



**ADDIS ABABA UNIVERSITY
COLLEGE OF BUSINESS AND ECONOMICS
SCHOOL OF COMMERCE
DEPARTMENT OF HUMAN RESOURCE MANAGEMENT**

**DETERMINANT FACTORS OF JOB SATISFACTION AMONG HEALTH
PROFESSIONALS: THE CASE OF AYDER REFERRAL HOSPITAL
MEKELLE, TIGRAY, ETHIOPIA**

**A Thesis Submitted to Addis Ababa University School of Commerce in partial
fulfillment of the requirement for the Award of Masters of Art Degree in
Human Resource Management**

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DECLARATION

I declare that this thesis entitled “Determinant Factors of Job Satisfaction among health Professionals of Ayder Referral Hospital, Mekelle, Tigray Region, Northern Ethiopia” submitted for the partial fulfillment of the requirements for the Masters degree in Human Resource Management, is my original work and this thesis has not been published or submitted elsewhere for any degree or qualification. Materials or ideas of other authors used in this thesis have been duly acknowledged and references are listed at the end of the main text.

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This is to certify that the thesis prepared by Andom G/ Libanos, entitled: “Determinant Factors of Job Satisfaction Among Health Professionals of Ayder Referral Hospital Mekelle, Tigray, Ethiopia” and submitted in partial fulfillment of the requirements for the Degree of Masters of Human Resources Management complies with the regulations of the university and meets the accepted standard with respect to originality and quality.

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LIST OF ABBREVIATIONS AND ACRONYMS

| | |
|------------|--|
| BSc: | Bachelor of Science |
| CI: | Confidence Interval |
| Dr: | Doctors |
| G.C | Gregorian Calendar |
| HR | Human Resource |
| IPRS: | Interpersonal Relationships |
| Lab. Tech: | Laboratory Technologist |
| M.Dr: | Medical Doctor |
| MSc: | Masters of Science / Masters Degree |
| SD | Standard Deviation |
| SHRM | Strategic Human Resource Management |
| SPSS: | Statistical Package for Social Science |

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ABSTRACT

Healthcare is crucial service industry that has significant effects for facilitating productivity increases, supporting the population's general wellbeing and enabling them to pursue a more meaningful life. Every healthcare institute is expected by the public to render quality and professional healthcare services. In order to do so, healthcare institutes need employees to be satisfied with their jobs. This study was designed to examine determinant factors of job satisfaction among health professionals in Ayder referral hospital, Mekelle, Tigray, Ethiopia. A cross-sectional study was conducted to determine the level and factors affecting job satisfaction of health professionals working in Ayder referral hospital. It was conducted from February to May and included all categories of health professionals working in the hospital during the study period. Data was collected using both qualitative and quantitative data collection methods. After the data was collected, it was feed on to excel and analyzed using SPSS version 20.0. Descriptive statistics, bivariate and multivariate logistic regression analysis were used to identify associated factors with job satisfaction and P-value < 0.05, at 95% CI was taken as cut off point for statistical significance. A total of 223 health professionals have responded for the self administered questionnaire. The result showed that 123 (55.2%) of the respondents were dissatisfied with their job. The major reasons reported for their dissatisfaction were lack of compensation & benefits, inadequate promotion, recognition, feedback, poor leadership practice and low salary. 91 (40.8%) health professionals were satisfied with interpersonal relationship, achievement, autonomy, work itself and working conditions subscales. Particularly, Participant's responses indicated that autonomy, work itself, salary, interpersonal relationships, leadership, compensation & benefits and working conditions subscales were the final predictors of overall job satisfaction. Job satisfaction of health professionals in Ayder referral hospital was found to be low. Responsible bodies should formulate mechanisms to improve job satisfaction of health professionals so as to improve the healthcare services of the hospital.

KEYWORDS: *Job satisfaction, Health Workers, Ayder Referral Hospital*

CHAPTER ONE

INTRODUCTION

1.1 BACKGROUND OF THE STUDY

Human resources are at the very heart of a health system. Health systems cannot function effectively without sufficient numbers of skilled, motivated and supported health workers. (Chen L et al, 2006). Job satisfaction is inextricably linked to motivation, and both involve cognitive, affective, and behavioral processes, with worker motivation commonly understood as the reason why workers behave as they do towards achieving personal and organizational goals(David H,2010). Job satisfaction is a worker's sense of achievement and success on the job. It is generally perceived to be directly linked to productivity as well as to personal well-being. It implies doing a job one enjoys, doing it well and being rewarded for one's efforts. It further implies enthusiasm and happiness with one's work. Job satisfaction is the key ingredient that leads to recognition, income, promotion, and the achievement of other goals that lead to a feeling of fulfillment(Kaliski BS.2007).

Job satisfaction causes a series of influences on various aspects of organizational life, some of them such as the influence of job satisfaction on employee productivity, loyalty and absenteeism(Aziri B.2011). Positive and favorable attitudes towards the job indicate job satisfaction, and negative and unfavorable attitudes towards the job indicate job dissatisfaction (Armstrong, 2008).

Employees in service-based industries strongly influence customer satisfaction. In service based industries, employees take an increasing role in driving organizational performance. One of the most important ways that employees affect performance is in their interactions with customers. Accordingly, it is vital that companies understand concepts such as employee engagement and satisfaction and how the levels of engagement and satisfaction relate to customer satisfaction and overall customer experience (Jimmy Peltier and Andy Dahl, 2009).

Every healthcare institute is expected by the public to render quality and professional healthcare services. In order to do so, healthcare institutes need employees to be satisfied with their jobs. Health care workers can be a valuable source of information about factors that enable or hinder them from providing high quality care (John Khumalo, 2014). Healthcare is crucial service

industry that has significant effects for facilitating productivity increases, supporting the population's general wellbeing and enabling them to pursue a more meaningful life (Siddiqui and Khandakar, 2007).

There are a variety of factors that can influence a person's level of job satisfaction. Some of these factors include the level of pay and benefits, the perceived fairness of the promotion system within a company, the quality of the working conditions, leadership and social relationships, the job itself (the variety of tasks involved, the interest and challenge the job generates, and the clarity of the job description/requirements) (M.M. Parvin, 2011). Human power is the back bone for the provision of quality health care for the population. High level of professional satisfaction among health workers earns higher worker force retention and patients satisfaction. It is very important to understand what influences employees' job satisfaction since there is evidence that satisfied employees deliver better customer service (Alemshet Y.et.al 2011).

Thus the aim of this study was to examine and determine the factors affecting job satisfaction of health professionals of Ayder Referral Hospital, Tigray, Ethiopia.

1.2 BACKGROUND OF THE ORGANIZATION

Ayder Referral Hospital is one of the service based industries and the second largest hospital next to Tikur Anbassa hospital in the nation. The hospital is located in Tigray Regional state – Mekelle town which is 780 kilometers north of Addis Ababa. It is established in 2005 G.C. It provides a broad range of medical service to both in and out patients of all age groups. Specifically it gives its referral and non-referral services to populations in its catchment areas of the Tigray, Afar, and south-eastern parts of the Amhara Regional states. It is the only referral Hospital in northern part of the country and provides specialized services for about 8 million inhabitants. The hospital is managed by Mekelle University and used as teaching hospital for Mekelle University, College of Health Sciences. There are 1135 workers; of which 342 are supportive and the rest 793 are health workers.

Source: www.AyderReferralHospital.Com

1.3 STATEMENT OF THE PROBLEM

Job satisfaction has been defined as a pleasurable emotional state resulting from the appraisal of one's job; an affective reaction to one's job; and an attitude towards one's job (Ubom, 2001). Oshagbemi (1996) believes that job satisfaction is an important subject because of its relevance to the physical and mental wellbeing of employees. Hence, an understanding of the factors relating to job satisfaction is important. Spector (1997), categorized the factors that affect job satisfaction in to two (1).The job environment and the factors related to the job. This includes the nature of the job, relationship among people in the work place, how people are treated by their supervisors and reward systems. (2).The individual factors that a person brings to the job including the individual's personality and experiences.

In addition to improved patient satisfaction, other benefits of measuring and improving employee satisfaction include reduced turnover, associated reductions in training costs, identifying cost-saving opportunities, curbing absenteeism, strengthening supervision, evaluating patient-service issues, assessing training needs, streamlining communication, benchmarking the facility's progress in relation to the industry, and gauging employee's understanding of, and agreement with, the facility's mission. Satisfied employees are focused on their professional tasks, without being distracted by a negative environment, which leads to better performance and productivity.

(K.Shader et al 2001).

Health workers who are not satisfied at work are found to distance themselves from their patients and their nursing chores, resulting in suboptimal quality of care. Dissatisfaction with work can cause poor job performance, lower productivity, and staff turnover and is costly to organizations (L. M. Saari and T. A. Judge, 2004). Health care is an extraordinarily people-centric industry. Aside from the obvious fact that the patient consumes services to his or her physical body, nearly all treatments and procedures are administered by people. The management of health care personnel takes place in a complex environment involving a variety of professionals, extensive use of materials and equipment, and an array of services that extend beyond health care to include food, hospitality and instruction. This challenging environment places a great deal of stress on employees (Jimmy Peltier and Andy Dahl, 2009).

A cross sectional study conducted on job satisfaction and its determinant among health workers in Jimma University specialized hospital revealed that (46.2%) of the health workers were dissatisfied with their job. The major reasons reported for their dissatisfaction were lack of motivation, inadequate salary, insufficient training opportunities and inadequate number of human resources. (41.4%) health professionals were satisfied with their job; the major reasons given were getting satisfaction from helping others and professional gratification (Alemshet Y.et.al 2011). Differently the study conducted on assessment of job satisfaction among pharmacy professionals in southwest Ethiopia revealed that (60.8%) were satisfied and (39.2%) were dissatisfied in their job. The major reasons reported for satisfaction were helping the needy and professional gratification .The major reasons identified for dissatisfaction were inadequate salary , poor interaction with other health care team members , lack of appropriate motivation package , insufficient on service training and poor health institution infrastructure (Ahmed et al., IJPSR, 2013).

An informal interview with some health professionals reveals that, though the working condition of the hospital is good compared with other hospital in the region, there are a number of problems for instance house allowance, complain on equal treatment (fairness), health insurance, inadequate health service and educational opportunities. There are also other problems such as lack of appropriate motivational package and poor leadership practice that affect employees work satisfaction. To improve the job satisfaction of health workers, identifying determinant factors are mandatory. The study of determinant factors of job satisfaction among health professionals in Ayder Referral Hospital is viewed from such basis addressed above. Basically it is found that there are no formal researches that specifically address the issue of determinant factors of job satisfaction among health professionals in Ethiopia specifically in Tigray mainly in Ayder Referral Hospital. Therefore the study will try to fill the gap on the information of factors that affect job satisfaction of health professionals in the case of Ayder that enable human resource managers to develop appropriate measures in avoiding factors that leads to job dissatisfaction.

1.4 OBJECTIVES OF THE STUDY

1.4.1 General objective

To examine the factors that affect job satisfaction among health professionals in Ayder Referral Hospital, Tigray, Ethiopia.

1.4.2 Specific objectives

1. To identify the factors that affects the job satisfaction of health professionals in Ayder Referral Hospital.
2. To investigate the job satisfaction level of health professionals in Ayder Referral Hospital.

1.5 RESEARCH QUESTIONS

Specifically, the study was addressed the following research questions in exploring the determinant factors of job satisfaction among health professionals of Ayder Referral Hospital.

- a) What are the determinant factors of job satisfaction in the hospital?
- b) What is the general level job satisfaction of health professionals in the hospital?

1.6 SIGNIFICANCE OF THE STUDY

With the above in mind, the aim of this research was to investigate factors that influence the job satisfaction of those health workers in Ayder Referral Hospital. Generally the study will have the following significance:

1. The results of the study will serve as an input for decision making process for issues related to job satisfaction in the hospital.
2. This study will help to organizations for identifying the area of job dissatisfactions among health professionals.
3. And also may be used as baseline information for conducting further research

1.7. DELIMITATION OF THE STUDY

This research was conducted, in Ayder Referral Hospital in Mekelle, Tigray, which is 780 kilometers north of Addis Ababa, with specific area of study on determinant factors of job satisfaction. A cross sectional survey was conducted in the study from February to may 2015. The target populations were 759 health professionals hold diploma and above and have a minimum of one year work experience in the hospital.. The sample group consisted of 223 health workers.

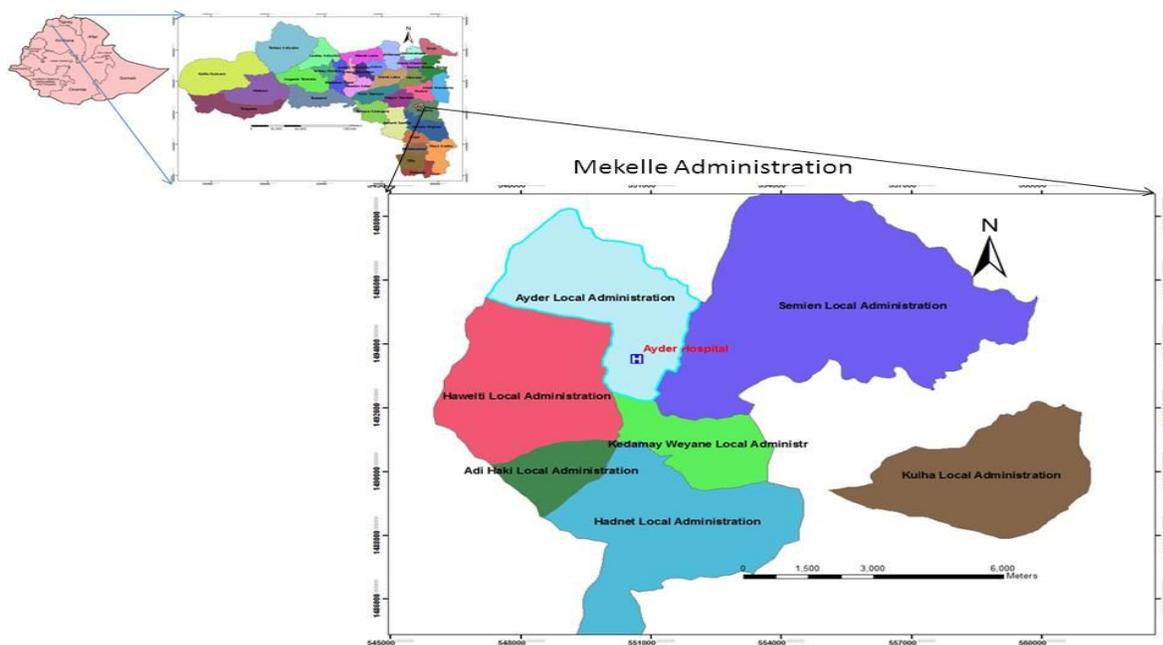


Figure 1. Map of the study area (Mekelle Administration)

1.8. ORGANIZATION OF THE STUDY

The research paper is organized in five chapters. The first chapter includes the introduction that contains background of the study, background of the organization, statement of the problem, objectives of the study, research questions, significance and delimitation of the study. The review of related literature is described in the second chapter. The third chapter describes the research methodology which consists of conceptual framework, research design, sampling design, data collection methods, data analysis, variables, operational definitions, Ethical considerations and plan for dissemination. Chapter four addresses results and discussions. Summary, Conclusions Limitations and recommendations are addressed in the fifth chapter.

CHAPTER TWO

REVIEW OF RELATED LITERATURE

2.1. CONCEPTS OF JOB SATISFACTION

Amos et al (2008) postulate that employees experiencing high satisfaction levels contribute to organizational commitment, job involvement, improved physical and mental health, and improved quality of life both on and off the job. Job dissatisfaction on the other hand, culminates in higher absenteeism, turnover, labor problems, labor grievances, attempts to organize labor unions and a negative organizational climate. Grobler et al (2006) and Robbins, S.P et al(2003) support that when employees become dissatisfied costly problems can result. These include excessive absenteeism, turnover and grievances. They maintain that while it is difficult to put a monetary value on job dissatisfaction, estimates can be made of the economic cost of the results of job dissatisfaction such as absenteeism, turn over and employee grievances. Hence, as part of their social responsibility, many managers strive to create rewarding and satisfying work environments for their employees. Job satisfaction depends on balance between work role inputs (pain)- like education, working time, effort, and work out puts (pleasures) like wages, fringe benefits, status, task importance, working conditions, and intrinsic aspects of the job. If work outputs (pleasures) are relative to work role inputs (pains), then it is to be said that job satisfaction increases (Sousa-Poza, 2000).

Rifayat (2012) defines job satisfaction as the degree to which the worker's work-related expectations match his/her experiences in the work environment. It is an appraisal of the perceived job characteristics and emotional experience at work (Bajpai and Srivastava, 2010). Wadhwa (2011) defines job satisfaction as the orientation that employee has towards his work. He believes that jobs are important as they help in achieving organizational objectives. Moreover, he emphasizes that technology advancement and competitive pressure enhances the job performance. Employee job satisfaction is determined by the presence of job pleasure and absence of job discontent. Job discontent and job pleasure are important ingredients of job satisfaction (Jha and Bhattacharyya, 2012)

2.2 JOB SATISFACTION AND SERVICE DELIVERY

Quality service delivery is defined as the ability of the service provider to meet or exceed customer needs and expectations (Quader, 2009). Quader (2009) further defines expectations as the pre-experienced beliefs about the service against which the actual service performance is measured. Ogunrin and Akerele (2007) assert that, with regard to quality in service delivery, the motivational status and job satisfaction of employees is more crucial than sheer statistics. Therefore, employees are the greatest assets because employees who feel satisfied with their jobs provide higher levels of customer satisfaction and quality service delivery.

2.3. JOB SATISFACTION AND PRODUCTIVITY

Sy, Tram and O'Hara (2006) state that employee productivity depends on the amount of time an individual is physically present at a job and also the degree to which he or she is "mentally present" or efficiently functioning while present at a job. Hence, companies must address both of these issues in order to maintain high worker productivity. This may occur through a variety of strategies that focus on employee satisfaction, health, and morale. However employees stay and leave for reasons, which may be personal or professional. These reasons should be understood by the employer and should be taken care of. It has been found that a satisfied worker has increased productivity, better physical and mental health and is loyal to his/her organization (Fischer & Sousa-Poza, 2007).

2.4 .JOB SATISFACTION AND WORK PERFORMANCE

Wong and Law (2002) indicate that job performance is influenced by employees' ability to use emotions to facilitate performance. Employees could use both positive and negative emotions to their advantage to improve performance. For example, positive emotions, such as excitement or enthusiasm, could stimulate employees to provide better customer service, complete their work assignments, or contribute to the organization. In the study investigating the impact of employee satisfaction on operational performance in high-contact service industries, based on 206 service shops in Hong Kong, Yee, Yeung and Edwin Cheng (2008) found that employee satisfaction is significantly related to service quality and to customer satisfaction, while the operational performance in turn influences firm profitability. They also found that firm profitability has a

moderate non-recursive effect on employee satisfaction, leading to a “satisfaction–quality–profit cycle”. The relationship between job satisfaction and performance has been critically assessed in a variety of organizational settings. Cummings (1970) identified three major points of view concerning this relationship. Satisfaction causes performance, performance causes satisfaction and rewards cause both performance and satisfaction.

2.5 DETERMINANTS OF JOB SATISFACTION

There are great deals of job facets (variables) that determine job satisfaction. Depending upon the research goals and types of scale used the number and types of variables considered to determine job satisfaction is various.

Two main groups of factors contribute to job satisfaction, namely personal factors and organizational factors. Personal factors refer mainly to personality, status and seniority, general life satisfaction and the extent to which the job characteristics are congruent with personal characteristics. Organizational factors refer to pay and benefits, the work itself, the supervisor, the relationship with co-workers, and working conditions.

Malhotra and Morris (2009) indicate that the organizational determinants of job satisfaction play a very important role because the employees spend major part of their time in organizations hence there are number of organizational factors that determine job satisfaction of employees. As a result, job satisfaction in the organizations can be increased by organizing and managing the organizational factors. Additionally, personal determinants of job satisfaction also help a lot in maintaining the motivation and personal factors of the employees to work effectively and efficiently. Hence, job satisfaction can be related to psychological factors while a number of personal factors determine the job satisfaction of the employees. According to the 2012 Employee Job Satisfaction Survey results published by SHRM, the factors that have the most influence are Job security, Opportunities to use skills and abilities, Compensation/pay, Benefit, work itself, Autonomy and independence, recognition of employee job performance, and Feeling safe in the work environment (Victor, 2012).

2.5.1 Socio -demographic factors

It is generally accepted that demographic factors may play a role in the level of job satisfaction. In particular, literature suggests four variables that may have significant interactions with health professional's job satisfaction, namely; gender, age, tenure and position (Bogler, 2002). Ramsey (2000) also identifies experience level as a key determinant of job satisfaction. A variety of personal characteristics have been found to have significant effects on reports of job satisfaction including gender, race, age, marital status, and education. Among the demographic factors the major factors influencing job satisfaction are sex of the employee, experience, (Narayanan and Zafar ,2011).

A cross sectional study conducted on Determinants of Job Satisfaction among Healthcare Workers at a Tertiary Care Hospital in Manipal College of Allied Health Sciences reported that majority of the staffs who are “highly satisfied” and “satisfied” were from the age group of 21 to 44 was 67.5% & 69.2% respectively. The test of significance showed that age was highly correlated ($p = <.001$) with the overall job satisfaction and the Majority of staffs who were highly satisfied were females (57.9%). Test of significance showed gender was highly significant ($p = <.001$) for overall satisfaction. The results also showed 74.1% of the staffs who were married had a higher level of job satisfaction compared to staffs those who were single. The test of significance was highly significant ($p = <0.001$) (Roopalekha Jathanna, et.al.2011).

The finding of the study conducted on job satisfaction of health-care workers at health centers in vientiane capital and bolikhamsai province, LAO, PDR by Senbounsou Khamlub et.al .2013 reported that, health-care workers who put in longer hours and become seniors were more satisfied than their younger staffs. High position was also found to result in higher job satisfaction. The probable reason is that the higher-position workers in public service will earn respectability from society. A study conducted on factors influencing job satisfaction of employees in delhi/ncr reported that as the demographic variables (Gender, Age, Income, Occupation, Yrs of experience and Education level) of employees have a great influence on the determination of employee job satisfaction. ($P = 0.000$). (Himani Grover and Supreet Juneja Wahee,2013). Similarly a cross sectional study conducted on Factors Influencing Job

Satisfaction and Anticipated Turnover among Nurses in Sidama Zone Public Health Facilities, South Ethiopia reported that socio-demographic variables, working experience of staff, age, institutions, sex, and working unit of nurses were the significant predictors of overall job satisfaction of workers (Agezegn Asegid et al. 2014). In this study age of staff nurses was significantly correlated with overall job satisfaction positively. Females were less likely to be satisfied with their work by 47.4% compared to those respective male nurses.

In contrast to the above studies, the study conducted on job satisfaction and its determinants among health workers in jimma university specialized hospital, southwest Ethiopia reported that there was no association between job satisfaction and socio demographic variables (Alemshet Y. et al,2011). Similarly age, and education had little effect on job satisfaction. As well, gender, functional grouping, and hospital tenure did not impact job satisfaction significantly (Kavanaugh et al 2006).

2.5.2 Extrinsic factors

Moguerou (2002) argues that job security is a major determinant of job satisfaction in all sectors of employment for both males and females. Sousa-Poza (2000) reports that job security significantly increases the individual's job satisfaction. Long job tenure is an important determinant of greater job security as this shows long-term employer–employee relationship and a good job-match (Campbell et al., 2001). Work environment is significant factor affecting job satisfaction. The influence of hospital units in terms of whether they are open or closed has a profound impact. Employees working in open units tend to be less satisfied with their work in general and experience problems, both with their colleagues and management. Interpersonal relationships between employees were considered by several researchers. McNeese-Smith (1999) declared that a good relationship between nurses coupled with collaboration with health care staff in general is an essential ingredient for job satisfaction.

Liu, Wang and Lu (2010) in their study on clinic doctors, medico-technical workers and public health workers found that most staff considered their job to be of importance and got along well with their fellow workers. What they felt most dissatisfied with were work reward (i.e. benefit, pay), and working conditions. They also discovered that some caregivers complained that the

salary was too low, considering their experience and skill levels, which substantially hurt their work enthusiasm. Narayanan and Zafar (2011) in their research identified that the major extrinsic factors influencing job satisfaction are, treatment by superiors, work environment. According to Gupta and Sharma (2009) job security is the determinants of job satisfaction. They also identified the factors contributing toward job dissatisfaction which were poor utilization of skills, inadequate pay and allowances, work conditions, and work atmosphere. They consider job satisfaction as a multidimensional phenomenon with number of factors operating simultaneously. Similarly the study done by (A. Kebriaei and M.S. Moteghed, (2009) on job satisfaction among community health workers in Zahedan District, Islamic Republic of Iran revealed that leadership and payment and benefits are determinants of job satisfaction.

A cross sectional study conducted on Factors Influencing Job Satisfaction and Anticipated turnover among Nurses in Sidama Zone Public Health Facilities, South Ethiopia, leadership relationship, working environment and group cohesion, and perceived employment opportunity were the predictors of overall job satisfaction. Three of them were reported as satisfying aspects of the job by the majority of respondents; these were leadership relationship, work environment and group cohesion, and perceived alternative employment opportunity (Agezegn Asegid et al., 2014). Similarly study conducted on factors affecting employee job satisfaction of pharmaceutical sector revealed that working conditions, Job Security, Relationship with co-workers, Relationship with immediate supervisor and Pay influences job satisfaction in pharmaceuticals companies (M.M. Parvin, 2011).

2.5.3 Intrinsic factors

Demaki (2012) stressing on the benefits of promotion to workers reiterated that it is positively related to job satisfaction because promotion have social prestige which is tied up with occupational level. Supporting Eze (2004) stated that staff promotion helps to boost the morale of professionals and motivates them to work thereby increasing productivity and efficiency and also enhancing job satisfaction. Opportunity for promotion is the determinants of job satisfaction and Opportunity for self-development was biggest satisfier (Gupta and Sharma, 2009). Autonomy leads to feelings of responsibility which is important component of job

satisfaction (Hackman & Oldham, 1980). A study conducted by (Jeanine K. Andreassi et al, 2012) on Job Satisfaction Determinants: sense of accomplishment from one's work, recognition received from doing a good job, ability to balance one's work and personal lives were significant predictors of overall job satisfaction.

Similarly the study conducted on Determinants of Job Satisfaction among Community Health Workers in the Volta Region of Ghana revealed that Recognition had a positive and significant contributory effect on job satisfaction of community health workers (Ben Smith Owusu Bempah, 2013). In the same way the results of the study conducted on Factors Influencing Job Satisfaction and Anticipated Turnover among Nurses in Sidama Zone Public Health Facilities, South Ethiopia identified recognition, autonomy, achievement, professional training, and the nature of the work, responsibility, and advancement as characteristics that are strong determinants of job satisfaction. (Agezegn Asegid et al., 2014). The study done by A. Kebriaei and M.S. Moteghedhi, (2009) on job satisfaction among community health workers in Zahedan District, Islamic Republic of Iran revealed that work itself was significant predictor of job satisfaction.

2.6 THEORIES OF JOB SATISFACTION

2.6.1 Frederick Herzberg two factor theory

This theory is simple structured plan to motivate employees to increase their job satisfaction. Herzberg an American behavioral scientist suggested that people could display their dissatisfaction about salary, job security, supervisor behavior, and company policy. However, if these issues were resolved, it did not guarantee job satisfaction. He categorized achievement, recognition, and growth as antecedents of job satisfaction. Herzberg named dissatisfies as “Hygiene factors” because they assist to prevent employees’ dissatisfaction, but in themselves they would never provide real satisfaction. Possibly one has good salary and secure job but there’s something lacking.

Herzberg suggested that factors which support employee job satisfaction are distinct from the factors that may cause employee job dissatisfaction. According to Herzberg theory (1959) motivational factors are intrinsic and emanate from the content of the job such as recognition, work itself, advancement, responsibility, and achievement and alike. Whereas hygiene factors relates to the context of the job such as working conditions, organizational policies, management, leadership, and relationship in organizations within teams. The distinct point of Herzberg two factor theory is that it stated that job satisfaction and job dissatisfaction are not contradictory to each other but two different aspects of employee motivation.

Herzberg and his co-workers (1957) argued that the opposite of job satisfaction is not job dissatisfaction, but no satisfaction. Likewise, the opposite of job dissatisfaction is not job satisfaction, but no job dissatisfaction. According to his theory, ‘motivators’ (e.g. achievement and responsibility), lead to job satisfaction when present, but do not produce dissatisfaction when absent. These satisfiers are intrinsic factors. Job context features, called ‘hygiene’ factors, (e.g. company policies, supervision and salary) are called extrinsic factors. They cause dissatisfaction when inadequate but do not cause satisfaction, even when they are present.

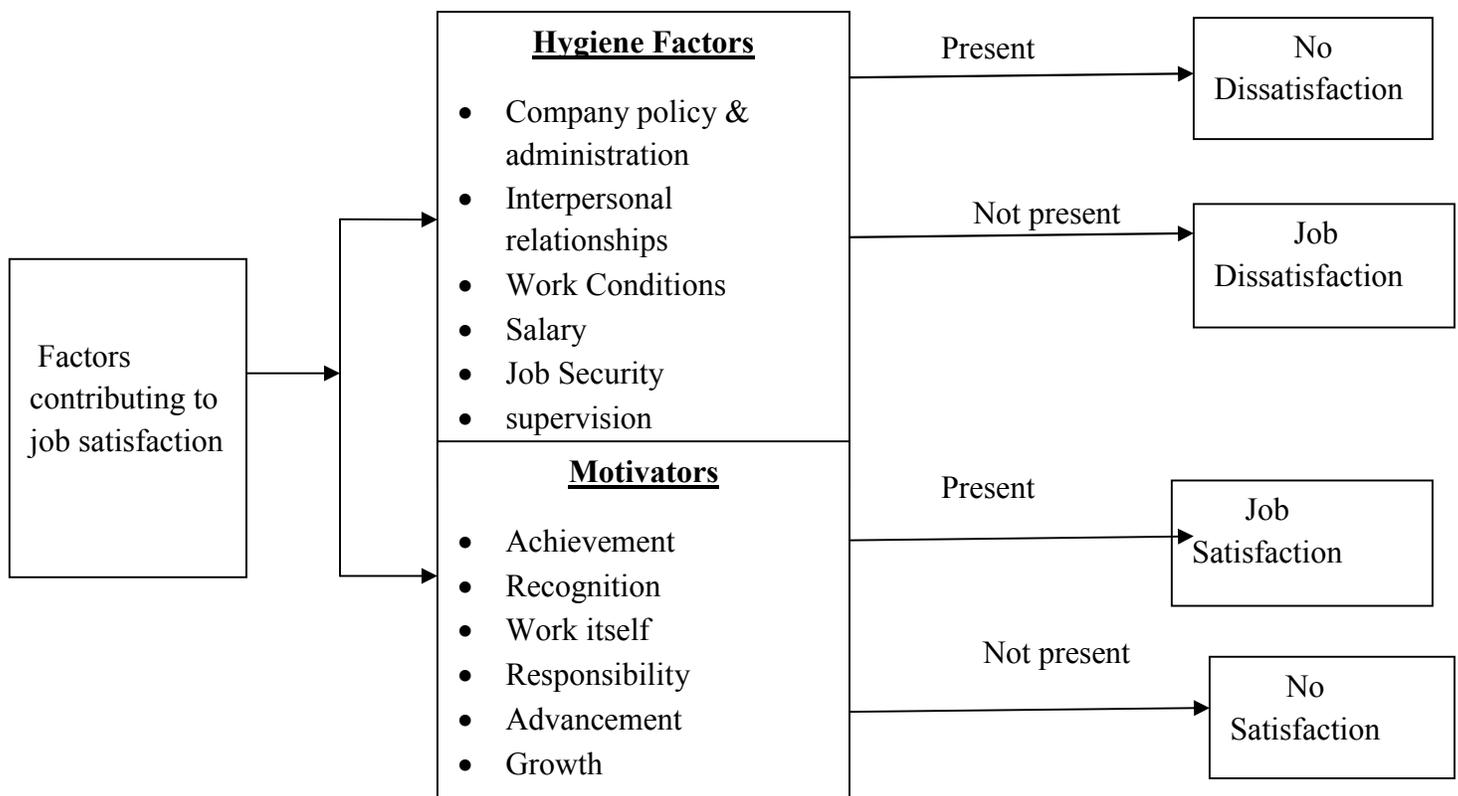


Figure 2. Herzberg's two factor theory

2.6.2 Maslow's hierarchy needs theory

Abraham Maslow distinguished a theory of human needs based on a hierarchical model ranging from lower-order needs at the bottom to higher-order needs at the top (Maslow, 1954). He suggested that human needs are arranged in a series of levels, in a hierarchy of importance. Based on this hierarchy, Maslow identified five human needs. These are physiological needs, safety and security needs, love needs, esteem needs, and the need for self-fulfillment at the highest level.

Physiological or basic needs

The physiological needs are the lowest level of needs that must be satisfied to survive physically. They are important for the body's automatic efforts to retain normal functioning, such as the

need to satisfy hunger and thirst, the need for oxygen, and the need to regulate the body's temperature. Physiological needs also include the need for sleep, shelter, sex, an adequate salary, satisfying working conditions, heat and lighting, clothes and exercise . These basic needs can be fulfilled if the health workers are employed and are provided with a salary that enables them to cope with the rising living conditions. When the basic needs are reasonably well satisfied, then this satisfaction will have the power to activate the needs at the next level.

Safety or security needs

According to Maslow (1954), once individuals have substantially satisfied their basic or biological needs, the safety or security needs emerge to direct behavior. These needs include the need for protection from danger or deprivation, the need for freedom from pain or from the threat of physical attack, the need for savings, medical aid, and even for armed response. In the workplace, the safety needs are reflected not only in the desire for financial security, but also in fair treatment by the administrative, safe working conditions, first-rate fringe benefits, fairness, quality supervision, and job security (Amos, et al., 2008). This would also apply to Ethiopian health workers.

Love or social needs

Love or social needs include the need for giving and receiving love, the need of affection, sense of belonging, social activities, and friendships. If health professionals experience a sense of belonging at their work place, then this will result in fulfilling their social needs.

Esteem or ego needs

Esteem or ego needs refer to both self-respect and the esteem of people. The principle behind esteem-needs is that if someone feels loved and has a sense of belonging, then he or she starts to develop the need for esteem and self-respect. Self-respect involves the desire for and feelings of confidence, achievement, independence and freedom. Employees, who do not feel that their status and self-esteem needs are being met in their work, may become discouraged.

The development of esteem-needs will help the professionals to be effective in their day to-day professional activities. If health workers are recognized for their accomplishments and are also

respected by the 'self' and significant others, this will have a direct positive impact on their professional activities. Esteem-needs are higher-order needs.

Self-actualization needs

The self-actualization needs are at the top of the hierarchy, and refer to the need for development and the realization of one's full potential. At this level the individual strives for truth, beauty, justice, individuality, meaningfulness, and perfection (Amos, et al., 2008). Maslow, however, believed that because of the uneven distribution of satisfying work, only a small proportion of the population reach this level. Therefore, self actualization is for most of us a need which will motivate our behavior throughout our lives.

The relevance of Maslow's theory

The needs or content theories postulate that a job can be a source of satisfaction if it can fulfill a number of the individual's important needs. If they are not fulfilled, the individuals are more likely to become dissatisfied with their jobs, and thus de-motivated. One of the fundamental reasons for employees to be engaged in their work is to satisfy their basic needs. For health workers to be effective in their daily activities, their needs must be met. The satisfaction of needs and the motivation to work are very essential in the lives of health workers. It tells us that job satisfaction results from the satisfaction of worker's needs. Several or all of these needs simultaneously function as determinants of job satisfaction rather than only one of them.

2.6.3. Hackman and Oldham job characteristics theory

Hackman and Oldham model of job characteristics assume specific key conditions; first, employee must be aware of the result and should have knowledge of his or her work; secondly employee must feel responsibility and feel obliged to take up the responsibility for the outcome regarding work, the employee must acknowledge the work as having an important effect or meaningfulness to himself. This model further suggested that employee realizes positive effect to the level that he or she gains knowledge of task and feels responsibility

personally for the job performed and cares about it by recognizing meaningfulness for the job performed. The Hackman and Oldham model identified five core job aspects.

Skill variety -The extent to which job provide opportunity to an employee to use of a number of different skills and talents

Task identity - The extent to which an employee require the completion of a whole, identifiable piece of work.

Task significance- The degree of impact job performed by employees are believed to have on other people inside and outside the organization they are situated in

Autonomy -The extent of freedom, independence, and discretion provided by job in determining things like workplace, work breaks, and allocation of tasks.

Task feedback -The extent to which job provide clear and direct information to employees about the effectiveness of performance.

The theory of job characteristics is relevant to determine employee motivation and satisfaction at work place. Job might be influenced by job characteristics. Job satisfaction might be enhanced by enlarging the job as suggested by job characteristics model. It is also worth mentioning that job characteristics could be reformed to enhance employee job satisfaction.

2.6.4. Adam's theory of equity

Theory of equity is named for John Stacey Adams a work place and behavioural psychologist. He developed the equity theory of job motivation in 1963(Adams, 1963). Equity theory suggests that employees in any organization not only stimulated for effectiveness when their need are recognized but they also desire for fair reward system in employment. Equity theory assumes that one important cognitive process involve people looking around and observing what effort other people are putting into their work and what rewards follow for them, and comparing this ratio with their own. Individuals can also compare their effort –reward ratio to one which they experienced at another point in time. Equity theorists assume that social comparison process is driven by our concern with fairness or equity. We perceive effort and reward not in absolute but in relative terms. When people perceive others are enjoying similar ratio of inputs (effort, qualification, skill level, and seniority) to outcomes (pay,

advancement, fringe benefits) to themselves, they experience equity. The theory of equity is based upon inputs and outputs. Previous literature supports the applicability of this theory in the context of employee job attitude and behaviour to predict employee job satisfaction. Nemours empirical studies in organizational work settings confirmed equity theory and reported that perceived equity seems to lead and helping shape employee job satisfaction .

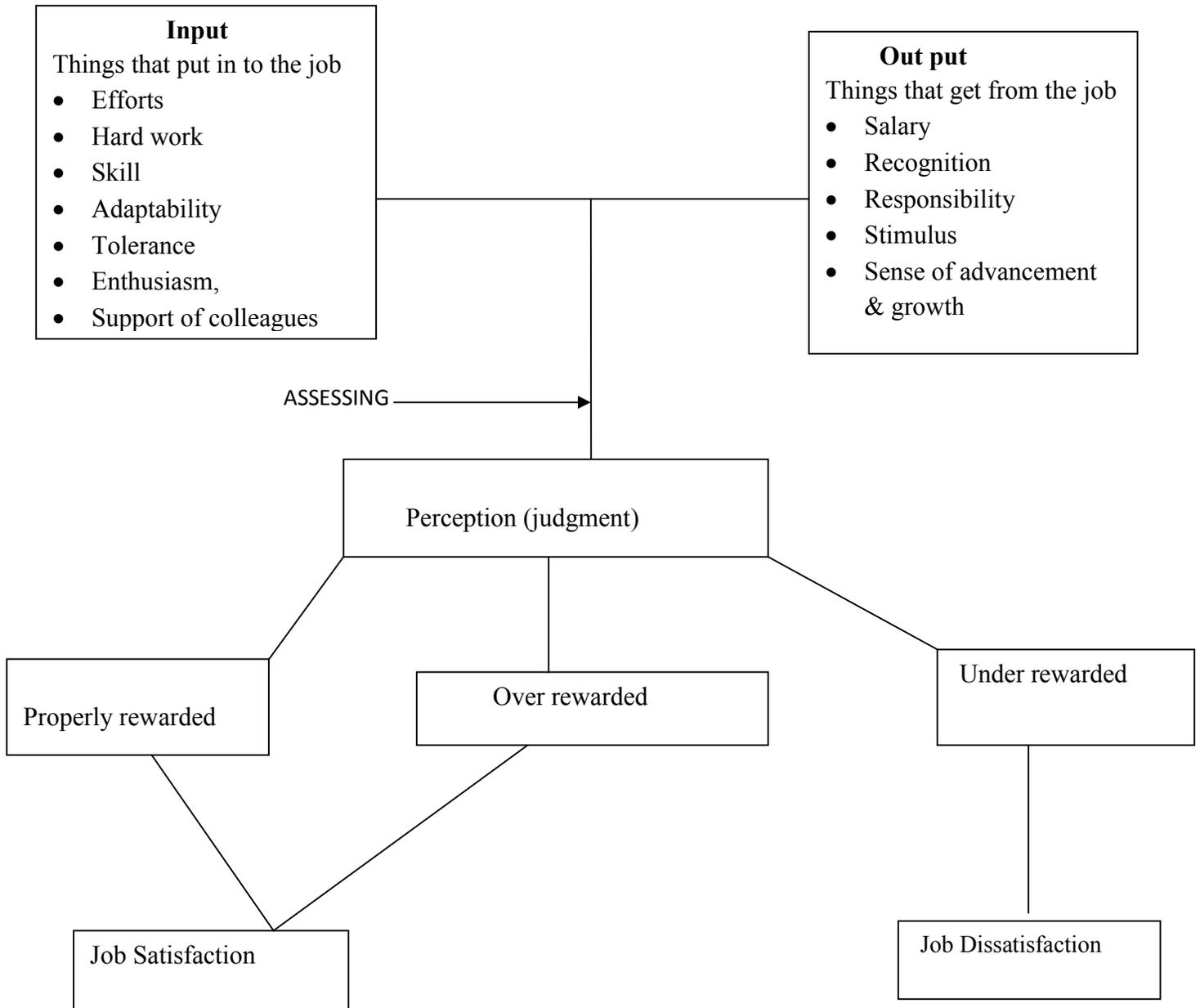


Figure 3. Adams' equity theory

2.6.5. Expectancy theory of motivation

The expectancy theory suggests and explains the process through which it becomes possible to explain desirable outcomes. Expectancy theory of motivation is cognitive process theory and developed by United States Psychologist named Vroom, V.H. in 1964.

Vroom's Expectancy Theory is referred to as the Valence or the Valence-Instrumentality-Expectancy (VIE) Theory.

Expectancy is the degree of certainty people have that the choice of a particular alternative will indeed lead to a desired outcome. The greater the expectation of the individuals that they will receive the rewards they value in their job (e.g., opportunities to learn and to develop skills, decent pay, the respect of their colleagues), the higher the probability that they will experience a high level of job satisfaction.

Valence is the feeling people have about specific outcomes. It is the anticipated satisfaction from expected outcomes.

Instrumentality is the belief that if the individuals do one thing, then it will lead to another.

The key principle of the Expectancy Theory is the understanding of an individual's goals and the relationship between effort and performance, performance and reward, and reward and the individual's goal satisfaction. People are motivated and satisfied to work toward an outcome (goal) if they believe that their efforts will produce positive results (excellent performance), which is followed by a reward or outcome that is valued (valence), making the effort expended worthwhile. The relationship between expectations, in terms of what should be received, and perception of, what should be expected determines employee job satisfaction. When the level of rewards received is equal to the expected rewards that brings better satisfaction with job and when employees get less than they hope it causes them experience dissatisfaction and absence of satisfaction.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1. CONCEPTUAL FRAMEWORK

Based on through review of various literatures, the following conceptual framework is developed

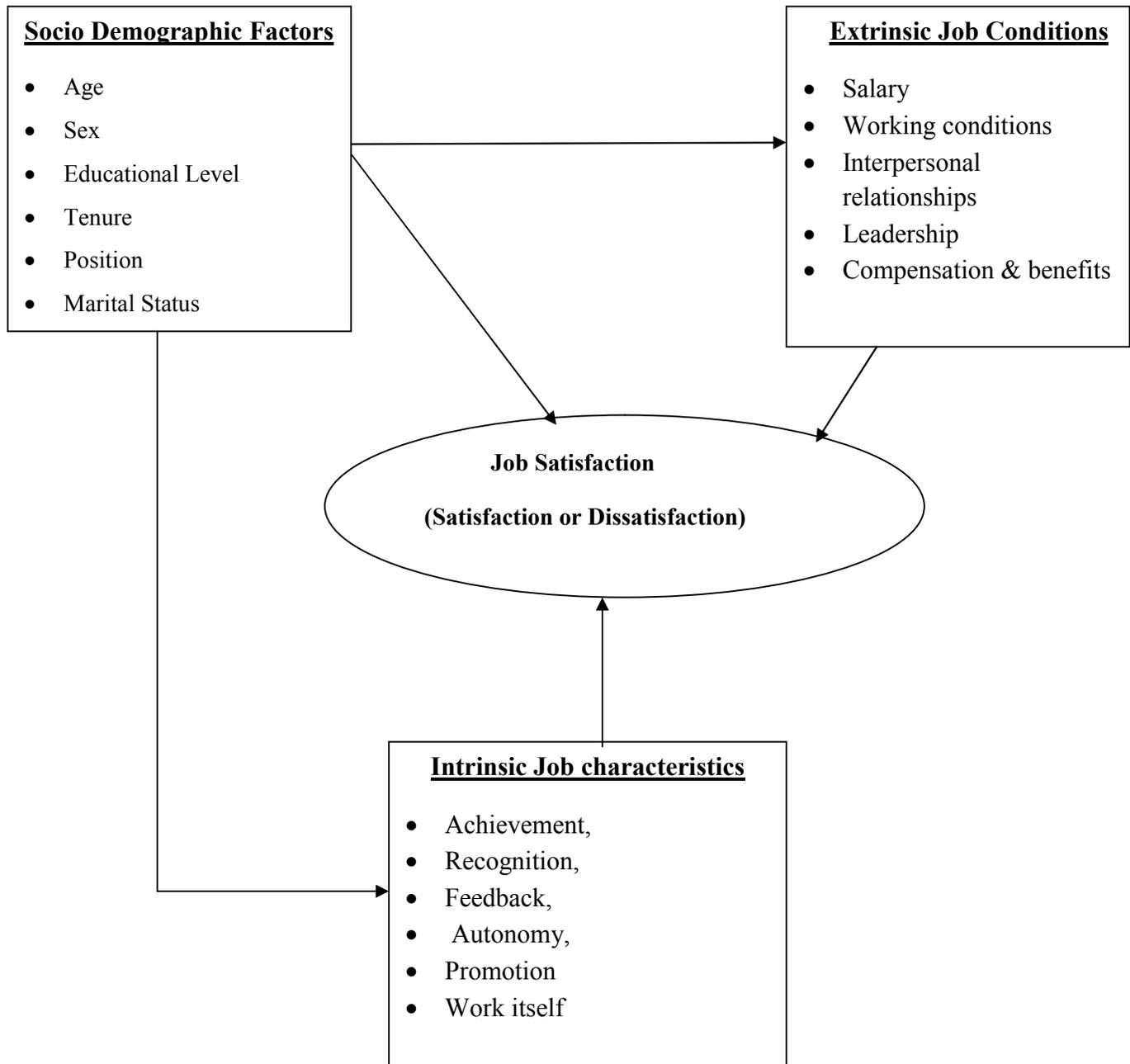


Figure 4. Research Conceptual framework for Job Satisfaction (Adapted from Armstrong, 2009)

3.2 RESEARCH DESIGN

This study employed both quantitative and qualitative approach to investigate the determinant factors of job satisfaction among health professionals of Ayder Referral Hospital, Mekelle, Tigray in order to make the study more reliable through triangulation. The nature of the study was cross-sectional design.

3.3. POPULATIONS

3.3.1. Source population

All health professionals currently working in Ayder Referral Hospital

3.3.2. Study population

All health professionals of Ayder Referral Hospital that full fill the inclusion criteria and are available during data collection period.

3.4. INCLUSION AND EXCLUSION CRITERIA

3.4.1. Inclusion

All health professionals hold diploma and above and have a minimum of one year work experience in the hospital were involved in the study.

3.4.2. Exclusion

All health professionals that have a work experience of less than one year and below diploma qualification were excluded from the study.

3.5. SAMPLE SIZE DETERMINATION

The sample size for the study was calculated using the formula for a single population proportion by considering the following assumptions:-A 95% confidence level, marginal error (0.05), a prevalence 24.75% was taken to estimate the sample size. (The highest determinant factor in a similar study conducted in south west Ethiopia).

$$N = \frac{(Z \alpha/2)^2 P (1-P)}{d^2}$$

$$d^2$$

Where n= required sample size

z= critical value for normal distribution at 95% confidence level which equal to 1.96 (Z value at $\alpha/2.=0.0025$)

P= estimated prevalence rate 24.75%

d= 0.05 (5% margin of errors)

$$n = \frac{(1.96)^2 (0.25)(0.75)}{(0.05)^2} = 288$$

Adding 10% non-response rate give the required minimum sample size (no) of 317.

And, using the correction formula to estimate final sample size (nf) from a finite target

Population (N):

$$nf = \frac{n}{1 + \frac{n}{N}} = \frac{317}{(1+317/759)} = 223$$

3.6. SAMPLING PROCEDURE

Table 1. Sampling procedure

| Status/position | Male | Female | Total | Proportionally selected samples |
|--|------------|------------|------------|---------------------------------|
| Nurses | 143 | 278 | 421 | 124 |
| Midwifery | 5 | 20 | 25 | 7 |
| Pharmacists | 52 | 21 | 73 | 21 |
| Laboratory technologist | 43 | 37 | 80 | 23 |
| Dentist | 11 | 6 | 17 | 5 |
| Doctors | 84 | 21 | 105 | 32 |
| Others(physiotherapist, radiographic, Optometrist, environmental health, psychiatrist, health education, biomedical engineer) | 27 | 11 | 38 | 11 |
| Total | 365 | 394 | 759 | 223 |

Source: Own Survey 2015

Simple random sampling technique was used to select the respondents after proportionally allocating a number of actual health professionals from each department who will be participated. Respondents were selected through lottery method in order to avoid personal biasness. Therefore each department was represented equal proportion.

3.7. DATA COLLECTION TECHNIQUE

Data was collected from both primary and secondary sources. For primary source: Self administered questionnaire and interview was prepared for the respondents. The questionnaire was adapted from previous similar studies and modified based on the research questions. It incorporates both closed and open ended type of questions and comprises three parts: the first part includes demographic characteristics. The second part was job satisfaction scale (intrinsic and extrinsic factors). Under job satisfaction scale, there were a total of 46 questions with 11 subscales. All questions of job satisfaction were rated using a five-point Likert scale ranging from 1 to 5 with 1 being highly dissatisfied, 2 =dissatisfied, 3= neutral, 4=satisfied and 5=highly satisfied. The third part contains open ended questions that needs brief description. The questionnaire was pre-tested one week before the actual data collection on 5% of the calculated sample size who were not included in the sample. Minor but warranted changes were made in the language to improve clarity and comprehension. Interview was prepared for those who are in managerial position and encompasses five open ended questions. Secondary data was collected from the written documents in the hospital, available books, publications, research studies, articles and websites.

3.8. DATA ANALYSIS

Respondents were asked to indicate their responses on a five point Likert scale from 'highly dissatisfied' to 'highly satisfied'. To facilitate ease of analysis and interpretation, a reclassification of the five responses was undertaken to derive three categories; dissatisfied, neutral (neither dissatisfied nor satisfied) and satisfied. That is (The positive responses were grouped together and the same was done with the negative ones). Furthermore, the variables were converted into a binary variable, for each subscale, if the sum of the responses of different

items is below the computed mean, respondents considered as dissatisfied and coded as zero but if it is above computed mean respondents considered as satisfied and coded one.

The data was analyzed using statistical package for social science (SPSS) for windows version 20. Because all variables were categorical or coded to categorical one, descriptive statistics of frequencies, percentages, mean and standard deviation were calculated and presented with tables and pie chart. Cross tabulation was used to show distribution of the satisfaction level of each subscale per overall job satisfaction. Bivariate and multivariate logistic regression analyses were used to identify variables associated with general level of job satisfaction. Variables with p-value of less than 0.05 in bivariate binary logistic regression were entered in to the multivariate binary logistic regression model. Stepwise Backward elimination model development method was employed and variables with p-value of < 0.05 were considered as significant predictors of job satisfaction. (Statistical significance was evaluated at 95% levels of significance).

3.9. VARIABLES

3.9.1 Dependent variable

Job satisfaction

3.9.2 Independent variables

(1) **Individual characteristics (Socio demographic data)**-Age, Sex, work experience, marital status, Position, and educational level.

(2) **Extrinsic**- Salary, Working conditions, Interpersonal relationships, Leadership, Compensation and benefits.

(3) **Intrinsic**- achievement, recognition, feedback, autonomy, promotion and work itself.

3.10. OPERATIONAL DEFINITIONS AND MEASUREMENTS

Job satisfaction - is positive or pleasurable emotional state resulting from the appraisal of one's job or job experience. Job satisfaction of health workers by determinant factors was measured using the questionnaire adopted and adapted by principal investigator with a 46-item scale. This instrument has 5-point Likert scale in which 5 denotes highly satisfied and 1 denotes highly dissatisfied.

Job Dissatisfaction- It is a feeling of unhappiness about the work that one does in his/her own appraisal of work.

Autonomy -The right or state of self-government or freedom to determine one's own action, and behavior. Autonomy was measured by using five items with five-point Likert scale in which 1 denotes highly dissatisfied and 5 denotes highly satisfied. Respondents considered autonomous and satisfied about it when they score above computed mean for the subscale.

IPRS- Are social connections with others that can be brief or enduring. This was measured using eight-items with five-point liker scale in which 1 denotes highly dissatisfied and 5 denotes highly satisfied. Consider satisfaction level of this subscale as satisfied with interpersonal relationship when respondents scored above their computed mean.

Promotion- refers to opportunities that the organization offers for advancement. This aspect of job satisfaction was measured by using three items with 5-point Likert scale with one denoting highly dissatisfied and 5 denoting highly satisfied. Consider satisfaction level on promotion when respondent scored above their computed mean.

Recognition –refers to acknowledgement of an individual's contribution showing appreciation and to reward individuals for an accomplishment of task. This was measured by using two items each scored in 5-point Likert scale with 1 denoting highly dissatisfied and 5 denoting highly

satisfied. Health workers were satisfied by the level of recognition in the organization when they scored above their computed mean.

Achievement- act of achieving, attainment, accomplishment or feeling of fulfillment from the job. This was measured by using two items each scored in 5-point Likert scale with 1 denoting highly dissatisfied and 5 denoting highly satisfied. Health workers were satisfied by the level of achievement in the organization when they scored above their computed mean.

Salary- A fixed compensation periodically paid to a person for regular works or service and it was measured by using three items each scored with five-point Likert scale with 1 denoting highly dissatisfied and 5 denoting highly satisfied. I considered that health workers were satisfied by the level of salary in the organization when they scored above their computed mean of their individual mean.

Compensation - Direct and indirect monetary and nonmonetary rewards given to employees on the basis of the value of the job, their personal contributions, and their performance. It was measured by using six items each scored with five-point Likert scale with 1 denoting highly dissatisfied and 5 denoting highly satisfied. I considered that health workers were satisfied by the level of compensation in the organization when they scored above their computed mean of their individual mean.

Working conditions- The conditions in which an individual or staff works, including but not limited to such things as amenities, physical environment, stress and noise levels, degree of safety or danger, and the like. This was measured using seven-items with five-point likert scale in which 1 denotes highly dissatisfied and 5 denotes highly satisfied. Consider satisfaction level of this subscale as satisfied with working conditions when respondents scored above their computed mean.

Leadership- is the ability to inspire or influence others towards the leader's goal. Leadership was measured by using five items with five-point Likert scale in which 1 denotes highly dissatisfied and 5 denotes highly satisfied. Respondents considered leadership and satisfied about it when they score above computed mean for the subscale.

Health workers- are people whose job is to protect and improve the health of their communities.

3.11. ETHICAL CONSIDERATIONS

Ethical consideration was conducted based on the three principles: respecting for persons, beneficence and justice. An ethical clearance was obtained before conducting this research from the department of human resource management, Addis Ababa University. Permission was received from Ayder Referral Hospital. Participants were provided with clear information and asked if they are willing to participate or not. Only those who were willing to take part were involved. Written informed consent was obtained from clients who were participated in the study. Confidentiality of responses was maintained for all time. Personal Privacy and cultural norms were respected properly.

3.12. PLAN FOR DISSEMINATION

The finding of this study will be submitted to the department of human resource management, collage of business and economics, Addis Ababa University. It will be also submitted to the Tigray regional health bureau and Ayder Referral Hospital. Final findings will be presented in conferences and workshops as well as further efforts will be done to publish on national and international peer reviewed journals.

CHAPTER FOUR

RESULT AND DISCUSSION

4.1. DESCRIPTIVE ANALYSIS

4.1.1 Socio-demographic characteristics

Table 2. : Profile of respondents

| VARIABLES | n (%) |
|--------------------------|------------|
| Sex | |
| Male | 116(52) |
| Female | 107(48) |
| Age | |
| 20-30 | 142 (63.7) |
| 31-40 | 69(30.9) |
| >40 | 12(5.4) |
| Marital status | |
| Married | 102(45.7) |
| Single | 116(52.0) |
| Divorce | 5(2.2) |
| Educational level | |
| Diploma | 16(7.2) |
| Bsc | 155(69.5) |
| Msc | 17(7.6) |
| M.Dr | 35 (15.7) |
| Work position | |
| Nurses | 124(55.6) |
| Midwifery | 7(3.1) |
| Pharmacist | 21(9.4) |
| Dentist | 5(2.2) |
| Lab.technologist | 23(10.3) |
| Doctors | 32(14.3) |
| Others | 11(4.9) |
| Experience | |
| 1-5 | 128(57.4) |
| 6-10 | 66(29.6) |
| >10 | 29(13.0) |

Source: Own Survey, 2015

Two hundred twenty three health workers were involved and making the response rate to be 100%. Of these 116 (52%) were male and the majority of the respondents were young adults aged between 20 and 30 and represented 142(63.7%) of the respondents. While the minority of respondents were aged greater than 40, they represented 12(5.4%) of the respondents. From the total participants 116(52%) were single. The result shows that majority of participants 124(55.6%) were nurses and 155(69.5%) were BSC degree holders. Hundred twenty eight (57.4%) and sixty six (29.6%) of the employees have a work experience 1-5 and 6-10 respectively.

Table 3. Job satisfactions versus socio-demography

| Variables | Highly Dissatisfied n (%) | Dissatisfied n (%) | Neutral n (%) | Satisfied n (%) | Highly Satisfied n (%) |
|--------------------------|---------------------------------|-----------------------|------------------|--------------------|------------------------------|
| Sex | | | | | |
| Male | 19(16.4) | 45(38.8) | 4(3.4) | 43(37.1) | 5(4.3) |
| Female | 9(8.4) | 50(46.7) | 5(4.7) | 38(35.5) | 5(4.7) |
| Total | 28(12.6) | 95(42.6) | 9(4.0) | 81(36.3) | 10(4.5) |
| Age | | | | | |
| 20-30 | 22(15.5) | 62(43.7) | 4(2.8) | 48(33.8) | 6(4.2) |
| 31-40 | 5(7.2) | 27(39.1) | 4(5.8) | 30(43.5) | 3(4.3) |
| >40 | 1(8.3) | 6(50.0) | 1(8.3) | 3(25.0) | 1(8.3) |
| Total | 28(12.6) | 95(42.6) | 9(4.0) | 81(36.3) | 10(4.5) |
| Marital status | | | | | |
| Married | 9(8.8) | 50(49.0) | 2(2.0) | 35(34.3) | 6(5.9) |
| Single | 19(16.4) | 43(37.1) | 7(6.0) | 44(37.9) | 3(2.6) |
| Divorce | 0(0.0) | 2(40.0) | 0(0.0) | 2(40.0) | 1(20.0) |
| Total | 28(12.6) | 95(42.6) | 9(4.0) | 81(36.3) | 10(4.5) |
| Educational level | | | | | |
| Diploma | 1(6.2) | 8(50.0) | 0(0.0) | 7(43.8) | 0(0.0) |
| Bsc | 20(12.9) | 66(42.6) | 7(4.5) | 56(36.1) | 6(3.9) |
| Msc | 3(17.6) | 10(58.8) | 2(11.8) | 1(5.9) | 1(5.9) |
| M.Dr | 4(11.4) | 11(31.4) | 0(0.0) | 17(48.6) | 3(8.6) |
| Total | 28(12.6) | 95(42.6) | 9(4.0) | 81(36.3) | 10(4.5) |
| Work position | | | | | |
| Nurses | 17(13.7) | 50(40.0) | 6(4.8) | 47(37.9) | 4(3.2) |
| Midwifery | 2(28.6) | 2(28.6) | 0(0.0) | 3(42.9) | 0(0.0) |
| Pharmacist | 2(9.5) | 8(38.1) | 2(9.5) | 7(33.3) | 2(9.5) |
| Dentist | 0(0.0) | 1(20.0) | 0(0.0) | 3(60.0) | 1(20.0) |
| Lab.Tech | 1(4.3) | 14(60.0) | 1(4.3) | 6(26.1) | 1(4.3) |
| Doctors | 5(15.6) | 11(34.4) | 0(0.0) | 14(43.8) | 2(6.2) |
| Others | 1(9.1) | 9(81.8) | 0(0.0) | 1(9.1) | 0(0.0) |
| Total | 28(12.6) | 95(42.6) | 9(4.0) | 81(36.3) | 10(4.5) |
| Experience | | | | | |
| 1-5 | 20(15.6) | 52(40.6) | 3(2.3) | 47(36.7) | 6(4.7) |
| 6-10 | 6(9.1) | 28(42.4) | 4(6.1) | 25(37.9) | 3(4.5) |
| >10 | 2(6.9) | 15(51.7) | 2(6.9) | 9(31.0) | 1(3.4) |
| Total | 28(12.6) | 95(42.6) | 9(4.0) | 81(36.3) | 10(4.5) |

Source: Own Survey, 2015

As shown in the above table, 28 (12.6%) of the respondents were highly dissatisfied, 95 (42.6%) “Dissatisfied”, 9 (4%) “neutral”, 81(36.3%) responded that they were satisfied”, and 10 (4.5%) reported that they were “highly satisfied”. (Fig 5)

Majority of staffs who were highly dissatisfied and satisfied were males represented 19 (16.4%) and 43(37.1%) respectively. Whereas those who were dissatisfied were females which is 50 (46.7%).The results showed that the participants of health workers of Ayder referral hospital who were “dissatisfied” 62(43.7%) and “satisfied” 48(33.8%) were from the age group of 20 to 30(see table 4). From the participants Single employees were high to be highly dissatisfied and less to be highly satisfied than married.

Among the health professionals 50% of the diploma holders and 48.6% of medical doctors reported as dissatisfied and satisfied respectively. Sixty percent of dentists were responding as they were satisfied and 51.7% of the respondents having a work experience greater than 10 were dissatisfied. (Table 3)

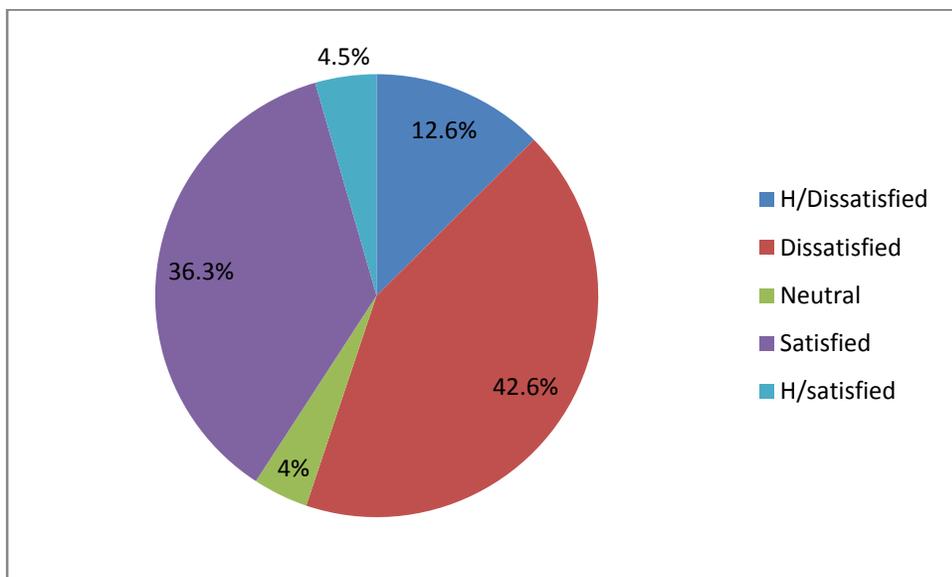


Figure 5. General level of job satisfaction of health professionals in Ayder referral hospital

4.1.2 Descriptive analysis on intrinsic and extrinsic factors

Table 4. Job satisfaction versus intrinsic and extrinsic factors

Frequency and percentage distribution of responses on autonomy, promotion, recognition, achievement, feedback, work itself, salary, work relations, leadership, Compensation and benefits and working conditions subscales: Ayder Referral Hospital, 2015.

| Level of satisfaction with the | Dissatisfied F (%) | Neutral F (%) | Satisfied F (%) |
|---|-----------------------|------------------|--------------------|
| 1. AUTONOMY | | | |
| Degree of independence associated work roles | 34(15.2) | 5(2.2) | 184(82.5) |
| Job responsibility | 52(23.3) | 7(3.1) | 164(73.5) |
| Chance given to creativity | 93(41.7) | 25(11.2) | 105(47.1) |
| Opportunities (freedom) to use skills and abilities | 70(31.4) | 31(13.9) | 122(54.7) |
| Right given to put forward opinions freely | 58(26.0) | 69(30.9) | 96(43.0) |
| 2. PROMOTION | | | |
| Support for continuing education (learning) | 130(58.3) | 8(3.6) | 85(38.1) |
| Opportunities for professional advancement | 108(48.4) | 2(0.9) | 113(50.7) |
| Opportunities for personal growth | 111(49.8) | 1(0.4) | 111(49.8) |
| 3. RECOGNITION | | | |
| Consideration given to personal needs | 140(62.8) | 16(7.2) | 67(30.0) |
| Recognition given for job performance | 130(58.3) | 13(5.8) | 80(35.9) |
| 4. ACHIEVEMENT | | | |
| Feeling of fulfillment getting from the job | 65(29.1) | 3(1.3) | 155(69.5) |
| Participation in decision making | 66(29.6) | 54(24.2) | 103(46.2) |
| 5. FEEDBACK | | | |
| Feedback from supervisors | 104(46.6) | 8(3.6) | 111(49.8) |
| Feedback from patients | 37(16.6) | 3(1.3) | 183(82.1) |
| 6. WORKITSELF | | | |
| Intellectual rewards from the profession | 56(25.1) | 3(1.3) | 164(73.5) |
| Current position | 67(30.0) | 48(21.5) | 108(48.4) |
| 7. COMPENSATION & BENEFITS | | | |
| Opportunities for professional training and further education | 156(70.0) | 6(2.7) | 61(27.4) |
| Provision of housing or house allowance | 156(70.0) | 6(2.7) | 61(27.4) |
| Incentive Compensations | 136(61.0) | 32(14.3) | 55(24.7) |
| Financial rewards for better work/ contribution / | 154((69.1) | 13(5.8) | 56(25.1) |
| Free health care benefit | 95(42.6) | 65(29.1) | 63(28.3) |
| Overtime payment | 84(37.7) | 83(37.2) | 56(25.1) |
| 8. SALARY | | | |
| Basic salary compared with your qualification | 159(71.3) | 6(2.7) | 58(26.0) |

| | | | |
|--|-----------|----------|-----------|
| Basic salary compared with your work load | 168(75.3) | 12(5.4) | 43(19.3) |
| Basic salary compared with your experience | 161(72.2) | 7(3.1) | 55(24.7) |
| 9. INTERPERSONAL RELATIONSHIPS | | | |
| Interpersonal relationships with co-workers | 43(19.3) | 10(4.5) | 170(76.2) |
| Interpersonal relationships with immediate supervisor | 76(34.1) | 23(10.3) | 124(55.6) |
| Interpersonal relationships with subordinates | 35(15.7) | 70(31.4) | 118(52.9) |
| Communication with senior management | 72(32.3) | 54(24.2) | 97(43.5) |
| Respect from colleagues | 46(20.6) | 47(21.1) | 130(58.3) |
| Respect from supervisor | 53(23.8) | 63(28.3) | 107(48.0) |
| Respect from managements | 69(30.9) | 62(27.8) | 92(41.3) |
| Respect from patients | 21(9.4) | 35(15.7) | 167(74.9) |
| 10. LEADERSHIP | | | |
| Administrative support | 139(62.3) | 21(9.4) | 63(28.3) |
| Performance appraisal policy of the hospital | 89(39.9) | 79(35.4) | 55(24.7) |
| Feeling of being treated equally (fairness) | 124(55.6) | 27(12.1) | 72(32.3) |
| Quality of Leadership and practices of the hospital administrative | 143(64.1) | 13(5.8) | 67(30.0) |
| Rules & Routines of supervision | 132(59.2) | 23(10.3) | 68(30.5) |
| 11. WORKING CONDITIONS | | | |
| Work load (Quantity of work allotted to you) | 90(40.4) | 25(11.2) | 108(48.4) |
| Sick leave offered to you | 58(26.0) | 66(29.6) | 99(44.4) |
| Work hours | 65(29.1) | 37(16.6) | 121(54.3) |
| Feeling of safe in the work environment | 115(51.6) | 22(9.9) | 86(38.6) |
| Job location | 40(17.9) | 75(33.6) | 108(48.4) |
| Resources and supplies of medical instruments / Equipments/ | 77(34.5) | 51(22.9) | 95(42.6) |
| Overall job security | 85(38.1) | 28(12.6) | 110(49.3) |

Source: Own Survey, 2015

These factors were categorized into eleven groups. These are autonomy (consist of five factors), promotion (consists of three factors), recognition (consists of two factors), achievement (consists two factors), feedback (two factors), work itself, (two factors), Compensation and benefits (six factors), salary (three factors), IPRS (eight factors), leadership (five factors) and working conditions (consists of seven factors).

1. AUTONOMY: thirty four (15.2%) health professionals were dissatisfied with the Degree of independence associated with work roles while 184 (82.5%) were satisfied. Regarding the level of satisfaction with the Job responsibility allotted to employees 52 (23.3%) of them were dissatisfied and 164 (73.5%) were responding as they were satisfied while the rest 7 (3.1%) kept neutral position. Similarly, the level of satisfaction with the Chance given to creativity, Opportunities (freedom) to use skills and abilities, and Right given to put forward opinions freely, 93(41.7%), 70(31.4%), 58(26.0%) were dissatisfied, while 25(11.2%),31(13.9%),69(30.9%) were neutral and the rest 105(47.1%),122(54.7%),96(43.0%) were satisfied respectively. Generally, most of the respondents 121(56.5%) were satisfied on general autonomy level.

2. PROMOTION: As shown in the Table above, the level of satisfaction with the support for continuing education (learning) were 130 (58.3%), Opportunities for professional advancement and Opportunities for personal growth 108(48.4%) and 111(49.8%) were reported as dissatisfying. Generally 109 (50.9%) of the respondents of the hospital were dissatisfied with the level of promotion.

3. RECOGNITION: Out of 223 respondents, 140(62.8%), 16(7.2%), 67(30.0%) were dissatisfied, neutral and satisfied with the consideration given to personal needs while 130(58.3%), 13(5.8%), 80(35.9%) were dissatisfied, neutral and satisfied with the Recognition given for job performance respectively. Generally, 112(52.3%) of the study participants were dissatisfied with Recognition subscale in their Hospital.

4. ACHIEVEMENT: sixty five (29.1%) and sixty six (29.6%) of the participants were dissatisfied and 3(1.3) and 54(24.2) were kept neutral whereas the majority of the respondents 155(69.5) and 103(46.2) were satisfied with the Feeling of fulfillment they get from their jobs and Participation in decision making respectively. Generally 113(52.8%) of the participants were satisfied with the achievement subscale.

5. FEEDBACK: The results show that about 104(46.6%), of the respondents were dissatisfied and 111(49.8%) were satisfied in terms of Feedback from supervisors. Similarly, 37(16.6%) of

the respondents were dissatisfied and 183(82.1%) were satisfied in terms of Feedback from patients. In general 112(52.3%) of the respondents were dissatisfied with feedback in their organization.

6. WORK ITSELF: Out of 223 of respondents 56(25.1%) were dissatisfied and 164(73.5%) were satisfied with the Intellectual rewards from the profession while 67(30.0%) of them were dissatisfied and 108(48.4) were satisfied with their current position. In general more than half of the participants 114(53.3) were satisfied with the work itself subscale.

7. COMPENSATION AND BENEFITS : The result from the study demonstrates that 156 (70%), 6 (2.7%), 61(27.4%) of the health professionals were dissatisfied, neutral and satisfied with the Opportunities for professional training and further education and provision of housing respectively. Hundred thirty six (61.0%) were dissatisfied and fifty five (24.7%) were satisfied with the incentive Compensations. Similarly with the level of Financial rewards 154 (69.1%), Of the respondents were dissatisfied and 56 (25.1%) were satisfied. The level of satisfaction with respect to free health care benefits and overtime payment 95(42.6%) and 84 (37.7%) were dissatisfied, 65(29.1%) and 83(37.2%) were neutral and 63(28.3%) and 56(25.1%) of them reported as they were satisfied respectively. Generally, 137(64%) of the participants were dissatisfied on general compensation & benefits level.

8. SALARY: Level of Satisfaction with the Basic salary compared with employees qualification, the majority 159 (71.3%) of health professionals were dissatisfied while 58 (26.0%) reported satisfaction and the rest 6 (2.7) were neither satisfied nor dissatisfied. Again 168 (75.3%) of health workers were dissatisfied with the Basic salary compared with work load while only 43(19.3%) of them reported that they were satisfied. In other aspect 161 (72.2%) of them were dissatisfied with the Basic salary compared with employee's experience, while 7(3.1%) kept neutral and 55(24.7%) were satisfied. In general 141(65.9%) of the respondents were dissatisfied with the basic salary subscale.

9. INTERPERSONAL RELASHIONSHIPS: In terms of level of satisfaction on Interpersonal relationships, the majority of the respondents were satisfied in all factors in this category. Hundred seventy (76.2%) and Hundred sixty seven (74.9%) were satisfied with the Interpersonal relationships with co-workers and Respect from patients respectively. (See table 4). Generally 118(55.1%) of the participants were satisfied with the interpersonal relationship subscale.

10. LEADERSHIP: Hundred thirty nine (62.3%) were dissatisfied; twenty one (9.4%) were neither satisfied nor dissatisfied and sixty three (28.3%) were satisfied with respect to Administrative support. In terms of Quality of Leadership and practices of the hospital administrative, 143(55.6%) were dissatisfied, 13(5.8%) were neutral and 67(30.0%) were satisfied. Similarly 132(59.2%) of health workers were dissatisfied, 23(10.3%) kept neutral and the rest 68(30.5%) were satisfied with the Rules & Routines of supervision. In general 133(62.1%) of the respondents were dissatisfied with the leadership subscale.

11. WORKING CONDITIONS: Most health professionals 108(48.4%) were satisfied with the Work load. Again with the Work hours 65(29.1%) feel dissatisfied, 37(16.6%), kept neutral, and 121(54.3%) reported as they were satisfied. More than half 115(51.6%) of the respondents were dissatisfied with the Feeling of safe in the work environment while 86(38.6%) Of them were satisfied. Whereas 85(38.1%), 28(12.6%) and 110(49.3%) of the employees were dissatisfied, neutral and satisfied with overall job security respectively. Generally with the working conditions subscale 100 (46.7%) of study participants were scoring below the mean (dissatisfied) while 114 (53.3%) were scoring above the mean (satisfied).

Table 5. Descriptive statistics for job satisfaction subscale, Ayder Referral Hospital, 2015

| Subscales | NO of Items | Mean | SD |
|-------------------------|--------------------|-------------|-----------|
| Autonomy | 5 | 11.63 | 2.899 |
| Promotion | 3 | 5.82 | 2.322 |
| Recognition | 2 | 3.45 | 1.496 |
| Achievement | 2 | 4.57 | 1.353 |
| Feedback | 2 | 4.69 | 1.359 |
| Work itself | 2 | 4.67 | 1.314 |
| Salary | 3 | 4.51 | 2.280 |
| IPRS | 8 | 18.65 | 4.409 |
| Leadership | 5 | 8.65 | 3.576 |
| Compensation & benefits | 6 | 10.08 | 3.765 |
| Working conditions | 7 | 14.88 | 4.215 |

Source: Own Survey, 2015

The table above shows that the number of items (factors) grouped in each subscales with their mean and standard deviations. This helps to further reclassify variables in to binary response (satisfied-dissatisfied) based on their mean. For each subscale, if the sum of the responses of different items is below the computed mean, respondents considered as dissatisfied and coded as zero but if it is above computed mean respondents considered as satisfied and coded one.

Table 6. Satisfaction level of health professionals on job satisfaction subscale, Ayder Referral Hospital, 2015

| Subscale | Dissatisfied n (%) | Satisfied n(%) |
|-------------------------|---------------------------|-----------------------|
| Autonomy | 93(43.5) | 121(56.5) |
| Promotion | 109(50.9) | 105(49.1) |
| Recognition | 112(52.3) | 102(47.7) |
| Achievement | 101(47.2) | 113(52.8) |
| Feedback | 112(52.3) | 102(47.7) |
| Work itself | 100(46.7) | 114(53.3) |
| Salary | 141(65.9) | 73(34.1) |
| IPRS | 96(44.9) | 118(55.1) |
| Leadership | 133(62.1) | 81(37.9) |
| Compensation & benefits | 137(64.0) | 77(36.0) |
| Working Conditions | 100(46.7) | 114(53.3) |

Source: Own Survey, 2015

The results show that about 43.5 percent of respondents were dissatisfied in terms of autonomy and about 56.5 percent being satisfied. Similarly, achievement, work itself, work relations and working conditions recorded higher levels of satisfaction with 52.8, 53.3, 55.1, and 53.3 percent of respondents being satisfied respectively. On the other hand participants were dissatisfied on promotion, recognition, feedback, salary, leadership and compensation & benefits subscales. Higher levels of dissatisfaction were recorded on salary, leadership and compensation & benefits subscales that represented 65.9, 62.1 and 64.0 percent respectively.

Table 7. Binary logistic regression versus socio-demographic variables

Parameter estimates from binary logistic regression model versus predicting overall job satisfaction with respect to respondent socio-demographic variables, Ayder Referral Hospital, 2015

| Variables | Dissatisfied | Satisfied | Crude OR(95% CI) | P-value |
|--------------------------|---------------------|------------------|-------------------------|----------------|
| Sex | | | | |
| Male | 64(57.1) | 48(42.9) | 1 | |
| Female | 59(57.8) | 43(42.2) | 0.972(0.565, 1.672) | 0.918 |
| Age | | | | |
| 20-30 | 84(60.9) | 54(39.1) | 1 | |
| 31-40 | 32(49.2) | 33(50.8) | 1.604(0.885, 2.907) | 0.119 |
| >40 | 7(63.6) | 4(36.4) | 0.889(0.248, 3.182) | 0.856 |
| M.Status | | | | |
| Married | 59(59.0) | 41(41.0) | 1 | |
| Single | 62(56.9) | 47(43.1) | 1.091(0.629, 1.891) | 0.757 |
| Divorce | 2(40.0) | 3(60.0) | 2.159(0.345, 13.497) | 0.411 |
| Educational Level | | | | |
| Diploma | 9(56.2) | 7(43.8) | 1 | |
| BSC | 86(58.1) | 62(41.9) | 0.927(0.328, 2.623) | 0.886 |
| MSC | 13(86.7) | 2(13.3) | 0.198(0.033, 1.181) | 0.075 |
| M.Dr | 15(42.9) | 20(57.1) | 1.714(0.520, 5.653) | 0.375 |
| Position | | | | |
| Nurses | 67(56.8) | 51(43.2) | 1 | |
| Midwifery | 4(57.1) | 3(42.9) | 0.985(0.211, 4.599) | 0.985 |
| Pharmacist | 10(52.6) | 9(47.4) | 1.182(0.448, 3.123) | 0.73 |
| Dentist | 1(20.0) | 4(80.0) | 5.255(0.570, 48.450) | 0.143 |
| Lab.Tech | 15(68.2) | 7(31.8) | 0.613(0.233, 1.614) | 0.322 |
| Doctors | 16(50.0) | 16(50.0) | 1.314(0.601, 2.874) | 0.495 |
| Others | 10(90.9) | 1(9.1) | 0.131(0.016, 1.060) | 0.057 |
| Experience | | | | |
| 1-5 | 72(57.6) | 53(42.4) | 1 | |
| 6-10 | 34(54.8) | 28(45.2) | 1.119(0.606, 2.066) | 0.720 |
| >10 | 17(63.0) | 10(37.0) | 0.799(0.339, 1.884) | 0.608 |

Source: Own Survey, 2015

Table 8. Multinomial logistic regression versus job satisfaction subscales

Parameter estimates from binary and multinomial logistic regression model predicting overall job satisfaction with respect to job satisfaction subscale, Ayder Referral Hospital, 2015.

| Predictors | overall job satisfaction | | Crude OR (95% CI) | Adjusted OR (95% CI) | P-val |
|------------------------------------|--------------------------|-----------|-----------------------|----------------------|-------|
| | Dissatisfied | Satisfied | | | |
| Autonomy | | | | | |
| Dissatisfied | 78(83.9) | 15(16.1) | 1 | 1 | |
| Satisfied | 45(37.2) | 76(62.8) | 8.782(4.520, 17.065) | 0.072(0.031, 0.171) | 0.000 |
| Promotion | | | | | |
| Dissatisfied | 83(76.1) | 26(23.9) | 1 | 1 | |
| Satisfied | 40(38.1) | 65(61.9) | 5.187(2.873, 9.367) | 0.443(0.193, 1.014) | 0.054 |
| Recognition | | | | | |
| Dissatisfied | 86(76.8) | 26(23.2) | 1 | 1 | |
| Satisfied | 37(36.3) | 65(63.7) | 5.811(3.201, 10.547) | 0.473(0.215, 1.038) | 0.062 |
| Achievement | | | | | |
| Dissatisfied | 77(76.2) | 24(23.8) | 1 | 1 | |
| Satisfied | 46(40.7) | 67(59.3) | 4.673(2.673, 8.449) | 0.471(0.209, 1.063) | 0.070 |
| Feedback | | | | | |
| Dissatisfied | 79(70.5) | 33(29.5) | 1 | 1 | |
| Satisfied | 44(43.1) | 58(56.9) | 3.156(1.795, 5.549) | 0.472(0.201, 1.105) | 0.084 |
| Work itself | | | | | |
| Dissatisfied | 70(70.0) | 30(30.0) | 1 | 1 | |
| Satisfied | 53(46.5) | 61(53.5) | 2.686(1.527, 4.722) | 0.484(0.246, 0.954) | 0.036 |
| Salary | | | | | |
| Dissatisfied | 93(66.0) | 48(34.0) | 1 | 1 | |
| Satisfied | 30(41.1) | 43(58.9) | 2.777(1.552, 4.970) | 0.360(0.201, 0.644) | 0.001 |
| IPRS | | | | | |
| Dissatisfied | 78(81.2) | 18(18.8) | 1 | 1 | |
| Satisfied | 45(38.1) | 73(61.9) | 7.030(3.733, 13.238) | 0.357(0.152, 0.840) | 0.018 |
| Leadership | | | | | |
| Dissatisfied | 103(77.4) | 30(22.6) | 1 | 1 | |
| Satisfied | 20(24.7) | 61(75.3) | 10.472(5.476, 20.026) | 0.199(0.085, 0.466) | 0.000 |
| Compensation & benefits | | | | | |
| Dissatisfied | 103(75.2) | 34(24.8) | 1 | 1 | |
| Satisfied | 20(26.0) | 57(74.0) | 8.634(4.552, 16.376) | 0.346(0.156, 0.781) | 0.011 |
| Working Conditions | | | | | |
| Dissatisfied | 88(88.0) | 12(12.0) | 1 | 1 | |
| Satisfied | 35(30.7) | 79(69.3) | 16.552(8.036, 34.094) | 0.060(0.029, 0.124) | 0.000 |

Source: Own Survey, 2015

4.2 DETERMINANT FACTORS OF JOB SATISFACTION

4.2.1. Socio-demographic factors

Demographic variables were not significantly associated with general level of job satisfaction in the binary logistic regression. From the above table it is seen that the significant value of all the variables: sex (0.918), Age (0.119), marital status (0.411), Educational level (0.075), job status (position) (0.057) and Years of experience (0.608) were greater than 0.05. Therefore the study revealed that the demographic variables (sex, Age, marital status, educational level, position and experience) of employees have no influence on the determination of employee job satisfaction in Ayder referral hospital.(Table 7).

4.2.2. Intrinsic factors

The intrinsic factors autonomy, promotion, recognition, feedback, achievement and work itself were found to be significantly associated with the general level of job satisfaction in the binary logistic regression analysis. Of the above factors autonomy and work itself were statistically significant with the general level of job satisfaction in the multivariate logistic regression. But variables promotion, recognition, feedback and achievement which were statistically significant in the binary logistic regression were failed to be statistically significant in the multivariate logistic regression. As this study clearly shows that among the intrinsic subscales the final predictor of job satisfaction were autonomy and work itself. Those satisfied with autonomy Were 93% less likely to be satisfied with overall job aspect (AOR: 0.072 [95% CI 0.031–0.171]) ($P < 0.05$) and those satisfied with the work itself were 52% less likely to be satisfied with the general level of job satisfaction. (AOR: 0.484 [95% CI: 0.246–0.954] ($p < 0.05$). In fitting of promotion, recognition, feedback, and achievement as predictor of job satisfaction, the variables were rejected from the multivariable logistic regression model in the second step by the software because of insignificance. This implies that to make health workers being satisfied, increasing only the level of promotion, recognition, feedback, and achievement may not be effective measure because other powerful factors are there (Table 8).

4.2.3. Extrinsic factors

The extrinsic factors interpersonal relationship, leadership, compensation & benefits, working conditions, and salary were found to be significantly associated with the general level of job satisfaction in the binary logistic regression analysis. All of the above factors that were significant in binary logistic regression were also statistically significant in the multinomial logistic regression. Those satisfied with interpersonal relationship were 64% less likely to be satisfied with overall job aspect (AOR: 0.357 [95% CI: 0.152–0.840]($p < 0.05$). Similarly those satisfied with leadership were 80% less likely to be satisfied with overall job satisfaction (AOR: 0.199 [95% CI: 0.085–0.466]($p < 0.05$). And those satisfied with compensation & benefits, working conditions and salary 65% (AOR: 0.346 [95% CI: 0.156–0.781]($p < 0.05$), 94% (AOR: 0.060 [95% CI: 0.029–0.124]($p < 0.05$), and 64% (AOR: 0.360 [95% CI: 0.201–0.644]($p < 0.05$), were less likely to be satisfied with overall job aspect respectively.(Table 8)

4.3. RESULT FROM QUALITATIVE DATA

To support the finding from the quantitative data, respondents that are in managerial position were asked on five important questions.

1. Does your organization have mechanism that can improve the level of employee job satisfaction?
 - a. If yes, what mechanism /motivational practices/ currently are using to increase the job satisfaction of health workers in the hospital?
 - b. Do you think that these efforts towards motivating employees enough? Why?
 - c. If no, what do you think its implication in service delivery?
2. How do you describe the leadership practice of your hospital?
3. What do you think the level of satisfaction of your employees?
4. What challenges have you faced with regard to job satisfaction?
5. What kind of measures can be taken to stimulate better approach for the development of employee satisfaction strategy for Ayder Referral Hospital?

Promotion, autonomy, recognition for better contribution, different benefits like training, opportunity for further education, transport service and health benefits for spouse and their child were the motivational practices that the organization used to increase the job satisfaction of the employees. All the respondents from the management agreed on the inadequacy of the mechanisms that the hospital practices to motivate employees. They said ‘‘the amount of salary paid is not comparable to employees’ contribution, the value of the profession, and the present cost of living. Therefore the health professionals need to have insurance scheme, house allowance, financial rewards, bonuses and other benefits but no positive response for these needs due to different reasons like budget constraints. ’’ Besides to this, most of the department heads were not comfortable regarding the motivational practices in the hospital even though there are few mechanisms. They said that ‘‘The educational opportunity provided to employees is too low when we compare with the number of health professionals.’’ One participant also said ‘‘there was a payment for hazard but currently it is blocked by the reason of budget constraints.’’ Due to this employees are dissatisfied with the management’s decision and are De-motivated to work. This shows most of the results obtained from interview were similar to that of questionnaire because the results of the quantitative data indicated that the health professionals of the hospital were somewhat satisfied with autonomy , achievement , work itself , interpersonal relationships and working conditions whereas promotion , recognition , feedback, salary , leadership , and compensation & benefits subscales reported as dissatisfying job aspects.

Two respondents said ‘‘we encourage them to have good interpersonal relationships, create a conducive working environment, prepare monthly meeting in which all staffs discuss their problem in case team, this make their relation with their head smooth. Therefore, I believe that the majority of the employees are satisfied with the leadership of the hospital.’’

Another respondent said ‘‘the administrative try to make the health professionals to be satisfied by providing them with recognition, promotion and training opportunities.’’

In contrary to the above view some of the respondents said ‘‘the administrative support through supervision and feedback is insufficient, administration lacks leadership quality and skill because most of them did not take trainings regarding the basic principles of management and there is scarcity of human power in the human resource (HR) department to administer well.’’ based on

the information they obtained from different workers they think that most of the professionals were dissatisfied with the leadership and administrative of the organization. This supports the result of the quantitative data on leadership subscale (62.1% of the respondents were dissatisfied).

All interview participants said the general level of the job satisfaction of the health professionals of the hospital is low. Their reasons were the low salary has an influence on satisfaction level of the professionals, the salary increment made by the government creates dissatisfaction for those health workers having diploma qualification, and lack of payment for hazard that previously offered. . This is similar with the result obtained from the self administered questionnaire. That is 55.2% of the participants of the health professionals working in Ayder referral hospital were dissatisfied whereas 40.8% of the respondents reported as they were satisfied with their jobs.

4.4 DISCUSSION

Job satisfaction generally, implies the attitudes and feelings that one has about his/her job which stimulates him/her to deliver expected performance outcome (George & Jones, 2008; Armstrong, 2006). It further underscores the gratification of an employee to his/her job (Parvin & Kabir, 2011). This study aims at investigating the factors influencing job satisfaction of health workers. This is important because organization need qualified employees and want to understand how to retain and develop competent staff compositions. In this study, majority of the respondents 55.2% were dissatisfied with their job. The major reasons were lack of compensation & benefits, inadequate promotion, recognition, feedback, poor leadership practice and low salary. This finding is consistent with previous study done in Jimma University specialized hospital, 46.2% dissatisfied and 41.4% satisfied (Alemshet Y.et.al 2011). It is also consistent with other studies done in Zahedan District, Islamic Republic of Iran, 47.3% dissatisfied and 40.5% satisfied (A.Kebriaei and M.S.Moteghedhi, 2009). To the contrary the majority of respondents were satisfied(52.5%) and (60.8%) in sidama zone(Agezegn et al. 2014) and in south west Ethiopia (Ahmed et al. 2013) respectively. Less than half (40.8%) of the health professionals in Ayder referral hospital were satisfied with interpersonal relationship, achievement, autonomy, work itself and working conditions subscales.

AUTONOMY: The finding of the study showed that Autonomy was the strong predictor of job satisfaction in Ayder referral hospital. More than half of the participants of the hospital (56.5%) were satisfied with this subscale. The study result is supported by (Hackman & Oldham, 1980) which identified Autonomy leads to feelings of responsibility which is important component of job satisfaction. In the same way the results of the study conducted on Factors Influencing Job Satisfaction and Anticipated Turnover among Nurses in Sidama Zone Public Health Facilities, South Ethiopia identified autonomy as a characteristic that was strong determinants of job satisfaction (Agezegn Asegid et al., 2014). The result was also consistent with the studies done on San Jose State University on determinants of job satisfaction and turnover among physicians (Dustin Kaplan, 2009) and Job satisfaction survey by SHRM, (Victor, 2012).

WORKITSELF: Satisfaction from the work itself was the other determinant factor in the hospital. The majority of the respondents were (53.3%) satisfied with this subscale. This finding is consistent with the studies done in Iran (A. Kebriaei and M.S. Moteghedhi, 2009), south west Ethiopia (Ahmed et al., 2013) and Job satisfaction survey by SHRM, (Victor, 2012). The study results support Herzberg and Maslow's theories which identified the nature of the work as characteristics that is strong determinants of job satisfaction.

SALARY: The findings from the current study have demonstrated that generally, health professionals of the participants in Ayder referral hospital were highly dissatisfied on their job with the salary subscale, represented (65.9%). This finding is consistent with the studies done in china (Liu, Wang and Lu, 2010), south west Ethiopia (Ahmed et al., 2013), Jimma University specialized hospital, (Alemshet Y. et al 2011) and Dhaka (M.M. Parvin, 2011). In contrast to this study salary was not determinant factor in the study done in south Ethiopia (Agezegn Asegid et al, 2014).

INTERPERSONAL RELATIONSHIP: Interpersonal relationship is one of the determinant factors of job satisfaction. In this study more than half (55.1%) of the participants were satisfied with this subscale. Interpersonal relationships between employees were considered by several researchers. Adam and Bond (2000) discovered that human relationships are the best predictors

of job satisfaction, and that job satisfaction is significantly predicted by professional relationships in the work environment. Likewise, Dunn et al. (2005) identified the fact that relationships among nursing staff is the single most important factor for building job satisfaction, contributing to high-quality patient care. McNeese-Smith (1999) declared that a good relationship between nurses coupled with collaboration with health care staff in general is an essential ingredient for job satisfaction. The result of the study is also similar with the studies done in Dhaka (M.M. Parvin, 2011), and in the Volta Region of Ghana (Ben Smith Owusu Bempah, 2013).

LEADERSHIP: Leadership is a powerful predictor of overall job satisfaction in Ayder referral hospital. Most of the participants reported leadership (62.1%), as dissatisfying job aspect. The study is consistent with the study done in Iran (A. Kebriaei and M.S. Moteghed, 2009). In contrary, a study conducted in Sidama Zone Public Health Facilities, South Ethiopia concerning Factors Influencing Job Satisfaction and Anticipated Turnover among Nurses appeared to be satisfied with leadership(57%).

COMPENSATION & BENEFITS: Participant's responses indicated that compensation & benefit were an important factor in determining employees' level of satisfaction. 64.0% of the respondents were dissatisfied with this subscale. This study is consistent with the study done on Job satisfaction among community health workers in Zahedan District, Islamic Republic of Iran by (A. Kebriaei and M.S. Moteghed, (2009). The respondents were least satisfied with payment and benefits, only 4.1% satisfied, with around 92% of the respondents indicating that they were dissatisfied with this aspect. In contrast to this study benefit was not determinant factor in the studies done in south Ethiopia (Agezegn Asegid et al, 2013) and in the Volta Region of Ghana (Ben Smith Owusu Bempah, 2013).

WORKING CONDITIONS: Findings of this first study on determinants factors of job satisfaction among health workers in Tigray region, Ayder referral hospital, the majority of the participants were satisfied (53.3%) with working conditions subscale. This finding is consistent with previous study done in the Volta Region of Ghana (Ben Smith Owusu Bempah, 2013).To

the contrary, a study done in Iran (A. Kebriaei and M.S. Moteghedi, (2009), most of the employees were dissatisfied (81.1%) with the working condition subscale.

It is argued that intrinsic factors are more important than extrinsic factors on employee job satisfaction. It is also perceived as a type of motivation leading to highly valued outcomes such as creativity, quality, spontaneity, and vitality. Herzberg and his co-workers (1957) argued that, motivators (e.g. achievement and responsibility), lead to job satisfaction when present, but do not produce dissatisfaction when absent. These satisfiers are intrinsic factors. Job context features, called hygiene factors, (e.g. company policies, supervision and salary) are called extrinsic factors. They cause dissatisfaction when inadequate but do not cause satisfaction, even when they are present. Unfortunately these arguments contradict with this study because 50% of the intrinsic constructs (autonomy, achievement and work itself) were found to be motivators, Meaning they cause satisfaction and 50% of the intrinsic factors (promotion, recognition and feedback) were categorized under dissatisfying areas. Even though the extrinsic factors (salary, compensation & benefits and leadership) were categorized under dissatisfying areas, but working conditions, and interpersonal relationships are among the extrinsic factors they cause satisfaction which is strictly opposite with the theories of Herzberg and his co-workers.

CHAPTER FIVE

SUMMARY, CONCLUSION, LIMITATIONS AND RECOMMENDATIONS

This part of the study tries to summarize and conclude the key findings which arose out of the study and pass possible recommendations as remedies to alleviate the existing and Observable potential problems.

5.1. SUMMARY

Employee job satisfaction can improve service quality and increase employee satisfaction. The study has given considerable insights into determinants of job satisfaction among health professionals. Out of 116 male respondents 19(16.4%) were highly dissatisfied and 45(38.8%) were dissatisfied. The majority of the respondents aged 20 to 30 reported as they were dissatisfied and more than half the married respondents were categorized under dissatisfied. Of the Bsc holders, 12.9% and 42.6% were highly dissatisfied and dissatisfied respectively. Sixty percent of Dentist was responding as they were satisfied and twenty percent responding as they were highly satisfied and slightly more than half of the respondents having a work experience greater than ten were dissatisfied. All the Demographic variables (Sex, Age, Marital status, Educational level, Position and Experience) were not significant predictors of job satisfaction.

Most of the respondents were satisfied with autonomy (56.5%), achievement (52.8%), work itself (53.3%), IPRS (55.1%), and working conditions (53.3%) whereas they were dissatisfied with promotion (50.9%), recognition (52.3%), feedback (52.3%), salary (65.9%), leadership (62.1%), and compensation & benefits (64%) job aspects. Particularly, Participant's responses indicated that autonomy, work itself, salary, interpersonal relationships, leadership, compensation & benefits and working conditions were the final predictors of overall job satisfaction. In this study, the majority of qualitative and quantitative data were supporting to each other. Generally, 55.2% of the participants working in Ayder Referral Hospital were dissatisfied whereas 40.8% of the respondents reported as they were satisfied with their jobs.

5.2. CONCLUSION

The study has explored the determinant factors associated with job satisfaction among health professionals of Ayder referral hospital. It has been found out that all the demographic variables that are sex, age, marital status, educational level, position and work experience factors have no impact on job satisfaction in the hospital. Overall outcome of the study recognized autonomy, work itself, salary, interpersonal relationships, leadership, compensation & benefits and working conditions as significant determinants to predict employee job satisfaction and dissatisfaction. The findings of the current study emphasize that autonomy and work itself are vital components for improving job satisfaction among health professionals in the hospital. Hence from this research it can be concluded that intrinsic factors are the most important aspect for job satisfaction of the employees in the organization. Promotion, recognition, feedback, salary, leadership and compensation & benefits subscales are the factors associated with dissatisfaction job aspect. These results reflect the presence of inadequate motivational practices and poor leadership style. In general respondents feel that the organization is not doing enough to improve overall job satisfaction.

5.3. LIMITATIONS OF THE STUDY

This study was conducted in one hospital particularly Ayder referral hospital in Mekelle, Tigray. This was done to study the determinant factors of job satisfaction. Since nature of works in different organizations varies, the level of job satisfaction may vary. This limits the generalizability of the findings of the study to other hospitals. In addition shortage of time, money and resources was also other potential limitations of the study.

5.4. RECOMMENDATIONS

In view of the above findings, the researcher recommends the following

1. There should be regularity in the promotion of health professionals and such promotion should be based on merit to encourage hard work.
2. The work environment should be improved and made more conducive by providing adequate facilities and equipment so that workers would derive adequate physical and psychological satisfaction that will go a long way to enhancing their commitment to work.
3. The administration of the hospital and stakeholders should design mechanisms for non-salary incentives to the employees that may include transport and house allowances, health insurance, medical care and loans, as well as other accommodation, so as to increase the job satisfaction and improve their competencies on the job.
4. As the problem of administration is cited as the most prevalent, the institution should improve its leadership and administrative skill through training and take remedial measures that would enhance a kind of working environment in which every member of the staff is treated fairly and properly.
5. As most of the participants were slightly satisfied with level of autonomy, achievement, work itself, IPRS, working conditions in their respective institution, the organization should maintain the continuity of the activity by the previously employed method.
6. In general Priority could be given to dissatisfying areas (promotion, recognition, feedback, salary, leadership style and compensation and benefits) while formulating the institutional policies.

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APPENDICES

APPENDIX 1: LEVEL/DEGREE OF SATISFACTION

| S/N | FACTORS | Level/ Degree of job satisfaction | | | | |
|-----|--|-----------------------------------|-----------------------|------------------|--------------------|---------------------------|
| | | Highly Dissatisfied F (%) | Dissatisfied f (%) | Neutral F (%) | Satisfied F (%) | Highly Satisfied F (%) |
| 1 | Degree of Autonomy and independence associated with work roles | 10(4.5) | 24(10.8) | 5(2.2) | 128(57.4) | 56(25.1) |
| 2 | Promotion opportunities | 43(19.3) | 87(39.0) | 8(3.6) | 69(30.9) | 16(7.2) |
| 3 | Recognition given for job performance | 44(19.7) | 86(38.6) | 13(5.8) | 54(24.2) | 26(11.7) |
| 4 | professional advancement | 34(15.2) | 74(33.2) | 2(0.9) | 94(42.2) | 19(8.5) |
| 5 | Achievement | 16(7.2) | 49(21.9) | 3(1.3) | 111(49.7) | 44(19.7) |
| 6 | personal growth | 48(21.5) | 63(28.3) | 1(0.4) | 88(39.5) | 23(10.3) |
| 7 | responsibility | 10(4.5) | 42(18.8) | 7(3.1) | 127(57.0) | 37(16.6) |
| 8 | Feedback from supervisors | 26(11.7) | 78(35.0) | 8(3.6) | 87(39.0) | 24(10.8) |
| 9 | Feedback from patients | 6(2.7) | 31(13.9) | 3(1.3) | 132(59.2) | 51(22.9) |
| 10 | work itself | 15(6.7) | 41(18.4) | 3(1.3) | 125(56.1) | 39(17.5) |
| 11 | Chance given to creativity | 25(11.2) | 68(30.5) | 25(11.2) | 84(37.7) | 21(9.4) |
| 12 | Opportunities to use skills and abilities | 20(9.0) | 50(22.4) | 31(13.9) | 96(43.0) | 26(11.7) |
| 13 | Right given to put forward your opinions | 16(7.2) | 42(18.8) | 69(30.9) | 75(33.6) | 21(9.4) |
| 14 | training and further education | 51(22.9) | 105(47.1) | 6(2.7) | 50(22.4) | 11(4.9) |
| 15 | Consideration given to your personal needs | 56(25.1) | 84(37.7) | 16(7.2) | 55(24.7) | 12(5.4) |
| 16 | Provision of housing | 73(32.7) | 83(37.2) | 6(2.7) | 53(23.8) | 8(3.6) |
| 17 | Incentive Compensations | 55(24.7) | 81(36.3) | 32(14.3) | 51(22.9) | 4(1.8) |
| 18 | Financial rewards | 69(30.9) | 85(38.1) | 13(5.8) | 53(23.8) | 3(1.3) |
| 19 | Free health care benefits | 29(13.0) | 66(29.6) | 65(29.1) | 50(22.4) | 13(5.8) |
| 20 | Overtime payment | 26(11.7) | 58(26.0) | 83(37.2) | 44(19.7) | 12(5.4) |
| 21 | Current position | 23(10.3) | 44(19.7) | 48(21.5) | 99(44.4) | 9(4.0) |
| 22 | Basic salary compared with your qualification | 54(24.2) | 105(47.1) | 6(2.7) | 53(23.8) | 5(2.2) |
| 23 | Basic salary compared with your work load | 73(32.7) | 95(42.6) | 12(5.4) | 39(17.5) | 4(1.8) |
| 24 | Basic salary compared with your experience | 58(26.0) | 103(46.2) | 7(3.1) | 48(21.5) | 7(3.1) |
| 25 | Interpersonal relationships with co-workers | 12(5.4) | 31(13.9) | 10(4.5) | 120(53.8) | 50(22.4) |

| | | | | | | |
|----|---|-----------------|-----------------|---------------|-----------------|----------------|
| 26 | Interpersonal relationships with immediate supervisor | 15(6.7) | 61(27.4) | 23(10.3) | 95(42.6) | 29(13.0) |
| 27 | Interpersonal relationships with subordinates | 9(4.0) | 26(11.7) | 70(31.4) | 84(37.7) | 34(15.2) |
| 28 | Communication with senior management | 26(11.7) | 46(20.6) | 54(24.2) | 79(35.4) | 18(8.1) |
| 29 | Respect from colleagues | 14(6.3) | 32(14.3) | 47(21.1) | 99(44.4) | 31(13.9) |
| 30 | Respect from supervisor | 13(5.8) | 40(17.9) | 63(28.3) | 86(38.6) | 21(9.4) |
| 31 | Respect from managements | 18(8.1) | 51(22.9) | 62(27.8) | 73(32.7) | 19(8.5) |
| 32 | Respect from patients | 5(2.2) | 16(7.2) | 35(15.7) | 93(41.7) | 74(33.2) |
| 33 | Participation in decision making | 20(9.0) | 46(20.6) | 54(24.2) | 79(35.4) | 24(10.8) |
| 34 | Administrative support | 37(16.6) | 102(45.7) | 21(9.4) | 49(22.0) | 14(6.3) |
| 35 | Performance appraisal policy of the hospital | 37(16.6) | 52(23.3) | 79(35.4) | 46(20.6) | 9(4.0) |
| 36 | Leadership style and practices | 43(19.3) | 100(44.8) | 13(5.8) | 61(27.4) | 6(2.7) |
| 37 | Rules & Routines of supervision | 30(13.5) | 102(45.7) | 23(10.3) | 62(27.8) | 6(2.7) |
| 38 | Work load | 31(13.9) | 59(26.5) | 25(11.2) | 91(40.8) | 17(7.6) |
| 39 | Sick leave | 18(8.1) | 40(17.9) | 66(29.6) | 75(33.6) | 24(10.8) |
| 40 | Work hours | 21(9.4) | 44(19.7) | 37(16.6) | 96(43.0) | 25(11.2) |
| 41 | Feeling of safe in the work environment | 41(18.4) | 74(33.2) | 22(9.9) | 73(32.7) | 13(5.8) |
| 42 | Fairness | 35(15.7) | 89(39.9) | 27(12.1) | 60(26.9) | 12(5.4) |
| 43 | Job location | 19(8.5) | 21(9.4) | 75(33.6) | 87(39.0) | 21(9.4) |
| 44 | Resources and supplies of medical instruments/ equipments | 29(13.0) | 48(21.5) | 51(22.9) | 77(34.5) | 18(8.1) |
| 45 | Overall job security | 16(7.2) | 69(30.9) | 28(12.6) | 94(42.2) | 16(7.2) |
| 46 | General level of job satisfaction (Overall job satisfaction) | 28(12.6) | 95(42.6) | 9(4.0) | 81(36.3) | 10(4.5) |

APPENDIX 2: THE QUESTIONNAIRE

Addis Ababa University College of Business and Economics School of Commerce Department of Human Resource Management Post Graduate Programme (MA---HRM)

This questionnaire is prepared to gather information for the study to be conducted on determinant factors of job satisfaction among health professionals of Ayder Referral Hospital. I kindly request you to give response for the following questions. I am very grateful for your cooperation.

➤ Please note the following statements

- If you feel that your job gives you more than what you expect, tick under highly satisfied (HS=5)
- If you feel that your job gives you what you expect, tick under satisfied (S=4)
- If you feel that you are not able to decide, tick under neutral (N=3)
- If you feel that your job gives you less than what you expect, tick under dissatisfied (D=2)
- If you feel that your job gives you much less than what you expect, tick under highly dissatisfied (HD=1)

PART- ONE ---DEMOGRAPHICS

1. Sex Male Female
2. Age in years: _____
3. Marital status Married Single Divorce
4. Educational level Diploma BSC Degree MSC Degree Medical Doctors
 Others, specify _____
5. Job status (work position) Nurse Midwifery Pharmacist Dentist
 Laboratory technologist Doctors Others, Specify: _____
6. Work experience in years: _____

PART TWO—INTRINSIC AND EXTRINSIC FACTORS OF JOB SATISFACTION

| S/N | FACTORS: ✓ What is your levels of satisfaction with the : | Highly Satisfied =5 | Satisfied =4 | Neutral =3 | Dissatisfied =2 | Highly Dissatisfied =1 |
|-----|---|------------------------|-----------------|---------------|--------------------|---------------------------|
| 1 | Degree of Autonomy and independence associated with your work roles | | | | | |
| 2 | Promotion opportunities provided for you | | | | | |
| 3 | Recognition given for job performance | | | | | |
| 4 | Opportunities for professional advancement | | | | | |
| 5 | Feeling of fulfillment you get from your job(Achievement) | | | | | |
| 6 | Opportunities for personal growth | | | | | |
| 7 | Job responsibility allotted to you | | | | | |
| 8 | Feedback from supervisors | | | | | |
| 9 | Feedback from patients | | | | | |
| 10 | work itself / intellectual rewards from the profession | | | | | |
| 11 | Chance given to creativity | | | | | |
| 12 | Opportunities to use skills and abilities | | | | | |
| 13 | Right given to put forward your opinions freely | | | | | |
| 14 | Opportunities for professional training and further education | | | | | |
| 15 | Considerations given to your personal needs | | | | | |
| 16 | Provision of housing or house allowance | | | | | |
| 17 | Incentive Compensations | | | | | |
| 18 | Financial rewards for better work | | | | | |
| 19 | Free health care benefits | | | | | |
| 20 | Overtime payment | | | | | |
| 21 | Current position | | | | | |
| 22 | Basic salary compared with your qualification | | | | | |
| 23 | Basic salary compared with your work load | | | | | |
| 24 | Basic salary compared with your experience | | | | | |
| 25 | Interpersonal relationships with co-workers | | | | | |
| 26 | Interpersonal relationships with immediate supervisor | | | | | |
| 27 | Interpersonal relationships with subordinates | | | | | |
| 28 | Communication with senior management | | | | | |
| 29 | Respect from colleagues | | | | | |
| 30 | Respect from supervisor | | | | | |
| 31 | Respect from managements | | | | | |

| | | | | | | |
|----|---|--|--|--|--|--|
| 32 | Respect from patients | | | | | |
| 33 | Participation in decision making | | | | | |
| 34 | Administrative support | | | | | |
| 35 | Performance appraisal policy of the hospital | | | | | |
| 36 | Leadership style and practices of the hospital administrative | | | | | |
| 37 | Rules & Routines of supervision | | | | | |
| 38 | Work load(Quantity of work allotted to you) | | | | | |
| 39 | Sick leave offered to you | | | | | |
| 40 | Work hours | | | | | |
| 41 | Feeling of safe in the work environment | | | | | |
| 42 | Feeling of being treated equally(fairness) | | | | | |
| 43 | Job location Feeling of being treated equally(fairness) | | | | | |
| 44 | Resources and supplies of medical instruments/ equipments | | | | | |
| 45 | Overall job security | | | | | |
| 46 | General level of job satisfaction | | | | | |

PART THREE: BRIEF DESCRIPTION

Please answer the following open ended questions:

1. Describe the factors in your hospital that gives you the most satisfaction?

2. Describe the factors in your hospital that dissatisfies you the most?

3. What problems have you observed with regard to job satisfaction?

4. What do you recommend to the Administrative and stakeholders to improve the job satisfaction of health workers in Ayder Referral Hospital?

THANK YOU VERY MUCH FOR YOUR KIND CO-OPERATION

APPENDIX 3: INTERVIEW QUESTIONS

This interview is prepared to collect data from the workers of Ayder Referral Hospital who are in managerial positions for the purpose of triangulation (cross checking). The interview you will provide is believed to have a great value for the success of this research. I confirm you that all data will be used for academic purpose and will be analyzed anonymously. I highly appreciate in advance to your kind cooperation in providing the necessary information.

Date: _____ Gender: _____ Age: _____

Work experience in years: _____ Academic qualification (educational level): _____ Position (work status): _____

1. Does your organization have mechanism that can improve the level of employee job satisfaction?

a. If yes, what mechanism /motivational practices/ currently are using to increase the job satisfaction of health workers in the hospital?

b. Do you think that these efforts towards motivating employees enough? Why?

c. If no, what do you think its implication in service delivery?

2. How do you describe the leadership practice in your hospital?

3. What do you think the level of satisfaction of your employees?

4. What challenges have you faced with regard to job satisfaction?

5. What kind of measures can be taken to stimulate better approach for the development of employee satisfaction strategy for Ayder Referral Hospital?

THANK YOU VERY MUCH FOR YOUR KIND CO-OPERATION!