included the Measure of Job Satisfaction (MJS) by Traynor and Wade [12], the 36-item Short Form Health Survey (SF-36) [13], demographic details, education, and data on work conditions.

The MJS for the measurement of nurses' job satisfaction consists of 41 statements answered in a 5-point Likert scale. The tool has been found to possess high internal consistency ($\alpha = 0.89\text{--}0.93$) and high validity (0.83) [12,14]. The first 40 questions of the MJS are grouped to form six subscales and internal consistency for the total scale and subscales, as measured in this study, are shown in Table 1. The MJS was translated, back-translated, and culturally adapted into Greek for the present study following permission by the first author.

The SF-36 Health Survey (version 1) for the measurement of the perceived health-related quality of life is a widely used questionnaire. The SF-36 has been translated and its psychometric properties tested for a Greek population by Pappas et al [15]. The questionnaire includes 36 questions, 35 of which form eight subscales and these subscales are summed up to form two summary measures: physical health and mental health. Internal consistency, measured in this study, for the total questionnaire and subscales are presented in Table 2.

2.3. Ethical permission

The study was approved by the Ethics committee of the Faculty of Nursing, of the National and Kapodistrian University of Athens

Table 2
Descriptive statistics of the subscales of the questionnaire SF-36 ($N = 508$)

Subscales SF-36	Mean	Standard deviation	Cronbach α
Physical functioning*	74.74	22.46	0.90
Role physical*	60.16	39.70	0.83
Role emotional†	63.99	39.34	0.76
Vitality†	50.84	20.97	0.82
Mental health†	60.62	19.71	0.82
Social functioning†	59.87	26.52	0.75
Bodily pain*	60.13	27.26	0.88
General health*	57.19	20.10	0.76
Summary measure: physical health	62.84	21.83	0.77
Summary measure: mental health	58.30	21.76	0.79

* Physical health.

† Mental health.

SF-36, 36-item Short Form Health Survey.

(Athens, Greece) and the Scientific Committees and Nursing Directors of each participating hospital. The questionnaire was anonymous, and all participants were informed about the aim of this study through an attached letter, in which it was also stated that they could opt not to participate if they wished not to. Completed questionnaires were returned in sealed envelopes.

2.4. Data analysis

Continuous variables are expressed as mean (\pm standard deviation) and categorical variables as absolute and relative frequencies. The Kolmogorov–Smirnov test and graphs (histograms and normal Q–Q plots) were used to test the normality of the distribution of the continuous variables. Because continuous variables followed normal distribution, parametric methods were used. In particular, independent t tests, analysis of variance (with *post hoc* t tests adjusted for multiple comparisons), and Pearson's correlation coefficient were used. Multivariate linear regression analysis with enter method was applied for the identification of the predictive factors that were associated with quality of life. Variables with $p < 0.20$ in univariate analysis were included in multivariate modeling. The predictive variables were identified in terms of coefficients beta and 95% confidence intervals. A two-sided p value of less than 0.05 was considered statistically significant. The Statistical Package for Social Sciences (SPSS) program, version 16.0 (Chicago, IL, USA) was used for statistical analysis.

3. Results

The nursing staff were mainly women (85.4%), married (66.1%), with children (65%), and aged between 22 and 64 years (mean = 39.35, standard deviation = 7.45). The majority were registered nurses (64.8%), of whom 4.5% had a university degree, 6.9% had a postgraduate degree, 19.9% had a specialization, and 49.8% reported participation in continuing education. Sixty-three percent declared that they would like to change workplace if offered an opportunity, and 60% would like to change profession. Of the total sample, 30.9% reported that they were off-sick 1–3 days during the preceding year, whereas 23.4% reported more than 4 days of sick leave.

The mean values of the five subscales and the total job satisfaction are presented in Table 1. With possible values ranging from 1 to 5, it is evident that only in the aspects of personal satisfaction and satisfaction with support, were nurses moderately satisfied.

The subscales of the health-related quality of life are measured in a scale from 0 to 100 (Table 2). Grades that tend toward 100

Download English Version:

<https://daneshyari.com/en/article/1092105>

Download Persian Version:

<https://daneshyari.com/article/1092105>

[Daneshyari.com](https://daneshyari.com)