Job satisfaction among nurses working in public health facilities at Kisarawe district

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JOB SATISFACTION AMONG NURSES WORKING IN PUBLIC HEALTH FACILITIES AT KISARAWE DISTRICT

By

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A Dissertation Submitted in (Partial) Fulfilment of the Requirements for the Degree of Master of Public Health of

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CERTIFICATION

The undersigned certifies that he has read and hereby recommend for acceptance by Muhimbili Muhimbili University of Health and Allied Science as dissertation entitled; "Job Satisfaction Among Nurses Working in Public Health Facilities at Kisarawe District" in (partial) fulfilment of the requirements for the degree of Master of Public of Muhimbili University of Health Allied Sciences.

Dr. Billy Ngasala

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Date

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DEDICATION

This work is dedicated to my beloved parents who raised me, loved and supported me and also taught me the value of hard work. Also my husband Winfred, my children Wilson, Wilbert and Wilhelm without his encouragement and support it would have been very challenging for me to complete my studies. They are my models of courage, determination and achievements.

ABSTRACT

Background

Job satisfaction is an important part of nurse's lives, inducing patient safety, productivity, performance, quality of care, retention, turnover, commitment to the organization and the profession. Little is known about factors of job satisfaction and their relationship with overall job satisfaction among nurses working in Public health sectors. Satisfaction with one's job can affect not only motivation at work but also career decisions, relationship with others and personal health. Job satisfaction is also an essential part of ensuring high quality care. Dissatisfied nurse give poor quality, less efficient care. Interventions need to be implemented in order to improve the level of job satisfaction among nurses working in public health facilities at Kisarawe district.

Objectives

The aim of the study was to explore factors affecting job satisfaction among nurses working in public health facilities in Kisarawe district.

Methodology

The study was conducted at Kisarawe district. This was a qualitative study using convenient sampling technique whereby interview guide was used for In-depth interviews and focus group discussion to gather the information from the respondents. A total of 30 respondents were recruited for participating in the study. Twenty four (24) registered nurse were recruited in Focus group discussion which comprises 6-10 nurses in the group and six (6) nurse supervisors were recruited for in- depth interview in data collection. Analysis using Qualitative Content Analysis (QCA) was applied to examine job satisfaction among nurses and understand the factors affecting their work environment.

Results

Public-sector nurses were most dissatisfied with their pay, the workload and working condition and resources available to them. However participants explained that they will be satisfied if working conditions (i.e. hours of work, rest periods and work schedule being given and well-thought-out for nurses) staff remuneration in terms of salaries and other benefits being given accommodation at the nearby hospital and better relationship with their supervisors.

Conclusion:

The study has shown that nurses working in public health sector they were not satisfied with their job. Intervention to address factors affecting job satisfaction in public sectors is needed therefore criteria for nurses who are supposed to be promoted in their career should be given the opportunities, the factors of incentives in monetary recognition supervision, value and working condition are the important elements for nurses be satisfied with their job and improve quality of service provided.

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LIST OF ABBREVIATIONS

MUHAS Muhimbili University of Health and Allied Sciences

RN Registered Nurse

EN Enrolled Nurse

DED District Executive Director

MoHCDGE Ministry of Health, Community Development, Gender, Elderly and Children

FGD Focus Group Discussion

HSSE Health System Strengthening for Equity

WHO World Health Organization

DH District Hospital

HC Health Centre

DIS Dispensary

SSA Sub Sahara Africa

CAR Central Africa Republic

FGD Focus Group Discussion.

KII Key Interview.

QCA Qualitative Content Analysis.

NGO Non-Government Organization.

SPHSS School of Public health and Social sciences.

DEFINITION OF KEY TERMS

Job satisfaction is the attitudes and feelings people have about their work. A positive attitude towards work indicates job satisfaction whereas negative attitudes show job dissatisfaction Armstrong (2006).

Job satisfaction is more related to individual than to external factors. Mullins (2002) considered it as more of an attitude or an internal state which could be associated with a personal feeling of attainment. Job satisfaction is the extent to which one is happy with their job hence an employee's willingness to perform at an optimum level (Hoffman-Miller 2013).

Nurse is a person who has completed a program of basic, generalized nursing education and is authorized by the appropriate regulatory authority to practice nursing in his/her country. She is prepared and authorized to engage in the general scope of nursing practice, including the promotion of health, prevention of illness, and care of physically ill, mentally ill, and disabled people of all ages and in all health care and other community settings; to carry out health care teaching; to participate fully as a member of the health care team; to supervise and train nursing and health care auxiliaries; and to be involved in research. (ICN, 1987)

Registered nurse are self-regulated health care professionals who work autonomously and in collaboration with others. RNs enable individuals, families, groups, communities and populations to achieve their optimal level of health. RNs coordinate health care, deliver direct services and support clients in their self-care decisions and actions in situations of health, illness, injury and disability in all stages of life. RNs contribute to the health care system through their work in direct practice education, administration, and research and policy in a wide array of settings" (CNA2007 p.5).

Intrinsic Factors i.e. (recognition and responsibilities) factors which facilitate higher satisfaction and performance.

Extrinsic Factors is the external variables which are generally regarded as primary sources of job dissatisfaction example salary, job security, work load, working condition

CHAPTER ONE

1.0 INTRODUCTION

The overall purpose of this research paper is to investigate the factors affecting job satisfaction among nurses working in Public Health facilities in Kisarawe District. This chapter discusses the background information, statement of the problem, objective of the study, research objectives, research questions, and significance of the study. This study is an inquiry into exploring the perceptions of nursing professionals themselves and which are the factors that can lead to better job satisfaction in the public service how being implemented and its effects on nurses performing their duties.

1.1 Background information

Nursing is a demanding profession which needs a sound physical and mental health. As the nursing profession has vital role in our hospitals. The satisfaction of nurse will ultimately impact on quality of work and continuing of the nursing profession in the same hospital for the long time (18). Satisfaction with any profession increases the performance of individuals. Job satisfaction of nurses is of great importance because mentally satisfied nurses perform well and keep on working in the same institute (13). Health services are affected by many factors among these human resources is a vital component in delivering health services. Job satisfaction of the health workers is highly important in building up employee motivation and efficiency as higher job satisfaction determine better employee performance and higher level of patients' satisfaction. Job dissatisfaction resulting in burn out and turn over would exacerbate the current shortage and results in serious under staffing of health care facilities. This has a negative impact on the delivery of patient care as there is evidence to suggest that reduction in nurse professional staff below certain level is related to poor patient outcomes.

1.2 Background of the problem

Nurses make up the largest group of healthcare providers working within health services and they contribute significantly to the quality and delivery of patient care (1). Nurse shortages and high nurse turnover continue to be among the most vexing problems for healthcare systems worldwide. These two issues have become of great concern in many countries, including Tanzania. Many factors affect the worldwide shortage of nurses; these include a decrease in the number of students wishing to study nursing, a shortage of nurses entering the profession following graduation and job dissatisfaction among practicing nurses, which results in many nurses leaving the profession (14). According to Aiken et al. (2001), work overload is the main cause for job dissatisfaction among nursing staff in many countries.

An increase the demand for nurses is growing since resources are always limited and costs are high; there isn't sufficient supply to meet this demand (14). Lack of nurses and leaving the profession, is a worldwide problem in both developed countries and developing countries (6). Survey shows that lack of job satisfaction is one of affecting factors to leave the nursing profession. One third of nurses in England and Scotland, and more than one-fifth of the American nurses have a tendency to leave their profession (15). Bahabadi and associates study results showed that 2/3% of the nurses leave their profession and did not have desire to return to work under any circumstances (31). Almost in all countries, the most important part of the health workforce (insome80%) are nurses. Today the world is facing workforce crisis and one of the most striking examples is the shortage of nurses (12).

Different countries have to check the status of job satisfaction in working order and, have been studied job satisfaction indifferent perspective. The highest job satisfaction showed in the U.S. (41%) followed by Scotland (38%), the UK (36%), Canada (33%) and Germany (17%) (4). Roman suggested in his article that, nursing shortage will reach its maximum in the years 2015 and 2020. This shortage is has negative impacts on achieving to global goals of health systems and professional grievances of nurses (22). Taylor in his research in America showed that productivity and job satisfaction of nurses will increase by patient care quality (37).

Monjamed and colleagues in their study showed that the dissatisfaction of the nurses can be due to long working hours, workplace conditions, and weakness in the way of reward and punishment and evaluation method (32). Adams and Bond in their study concluded that organizational factors are more important than individual factors in the prediction of the nurses' job satisfaction (27). Lu Research is also suggests that factors such as education level, shifts and tasks can be effective on job satisfaction (13). Stress among nursing is considered as a major problem worldwide (12).

Stress associated with health and level of job satisfaction of nurses will ultimately has an influence on the quality of care they provide to patients (34). Number of stressors affects health team members that causes stress, i.e. high workload, emergency cases, communication and relationship with patients' families, understaffed and absence of care from their seniors. Past research indicates that one of the several reasons nurses left the nursing profession of nursing is job dissatisfaction (52)

Nurses who were not satisfied at work were also found to distance themselves from their patients and their nursing chores, resulting in suboptimal quality of care. Dissatisfaction with work can cause poor job performance, lower productivity, and staff turnover and is costly to organizations. The relationship between job satisfaction and performance was found to be even higher for complex (e.g., professional) jobs than for less complex jobs (5). In addition, most importantly there is growing evidence of the association between health care workers' job satisfaction and the outcome of health care. Stress and illness contribute to poor clinical judgment, risking harm to patients; stressed workers are vulnerable to injury and have a higher absenteeism rate (8)

In Saudi Arabia, several research studies that have been conducted in various geographical regions have examined job satisfaction among combined cohorts of Saudi and non-Saudi nurses working in both the private and public healthcare sectors. These studies included a variety of related variables, such as job satisfaction and organisational commitment, leadership style, hospital performance and job satisfaction, as well as burnout and intention to stay (29).

According to these studies, job dissatisfaction was mainly attributed to organisational commitments, payment, rewards and operating conditions, social views, company policy, administration, hospital policies and recognition.

While many studies have been done to address the subject of level of job satisfaction among nursing staff, however very few have been conducted in Pakistan, especially in the recent past. Elsewhere poor salaries, poor working conditions, no fringe benefits, job insecurity, nepotism, political influences, lack of training opportunities and improper career development structure are the notable factors which hinder the qualified nurses to join public sector (39). The already employed nursing staff also seems to be less satisfied due to many unidentified factors and hence there is a constant threat of attrition among nursing professionals in public sector organizations in Pakistan.

A study on work satisfaction of professional nurses in South Africa by Pillay (2008) indicated overall dissatisfaction among South African nurses and highlighted the disparity between levels of job satisfaction in the public and private sectors. Another South African study found that organizational factors and poor working conditions were strongly associated with job dissatisfaction, while the social aspects of the job were found to be a strong predictor of job satisfaction (24).

1.3 Tanzania Contexts

Health care workers, including nurse and non-physician clinicians, are well-established within the public health systems of Tanzania. Recent studies provide strong evidence for the clinical efficacy and economic value of these cadres, particularly in the provision of emergency obstetric care. Given these indicators, it is important to recruit, retain and support these cadres to build the capacity of health systems in low-income countries. However, employment conditions in resource-poor health care settings are characterized by high levels of work demand coupled with poor working environments. Together these conditions lead to job dissatisfaction and demotivation, which negatively impacts outcomes such as worker productivity and retention of staff.

Understanding the main factors that contribute to job satisfaction levels and diminish intention to leave is an important strategy towards ultimately improving delivery of emergency obstetric care, reducing maternal mortality and improving the health, performance and retention of health care workers. The Health Systems Strengthening for Equity: The Power and Potential of the Mid-Level Provider (HSSE) project used several well-established tools, validated in both high-income and low resource settings including Africa, and critical incident interviews to assess both personal and workplace-related contributors to job satisfaction and the intention to leave one's current position. The study was conducted among doctors and mid-level in emergency obstetric care hospitals and health centers in Malawi, providers delivering Mozambique and Tanzania. The urgency of understanding the factors impacting job satisfaction and intention to leave cannot be overestimated. The HSSE study revealed that between one-quarter and one-third of staff surveyed had seriously thought about leaving their current positions the percentage was higher in Malawi (33%) than in Mozambique (29%) and Tanzania (27%). In Malawi, 22% of staff surveyed indicated that they were actively seeking other employment. This was considerably higher than the corresponding figures for Tanzania (14%) and Mozambique (8%). This policy brief summarizes the key findings related to job satisfaction and retention and explores the policy implications of these findings. Particular attention is paid to the important role of supervision to improve job satisfaction and increase retention of healthcare providers

(.http://www.amddprogram.org/sites/default/files/Job satisfaction)

1.4 Statement of the Problem

Job satisfaction is currently considered to be a measure that should be included in quality improvement programs. In health care organizations, it is very essential to determine factors associated with job satisfaction since this will ensure the provision of quality of care, as well as organizational efficiency, and effectiveness. Additionally, job satisfaction ensures the sustainability of nurses professionals in the health care systems.

Dissatisfied nurse are more likely to be inefficient and to provide poor quality care, and sometimes may react irrationally. All these will lead to unnecessary costs (European Commission, 2002).

The recent trend of strikes among nurses, including at the Kisarawe district calls for an assessment of job satisfaction among nurses. Striking is known to be one of the ways that employees deploy to demonstrate their dissatisfaction with their working environment. However, striking in health care provision is the worst thing to happen as it causes devastating outcomes. Thus there is a need to recognize the factors of job satisfaction in our health care workers so as to avoid such occurrences in the future.

A number of studies done in different parts of the world, on job satisfaction have focused on the general aspects of job satisfaction and motivation and not on actual determinants of job satisfaction (42). Literature is particularly limited on determinants of job satisfaction among health care workers in Tanzanian public hospitals, and particularly at Kisarawe district. While the study done by Leshabari (2008). Focused on motivation and factors associated with low motivation, this study addressed the issue of level of job satisfaction among HCW, as well as the determinants of the different degrees of job satisfaction among health care workers.

This study particularly focused on nurses, a health cadre that is much closer to patients. It is therefore important that factors that influence their level of job satisfaction are documented to form a reference point for arguing for better treatment. Better handling of nurses has vast impact on their level of satisfaction which in turn contribute to job performance and quality of health care. Job satisfaction has an impact on the practicing of nursing professionals in a way that influences efficiency, productivity and quality of delivered care.

Therefore this study investigated on the degree and factors of job satisfaction and provide information that would be used to overcome dissatisfaction and hence improving the quality care delivery.

1.5 Study Objectives

To investigate factors affecting job satisfaction among nurses working in public health facilities in Kisarawe district.

1.5.1 Specific objectives:

- 1. To determine level of job satisfaction among nurses in public health facilities at Kisarawe District.
- 2. To identify the factors which influence job satisfaction among nurses working in public health facilities at Kisarawe District.
- 3. To determine the relationship between demographic characteristics (age, gender, length of stay and level of education) in public health facilities with job satisfaction.

1.6 Research questions

- i. What are the levels of job satisfaction among nurses working in public health facilities at Kisarawe District?
- ii. What are the relationships between demographic characteristics (age, gender, length of stay and level of education) in public health facilities with job satisfaction?
- iii. Which factors influence job satisfaction among nurse's professionals in public health facilities at Kisarawe district?

1.7 Significance of the Study

The findings of this study provide understandings on the level and factors of job satisfaction among nurses working in public health facilities at Kisarawe district. Healthcare practitioners are expected to benefit from the findings by understanding of factors of job satisfaction among nurses working in Tanzania's public hospitals. The study has made a contribution to literature on issues related to the factors of job satisfaction among nurses in Kisarawe district. Moreover, the findings of this study have significance to the world of the academia, extension of knowledge boundaries and to policy makers.

The study would benefit policy makers, non-governmental organizations, civil society organizations and community based organizations in policy-making process and advocacy for the benefits of all stakeholders of health sector. The results may also be of use in debates related to recruitment and selection, training and development as well as to remuneration and compensation of nurses. But more importantly is that the results indicate some key factors of job satisfaction at Kisarawe health facilities, which if attacked early enough would prevent events associated to job dissatisfaction from happening. This implies therefore performance of nurses would be improved significantly and eventually the quality of patient care would be greatly enhanced.

CHAPTER TWO

2.0 LITERATURE REVIEW

2.1 The nature of job satisfaction

Job satisfaction is a complex phenomenon that has been studied quite extensively. Various literature sources indicate that there is an association between job satisfaction and motivation, motivation is hard to define, but there is a positive correlation between job satisfaction, performance and motivation, whereby motivation encourages an employee, depending on their level of job satisfaction, to act in a certain manner (16).

Job satisfaction is described at this point as a pleasurable or positive emotional state resulting from the appraisal of one's job or job experience. Job satisfaction results from the perception that one's job fulfils or allows the fulfilment of one's own important job values, providing that and to the degree that those values are congruent with one's needs. According to Kreitner et al (2002) job satisfaction is an affective and emotional response to various facets of one's job.

According to Woods et al (2004), job satisfaction can be achieved when an employee becomes one with the organization, performs to the best of their ability and shows commitment; moreover, job satisfaction and performance are positively influenced by rewards. Kreitner et al (2002) identified various factors influencing job satisfaction, such as the need for management to create an environment that encourages employee involvement and manages stress in the workplace. In order to understand job satisfaction it is useful to distinguish morale and attitude, and their relationship to job satisfaction (10). Morale can be defined as the extent to which an individual's needs are satisfied and the extent to which an individual perceives that satisfaction as stemming from the total job. Attitude can be defined as an evaluation that predisposes a person to act in a certain way and includes cognitive, affective and behavioural components. According to Mayer and Botha (2004), in most South African companies there is a low level of employee job satisfaction, resulting in a lack of commitment to performance and the achievement of organizational goals.

In South Africa, human resource managers have job satisfaction and productivity at the top of their list of concerns (14). This implies that job satisfaction affects employees' performance and commitment.

It is therefore imperative that managers pay special attention to employees' attitudes as job satisfaction can decline more quickly than it develops. Managers need to be proactive in improving and maintaining employees' life satisfaction and not only satisfaction in the work environment as job satisfaction is part of life satisfaction, meaning an individual's life outside work may have an influence on one's feelings on the job(40).

The level of job satisfaction across various groups may not be consistent, but could be related to a number of variables. This allows managers to predict which groups are likely to exhibit behavior associated with dissatisfaction. Older employees are generally satisfied with their jobs although this may change as their chances of advancement get diminished and they face the reality of retirement. Management also tends to be satisfied with their jobs, probably due to better remuneration, better working conditions and job content (25).

2.2. Incentive scheme, employees' job satisfaction and Organization performance

Motivations to employees have direct effects on job satisfaction and increase in organizational performance. From the organizational perspective, the examination of the organization should examine the significance of motivation from the organization values, vision, and the culture of effective motivation in order to derive job satisfaction. Mission, vision and values of the Organizations should cascade on the real the employees in the Organization are expecting unfortunately, in many organization it is not the case. Most of the requirements in satisfaction of employees in many organizations are documented, but they are always emerges to be the management of the superiors and founders (15). The objectives of any job satisfaction in any organization can be summarized as building value of both internal and external stakeholders or sustaining better performances to the employees. Another reasons is to ensure that the Organization are being effective in the recruitment of employees, Motivating and retaining

employees, being cost-effective, Being seen as fair by employees, providing a degree of security for employees (32).

How these objectives are interpreted in any organization is contingent on that organization's values and the nature of its objectives in the case of profit organization their major goal is increase in profit maximization or increase the organization market share and service provision. As the case of non-profit organizations the role is service provision. All these are the performance road maps. Nevertheless there is clear evidence on the nurses' best practices and vanguard support to patients have direct relationship with the job satisfaction they receive from their employers (15). Many researchers also agree that nurses' performances at the hospitals and health centres have relationship with the incentives they receive.

Many scholars have made comments on the significance of incentive in the Organizations notwithstanding the medical field. As the book written by Schuster and Zingheim,(1996) which emphasize the need of incentive to match with the external and internal environments in which the staff is working. The book suggests that incentive and motivations should be aligned with the level of performance, creativity and contribution to a particular employee rather than having a uniform formula on the incentive package

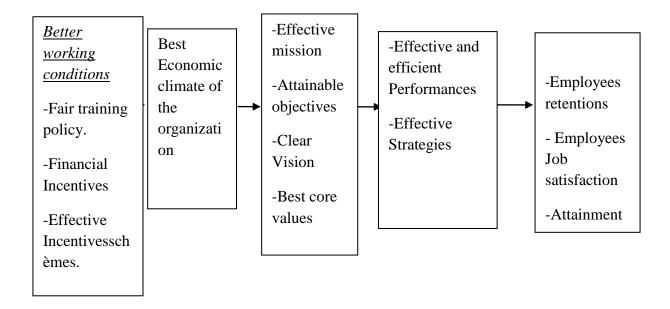
Many social researchers fail to recognize that, nurses' professional needs much social support like any other medical professionals for the better prosperity of the patients and for fostering of the economic development of any nation. Basing on literatures evidences, there are clear evidences that, better social supports to nurses professionals have positive impact to better health practises in various countries (37)

2.2.1 Relating Organizational Performance, to Job satisfaction to Incentive

According to Human behaviour organizational theory, there is clear relationship on what is happening within the Organization and outside the Organization have an influence to the employees job satisfaction, which will reinforce on employees effective performances and ultimately effective works performances (as elaborated in Figure 1 below).

Any organization that cares on the employees' welfare, in human being there is both intrinsic and extrinsic factors that determine the employees performances and job satisfaction, such that both psychological and physiological welfare will lead to employees' retention in the organization(31). As the Humanistic theory of management stipulated that human being is both an emotional being and social being rather than being regarded as the machine. In any organization, work culture, interrelationship between the management and employees, the line of communication and avoiding personal and intergroup conflict and having a best mechanism of solving any grievances, including the best pay structure and incentive schemes, will lead to the better job satisfaction and reinforce organizational performances.

Figure 1: Relationship between Job satisfaction, Incentive scheme and organization Performances



Source: Organizational Behaviour by Sweeney, 2007

The model explains the behaviour oriented theory thus there is a relationships between better working conditions in an organization and the retention of employees and job satisfaction, hence attainment of the organization goals in a performing organization environment. (41)

The model also stipulates on the working environments both the internal factors which are within the control of the management to reinforce and the external factors such as the economic factors that can affect the economic climate of the organization will lead to overall better job satisfaction and better organization performances. The model has shown on the role of incentives, fair training policy to the organizations and general better working conditions. These forces have positive relationship with job satisfaction and organization performances (41)

2.2.2 The Learning Organization and its impact on Job satisfaction in the Organization

Job satisfaction is typically defined as an employee's affective reactions to a job based on comparing desired outcomes with actual outcomes (14). Due to drastic changes on the global economy nevertheless the medical field which also nurses professionals have no exceptions; organization needs to enhance learning culture to their employees. Knowledge is the key element of productivity (26). The better learning practise and number of learning related events have direct relationship with job satisfaction, hence employees' motivation to transform knowledge learned to belter works performances. Ulrich, Halbrook, Meder, Stuchlik and Thrope(1991) found on their study that the diminishing in employees turnover have led to enhancement of organization performances and cost effectiveness on the organization and leap in knowledge of job to its employees, decrease in cost of new employees productivity, reduction of more duration and support for new employees(Cascio, 2000).

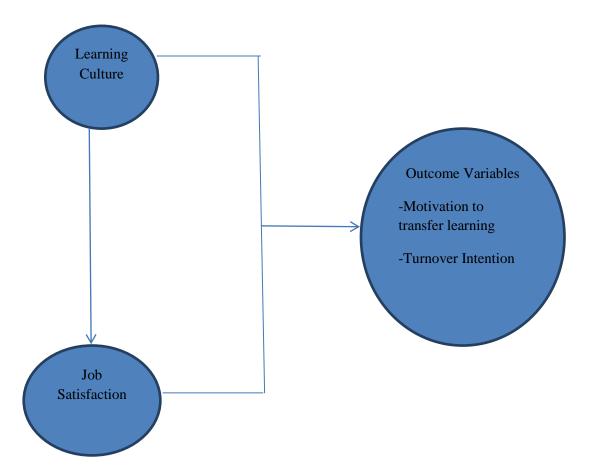


Figure 2: Conceptual Model on the effects of Learning Culture and Job Satisfaction

Adopted from Egan, Young, Bartlett (2014)

Organization learning Culture and employees has direct relationship with employee's job satisfaction; this will in turn transfer learning and turnover rate. The firm that insist knowledge gathering have found and increase in job satisfaction and profitability (18). Learning organization is the structural and system process that reinforce better performances in the Organization. Organizational learning as 'a continuous examination of experience and its transfer of skills into knowledge available to the whole organization that can assist in attaining the mission of the Organization,(16), while Huber (1991) regards the process as the multiplier effects of four elements which are information acquisition, information distribution, information interpretation and organizational memory.

However, Argyris and Schön (1996) proposed that learning organization culture have contributed that are attributed when organisations acquire information (knowledge, understandings, know-how, techniques and procedure by using various approaches. However, the dominant paradigm for understanding organisational learning has taken very much from the information-processing perspective of organisations (10). According to it, the organisations interact with the environment constantly to capture information (30). Dimovski (1994) provides an overview of previous research and identifies four perspectives on organisational learning. His model manages to merge informational, interpretational, strategic and behavioural approach to organisational learning and defines it as a process of information acquisition, information interpretation and resulting behavioural and cognitive changes, which should in turn have an impact on job satisfaction of an employees. An employee who has a room for organizational learning will be more satisfied that the one who has no room for learning as he or she will have an opportunity of learning and sharing new experiences and knowledge with various persons within her/ his professional area during the learning process, and thus that reinforce motivation and job satisfaction and it has a spill over effects on jobs performances.

Therefore, learning organizations are organizations that are continually enhancing their capacity to create a more effective environment; Senge believes that organizations are evolving from controlling the predominantly learning. One of the most serious disabilities is when people form a strong identification with their position. They see themselves in specific roles, and are unable to view their jobs as part of a larger system. This leads to animosity towards others in the organizations, especially when things go wrong. Another disability is that we are slow to recognize gradual changes and threats. Senge, refers several other learning disabilities as "myths". He discusses the myth of 'proactiveness', where proactiveness is really reactiveness with the gauge turned up to 500%. Another myth is that "we learn from experience". He maintained that we actually learn when experience is followed by immediate feedback. Another myth is that management teams can provide creative and beneficial solutions.

He maintains that the result of management teams is "skilled incompetence", where groups are likely skilled at protecting themselves from threats, and consequently from learning. If we critically examine the (5) observational theory, there others are true but others are not true, because a continuous learning organizations will lead to building shared vision as he stipulated also, but it's not the role of the managers to maintain the status quo, when happened that managers are there as the self-protectorate, the impact of effective performance will not be attained in the organization. It should be born in mind that Continuous learning in organizations, if well properly implemented and fairly distributed, can be regarded as incentives to employees, and thus will lead to employees' job satisfaction.

2.2.3 Relationships between Motivational theories and Job satisfaction in an Organization

2.2.4 Maslow's hierarchy of needs Theory

According to Maslow's theory (1970), people's needs range from a basic to a high level. These needs are present within every human being in a hierarchy, namely physiological, safety and security, social, status and self-actualization needs. Failure to satisfy one need may have an impact on the next level of need. Low order needs takes priority before the higher order needs are activated, so that needs are satisfied in sequence. According to this theory, people who are struggling to survive are less concerned about needs on the higher levels than people who have time and energy to be aware of higher level needs

Steers and Porter, (1987) contended that, Maslow's hierarchy of needs and theory of motivation was widely used within the field of clinical psychology from the theory's development in the early 1940s until it became utilized within the business sector in the 1960s. The theory of motivation that Maslow developed in the 1940s has become one of the most frequently cited theories of motivation in the management and organizational behaviour and much emphasis on job satisfaction.

According to Maslow's theory, human beings are motivated by five need that are triggered hierarchically. At one point human beings are motivated by the lowest level need that has not yet been satisfied.

According to Sweeney (2007), Maslow's proposed a hierarchy of human needs as the first theory of behaviour motivation. Within his model, there are at least five sets of needs or goals: physiological, safety, love, esteem, and self-actualization. These basic needs are organized in an order according to relative prepotency. As the basic needs are met, higher needs emerge as primary motivators of behaviour. When a present need dominates behaviour other needs may continue to influence the person, but certain needs emerge as primary motivating factors that underlie human behaviour (25).

This theory alerts employers and decision makers to the possible need that drive behaviours. It suggests that improving performance starts with needs assessment. Employers must figure out where employee's strongest unmet needs are and then offer rewards that will tap into those needs. In order for clear objectives, a sense of ownership and group participation of employees needs to be motivated by the management. (25).

According to Abraham Maslow's hierarchy of needs theory needs(2), Physiological needs involves Food, drink, shelter, sex and other physical requirements: Safety needs: Security and protection from physical and emotional harm, as well as assurance that physical needs will continue to be met; Social needs: Affection, belongingness, acceptance, and friendship; Esteem needs involves Internal esteem factors such as self-respect, autonomy, and achievement and external esteem factors such as status, recognition, and attention; Self-actualization needs: Growth, achieving one's potential, and self-fulfilment; the drive to become what one is capable of becoming. Maslow argued that each level in the needs hierarchy must be substantially satisfied before the next is activated and that once a need is substantially satisfied, the next need becomes dominant. That is, an individual moves up the needs hierarchy from one level to the next (2).

How does Maslow's theory explain motivation? The theory proposed that, although no need is ever fully satisfied, a substantially satisfied need no longer motivates an individual to satisfy that need. Therefore, if you want to motivate someone, you need to understand what need level that person is on in the hierarchy and focus on satisfying needs at or above that level.

Mangers who used Maslow's hierarchy in motivation employees attempted to change their organizations and management practices so that employees' needs could be satisfied.

In addition, Maslow's separated the five needs into higher and lower levels, Physiological and safety needs were considered lower-order needs; social, esteem and self-actualization were considered higher-order needs. The difference was that higher order needs are satisfied internally while lover-order needs are predominantly satisfied externally.

Maslow's need theory received wide recognition during the 1960s and 1970s, especially among practicing managers, probably because it was intuitively logical and easy to understand. However, Maslow provided no empirical support for his theory, and several studies that sought to validate it could not. Limitations of Maslow's theory is that lacks more explanations on the extrinsic driven persons, as in developing countries like Tanzania, I think nurses can more be driven by money orientations more than any other motivators for their job satisfactions.

2.2.5 Hertzberg's two-factor theory

In the late 1950s Frederick Herzberg developed a theory that there are two dimensions to job satisfaction, "motivation" and "hygiene". The work characteristics associated with dissatisfaction (hygiene factors) vary from those pertaining to satisfaction (motivators) in that motivators lead to satisfaction, although their absence may not lead to dissatisfaction. The motivators include achievement, recognition and intrinsic interest in the work itself. The continuing relevance of Herzberg is that there must be some direct link between performance and reward, whether extrinsic as in recognition or intrinsic as in naturally enjoyable work, to motivate employees to perform and improve their job satisfaction. The current study will be based upon this theory.

2.2.5.1 Hygiene factors

Hygiene factors are features of the job such as policies and practices, remuneration, benefits and working conditions, corresponding to Maslow's lower order of needs. Improving these factors may decrease job dissatisfaction and thus increasing of motivators.

Inadequate hygiene factors may lead to dissatisfaction, but at the same time adequate hygiene factors do not necessarily lead to job satisfaction. Hygiene factors need to be tacked first, and the motivators can follow. Organizations cannot afford to ignore hygiene factors as employees will be generally unhappy and thus likely to seek other opportunities, while mediocre employees might stay on, and compromise the organization's success.

2.2.5.2 Motivators

According to Herzberg, motivators include job content such as responsibility, self-esteem, growth and autonomy. These satisfy high order needs and can result in job satisfaction. Granting employees more responsibility and creativity in their jobs is an example of a motivator which may encourage them to exert more effort and perform better.

On the other hand, Frederick Herzberg (1923-2000), clinical psychologist and pioneer of 'job enrichment', is regarded as one of the great original thinkers in management and motivational theory. Herzberg's research proved that people will strive to achieve 'hygiene' needs because they are unhappy without them, but once satisfied the effect soon wears off then it becomes that satisfaction is temporary. Then as now, poorly managed organizations fail to understand that people are not 'motivated' by addressing 'hygiene' needs. People are only truly motivated by enabling them to reach for and satisfy the factors that Herzberg identified as real motivators, such as achievement, advancement, development, etc., which represent a far deeper level of meaning and fulfillment (2)

Examples of Herzberg's 'hygiene' needs (or maintenance factors) in the workplace are: policy, relationship with supervisor, work conditions, salary, company car, status, security, relationship with subordinates, personal life. On the other hand, Herzberg's research identified that true motivators were other completely different factors, notably: achievement, recognition, work itself, responsibility, and advancement. Herzberg two factor theory has got two factors which relates with the Maslow's theory are hygiene factors and motivating factors. Hygiene factors include the working conditions, pay, and co-worker relations. Motivational factors include the need for achievement, challenge and recognition.

Although some theorists like Herzberg believe that money is not a positive motivator hence lack of it can de-motivate a person, pay systems are designed to motivate employees. The scientific / Theory X approach, in particular, argues that workers respond to financial incentives. Getting employee pay right (often referred as the remuneration package) is a crucial task for the organization.

In generalization of these theories is that, what is considered a need in one Country can vary across cultures and nationalities. Tanzania workers for example may rank recognition, employee's interrelationships and money needs to be the first motivators in job performances. American culture embraces individualism will embrace personal achievement and risk taking as the first motivating factors in works performances. So there are needs of the Organizational commitment through its management in understanding of its workers culture in setting out rewards and motivations for effective performances. Nurses in Tanzania, may prefer first money, employees interrelationship rather than on focusing on recognition and respect from peers and supervisors.

2.2.6 Communication Theory (The Management by Objective and the Organizational Job Satisfaction

The father of modern corporate management Peter Drucker is often considered to be the world's most influential organizational guru. His ideas and thoughts revolutionized corporate management in the late half of the 20th century. Peter Drucker questioned why in both the classical and human relations schools of management, effectiveness was automatically considered to be a natural and expected outcome. According to him effectiveness was more important than efficiency and was the foundation of every organization.

He thereby developed Management by Objectives through his 1954 book 'The Practice of Management'. Management by object deals with a certain type of interaction, specific to a manager and his employee. Management by objective is based on the thinking that various hierarchies within companies need to be integrated. There was a need for commitment, responsibility and maturity. There was a need for a common challenge.

Here management by objective becomes a process by which the objectives of an organization are agreed to and decided between the management and the employees, this way the employees understand what is expected of them and help set their own individual goals. Therefore they attain both their personal goals and the organization's targets. (7).

Every level of management in the organization participates in the strategic planning process and creation of performance systems. The managers of the firm are expected to participate in the strategic planning process to ensure the effectiveness in the implementing of the plan. The managers are expected to apply a range of performance systems, designed to help in the effective functioning of the organization.

Management by objective system calls for each level of managers to identify their goals for ever area they are responsible for. These goals are shared then with their individual units. Shared targets guide individuals in fulfilling their role. The role of the management now is to monitor and evaluate performance. The focus is on future rather than on past. They check progress frequently and over a set period of time. There is external and internal control in this system with routine assessments. An evaluation is done to understand as to which extent the goals have been met.

An important aspect of the management by objective approach is this agreement between employees and managers regarding performance which is open to evaluation. The principle is that when employees are involved with the goal setting and choosing the course of action to be followed by them, they are more likely to fulfil their responsibilities. There is a link between organizational goals and performance targets of the employees and job satisfaction. In management by objective goals are expected to be SMART i.e. Specific, Measurable, Achievable, Realistic, and Time bound.

2.3 Content theories of job satisfaction

The content theory of job satisfaction rests on identifying the needs and motives that drive people. The theory emphasizes the inner needs that drive people to act in a particular way in the work environment. These theories therefore suggest that management can determine and predict the needs of employees by observing their behaviour.

Mc Gregor is best known for proposing two sets of assumption about human nature: Theory X and Theory Y. very simply, Theory X is a negative view of people that assumes workers have little ambition, dislike, work, want to avoid responsibility, and need to be closely controlled to work effectively. Theory Yis a positive view that assumes workers can exercise self-direction, accept and actually seek out responsibility, and consider work to be a natural activity. McGregor believed that Theory Y assumptions best captured the true nature of workers and should guide management practice (2).

What did McGregor's analysis imply about motivation? The answer is best expressed in the framework presented by Maslow, theory X assumed that lower-order needs dominated individuals, and Theory Y assumed that higher-order needs dominated. McGregor himself held to the belief that the assumptions of Theory Y were more valid than those of Theory X. therefore, he proposed that participation in decision making, responsible and challenging jobs, and good group relations would maximize employee motivation.

Unfortunately, there's no evidence to confirm that either set of assumption is valid or that being a Theory Y manager makes employees more motivated, for instance, Jen-Hsun Huang, founder or Nvidia Corporation in America, an innovative and success full microchip manufacturer, has been known to use both reassuring hugs and tough love in motivating employees. But this has little tolerance for screw-ups. But with an experience of Tanzania, it's not only enough to have hugs and love to make people motivated nevertheless for the health practitioners professionals as motivation has many other factors from recognition, growth, effective incentives, etc.

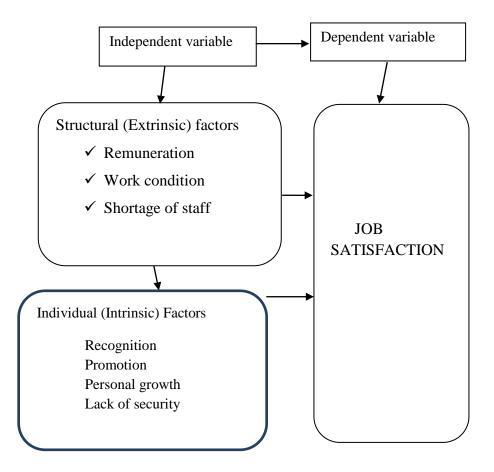


Figure 3: Conceptual frame work

2.4 Explanation of the Conceptual Framework

Dependent variable is concerned with effective Job satisfaction among nurses, while the independent variables include: both intrinsic and extrinsic factors which are remuneration, work condition and interpersonal relationship as extrinsic factors and recognition, (5). This implies that as much as the nurses are treated well in terms of remuneration, better work conditions, better interpersonal relationship, best recognition in works performances, ability for growth and achievements and best communication process for organization feedbacks on works performances and growth recognition(2), the better will results into the job satisfaction.

Opportunities refer to job related opportunities increase employee satisfaction. For example, a job which has an opportunity to participate in projects, presenting competition and requiring more responsibilities.

2.4.1 Model/Variables on relation of enabling environment (Incentives) and Employees satisfaction

At any of these levels, there are always internal motivational factors. But it should be recognized that motivators for enhancing job satisfaction may also come from external sources. For example, for organizations, motivators may reside externally in other organizations and the broader enabling environment. Furthermore, there are interactions of motivations among these three levels e.g. individual motivations may enhance motivation of an organization, but organizations also impact on people, such as their staff or clients. They influence other organizations such as competing businesses or subordinate offices in the public administration. Organization may in many cases also be the prime entry point for motivating larger societal changes, such as in the case of Kisarawe Nurses in Tanzania So it should be born in mind that enabling environment have direct relationship with the job satisfaction

2.4.2 Model developed by Researcher, 2016 assisted by Content Theories of motivations.

It is a view of fact that not just financial and technological capital that provide competitive edge, but people or human capital, at most organizations. When Incentives and fringe benefits are poor, retaining the right people in the right job will be impossible. This should be redressed by allocation of large budget on incentive benefits and human resource training and motivation. The working conditions such as health policy, incentive package, motivation both financial and non-financial should be well properly known and implemented, so as to reduce stress and frustrations at workplace.

2.4.3 The Concept of incentives and Motivation of Employees

Motivating employees is one of the most important, and one of the most challenging, activities that managers do. Successful managers understand that what motivates each employee personally may have little or no effect on others (33). Just because you're motivated by being part of a cohesive work team, don't assume everyone is.

Or just because you're motivated by challenging work doesn't mean that everyone is. Effective managers who want their employees to put forth maximum effort recognize that they need to know how and why employees are motivated and to tailor their motivation practices to satisfy the needs and wants of those employees(2).

Motivation refers to the process by which a person's efforts are energized directed, and sustained toward attaining a goal. Although generally speaking, motivation involves any effort exerted toward a goal, we're most interested in organizational goals because our focus in on work-related behaviours. Three key elements are important to this definition: energy, direction, and persistence (2). Since morale is defined as the degree to which an employee feels good about his or her work and work environment, while in many organization, the results shows that the more controlling incentives are, the less likely they are to lift morale because controlling incentives can inhibit intrinsic motivation. Incentives are more controlling when they are frequent and based on individual performance and less controlling when they are less frequent and based on group or company-wide performance. Controlling incentives can be particularly damaging to employees' intrinsic motivation if the employee-management relationship is poor. Ideally, managers should strive to develop close professional relationships with their employees and implement incentives programs that are not infrequent and are based on group or companywide performance (8). Based on these observations, it will be the intention of this study to establish the impact of incentive programs at the organizations, by analysing the variables that if are properly used will enhance Job satisfaction to Kisarawe nurses in Tanzania.

The energy element is a measure of intensity or drive. A motivated person puts forth effort and works hard. However, the quality of the effort must be considered as well as its intensity. High levels of effort don't necessarily lead to favourable job performance unless the effort is channelled in direction that benefits the organization. Effort that's directed toward, and consistent with, organizational goals in the kind of effort we want from employees. Finally, motivation includes a persistence dimension. We want employees to persist in putting forth effort to achieve those goals.

In order to excel in an organization, Motivation is very important for attaining high level of employee performance is an important organizational concern and managers keep looking for answers. Motivation can be at different levels-individual, organizational and societal. Individuals are driven by their own desires and moral believes. Individual motivation can be internal or intrinsic motivation (23), activated from inside such as hobbies, caring for children, or voluntary work in society, or may be external or extrinsic (activated from outside). Organizational motivation refers to internal motivation of an Organization.

When comparing the effectiveness of incentive systems on quality versus quantity outputs; there are no significant differences, as most of the incentives in terms of quality and quantity have positive impact on workers performances, in reaching the organization goal congruence (2).

2.4.4 Rewarding strategies in an Organization

A major current feature of the literature and rhetoric about payment systems has been a concern with defining and refining reward strategies. While different writers have different ideas about what exactly constitutes a strategic approach to the management of pay, most agree that it is primarily about aligning an organization's payment arrangements wi5th its business objectives. This means developing payment systems which enhance the chances that an organization's employees will seek actively to contribute to the achievement of its goals. So if improved quality of service is the major business objective, this should be reflected on a payment system which rewards front-line staff who provides the best standards of service to customers. Alternatively, if increased productivity is sought, then a payment system which rewards efficiency would be more appropriate. But choices in this area are not always as straightforward as this because organizations are obliged to compete with one another for good staff as well as from customers, the extent to which organizations can impose payment arrangements which serve their business objectives in thus limited by the equally important need to recruit, retain and motivate staff to carry out the work, so a balance always has to be sought between the objectives of employers and employees when developing payment strategies.

Interestingly, and perhaps surprisingly, it is only relatively recent years that managers have had the opportunity to think strategically about pay in this way.

These managers have had the opportunity to think strategically about pay in this way. This is because until the 1970s (and much later in may industrialized countries the majority of employees had their payment determined in large part through national or industry-level collective bargaining arrangements. Managers at the local level thus had little freedom of manoeuvre beyond determining who should be employed in which grade and how much overtime was worked. Multi-employer bargaining declined steeply during the 1980s and 1990s, so that by 2000 only 40 per cent of public sector employees and just 4 per cent of those employed in the private sector were covered by such arrangements. (4). As a result, unlike other areas of HRM, there have been relatively few years in which new approached to the management of pay have been tried out, established and subsequently evaluated. To a great degree we are still at the experimentation stage with many newer approaches, and this means that fierce debates rage among commentators about the effectiveness, efficiency and fairness of systems which aim to enhance individual effort, encourage skills acquisition, reward specific employee behaviours and try an establish an identity of interest between employers and their staff.

2.4.5 Relationship between Job satisfaction and Employees motivation

Job satisfaction and motivation are concepts that real relate in Organizations, and most employers and even employees relate this phenomenon. However there few differences on this among the motivated employees and satisfied employees, which includes the components such as attitude towards the job itself, working conditions, attitudes towards an organization, monetary benefits and the attitudes towards suppression(20). Therefore, job satisfaction has many components within the human being himself or herself and the work itself and the management perception towards its employees. Job satisfaction is sometimes termed as the individual's mental set about the job. It may be positive or negative.

2.5 The relationship between demographic characteristics

2.5.1 Gender

Several studies conducted with regard to the relationship between gender and job satisfaction have yielded contradictory result (8). A study conducted by Murray and Atkinson (1981), investigating gender differences in determinants of job satisfaction, reflected that females attach more importance to social factors, while males place greater value on pay, advancement and other extrinsic aspects. In support, Tang and Talpade (1999) maintain that there is a significant difference between males and females in term of job dimensions impacting on job satisfaction. Their study found that men tend to have higher satisfaction with remuneration in relation to females, while females tended to have higher satisfaction with co – workers than males.

Finding of a survey looking at issues affecting women in the South African workforce indicated similar finding with regard to females. The majority of respondents revealed that they were satisfied with their jobs. The factors that contributed the most to their job satisfaction were the company of co – workers, the opportunity to learn new things and factors inherent in the job itself (14). Oshagbemi (2000) however, failed to find that gender affects job satisfaction.

Similarly, Donohue and Heywood (2004) could not prove gender satisfaction differences in a study conducted amongst young American and British employees. Contrary to the above, Robbins et al. (2003) argue that no evidence exist suggesting that gender impacts on an employee's job satisfaction. The authors are of the opinion that gender differences can have an effect on the relationship between job dimensions and job satisfaction, but that it does not have a direct impact on job satisfaction.

2.5.2 Age

Mixed evidence exists regarding the relationship between age and job satisfaction (4). According to Greenberg and Baron (1995), older employees are generally happier with their jobs than younger employees, while people who are more experienced in their jobs are more highly satisfied than those who are less experienced.

This view is supported by Drafke and Kossen (2002). The researchers state that job satisfaction typically increases with age as older workers have more work experience and generally younger counterparts. They are of the opinion that younger workers have less experience to draw on and have an idealistic view of what work should be like. Research conducted by Okpara (2004) amongst managers within an IT environment found a significant relationship between job satisfaction and age. Similarly, earlier research supported this finding. Rhodes (1982), cited in Oshagbemi (2003) support the finding that the relationship between job satisfaction and age is significant. The author reached this conclusion after a review of the finding of seven other separate studies conducted on the relationship between age and job satisfaction. Robbins et al. (2003) reported that although most studies indicate a positive relationship between age and job satisfaction, other studies reflect a decrease in satisfaction as employees move towards middle age, at least up to the age of sixty. Satisfaction increases again from around 40 years and on. The authors refer to this phenomenon as the Ushaped relationship. Mottaz (1987), in Oshagbemi (2003), cited several reasons for the variance in job satisfaction between older and younger workers. Mottaz's view is that younger workers are generally more dissatisfied than older employees because they demand more than their jobs can provide. The author postulates that older workers possess more seniority and work experience enabling them to move easily into more rewarding and satisfying jobs. Older workers place less emphasis on autonomy or promotion, thus they demand less from their jobs, making them more satisfied than their younger counterparts. Workers tend to adjust to work value and the work environment the longer they are employed, adding to greater job satisfaction.

2.5.3 Incentive Evaluation and Strategy gap.

The first step all organizations must take is an inventory of any existing incentive plans. The inventory should include not only a description of the benefit, but also the cost to the employer and employee. The organization will then be able to analyse the cost versus benefit of the incentive as well as compare the results to industry standards.

Sifleet (2004) suggests first comparing pay and benefits with employers in the same geographic area.

After this baseline is completed, organizations can use incentives to motivate employees. Specifically, list which behaviours the organization wishes to encourage and discourage. Organizations must also list the outcomes in a measurable way.

Finally, Sifleet (2004) emphasizes the need to put the plan in writing. This step is easy to put off, especially for smaller organizations, but is a critical and inexpensive way to test alternatives. The written plan provides an objective look at the data, identifies assumptions, and enables easier feedback from others. The results of this effort may not be immediate, but the benefits are real.

Not only do individuals react differently to differing incentive plans, but different classes of employees also need to be motivated in different ways. Lopez, Hopkins, & Raymond (2006), found salespeople were most motivated by increasing commissions and least motivated by promotion or recognition. This reinforces the need to have specific, measurable outcomes which match an organization's strategic goals.

2.5.4 Incentive management Caution (When Incentives Fail)

Incentives do not always have the desired effect on performance. For this reason, objectifying all the outcomes of an incentive plan in measurable terms is important. Kohn (1999) even cites studies during the last three decades which conclude people expecting a reward for successful job completion are outperformed by people who do not expect a reward.

To explain why incentives fail, Kohn (1999) lists four reasons: "Rewards punish." Rewards are similar to punishments. They are "not opposites at all; they are two sides of the same coin." Employees feel manipulated in either case. A long-term problem with using rewards is "the need to raise the stakes and offer more and more threats or threaten more and more sanctions to get people to continue acting the way we want."

"Rewards rupture relationships." Teamwork is rapidly gaining acceptance in both the academic and business worlds. Functional teams are a vital prerequisite for organizational quality. Incentives which do not reward collaboration in many cases interfere with an organizations sense of community.

"Rewards ignore reasons." By simply dangling an incentive in front of an employee, management does not need to address the underlying reason for the needed incentive.

"Rewards discourage risk-taking." Creativity suffers when rewards and incentives are introduced into the workplace. When driven by rewards, an employee's "focus is typically more narrow than when no rewards are involved." Incidental learning suffers as employees do exactly what is needed to get the reward, not necessarily looking to improve the task or find better alternatives.

While incentives can be helpful in reaching organizational strategic goals, care must be taken to create a tactical plan with specific, measurable objectives. Taking an inventory of the organizations existing benefits and incentives plan along with a comparison to local and industry standards is a requirement. Putting the incentive plan in writing and soliciting feedback will clarify the measurability, feasibility and effectiveness of the plan.

Teams have also become a critical component in most organizations and incentives must not conflict with their functioning. The appearance of favouritism, or incentives which seem out of reach for certain employees, can be counterproductive for the organization. Finally, employees who are motivated solely by the incentives provided will have less interest in the actual work.

2.6 Empirical Studies

2.6.1 World Related Studies

In recent years, many studies were done on nursing profession, a study conducted to determine burnout and job satisfaction among Palestinian nursing students. Study reveals temperate level of burnout and job satisfaction. Nurses face numerous challenges in their everyday life which may lead job dissatisfaction (24). The study revealed that lack of social support by their superiors resulted into much stress and frustrations.

Another study conducted in mainland China in 2006 in terms of life experience of nurses. Negative relationship was found between nurses' job satisfaction and intentions to leave their current hospital. Whereas job satisfaction is positively associated with organizational

commitment, educational level, occupational stress, role conflict, professional commitment, role ambiguity, age and years of work.

The study suggested that nurses work satisfaction can be improved by supporting professional and organizational commitment nevertheless, stress level of nurses can be reduced by decreasing role of ambiguity and role of conflict by Lu, While, & Louise Barriball, (2007) a study done in Taiwan on Nurse Job satisfaction and patient satisfaction with nursing care by Tzeng & Ketefian,(2002) in a Taiwan. The inpatient pain management satisfaction, overall job satisfaction was correlated. Nurses were not satisfied for wages, possibilities of promotion, with working environment and conditions. A statistically significant level of job satisfaction was found with in terms of age (11). Nursing unit characteristics, especially the concepts of autonomy and task delegation, was most strongly predicted with job satisfaction (16).

Factors such as harmony, nurse physician collaboration, professional job satisfaction, organizational work satisfaction, nursing leadership practices and job stress was found significantly associated (29). The study shows that stress was negatively correlated with job satisfaction whereas positively associated with nursing experience (17).

Another study which was done in United Kingdom showed that nurses were not satisfied in private hospitals and show high level of pride. In London a study was performed for nurses' job satisfaction. This study focused on perceived social support and job stresses among nurses and showed evidence that nurses are at a high risk of having stress related diseases in their lifetime, and that has repercussions on their jobs performances. This is attributed due to low morale of work and job satisfaction (22). Stress problems influence on job satisfaction. The study also found that salary levels were found to be associated with job satisfaction (28).

A study was also conducted for the importance of external and internal job satisfaction impact on employment in nursing. The internal and external work values have impact on job satisfaction (19). Thomson found that patient satisfaction was associated with nurses' satisfaction with job because higher levels of nurse job satisfaction were related with better quality of nursing care.

2.6.2 African Related Studies

Africa (SSA) is a significant component of its health workforce, perhaps more than on other continents. Nurses constitute45–60 per cent of the entire health workforce with nurses responsible for a broad range of services. Generally, the nurse to physician ratio is much higher in SSA than on other continents which are between 20: 1 and 11.6: 1 in Tanzania and Ghana, respectively, to a low ratio of 2: 1 and 2.5: 1 in Madagascar and Central Africa Republic. While the ratio of nurses to doctors may be high, the ratio of nurses to population in SSA tends to be much lower than in most other regions of the world (35)

Much literature is available which address the issues of job satisfaction in nursing profession. Studies have recommended a number of elements of job satisfaction, containing demographic features age, marital status, educational level, attitude towards work, number of working hours (29). Public sector nursing staff was generally less satisfied as compare to private sector. He also discussed workload, pay and the resources accessible to them were common among public sector while private sector nurses were disappointed due to less promotional opportunities and pay (11). Furthermore a research explored the factors which influence job satisfaction, quality of clinical leadership and psychological stress (18). Job satisfaction was predicted by the variables as; workload, uncertainty of patients, nursing years of experience, behavioural disengagement (34). Major factors that were associated with nurses' job satisfaction are professional status, autonomy, interaction. Strong correlation exists between nurses' job satisfaction and organizational support (38) and Al-Hussami, M. (2008).Bjork (2007). Conducted a study to explore the association among nurses' contribution in a hospital and job satisfaction. Nurses were significantly pleased with their jobs and wanted to stay more than a year in the institute they are presently working. A study directed to investigate relationship and relative contribution between worker mental health and demographic variables for job satisfaction (10).

CHAPTER THREE

3.0 MATERIALS AND METHODS

3.1 Type of study

This is an exploratory cross sectional study with qualitative method in data collection was used to determine factors influencing job satisfaction among nurses working in public health facilities in Kisarawe district. The study aimed at exploring the factors affecting job satisfaction among nurses working in public health facilities in providing health services.

3.2 Study population

Registered nurses found at the time of study conducted, who have worked a year and above male and female nurses, working in district hospital, one health center and one dispensary located in Kisarawe district.

3.3 Study area

The study conducted in Kisarawe District which is 25 km on the outskirts of Dar es Salaam city towards the north east. The population size of the District according to the National census 2012 was 101,598 (male 50,631 and female 50,967)The district has 35 health facilities, 27 public health facilities with 312 health care professionals,(33%) 103 of them are nurses working in public health facilities. Kisarawe district is one of the district which represent many district in Tanzania thusenabling easy access for transport and data collection from lower health facilities.

3.4 Sample size estimation

Twenty four (24) registered nurses and six (6) nurse supervisors (key informants) from one district hospital, one health center and one dispensary were interviewed through Focus Group Discussion (FGD) and in-depth interview. At district hospital 10 participants were involved, 8 participants at Health center, and 6participants from dispensary were also involved in the study.

3.5 Sampling procedure

In order to minimize bias proportional allocation of study subjects from three health facilities were computed to reach the calculated sample size. Convenient sampling technique was used to obtain respondents even though the probabilistic sampling could have been the best. A convenience sample is merely an available sample that appears able to offer answers of interest to the research study (Baker, 1994). This is a sampling technique that is preferable for its economic value. This was used because it enables the researcher to save time but also due to nature of the job as the workers are subjected to days off during their duty days, it is more likely to miss them at their working station. With this technique a number of respondents who happened to be around were grouped together for FGD includes nurses from management level and nurse in charge of the wards. A proportionate sample conveniently selected was therefore used to obtain a sample of nurses from three health facilities till the proportionate sample was reached for each department. Saturation of ideas was used to limit the group discussion. All participants were informed on the objectives of the study and asked for their willingness to participate

3.6 Data collection tool

An interview guide was developed basing on the study objectives. The guide was developed using English and it was translated into Kiswahili before it was used to collect data from respondents of the study. To capture the information from the respondents of the study easily a tape recorder was used during the interviews.

3.7 Data collection procedure

Upon their arrival study participants were recruited by the researcher in collaboration with the research assistant. First the researcher described the objectives of the study and participants were invited to sign the consent form before being invited to participate in the study. Focus group discussion and in depth interview was used for data collection. Data were collected by the researcher in collaboration with the research assistant who was trained on qualitative data

collection. Pre testing of the study tool was undertaken and modified to minimize errors. Data was read by other social scientist to minimize bias.

Each interview consumed a 40 to 60 minutes. The interview was guided by the format guide with probes that based on the study objectives. Participants were also assured of confidentiality that, there will be no connection between individual responses and health facility management.

3.8. Data analysis

Data analysis was done manually. Transcription of audio data was done and then transcripts were translated into English. Information in transcripts was categorized to develop codes (important categories). Themes were developed from codes and compiled to form main themes. All interviews were audio recorded. Data collected were transcribed, translated and read through for clarity. Qualitative Content Analysis was done. Data collected based on predetermined themes based on the research questions. The analysis employed thematic analysis approach which involved reading through the transcribed texts of all interviews, identifying responses which matched prepared themes based on research questions asked by the study. Interpretation was done to make sense of this theme.

3.9 Pilot study

The study tools were pretested in Kibaha district (Mlandizi area). Ten registered nurses permanently working at public health facility were interviewed so as to check for the clarity and flow of the questions. Consequently the data collection tool was modified before the main field study.

3.10 Ethical consideration

Ethical approval was obtained from MUHAS/Senate Research and Publication Committee. Copies of letters of introduction from SPHSS was obtained and submitted to the District executive Director of Kisarawe to enable for the researcher to get permission to collect data. All participants were informed about the objectives of the study and an informed consent to participate in the study was obtained from all study participants before the interview. To secure confidentiality names of the interviewees were not mentioned during the interviews. All participants approved to be tape recorded.

Participants were assured that individual data would be kept confidential. It was also made clear to the study participants that they were free to decline participation or withdraw any moment during the interview, if they felt uncomfortable.

CHAPTER FOUR

4.0 RESULTS

4.1 Introduction

This chapter presents findings from Twenty four (24) registered nurses aged 22-42 were interviewed from (FGD), including six (6) in-depth interview from six key informants from Kisarawe district. This presentation is based into the pre-determined themes. The pre-determined themes are based on the objectives of the study. Each thematic area is presented according to the objectives of the study exploring factors affecting job satisfaction among nurses working in public health facilities. Below are the details of all themes with quotes from Focus group discussion and in-depth interviews.

Table 1: Showing Sub-themes and main themes for job satisfaction among nurses in public

| Themes | Sub-themes. |
|-----------------------------------|--|
| Low job satisfaction | -Lack of job morale |
| | -Low wages/payment |
| | -Unpaid benefits |
| | -Lack of professional development allowances. |
| Poor working factors/condition | -Lack of housing and security |
| | -Nursing staff shortage |
| | -High work load |
| | Mandatory overtime |
| Managers ignorance to individuals | -Inappropriate interaction between nurses and |
| and professional values | managers. |
| | -Nurses humiliated by managers |
| | -Lack of appreciation of nurse managers. |
| | -Not taking care of nurses suggestion |
| | -Nurses threatened by managers. |
| Low social dignity | -Low social status for nurse |
| | -public did not recognize nurses |
| | -Low recognition, value and promotion for nurses |
| | -Leaving nursing professional.\ |

4.2 Low job satisfaction among nurses in public sectors.

Through the study findings level of job satisfaction among nurses who work in the public health facilities has been presented along with factors that contributing the occurrences and supportive reference from the study respondents. Generally study found the level of satisfaction is very low due several factors as analyses below and these make it hard for the government to reach it is core goals in health sector.

4.2.1 Lack of job morale

Study findings explored that in the public health facilities health care provider's has low job satisfaction which leads to low morale. When staffs they demoralized they put very minimal effort in what they are doing hence there will be no creativity and the quality of work will be poor therefore the society will not receive the standard service they deserve/Expect. Their allowances are not paid on time, no uniforms that are given and they can hardly go for leave therefore all these plus other factors mentioned below lower their moral and decrease their performance level.

"Since 2010 when we were given uniforms until today we were not given any new uniforms, we buy with our own money, how can I be motivated to work, we are not given money for the annual leave, it is three years now we have not going home for the annual leave we cannot afford. How can you travel to upcountry without leave payment? How will you come back? It is difficult to get money for the transport from this little salary ours. We are going through a very difficult situation yet we have to take care and help the patients. Therefore we ask them to provide us with all important requirements, they should also give us call allowance." FGDK009.

Another participant express factors that lower their morale and they do not have room/expectations when their issues will be solved. Lack job moral also contribute to some of the staff not to feel it is important for them to work they wish they will be sick and took sick leave and just stay at home with their kids playing instead of coming to work, in this kind of environment the health system could not reach its target since the key important people who

have qualified and well experience in performing quality nursing care they are not motivated to work.

"My working morale is very down this is because we are left far behind with our fellows, it has reached a point that you wish to be sick the whole month, and you ask for the Excuse duty just to stay at home and take care your children and not to be at the office. FGDS008.

Nurses tend to compare among themselves (between those working in government and private sector) for those in private sectors they are well paid and equipped with all necessary equipment for working so that they are innovative and creative and well motivate into their work to provide quality nursing care. But for nurses working in public health facilities it is vice versa that's why they don't perform their job well as they have low morale of work.

"We are paid very low, the hospital managers and administrators should find a way to ensure our needs are well satisfied. We all have low working morale if the administration will work on our needs all things will be very good." FGDS009

4.2.2 Low wages/ unsatisfied payment.

Low paid jobs makes it hard for workers to be motivated to work, they find themselves in hard situation of thinking how they could divide their time so that they could either work extra hours in private hospital so that they will gain some hours or doing any other business and these reduce their ability to be innovative.

"What we are paid is very low and it takes us many years to be upgraded even if you have been promoted to a new post you cannot easily receive the salary you deserve on time, with the economic challenges and family needs you have to be smart and find something extra to gain more income." FGDK004

Low wages also lead nurses to move from one area to another just to seek for good payment. Some of the public health clinic they do not have permanent health care workers due to frequent movement, hence destabilize the health system. Also their families have more expectation from them, they need to send their children to good schools, access better health service and afford a standard level of life. Respondents were complaining inability to serve needs of the families as they wish too.

"As I said earlier, we are not satisfied at all, our level of dissatisfaction is very high. We are herenot because we love our jobs, is just to satisfy our needs. We cannot fulfil all the requirement as the income is very low." FGDK 009

4.2.3 Unpaid benefits

Respondents indicated that previously nurses were been given house and different allowances in which they used to pay small amount of money for rent which was giving them satisfaction of life. Now days no house for nurses, nurses are renting houses very far from hospital setting yet no transport and house allowance.

"Nurses who are in service for a long time, they are telling that in past the working environment was different because it has been used to get houses near hospital environment, even if you are paid very little but there was benefits for all nurses, we were paid overtime, call allowances, we were given flight tickets during the holiday from Dar—es-salaam to Mafia but at the moment we no longer paid all that. If the person is just employed and depend on her/his own salary is very difficult. I mean the salary is not enough, if you're not well satisfied with payment, cannot perform your duties effectively thus you will be looking another way of getting satisfaction" FGDK001.

Change of the life style and economic challenges force nurses to be very curious with their payments and they compare time they spent in caring patient in hospital and the amount of money they are earning.

"Currently money is everything, it is difficult to work and being paid very low salary, I have a lot of things to do and they need money that is why a person is working to earn money, but if I get a chance to be employed somewhere else where I will be paid more, I will move to that place." FGDM004.

Moreover in the continuation economic changes salaries also need to be changed to accommodate needs, this will also reduce complains from nurses and motivate them to work.

The amount of money we are paid is very little compared to the economic situation, rent for a single room ranges from 50,000/ to 70,000/= for a month. Cost of living also are too high. We are spending so many hours in the office and get back home late, tired that you cannot participate in any income generating activities. FGDM006

4.2.4 Professional development allowances.

Study finding also reveals that nurses are facing challenges on obtaining allowances for further studies in order to develop themselves professionally and cope with new technology. Due to limited funds in the government the large amount of money are located in the budget being used for buying drugs and other hospital service delivery rather than providing funds for professional development.

"When you ask permission to go for further studies you will be given the chance but you should pay the school fees at your own salary, there are those cannot afford as they have many dependents" K1005.

4.3 Poor working environment

The respondents complained against poor working environment. They findings revealed that the environment does not support the health care providers including nurses to fulfill their responsibilities, the working condition is not friendly hence patient complain are many and a small problem can turn into a serious case, they mentioned many factors that contribute into poor working conditions. They are nurses working in hard to reach area whereby the working environment is very difficult and yet they have to work and meet all patient needs.

"When conducting deliveries at night we used torch to provide light no ambulance in case of patient transfer we have to callback the ambulance driver from the district hospital, no airtime we are given, there is no water system, we are using rain water during the rainy season, and we have one water tank for water storage.FGDS001.

Study findings indicated that, some of the nurses are happy and well satisfied with their job but the working environment are not supportive and friendly to them. Poor working environment lower working capacity. Under this situation health system need some major changes to be able to improve.

"I'm satisfied with my work, it helped me and my family but when you come back into working environment, it is true that the working environment is not friendly.FGDK003.

4.3.1 Lack of housing and security.

Further concern raised by nurses who are working in public health facilities that, nurse's stay far from their working places at the same time the community around them need their service even at night. For nurses to move to and from the clinic especially at night it is a challenge to mostly of them specifically on security matter. When there is an emergency at night and you have been called to provide the service there must be someone to escort .Nurses depend on health facility watchman who is not always available.

"Another challenge we do not have houses around our health facilities. If we could have houses to stay nearby it wouldn't stress us. We have told to call watchman to escort us. It is very unsecure to move alone at night from home to the health facility." FGDK002.

Respondent mentioned that they are ready to provide assistant whenever they are needed but they are too worried to provide assistance at night due to security issues thus, lower their level of job satisfaction.

"There was a pregnant woman who was giving birth at night, therefore a relative of another pregnant woman came at my place to call me. I had no option, I had to go and give the assistance in such difficult environment because I did not trust the person who came to call me. We always pray that we go to provide the service and comeback safely, it is long distance from the place where I am staying to health facility. When something bad happen no one can hear you. At night we are working at very risk environment but during the day it is okay. I beg you to send this information to Mr. President "FGDK001.

4.3.2 Poor water and hygiene system

Additional factor that lower level of job satisfaction among nurses in public health facilities is lack of reliable water system. Study finding shows that some clinics depend on rain water only and no water tanks for storage thus leads to difficult in hospital cleanliness, personal care and other hygiene which need water at the hospital premises. In general the water table in Kisarawe is very deep thus causes water problem in the whole district. Sometimes they buy water from the town (Dar-es-salaam).

"There is no source of water here at the dispensary, you might conduct delivery and you need to wash your hands, you find no water for washing hand. That is the challenge we are facing because we depend from rain water only. A big challenge is that we are getting rain water in January which can be used up to February only if there is no rain again we need to wait until the season of April. This is a very big challenge" FGDM006.

Water has been a serious problem to all health facility in Kisarawe district. Patients relative are getting inconveniences due to water problem. Nurses asked patient's relatives to go and fetch water for their patient's to use

"You may find a mother has just given birth, she does not have water to use after giving birth, you tell the relative to go and look for some water. Our water tank is liking does not store water for long time." FGDS003

4.3.3 Lack of recognition/value

It was revealed after the study that nurses were not recognize and treated fairly by the community people despite their efforts on providing services and satisfy the customers (patients). They complained that they are being mistreated and undermined by the community the situation lead to poor performance and hate their job.

"Another challenge is lack of knowledge and understanding to the community. A person might come here for the treatment and you tell him/her that s/he has to buy medicine. They become aggressive and respond to you that, there is free medicine that the government brought for us

to use, you want to sale them? So it makes difficult to explain to them and make them understand the reality. I can say this is a big challenge that nurses overcome. FGDK001.

4.3.4 Shortage of medical staffs

The study findings revealed that nurses are working beyond their job responsibilities as they do doctors responsibilities due to shortage of medical doctors and clinical officers. Making nurses workload high and lose job interest. Nurses they prescribe drugs to patients, conduct complicated deliveries. In hard to reach areas nurses do everything at health facility they do doctors and pharmacist jobs while their pay is very low and working condition is very difficult.

"Another challenge is due to shortage of medical staffs, we work for 24hours we do all responsibilities." FGDS003.

When the nurse works for 24hour, s/he will not be fit enough to provide required service and it may lead into chaos and lose work morale.

"We cannot be satisfied, at this center we are luck that we are many but in other clinics you may find there is one nurse maybe one midwife and another is assistant nurse when midwife nurse is the night shift the one who will provide the service in the morning will be one nurse therefore the workload is too heavy." FGDS002.

Responded indicated that there are some staffs who stay in the working environment, because they do not have another options. They have low level of education they have no another choice they have to work on their assigned areas apart from many challenges they areen counter. They don't like the area where they are working and the environment too. The findings of this study showed that such situation threaten the quality of service provided to the patients, as nurses are not well satisfied with their job and working environment.

"I'm satisfied with my working environment because my education level is too low but if I could be well educated I could not be here" FGDM001.

"The same applies to me, if l was well educated at least at degree level, I would have moved from this environment" FGDM002.

Moreover another respondent added and said that;

"I'm satisfied because it gives me chance to go to school later on while I will be continuing getting my salary when lam in school. It is very difficult to continue depending on parents to pay for the school fees. I'm satisfied with the job but I need further education for me to get good salary and other opportunities" FGDM004.

4.4 Factors influence job satisfaction among nurse's professionals in public sectors.

The following are detailed explanations that show factors that influence job satisfaction among nurse's professionals in public health facilities at Kisarawe district with reference from study participants.

4.4.1 Social status for nurses

The respondents revealed that they can be attracted if their work can be appreciated by the patients and the whole community. They said that their work in the government sector is not appreciated at all, they always be blamed. They said that recognition and appreciation of their work would make the nurses eager and perform their work better. The appreciation and recognition makes someone to be creative and innovative.

"I think it should reach a time nurse should be respected and appreciated for the work done. Politicians are the ones blaming health care providers, they should know that providers dealing with people and not papers i.e. they spend a lot of time in papers than us who used a lot of time caring for the patients. They should respect health care providers because they are dealing with very serious department. The ministry of health, implementation department they should listen to our problems, and pay nurses for bus fare and extra duties. I said this because some of the politicians made some bad comments about us and we are seen as if we are immoral people in the community even if we do anything good we are still not respected. The

community should understand that we are here to help them and not to hurt them i.e. we are very important to them. KI 001.

4.4.2 Professional development allowances.

Study finding also reveals that nurses are facing challenges on obtaining allowances for further studies in order to develop themselves professionally and cope with new technology. Due to limited funds in the government the large amount of money are located in the budget being used for buying drugs and other hospital service delivery rather than providing funds for professional development.

"When you ask permission to go for further studies you will be given the chance but you should pay the school fees at your own salary, there are those cannot afford as they have many dependents" K1005.

4.4.3 Not taking care for nurses suggestions.

The respondents revealed that they prefer to work with the private health sector rather than public health sector because there getting good salaries and different allowances. Also they said that nurses who are working in private sectors are well recognized and have been valued with their employers. They have been given all working materials and their system of working is well implemented. The flowing quotation can illustrate.

"I'm satisfied with my job but if l will be given housing and being promoted, I will be more satisfied. As I said I have not be promoted more than ten years now. I need to be recognized and valued with my employer for the work done, also from the community as well as my supervisors. As value and recognition build individual psychology" KIS001.

4.4.4 Leaving nursing professional

Study indicates more findings that nurses who are highly educated they go for different job responsibilities like politics as they are highly paid and leave nursing professional with unskilled personnel. Work satisfaction is an important factors where a nurse professional intent to work. The government should recognize the need of professional nurses and make

them stay and enjoy their professional. Failure to do so there will be an increase migration of nurses out of public sectors.

"Those with higher levels of education they go to work in different institutions and NGO's where they don't struggle much and paid good salaries. Some educated nurses opted to be politician due to good payment and personal interest" Public health facilities left with unskilled personnel providing services to patients. KIIOO2.

"Nurses who have well trained in nursing profession are moving to work with private organization and NGO's it's because they are being paid good salaries and working condition is good too. They want to compare with clinical officer who are living a good life. "FGDK004.

"At what level these nurses are satisfied with their work?

"I think all of us are unsatisfied with this because most people are complaining about the same things like what I have told you." KII005.

4.5 Performance of work between male nurses and female nurse

All of the interviewed key informants indicated that male nurses are highly performing their work at high level compared to female nurses. Male nurses are confident, they can work for long time without complaining and they can work in hard to reach areas. Findings shows that men are capable in dealing with difficult environment and be satisfied even if the working environment is not friendly.

"In general male nurses are more tolerant compare to female nurses. They can work in remote areas without complaining for long time. Educated females nurses have a lot of excuses they don't want to work in remote areas. Male nurses also are risk takers." KII 006

4.5.1 Level of satisfaction between male and female nurses.

Satisfaction of job does not depend on male or female sex. It shows that even male nurses they are not satisfied but the tolerance between male and female nurses is quite difference. Male nurses are more tolerant in making decision before they jump to another qualification. Male

nurses can struggle where they are looking for another alternatives while they are not satisfied. Female nurses can pass unfriendly situation so as to be satisfied. The study findings shows that male nurses can work part time in private institutions. Mostly they like to change professionals from nursing to clinical officers looking for satisfaction of job.

"Even men are not satisfied, they agree to be employed as a nurse just because they use that job as a foundation for basic needs and use for another qualification and when they get what they want they leave nursing professional. Men are strong can work part time somewhere else. Female nurses they are not as tolerant as male nurses they can look satisfaction even in nasty situation." KII004.

4.5.2 Community perception between male and female nurse

Community people they regards male nurses as a doctors the perception which influence male nurses to be more comfortable and perform their work well. Even people from the community when they come for service they like to be attended with male nurses. Sometimes the perception from the community help male nurses to make them satisfied with their job.

No difference between male and female nurse because the professional is the same, it is only the community perception against male nurses they totally perceive him as a doctors which undermine the female nurses. The only difference is that commitment of male nurses is very high to meet their expectation of being called doctors." KII003

CHAPTER FIVE

5.0 DISCUSSION

This study assessed different factors affecting nurses' job satisfaction using the Herzberg's job motivator and hygiene factors in Kisarawe health facilities. It is known that high and integrated productivity and performance of hospitals cannot be realized without the active participation of satisfied nurses. It has been found in this study that nurses working in public health facilities are generally reported being dissatisfied with their job. This finding is in contrast with other studies conducted in Tanzania that have revealed a low level of job satisfaction among health care workers. A study done by Leshabari in 2008 found that more than half of Doctor's and nurses were dissatisfied with their job, while a study done in Mbeya revealed that 77% of health—care workers were dissatisfied with their job. (Leshabari, 2008; Bushigazi, 2009). This fact that the level of job satisfaction found in this study among this cadre of health care workers is higher compared to that found in the earlier Tanzanian studies is also not in keeping with findings from studies conducted in other countries. Studies done in Turkey by Bodur (2002), and Rain et, al. (2009) revealed that 60% of the nurses were dissatisfied with their job.

Similarly, a study done in Al-Madinnah in Saudi Arabia found that 67.1% of the nurses were dissatisfied (Al-Juhani and Kishke 2006). However the findings are similar to the findings from Ethiopia whereby it has been reported that 46.2% of the nurses were dissatisfied (Yami et al 2011). It has to be emphasized however that the proportion of nurses found to be satisfied is not that ideal in such a health setting of a national referral hospital. The unsatisfactory level of job satisfaction found in this study is probably due to the fact that Tanzania is currently undergoing significant socioeconomic changes such that the cost of living is becoming increasingly high to the majority of workers. Additionally, because of economic hardships being experienced, the Government is unable to provide the necessary working facilities. Worse still, there is a large urban migration that has not kept pace with the needed social

services. These factors would have significantly contributed to the unsatisfactory level of job satisfaction among nurses working in kisarawe health facilities.

With regards to the factors of job satisfaction, this study has found out that the socio-demographic characteristics that were age, education level and working experience. Older Nurses were found to be more satisfied with their jobs compared to the younger Nurses. This finding is consistent with what has been reported by other studies (Mottaz 1998; Bohloko 1999; Neezam 2005; Al-Juhani 2006). Indeed older nurses could also be assumed to have had acquired more experience in performing their job. With more years of work one could find the job to be more of a routine, and hence less stressful. Additionally, older age and more years of experience are likely to be related to more training opportunities, more skills and more confidence in performing the job. These older nurses are also more likely to have adapted to challenging circumstances and therefore be relatively better satisfied compared to younger ones. The fact that older nurses are closer to their retirement could also be a factor for these nurses to be relatively more likely to be satisfied with their jobs from the anticipation that they are about to be done with their engagements and to receive their retirement benefits.

More years of working experience have been found to be associated with job satisfaction in this study. New employees may be more stressed with their work at the beginning as they are not used to the job and may perceive challenges as obstacles and find them quite frustrating. With time however, experience build up, and they may undergo on-job training and hence ultimately finding that their job is becoming easier and less stressful.

Male nurses have been found in this study to be slightly more satisfied as compared to their female counterparts, but this has not reached statistical significance. In this study, level of education was not associated with job satisfaction, and indeed majority of the nurses were diploma holders, with very few being degree holders.

Overall, it has been found in this study that both intrinsic and extrinsic factors were essential for job satisfaction. The study conducted in China revealed the same that intrinsic factors were found to be as important as extrinsic factors on nurses' job satisfaction (Trevor et al 2008)

although there is another study that showed motivation factors playing a bigger role than hygiene factors in determining job satisfaction (Nate and Santha, 2008).

The findings therefore appear to be consistent with Herzberg's two factor theory. According to Herzberg, predictors associated with intrinsic variables do play a more important part in increasing job satisfaction.

5.1 Limitation of the study

High level of participation in this study, there is a possibility that responses of individuals participate may have differed in some manner from those who did not participate. The study took place in one district therefore the results may not be generalized to all nurses in the country. It is suggested that comprehensive study should be done in another region to know the level of job satisfaction among nurses in the whole country.

CHAPTER SIX

6.0 CONCLUSION AND RECOMMENDATIONS

6.1 Conclusion

Satisfaction with one's job can affect not only motivation at work but also career decisions, relationships with patients and personal health. Those who work in a profession that is extremely demanding and sometimes unpredictable can be susceptible to feelings of uncertainty and reduced job satisfaction. Job satisfaction of nurse professional is also an essential part of ensuring high quality of care. Dissatisfied nurse not only give poor quality, less efficient care; there is also evidence of a positive association between job satisfaction and patient satisfaction (Tzeng, 2002). Given the essential role that nurse professionals play in determining the effectiveness, efficiency and sustainability of health care systems, it is very vital to understand what motivates them and the extent to which contextual variables and the organization satisfy them.

This study outlines the empirical investigation regarding research gives out an empirical on the role of motivation in job satisfaction among nurses in Public Institutions in Tanzania and gives the emphasis on equitable treatment of nursing professionals like any other professionals, hence describing its role in the health services, as there is no better treatment of patients without considering the factor that would satisfy the nurses both in Tanzania and other parts of Africa and the whole world.. There is a need of much emphasis for the organizations when preparing their strategic and budgetary planning to emphasize the need of considering the necessary factors in promoting satisfaction among the professional nurses.

The findings of this study showed a low level of job satisfaction among the nurses working in public health facilities in Kisarawe district. However factors found to influence job satisfaction were the opportunity to develop, responsibility, patient care and staff relations. No association was found between socio-demographic characteristics and job satisfaction.

6.2 Recommendations

The Government of Tanzania and especially at responsible Ministry of Health, Community Development, Gender ,Elderly and Children should find the needs assessment on what are the important things in enhancing the health sector in Tanzania.

6.2.1 Policy makers

The results of this study cannot used to be considered as a solid basis for making decisions in health planning, but the results suggest that intervention should be carried out to increase levels of job satisfaction among nurses working in public health institutions in Tanzania. Since job satisfaction has a strong connection with job performance, it is very vital to reinforce relevant human resources polices, improving working conditions and compensation.

6.2.2 Professional nurses

Priority should be given to improving relationships between nurse supervisors, management and staff nurses and increasing decision-making, opportunity for development among staff nurses. Developing staff and empowering them to make decisions about their work is necessary to achieve quality nursing care. It is recommended that the Government and Ministry of health to have redesigned scope of work for nurses for improvement and be of interest.

6.2.3 Impact on services

Frequently service evaluations and monitoring of job satisfaction can be useful to govern aspects of the services that need improvement. Involving nurses in a cooperative, team approach will allow for consideration of ways to improve aspects relating to job satisfaction. Improving the work environment so that it provides an environment in line with the aspirations of nurse professionals is likely to increase job satisfaction and consequently have a positive effect on individual, organizational and quality of health care services.

6.3 Basis for the Further Research

This study may serve as a base for future studies in different districts in Tanzania on a larger scale. Further analysis of data is needed, as there are numbers of issues that can be explored further.

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APPENDICES

Appendix 1: Informed Consent - English Version

Greetings!, my name is Helena Kasanga from Muhimbili University of Health and Allied Sciences (MUHAS). I am doing a research with the objective on factors affecting job satisfaction among nurses working in public health facilities in Kisarawe district.

Purpose of the study: The purpose of conducting this study is to get the experiences and challenges of nurses working in public health sectors encounter. The findings of the study will be useful to health planners and other stakeholders designing better ways in implementing the health services.

What participation involved: If you agree to join this study. You will be required to answer some questions that have been prepared for the study in order to obtain relevant information regarding the research objectives. Also you will be interviewed for approximately 40-60 minutes in a private setting.

Confidentiality: All information that will be obtained will remain confidential and will be used only for the purpose of this study. You are not supposed to write down your name, but we will use only the identification number.

Risks: You will be responding to questions related to your job experiences and challenges of working in public sectors. Feel free not to answer any particular question that you think you are not comfortable with. We do not expect any harm to happen to you because of participating in this study.

Benefits: Your participation in this study is valuable as the information obtained from you will enable the researcher to collect information which will inform ministry of health and policy makers the challenges which nurses are facing in providing health services to the patients. Through you're information the health sector will improve the planning and budgeting for the health care workers from the district level to national level in Tanzania.

In case of Injury: It is not anticipated that any harm will occur to you as a result of participating in this study

You do not have to be in this study if you do not want to be. If you decide to stop after we begin that is allowed too.

Who to contact: For any clarification about this study do not hesitate to contact the Principal Investigator Helena Kasanga P. O. Box 65474, Dar es Salaam, Tel 0713550681. If you ever have questions about your rights as a participant, you may contact **Prof. Said Aboud,** Chairman of the Senate Research and Publication Committee, P.O. Box 65001, Dar es Salaam, (Tel: +255-(0)22-2151378). You can also contact Dr. Billy Ngasala who is the supervisor of this study, (Mobile number 0754316359).

| Do you agree?: |
|---|
| Participant agrees |
| Participant does not agree |
| I agree to participate in this study |
| Signature of Participant |
| Signature of researcher/ research Assistant |
| Date of signed consent |

Appendix 2: Informed Consent Form – Kiswahili Version

Habari, Naitwa Helena Kasanga ni mwanafunzi kutoka chuo kikuu cha afya na sayansi shirikishi — Muhimbili nina shiriki katika kufanya utafiti wenye lengo la kutafuta sababu zinazofanya wauguzi wanaofanya kazi katika vituo vya serikali kutoridhishwa na kutoshelezwa kwa kazi za kiuguzi wanazofanya.

Dhumuni la utafiti

Dhumuni la kufanya utafiti huu ni kutakakujua changamoto zinazowakabili wauguzi Wanaofanyakazi katika vituo vya serikali ndani ya wilaya ya Kisarawe na njia wanazokabiliana nazo. Pia utafiti huu una lengo la kujua sababu zinazosababisha wauguzi wasiridhishwe na kazi za kiuuguzi.

Kama ukikubali, kushiriki yafuatayo yatatokea

Unaombwa kushiriki katika utafiti huu. Kama ukikubali kushiriki, utaulizwa maswali ambayo utayajibu kulingana na uelewa wako ili kusaidia kupata taarifa za kutimiza malengo ya utafiti. Tunategemea mahojiano haya yatachukua muda wa dakika dakika 40 mpaka 60.

Usiri

Taarifa utakazozitoa zitatunzwa kwa usiri na zitatumika kwa malengo ya utafiti huu tu. Hautatakiwa kuandika jina lako ila tutatumia namba ya utambulisho.

Ushiriki unaohitajika

Utakapokubali kushiriki katika utafitii huu utahitajika kujibu maswali mbalimbali, utasomewa maswali hayo ili uweze kuyajibu.

Faida ya kushiriki katika utafiti

Kushiriki kwako katika utafiti huu kuna faida, kwani taarifa utakazozitoa zitawezesha wizara ya afya na watunga sera na mipango ya afya kuzijua changamoto zinazowakabili wauguzi katika kutoa huduma za afya kwa wagonjwa. Pia taarifa utakazotoa zitasaidia wizara ya afya

katika kupanga na kuweka bajeti ya kutosha kwa ajiri ya watoahuduma za afya kuanzia ngazi ya wilaya mpaka taifa nchini Tanzania.

Endapou tadhurika

Hatutegemei kuwa utapata madhara kwa kushiriki katika utafiti huu.

Pia unauhuru wakutoshiriki katika utafitii huu au kusitisha ushiriki wako pindi ukiwa hauko tayari kuendelea na utafiti.

Watu wa kuwasiliananao

Je unakubali kushiriki katika utafiti huu?

Kama una maswali kuhusu utafiti huu wasiliana na mratibu wa utafiti huu Helena Kasanga, S.L.P 65474, Dar es Salaam, Simu nambari 0713 550681. Kama utakuwa na swali kuhusiana na haki zako kama mshiriki wa utafiti huu wasiliana na **Prof. Said Aboud,** Mwenyekiti wa kamati ya utafiti ya chuo, S.L.P 65001, Dar es Salaam. Simu na:, (+255-(0)22-2151378)pia unaweza kuwasiliana na **Dr. Billy Ngasala**, ambaye ni msimamizi wa utafiti huu (simu na mabri: 0754316359.

Appendix 3: Interview Guide with nurses

• Highly dissatisfied

| Good | morning/after noon. My name isand this |
|---------|--|
| is | (If two people are the present) I/we are from Muhimbili University of |
| Health | and Allied Sciences. Thank you for giving me/us your time. We will do about 40-60 |
| minute | e interview that will be tape recorded, transcribed, and then edit it into something we call |
| a "prof | file" that will include only your words, with my questions edited out. The interview will |
| focus o | on your factors affecting job satisfaction among nurses working in public health sectors |
| in Kisa | arawe district. |
| Compl | leted consent form; |
| | Yes |
| | No |
| | Note: If consent not obtained thank the participants and do not proceed. |
| Gene | ral information's |
| a) | Age |
| b) | sex |
| c) | Years of working |
| d) | Marital status |
| e) | Education level |
| 1. | Nurses understanding on satisfaction and dissatisfaction in the general contexts; give |
| | us your own understanding on that. |
| | Probe: |
| | Highly satisfied |
| | Satisfied |
| | • Neutral |
| | • Dissatisfied. |
| | |

| 2. When a person's asks you that you are satisfied or dissatisfied with your work, what |
|---|
| pictures do you get in your perception |
| Probe: |
| • Meaning |
| • What is expected |
| 3. What motivates you to like this nursing job? |
| Probe: |
| • Empathy to patients |
| • Respect to community |
| Easily accessible job. |
| 4. What is your opinion about your nursing job? |
| Probe: |
| • Challenging |
| Responsible |
| • Motivating |
| • Secured. |
| 5. Is there any relationship between working experience, your age and your job |
| satisfaction? |
| 6. What are the reasons being not satisfied with the nursing job |
| Probe: |
| Which expectation were not met |
| Which expectation met |
| 7. Do monetary factors have satisfied you to performance your job as the nurse? |
| Probe: |
| Highly satisfied |
| Satisfied |
| Neutral |

Dissatisfied

Highly dissatisfied.

| 8. What working environment are needed in performing effective on your job? |
|--|
| Probe: |
| Very secure environment |
| Good physical working condition |
| Reasonable work load. |
| 9. What can public health sectors do to increase your job satisfaction as an employee? |
| |
| 10. Is there any relationship between job satisfaction and educational growth? |
| Probe: |
| One year course nurse |
| Certificate nurse |
| Diploma nurse |
| Degree nurse |
| • Master's in nursing. |
| How long have you worked with public health sector? |
| Probe: |
| • Less than one year |
| • One year to less than two years |
| • Two years to less than five years |
| • Five years to less than ten years |
| • Ten years or more |
| 12 Do you feel that the nurses are recognized as an individual? |
| 13. Describe the limiting factors in doing your duties as a professional nurses |
| |

Appendix 4: Interview Guide –Kiswahili Version

| Habari za asubuhi / mchana. Naitwa na uyu | | | |
|--|--|--|--|
| anaitwa (kama mko wawili) natokea chuo kikuu kishiriki cha afya cha | | | |
| Muhimbili. Asante kwa muda wako .Tutafanya mahojiano na wewe kwa muda usiozidi dakika | | | |
| 40 mpaka 60 na mahojiano haya yatatolewa katika mfumo wa sauti na kuwekwa kwenye | | | |
| mfumo maandishi, na maandishi hayo yatahusisha taarifa ulizozitoa tunamaswali uliyoulizwa. | | | |
| Mahojiano haya yatajikita zaidi katika kujua sababu zinazofanya wauguzi wanaofanyakazi | | | |
| katika kitengo cha umma katika halmashauri ya kisarawe wasiridhishwe nakutoshelezwa na | | | |
| kazi za kiuguzi katika kuhudumia wagonjwa. | | | |
| | | | |
| Pia tungependa kuelewa changamoto wauguzi wanazo kutana nazo na namna wanavyo | | | |
| kabiliana nazo katika utekelezaji wa kazi zao. | | | |
| Umesaini fomu ya kukubali kushiriki mahojiano aya? | | | |
| Ndio | | | |
| Hapana | | | |
| Kumbuka: kama mshiriki hajajaza fomu ya kukubali kushiriki, mshukuru kwa kushiriki na | | | |
| usiendelee na mahojiano. | | | |
| | | | |
| Maswali ya jumla | | | |
| I. Umri | | | |
| II. Jinsia | | | |
| III. Umriwakufanyakazi | | | |
| III. Umeoa / umeolewa? | | | |
| 1. Je wauguzi mnaelewaje maana ya neon utoshelezi / kuridhishwa na kutotoshelezwa / | | | |
| kutoridhishwa kwa kazi. Kila mmoja atuelezee ni jinsi gani anavyo elewa. | | | |

Dodosa

- Kuridhishwa au kutoridhishwamno
- Kutoshelezwa na kutotoshelezwa
- Kama kawaida
- Kutotoshelezwa
- Kutotoshelezwa kabisa.
- 2. Ni mtazamo gani unapata iwapo utaulizwa kuhusu kutoshelezwa na kutotoshelezwa kwa kazi ya uuguzi.

Dodosa

- Maana
- Matarajio
- 3. Nini kilikuvutia kuipenda kazi ya uuguzi?

Dodosa

- Huruma kwa wagonjwa
- Heshima kwa jamii
- Je nikazi inayopatikana kwa urahisi.
- 4.Nini maoni kuhusu kazi yako

Dodosa

- Changamoto
- Ina sababisha kuwa muwajibikaji
- Inatia hamasa
- Inaniwe kasalama
- 5. Je kuna uhusiano kati ya uzoefu wa kazi na kuridhishwa kwa kazi?.....
- 6. Ni sababu zipi zinafanya msiridhishwe na kazi ya uuguzi

Dodosa

- Nini mlitarajia na hakijafanikiwa?
- Ni matarajio gani ya mefanikiwa.
- 7. Je malipo ya mshahara na motisha mbalimbali yanatosheleza katika kuleta utendaji bora wa kazi kama muuguzi.

Dodosa

- Kuridhishwa au kutoridhishwamno
- Kutoshelezwa nakutotoshelezwa
- Kama kawaida
- Kutotoshelezwa
- Kutotoshelezwa kabisa.
- 8. Je ni mazingiragani ya na hitajika ili kupata utendaji bora wa kazi

Dodosa

- Mazingira yenye ulinzi salam sana
- Mazingira mazuri ya kazi
- Mazingira yanayolingana na utendaji
- 9. Taasisi ya afya umma kama muajiri je ni namna gani itahakikisha wauguzi wanaridhishwa na kupenda kazi zao?
- 10. Je kuna uhusiano kati ya kuridhishwa kwa kazi na elimu ya juu

Dodosa

- Kozi ya uuguzi mwaka mmoja
- Kozi ngazi ya cheti
- Kozi ngazi ya astashahada
- Kozi ngazi ya shahada
- Kozi ngazi ya shahada ya uzamili.
- 11.Ni muda gani umefanya kazi kama muuguzi katika tasisiya umma?

Dodosa

- Chini ya mwaka mmoja
- Chini ya miaka miwili
- Miaka mitano na chini ya miaka kumi
- Zaidi ya miaka kumi.
- 12. Je mnahisi wauguzi wanaofanya kazi katika taasisi za umma wanatambuliwa na kuthaminiwa?.....
- 13. Elezea sababu zinazowazuaia wauguzi wasitekeleze majukumu yao ipasavyo.....