

# General Job Satisfaction and Perceptions of Working Conditions among Workers of Family Health Centres: A Cross-Sectional Descriptive Study, Sivas, Turkey

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## ABSTRACT

**Aim:** To assess general job satisfaction and perceptions of working conditions among workers of family health centres in Sivas, Turkey.

**Study design:** Cross-sectional descriptive study

**Methods:** All family health care centres were comprised in this study. The facilities were visited on weekdays between 10:00 and 16:00 from June 2013 to November 2013. A self-administered structured questionnaire was used for collecting information from 142 health workers.

**Results:** Fifty-seven (59.9%) of them experienced unsatisfied with their current jobs mainly due to working conditions. The relationships between general job satisfaction and presence of conflict at work ( $p=0.011$ ), freedom of expression ( $p=0.014$ ), managerial support for staff welfare ( $p=0.034$ ) and progress towards personal professional goals ( $p=0.031$ ) were statistically significant.

**Conclusion:** The general job satisfaction was low. Though salaries were important, nonmonetary factors such as presence of conflict at work, freedom of expression, managerial support for staff welfare, managerial support for staff career development and progress towards personal professional goals appear to play a role in job satisfaction among workers of family health centres.

**Keywords:** Job Satisfaction; working conditions; family health centre

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## INTRODUCTION

Turkey's health transformation programme faces challenges such as introduction of a new primary health care organization, introduction of a new general health insurance system and the introduction of advanced medical technology. The current family health centres are staffed with one family physician (a medical practitioner, who has had introductory training in family medicine implementation and is expected further to participate in a 1-year distance learning course in family medicine implementation) and one family health staff worker (usually a nurse or midwife).

The health care system is important and service quality, efficiency, and equity, all directly mediated by workers' willingness to apply themselves to their tasks. Meeting the needs and achieving the goals of both the employee and the organization is the cornerstone of job satisfaction and this is of crucial importance for management, as it is correlated with the upgrading of the quality of the services provided<sup>1</sup>.

Family health workers' job satisfaction is the back bone for the provision of quality health care for the population. Poor satisfaction is associated with suboptimal healthcare delivery and poor clinical outcomes, for instance due to adverse events and reduced patient adherence<sup>1,2</sup>. Therefore, health care systems' ability to provide safe, effective, efficient, accessible, viable and high-quality services depends to a large extent on sufficient and well-motivated human labour<sup>4,5</sup>.

Family health workers' individual needs, self-concept, and expectations for outcomes and/or consequences are some of the more important individual-level determinants of job satisfaction. In this respect, to improve the health care service performance, health care managers need to factors that motivate health workers and cause job satisfaction among them. However, this is underperformed in developing countries because there is limited evidence on factors that influence workers' motivation among primary health care workers.

It is crucial to reveal the influences factors that affect health care conditions among the family health workers. This study argues that a core component of the information necessary for policy making is still missing because there remains a dearth of studies about what motivates family health workers in developing countries. At this point a worker may be competent, but what makes the individual come to

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work regularly, work diligently and be willing to carry through required tasks<sup>4</sup>. Because that the aim of this survey was to assess general job satisfaction and perceptions of working conditions (i.e., those related to workload, salary, staff welfare, etc.) among workers of family health centres in Sivas, Turkey.

## METHODOLOGY

This cross-sectional descriptive survey of state-owned family health centres was carried out in Sivas, Middle Anatolian province of Turkey, between June and November in 2013. In this study, health care workers in all family health centres in the city centre were targeted. According to Statistical Year Books of Sivas Province Health Department the total number of the family healthcare workers was 172 in Sivas centre (Statistic of Sivas).

The facilities were visited on weekdays between 10:00 and 16:00 in a period of 6 months. The purpose of the study was explained to the management of the centre and permission was obtained. In each family health centre, a list of all workers scheduled to be on duty at the time of the assessment was made. Using that list, the entire staff at work during the period of the visit was contacted and invited to participate in this study, and informed consent was obtained. It was explained to workers that their participation in the study would be completely voluntary and that all information obtained would be kept confidential. Then, a questionnaire was given to all primary health care workers participated. In all, 142(82.6%) health workers agreed to participate and gave informed consent.

**Data collection:** The data were collected using a self-administered anonymous questionnaire. The questionnaire consisted of two parts: The first part included questions related to demographic data such as age, sex, and profession and number year of professional experience. In the second part the questionnaire explored the effect of monetary factors, societal expectations, interpersonal relationships and managerial characteristics on the health workers' job satisfaction, adapted from scales used in other studies<sup>6,7</sup>. Moreover, a global satisfaction question was included as the final item in the questionnaire. Cronbach alpha coefficient for the reliability of the questionnaire was ranged between 0.74-0.83.

The questionnaire was piloted with ten workers (who were not included in the main study) in order to judge the time needed for administration and to test for clarity and logical flow. Based on these data, a final version of the questionnaire was prepared. The data collection process was made by authors. The study was approved by the Human Research Ethics Committee of the Cumhuriyet University of Turkey.

Data were analyzed using SPSS version 16.0. Descriptive statistics [percentages, mean and standard deviation (SD)] were used to summarize demographic data. The chi-squared test was used to examine the association between nominal variables. Differences were considered statistically significant when p-value was less than 0.05.

## RESULTS

Thirty family health workers refused to take part and 142 workers voluntarily participated in this study. The response rate was 82.6%. Ninety-six (67.6%) of the respondents were females and 46(32.4%) were males. Eighty-two (57.8%) were aged 31 to 40 years. Sixty-six (46.5%) of the respondents were physicians; 55(38.7%) midwifery and 21(14.8) of the staff were nurses. Eighty-five (59.9%) workers had been on the present job for 11-20 years. Only thirty-four (23.9%) workers were happy with their workload, while majority of them (76.1%) felt overworked. Satisfaction with present salary is high (71.8%). As regard to workplace characteristics, thirty respondents (21.1%) found their workplace inspiring; Sixty-eight (47.9%) of the respondents felt an attainment of progress towards achieving personal professional goals (Table 1).

Table 1: Characteristics of the study participants and perception of remuneration, workload and workplace condition (n=142)

Characteristics	n	%age
Female	96	67.6
Male	46	32.4
<b>Age groups (year)</b>		
20-30	26	18.3
31-40	82	57.8
>40	34	23.9
<b>Profession</b>		
Physician	66	46.5
Midwifery	55	38.7
Nurse	21	14.8
<b>Number of professional experience</b>		
<10	43	30.2
11-20	85	59.9
>20	14	9.9
<b>Perception of workload</b>		
Happy and satisfied	34	23.9
Overworked	108	76.1
<b>Satisfaction with present salary</b>		
Yes	102	71.8
No	40	28.2
<b>Workplace is inspiring</b>		
Yes	30	21.1
No	112	78.9
<b>Attainment of progress towards achievement of personal professional goals</b>		
Yes	43	30.2
No	99	69.8

Workplace characteristics that motivated health workers were good interpersonal relationships (76.1%), help to achieve personal goals (47.9%), freedom of expression (31%) and good welfare package for staff (16.9%). Fifty-seven (40.1%) workers experienced satisfaction with their current jobs, while 85(59.9%) respondents were not satisfied (Table 2).

General job satisfaction was not related to age ( $p = 0.214$ ), gender ( $p=0.367$ ), type of profession ( $p=0.102$ ), and number of years on the current job ( $p=0.728$ ). However, presence of conflict at work ( $p=0.011$ ), freedom of expression ( $p=0.014$ ), managerial support for staff welfare ( $p=0.034$ ), and help to achieve personal professional goals ( $p=0.031$ ) were related to general job satisfaction (Table 3).

Table 2: Workplace characteristics that motivate workers and general job satisfaction (n = 142)

Items	Yes	%age
Good interpersonal relationships	108	76.1
Help to achieve personal goals	68	47.9
Freedom of expression	44	31
Good welfare package for staff	24	16.9
Job satisfaction is sufficient	57	40.1

Table 3: Perceived general job satisfaction and its associated factors among primary health care workers in public- owned facilities, Sivas (n=142)

Characteristics	General job satisfaction		P value (Chi-square test)
	Good	Worse	
<b>Age group (Year)</b>			
20-30	9(15.8%)	17(20%)	0.214
31-40	30(52.6%)	52(61.2%)	
>40	18(31.6%)	16(18.8%)	
<b>Gender</b>			
Female	36(63.2%)	60(70.6%)	0.367
Male	21(36.8%)	25 (29.4%)	
<b>Type of profession</b>			
Physician	32 (56.1%)	34 (40%)	0.728
Midwifery	5(8.8%)	16 (18.8%)	
Nurse	20(35.1%)	35 (41.2%)	
<b>Number of years on the current job</b>			
0-10	17(29.8%)	26 (30.6%)	0.728
11-20	33(52.9%)	52 (61.2%)	
>20	7(12.3%)	7 (8.2%)	
<b>Presence of conflict at work</b>			
Yes	6 (10.5%)	24 (28.2%)	0.011
No	51(89.5%)	61 (71.8%)	
<b>Freedom of expression</b>			
Yes	11(19.3%)	33 (38.8%)	0.014
No	46(80.7%)	52 (41.2)	
<b>Managerial support for staff welfare</b>			
Presence	5 (8.8%)	19 (22.4%)	0.034
Absence	52(91.2%)	66 (75.6%)	
<b>Progress towards personal professional goals</b>			
Yes	21(36.8%)	47 (55.3%)	0.031
No	36(63.2%)	38 (44.7%)	

## DISCUSSION

Health transformation programme are continuous and at an accelerated pace; with these changes the need for more inspiring workers in the family health centres is emerging. To our knowledge, this is the first study to report job satisfaction among workers of family health centres in Turkey. The findings of this survey of health workers employed in family health centres demonstrated that 72% of the participants feeling satisfied with their salaries for the work they did. This finding was inconsistent with satisfactory of low level of salaries has been found in earlier studies.<sup>6,7</sup> It was expected to find that in the family health centres, high proportion of workers feeling satisfied with their salaries. In fact, a result of health transformation programme in Turkey, while working conditions of health facilities are similar to each other, the level of salaries for staff in the family health centres was higher then other primary health care facilities. However, only 24% of them were happy with their workload, and only 21% of them were inspired by workplace condition. This confirms the results of other authors in a Turkish setting and in other countries<sup>6,7,13</sup>.

People have different motivations, beliefs, values and goals. As showed in this study, nonmonetary factors such as interpersonal relationships and support for staff welfare and career development appear to play a significant role in affecting health workers' satisfaction with their work. This agrees with findings of other authors in a Turks setting<sup>7,8</sup> and in other countries.<sup>9,10</sup> In others studies have also shown that nonmonetary factors (i.e., worker motivation etc) play a role in affecting job satisfaction<sup>11</sup>. However, the media and the information sector tend to portray monetary benefits as being a major factor in worker motivation, at least in Turkey.

Although good outcomes are the objective of all health actions, outcomes alone are not an efficient way to measure quality. The nonmonetary factors that would positively motivate family health workers include improved staff welfare and managerial support for career development. It appears that the workers' motivation is important for job satisfaction. Managements of the family health centres can manipulate these factors to improve the output of their staff. It has been shown that without these positive factors they can not create a comfort and happy working environment for workers in the family health centres, which in turn reduce their willingness to perform and maintain effective implementation towards achieve the organizational goals. Moreover, their pent up emotions are sometimes directed towards the patients in the form of rudeness, anger

and/or unfriendly behaviour<sup>12,13</sup>. This may, to some extent, explain the reason for the poor quality of primary health care seen in developing countries. Though salaries were viewed as important by workers, nonmonetary factors like freedom of expression, staff welfare and career development also appear to be important in creating satisfaction with job environment.

## CONCLUSION

In conclusion, improvement of working conditions for workers in the family health centres and rationalization of work would be expected to increase job satisfaction and contribute to the overall quality of family health centres.

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