Job Satisfaction Levels and Contributing Factors Among Health Professionals in Rural Public Healthcare Facilities of Limpopo Province, South Africa

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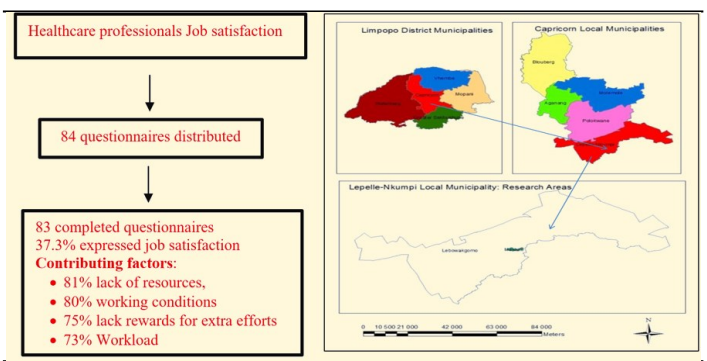
ABSTRACT

Job satisfaction reflects an employee's motivation and contentment with their work. Globally, the turnover and retention of healthcare professionals are essential for providing vital health services. However, there has been minimal research on job satisfaction among healthcare professionals in rural areas of South Africa. This study aimed to evaluate job satisfaction and its contributing factors among healthcare professionals in the rural provinces of South Africa. A cross-sectional study was conducted, involving nurses and medical doctors across four public healthcare facilities over a three-month period. Out of 84 questionnaires distributed, 83 were completed, yielding a response rate of 98.8%. Overall, 37.3% of participants expressed satisfaction with their job. The main factors contributing to dissatisfaction were a lack of resources (81%), subpar working conditions (80%), inadequate rewards for extra efforts (75%), and a high workload (73%). The findings revealed notably low job satisfaction, underscoring the need for strategic planning and effective human resource management. Enhancing job security, improving working conditions, offering fair compensation, and supporting career advancement are essential. Addressing workload management through optimized schedules, reduced turnover, skilled recruitment, and task prioritization training is also recommended.

ABSTRAK

Kepuasan kerja mencerminkan motivasi dan kepuasan seorang karyawan terhadap pekerjaannya. Secara global, perputaran dan retensi tenaga kesehatan sangat penting untuk menyediakan layanan kesehatan yang vital. Namun, penelitian mengenai kepuasan kerja di kalangan tenaga kesehatan di daerah pedesaan Afrika Selatan masih sangat terbatas. Penelitian ini bertujuan untuk mengevaluasi kepuasan kerja dan faktor-faktor yang memengaruhinya di kalangan tenaga kesehatan di provinsi pedesaan Afrika Selatan. Studi cross-sectional dilakukan dengan melibatkan perawat dan dokter di empat fasilitas kesehatan publik selama tiga bulan. Dari 84 kuesioner yang didistribusikan, 83 berhasil dikembalikan, dengan tingkat respons sebesar 98,8%. Secara keseluruhan, 37,3% peserta menyatakan puas dengan pekerjaannya. Faktor utama yang menyebabkan ketidakpuasan adalah kurangnya sumber daya (81%), kondisi kerja yang buruk (80%), imbalan yang tidak memadai untuk upaya tambahan (75%), dan beban kerja yang tinggi (73%). Temuan ini menunjukkan bahwa kepuasan kerja berada pada tingkat yang sangat rendah, sehingga diperlukan perencanaan strategis dan manajemen sumber daya manusia yang efektif. Meningkatkan keamanan kerja, kondisi kerja, kompensasi yang adil, serta mendukung pengembangan karir sangat penting. Manajemen beban kerja dapat ditingkatkan melalui jadwal kerja yang dioptimalkan, pengurangan perputaran tenaga kerja, perekrutan tenaga terampil, dan pelatihan prioritas tugas.

GRAPHICAL ABSTRACT



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INTRODUCTION

Worldwide, there is a notable shortage of healthcare professionals, particularly nurses and doctors (Boniol et al., 2020; World Health Organization, 2020), which negatively impacts the quality of patient care (Kovner et al., 2014; Park et al., 2014). Retention and satisfaction of healthcare workforces are crucial for delivering vital healthcare services globally. Job satisfaction is a multifaceted concept, encompassing an employee's contentment and motivation to achieve organizational goals. Various strategies have been employed to retain healthcare professionals in rural areas, including financial incentives, housing provisions, opportunities for further education, and mandatory community service for certified practitioners (Mabunda et al., 2021). However, ensuring job satisfaction remains a significant challenge in guaranteeing access to quality healthcare.

In South Africa, concerns about job satisfaction among healthcare professionals have escalated and are now recognized as a crucial metric of the health system's performance. A cross-sectional study involving 244 healthcare professionals from various specialties across three district hospitals in the Northwest province reported that 38% of participants were satisfied with their jobs (Mere et al., 2023). Conversely, a study of rehabilitation professionals in public health facilities in KwaZulu-Natal found a 41% job satisfaction rate (Makholwa et al., 2023).

Research across sub-Saharan Africa has shown job satisfaction rates ranging from 46.9% to 90.4% (Yilkal et al., 2017; Kolo, 2018; Akuffo et al., 2021; Geta et al., 2021). Job satisfaction rates among healthcare workers vary widely in different developed and developing countries, including Sri Lanka (23.7%) (Geta et al., 2021), India (66%) (Sanjeewa & Herath, 2018), Korea (28.1%) (Park and Lee, 2018), and China (47.6%) (Shi et al., 2014). These studies underscore the variability of job satisfaction among healthcare personnel and the need to investigate contextual factors shaping job satisfaction and turnover intention.

Socio-demographic characteristics such as age (Yilkal et al., 2017; Ayalew et al., 2019; Singh et al., 2019; Geta et al., 2021; Mere et al., 2023), gender Ayalew et al., 2019), level of education (Ayalew et al., 2019), job category (Mere et al., 2023), and years of experience in healthcare (Ayalew et al., 2019; Mere et al., 2023) are also associated with job satisfaction. However, prior studies have predominantly focused on urban and peri-urban healthcare facilities, creating a significant gap in understanding the challenges faced by rural healthcare workers in South Africa. Furthermore, while international studies have explored the socio-demographic determinants of job satisfaction, their findings are not directly generalizable to rural South Africa due to differences in healthcare systems, cultural dynamics, and resource availability.

Despite the increasing rate of job dissatisfaction among healthcare professionals worldwide, there is limited data on job satisfaction levels within rural public healthcare facilities in the Limpopo province of South Africa. This study uniquely contributes by focusing on the Lepelle Nkumpi local municipality, where healthcare facilities face pronounced challenges related to resource constraints and workforce retention. Consequently, the objectives of this study are to assess job satisfaction and identify factors contributing to job satisfaction among nurses and medical doctors in the Lepelle Nkumpi local municipality, located in the Capricorn district of Limpopo province, South Africa.

METHODS

This descriptive cross-sectional quantitative study was conducted in the public healthcare facilities of the Lepelle Nkumpi local municipality, located in the Capricorn district of Limpopo province, South Africa. Data collection was carried out over a three-month period from March to May 2019. The study included four public healthcare facilities in Zebediela: the district hospital and three primary healthcare

Table 1
Socio-demographic characteristics of the respondents

Variables	Frequency	Percentage
Gender		
Male	8	10
Female	75	90
Age(years)		
<30	19	23
30-40	22	27
>40	42	51
Marital Status		
Single	38	46
Married	41	49
Divorced/Widow	4	5
Work experience (years)		
<5	19	23
5-10	38	46
>10	26	31
Occupation		
Medical Officers	6	7
Professional Nurses	42	51
Staff Nurses	20	24
Assistant Nurses	15	18

clinics. These rural facilities are situated 55 kilometers southeast of Polokwane.

During the study period, a total of 152 healthcare professionals were employed at these facilities, comprising 6 medical officers (MOs), 67 professional nurses (PNs), 35 staff nurses (SNs), and 44 assistant nurses (ANs). The target population consisted of MOs, PNs, SNs, and ANs who were permanently employed and had been working for at least six months at these facilities during the study period.

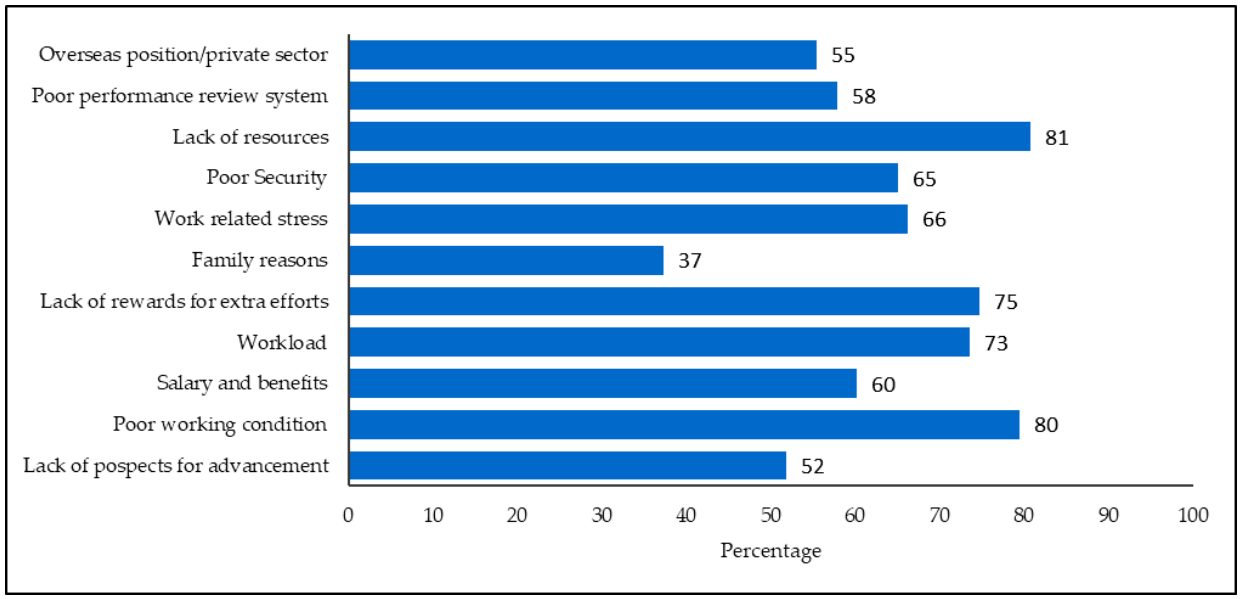
The sample size was determined using STATA version 18.0 with the following assumptions: a 95% confidence level, 80% power, a job satisfaction proportion of 38% as reported in public hospitals in the Northwest province of South Africa (Mere et al., 2023), and an expected 15% difference in job satisfaction in the current setting. The required sample size was calculated to be 84 participants. The sample was distributed proportionally across the facilities, and all healthcare professionals available during the study period who provided consent were included in the study.

A self-administered questionnaire was used for data collection. The questionnaire consisted of two main sections: demographic information and job satisfaction questions. The demographic section collected data on age, gender, marital status, profession (occupation), and number of years working at the same facility. Job satisfaction was assessed with the question: "Is your job satisfying?" with response options of "Yes" or "No." Participants were also asked: "What could be the potential factors influencing healthcare workers' dissatisfaction with their workplace?"

The collected data was entered into Microsoft Excel 2016 and subsequently exported to STATA version 18.0 for statistical analysis. The overall prevalence of job satisfaction was reported as a percentage with a 95% confidence interval (CI). A comparison of job satisfaction levels between satisfied and unsatisfied healthcare workers was conducted using the Fisher exact test. A p-value <0.05 was considered statistically significant.

Ethical clearance for the study was granted by the Tshwane University of Technology Ethics Committee (Ref: FCRE/PM/STD/2017/06), as the research formed part of a Magister Technologiae in Public Management program. Permission to conduct the study was also obtained from the Limpopo Provincial Department of Health (Ref: 4/2/2). Informed con-

Figure 1
Factors contributing to healthcare workers' dissatisfaction in the workplace



sent was obtained from all participants after they were fully briefed on the study's purpose and procedures.

RESULTS

A total of 83 healthcare professionals participated in this study, yielding a response rate of 98.8%. The participants' mean age was 42.6 years (SD = 12.4), ranging from 22 to 64 years. Just over half, 42 participants (51.6%), were older than 40 years. The vast majority, 75 participants (90.4%), were female, while 42 participants (49.4%) were married. Most participants, 57 (69%), had worked for 10 years or less in rural public health facilities (refer to Table 1). Professional nurses constituted half of the participants, 42 (51%), followed by staff nurses, 20 (24.1%).

The study findings revealed that job satisfaction among participants was 37.3%, with a 95% confidence interval ranging from 26.9% to 48.6%. In the univariate logistic regression analysis, age and marital status were the only factors significantly affecting job satisfaction, with p-values less than 0.02. Conversely, the multivariate logistic regression analysis indicated that neither age nor marital status was significantly associated with job satisfaction, as reflected by p-values greater than 0.05.

Participants were also asked about the factors contributing to healthcare workers' dissatisfaction at their workplace. The majority cited a lack of resources (81%), poor working conditions (80%), insufficient rewards for additional efforts (75%), and workload (73%) (refer to Figure 1) as significant contributors. Other factors included inadequate security (65%), work-related stress (66%), and issues related to salary and benefits (60%). A minority, 37% of participants, mentioned that family reasons also contributed to dissatisfaction among healthcare workers in the workplace.

DISCUSSION

This study determined the level of job satisfaction and its associated factors among healthcare professionals in one of the rural provinces of South Africa. Our findings indicate that 37% of the participants were satisfied with their job. The rate of job satisfaction observed in this study is comparable to the 38% reported in a district of the Northwest province, South Africa (Mere et al., 2023). However, our finding is higher than the 23.7% reported in Sri Lanka (Sanjeewa & Herath, 2018) but lower than the rates of 46.9% reported in Ethiopia by Yilkal et

al. (2017) and 55.2% by Geta et al. (2023), 66% in India by Singh et al. (2019), 74.3% in Ghana by Akuffo et al. (2021), and 90.4% in Nigeria by Kolo (2018). The low satisfaction levels identified in this study are concerning, as healthcare professionals who are dissatisfied tend to deliver inferior and less effective care.

A cross-sectional study conducted in the Ngaka Modiri Molema District of the Northwest province in South Africa found that insufficient wages, workload, and poor working conditions contributed to dissatisfaction (Mere et al., 2023). Other reported factors include working under pressure, overtime, long working hours, understaffing, limited opportunities for development, poor leadership qualities of superiors, and high exposure to infectious diseases or hazardous substances (Hämmig, 2018; Peter et al., 2020; Peter et al., 2021). High workloads have been linked to improper treatment, as noted in previous studies (Yang et al., 2019; Guan et al., 2021).

Our findings underscore the urgent need for multi-faceted interventions tailored to address dissatisfaction in rural healthcare settings. Policies aimed at improving remuneration, streamlining workloads, and enhancing working conditions could significantly boost healthcare professionals' job satisfaction (Al Sabei et al., 2020; Niskala et al., 2020). For example, countries with higher satisfaction levels, such as Nigeria and Ghana, have implemented retention strategies, including financial incentives, better working environments, and career development programs. South Africa could draw lessons from these successful models.

Job satisfaction can be impacted by both short- and long-term consequences, including emotional exhaustion, burnout, illness, absenteeism, and the intention to leave the organization (Hämmig, 2018; Peter et al., 2020; Peter et al., 2021; Yarad et al., 2023; Rodríguez -Fernández et al., 2021; Chen & Chen, 2018). Therefore, identifying and addressing the factors associated with nurses' job satisfaction is essential for formulating comprehensive strategies to reduce dissatisfaction. Identifying key contributors to job satisfaction, such as workload, work environment, career development opportunities, and work-life balance, can guide the development of targeted interventions aimed at improving job satisfaction and retaining nursing professionals (Aruldoss et al., 2022; Holland et al., 2019).

In this study, participants identified factors influencing healthcare workers' dissatisfaction, including resource scarcity, poor working conditions, lack of rewards for additional work, and excessive workload. Other contributors were inadequate remuneration, job insecurity, and work-related stress. These challenges can be mitigated by addressing staff shortages, implementing effective duty rosters, and training staff in priority management. Munyewende et al. (2014) and Erro-Garcés & Ferreira (2019) suggested that employees are generally more satisfied when working in clean, well-equipped environments with agreeable conditions and temperatures.

Additionally, the introduction of robust employee wellness programs and mental health support systems could play a critical role in mitigating burnout and stress, which are prevalent issues among healthcare professionals. Empowering healthcare workers through leadership development and participatory decision-making can also foster a sense of belonging and job satisfaction (Al Otaibi et al., 2023; Choi et al., 2016).

Several socio-demographic characteristics have been linked to job satisfaction, including age (Ayalew et al., 2019; Singh et al., 2019; Geta et al., 2021; Mere et al., 2023), sex (Yilkal et al., 2017), education level (Ayalew et al., 2019), job category (Mere et al., 2023), and years of experience in healthcare (Ayalew et al., 2019; Mere et al., 2023). Conversely, other studies found no correlation between socio-demographic factors and job satisfaction (Tarcan et al., 2018; Akuffo et al., 2021). In this study, age and marital status were signifi-

cantly associated with job satisfaction in the univariate logistic regression analysis. However, these factors did not remain significant in the multivariate analysis.

The study's scope, limited to four public health facilities within the province, restricts the generalizability of its findings. The limited sample size may have obscured relationships between job satisfaction and demographics. Furthermore, the cross-sectional design of this study complicates the establishment of causal links between job satisfaction and its associated factors. Lastly, the studies under review employed a variety of questionnaires to assess job satisfaction, and the definitions of job satisfaction varied, which may impact the comparability of findings. Future research could address these limitations by employing longitudinal designs to establish causal relationships and involving a broader range of healthcare facilities to enhance generalizability. Moreover, developing a standardized tool for measuring job satisfaction across diverse settings could improve the comparability of findings.

CONCLUSIONS

The study revealed a low level of job satisfaction among participants, with the primary causes identified as resource shortages, poor working conditions, unacknowledged extra work, excessive workloads, insufficient pay, job insecurity, and work-related stress. It also found that demographic factors did not have a significant impact on job satisfaction. Given these findings, it is imperative for policymakers, healthcare managers, and stakeholders to implement strategies aimed at enhancing job security and reducing attrition by improving working conditions and job satisfaction. These strategies should include providing equitable compensation, fostering job growth and stability, and encouraging career progression based on merit. Workload management can be optimized by developing more efficient duty rosters, minimizing staff turnover, recruiting additional qualified personnel, and training employees in task prioritization. This may involve introducing advanced scheduling systems, implementing retention strategies to reduce staff attrition, attracting highly skilled healthcare professionals, and offering training programs that equip staff with better workload management and prioritization skills. Furthermore, additional research is required to identify other factors influencing healthcare professionals' job satisfaction. This would help address existing areas of concern and support the retention of this valuable workforce, ensuring a more stable and effective healthcare system.

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AUTHORS' CONTRIBUTIONS

Maseeng L. Nkobeni formulated the concept, collected data, and performed the field work. Ricky M. Mukonza formulated the concept and reviewed the manuscript. Oratilwe P. Mokoena reviewed the manuscript, analyzed the data, and approved the final manuscript. Sam T. Ntuli formulated the concept, wrote, reviewed and revised the manuscript, and also analyzed the data

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COMPETING INTERESTS

The authors confirm that all of the text, figures, and tables in the submitted manuscript work are original work created by the authors and that there are no competing professional, financial, or personal interests from other parties.

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