ADDIS ABABA UNIVERSITY
COLLEGE OF HEALTH SCIENCE
DEPARTMENT OF EMERGENCY MEDICINE

ASSESSMENT OF THE MAGNITUDE AND ASSOCIATED FACTORS OF TURNOVER INTENTION AMONG NURSES WORKING IN EMERGENCY DEPARTMENTS OF SELECTED GOVERNMENTAL HOSPITALS IN ADDIS ABABA, ETHIOPIA

BY: BINIYAM TAYE (BSc)

A THESIS TO BE SUBMITTED TO ADDIS ABABA UNIVERSITY, COLLEGE OF HEALTH SCIENCE, DEPARTMENT OF EMERGENCY MEDICINE IN PARTIAL FULFILLMENT OF THE REQUIREMENT OF MASTERS DEGREE IN EMERGENCY MEDICINE AND CRITICAL CARE NURSING.

JUNE, 2018
ADDIS ABABA, ETHIOPIA.

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This thesis by Binyam Taye is accepted in its present form by the board of examiners as satisfying thesis requirement for the degree of masters of Science in emergency medicine and critical care nursing.

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ABBREVIATION

AA	Addis Ababa
AaBET	Addis Ababa Burn Emergency and Trauma
AAU	Addis Ababa University
ED	Emergency Departments
ENA	Ethiopian Nursing Association
JS	Job satisfaction
MOH	Ministry Of Health
PI	Principal Investigator
SPSS	Statistical package for social science
SNNP	Southern Nations Nationalities and Peoples
TASH	Tikur Anbessa Specialized Hospital
UK	United Kingdom
USA	United States of America

ABSTRACT

Back ground: Nurses' turnover is defined as resignation of a licensed nurse from a hospital due to various factors. However Nurses' turnover from Emergency department can be nurses' preference of working in other departments within the same hospital or totally to leave the hospital. Actual turnover is expected to increase as the intention increases. Emergency Department nurses are especially vulnerable to turnover because of their increased potential for developing burnout and compassion fatigue in which work environment has a great role.

Objective: To assess the magnitude and associated factors of turnover intention among nurses working in emergency departments of selected governmental hospitals in Addis Ababa, Ethiopia.

Methods: Institution based cross-sectional study was carried out on 102 nurses conveniently in three selected governmental hospitals, Addis Ababa from February 19 to march 31 2018, using structured pre tested self-administered questionnaire. Logistic regression model was fitted and adjusted odds ratio with 95% confidence interval was calculated to identify associated factors.

Result: A total of 102 respondents were involved with a response rate of 91.1%. Among them, 46(45.1%) respondents had intention to leave the hospital. three significant predictors of nurses working in emergency departments ' intention to leave their jobs: holding diploma rather than master (adjusted Odds ratio (OR) =4.700, 95% confidence interval (CI)=1.033, 590.772; p<0.048), having Less than 3145 ETB monthly income more highly (adjusted OR=6.049, 95% CI=1.056,34.641; p<0.043) and professional autonomy (adjusted OR=0.191, 95% CI=0.040, 0.908; p<0.037).

Conclusion and recommendation: Nearly half of the respondents had been intention to leave the organization. Educational status; monthly income and autonomy were significantly associated with nurses‟ turnover intention in three governmental hospitals. Ward managers, ENA and MOH might have made efforts to enhance nurses‟ independent decision making for patient care activities and shared decision over work or unit related activities.

Key words: Addis Ababa, emergency department, Ethiopia, nurse, Turnover intention,

CHAPTER ONE

1. INTRODUCTION

1.1. Background

Nurse turnover is defined as resignation of a licensed nurse from a hospital due to various factors. It can be as a result of dissatisfaction on many aspects like salary, carrier development opportunity, work environment and condition and other personal factors(1).

In the history of the nursing profession, turnover and job and/or professional quitting remain a serious problem associated with crisis. It is defined as the loss of an employee due to transfer, termination, or resignation. Meanwhile, turnover intention has been defined as the individual's own estimated probability of permanently leaving the organization at some point in the near future (2).

Turnover intention has been acknowledged as the best predictor of actual turnover. Actual Turnover is expected to increase as the intention increases (3). It is also described as a multi-stage process consisting of psychological, cognitive, and behavioral components. Turnover intent is claimed to start with psychological responses to negative aspects of organizations or jobs. The core of the process included the cognitive component involving decision to leave, and withdrawal behavior which may be categorized as withdrawal from the current job or actions oriented to future opportunities (4).

Employee turnover has always been a matter of concern for organizations. A large degree of employee turnover may be detrimental to both the organization as well as the employees. Turnover has an impact over the organization’s costs relating to recruitment and selection, personnel process and induction, training of new personnel and above all, loss of knowledge gained by the employee while on job. Additionally, it results in understaffing which in turn lead to decreased effectiveness and productivity of the remaining staff(5).

Nurses are the key components to understand the criticality and breadth of patient care needs to address in the most efficient way. Thus, nursing turnover have a significant impact to ED leaders

who desire to preserve a seasoned and competent nursing workforce (6). However they are entering and leaving the profession in higher than average numbers, which incurs higher costs for hospitals to replace staff. The cost of recruitment, hiring, and training for an individual nurse has been estimated to be as high as $82,000 per RN; for a 300-bed facility, using the 14% national turnover rate, this translates into a potential four-million-dollar annual expenditure(7).

The cost of replacing a specialized, emergency nurse may be even higher when the additional training, verifications, and education for critical competencies needed to care for high-acuity patients is provided by the hospital. It is estimated that one in five RNs leaves the profession within one year of hire, while up to one-third leave within two years (7).

Many studies showed that multiple factors influence the decision of nurses to stay in or leave their work place. Among these; job satisfaction, job stress, work experience, pay and benefit, long shifts and work-family conflict have been identified as variables that could force nurses to leave their workplace(8-11).The ability of hospitals to retain trained and experienced emergency nurses in a cost-prohibitive healthcare environment requires action on behalf of hospital administrators (12).

Emergency Departments (ED) are highly acute patient care environments which are often unpredictable (6).Nurses working in Emergency Departments are especially vulnerable to turnover because of their increased potential for developing burnout and compassion fatigue(13).Regional studies conducted in Ethiopia have found that 50% to 61% of nurses say they intend to leave their current positions in the next year (14-16).

Similar study done to assess factors affecting nurses' turnover intention in Ethiopia 2015 revealed that more than half (50.2%) of all nurses surveyed said they intended to leave their jobs in the next year(17). However there is no published study from this country that specifically focused on nurses' working in emergency departments which intends to this study.

1.2. Statement of the problem

Emergency department nurses are exposed to a higher-than-average incidence of violence and often report career-ending workplace injuries due to the nature and pace of ED work(11).Caring for challenging patients with critical illness, traumatic injury, and behavioral health issues in a noisy, high-stress environment with frequent interruptions and distractions can contribute to excessive stress for the emergency nurse(13).

ED nurses with invaluable experience and mentoring capacity may consider leaving the ED for less stressful and physically demanding working conditions. In addition, while ED patient volume continues to increase, patient boarding decreases the amount of available treatment spaces (18). This stressful environment is exacerbated by hospitals reducing nursing staff to meet productivity goals, causing some EDs to require mandatory overtime to fill gaps. When nurses must work beyond their shift, at times over 12 hours, patient safety is impacted as fatigue makes nurses more prone to errors(19, 20).Results of an international study showed that nurses are most likely to leave an understaffed practice environment where safety is compromised and leadership does not support quality nursing care and shared decision-making(21).

Turnover has adverse effects on healthcare organizations and patients. It has a serious impact on care quality and patient safety and imposes direct (e.g., advertising, recruiting and training new staff) and indirect costs (e.g., low productivity of new staff and decreased morale of other staff) to healthcare organization (11, 22).

Despite, there have been abundant of studies on intention to leave, the issue seems to be relevant and still need a special attention. Many studies on intention to leave have been conducted to examine intention to leave and factors relating to intention to leave in various fields. Many researchers have attempted to answer the questions of what really determines employees' intention to leave by investigating possible antecedents of employees' intention to leave. Turnover represents a major problem for both the nursing profession and healthcare providers with respect to the ability to care for patients, quality of care provided, loss of continuity of care, loss of skills and local knowledge, increased length of stay, and financial costs of replacement. (23). Equally, studies have shown the considerable potential cost savings where health service managers implement effective strategies to reduce nurse turnover (24).

Turnover is a major problem worldwide especially in developing countries, particularly in Africa. It is very detrimental and costly for the organization, both voluntary and involuntary. Managers and researchers consider turnover as a problem because of costs associated with it and difficulties that organizations face in the recruitment and retention of proficient employees. So, prospective antecedents of turnover are very important to diminish the problem (25, 26).
Understanding more about the interrelationships between individual factors, organizational factors, environmental factors and job satisfaction with turnover intent can be used by nurse administrators and nurse mangers to develop and institute practices designed to increase job satisfaction thus retain nurses (27).

In Ethiopia, direct evidence on nurses' turnover intentions is limited to three studies of small, scattered geographic areas (East Gojam zone of Amhara region, Sidama zone of SNNP and referral hospitals ofAmhara region). While there is some overlap in their findings, there is also considerable disagreement, in part, because they employed different sample designs and data collection instruments with different variables and operational definitions of key concepts. However theyfocused on general nurses' turnover intention they indicated high turnover intention among nurses' working in emergency departments which needs further studies separately which initiates to this study.

Thus there is a great need to conduct organized study on nurses' turnover intention among nurses working in ED whom turnover intention is expected higher due to the department's nature, job stress due to over crowdedness and workload. Therefore this study will fill this gab and provide information concerning factors affecting turnover intention among nurses working in Emergency Departments of selected governmental hospitals in Addis Ababa, Ethiopia.

1.3. Significance of the study

There are few published research papers regarding magnitude and factors associated with nurses‟ turnover intention in Ethiopia and hence little are known about the topic. The findings of this study will provide useful information regarding the magnitude and factors associated with nurses' working in ED turnover intention within the study period. In addition, the result of this specific study will serve as base line information and identify research gaps for further researchers.

CHAPTER TWO

2. LITERATURE REVIEW

2.1. Magnitude of nurses' turnover intention

The magnitude of nurses' turnover intention varies across studies. A cross-sectional quantitative study conducted among registered nurses at 10 hospitals throughout the Republic of Ireland showed almost 60% of nurses expressed an intent to leave their current post (28).

Similarly in another national study from the same country intent to leave has been demonstrated as the single most important predictor of turnover; among registered nurses surveyed as to their career intentions, 24% indicated that they were actively seeking work or a change of employment. The majority of nurses (83%) who expressed intent to leave were planning to leave permanent fulltime or permanent job-sharing positions. Whereas 43% of the sample had worked in their current position for three or more years which suggests that many senior experienced nurses were planning to leave the service. Furthermore, this study suggested that almost 30% more permanent staff than those who left during two years prior to the study were planning to leave their jobs while only 18% of those who plan to leave were from critical care areas (24).

The study findings in UK revealed that 56% of the overall study subjects indicated that they had considered leaving the nursing profession has implications for the future of nursing. When a staff member leaves an organization, the knowledge, skill and experience that the person has brought to, and gained at, the organization is lost (29).

In Pennsylvania, 43% of nurses who reported high levels of burnout and dissatisfaction with their job intended to leave their job within 12 months(30). In a study of intensive care nurses 60% of respondents with severe levels of burnout reported thinking about changing to another profession. Increased workload has been shown to have a negative impact on job satisfaction and burnout(31).

According to study conducted to examine the hospital nurses staffing levels in relation to job dissatisfaction and burnout in U.S.A., key factors that contribute to nurse retention, each

additional patient per nurse is associated with a 23% increase in burnout and a 15% increase in job dissatisfaction (30).

National cross-sectional study in Lebanon showed that 32.5% of the nurses reported an intent to stay in their current job whereas 67.5% reported an intention to leave within the next 1 to 3 years(32).A study conducted in Saudi Arabia using the anticipated turnover scale showed that, 40.4% of the respondent nurses indicated that they intended to leave their current employment(8).

However in Egypt study findings showed that only 18.4 % of studied nurses had the intention to leave their organization, while the majority of studied nurse had the desire to stay in their organization (33). In contrast study from rural South Africa showed 51.1% of the respondents had an intent to turnover within the next 2 years (34).

A study conducted in Sidama Zone to assess factors influencing job satisfaction and anticipated turnover among nurses in public health facilities showed that 50% of them responded their readiness to leave the organization or the current work in the coming one year (14). Nevertheless, according to study in east Gondar Zone of Amhara region, Ethiopia 59.4% of respondents indicating a turnover intention from their current health care institution(15).

Study conducted in different countries like japan (44.3%), republic of Ireland (60%)(36), Lebanon (67.5%)(37), Egypt (18.4%)(38), south and western Ethiopia 50% and 59.4% respectively(39) and east Gojam (59%)(40) of nurses and professionals had been intention to leave the organization.

2.3. Factors associated with nurses' turnover intention

2.3.1. Socio demographic factors

Turnover intention seems to be affected by a number of variables. Several studies examined the effect of demographic factors such as age, gender, marital status, educational level and years of nursing experience on nurses' intention to leave their organizations. Demographic factors are unique to each individual appear to impact on Nurses' Turn over intention (35).

The job-related and personal factors of gender, age, marital status and the number of hours worked per week were significantly ($p < .05$) associated with burnout (41). Study findings relating individual factors to nurse turnover have been fairly consistent over time. An inverse relationship between age and turnover intention is reported (12, 34).

As the survey result of five major hospitals in Calgary, Canada, showed that age and education have a negative effect on turnover intention. Length of service has a significant negative effect on turnover intention (42). In another study conducted in U.S.A female registered nurses were more likely to have higher intention of stay in their present position. Nurses who had been registered nurses longer and who had been in their current positions longer were more likely to report intention to stay their current positions(43).

In contrast, a Chinese study conducted in Central China at two teaching hospitals reported there were no statistically significant relationships noted between the self-reported turnover intention and the demographic variables of age, number of years worked in nursing, number of years worked in the current job, and level of education(44).

In Saudi Arabia study showed that younger nurses were more likely to indicate turnover intentioncompared to older nurses. Male respondents had a higher intention to leave their current employment.Nurses who have never married were more likely to indicate turnover intention(8).

A similar study in South Africa reported that turnover intent was significantly and inversely correlated with age, years of nursing and tenure, and statistically and significantly positively associated with education, suggesting that younger and higher educated nurses were more likely to consider turnover(34).

Study done to determine Factors Affecting Turnover Intention among Nurses in Ethiopia identified three characteristics that weresignificantly associated with nurses' intentions to leave the job: being younger than 30 years old, holding a bachelor's degree and having two to five years of work experience. Accordingly, Holding a university degree rather than a diploma (OR=2.246, $p<0.01$), having worked fewer years in the public health system (OR=0.948, 95%

CI=0.914, 0.982; p<0.01) and rating the importance of limited opportunities for professional development more highly (OR=1.398 ; p<0.02) (17).

Survey resultsin Sidama Zone, SNNP, Ethiopia,public health facilities indicated that nurses' intention to leave the organization was not significantly associated with variables like age, sex, educational qualification, working experience, while intention to leave the organization was significantly associated with marital status (*P*< 0.05), autonomy (*P*< 0.05), working environment and group cohesion (*P*<0.05), and by the level of professional training available in the institutions (*P*< 0.05)(14).

Study of East Gondar Zone, Amhara region, Ethiopia showed family arrangement is significantly associated with nurses' turnover intention (P-0.009, 95% C.I. 1.199-3.499). Nurses live far from their family/husband/wife had 2.05 times more turnover intention as compared to nurses live with their family/husband/wife. From the nurses who had turnover intent 24.2% of them indicated that due to family arrangement(15).

2.3.2. Job satisfaction factors

Past studies showed that many work-related factors were instrumental in nurses' employment decisions. One important factor was job satisfaction. It was emphasized by many studies as key determinant of turnover process (34, 35).

As the definition of job satisfaction is the end feeling of a person after performing a task. To the extent that a person's job fulfills his dominant needs and is consistent with his expectations and values, the job will be satisfying. The level of job satisfaction seems to have some relation with various aspects of work behaviors such as accidents, absenteeism, turnover and productivity(3).
Jobsatisfaction is complex, relating as it does to both the more general human experience of a range of determinants (work environment, work load, management style, level of remuneration etc.) and also individual (how the individual her/his self-experiences a range of different determinants) (45).

Pay and benefits, as job satisfaction has frequently been reported as the most common predictor for someone who decided to stay or leave. A Chinese study,for instance, showed workplace and

job satisfaction: Pay and benefits were significant risk factors for intention to leave(12). The study from Iranian study shows that job satisfaction and commitment were significantly associated with employees' intention to leave (46). In addition, the result of the survey in Italy revealed that a low job satisfaction (JS) for interaction with physicians and nurses, seniority ≥20 years, and working in Emergency are related to higher intention to leave the hospital (47).

A study conducted in Taiwan using a self-reported questionnaire to measure nurses' intention to leave, job satisfaction, and perception of quality of care in acute hospitals (medical centers or district hospitals) reported factors that attributed to intention to leave as unhappiness with pay, shift work, higher number of reported incidents, and many changes that occurred in the practice environment overtime(48).

In various clinical settings, nurses experience many setbacks and difficulties, and the presence of colleagues who support one another in times of hardship and challenges may be very important. For example, a Japanese study reported poor cooperation among nurses was a factor promoting turnover; the number of nurses with turnover intention was significantly higher for those with low satisfaction with salary, low satisfaction with welfare, poor implementation of fair salary raise (49).

From the survey result within the various turnover-related aspects, the nursing work environment has gathered special attention as a significant factor related to turnover intention(14, 34). Moreover, nurses with higher average patient loads were more likely to report intentions to leave their current position. Nurses who responded that they had a lot of control or complete control over their practice were more likely to report a higher intent to stay in their current position (50).

As the survey result from South Africa reported job satisfaction associated with unit tenure, professional rank and turnover intent. Turnover intent more likely in younger and higher educated. Satisfaction with supervision explained turnover intent when controlling for age, education, years of nursing and tenure(34).

Study findings from East Gondar Zone, Amhara region, Ethiopia, indicated that job satisfaction is significantly associated with nurses' turnover intention (15).

2.3.3. Nurses' organizational commitment

As the definition of organizational commitment defined as the degree of attachment that nurses have towards their employer (35). In other words, Organizational commitment is said to be an important variable in the discussion of intention to leave since it is a popular belief that the more committed the employee is, the more likely he or she will stay loyal to the organization. In other words, it is less likely that he or she will leave for another job or organization(51).

A study conducted to investigate the relationship between organizational commitment and intention to leave among nurses in Malaysian public hospitals supported that organizational commitment was significantly and negatively related to intention to leave(51).

According to study in east Gondar Zone of Amhara region, Ethiopia: 52.4% of the respondents had intention to leave the position due to poor payment,49.5% due to poor training opportunities, 37.9% due to poor organizational commitment, 37.1%due to unfair system in the organization and 36.8% due to not enough job satisfaction; Organizational commitment was found to significantly association with nurses' turnover intention (P-0.026, 95% C.I. 1.069-2.839)(15).

Study from Sidama Zone Public Health facilities, SNNP, Ethiopia, revealed that 84.3%of respondents had workmate who leaves the organization,46.7% of them pointed out to the problem of low salary for their departure from the organization and 22.3% lack of opportunity for further education (14).However there is no published study among nurses working in emergency departments in Addis Ababa hospitals this study will identify factors affecting turnover intention among nurses working in ED of selected governmental hospitals in Addis Ababa, Ethiopia.

CHAPTER THREE

3. OBJECTIVES

3.1. General objective

The general objective of this study is to assess the magnitude and factors that affect turnover intention among nurses working in emergency departments of selected governmental hospitals in Addis Ababa, Ethiopia, 2018.

3.2. Specific objectives

- ✓ To determine magnitude of turnover intention among nurses working in emergency departments of selected governmental hospitals in Addis Ababa, Ethiopia, 2018.
- ✓ To assess the determinant factors affecting nurses 'turnover intention among nurses working in emergency departments of selected governmental hospitals in Addis Ababa, Ethiopia, 2018.

CHAPTER FOUR

4. METHODS AND MATERIALS

4.1. Study Area and period

The study was conducted in Addis Ababa the capital city of Ethiopia, with an estimated population of 3.6 million in the city proper and a metro population of more than 4.6 million(52). It has an estimated area of 530 Km^2, with altitudes ranging from 2200 to 3000 meter above sea level, average temperature of 22.8°C and average rainfall of 1,180.4 millimeters. Addis Ababa has 49 hospitals (13 public and 28 NGO and private), 29 health centers, 122 health stations, 37 health posts and 382 modern private clinics (53).

There are 13 governmental hospitals among which Amanuel Specialized Psychiatric Hospital and Mahatma Ghandi Memorial Hospital provide specific service that is Psychiatric and Obstetrics and Gynecology cases respectively. The rest eleven hospitals provide general emergency service in their emergency department however Tikur Anbessa Specialized Teaching Hospital, ALERT and AaBET Hospitals provide general emergency services and in addition known to be Tertiary Level Trauma centers in the city as well as in the country. They are providing Trauma services not only for Addis Ababa dwellers but also for the whole country by receiving referral cases from respective regions and city administrations. Thus the study will be conducted in three selected governmental hospitals in Addis Ababa Ethiopia namely: Tikur Anbesa, Menilik II and St.Paulos Hospitals. Those hospitals are among the famous hospitals in Ethiopia and provide services for large number of population in relation to others. The study was conducted from October 2017 to June 2018.

4.2. Study design

An institutional based cross-sectional study was used to assess the magnitude and factors that contribute to nurses' turnover among nurses working in emergency departments of selected public hospitals in Addis Ababa, Ethiopia.

4.3. Population

4.3.1. Sources population

The source of population for this study was all staff nurses working in the selected governmental hospitals in Addis Ababa.

4.3.2. Study population

The study population for this study was all nurses working in emergency departments of selected governmental hospitals in Addis Ababa that fulfill the criteria and willing to participate in the study.

4.4. Inclusion and exclusion criteria

4.4.1. Inclusion criteria

All nurses who were the employee of the selected hospitals; who stayed/worked in the same hospital for more than six months and working in emergency department at the time of data collection.

4.4.2. Exclusion Criteria

Nurses who work in emergency departments of the selected hospitals less than six months; who were annual leave; sick leave and maternal leave during the study period will be excluded from the study.

4.5. Sample Size Determination

Since the number of study population is small, all nurses from those emergency departments of selected public hospitals were taken as the study subjects.

4.6. Sampling Technique and Procedure

From a total of 13 hospitals, three hospitals were selected purposely for this study based on high patient flow and staffs compared to others. Namely: Tikur Anbesa, Menilik II and St. Paulo's Hospitals. To select study subjects convenience sampling technique was used with considering the inclusion and exclusion criteria**.**

4.7. Study Variables

4.7.1. Dependent variable

- Nurses' turnover intention

4.7.2. Independent variables

- ✓ Socio demographic variables
  - sex
  - Age
  - Marital status
  - Educational status
  - Work experience
  - Income level
  - Dependent family
- ✓ Job satisfaction factors
  - Autonomy
  - Professional opportunities
  - Scheduling
  - Support
  - Enjoyment
  - Payment
  - Organizational commitment

4.8. Operational definitions, Measurements and Definitions of Terms

Turnover intention: Is the individual's perceived probability of permanently leaving the employing organization in the near future. This was measured by using six items each scored in 5 point Likert scale with 1 denoting strongly disagree and 5 denoting strongly agree. When individual study participants scored above overall mean, they were considered as having intention to leave the hospital

Intention/Anticipation to Leave a Job: The intent or predisposition to leave the organization where one is presently employed or employee's plan of intention to quit the present job and look forward to find another job in the near future. It was measured using two items with assessment

of attitudes on current job and reason for leaving organization for workmate in the past. The question scored from three point Likert scales in which 1 denotes agreement and 3 denotes disagreement. When individual study participants scored below overall mean.

Overall Nurse Job Satisfaction: Nurses' Job satisfaction is positive or pleasurable emotional state resulting from the appraisal of one's job or job experience. Job satisfaction of nurse by determinant factors was measured using the questionnaire adopted and adapted by principal investigator with a 32-item scale. This instrument has 5-point Likert scale in which 5 denotes very satisfied and 1 denotes very dissatisfied. When the total score for job satisfaction subscale is greater than computed mean, will be considered they are satisfied on overall aspect of their work, and based on value of computed mean of mean that was computed from individual response of study participants.

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

Intention/Anticipation to Leave Emergency Department: The intent or predisposition to leave the department as a result of to leave the organization or simply to work in other departments within the same hospital where one is presently employed or employee's plan of intention to quit the present job and look forward to find another job in the near future. It was measured using two items with assessment of attitudes on current job and reason for leaving organization of workmate in the past. The question scored from three point Likert scales in which 1 denotes agreement and 3 denotes disagreement. When individual study participants scored below overall mean, they were considered as having intention to leave the institution.

Autonomy: Job characteristics that enable nurses to make individual decisions about daily practice and also it feeling of nurse about independence in the work. Autonomy was measured by using four items with five-point Likert scale in which 1 denotes very dissatisfied and 5 denotes very satisfied. Respondents considered autonomous and satisfied about I when they score above computed mean for the subscale.

Affective commitment: The nurse's attitudes regarding the alignment of personal and organizational goals. This was measured by using three items each scored in 5-point Likert scale with 1 denoting strongly disagree and 5 denoting strongly agree. It is considered that staff nurses had high affective commitment when they scored above computed mean score of the sub scale.

Continuance commitment: The nurse's desire to stay with organization in light of costs associated with leaving (i.e., seniority, pension plans, etc.). This was measured by using three items each scored in 5-point Likert scale with 1 denoting strongly disagree and 5 denoting strongly agree. It is considered that staff nurses had high continuance commitment when they scored above computed mean score of the sub scale.

Normative commitment: The nurse's decision to stay with an organization because he or she feels obligated. This was measured by using three items each scored in 5-point Likert scale with 1 denoting strongly disagree and 5 denoting strongly agree. It is considered that staff nurses had high normative commitment when they scored above average mean scores of the sub scale.

Professional opportunities: Opportunities for advancement of nursing career given by the hospital. This was measured by using four items each scored in 5-point Likert scale with 1 denoting very dissatisfied and 5 denoting very satisfied. It is considered that staff nurses were satisfied by the level of professional opportunities in the organization when they scored above computed mean score of the sub scale.

Scheduling: The amount of time available to get through work, patient care and communicate with administration and patients. This was measured by using six items each scored in 5-point Likert scale with 1 denoting very dissatisfied and 5 denoting very satisfied. It is considered that staff nurses were satisfied by the level of scheduling in the organization when respondents scored above their computed mean.

Support: The amount and quality of help and guidance received from supervisor and/or colleagues in the job. This was measured by using seven items each scored in 5-point Likert scale with 1 denoting very dissatisfied and 5 denoting very satisfied. It is considered that staff nurses were satisfied by the level of support in the organization when respondents scored above their computed mean

4.9. Data collection instruments

Data was collected using structured self-administered questionnaires which developed based on study objectives after literature review. Pretest study was conducted to test the structured questionnaires at zewditu memorial hospital hospitals in Addis Ababa city, other than target hospitals; based on findings of the pretest necessary amendment was made and finalized version was used for data collection

4.10. Data Quality Assurance

At the end of each day of data collection, data was checked for completeness, accuracy and consistency. Principal investigator and respective supervisors was conduct onsite close supervisions to clarify any ambiguity and misunderstanding regarding data collection procedures and would had been communication with principal investigator accordingly. Data was manually checked and cleaned before importing to computer for entry and analysis.

4.11. Data Analysis and interpretation

The collected data was coded, entered, and cleaned with an appropriate descriptive statistical analysis. Statistical Product and Service Solution (SPSS) version-23 statistical software was used for entering and analysis purpose. Descriptive statistics such as frequencies and percentages were used to describe the sample characteristics and responses to the questionnaire items. Bivariate and multivariate logistic regression was fitted to identify factors associated with nurse‟ turnover intention. All explanatory variables with p-value of $\leq$ 0.2 from bivariate logistic regression model was fitted in to the multivariate logistic regression model to control the possible effect of confoundersand Those significant at bivariate level were entered to Multivariate regression to control confounding. In descriptive statistics tables, graphs mean and frequency were used to present the information. Significance was obtained at Odds ratio with 95% CI and $p< 0.05$.

4.12. Ethical Consideration

Ethical clearance was obtained from Addis Ababa Public Health Research and Emergency Management Core Process, Addis Ababa health beauro and St.Paulos hospital. The data collection was done after having their consent to participate in the study after explaining the purpose of the study. Respondents was informed that they have a right to decline the questionnaire and all the information provided was handled in a confidential manner and the names provided in the finding part is changed so as to keep the privacy of the respondents.

4.13. Dissemination of the results

After presentation to Addis Ababa University, School of Medicine, department of emergency medicine, the result of the study will be disseminated to Addis Ababa Public Health Research and Emergency Management Core Process and the hospitals where the study is conducted, MOH and Addis Ababa University school of emergency medicine. Hard and soft copy will be reserved

in the library of Addis Ababa University and the result of the thesis will be submitted to peer review journal for possible publication.

CHAPTER FIVE

5. RESULTS

5.1. Socio demographic characteristics

Among 112 nurses who were working in three selected public hospitals, 102 were involved making a response rate of 91.1%. The socio demographic data showed that 60(58.8%) of the participants were females, 88(86.3%) were unmarried and 84(82.4%) of the respondents had bachelor degree in nursing. The mean (+ SD) age was 28.73(+3.640) years. Among those study participants 51(50%) were working in TASH adult emergency department, 19(18.6%) in minilick II referral hospital, and the other 32(31.4%) were working from St. Paul's. From the total study participants 49(48%) of them have 2 - 4 years of work experience and 76(74.5%) respondents had dependent family members living with them. The mean monthly income of respondents was 4252.26.2 (±794.921SD) Ethiopian Birr (ETB).Majority of the respondents 66(64.7%) had seeking change of job and 14 (13.7%) of respondents had dependent family living with them (Table 1).

Table 1: Socio-demographic characteristics of nurses in three selected governmental hospitals in Addis Ababa, Ethiopia, June, 2018 (n=102).

Variables	Category	Frequency(n=102)	Percentage (%)
Sex	Male	42	41.2
	Female	60	58.8
	Total	102	100
Marital status	Married	14	13.7
	Unmarried	88	86.3
	Total	102	100
Age	<25 years	17	16.7
	25-30 years	66	64.7
	>30 years	19	18.6
	Total	102	100
Monthly income	<3145	15	14.7
	3145-3911	18	17.6
	3912-4725	46	45.1
	>4725	23	22.5
Educational status	Diploma	6	5.9
	BSC	84	82.4
	MSC	12	11.8
	Total	102	100
Had independent family	Yes	76	74.5
	No	26	22.5
	Total	102	100
Work experience in ED	<2	51	50
	2-4	44	43.1
	5-9	7	6.9
Overall exprience	<2	6	5.9
	2-4	49	48
	5-9	42	41.2
	>10	5	4.9

5.2. Job satisfaction, nurses' organizational commitment and turnover intention

Turnover intention to leave among the nurses: The overall turnover intention to leave among the respondents was46 (45.1%).

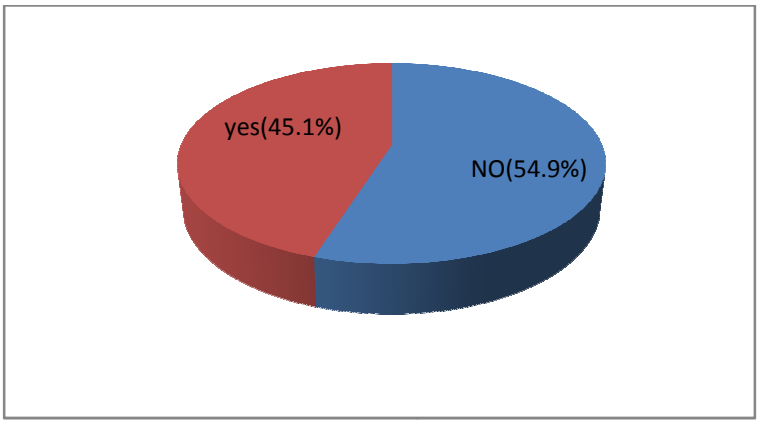

Figure 1: Turnover intention to leave among nurses in three selected hospitals, Addis Ababa, Ethiopia, 2018.

In this finding job satisfaction factors in table 2 shown that, 85(83.3%) of the respondents were unsatisfied with work place condition, 97(95.1%) by work load, and 100(98%) by salary level. (Table: 2).

Table 2: Job satisfaction factors and organizational factors by different dimensions among nurses in three selected governmental hospital, Addis Ababa, Ethiopia, 2018 (n=102)

Variables	category	Frequency	Percent (%)
Work place condition	unsatisfied	85	83.3
	satisfied	17	16.7
Work load	unsatisfied	97	95.1
	satisfied	5	4.9
Nature of work	unsatisfied	76	74.5
	satisfied	26	25.5
Work hour	unsatisfied	83	81.4
	satisfied	19	18.6
Organizational	low	87	85.3
commitment	high	15	14.7
Work environment	unsatisfied	94	92.2
	satisfied	8	7.8
Salary level	unsatisfied	100	98
	satisfied	2	2
Co-worker relation	low	61	59.8
	high	41	40.2
Payment per time	unsatisfied	96	94.1
	satisfied	6	5.9
Work mate leave	yes	66	64.7
hospital	No	36	35.3
Work mate leave ED	yes	74	72.5
	No	28	27.5

From the total respondents 93.1%of participants had to leave the hospital was reason of work mate leaving emergency departments.

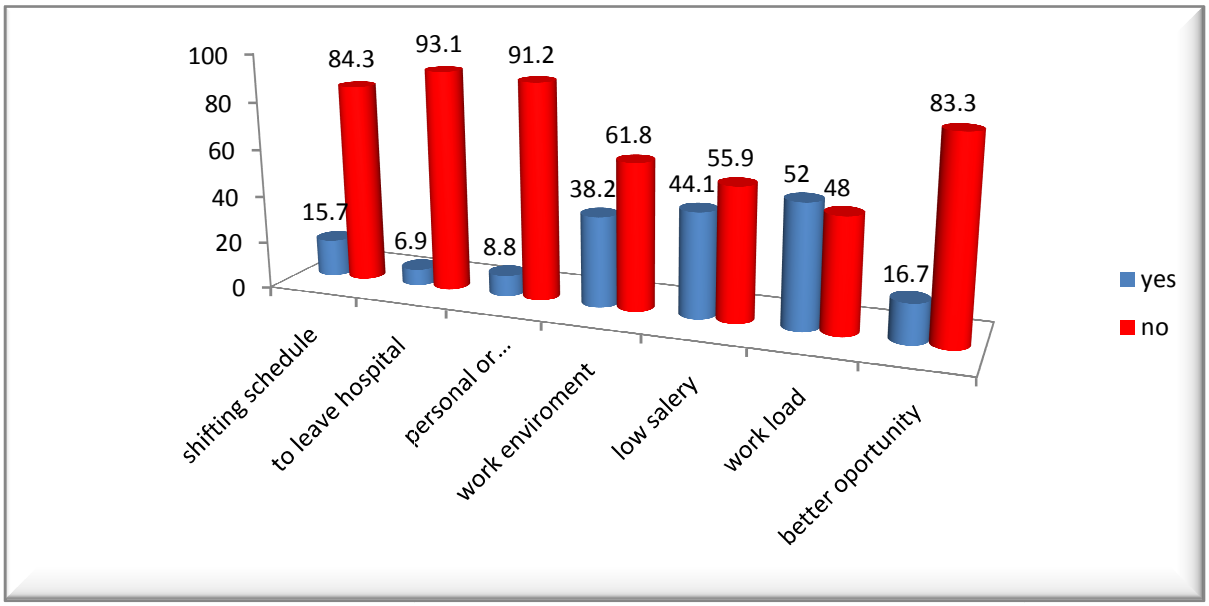

Figure 2: Reason of work mate leaving emergency departments in three selected hospitals, Addis Ababa, Ethiopia, 2018

The findings of job satisfaction in table 3 shown that, 86(84.3%) of the respondents were unsatisfied with autonomy, 54(52.9%) by scheduling, 60(58.8%) by support. On the other hand, 53(52%) of the respondents were satisfied with enjoyment and 55(53.9%) high continuance (Table: 3).

Table 3: Job satisfaction and organizational commitment by different dimensions among nurses in three selected hospitals, Addis Ababa, Ethiopia, 2018 (n=102)

Variable	category	Frequency	Percent %)
Intention to leave planning	Yes	61	59.8
	No	41	40.2
	Total	102	100
Autonomy	unsatisfied	86	84.3
	satisfied	16	15.7
Professional opportunity	unsatisfied	59	57.8
	Satisfied	43	42.2
Scheduling	unsatisfied	54	52.9
	Satisfied	48	47.1
support	unsatisfied	60	58.8
	Satisfied	42	41.2
enjoyment	unsatisfied	49	48
	Satisfied	53	52
Affective commitment	Low	61	59.8
	High	41	40.2
Normative commitment	Low	54	52.9
	High	48	47.1
Continuance commitment	Low	47	46.1
	High	55	53.9

Regarding to overall feeling of nurses with regard to nursing profession and working issues 67.6% of job security were not secure.

Figure 3: Percentage distribution of overall feeling of nurses with regard to nursing profession and working issues, Addis Ababa,Ethiopia,2018(n=102).

5.3. Factors associated with turnover intention

In the bivariate logistic regression analysis; monthly income, having dependent family members, educational status, Autonomy, professional opportunity and affective commitment showed statistical significance ($p \leq 0.05$). However, in bivariate analyses age, marital status, work experience and co-worker relationship were taken as significant associated factors of nurses‟ turnover intention at p-value ≤ 0.2 in order to control co founding factors.

Educational status was significantly associated with intent to leave. Being diploma nurses were more likely to leave than those who were masters [AOR=10.00(1.939, 97.500)].Having dependent family was also significant factors [AOR=2.861(1.078, 7.595)].

Table 4: Socio-demographic Factors associated with turnover intention among nurses in in three selected governmental hospitals in Addis Ababa, Ethiopia, 2018 (n=102).

variables	Category	turnover intention(n=102)		COR(95%CI	p-value
		Yes	No		
Sex	Male	18(42.9)	24(57.1)	0.857(0.387,1.897)	0.704
	Female	28(16.7)	32(53.3)	1	
Age	<25years	9(52.9)	8(47.1)	3.150(0.780,12.727)	0.107*
	25-30 years	32(48.5)	34(51.5)	2.635(0.852,8.154)	0.093*
	>30 years	5(26.3)	14(73.7)	1	
Marital status	Unmarried	42(47.7)	46(52.3)	2.283(0.665,7.830)	0.189*
	Married	4(28.6)	10(71.4)	1	

Educational status	Diploma	4(66.7)	2(33.3)	10.00(1.939,97.500)	0.048**
	BSC	40(47.6)	44(52.4)	4.545(0.939,22.011)	0.06*
	Master	2(16.7)	10(83.3)	1	
Work experience	<2 years	4(66.6)	2(33.3)	8(0.500,127.900)	0.141*
	2-4 years	25(92.6)	2(7.4)	4.167(0.434,40.000)	0.216
	5-9 years	16(38.1)	26(61.9)	2.462(0.252,24.020)	0.438
	>10	1(20)	4(80)	1	
Monthly income	<3145	9(60)	6(40)	4.250(1.058,17.070)	0.041**
	3145-3911	8(44.4)	10(55.6)	2.267(0.608,8.447)	0.223
	3912-4727	23(50)	23(50)	2.833(0.947,8.474)	0.062*
	>4727	6(26.1)	17(73.9)	1	
Dependent family	Yes	39(51.3)	37(48.7)	2.861(1.078,7.595)	0.035**
	No	7(26.9)	19(73.1)	1	

Table 5: Job satisfaction and organizational Factors associated with turnover intention in bivariate analysis among nurses in in three selected governmental hospitals in Addis Ababa, Ethiopia, 2018 (n=102)

Variables	Category	Intention turnover(n=102)		COR(95%CI)	p-value
		Yes	No		
Work place condition	Unsatisfied	36(42.4)	49(57.6)	0.514(0.179,1.481)	0.218
	Satisfied	10(58.8)	7(41.2)	1	
Work load	Unsatisfied	45(46.4)	52(53.6)	3.462(0.373,32.106)	0.275
	Satisfied	1(20)	4(80)	1	
Organizational commitment	Low	39(44.8)	48(55.2)	0.929(0.309,2.786)	0.895
	High	7(46.7)	8(53.3)	1	
Work environment	Unsatisfied	43(45.7)	51(54.3)	1.405(0.317,6.221)	0.654
	Satisfied	3(37.5)	5(62.5)	1	

Co-worker	Low	24(39.3)	37(60.7)	0.560(0.252,1.247)	0.156*
relation ship	High	22(63.7)	19(46.3)	1	
Autonomy	Unsatisfied	34(39.5)	52(60.5)	0.218(0.065,0.732)	0.014**
	Satisfied	12(75)	4(25)	1	
Professional	Unsatisfied	19(32.2)	40(57.8)	0.281(0.123,0.642)	0.003**
opportunity	Satisfied	27(62.8)	16(37.2)	1	
Scheduling	Unsatisfied	23(42.6)	31(57.4)	0.806(0.369,1,763)	0.590
	Satisfied	23(47.9)	25(52.1)	1	
Support	Unsatisfied	27(45)	33(55)	0.990(0.448,2.188)	0.981
	Satisfied	19(45.2)	23(57.8)	1	
Affective	Low	33(54.1)	28(45.9)	2.538(1.109,5.812)	0.028**
commitment	High	13(31.7)	28(68.2)	1	
Normative	Low	27(50)	27(50)	1.526(0.695,3.353)	0.292
commitment	High	19(39.6)	29(60.4)	1	
Countenance	Low	21(44.7)	26(55.3)	0.969(0.443,2.120)	0.938
commitment	High	25(45.5)	30(54.5)	1	

**=significant at P≤0.05, *=p≤0.2, COR=crude odd ratio

In the multivariate analysis; educational status, monthly income and autonomy were yielded as significantly associated factors of nurses‟ turnover intention.

Educational status was significantly associated with intent to leave. Being diploma was 4.7 times more likely to leave than those who were masters [AOR=4.700 (95% CI: 1.033-50.772)]. Another significant factor was monthly income of nurses. Nurses who had monthly income less than 3145 ETB were 6.05 times more likely to report turnover intention than who had monthly income greater than 4725 [AOR=6.05(95% CI: 1.056-34.641)]. With respect to job satisfaction, Nurses who scored as unsatisfied on autonomy were 0.2 times more likely to report they intended to leave than nurses who scored as satisfied [AOR=0.191 (95% CI: 0.040,0.908))].

Table 6:Factors associated with turnover intention in multivariate analysis among nurses in in three selected governmental hospitals in Addis Ababa, Ethiopia, 2018 (n=102).

Variable	Category	Intention leave(n=102)		AOR(95% CI)	P-value
		Yes	No		
Age in years	<25	9(52.9)	8(47.1)	0.343(0.042,2.815)	0.319
	25-30	32(48.5)	34(51.5)	0.759(0.164,3.501)	0.723
	>30	5(26.3)	14(73.7)	1	
Marital status	Unmarried	42(47.7)	46(52.3)	6.364(0.969,41.778)	0.054
	Married	4(28.6)	10(71.4)	1	
Educational status	Diploma	4(66.7)	2(73.3)	4.700(1.033,50.772)	0.048*
	BSC	40(90.9)	4(9.1)	5.080(0.585,44.111)	0.141
	MSC	2(16.7)	10(83.3)		
Work experience	<2	4(66.7)	2(33.3)	31.498(0.504,1968.88)	0.102
	2-4	25(92.6)	2(7.4)	5.396(0.265,109.725)	0.273
	5-9	16(39.1)	26(61.9)	3.362(0.175,64.689)	0.422
	>10	1(20)	4(80)	1	
Monthly income	<3145	9(60)	6(40)	6.049(1.056,34.641)	0.043*
	3145-3911	8(44.4)	10(55.6)	1.327(0.288,6.114)	0.717
	3912-4725	23(50)	23(50)	1.749(0.436,7.018)	0.430
	>4725	6(26.1)	17(73.9)	1	
Dependent family	Yes	39(51.3)	37(48.7)	2.095(0.575,7.635)	0.262
	No	7(26.9)	19(73.1)		
Co-worker relation ship	Low	29(43.9)	37(56.1)	0.753(0.260,2.181)	0.602
	High	22(53.7)	19(46.3)	1	
autonomy	Unsatisfied	34(39.5)	52(60.5)	0.191(0.040,0.908)	0.037*
	Satisfied	12(75)	4(25)	1	
Professional opportunity	Unsatisfied	19(32.2)	40(67.8)	0.514(0.171,1.541)	0.235
	Satisfied	27(62.8)	16(37.2)	1	
Affective commitment	Low	33(54.1)	28(45.9)	2.322(0.737,7.313)	0.150
	High	13(31.7)	28(68.3)	1	

CHAPTER SIX

6. DISCUSSION

This study aimed at examining the associated factors of turnover intention among nurses working in emergency department. This cross-sectional study revealed that 46(45.1%) of studied nurses had the intention to leave their organization. The finding is higher than the findings in Saudi Arabia (40.4%) (54), Japan 44.3%(55)and Egypt (18.4%)(38). But it is lower than studies in Republic of Ireland (60%)(36), Lebanon (67.5%) (37), Sidama zone public health facilities (50%) (39), South Africa (51.1%)(56)And east Gojam, Amhara region, in Ethiopia (59.4%)(40),southern and western Ethiopia, which found Turnover intentions of 50% and 59.4%, respectively (39). This discrepancy could be the fact due to income, cultural, socio demographic differences, differences in work experience, study time gap and study setting difference, study period and infrastructure in the health institutions may affect the rate of turnover intention. The study in east Gojam, Amhara region in Ethiopia was conducted both on hospital and health center nurses. For example the study in Sidama zone included nurses both from hospital and health centers.

In this study With respect to the socio-demographic characteristics, educational status and monthly income were associated with nurses‟ intention to leave their organization. Holding Diploma nurses were more than four times more likely have intention to leave their organization than master nurses. This finding is consistent with studies done in Ethiopia educational status was significantly associated with turnover intention (17).

Another strong significant predictor of turnover intention in the hospital is monthly income. Nurses who have less than 3145 ETB monthly were nearly six times more likely they have intention to leave the hospital (AOR=6.049,95% CI:(1.056,34.641). This finding is consistent with previous studies done in Ethiopia, Addis Ababa Tikur anibesa specialized hospitals(57). Socio-demographic characteristic age and work experience were not associated with nurse's intention to leave the hospital. This finding is in line with similar study done in Sidama zone public health facilities and also the study done in southern Ethiopia (39), no significant difference in turnover intentions by gender was found.

Notably, significantly lower (49%) turnover intentions among nurses who were unsatisfied in professional opportunity than satisfied were found in the Bivariate analysis, although this association did not remain significant in the multivariate analysis.

In this study autonomy was significantly associated with nurses‟ turnover intention. Nurses who were unsatisfied with autonomy were nearly 80% less likely to leave the hospital than satisfied. %(AOR=0.191, 95%CI (0.040, 0.908).This finding is consistent with researches done in that job satisfaction explained as a predictor of intent to leave/stay (58).

In this study, age, marital status, work experience, having dependent family living with, professional opportunity, affective commitment and co-worker relationship were not significantly associated with nurses‟ turnover intention in multi variate analysis. This finding is inconsistent with previous studies done in Addis Ababa, Ethiopia(57). The possible difference might be sample size and study setup.

CHAPTER SEVEN

7. STRENGTH AND LIMITATION

7.1. Strength of the study

The instrument was pretested and corrected before data collection.

7.2. Limitation of the study

Even though, the study covered all nurses working in three governmental hospitals it has the following limitations: First, the cross-sectional nature of the study design does not confirm definitive cause and effect relationship. Second, since self-administered questionnaires were used to collect data; the study may be subjected to response bias from each respondent.

CHAPTER EIGHT

8. CONCULISSION AND RECOMEDATION

8.1. Conclusion

This study assessed associated factors of turnover intention among nurses in three selected government hospital. Overall the following findings are identified from this study. Nearly half of the respondents had been intention to leave the organization. Educational status, monthly income and autonomy were significantly associated with nurses‟ turnover intention working in ED.

8.2. Recommendations

This finding has important implications for people concerned with nursing retention to consider important variables in nurses‟ turnover intention, as intention to leave predicts actual nurse turnover. Thus, based on the results of this study the following recommendations are forwarded.

- Ward managers should have made efforts to enhance nurses‟ independent decision making for patient care activities and shared decision over work or unit related activities.
- Organizations and professional nurses association, like Ethiopian Nurses Association (ENA) and MOH should have made efforts on role enhancement of nurses by working on knowledge and decision making capacity of nurses.
- The hospital management should consider incentives and additional income generating activities for nurses to increase their satisfaction with pay and benefits. In addition, the hospital management should pay attention to the nurses by providing better opportunities of professional training, and advancement in their profession.
- Finally, Future research also needs to explore the effects of additional variables that were not measured in the current study, which can also directly or indirectly influence nurses‟ turnover intention with the triangulation of qualitative research methods.

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10. ANNEXES

Annex I: Information Sheet

Addis Ababa University

College of health science

Department of Emergency Medicine

This Study Is Prepared To Collect Data On Turnover Intention And Associated Factors Among Nurses Working In Emergency Departments of Addis Ababa Hospitals, Questionnaire.

Good Morning/Good Afternoon!

My Name Is _____. I am here today to collect data on the Assessment of Turnover Intention and Associated Factors among Nurses Working in Emergency Departments of selected public Hospitals in Addis Ababa.

The study was being conducted by Binyam Taye from Addis Ababa University Department of Emergency Medicine, Post Graduate Program.

You are being asked to take part in this study and to respond genuinely. This questionnaire focuses on your intention to leave or to stay in this hospital and/or emergency department and factors that influence your decision. Your cooperation and willingness is greatly helpful in identifying factors related to nurses' intention to leave their organization and/or emergency department. Your name will not be written in this form and will never be used in connection with any information you tell us & this questionnaire may take a maximum of 20 to 30 minutes to complete. There is no possible risk associated with participating in this study. All information given by you will be kept strictly confidential. Your participation is voluntary and you are not obligated to answer any question you do not wish to answer. If you feel discomfort with the question, it is your right to drop it any time you want.

Annex II: Consent form

In signing this document, I am giving my consent to participate in the study entitled "Assessment of Turnover Intention and Associated Factors among Nurses Working in Emergency Departments, in Addis Ababa Hospitals".

I have been informed that the purpose of this study is to assess Turnover Intention and Associated Factors among Nurses Working in Emergency Departments of selected public Hospitals in Addis Ababa.

I have understood that participation in this study is entirely voluntarily. I have been told that my answers to the questions will not be given to anyone else and no reports of this study ever identify me in any way. I have also been informed that my participation or non-participation or my refusal to answer questions will have no effect on me.

I understood that participation in this study does not involve risks. I understood that BinyamTaye is the contact person if I have questions about the study or about my rights as a study participant.

Address of Principal investigator: Binyam Taye

Phone +251 911114479

Email: binyamtaye6@gmail.com

Do you agree to participate?Yes -------- No ----------

If yes proceed to the next page.

THANK YOU!

Annex III.Questionnaires

ADDIS ABABA UNIVERSITY

COLLEGE OF HEALTH SCIENCES

DEPARTMENT OF EMERGENCY MEDICINE

This is A Questionnaire Designed to collect necessary information for Assessment of Factors Affecting Turnover Intention among Nurses Working in Emergency Departments of Selected Governmental Hospitals in Addis Ababa, Ethiopia.

Part I. Socio –demographic

101.Sex: 1. Male 2. Female

102.Age ----------

103.Marital status

1. Single 2. Married 3.Divorced 4.Widowed

104.Educational statues

1. Diploma 2. BSc 3.Master 4.Other (specify) ----------

105.What is your Professional category?

1. General/Compressive Nurse
2. Emergency Nurse (BSc in ECCN)
3. Emergency Medicine and Critical Care Practitioner (MSc in EMCCN)
4. Other (Specify) ----------

106.How long you have worked in this hospital? ----------

107.How long you have been working in Emergency department? ----------

108.Your Over all Work experience is? ----------

109.Monthly income? ---------- ET Birr

110.Do you have dependentfamily? 1. Yes 2, No

111. Do you have any children under 18 living with you? 1. Yes 2. No

If ‘‘Yes’’, please indicate the number of children you have in the following age categories: Number

1. 0-4 years [---------]
2. 5-11 years [---------]
3. 12-18 years [---------]

112.In your household, who holds the main responsibility for child-rearing?

1. Self
2. Paid child-minder (please specify) ———
3. Spouse/partner
4. Relative
5. Not relevant
6. Other (please specify) ———

113. How many wage earners are there in your household?

1. Self only 3. Self and other (please specify) ———
2. Self and Spouse/partner 4. Other (please specify) ————

114.**Who is the main wage earner in your household?**

1. Self 2. Spouse/partner 3. Other (please specify) ———

115.How is your current work pattern? (Please tick one box)

1. Early, late or night shifts
2. Early/morning shifts only
3. Late/afternoon shifts only
4. Day shifts only (morning or afternoon)
5. 12 hour shifts (Days or Nights)
6. Permanent nights
7. Permanent day (8am-5pm on regular basisor equivalent)
8. Flexi-time
9. Other (Please specify) ----------

116.Did you work more than your contracted hours in your last full working week? (paid or unpaid overtime)?Yes No

1. Paid overtime [ ] [ ]
2. Unpaid overtime [ ] [ ]
3. If yes, how many extra hours did you work? ----------

   If no, proceed to question 118.

117.How often do you work more than your contracted hours? (Please tick one box only)

1. Every shift
2. Several times per week
3. Once per week

4. Less than once per week
5. Never
6. Other (please specify) ----------

118.Do you work in any other paid nursing employment in addition to this job?1. Yes2. No

If no, proceed to question 121.

119. If ‘‘Yes’’, what is this additional employment? (Please tick relevant one)

1. Government
2. NGO
3. Other nursing work
4. Non-nursing work: (Please specify) ———
5. Private business
6. Other (Please specify) ————

120.If your additional job is Government or NGO nursing, how many hours on average do you work in this capacity per month? ----------hrs

121.On the following linear scales, please rate your overall feeling with regard to nursing and the work issues:

1. Job Satisfaction a. As satisfied as I could be as a nurse b. Not satisfied in any way
2. Job Commitment a. As committed as I could be b. Not at all committed
3. Status with the organization a.Very high status b. Extremely low status
4. Job Security a. Very Secure b Not at allSecure

122.Are you seeking work or a change of job at the moment? 1. YES 2. NO

If YES, What kind of job are you looking for?

1. Job in same profession 2. Job in another profession 3. Other (please specify) ----------

PART II: Job satisfaction factors

No.	Job satisfaction factors	Unsatisfied	Satisfied
201	Work place condition	1	2
202	Work load	1	2
203	Nature of the work	1	2
204	Autonomy	1	2
205	Working hours	1	2

No.	Part III: Organizational factors	Measurement Scale

301	Organizational commitment	1. Low	2. High
302	Work environment	1. Unsatisfied	2. Satisfied
303	Salary level	1. Unsatisfied	2. Satisfied
304	Co-worker relationship	1. Low	2. High
305	Payment of part time	1. Unsatisfied	2. Satisfied
306	Do you have workmate who leaved emergency department by his/her needs recently? 1. Yes 2. No		
307	Why did your workmate leave Emergency department? 1. Shifting schedule/program 2. To leave hospital 3. Personal or family reason 4. Work environment 5. Low salary 6. Work load 7. Better opportunity 8. Other (specify) ---------- 9. Unknown		

Part IV: Intention to leave planning

No	Factors	Yes	No
401	Do you have a plan to leave Emergency department within the next year?	1	2
402	Do you have a plan to stay in emergency departments longer?	1	2
403	Do you have been actively asking/demanding/requesting transfer to other departments?	1	2
404	Do you have a plan to leave the hospital within the next year?	1	2
405	Do you have been actively looking for jobs in other hospital/ organization?	1	2
406	Do you have been actively looking for jobs in other profession?	1	2
407	Do you have a plan to leave the nursing profession?	1	2
408	Do you have training Opportunity?	1	2

Part V: Job satisfaction factors

Instruction: There are statements about job satisfaction factors affecting nurses‟ turnover intention and each statement has five alternatives with five point scale. Read each item carefully and circle: 1= very dissatisfied,2=Dissatisfied,3=Neither satisfied nor dissatisfied (neutral),4= Satisfied,5=very satisfied.							
No.	Factors	Measurement scale					
Autonomy							
501	The extent to make autonomous nursing care decision	1	2	3	4	5	
502	The extent to be fully accountable for those decisions	1	2	3	4	5	
503	The chance to work alone on the job	1	2	3	4	5	
504	The freedom to use your own judgment	1	2	3	4	5	
Professional opportunities		Measurement scale					
505	Opportunities for further education/degree or post graduate in nursing	1	2	3	4	5	
506	Opportunities to participate in morning rounds	1	2	3	4	5	
507	Opportunities to participate in nursing research	1	2	3	4	5	
508	Opportunities to write and publish	1	2	3	4	5	
Scheduling		Measurement scale					
509	The time available to get through my work	1	2	3	4	5	
510	The time available for patient care	1	2	3	4	5	
511	Overall staffing levels	1	2	3	4	5	
512	The way that I am able to care for patients	1	2	3	4	5	
513	The amount of time spent on administration	1	2	3	4	5	
514	The amount of time spent talking with my patients	1	2	3	4	5	
Support		Measurement scale					
515	The amount of support and guidance I receive from my supervisor	1	2	3	4	5	
Enjoyment		Measurement scale					
516	I find real enjoyment in my job	1	2	3	4	5	
517	I consider my job rather unpleasant	1	2	3	4	5	
518	I enjoy my job more than my leisure time	1	2	3	4	5	
519	I am often bored with my job	1	2	3	4	5	

520	I am fairly well satisfied with my job	1	2	3	4	5
521	I definitely dislike my job	1	2	3	4	5
522	Each day on my job seems like it will never end	1	2	3	4	5
523	Most days I am enthusiastic about my job	1	2	3	4	5

Part VI:Organizational Commitment

Instruction: There are statements about nurses' organizational commitment, and each statement has five alternatives with five point scale. 1= strongly disagree, 2= Disagree, 3= neither agree nor disagree (neutral), 4= Agree, 5= Strongly Agree						
No.	Nurses' organizational commitment	Measurement scale				
601	"My organization has a great deal of personal meaning for me"	1	2	3	4	5
602	"I feel a strong sense of belonging to my organization"	1	2	3	4	5
603	"I feel like part of the familyin this organization."	1	2	3	4	5
604	"I owe a great deal to this organization"	1	2	3	4	5
605	"I would not leave this organization right now because I feel an obligation to stay"	1	2	3	4	5
606	"This organization deserves my loyalty."	1	2	3	4	5
607	"I feel that I have too few options to consider leaving this organization"	1	2	3	4	5
608	"Too much of my life would be disrupted if I decided to leave this organization now"	1	2	3	4	5
609	"It would be very hard for me to leave this organization right now, even if I wanted to."	1	2	3	4	5

Part VII:Intention to leave

Instruction: There are statements about nurses' Intention to leave the organization and/or ED, and each statement has five alternatives with five point scale. 1= strongly disagree, 2= Disagree, 3= neither agree nor disagree (neutral), 4= Agree, 5= Strongly Agree						
No	Intention measuring items	Measurement scale				
701	"I think a lot about leaving the organizations."	1	2	3	4	5
702	"I am actively searching for an alternative to this organization."	1	2	3	4	5
703	"As soon as it is possible, I will leave the organization."	1	2	3	4	5

704	"I think a lot about leaving the emergency department."	1	2	3	4	5
705	"I am actively requesting/askingtransfer to other department."	1	2	3	4	5
706	"As soon as it is possible, I will leave emergency department."	1	2	3	4	5

THANK YOU FOR YOUR COOPERATION!!!

FOR DATA COLLECTORS AND SUPERVISORS

1. The results of the questionnaire
    1. Refused
    2. Completed
    3. Incomplete/partially filled
2. Data collector: Name ---------- Code ---------- Sign ----------
3. Supervisor:Name ---------- Code ---------- Sign ----------
4. Hospital name ---------- Code ----------
5. Date of data collection ----------

Annex IV: Assurance Form

I, the undersigned, assert that this study proposal is my original work, has not been presented for a degree in any other university and that all sources of materials used for the study have been acknowledged accordingly.

MSc candidate: BinyamTaye**(**BSc**)**

Signature: _____ Date_____

Advisors: Dr.BirukGirma

Signature: _____ Date_____

Mr. AndualemWubetie

Signature: _____ Date_____