

ORGANIZATIONAL COMMITMENT AND JOB SATISFACTION AMONG NURSES IN PUBLIC HOSPITALS IN ALBANIA

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ABSTRACT

Context: Shortages and the intent to leave of health care professionals are a concern in many European countries especially to remote areas. The study of behaviors, within organizational environment highlights critical variables that can serve as drivers or barriers to the workforce performance. In consistence, qualitative human resources are the major factor which contributes significantly to the organizational success. Organizational commitment and Job satisfaction are widely studied factors in management literature which are evaluated as the major precursors of employees' performance. Yet, sparse literature exists regarding nursing workforce. Special focus on commitment and job satisfaction in public hospital settings in Albania is missing. On the other hand there is world widely evidence that that services, such as wellness and prevention services, diagnosis and management of many common uncomplicated acute illnesses, and management of chronic diseases such as diabetes can be provided by nurse practitioners at least as safely and effectively as by physicians.

Objective: The purpose of the study is to describe the nurses' organizational commitment and job satisfaction with regards to different dimensions to the job facets. Furthermore, the study aims determine the impact of nurses' satisfaction with job dimensions on perceived organizational commitment in public hospitals in Albania. Sparse literature or research based data are available on the organizational commitment and job satisfaction among nurses in Albania.

Methods: A survey-based descriptive research design was used. The study was carried on in public hospitals in Albania. About 650 survey questionnaires were distributed in October, 2011 by employing the same mode of communication; in person. Multiple follow ups yielded 246 statistically usable questionnaires. Stepwise regression analysis and one sample t-tests were used to confirming the research hypotheses.

Results: The results of the step wise regression analysis demonstrated that satisfaction of the nurses with nature of the work, salary and quality of the supervision explained a considerable percent variance in their commitment. However, but they were relatively less satisfied with promotion opportunities and coworkers satisfaction

Added value/Originality: The relevant literature shows that health workforce' commitment, and job satisfaction is under-researched area particularly in the public sector institutions. So, the

current investigation has contributed to improve the understanding on significant issue. Furthermore, the study findings are discussed in perspective of practical implications of health management system regarding workforce issues. Overall, this study provides new support to previous international research (especially to eastern European countries) about nurses' commitment and satisfaction as crucial drivers for organizational effectiveness and performance.

Introduction:

Shortages of health care professionals are a concern in many European countries, and there are particular problems with the supply of nurses and midwives to European health care systems (1). This is within the context of a general global healthcare workforce crisis and shortage of nurses, in which recruitment to Europe and the USA from developing countries has often caused controversy (1,2, and 3). In addition, to this problematic, Eastern European Countries are losing their best nurses to other EU Member States, because in these countries nurses “*earn more than 10 times more*”(4). Meanwhile, medical progress and the ageing demographic profile of the European population is increasing the role of the nurse workforce. There is evidence which indicate that services, such as wellness and prevention services, diagnosis and management of many common uncomplicated acute illnesses, and management of chronic diseases such as diabetes can be provided by nurse practitioners at least as safely and effectively as by physicians (1, 5, 6, 7, and 8). As part of a healthcare system, hospitals nowadays are confronting great competition and scarcer resources than ever before. They are also severely challenged by the external and internal environment to achieve their goals effectively and efficiently. Nurses, as the largest group of professionals, play an important role in determining the quality and cost of healthcare. It is argued that they have the potential to be part of solutions to key problems in health care systems (9). The study of behaviors, within organizational environment highlights critical variables that can serve as drivers or barriers to the workforce performance. In consistence, qualitative human resources are the major factor which contributes significantly to the organizational success (10). Organizational commitment and Job satisfaction are widely studied factors in management literature (11; 12; 13; 14; 15) which are evaluated as the major precursors of employees' performance. Several research findings suggest that the presence or absence of supportive work environments and workforce organizational commitment and job satisfaction helps explain the differences observed in employee attitudes and turnover intentions (16; 17; 18; 19; 20) These factors are more important to study in healthcare institutions, especially regarding nurses which are becoming more and more responsible for delivering qualitative healthcare to community as well as deal with new promotion services and leadership tasks. Organizational commitment and Job Satisfaction is strongly associated with intent to stay, quality, and productivity in education, hospitals, and health education staff as well (21; 22;). Factors associated with organizational commitment and Job Satisfaction have been studied in many healthcare settings and occupational groups such as assisted living (23,24) health profession faculty (25), registered nurses and mixed staff nurse samples (26,,27,28,), radiographers (29), occupational therapists (30), military (31). Most of these mentioned examples have been studied in developed healthcare systems). Yet, sparse literature is found on Eastern European Countries as transitional Post-Communist Systems on these crucial issues. Health care reforms in post-communist countries have significantly altered employment relations, shifting to new paradigms, from central and vertical systems to more autonomous ones. The reform process

in the transition countries caused problems due to an institutional vacuum and uncertainty (32). At this point, it is worthwhile noting that the job satisfaction literature has not been developed extensively for Eastern European countries though there are some exceptions, (33, and 34). At the European country level, job satisfaction is related to lower working hours, higher well-being, and a higher GDP per capita. Substantial differences exist between Eastern and Western Europe. Socio-demographic factors, education, income, religiosity and religious denomination are significant influences; additional differences between Eastern and Western Europe regarding work-leisure and work-family centrality that could be driven by institutional conditions (35). Across Europe at the beginning of the decade growth in health expenditures largely came to a stop after decades of increasing health budgets. Policies measures in many countries have – or will in the near future – reduce public spending on health costs, with countries already hit by recession taking the lead (OECD 2012). In additions to this statement, European post-communist countries (such as Albania) as countries with economies in transition, face underfinanced healthcare systems and on the other hand strives persistently to reach EU enlargement. In the light of this new financial and organizational reality it is crucial to get to know with these new concepts beginning with an assessment of the actual perceived organizational commitment and job satisfaction among **nurses as a cost effective health workforce in Albania providing so funders, policy makers, health leaders and managers of health workforce a valid tool to enhance further reforms in a relatively different point of view; health workforce perspective.** To the best knowledge of the researchers, a few studies have addressed the role of different job dimensions on organizational commitment of the nurses particularly in the context of public hospitals in Albania. Thus, the current study aimed at determining impact of nurses' satisfaction with job dimensions on organizational commitment in public hospital sector of Albania. In addition, its objective was to exploring to what extent these nurses are committed to their work setting and satisfied with different dimensions of their job. In this connection, important contribution will advance the body of knowledge on organizational commitment and job satisfaction of nurses employed by public institutions in a developing post-communist country.

Theoretical Background (Literature Review)

Organizational Commitment

Organizational commitment is defined as “the relative strength of an individual’s identification with and involvement in a particular organization” (36). It is further conceptualized by the following three factors: “a) a strong belief in and acceptance of the organization’s goals and values; b) a willingness to exert considerable effort on behalf of the organization; c) a definite desire to maintain organizational membership”. Organizational commitment from a behavioral perspective describes a person’s preoccupation with the organization as evidenced by personal time devoted to organizational activities. Allen and Meyer presented organizational commitment as multidimensional and containing affective, continuance, and normative components. Their conceptualization suggested that employees either “wants to,” “need to,” or “feel they should” remain in an organization (37). They conceptualized organizational commitment as a three-dimensional model, with each dimension describing a core aspect of organizational commitment. Affective commitment involves the emotional or attitudinal (&) attachment of people to the organization. Continuance commitment is related to a balancing of the costs of leaving an

organization and the benefits of staying. Normative commitment is related to internalized pressures to act in ways that comport with organizational goals and interests. This component suggests that employees feel a moral need to stay in the organization. Meyer and Allen (1997) argued that these dimensions capture different aspects of the multifaceted construct of organizational commitment and that the gestalt of commitment emerges. According to the literature, antecedents of organizational commitment include personal characteristics, work experiences, and job characteristics. Communication is a theme among many of these antecedents. According to Zangaro (38), “when an organization communicates honestly and openly, builds a trusting relationship, and offers a sense of belonging to an employee, the organization will increase the likelihood of retaining a morally committed employee” Organizational commitment is also influenced by culture, gender, group diversity, commitment profiles, and organizational information (39). Interest in issues related to organizational commitment in health workforce, and in nursing especially began to appear in the nursing literature over three decades ago (40). Several studies revealed that organizational commitment was positively correlated with nurses’ intent to remain in the organization. They reported that commitment is a better indicator of leavers and stayers. (41, 42) According to Wagner, organizational commitment should be employed routinely in nursing turnover research studies despite inconsistent findings in prior research on nursing turnover (43)

Job Satisfaction

Job satisfaction is widely researched and researchers vary in their definitions to the concept. It is randomly defined as the feelings of individuals about their jobs. In the broadest sense, it refers to an employee’s general attitude toward the job or some dimensions of it, otherwise considered as “an effective feeling that depends on the interaction of employees, their personal characteristics, values, and expectations with the work environment, and the organization”. (44, 45, 46)

Based on literature there are three important dimensions to job satisfaction:

- Job satisfaction is an emotional response to a job situation. As such it cannot be seen, it can only be inferred.
- Job satisfaction is often determined by how well outcome meet or exceed expectations.
- Job satisfaction represents several related attitudes which are most important characteristics of a job about which people have effective response. These to Luthans are: the work itself, pay, promotion opportunities, supervision and coworkers.

There is also a growing awareness that it is vital to examine the job satisfaction of nursing staff (47). Research findings showed that the job satisfaction of employees in general, and more specifically nursing staff, is on the decline worldwide (48, 49). Critical nursing staff shortages are on the increase worldwide (50). There are many reasons for these nursing shortages (51). Job related factors such as low pay, abuse by demanding patients, and lack of appreciation from doctors, work pressure, work environment-related factors, and lack of opportunities for advancement, are some of the most important reasons leading to nursing skills losses. Emigration also contributes to nursing staff losses (52, 53). Job satisfaction impacts on patient care (54). Nursing staff with low job satisfaction levels may find it difficult to provide quality patient care, and to create a friendly and supportive atmosphere within the health care setting. Nurses with low levels of job satisfaction may also avoid work responsibilities, through absenteeism, and by taking shortcuts in the performance of their duties (55).

Job Satisfaction and Organizational Commitment

Job satisfaction and organizational commitment are related, but have distinguishable attitudes (56). Previous studies have revealed that job satisfaction is a significant predictor of organizational commitment (57, 58). A considerable number of researchers have reported mixed findings on the relationship between job satisfaction and organizational commitment. They have found no significant relationship between job satisfaction and organizational commitment (59). However, other researchers (60) found that job satisfaction was a significant predictor of organizational commitment. Some researchers argued that job satisfaction reflects immediate affective reactions to the job while commitment to the organization develops more slowly after the individual forms more comprehensive valuations of the employing organization, its values, and expectations and one's own future in it. Therefore, job satisfaction is seen as one of the determinants of organizational commitment. It is thus expected that highly satisfied workers will be more committed to the organization.

Methods

In the light of these empirical studies, the following research hypotheses were developed to guide the study:

H1: Job facets satisfaction has significant impact on organizational commitment of the nurses working in public hospitals in Albania.

H2: Nurses in public hospitals of Albania have high degree of satisfaction with different job facets/dimensions such as work-itself, supervision, pay, coworkers and promotion opportunities.

H3: Nurses in public hospitals in Albania experience high level of overall job satisfaction and organizational commitment.

Survey questionnaires were distributed to 400 public hospital nurses. In-person communication model was used in order to get optimal response rate from the study participants. Of total distributed questionnaires, overall usable response was 246 valuable questionnaires. Five point Likert scale was used to measure nurses' level of satisfaction with job and organizational commitment. Organizational commitment was measured by using six items measure developed for and used in General Social Survey (1991) to assess overall organizational commitment. Overall Job Satisfaction was measured by using six items scale developed by Schriesheim and Tsui (1980). The scale included single items to assess level of satisfaction with the work itself, supervision, co-workers, pay, promotion opportunities, and job in general. Stepwise regression technique was used to determine which dimensions of the job had significant influence on nurses' organizational commitment. One sample t-test was employed to determine whether mean scores of job (dimensions) satisfaction and organizational commitment significantly differ from median of their respective scales.

Results

Stepwise multiple regression analysis was used to determine the impact of different facets of job satisfaction on organizational commitment of nurses working in public Hospitals. Descriptive statistics such as means and the standard deviations of the job satisfaction dimensions and nurses' commitment with their organizational settings (hospitals) are also given. Inter-correlations matrix reflected that satisfaction with job dimensions and organizational commitment of the nurses are linearly and significantly related with each other.

The results of the step wise regression analysis demonstrated that satisfaction of the nurses with nature of the work, salary and quality of the supervision explained a considerable percent variance in their commitment. The regression coefficients of explanatory variables such as satisfaction with work-itself, pay and supervision were found to be significant which indicated that they had significant and positive impact on organizational commitment of the nurses employed by public hospitals. **The findings led to the confirmation of the research hypothesis 1.**

The results indicated that hospital public nurses had significantly higher degree of satisfaction with nature of work (Mean=2.5, SD=0.59), salary (Mean=3.1, SD=1.1), coworkers (Mean=2.2, SD=0.89), quality of supervision (Mean=2.3, SD=0.73) and opportunities of promotion (Mean=2.1, SD=0.66) which confirms the study hypothesis 2 that nurses in public sector have high degree of satisfaction with different job facets/dimensions. However, but they were relatively less satisfied with promotion opportunities and coworkers satisfaction. The mean scores of overall job satisfaction and organizational commitment of the nurses were found to be significantly higher than their respective scale median which was in conformity with the hypothesis 3 that nurses in public hospitals in Albania experience high level of overall job satisfaction and organizational commitment.

6. Conclusions and Recommendations

The study intended not only to ascertain the influence of job facets satisfaction on organizational commitment of hospital public sector in Albania but to determine their degree of commitment and satisfaction also. Based on the findings, it is concluded that nature of work, salary satisfaction and quality supervision are significant predictors of organizational commitment of the Hospital public. It was also found out that they were highly satisfied with their supervisor, coworkers, compensation, work-itself and opportunities of advancement in their settings. So policy makers should take necessary measures for the optimal provision of intrinsic and extrinsic job rewards to make their core workforce highly satisfied and committed to reap the benefits of improved motivation, performance and organizational citizenship behaviors.

Managerial and Practice Implications:

The following conclusions will shed light on the next related studies and provided important information for the general manager and human resources manager in the public healthcare delivery. Moreover, the results of this study will also provide information for researchers regarding job satisfaction facets and organizational commitment among Albanian health workforce environment. Health managers could make their core workforce highly satisfied and committed by optimal provision of intrinsic and extrinsic job rewards. Future researchers should conduct longitudinal studies to establish causal relationship between study variables. Perceived differences among public and private health care sector regarding affective, normative and continuance commitment, and job facets satisfaction with underlying reasons could be probed in the future.

Policy and Nurse Workforce

This study results contribute to initial knowledge about linkages to organizational commitment, and Job Satisfaction among lower educated and less skilled healthcare workforce such as nurses and have implications for managers in healthcare settings who deal with nurse delivery service. Nurses may be more highly valued by scholars in nursing also due to their continued value and cost effectiveness for specific and important organizational outcomes, especially in light of the growing geriatric population that will require increasingly chronic and routine care. As bedside

nurses become more highly educated, they may increasingly disdain employment that involves the repetitive, low-risk patient care that nurses currently provide. There is a real need to better understand the current work environment of those employees responsible for delivering low-risk repetitive healthcare to chronically ill and elderly patients.

Limitations

Findings of the study should be consulted while taking into consideration few limitations. The focus of the study was health workforce working at public sector

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Statistics

	Work_itself_satisf	pay_satisfaction	supervision_satisfaction	co_workers_satisfaction	promotion_opprtunities_satisfaction	oganizational_commitment
N Valid	246	246	246	246	246	246
Missing	0	0	0	0	0	0
Mean	2.5874	3.1138	2.3983	2.2358	2.1490	3.2438
Std. Deviation	.59874	1.10807	.73341	.89972	.66843	.48019

Coefficient Correlations^a

Model	promotion_opprtunities_satisfaction	co_workers_satisfaction	pay_satisfaction	supervision_satisfaction	Work_itself_satisf

1	Correlations	promotion_opprtunitie s_satisfaction	1.000	-.005	-.226	-.255	-.361
		co_workers_satisfacti on		1.000	.094	-.299	-.124
		pay_satisfaction			1.000	-.040	-.329
		supervision_satisfacti on				1.000	-.201
		Work_itself_satisf	-.361				1.000

ANOVA^c

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	2.524	1	2.524	11.409	.001 ^a
	Residual	53.970	244	.221		
	Total	56.493	245			
2	Regression	3.609	2	1.805	8.292	.000 ^b
	Residual	52.884	243	.218		
	Total	56.493	245			

a. Predictors: (Constant), co_workers_satisfaction

b. Predictors: (Constant), co_workers_satisfaction, supervision_satisfaction

c. Dependent Variable: oganizational_commitment

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics				
					R Square Change	F Change	df1	df2	Sig. F Change
1	.211 ^a	.045	.041	.47031	.045	11.409	1	244	.001
2	.253 ^b	.064	.056	.46651	.019	4.988	1	243	.026

a. Predictors: (Constant), co_workers_satisfaction

b. Predictors: (Constant), co_workers_satisfaction, supervision_satisfaction

