

Job Satisfaction and Quality of Life of Nurses Working in a Private Hospital

Ashna^{1*}

ABSTRACT

The current study was aimed at exploring the level of job satisfaction and quality of life as perceived by the nurses working in a private hospital in New Delhi. It attempted to investigate the relationship between the perceived level of job satisfaction and quality of life of nurses. A cross-sectional survey was conducted among 104 nurses. Minnesota Questionnaire or MSQ (Long Form) and WHOQOL-BREF were administered to measure job satisfaction and quality of life respectively. The results demonstrated an overall positive correlation between job satisfaction and quality of life. The findings also revealed that scores on MSQ (job satisfaction) and WHOQOL (quality of life) varied significantly in accordance with the age, gender, marital status and work experience of the participating nurses.

Keywords: *Job satisfaction, Quality of Life, Minnesota Satisfaction Questionnaire (MSQ), WHOQOL.*

The current study seeks to develop an understanding of satisfaction at work and how it impinges on or relates to the quality of life (QOL) in the case of nurses, who play an indispensable role in the healthcare system. It is imperative to assess how satisfied nurses are with their jobs as well as their quality of life as they possess significant power that can influence the quality of healthcare services. An inquiry into these dimensions will allow nurses and hospital administrators to focus on ways to increase job satisfaction and QOL of nurses and thereby increase their job performance and quality of nursing care and reduce the number of nurses who leave their jobs. (Cimete et al; 2003).

Nursing as a profession embodies myriad challenges, and is considered one of the most stressful jobs as it entails several stressors such as high mental and physical pressure, irregular shifting or scheduling, limited prospects for job promotion and social-emotional pressures in relation to patients and partners, i.e. in their professional life as well as personal life. (Weyers et al; 2006). Interestingly, studies have also shown that nurses' quality of life

¹ (Scholar of Psychology, The Indira Gandhi National Open University, New Delhi, India)

[*Responding Author](#)

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(QOL) may be affected by emotional and physical factors that can influence their job competency. Hence, both job satisfaction and QOL are closely linked to each other, as well as to the quality of nursing care. (Makabe et al; 2015)

Employee satisfaction and patient satisfaction both can be considered important from the hospital point of view. Patient satisfaction forms one of the main outcomes for quality for any patient in a hospital. Studies have shown that overall growth and job satisfaction are important factors to retain hospital employees in the long run. And so, ensuring hospital employees' job satisfaction and motivation is imperative to effectively deliver health services and to retain employees. In a hospital setting, employee satisfaction has been found to be positively related to quality service and patient satisfaction. Employees can directly influence patient satisfaction because of their involvement and interaction with patients. (Nemmaniwar & Deshpande, 2016)

Robbins (2009) defined **Job Satisfaction** as “a positive feeling about one’s job resulting from an evaluation of its characteristics.” It is a feeling of fulfillment or an enjoyment that a person derives from his or her job. Simply put, the level of job satisfaction is an extent to which a person likes or dislikes his job. Multiple factors can influence person’s level of job satisfaction; these factors can range from the level of pay and benefits, perceived fairness of promotion system within the organization, the quality of working conditions to leadership and social relationship. Job satisfaction of the nurses is a crucial indicator of good working environment and management of the institution (Mohite et al; 2012).

WHO (1997) has defined **Quality of Life** as “individuals’ perception of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards, and concerns.” It is a broad ranging concept affected in a complex way by the person's physical health, psychological state, level of independence, social relationships, personal beliefs and their relationship to salient features of their environment.

METHODOLOGY

Hypotheses:

1. There is no significant relationship between job satisfaction and quality of life.
2. There is no significant relationship between gender and job satisfaction.
3. There is no significant relationship between gender and quality of life.
4. There is no significant relationship between age and job satisfaction.
5. There is no significant relationship between age and quality of life.
6. There is no significant relationship between marital status and job satisfaction.
7. There is no significant relationship between marital status and quality of life.
8. There is no significant relationship between work experience and job satisfaction.
9. There is no significant relationship between work experience and quality of life.

Objectives of the study:

The specific objectives of the study were:

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1. To examine the correlations that exist between the different domains of quality of life (as measured by the WHOQOL BREF) and General Job Satisfaction (as measured by the MSQ).
2. To assess the overall level of job satisfaction and quality of life of participating nurses.
3. To study the relationship between job satisfaction and quality of life.
4. To investigate the perceived level of job satisfaction and quality of life by taking into account age, gender, qualification, years of work experience and marital status.

Research Design:

The current study was descriptive and analytical in nature. A cross-sectional survey was conducted using questionnaires, MSQ and WHOQOL-BREF.

Sample Characteristics:

Table 1 shows the demographic characteristics of the participating nurses.

S. No.	Variables	Category	N (%)
1	Age	Below 30	69 (66.34%)
		Above 30	35 (33.65%)
2	Marital status	Married	36 (34.61%)
		Unmarried	68 (65.38%)
3	Education Qualification	B.Sc. (Nursing)	29 (27.8%)
		GNM	72 (69.23%)
		M.Sc. (Nursing)	3 (2.88%)
4	Work experience	Less than 48 months	67 (64.42%)
		48-95 months	30 (28.84%)
		More than 96 months	7 (6.73%)

Sample & Data Collection:

The present study was conducted in a private tertiary care hospital located in New Delhi. A total of 110 questionnaires were distributed to male and female nurses in various wards, out of which 104 respondents completed the survey. The remaining 6 questionnaires were found to be partially filled and hence were not taken into consideration. Therefore, a total of 104 filled forms were taken into account for the final analysis. In all, the sample contains 41 male respondents and 63 female respondents for the present study.

Tool for Data Collection:

Primary data was collected through closed-ended questionnaires. Questionnaires were provided with Likert Scale to measure employee job satisfaction and quality of life.

Instruments Used:

1. Minnesota Satisfaction Questionnaire

The Minnesota Satisfaction Questionnaire (MSQ) is designed to measure an employee's satisfaction with his or her job. Three forms are available: two long forms (1977 version and

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1967 version) and a short form. The MSQ provides more specific information on the aspects of a job that an individual finds rewarding than do more general measures of job satisfaction. The MSQ is a paper-and-pencil inventory of the degree to which vocational needs and values are satisfied on a job. The MSQ can be administered to groups or to individuals and is appropriate for use with individuals who can read at the fifth-grade level or higher. All three forms are gender neutral. The MSQ Long Form requires 15 to 20 minutes to complete. The Short Form requires about 5 minutes.

The MSQ is designed to measure the satisfaction of the individual's needs encountered at work. This 100-item Likert-type questionnaire has 20 subscales with 5 items in each scale. The scales are: ability utilization, achievement, activity, advancement, authority, company policies and practices, compensation, co-workers, creativity, independence, moral values, recognition, responsibility, security, social service, social status, supervision-human relations, supervision-technical, variety, and working conditions (Weiss et al., 1967, p. 02).

The long form of questionnaire consists of 100 items. Each item refers to reinforce in the work environment. The responses indicate how satisfied he/she is with his present job. Five response alternatives are presented for each item. Very dissatisfied, dissatisfied, neither dissatisfied nor satisfied, satisfied, very satisfied.

General satisfaction of individual can be assessed by selected 20 items from the main scale. The most meaningful score to use in interpreting the MSQ are the percentile score for each scale. Ordinary a percentile score 75 or higher would be taken to represent a higher degree of satisfaction, a percentile score of 25 or lower would indicate a lower level of satisfaction and score in the middle range percentile indicate average satisfaction. MSQ makes it possible to obtain a more individualized picture of worker satisfaction than was possible using gross or more general measures of satisfaction with the job as a whole. (Mohite et al; 2012)

2. WHO Quality of Life-BREF (WHOQOL-BREF)

The World Health Organization Quality of Life (WHOQOL) project was initiated in 1991. The aim was to develop an international cross-culturally comparable quality of life assessment instrument. It assesses the individual's perceptions in the context of their culture and value systems, and their personal goals, standards, and concerns. The WHOQOL instruments were developed collaboratively in a number of centers worldwide, and have been widely field-tested.

The WHOQOL-BREF instrument comprises 26 items, which measure the following broad domains: physical health, psychological health, social relationships, and environment. The WHOQOL-BREF is a shorter version of the original instrument that may be more convenient for use in large research studies or clinical trials.²

2(Retrieved from <http://vpr.psych.umn.edu/instruments/msq-minnesota-satisfaction-questionnaire>)

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Statistical Analysis: Results were analyzed using Social Science Statistics. The scores of the different scales were presented as means and standard deviations. Also, student's t-test was performed to compare between two independent means. One-way ANOVA was calculated for comparison between more than two means. Pearson's coefficient of correlation was used to study the relationship between job satisfaction and quality of life as well as across different socio-demographic variables.

RESULTS

The findings indicate an overall high level of job satisfaction- 52.1% among the nursing staff; almost 40.5% of the respondents were satisfied and a little less than 7.5% of the participants were dissatisfied or highly dissatisfied. Almost 84% of respondents were satisfied or highly satisfied with the parameter of *ability utilization*; the chance to use their abilities at their workplace. About 60% of respondents reported that they feel a sense of *accomplishment* from their job. A considerably high number of respondents, i.e. 81% of the participants feel that they are able to keep themselves busy all the time.

Around 66% of respondents feel that they have a good chance of *advancement* in their career. Almost 51% of the participants reported that they feel that they hold some authority, and can delegate tasks to others. Most of the respondents, around 82% were satisfied or highly satisfied with the *policies and practices* of the hospital. Around 78% of the subjects report that they are satisfied or highly satisfied with the *compensation* provided by the organization in terms of their work and pay. About 82% of the respondents were satisfied or highly satisfied with the way their *co-workers* get along with each other. Around 60% of participants feel that they can *creatively* try their own methods of doing the job.

A relatively less number of respondents, i.e. 53% of them feel that they have a *chance to work alone* effectively on the job. A majority of participants, i.e. 92% of them feel that they are able to work in accordance with their *moral values* and conscience. About 91% of the respondents report satisfaction or high level of satisfaction in terms of appreciation or *recognition* received for doing a good job. About 60% of subjects report satisfaction or high satisfaction on the aspect of *responsibility*, i.e. the freedom to use one's own judgment on the job. Almost 80% of respondents report satisfaction or high satisfaction in relation to *job security*, i.e. their job provides for a steady employment.

About 85% of the participants feel satisfied or highly satisfied with the aspect of *social service*, i.e. the chance to do things for other people. Around 66% of the participants feel that they are satisfied or highly satisfied with *the social status* associated with their job, i.e. the chance to be 'somebody' in their community. Almost 64% of the respondents report satisfaction or high satisfaction with regard to the *supervision by their seniors* in terms of handling their subordinates. Around 75% of the participants feel satisfied or highly satisfied in relation to the aspect of *technical supervision*, i.e. the competence of their superiors in making their decisions. Almost 79% of the participants report satisfaction or high level of satisfaction with regard to *variety* the job offers, i.e. the chance to do different things from

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time to time. A majority of participants, i.e. 96% of them report satisfaction or high satisfaction in the context of their *working conditions*.

Table 2 depicts the perceived level of general job satisfaction as well as the specific domains on the WHOQOL-BREF.

Domain 1 (Physical Health) - Almost 70% of the respondents reported a quite high level of quality of life in terms of their overall perception of physical health; around 22% of all participants reported a moderate level of satisfaction in their perceived level of physical health. A little more than 8% of all respondents reported a relatively low level of quality of life with regard to their overall physical health.

Domain 2 (Psychological Health) – A little more than 30% of respondents reported a positive perception of their psychological health. About 55% of the participants reported a moderately high level of satisfaction with regard to their psychological health. Almost 15% reported a relatively low perception of their psychological health.

Domain 3 (Social Relationships) –Almost 47% of the respondents reported a relatively high level of perceived psychological health. Around 40% of respondents were moderately satisfied with their psychological health. Only around 13% of the participants reported a relatively low perceived psychological health.

Domain 4 (Environment) – Almost 46% of the respondents reported a high level of perceived physical and home environment. About 42% of respondents reported a moderate level of satisfaction in this particular domain. Around 12% reported a low level of satisfaction with regard to the physical environment.

Overall, it was observed that around 30% of the respondents had a high or positive perception in terms of an overall quality of life. About 66% of respondents reported a moderate level of satisfaction overall. And, a little less than 4% of the participants were observed to have a relatively low perceived quality of life, overall.

Table 2. The perceived level of general job satisfaction as well as the specific domains on the WHOQOL-BREF

Category	Level of Satisfaction	Overall %
DOMAIN I (Physical)	UNSAT (9)	8.65
	SAT (23)	22.11
	HIGHLY SAT (72)	69.23
DOMAIN II (Psychological)	UNSAT (15)	14.42
	SAT (57)	54.80
	HIGHLY SAT (32)	30.76
DOMAIN III (Social)	UNSAT (12)	11.53
	SAT (44)	42.30
	HIGHLY SAT (48)	46.15

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Category	Level of Satisfaction	Overall %
DOMAIN IV (Environment)	UNSAT (15)	14.42
	SAT (61)	58.65
	HIGHLY SAT (28)	26.92
OVERALL QOL	UNSAT (4)	3.84
	SAT (69)	66.34
	HIGHLY SAT (31)	29.80
JOB SATISFACTION	UNSAT (7)	6.73
	SAT (53)	50.96
	HIGHLY SAT (44)	42.30

Table 3 illustrates the perceived satisfaction with regard to the various domains of quality of life as well as general job satisfaction among male nurses. The findings reflect that among male respondents, a little less than 5% of the total male respondents did not perceive their physical health to be highly positive. Almost 13% of the male respondents reported a relatively high level of their physical wellbeing. A little more than 82% of all the male participants were observed to have rated a high degree of perceived physical health, i.e. the first domain in measuring the quality of life.

In relation to the second domain, i.e. the psychological wellbeing, around 15% of the male respondents were observed to have a relatively low level of psychological well-being. Almost 61% of the male participants reported a moderate or satisfactory level of their psychological wellbeing and 24% of the male respondents reported a high degree of psychological well-being.

With regard to the third domain, a little more than 14% of the male respondents were observed to have a relatively low score on this domain, i.e. of social relationships. About 49% of the male participants were moderately satisfied on this dimension and almost 37% of the male respondents were observed to have a relatively high score on this domain.

On the last domain, i.e. the environment, a little more than 12% of the male respondents were observed to have a low level of satisfaction on this dimension. About 51% of the male respondents were observed to have a moderate level of satisfaction on this dimension. Almost 37% of the male respondents were observed to have a high degree of satisfaction on this domain.

On the aspect of job satisfaction, about 7% of all the male respondents were reported to have a low level of satisfaction, a little more than 46% of all the male respondents were moderately satisfied and another 46% of all the male participants were highly satisfied with their job.

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Table 3. The perceived satisfaction with regard to the various domains of quality of life as well as general job satisfaction among male nurses

Category	Level of Satisfaction	Married males (14/41)	Unmarried males (27/41)	%
DOMAIN I (Physical)	UNSAT (2)	1	1	4.87
	SAT (5)	2	3	12.19
	HIGHLY SAT (34)	11	23	82.92
DOMAIN II (Psychological)	UNSAT (6)	1	5	14.63
	SAT (25)	9	16	60.97
	HIGHLY SAT (10)	4	6	24.39
DOMAIN III (Social)	UNSAT (6)	1	5	14.63
	SAT (20)	7	13	48.78
	HIGHLY SAT (15)	6	9	36.58
DOMAIN IV (Environment)	UNSAT (5)	2	3	12.19
	SAT (21)	9	12	51.21
	HIGHLY SAT (15)	3	12	36.58
JOB SATISFACTION	UNSAT (3)	1	2	7.31
	SAT (19)	4	15	46.34
	HIGHLY SAT (19)	9	10	46.34

Table 4 demonstrates the perceived satisfaction with regard to the various domains of quality of life as well as general job satisfaction among female nurses. In the first domain, i.e. physical health, almost 11% of all the female respondents were not as satisfied with regard to this dimension. About 29% of all the female respondents were moderately satisfied with this dimension. About 60% of all the female respondents were observed to have a high degree of positive perception of their physical health.

With regard to the second domain, i.e. psychological wellbeing, about 14% of all the female respondents reported a relatively low degree of psychological well-being. Around 51% of all the female respondents were moderately satisfied with their psychological well-being. Almost 35% of all the female respondents reported a high level of satisfaction with this dimension.

In the third domain, i.e. social relationships, a little less than 10% of all the female respondents reported a low score on this domain. About 38% of all the female respondents were moderately satisfied with their perceived social relationships. Around 52% of all the female participants reported a high degree of satisfaction in terms of their social relationships.

In the fourth domain, i.e. the environment, almost 16% of all the female respondents reported a low score on this domain. Almost 64% of all the female respondents reported a moderate

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level of satisfaction in this domain. Around 20% of all the female respondents were observed to have reported a relatively high level of satisfaction with this domain.

On the aspect of job satisfaction, a little more than 6% of all the female respondents were reported to have a low level of satisfaction, almost 54% of all the female respondents were moderately satisfied and about 40% of all the female participants were highly satisfied with their job.

Table 4. The perceived satisfaction with regard to the various domains of quality of life as well as general job satisfaction among female nurses

QOL Domains	Level of satisfaction	Married females (22/63)	Unmarried females (41/63)	%
DOMAIN I (Physical)	UNSAT (7)	4	3	11.11
	SAT (18)	8	10	28.57
	HIGHLY SAT (38)	10	28	60.31
DOMAIN II (Psychological)	UNSAT (9)	4	5	14.28
	SAT (32)	10	22	50.79
	HIGHLY SAT (22)	8	14	34.92
DOMAIN III (Social)	UNSAT (6)	1	5	9.52
	SAT (24)	7	17	38.09
	HIGHLY SAT (33)	14	19	52.38
DOMAIN IV (Environment)	UNSAT (10)	2	8	15.87
	SAT (40)	11	29	63.49
	HIGHLY SAT (13)	9	4	20.63
JOB SATISFACTION	UNSAT (4)	1	3	6.34
	SAT (34)	10	24	53.96
	HIGHLY SAT (25)	11	14	39.68

Mean scores of nurses, which were received from domains of QOL scale were 3.75 (on a scale of 5) on perceived general QOL, 81.6 on physical, 66.29 on psychological, on social, and 68.46 on the environmental domain (as computed on a scale of 100). General Job satisfaction mean score of nurses was 78.51, reflecting a moderately high level of job satisfaction.

As can be seen in Table 5, there is a positive but not a strong correlation between QOL domains and job satisfaction of nurses. The strongest correlation was found between job satisfaction and physical domain, followed by the correlation between environmental domain and job satisfaction.

When perceived general QOL score of nurses was analyzed according to some variables, it was found that the increase in score of perceived general QOL was in accordance to the

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increase in age, and duration of work experience. The differences between mean scores of subgroups of the aforementioned were found to be statistically significant. (Table 6)

As is evident from the analysis (Table 7), the mean scores of nurses received on the psychological and environmental domains differed significantly from one age group to another. However, overall, in both the age groups, i.e. below 30 years and over 30 years, the highest mean score was obtained on the physical domain. Furthermore, the mean score of respondents above 30 years was found to be a relatively higher than those below 30 on general job satisfaction.

With regard to marital status, there were statistically significant differences between the nurses' scores on the social domain (Table 8). It was observed that married nurses scored a relatively higher mean score on this domain in relation to those who were unmarried. Interestingly, the mean score of married nurses was relatively higher than unmarried nurses on general job satisfaction scale. (Table 9)

Table 5. Correlation between different domains of Quality of life (QOL) and Job Satisfaction

S.NO	DOMAIN	JOB SATISFACTION	
		r	p
I	Physical	0.271854	0.005
II	Psychological	0.063539	0.51
II	Social	0.09366	0.34
IV	Environmental	0.246143	0.011829

Table 6. Correlation between Age & Job Satisfaction, Age & QOL; Work ex & Job Satisfaction, Work ex and QOL.

S.No	Variable	Job Satisfaction		QOL	
		r	p	r	p
1.	Age	0.193	0.049	0.273	0.005
2	Work Ex	0.281	0.004	0.402	<0.005

Table 7. Mean differences of QOL domains according to gender, age, marital status and work experience

Variables	QOL							
	Physical		Psychological		Social		Environmental	
	MEAN	SD	MEAN	SD	MEAN	SD	MEAN	SD
GENDER								
Male (N-41)	81.61	14.51	66.29	16.62	68.46	20.89	68.58	17.36
Female (N-63)	73.71	18.04	64.61	15.49	73.63	20.76	63.74	15.48

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Student t test,(p)	2.34 (.02)		0.28 (0.39)		-1.23 (0.11)		1.46 (.07)	
AGE								
>30yrs (n-35)	79.34	15.34	69.89	16.02	71.58	19.6	74.27	16.5
<30yrs (n-69)	75.85	17.75	63.49	15.58	71.6	21.45	62.23	15.05
Student t test,(p)	- 0.93 (0.18)		-1.86 (0.03)		0.003 (0.49)		-3.53 (0.0003)	
MARITAL STATUS								
Married (n-36)	74.22	19.41	67.67	16.7	76.27	20.78	69.08	16.42
Single (n- 68)	78.15	15.77	64.01	15.38	69.12	20.6	63.76	16.08
Student t-test,(p)	-1.12 (0.13)		1.11 (0.27)		1.67 (0.04)		1.47 (0.07)	
DURATION OF WORK EXP								
<48 mths (n-67)	74.82	17.88	65.07	15.63	70.16	22.06	66.04	15.23
48 – 95 mths (n-30)	83.33	12.38	65.5	17.78	74.2	19.29	72.75	11.83
>96mths (n-7)	72.42	21.21	66.28	7.26	74.14	12.68	89.4	6.54
ANOVA F Test ,(p)	2.27 (> 0.05)		0.02 (>0.05)		0.43 (>0.05)		18.9 (0.000)	

Table 8. Mean differences of job in general domain according to personal and socio-demographic variables of nurses.

Variables	JOB SATISFACTION	
	MEAN	SD
GENDER		
Male (N-41)	78.51	10.84
Female (N-63)	79.03	12.26
Student t test,(p)	-0.28 (>0.05)	
AGE		
>30yrs (n-29)	80.59	12.71
<30yrs (n-75)	78.24	10.59
Student t test,(p)	-0.95 (>0.05)	
MARITAL STATUS		
Married (n-36)	80.79	11.91
Single (n- 68)	77.41	10.74
Student t test,(p)	1.86 (0.03)	
DURATION OF WORK EX		
<48 mths (n-67)	77.02	10.82
48 – 95 mths (n-30)	81.93	9.76
>96mths (n-7)	83.71	15.39
F (p)	2.74 (0.07)	

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Table 9. Chi value & P value computed across different domains in relation to marital status.

QOL Domains	Level of Satisfaction	Married male (14/104)	Unmarried male (27/104)	Married female (22/104)	Unmarried female (41/104)	Chi Value	P value
DOMAIN I	UNSAT (9)	1	1	4	3	10.1468	p-value is .118606 The result is not significant at $p < .05$.
	SAT (23)	2	3	8	10		
	HIGHLY SAT (72)	11	23	10	28		
DOMAIN II	UNSAT(15)	1	5	4	5	2.9119	p-value is .819817. The result is not significant at $p < .05$.
	SAT (57)	9	16	10	22		
	HIGHLY SAT (32)	4	6	8	14		
DOMAIN III	UNSAT (12)	1	5	1	5	5.7665	p-value is .449851. The result is not significant at $p < .05$.
	SAT (44)	7	13	7	17		
	HIGHLY SAT (48)	6	9	14	19		
DOMAIN IV	UNSAT (15)	2	3	2	8	13.0032	.042985 The result is significant at $p < .05$.
	SAT (61)	9	12	11	29		
	HIGHLY SAT (28)	3	12	9	4		
OVERALL QOL	UNSAT (4)	1	1	1	1	13.109	.041338. The result is not significant at $p < .05$.
	SAT (69)	10	11	18	30		
	HIGHLY SAT (31)	3	15	3	10		
Job Satisfaction	UNSAT (7)	1	2	1	3	5.0094	p-value is .542609. The result is not significant at $p < .05$.
	SAT (53)	4	15	10	24		
	HIGHLY SAT (44)	9	10	11	14		

DISCUSSION

The aim of this research was to measure the level of job satisfaction of nurses and also to determine the quality of life of nurses. For the current study, MSQ Long Form and WHOQOL-BREF were used to obtain data so as to gain a comprehensive picture of the same. The questionnaires were returned by 104 nurses; giving a response rate of 96.9%, after excluding non-acceptable, incomplete forms. The response rate was considerably high and the reason for same may be attributed to the high interest of nurses in the topic of the study, as well as its contemporary relevance in an organizational setting.

As far as the general QOL of the respondents is concerned, it was discovered that 95.74% considered it as either good (satisfied) or very good (highly satisfied) and almost 5% as slightly bad. However, it is interesting to note that these findings are not in line with other studies, such as those undertaken by scholars like Cimete et al (2003) wherein the perceived

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general QOL of the participants (nurses) only a small percentage (17.3%) of nurses perceived their QOL as good, as 65.7% considered it as neither good nor bad and 17% as slightly bad. In Esen et al's group of nurses, 46.5% considered their QOL as moderate and 32% as bad. According to the findings of this study, it can be inferred that the majority of respondents feel positive about their perceived overall quality of life across all the four domains being measured.

In the current study, it was found that 91.34% of all the participants were satisfied or highly satisfied with their physical health. This percentage is better than a similar study which was conducted in a hospital in Saudi Arabia. (Ibrahim et al; 2016) In their study, they found that only 60% of all the respondents reported satisfaction with their general health. Their finding was reportedly better than the rate observed from an Iranian study. (Aalaa et al; 2012) The difference in results may be attributed to the sample demographics, such as those related to the mean age. In the Saudi Arabian study, it has been reported that the mean age of the respondents was 39.0. However, in the current study, the mean age of the respondents is 27.4. The fact that this study deals with relatively younger employees, differences in perception of physical health are likely to arise.

The present study revealed that the highest mean QOL score was for the physical health domain (16.3), while the lowest was for the environmental domain (14.58). Interestingly, these findings are in alignment with the findings from Saudi Arabia, wherein the mean score on the environmental domain (16.02) was the lowest of all. (Ibrahim et al; 2016). Moreover, the study conducted by Cimete et al. (2003) also found that the mean score of nurses in the environmental domain was considerably low; the cause of low mean score (11.20) on this particular domain may have occurred because a majority of nurses came from diverse socioeconomic and regional backgrounds, i.e. from different parts of the country, and had to live away from their hometown. The same was reported in the Saudi Arabian study; the majority of nurses were non-Saudi (foreigners) and lived outside their home country. (p.495)

The results of the present study showed that there is a positive yet not a very strong correlation between age and quality of life ($r= 0.273$). In fact, the findings of the current study on this dimension are in line with those revealed in the Saudi Arabian study wherein the authors observed that nurses aged more than 30 years obtained significantly better mean QOL scores in the physical, psychological and social domains as compared to younger nurses (p.495).

Similarly, the results of the current study show a weak but positive correlation ($r= 0.402$) between work experience and quality of life. The findings were indeed in line with the results revealed in the Saudi Arabian study wherein the authors reported that increasing the duration of work experience was associated with better mean scores of the same QOL scores. Moreover, the findings of the study conducted by Hayne et al. (2009) also revealed a positive relationship between work experience and quality of life.

In the present study, the marital status of the respondents was observed to have a positive impact on the perceived quality of life, especially on the psychological, social and

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environmental domains. It was found that both male and female nurses, who were married, reported relatively higher scores on the above-mentioned domains. These results coincide with a study done by Ibrahim et al. (2012) which also observed that married nurses reported better scores on the social domain as compared to those who were unmarried.

Similarly, they found that their findings were in line with studies from Japan (Makabe et al; 2015) and Turkey (Cimete et al; 2003). In the latter study, the authors argue that married nurses were at an advantage when their social domain scores were considered. This might be due to the sexual satisfaction and to the enlarged circle of new friends they have. (p. 156)

However, in the case of nurses from Istanbul, it was found that unmarried nurses received a high score on the psychological domain which the authors argue, can be attributed to the fact that they were free from the responsibilities of marriage. Nevertheless, it may be more useful to take into account other factors besides marital statuses, such as nationality, education, financial status, etc.

The results of the present study pertaining to the aspect of general satisfaction on the MSQ revealed that the mean score on this dimension was 78.89. This indicates a moderate level of general job satisfaction (on a scale of 100). Interestingly, the findings of the study conducted by Cimete et al. (2003) in Istanbul (using the MSQ short form), resonated with the findings of the current study. In their study, it was observed that the mean score of nurses on general job satisfaction was 3.21, suggesting a moderate satisfaction level.

In the present study, it was evident that a positive correlation, though not a very strong one seemed to exist between QOL and job satisfaction of nurses. This was in line with the results of Cimete et al. (2003). The same observation was made by Ibrahim et al. (2016) in their study as they found positive correlations though not strong enough, between the scores of QOL domains and job satisfaction (JDI/JIG). This suggests that the favorable conditions of one field will positively affect the other.

According to the findings, the most prominent satisfaction factors in which the participants reported relatively high satisfaction levels were the aspects of working conditions, moral values, and recognition. These findings reflect the significance of 'hygiene' and 'motivational' factors as proposed by Herzberg. The former mainly concern organization factors such as policies and procedures, salary, physical working conditions, etc. and the latter concern the aspects of achievement, personal growth, responsibility, recognition, etc. In this study, the parameters of authority and independence were the aspects wherein the nurses derived relatively low satisfaction.

The findings of the current study were partially in line with the study conducted by Selebi C. & Minnar A. (2007) on job satisfaction among nurses working in a public hospital in South Africa. They found that all nurses experienced low satisfaction with the motivational aspects of their job, such as responsibility, the opportunity for creativity and innovation, independence, and recognition. Nurses also experienced very low levels of satisfaction with

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the hygiene aspects of their job, namely relationships in the workplace, supervisors' decision-making skills, supervision, working conditions, policies, job security, and salaries. The findings of the present study also indicated the relatively low level of satisfaction with the parameters of creativity and independence, although the respondents were quite satisfied with the amount of recognition they received for their work.

The findings of the present study did not seem to reveal a significant difference between male nurses and female nurses in terms of the overall level of general job satisfaction. However, it is interesting to note that in relation to marital status, it was observed that more married respondents reported a slightly higher level of general job satisfaction, regardless of their gender.

The results of the current study suggested that age and job satisfaction have a positive yet not a very strong correlation between them ($r=0.193$). In the present study, the respondents were predominantly young, and so may strive for more success and personal growth in their career, and hence may not feel as satisfied as their senior colleagues. The results were in line with the findings obtained from the study undertaken by Ibrahim et al. (2016), wherein the mean score of JIG (job in general) was significantly increased by increasing years of work experience. Moreover, also in the study conducted by Cemete et al. (2003), it was noticed that as working years increased with age, so did job satisfaction. The findings of the present study may reflect varying results on the same due to relatively more number of respondents with less number of work experience as opposed to other studies with a larger sample size and higher mean years of work experience.

However, as far as the overall job satisfaction is concerned, the results of the current study reflect that a considerably large number of all nurses were satisfied or highly satisfied with their jobs which is in contrast to the findings of Selebi C., & Minnar A. (2007) who discovered that the overall rate of satisfaction among nurses was quite low. They suggest that some of the aspects need to be considered in formulating a human resource planning strategy for nurses. For instance, with respect to their study, the hospital and nursing management may need to improvise policies related to nurses' salaries, supervision methods and relationships, and also the implementation of health policies. With regard to the current study, factors like creativity and independence at work could be emphasized to improve the perceived level of job satisfaction among nurses.

LIMITATIONS OF THE STUDY

Sample size- The size of the sample is relatively small and unevenly distributed as there is a lesser number of males in relation to females. Hence, it may be difficult to generalize the results of the study.

Credibility of responses- Although the participants were informed about the nature and purpose of study in terms of confidentiality and other ethical concerns, the credibility of responses may be questioned as the subjects are formally the 'employees' of the organization and may feel the need to portray a "good" image of themselves in the context of job

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satisfaction and quality of life. Many respondents may have felt hesitant to answer some of the questions which probed their personal lives. Also, some respondents are less likely to answer the questions genuinely due to sheer lack of interest and may respond hastily without adequately thinking through the same.

Structure and nature of questionnaires used- The two questionnaires used were closed-ended, with rigid choices. Even though the questionnaires used were standardized, the formulation/language of the questions may have seemed to be abstract, which may have confused some respondents while causing them trouble in grasping the intended meaning of some questions. Also, subjective understanding and interpretation of the questions on part of the participants may not yield always precise answers. This may have hampered the quality of answers being provided.

Other methods could have been used- One of the most striking limitations is that other methods of data collection like face to face interviews could also have been used to gather data. However, due to the paucity of time on part of the subjects, and other issues, it was not viable to carry out interviews with the respondents.

Lack of detail in the present study- Only quantitative research has been used in the present study. The use of qualitative research could have yielded rich insights and enhanced the understanding and analysis of several important aspects of the study.

The study was confined to the employees working in a private hospital- Comparative method could have been employed to analyze the differences between the results obtained from employees working in a private hospital and those working in a government hospital on the various parameters of the study.

SUMMARY & CONCLUSION

After an analysis of the findings, it was found that there exists a positive correlation between job satisfaction and quality of life of nurses. This means that there is empirical evidence to support the view that the various aspects of work life are indeed intricately related to the overall quality of life and vice-versa. The results of the study showed that the majority of nurses in the current study perceived their general QOL as very good and good. On the MSQ, the respondents were found to be the most satisfied with the aspects of working conditions, moral values, and recognition, while they were reportedly least satisfied with the aspects of creativity, authority and independence. The findings also revealed that scores on MSQ (job satisfaction) and WHOQOL (quality of life) varied significantly in accordance with the age, gender, marital status and work experience of the participating nurses.

IMPLICATIONS OF THE STUDY

By shedding light on the level of job satisfaction among employees, the present study attempted to unravel the various factors which contribute towards determining the same, which may be monetary or non-monetary in nature. Thus, the present study can be used by

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researchers and practitioners in the fields of human resource management, organizational behavior, organizational development, and other specialists who intend to study or improve employees' satisfaction at work, by taking into consideration its dynamic relationship with quality of life and vice-versa which can help them achieve greater productivity at work, increased organizational commitment and motivation, thereby improving the performance of the organization as a whole.

The nature and scope of the study can further be extended. Duration of the study, larger sample size and subjective factors can be taken into account in order to yield a more comprehensive understanding of the key areas or goals of the study. Moreover, several other parameters or variables can be taken into consideration to extend its scope, such as working hours or nature of duty, number of children, nationality, religion, socioeconomic background, and so on. In this regard, the current study can be likened to a pilot study, which can be utilized to enhance the scope and implications of the same in future.

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Conflict of Interest

The authors colorfully declare this paper to bear not a conflict of interests

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