

## MOTIVATION, HYGIENE FACTORS AND JOB SATISFACTION AMONG HEALTH WORKERS WORKING AT SIX GOVERNMENT HOSPITALS, ADDIS ABABA, ETHIOPIA

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### ABSTRACT

**Introduction:** Health Workers job satisfaction is a corner stone for improving the quality of health service, patient satisfaction, staff morale, job competence, patient compliance, positive patient outcomes and its continuity of care.

**Objectives:** To determine motivation, hygiene factors and health workers job satisfaction working at Six Government Hospitals at Addis Ababa, Ethiopia, May 2015.

**Methodology:** Institution based cross sectional study design with self administered questionnaire was employed among three hundred fourteen health workers using systematic random sampling technique. The collected data were analyzed using descriptive and inferential statistics.

**Results:** The response rate for this study was 90%. The majority (63%) of health workers were dissatisfied with their job. The overall mean job satisfaction for hygiene and motivation factors were 3.54(±0.96SD) and 3.35(±0.09SD) respectively. Almost all determinants were positively correlated with job satisfaction, but compensation (salary) was negatively and strongly associated with health workers' job satisfaction.

**Conclusion and Recommendation:** The majority of health workers were dissatisfied with their job. Even if both were important factors, hygiene factors were more important predictors than motivation factors for health workers' job satisfaction in this study subjects. However participants were dissatisfied with the compensation (salary) that they received for the work they did. Thus, health managers shall use both motivation and hygienic determinants of Herzberg's theory as a tool to increase health workers' job satisfaction.

**KEY WORDS:** Health worker, Job satisfaction, Motivation, Hygiene Factors.

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### INTRODUCTION

Health workers, the major health work forces, are pivotal to the effective, efficient, accessible, viable and high-quality delivery of health care services. Hospital consumers perceive health workers as trained professionals that work to

contribute to patients' health issues [1]. Therefore, high productivity and performance of most health care settings could not be realized without health workers' meticulous support and contributions.

Job satisfaction is generally regarded as an employee's attitude towards the job and job situation. Spector defines job satisfaction simply as "The degree to which people like their jobs." Some people therefore enjoy work and consider it as a central part of their lives while others do so only because they have to [2]. It is a fact that a nurse who has good job satisfaction will strive to provide the best to her/his patients.

However, dissatisfaction may impede efficiency, effectiveness and sustainability of health care systems which in turn pose a threat to hospitals capacity to provide good care as well as to meet up the needs of patients [3].

According to Herzberg's dual factors (motivation (intrinsic) and hygiene (extrinsic) factors) theory, the motivation factors comprise achievement, recognition, responsibility, the work itself, advancement, authority, security, and variety which are intrinsic to the job and are direct stimulating factors that make a person satisfied in his/her job and bring positive attitude to like and love his/her job, whereas Herzberg's hygiene factors (factors extrinsic to the job) include supervision (human relation), supervision (technical), social service, moral values, ability utilization, creativity, social status, independence, organizational policies, working conditions, coworkers, activity (work load), and compensation (salary) that lead employees to be dissatisfied when they have grievance about these factors [4].

Factors for health workers' job satisfaction were not assessed adequately or not at all get attention in our country and at large in the study area. Hence, the results of this study will provide baseline information about factors that hampered health workers job satisfaction; likewise it will assist policy makers to design promising strategies that would maximize job satisfaction among health workers.

**Objectives:** To assess the level of health worker's job satisfaction in Addis Ababa government hospitals, To determine the relationship between motivation factors and health workers job satisfaction in Addis Ababa government hospitals, To determine the relationship between hygiene factors and health workers job satisfaction in Addis Ababa government hospitals.

## METHODOLOGY

**Research design:** Institution based cross sectional study design was employed.

**Setting and sampling:** The study was conducted from six Hospitals (Yekatit, Menelik, Ras Desta, Zewuditu, Black Lion, and St. Paul's) which are found in Addis Ababa city, Ethiopia. Systematic sampling technique was used to select Health workers (Medical Doctors & Nurses) involved in patient care in medical and surgical wards. The sample size was computed using single proportion formula [5] and then the desired numbers of study participants were allocated proportionally from each hospital.

**Description of the tool:** The tool is divided into mainly two parts

**Part-A:** Socio-demographic variables.

**Part-B:** Minnesota Satisfaction Questionnaire Short Form (MSQ-SF) with 20 items that contain hygienic (13 items) and motivational (7 items) factors using Herzberg's job motivators and hygiene factors [6].

**Content validity:** The tool was taken from Minnesota Satisfaction Questionnaire (MSQ-SF) having 5 point Likert scale ranging from 1 (very dissatisfied) to 5 (very satisfied) that was developed by Travis G. Worrell . We used this tool because it has been proven valid and reliable and its Cronbach's alpha test value was 0.819.

**Pilot study:** Pilot study was conducted in Dessie Referral Hospital with 5% of the sample size before the main study to identify potential problems in the proposed study. English version questionnaire was used to assess determinant factors for job satisfaction. Its administration time varied from 15 to 20 minutes by the study participants.

**Data collection procedure:** Prior permission was obtained from the concerned authority. Informed consent obtained from the subjects. Once all necessary data obtained, data was checked for completeness edited, cleaned, coded and entered in to and analyzed by SPSS version 20 for windows. Both descriptive and inferential statistics were used to identify the predictors on job satisfaction.

**Statistical analysis:** The collected data were

analyzed by using descriptive (frequency, percentage, mean and standard deviation) and inferential (Pearson’s Correlation, Independent and paired T- test & ANOVA) statistics. Statistical significances for variables were set at p- value less than 0.05.

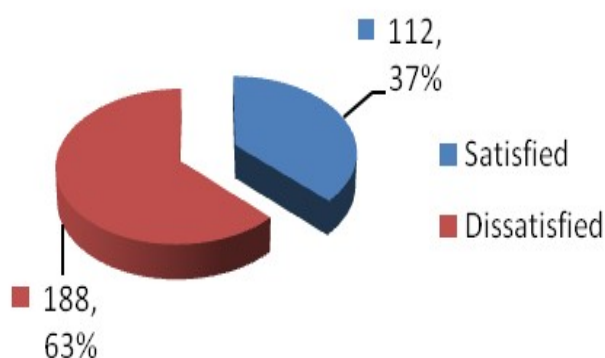
## RESULTS

The majority (77.7%) of respondents were females. The mean age of the respondents was 31.61+7.5SD. The majority (45%) of health workers were young and below the age of 29 years old. By profession, the majority (79%) of the respondents were nurses. The greater part (50.3%) of respondents had less than five years of work experience (Table 1)

**Table 1:** Socio-demographic characteristics of the study subjects (n = 300).

Variables	Category	Frequency (n)	Percentage (%)
Sex	Male	67	22.3
	Female	233	77.7
Age (in years)	< 29	135	45
	29 – 36	82	27.3
	37- 45	83	27.7
Marital status	Married	154	51.3
	Not married	146	48.7
Working experience (in years)	<5	151	50.3
	5 – 10	61	20.3
	10 <sup>+</sup>	88	29.3
Profession	Nurses	238	79.3
	Doctors	62	20.7
No of children	No child	133	44.3
	One child	59	19.7
	Two children	32	10.7
	≥ 3 children	76	25.3
Religion	Orthodox	194	64.7
	Muslims	54	18
	Protestant	52	17.3

**Fig. 1:** Respondents overall level of job satisfaction in.



**Level of respondents’ job satisfaction:** Study subjects who had mean score of 3.77 – 5.00 were considered as **satisfied** whereas who scored below 3.76 were considered **dissatisfied** with their job. 188(63%) of participants were dissatisfied and only 112(37%) of health workers were satisfied with their job (Fig 1).

**Correlation between hygiene (extrinsic) factors and job satisfaction:** The direction of the Pearson’s correlation coefficient between hygiene factors and job satisfaction were all positive except for the item “salary”. Almost all hygiene factors under study were moderately and statistically significant with job satisfaction. Among hygiene factors, negative and strong correlation was observed only for the item “salary” and found statistically significant with job satisfaction ( $r=-0.84, p=0.003$ )(Table 2).

**Table 2:** Pearson’s correlation between hygiene (extrinsic) factors and health workers’ job satisfaction.

S.No.	Hygiene (extrinsic) factors	Job satisfaction	
		r	pv
1	Supervision –Human relation	0.59	0.001
2	Supervision –Technical	0.58	0.0001
3	Social Service	0.55	0.0001
4	Moral Values	0.55	0.0001
5	Ability Utilization	0.54	0.0001
6	Creativity	0.53	0.0001
7	Social Status	0.52	0.001
8	Independence	0.49	0.002
9	Organizational polices	0.47	0.0001
10	Working Conditions	0.45	0.0001
11	Coworkers	0.39	0.0001
12	Workload	0.38	0.003
13	Salary*	-0.84	0.003

R = 0.93, R Square = 0.86, Adjusted R Square = 0.86

r = 0.00 = No correlation

r = 0.01- 0.29 (- 0.01 to - 0.29) = weak correlation

r = 0.30- 0.59 (- 0.30 to - 0.59) = moderate correlation

r = 0.60- 0.99 (- 0.60 to - 0.99) = Strong correlation

r = 1.00 = Perfect correlation

**Correlation between motivation (intrinsic) factors and job satisfaction:** The strongest positive correlation was observed between satisfaction and responsibility ( $r = 0.67, p < 0.0001$ ), similarly, strong correlation was observed between recognition and job satisfaction ( $r = 0.61, p < 0.0001$ ) furthermore, there were moderate cor-

relation observed among the following five motivation factors variety ( $r= 0.54$ ), achievement( $r= 0.49$ ), authority ( $r= 0.48$ ), advancement( $r= 0.48$ ), and security( $r= 0.45$ ) and job satisfaction. It would thus appear that higher correlations with respect to any one of these intrinsic facets is likely to translate into higher levels of job satisfaction (Table 3).

**Table 3:** Pearson’s correlation of intrinsic variables and health workers’ job satisfaction.

S.No.	Motivation (intrinsic) factors	Job satisfaction	
		r	pv
1	Responsibility*	0.67	0.0001
2	Recognition*	0.61	0.0001
3	Variety	0.54	0.0001
4	Achievement	0.49	0.001
5	Authority	0.48	0.0001
6	Advancement	0.48	0.0001
7	Security	0.45	0.0001

\*Strong correlation  $R = 0.86$ ,  $R\text{ Square} = 0.74$ , **Adjusted R Square = 0.73**

**Association between hygiene & motivation predictors:** The mean satisfaction score of hygiene factors (3.54) was higher than the motivation factors (3.35). Moreover, the paired sample T-test indicated that there were a significant differences in the importance level between motivation and hygiene factors ( $t=6.126$ ,  $df= 1$ ,  $p < 0.0001$ ). Though both motivation and hygiene factors were central for job satisfaction, hygiene factors were more important predictors than motivation factors in this study subjects (Table 4).

**Table 4:** Association between motivation & hygiene factors of the respondents based on job satisfaction.

Paired Samples Test (n = 300)	Paired Differences						t	df	p
	Mean	Mean	SD	Std. Error Mean	95% CI of the Difference				
Mean of hygiene factors	3.54	0.197	0.56	0.032	0.134	0.26	6.126	299	0.0001**
Mean of motivation factors	3.35								

## DISCUSSION

This study examined the levels and factors affecting health workers job satisfaction using the Herzberg’s job motivator and hygiene factors at six different government Hospitals in Addis Ababa. In this study only 37% of health workers were satisfied with their job. On the other hand the majority (63%) of health workers were dissatisfied with their job. Similarly, a study conducted in Turkey revealed that that 60% of

the health workers were dissatisfied with their job [7]. This finding is in contrast with other studies conducted in Jimma that have revealed good level of job satisfaction(53.8%) among health care workers [8]. This difference in job satisfaction level could be explained by their due difference in health care settings, patient loads and socioeconomic condition, culture and societal system differences among different countries.

Though both motivation and hygiene factors were essential for job satisfaction among health workers, hygiene factors were more important predictors than motivation factors in this study subjects ( $t= 6.126$ ,  $df= 1$ ,  $p < 0.0001$ ). Whereas only “salary” was negatively and strongly correlated and found statistically significant with health workers job satisfaction ( $r = -0.84$ ,  $p = 0.003$ ) (Table 2). Similarly, a study conducted in China revealed that intrinsic job characteristics were found to be as important as extrinsic job characteristics on health workers job satisfaction [9]. In contrast, in Indonesia extrinsic (hygiene) factors were significantly associated with health workers job satisfaction, where as intrinsic (motivation) factors were not significantly associated with job satisfaction [10]. No satisfaction with salary could be due to health workers too many work as well as taking different occupational risks in their job and thereby they may desire more salary/reward/. Thus, health managers shall use both motivation

and hygienic determinants of Herzberg’s theory as a tool to increase health workers’ job satisfaction.

## CONCLUSION

Based on the results from the present study, the following conclusions were forwarded that, the majority (63%) of health workers working in Addis Ababa Government Hospitals were dissatisfied with their job. Though both hygiene

and motivation predictors were positively correlated with health workers job satisfaction, hygiene factors were more important than motivation factors in this study subjects.

**Recommendations:** The research findings reported in this study hopefully make a valuable contribution to the effect of hygienic and motivation factors among “health workers job satisfaction. However, additional research is needed to further investigate the potential relationship among other extraneous variables, such as partner income, level of stress, socio-demographic factors, and job performance and to other factors in order to obtain higher/satisfactory results. Sampled subjects are only from Addis Ababa; therefore, the results may not be generalized to all health workers in the country. This study was not supported by qualitative type of methods.

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