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JOB SATISFACTION FACTORS OF HEALTHCARE WORKERS

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ABSTRAKT
Introduction/Objective: Job satisfaction is an employee's emotional response to work and is an important indicator of the quality of working life. The paper examines the prevalence of influential job satisfaction factors among health workers at three levels of health care. This is the first research on this topic conducted in healthcare institutions in Boka Kotorska and may be an indicator of the quality of business success. Method: A cross- sectional study conducted in Montenegro (December 2021 - July 2022) examined job satisfaction among 192 respondents aged 19-65, permanently employed in five institutions at three levels of healthcare. Job satisfaction and influencing factors of job satisfaction were examined using the Bellingham Job Satisfaction Survey (JSS). Results: By surveying 32.8% of healthcare workers at the primary, 34.9% at the secondary and 32.3% at the tertiary level of healthcare, the identified job satisfaction factors were: recognition and appreciation at work (p=0.0001), tasks to be learned (p=0.020), materials and equipment for work (p=0.010), opportunity for daily best work (p=0.037), encouragement for development at work (p=0.031), trust in management (p=0.036), supervision (p=0.009) and salary (p=0.0001). The representation of these factors is lowest among respondents at the primary level, and highest among respondents at the tertiary level. There was no significant difference in overall job satisfaction, as 51.6% of respondents have an excellent job, 23.4% good, 31% acceptable, 6.8% bad and 2.1% depressing job. Conclusion: Job satisfaction factors are different and are represented differently at the primary, secondary and tertiary levels of health care. Recognition and appreciation, cooperation with the manager and salary are the most influential factors of job satisfaction of health workers at the tertiary level of health care.
Keywords: Health workers; Job satisfaction; Levels of heathcare.

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INTRODUCTION

Job satisfaction is the set of positive feelings that people have about their job and its various aspects, a feeling that acts as motivation for work (1,2). It is important for organizational functioning, individual success, relationships among employees, and physical and mental health, because satisfied workers tend to be more productive and creative (3).

Job satisfaction is an important variable in occupational psychology, a key indicator of quality of working life, and a critical factor in the quality of health care systems

(4). It is significant in-service delivery, is linked with patient satisfaction, and contributes to the continuity of health care (5-7). Conversely, job dissatisfaction negatively affects the structure and processes of work organizations and is reflected in the experience of health service users (8).

Job satisfaction depends on factors such as competitive pay, adequate staffing, the work environment, working conditions, the nature of the job, organizational communication, coworkers, benefits, supervision, rewards, and opportunities for advancement (9). The level of job satisfaction varies among work organizations, and the influencing factors of job satisfaction vary depending on the organization

(10). Motivators of job satisfaction, relationships with colleagues, managers and professional development are important conditions for job satisfaction and staff retention, while factors of dissatisfaction are high workload, salary, promotion, recognition and organizational politics (11).

Available research has shown that health care workers are generally satisfied with their jobs, but it has also identified some dissatisfied service providers (12,13). According to data from the Union of Medical Doctors of Montenegro from 2019, there is evident dissatisfaction with the work of healthcare workers. The willingness of 296 employees in the healthcare sector to leave their jobs is a serious indicator of problems in the system. Additional indicators of dissatisfaction are reflected in the reduced interest in competitions for key specializations and the fact that more than 150 doctors have left the healthcare system. One of the main reasons for this situation is inadequate wages, as the salaries of specialist doctors are often lower than the salaries of employees in other public companies (14).

There is not much research on job satisfaction among healthcare workers in Montenegro, and therefore the aim of this study was to examine the prevalence of influential factors of job satisfaction among healthcare workers employed at three levels of healthcare.

The null hypothesis is set: The factors affecting job satisfaction among health care workers employed at three levels of health care are not significant.

The alternative hypothesis is set: The factors affecting job satisfaction among health care workers employed at three levels of health care are significant.

The research can contribute to the scientific and professional literature in this field, and the results can offer valid data that will serve to find a model for recognizing the presence of job satisfaction factors, their elimination, and

the recommendation of a preventive approach. This is the first research on this topic conducted in health institutions in Boka Kotorska, and can be an indicator of the quality of business success.

METHOD

A cross-sectional study was conducted among health care workers employed in primary, secondary, and tertiary health care institutions in the southern region of Montenegro (Boka Kotorska) from December 2021 to July 2022. The study included 192 respondents from five health institutions: Public Health Center Herceg Novi, Public Health Center Kotor, the Special Hospital for Orthopedics, Neurosurgery and Neurology "Vaso Ćuković" Risan, General Hospital Kotor, and the Institute for Physical Medicine, Rehabilitation and Rheumatology "Dr. Simo Milošević" Igalo. The study was carried out in accordance with all ethical principles and with the approval of the Ministry of Health of Montenegro and the relevant ethics committees.

Inclusion criteria were: age 19 - 65 years, permanent employment, and answers to the questions provided. The purpose, reason, and plan of the research were explained to the respondents, and they agreed to participate by signing an informed consent form.

Job satisfaction was assessed using the Job Satisfaction Survey (JSS), developed in 2004 by Richard Bellingham, an organizational psychologist specializing in organizational learning, strategic planning, and developmental leadership. The Job Satisfaction Survey is a reliable instrument approved by the Wellness Councils of America (WELCOA) (15-19). It contains 30 statements related to work, workplace, coworkers, supervision, management, pay, and communication. Each statement has two options, "yes" and "no." Positive statements are scored with two points. The total score of all positive statements classifies job satisfaction as excellent job (50-60 points), good job (40-49 points), acceptable job (30-39 points), poor job (20-29 points), and depressing job (0-19 points) (15,16).

The obtained data were classified according to the level of health care into three groups (primary, secondary and tertiary). They were analyzed using the method of descriptive and comparative statistics, and the results are presented in text and tables. Nominal and ordinal variables were analyzed using the chi-square test. The threshold of statistical significance was $p<0.05$. Statistical analysis was carried out using the statistical package for sociological research IBM Statistics SPSS v 23.0 (Chicago, Illinois, USA).

RESULTS

The study included 32.8% (n=63) of respondents from primary, 34.9% (n=67) from secondary and 32.3% (n=62) from tertiary level of healthcare. Most of the participants were female, with an average age of 41.6±12.99 (20.00-65.00) years.

44.8% of healthcare workers look forward to going to work on Monday mornings. At the end of the working day, 34.4% of healthcare workers were

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able to devote themselves to personal interests, 33.9% had the energy to visit important people, and 25% of respondents had time to read interesting books. 14.1% of healthcare workers work most of the time and have positive interactions at work, and only 13% of respondents were positive at work and worked most of the time.

Among the factors of job satisfaction examined, the highest proportion of positive responses was among secondary-level health workers. Primary-level health workers were the least likely to look forward to going to work on Monday mornings (42.9%), at the end of each working day 30.2% of them had time and energy for personal interests, 19% had time to read interesting books, and only 7.9% had positive interactions at work. The lowest proportion of respondents from the tertiary level were positive at work (9.7%) and had the energy to visit people they care about after the workday (30.6%), but these differences were not significant. The differences were also not significant in the statements: “I have good friends at work”, “I feel appreciated and affirmed at work” and “Work is a real plus in my life”. Only 11.5% of healthcare workers believe that they have good friends at work, and 17.2% of them claim that they are appreciated and affirmed. More positive responses were given by respondents from the tertiary level of healthcare (25.8%) compared to respondents from the secondary level (22.4%). Respondents from the primary level had the lowest rates of positive responses to these statements, but the highest proportion of positive responses (28.6%) to the statement “Work is a real pulse in my life”. There is a significant difference between groups in the statement “I feel recognized and appreciated at work” ($p=0.0001$). The least recognizable and valued at work are primary level respondents (4.8%), followed by secondary level respondents (28.4%), and the most recognizable and valued are tertiary level healthcare workers (30.6%) (Table 1).

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Table 1. Job satisfaction (statements 1-10)

	Level of health care – N (%)			Total
	Primary	Secondary	Tertiary	
JSS 1 - I look forward to going to work on Monday morning. $\chi2$=0,373; p=0,830	27 (42,9)	32 (47,8)	27 (43,5)	86 (44,8)
JSS 2 - I feel positive and up most of the time I am working. $\chi2$=2,229; p=0,328	7 (11,1)	12 (17,9)	6 (9,7)	25 (13,0)
JSS 3 - I have energy at the end of each work day to attend to the people I care about. $\chi2$=0,651; p=0,72	21 (33,3)	25 (37,3)	19 (30,6)	65 (33,9)
JSS 4 - I have energy at the end of each work day to engage in personal interests. $\chi2$=0,787; p=0,675	19 (30,2)	25 (37,3)	22 (35,5)	66 (34,4)
JSS 5 - I have time and energy in my life to read books that interest me. $\chi2$=1,787; p=0,409	12 (19,0)	19 (28,4)	17 (27,4)	48 (25,0)
JSS 6 - Most interactions at work are positive. $\chi2$=3,548; p=0,170	5 (7,9)	13 (19,4)	9 (14,5)	27 (14,1)
JSS 7 - I have good friends at work. $\chi2$=0,492; p=0,782	6 (9,5)	9 (13,4)	7 (11,3)	22 (11,5)
JSS 8 - I feel valued and affirmed at work. $\chi2$=4,098; p=0,129	6 (9,5)	13 (19,4)	14 (22,6)	33 (17,2)
JSS 9 - I feel recognized and appreciated at work. $\chi2$=15,471; *p=0,0001	3 (4,8)	19 (28,4)	19 (30,6)	41 (21,4)
JSS 10 - Work is a real plus in my life. $\chi2$=0,657; p=0,720	18 (28,6)	15 (22,4)	16 (25,8)	49 (25,5)

JSS - Job Satisfaction Survey; $\chi2$ - chi-squared test; p - value; *p - value reaches statistical significance

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In the total sample, 20.3% of respondents work freely in a way that suits them, 13% of respondents feel free at work. 12% of respondents stated that they are engaged in meaningful work, most of them tertiary level respondents (21%). In 17.2% of respondents, personal values are in line with organizational values, least of all in primary level respondents (12.7%). 15.6% of healthcare workers are in line with the task of the work organization, least of all in secondary level respondents (11.9%). The work of colleagues and peers is respected by 10.4% of respondents, most of all in tertiary level respondents (17.7%). Differences in personal values, work organization, work style and freedom, and respect for colleagues did not reach a statistically significant difference between groups, but significant differences were found in trust in management ($p=0.036$) and the ability to learn what one wants to learn ($p=0.020$). Only 11.5% of respondents trust their management. The highest trust in management was held by 19.4% of tertiary-level respondents, and higher trust in management was held by secondary-level respondents (10.4%) compared to primary-level respondents (4.8%). 24% of healthcare workers can learn what they want to learn at work. The ability to learn is highest among tertiary-level respondents (35.5%), and higher among secondary-level healthcare workers (22.4%) compared to primary-level respondents (14.3%). 31.3% of healthcare workers felt involved in influential decisions in their organizational community, and creativity and innovation were supported by 25% of them. The highest number of positive responses were given by respondents at the tertiary level (38.7%, 35.5%), and the lowest number by respondents at the primary level (22.2% and 17.5%), but the differences were not significant (Table 2).

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Table 2. Job satisfaction (statements 11-20)

	Level of health care – N (%)			Total
	Primary	Secondary	Tertiary	
JSS 11 - I'm engaged in meaningful work. $\chi2$=0,572; p=0,751	7 (11,1)	7 (10,4)	9 (14,5)	23 (12,0)
JSS 12 - I feel free to be who I am at work $\chi2$=3,702; p=0,157	6 (9,5)	13 (19,4)	6 (9,7)	25 (13,0)
JSS 13 - I feel free to do things the way I like at work. $\chi2$=0,055; p=0,973	13 (20,6)	13 (19,4)	13 (21,0)	39 (20,3)
JSS 14 - My values fit with the organizational values. $\chi2$=1,328; p=0,515	8 (12,7)	13 (19,4)	12 (19,4)	33 (17,2)
JSS 15 - I am aligned with the organizational mission. $\chi2$=3,375; p=0,185	8 (12,7)	8 (11,9)	14 (22,6)	30 (15,6)
JSS 16 - I trust our leadership team. $\chi2$=6,663; *p=0,036	3 (4,8)	7 (10,4)	12 (19,4)	22 (11,5)
JSS 17 - I respect the work of my peers. $\chi2$=5,309; p=0,070	4 (6,3)	5 (7,5)	11 (17,7)	20 (10,4)
JSS 18 - I have opportunities to learn what I want to learn. $\chi2$=7,847; *p=0,020	9 (14,3)	15 (22,4)	22 (35,5)	46 (24,0)
JSS 19 - I feel involved in decisions that affect our organizational community. $\chi2$=4,074; p=0,130	14 (22,2)	22 (32,8)	24 (38,7)	60 (31,3)
JSS 20 - Creativity and innovation are supported. $\chi2$=5,788; p=0,055	11 (17,5)	15 (22,4)	22 (35,5)	48 (25,0)

JSS - Job Satisfaction Survey; $\chi2$ - chi-squared test; p - value; *p - value reaches statistical significance

The differences were also not statistically significant in the statements "I feel informed about events at work" and "I know what is expected of me at work". 22.9% of respondents stated that they felt informed about events at work, and only 10.9% of respondents knew what was expected of them at work. The highest proportion of positive responses to these statements was given by respondents at the tertiary level (25.8% and 17.7%), and the lowest by respondents at the primary level (17.5 and 6.3%). A significant difference was found in the statements "I have the material and equipment necessary for adequate work" (p=0.010) and "I can do what I do best every day"

(p=0.037). The material and equipment necessary for work were mostly owned by 25.8% of respondents at the tertiary level, followed by 22.4% of respondents at the secondary level, and only 6.3% of respondents at the primary level. On a daily basis, 14.6% of respondents are able to do what they do best at work. The opportunity for the best work was highest among respondents at the tertiary level (22.6%), and the opportunity for the best work was higher at the secondary level compared to the primary level (14.9% / 6.3%) (Table 3).

Table 3. Job satisfaction (statements 21-30)

	Level of health care – N (%)			Total
	Primary	Secondary	Tertiary	
JSS 21 - I feel informed about what's going on. $\chi2$=1,584; p=0,453	11 (17,5)	17 (25,4)	16 (25,8)	44 (22,9)
JSS 22 - . I know what is expected of me at work. $\chi2$=4,579; p=0,101	4 (6,3)	6 (9,0)	11 (17,7)	21 (10,9)
JSS23- I have the materials and equipment that I need in order to do my work right. $\chi2$=9,130; *p=0,010	4 (6,3)	15 (22,4)	16 (25,8)	35 (18,2)
JSS24 - I have the opportunity to do what I do best every day at work. $\chi2$=6,619; *p=0,037	4 (6,3)	10 (14,9)	14 (22,6)	28 (14,6)
JSS 25 - My manager cares about me as a person. $\chi2$=1,309; p=0,520	11 (17,5)	14 (20,9)	16 (25,8)	41 (21,4)
JSS 26 - I know someone at work who encourages my development. $\chi2$=6,976; *p=0,031	11 (17,5)	20 (29,9)	24 (38,7)	55 (28,6)
JSS 27 - My opinions count. $\chi2$=0,617; p=0,734	9 (14,3)	13 (19,4)	11 (17,7)	33 (17,2)
JSS 28 - My coworkers are committed to doing quality work. $\chi2$=1,522; p=0,467	6 (9,5)	7 (10,4)	10 (16,1)	23 (12,0)
JSS 29 - My manager reviews my progress. $\chi2$=9,455; p=*0,009	9 (14,3)	14 (20,9)	23 (37,1)	46 (24,0)
JSS 30 - I am fairly compensated. $\chi2$=17,991; *p=0,0001	30 (47,6)	33 (49,3)	50 (80,6)	113 (58,9)

JSS - Job Satisfaction Survey; $\chi2$ - chi-squared test; p - value; *p - value reaches statistical significance.

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Statistically significant differences were also found in the statements "I know someone at work who encourages my development" (p=0.031), "My manager/supervisor monitors my progress" (p=0.009) and "I am adequately paid for my work" (p=0.0001). Development was encouraged at work by 28.6% of respondents. The most positive responses were given by respondents at the tertiary level of health care (38.7%), followed by those at the secondary level (29.9%), and the least by respondents at the primary level (17.5%). Only 24% of healthcare workers stated that their manager monitors their progress. Supervision is most prevalent at the tertiary level (37.1%), and is higher at the secondary level (20.9%) compared to the primary level (14.3%). 58.9% of healthcare workers are adequately paid for their work. The largest proportion of respondents at the tertiary level (80.6%) believe that they are adequately paid for their work. Respondents at the secondary level were paid significantly less for their work (49.3%), and respondents at the primary level were paid the least (47.6%) (Table 3).
Analysis of overall job satisfaction showed that 51.6% of respondents had an excellent job, 23.4% a good job, 16.1% an acceptable job, 6.8% a bad job, and 2.1% of respondents had a depressing job. The largest proportion of primary-level health workers claimed that their job was excellent and good (58.7% and 23.4%), the majority of tertiary-level health workers had an acceptable and bad job (24.2% and 8.1%), and 4.5% of secondary-level health workers had a depressing job, but these differences were not statistically significant (p=0.174) (Table 4).

Table 4. Overall job satisfaction

Job satisfaction	Level of health care - N (%)			Total
	Primary	Secondary	Tertiary	
Great job (50 - 60)	37 (58,7)	35 (52,2)	27 (43,5)	99 (51,6)
Good job (40 - 49)	18 (28,6)	13 (19,4)	14 (22,6)	45 (23,4)
Acceptable job (30-39)	5 (7,9)	11 (16,4)	15 (24,2)	31 (16,1)
Bad Job (20-29)	3 (4,8)	5 (7,5)	5 (8,1)	13 (6,8)
Depressing Job (1-19)	0 (0,0)	3 (4,5)	1 (1,6)	4 (2,1)
Total	63 (100,0)	67 (100,0)	62 (100,0)	192 (100,0)
$\chi 2$=11,517; p=0,174				

$\chi 2$- chi-squared test; p - value.

DISCUSSION

Job satisfaction is an individual's global emotional reaction to their job that describes the factors responsible for creating this emotion and is crucial in increasing the efficiency and motivation of health care employees (20,21).

Examining the representation of health workers' job satisfaction factors in relation to three levels of health care, this research showed that 51.6% of respondents have an excellent job, 23.4% a good job, 16.1% an acceptable job, 6.8% a bad job, and 2.1% a depressed job.

Available research among health care workers has yielded considerable variation in overall job satisfaction. Moafa and Angawi reported 71.2% of healthcare workers satisfied with their job, Geta et. al 55.2%, Gashawbeza and Ezo 49.7%, and Abate and Mekonnen 41.17% (12,21,22,23). By examining the factors, attitudes, and job satisfaction of 400 healthcare workers, Deshmukh et al. found that 20% of healthcare workers were satisfied with their job, 12% dissatisfied, and 68% were ambivalent, neither satisfied nor dissatisfied with their job (20).

In our research, the most significant factors of job satisfaction were: recognition and appreciation at work (JSS9), trust in management (JSS16), learning what one wants to learn (JSS18), materials and equipment for work (JSS23), the possibility of doing the best daily work (JSS24), knowing a person who encourages development at work (JSS26), supervisor support (JSS29), and compensation for work (JSS30). The eight significant factors of job satisfaction are least represented among primary-level health workers and most represented among tertiary-level health workers.

The study by Grujičić et al. conducted in primary healthcare institutions showed that healthcare workers are more motivated than satisfied with job satisfaction factors such as: recognition of good work, good interpersonal relationships, opportunities for advancement and promotion, management, salary, working conditions, work atmosphere, job security, manager support, availability of modern work equipment, and rewards for exceptional work (24). The nature and type of work and the relationship with the manager are influential factors of job satisfaction, while factors of job dissatisfaction include opportunities for advancement, recognition, and the work environment (20).

Some authors emphasize the structure of healthcare as a significant factor in job satisfaction. A higher level of job satisfaction is more prevalent among workers in high-quality institutions, but studies focused on primary healthcare have shown a low level of job satisfaction (25,26). By examining job satisfaction among healthcare workers in primary and secondary healthcare, Karaferis et al. identified ambivalence, career stagnation, and dissatisfaction with salary as more influential factors. In the primary level, factors of moderate job satisfaction were the nature of the job, supervision, colleagues, and communication, while ambivalence was associated with benefits (27). At the secondary level, the most important factor of low job satisfaction is salary, but also factors related to communication, unforeseen rewards, and the nature of the job (28). Our research provided comparable

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data because among healthcare workers at the primary and secondary levels, salaries, communication, and affirmation were more significant, correlating factors of job satisfaction.

Our research has shown that primary care healthcare workers are the least recognized, valued and affirmed at work. Healthcare workers at this level do not have the encouragement to develop at work and trust their management, and support from managers and cooperation with supervisors is significantly lower than their colleagues from secondary and tertiary care levels.

Alahiane et al. claim that supervisor recognition is the most significant factor with the greatest effect on job satisfaction, while Foà et al. identified social team cohesion, professional autonomy, career advancement, positive social relationships, and effective leadership as important elements (29,30). Janíková and Bužgová state that supervision and job satisfaction correlate and that the workplace is directly related to satisfaction and supervision (31). Supervisors contribute to career development and are an important indicator of mediating emotional labor and subjective evaluation of success (32-34). According to Cao et al., supervision is a significant resource for well-being at work and a key workplace factor affecting emotional and work well-being, as perceived supervisor support is positively associated with job satisfaction, and the lack of this support has the strongest negative impact on health and well-being at work (35).

In our study, compensation for work was an influential factor in job satisfaction. Most healthcare workers (58.9%) are adequately paid for their work, with primary level workers being the least paid. Kitsios and Kamariotou state that key motivators of healthcare workers' job satisfaction are relationships with colleagues and the level of achievement, while the level of reward and job characteristics play a secondary role (36). Rubel et al. emphasize that strong interaction among employees and recognition of effort invested are important for improving employee performance levels, and a certain level of reward could enhance job satisfaction, healthcare workers' productivity, and influence the overall performance of the healthcare unit and the quality of services provided (37).

CONCLUSION

The analysis of job satisfaction factors revealed statistically significant differences between groups. Job satisfaction factors are represented differently among health workers at the primary, secondary and tertiary levels of health care. There is a significant difference in the influential factors of job satisfaction of health workers, and tertiary level workers are the group with the most represented correlating factors. Recognition and appreciation at work, good cooperation with management and salary are important factors that could be relevant indicators of motivational strategies for better job satisfaction of health workers.

Conflict of interest

None to declare.

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Abbreviations
JSS - Job Satisfaction Survey