

## Factors Affecting on Military Medical Job Satisfaction Staff

Mehdi Habibi<sup>1</sup>; Mohammad Gholami Fesharaki<sup>2,\*</sup>; Mohammad Javad Jamali<sup>3</sup>; Maryam Mohamadian<sup>3</sup>

<sup>1</sup>Iran Helal Institute of Applied Science and Technology, Tehran, IR Iran

<sup>2</sup>Department of Biostatistics, Faculty of Medical Sciences, Tarbiat Modares University, Tehran, IR Iran

<sup>3</sup>Najmieh Subspecialty Hospital, Baqiyatallah University of Medical Sciences, Tehran, IR Iran

\*Corresponding author: Mohammad Gholami Fesharaki, Department of Biostatistics, Faculty of Medical Sciences, Tarbiat Modares University, P. O. Box: 3314115, Tehran, IR Iran. Tel: +98-9128958088; +98-2182883578, E-mail: Mohammad.gholami@modares.ac.ir; gholami4510@gmail.com

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**Background:** Job satisfaction (JS) in the workplace affects absenteeism, turnover and performance.

**Objectives:** Considering the importance of JS, this study conducted with aim studying the factors affecting JS in a military hospital.

**Patients and Methods:** This descriptive analytical cross sectional study was carried out on 301 workers who worked in a military hospital in year 2009 using of stratified random sampling. In this study JSS questioner was used for measuring JS, ANOVA and Dunnett post hoc and SPSS and Excel software were used for statistical analysis and data analysis respectively.

**Results:** In this study, age, work experience, type of job and work position shown relationship with JS but gender, marriage status and education were not shown any statistical significant relationship with JS. In this study technician operating room and anesthesia (TORA) had less, physicians and specialist and par clinical jobs had more and handy jobs and administrative jobs had same JS compare with nurses.

**Conclusions:** According to results of this study, we propose actions like modified and increased salaries and benefits of employees, making effective communication, improved working conditions, reform official promotion and more attention to TORA and nurses can be useful way for improving JS.

**Keywords:** Military; Job Satisfaction; Nurse

### 1. Background

Undoubtedly, the most important element of any organization, manpower is satisfied with their jobs (1-3). Job satisfaction increases the motivation to work (4). The most widely accepted explanation of job satisfaction was "A pleasurable or positive emotional state resulting from the appraisal of one's job or job experiences" (5). Previous studies show that work in military post tends to low job satisfaction. This situation make because of specific military principles governing in military occupation (6-9). Several studies done in factors affecting on job satisfaction in health care and military worker (10-12). For example Zangaro and Watts (6) in a review study found that a sense of teamwork, good working environment, adequate compensation and benefits, leadership and management of the high official was positive relationship with high job satisfaction but lack of support from the manager was reverse correlation with high job satisfaction. Previous study showed that most people who are working in the military profession have no desire for reelection this job if you do not return to the past (13). However, regardless of the military occupation, Iran medical area showed unwillingness and leaving work of nurses to continue working because of dissatisfaction with administrative regulations, the hourly leave, workload and lack of human resources (14).

### 2. Objectives

Hence, this study aims to compare different groups of job satisfaction with treatment in a military hospital is designed and implemented.

### 3. Patients and Methods

This cross sectional study was done in a military hospital in Tehran city (Iran) in 2013. Inclusion criteria were official or payment employment of the person in 2013, no recorded mental illness and at least two year of work experience; Exclusion criteria were incomplete question more than 30 percent and lack of interest in participating in the study. In this study for measuring job satisfaction we used "job satisfaction survey" (JSS). JSS questionnaire responses are measured with a six item scales (disagree very much, disagree moderately, disagree slightly, agree slightly, agree moderately and agree very much). In JSS questionnaire the amount of total satisfaction can be measured with sum of 9 sub domains (pay, promotion, supervision, fringe benefits, contingent rewards, operating, procedures, colleagues, nature of work). The previous studies have reported the reliability coefficient of 0.6 to 0.91 (15). Gholami et al. (16) validated Persian version of JSS and in decreased the 9 sub domain to 7 domains (income and rewards, promotion,

supervision, operating procedures, colleagues, nature of work, communication). They also reported the overall Cronbach's alpha value of questionnaire equal to 0.86. This study was approved by the ethical committee of Baqiyatallah University of Medical Sciences. In this study data were analyzed with SPSS version 17 (SPSS Inc., Chicago, Ill., USA). Continuous variables are presented as the mean  $\pm$  standard deviation (SD) and median, inter quartile range (IQR), whereas categorical data are presented as frequency and percentages. Independent T-tests or Mann-Whitney, ANOVA with Dunnett post hoc and Kruskal Wallis test were used for continuous variables. In this study, the probability value of 0.05 or less ( $P \leq 0.05$ ) was set to know the significance level. The sample size was determined using following equation:

$$(1) \quad n = \frac{\lambda}{\Delta^2}$$

Where  $\Delta^2$  and  $\lambda$  calculated using equations ( $R^2$ : is multiple correlation coefficient):

$$(2) \quad \Delta^2 = \frac{R^2}{1-R^2}$$

$$(3) \quad F_{1-\alpha}(K, n(K-1), \lambda) = 1 - \beta$$

Considering  $\Delta^2 = 80\%$ ,  $\alpha = 5\%$ , statistical power of 90% sample size calculated 290 sample. Considering 5% drop up sample, we add 15 samples in optimal sample size, so we totally considered 305 samples.

#### 4. Results

The demographical variable showed in Table 1. As seen in this table most of participate were female, married, with associated or license degree in age 25 to 40 years and 10 to 15 years work experience. The Total job satisfaction was 61%. The relationship between variable with job satisfaction is described in Table 1. Among study variables just age, work experience, direction and occupation showed significant relationship with job satisfaction. The post hoc test also presented in Table 2.

**Table 1.** The Relationship Between Demographical Variable and Job Satisfaction <sup>a</sup>

| Variables                                | No. (%)    | Mean $\pm$ SD | P Value |
|--|------------|---------------|---------|
| <b>Gender</b>                            |            |               | 0.207   |
| Male                                     | 18.3 (55)  | 63 $\pm$ 9    |         |
| Female                                   | 81.7 (246) | 61 $\pm$ 9    |         |
| <b>Marital Status</b>                    |            |               | 0.243   |
| Married                                  | 17.9 (54)  | 62 $\pm$ 9    |         |
| Single                                   | 82.1 (247) | 60 $\pm$ 11   |         |
| <b>Age, y</b>                            |            |               | 0.048   |
| Lower than 25                            | 4.6 (14)   | 61 $\pm$ 9    |         |
| Between 25 - 40                          | 63.5 (191) | 60 $\pm$ 9    |         |
| Upper than 40                            | 31.9 (96)  | 63 $\pm$ 10   |         |
| <b>Work experience, y</b>                |            |               | 0.001   |
| Lower than 5                             | 23.6 (71)  | 60 $\pm$ 8    |         |
| Between 5 - 10                           | 18.9 (57)  | 58 $\pm$ 10   |         |
| Between 10 - 15                          | 26.9 (81)  | 63 $\pm$ 10   |         |
| Upper than 15                            | 30.6 (92)  | 63 $\pm$ 9    |         |
| <b>Education</b>                         |            |               | 0.085   |
| Lower diploma or diploma                 | 23.1 (61)  | 63 $\pm$ 9    |         |
| Associate degree or license              | 69.3 (183) | 60 $\pm$ 9    |         |
| Masters or PHD degree                    | 7.6 (20)   | 63 $\pm$ 8    |         |
| <b>Direction</b>                         |            |               | 0.013   |
| Responsible                              | 14.3 (43)  | 65 $\pm$ 8    |         |
| Non responsible                          | 85.7 (258) | 61 $\pm$ 9    |         |
| <b>Occupation</b>                        |            |               | 0.001   |
| Operating room and anesthesia technician | 9 (27)     | 54 $\pm$ 9    |         |
| Midwifery                                | 6 (18)     | 59 $\pm$ 11   |         |
| Physician and specialist                 | 14.3 (43)  | 66 $\pm$ 9    |         |
| Office worker                            | 21.9 (66)  | 62 $\pm$ 9    |         |
| Practical worker                         | 11 (33)    | 62 $\pm$ 8    |         |
| Par clinic worker                        | 11 (33)    | 65 $\pm$ 9    |         |
| Nurse                                    | 26.9 (81)  | 60 $\pm$ 8    |         |

<sup>a</sup> P value base on Independent T-tests, Mann-Whitney, ANOVA or Kruskal Wallis test.

**Table 2.** Dunnett Post Hoc Test

| Occupation                               | Mean Differences | SE   | P Value | 95% CI |       |
|--|------------------|------|---------|--------|-------|
|  |                  |      |         | Lower  | Upper |
| Operating room and anesthesia technician | -5.9             | 2    | 0.018   | -11.15 | -0.7  |
| Midwifery                                | 0.65             | 2.3  | 0.999   | -6.78  | 5.48  |
| Physician and specialist                 | 6.24             | 1.69 | 0.002   | 1.80   | 10.68 |
| Office worker                            | 2.19             | 1.48 | 0.550   | -1.70  | 6.09  |
| Practical worker                         | 2.53             | 1.85 | 0.631   | -2.32  | 7.38  |
| Par clinic worker                        | 4.94             | 1.85 | 0.044   | -0.09  | 9.80  |

## 5. Discussion

This study showed that 60% of military health care worker satisfied from their jobs. This study in compare with Nehrir et al. (12) showed higher job satisfaction and in compare with Monjamed et al. (17) (total satisfaction = 78%) showed lower job satisfaction. In this study like Ghoreishi et al. (1) study between marriage and job satisfaction no association was observed. Age in this study showed significant relationship with job satisfaction. This relationship was observed in previous study (11, 18, 19). It can be seen that positive correlation between work experience and job satisfaction like other study (11, 20) was observed in this study. This significant relationship can be justified with increasing salaries, job status and job stability with increasing work experience. In this study like Ghoreishi et al. (1) study no association between sex and job satisfaction observed.

In this study despite of increasing correlation with education and job satisfaction but no significant association was observed. Previous study more discuss about significant relationship between education and job satisfaction (21).

More results showed that operating room and anesthesia technician had lower job satisfaction in compare with nurses, Physician and specialist, par clinic worker had higher job satisfaction in compare with nurses and Midwifery, practical and office worker showed equal job satisfaction in compare with nurses. Lowering job satisfaction among operating room and anesthesia technician can be attributed with heavy responsibility, low wages (22) and more shift working (23) in this job. High job satisfaction in physician and specialist can be justified because of high income and salary in such works rather than nurses (24).

Midwifery job satisfaction in this study was 59%. It is higher than Mirmolae et al. (25) study (total satisfaction = 51%). It is because of more job stability in military job in compare with other job (10). Our study also showed that physician and specialist more satisfied about their job. Finally the strong points of this study were its appropriate sample size, homogeneity of the study population, and calculation of job satisfaction with standard questioner.

According to results of this study, we propose actions like

modified and increased salaries and benefits of employees, making effective communication, improved working conditions, reform official promotion and more attention to TORA and nurses can be useful way for improving JS.

This research failed to collect samples from a hospitals as the sample population; the fact which makes the generalization of the results rather difficult.

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## Authors' Contributions

Mohammad Gholami Fesharaki: Analyses and translation. Mohammad Javad Jamali: Consulting. Maryam Mohamadian: Data collecting. Mehdi Habibi: Medical discussion and introduction writing.

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