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Editorial Note

Giving birth to a journal is a painful journey. It starts with a specific vision followed by lots of ambiguity at the implementation level that gives way to clarity. Finally we have arrived at it. The first issue of the first volume is now ready.

I wish to emphasize on the vision with which we have started the journal. This vision is closely linked with the academic background of SIBER; the Institute that brings out this journal. SIBER is a unique Institute of its kind in the entire Indian Subcontinent imparting Post Graduate Professional Education in the field of Business Management, Social Work Administration, Environmental Studies and Computer Application. Management thoughts and managerial research are the common factors that link these otherwise diverse fields. Having completed three decades, the Institute now desires to cater the international community, by creating a platform for sharing the outputs of managerial research in these as well as other areas of human activities.

We perceive that the socio-economic and political environments in South Asian Countries are more or less similar that we will be able to share the same media for this purpose.

Scarcity of good articles was the main hurdle experienced in bringing out the first edition of the journal. Copycat culture is frequently reflected in the research articles. Usually the reputed researchers will be reluctant to spare research for an upcoming journal.

Research requires imagination and creativity. Most research lack rigorous methodological constraints. The aim of our journal is to provide a quality article to the readers and to create a platform for the academicians to publish their articles.

It is our editorial policy to review every paper by two experts. We followed this method religiously and continue to follow in the future too. The accepted papers have gone through dual reviews.

This issue contains four papers. The first paper is of a joint article of Dr. Francisco Diniz and Teresa Sequeira on 'A Social and Economic Development Index NUTS Ranking in Portugal'. In this paper the authors have calculated Social and Economic Development Index (SEDI). By using multivariate statistical analysis, the authors have studied demography, education, employment, entrepreneurial structure, health and housing conditions etc. in Portugal and made a comparisons between different regions.

The second paper is from Dr. Nandakumar Mekhoth, Faculty, Department of Management Studies, Goa University, Goa and Nattuvathuckal Barnabas from Goa Institute of Management, Goa. The paper is related to Development of a scale, a Scale to Measure Organization Autonomy. By using psychometric techniques, the authors have developed scale in an appropriate manner and its reliability has been established through factor analysis.

The next paper is from Dr. R.L. Hyderabad and M.N. Bhajantri from Department of Commerce, Karnataka University, Dharwad. They have discussed Share Buy Back Procedure in detail. The authors have discussed Open Market Repurchases (OMRs) and Fixed Price Tender Offers (FPTs), which are common and popular methods of accomplishing share buyback decisions. They have concluded that OMRs yield greater returns in first buybacks and FPTs in subsequent buyback.

The last paper is related to job satisfaction among the nursing professionals by Dr. Madhu T.P. Nair and Dr. Shobha A. Menon, Cosmopolitan's Valia College of Commerce, Mumbai. This paper is related to health sector.

The first issue of the journal has review of two books. The book on 'Service Marketing' authored by Valarie a Zeithaml, Dwayne D Gremler, Mary Jo Bitner and Ajay Pandit has been reviewed by Dr. N.M. Makandar, Department of Commerce, Anjuman Arts, Science and Commerce College, Dharwad. The second book is related to New Mantras in Corporate Corridors: From Ancient Roots to Global Routes, authored by Subhash Sharma has been reviewed by Dr. Pratima Verma, Indian Business Academy, Bangalore.

We welcome research papers from the field of Computer Science, Environmental Studies, Social Work, Administration, etc.

I am grateful to all the authors, reviewers and editorial members of the journal for their contribution and support in bringing out the first volume of the journal successfully.

Dr. Babu Thomas Editor, SAJMR SIBER, Kolhapur

Job Satisfaction Among Nursing Professionals

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Abstract

This research investigates the Job Satisfaction among nursing professionals. The study covers nurses employed in both private and public sector hospitals. The sample size of the research study is 280, of which 140 nurses are employed in private sector hospitals (70 at the junior level and 70 at the senior level). Similarly, in the public sector hospitals, out of the 140 nurses 70 each worked at the junior and the senior levels, respectively. Job satisfaction differs significantly between the nurses working in the private sector hospitals and those working in the public sector hospitals and between nurses working at the junior and the senior levels. Two-way analysis of variance (ANOVA) was used to test the differences in job satisfaction. Findings of the research supported both these hypotheses. These findings are discussed and suggestions have been made to improve the job satisfaction.

Key words: Job satisfaction; Private sector; Public sector; Junior level and Senior level.

1. Introduction

Nurses are an integral part of any medical system. 'Nurse' is almost the first association that comes to mind when we say ' Doctor '. At the same time, there is a vast difference in the way the society looks at these two groups of professionals. While doctors are considered to be highly qualified professionals, nurses are given an almost secondary status of mere assistants or helpers. In the medical settings, nurses do all the ancillary duties, which are essential to keep the system running smoothly. It is a well-known fact that the post-operative nursing care a patient gets determines his recovery. Yet, how many of us even spare a thought for these 'Women in white' who go about their duties with almost robotic efficiency. Hence a study of the job satisfaction of nurses becomes necessary.

Job satisfaction is one of the most widely researched subjects in the area of Organizational Behaviour and Human Resource Management. Studies of job satisfaction by applied psychologists appeared as early as the 1910's. The first comprehensive treatment of the topic was given by Hoppock (1935) in his book, *Job Satisfaction*. At about the same time, when Hoppock was doing his studies, Elton Mayo and his associates were conducting a series of ground breaking social experiments called the Hawthorne Studies. These studies showed that human inter-relationship and interactions at

work are important motivators and that motivation to work was not wholly economic. This led to the human relations movement in industry. Hoppock's work inspired a large number of job satisfaction studies typically with job satisfaction as the dependant variable studied as a function of demographic variables. The number of such studies grew to such an extent that they became the subject of annual reviews. Until this time, researchers never questioned the assumption that Job satisfaction was related to motivation at work. Brayfield and Crockett (1955) reported study results, which seemed to startle job satisfaction researchers. They found little evidence that job satisfaction was related to job performance. In 1957, Herzberg et al. proposed that the causes of Job satisfaction and Job dissatisfaction are different and the former was influenced by job content factors (motivators) and latter by job context factors (hygiene).

In 1964, Vroom proposed the expectancy theory in which was nested a theory of Job satisfaction. Vroom asserted that it was the expectation of what was to come that determined Job satisfaction. Besides expectancy theory there appeared need fulfillment theory, equity theory, goal setting theory intrinsic motivation theory and even behavioural theory. Researchers also became interested in constructs collateral with Job satisfaction like job involvement and organisational commitment. Even as Hertzberg and Vroom emphasised

theory testing, applied psychologists did not neglect the study of Job satisfaction itself and its practical consequences. Job satisfaction was studied as a function of demographic variables, performance, and comparison level; need fulfillment and personal environment etc. Its relation to job performance remained a vital topic. Its consequences for work (like adjustment, withdrawal, aggression, relations with supervisor and co-workers) and consequences for life (like personal adjustment, family life) became important areas of research. There was even spirited debate over whether or not job dissatisfaction was increasing due to "dehumanisation of work" (U.S. Department of Labour, 1974). Consequently, the number of Job satisfaction studies escalated from the mere hundreds to the thousands.

Locke (1976) defines Job satisfaction as a pleasurable or positive emotional state, resulting from the appraisal of one's job or job experiences. The various job dimensions, which make up a job and hence contribute to satisfaction or dissatisfaction that have been studied by previous investigators include:

- Work
- Pay
- Promotion
- Supervision
- Recognition
- Working Conditions
- Company and Management

In the Indian context a number of studies have been conducted on Job satisfaction. Singh and Srivastava (1975) found that the status of a job and Job satisfaction are positively correlated. Venkatachalam et al. (1998) found that the mean scores of Job satisfaction and job involvement for superiors were higher than those of subordinates. Ganguli (1994) has also found that higher the cadre, greater the Job satisfaction. Sharma and Bhaskar (1991) reported recognition and appreciation as important determinants of Job satisfaction. Joshi (2001) found that the extent of Job satisfaction is not significantly higher in the private sector than in public sector. He found significant difference in Job satisfaction of managers, supervisors and workers in public sector but no significant difference in the extent of Job satisfaction of managers, supervisors and workers in the private sector. Maheshwaran, Rath and Vani (2003) studied Job satisfaction among faculty members of Business Schools and found that

faculty members prefer teaching, pay, coworkers, management and research as the top satisfaction dimensions. The study also found that older faculty members scored higher on Job satisfaction. As the faculty members grow older, their job responsibilities increase and consequently their rewards also increase. However, younger faculty members take time to cope with the dynamic environment and hence feel the pressure of work environment, which results in lesser level of satisfaction. Professors obtained the highest Job satisfaction scores, followed by associate professors, assistant professors and lecturers

Studies of job satisfaction among nurses have focused primarily on autonomy and organisational variables and less on personal factors and health issues. Job satisfaction seriously affects nurse recruitment and retention Researchers have explored the relationship of job satisfaction with structural and psychological empowerment, career satisfaction, job commitment, autonomy, control over practice, professional relationships, organisational environment, and educational preparedness. Laschinger found that 38% of the variance in job satisfaction was explained by structural and psychological empowerment. Thirty-three percent of the variance in job satisfaction among nurses working in long term care was explained by age, Asian origin, supervisor and physician relationships, patient care tasks, work load and scheduling, co-worker cohesion, and clarity of job expectations, Shaver and Lacey found that job setting, job commitment, patient load, and short staffing explained 37% of work satisfaction. Interestingly a range of 62% to 67% of the variance in job satisfaction was unexplained in this group of studies.

There are other determinants of job satisfaction. McNeese-Smith argued that research on nurses' job satisfaction has failed to explore the staff nurse perspective of determinants of job satisfaction. In semi-structured interviews with thirty staff nurses to determine their perspectives on job satisfaction, the findings indicated that there were a wide variety of factors that influenced satisfaction with nursing positions, patient care, environment, balanced workload, co-worker relations, and meeting personal and family

needs. The major attributes of job dissatisfaction were feeling overloaded, dealing with obstacles to provide good patient care, problematic co-worker relationship, and unfair work situations. The participants indicated that heavy patient workloads and stress negatively influenced their job satisfaction. Stress is a moderate to strong correlate of job satisfaction among nurses. Staff working in long-term care facilities indicated that high levels of workload and scheduling problems were predictors of decreased job satisfaction.

In a Meta - analysis of nurses' job satisfaction, the variable stress was most strongly associated with job satisfaction. In Norbeck's study of job satisfaction of 180 critical care nurses, higher levels of perceived job stress were related to lower levels of job satisfaction. Similarly, in a sample of 241 university hospital nurses, job stress was negatively related to job satisfaction. Having significant care giving responsibilities outside of work could be a family issue that would lead to job dissatisfaction. This potential relationship merits further study using quantitative methods.

Evidence from several studies suggests that there is widespread job dissatisfaction among nurses. This situation threatens the provision of a safe healthcare.

2. Methodology

This research aims at examining the job satisfaction of nurses. Nurses work both in the public sector and private sector hospitals. Working conditions differ in these two sectors and Job satisfaction is influenced by the working conditions. Hence, this research would make a comparison between nurses working in the public sector hospitals and the private sector hospitals. Nurses work at different levels in the organisational hierarchy. The working conditions like scope for participation in decision-making and autonomy differ across this hierarchy. Hence this research would make a comparison between nurses working at junior levels and senior levels in these hospitals

2.1. Variables under study

This research investigated the impact of two independent variables:

- (i) Employment Sector and
- (ii) Position of nurses

Employment sector refers to Private sector and Public sector.

This research has included:

- Nurses employed in three large private multi-specialty hospitals located in central Mumbai and western suburbs of Mumbai.
- Nurses employed in three large municipal multi-specialty hospitals located in central Mumbai and the western suburbs of Mumbai.

In the private sector, small and mediumsized nursing homes and charitable hospitals are not included in the study. In the public sector, government hospitals and smaller health centres are also not included in the study. This is done to maintain uniformity with reference to size of the organisation as this has been found to be a factor influencing job satisfaction.

Position of nurses refers to Junior level and Senior level.

This research studied nurses employed in the position of Staff Nurse at the junior level and nurses employed in the position of Sister-In-Charge at the senior level.

This research has studied the impact of two independent variables on job satisfaction. Job satisfaction of nurses was measured by the job satisfaction scale developed by *Brayfield and Rothe*, suitably modified by the researchers.

2.2. Description of Sample

The sample size of the research study is 280 nurses, taken in equal number from the public sector hospitals and the private sector hospitals. These include equal number of nurses, at junior level as well as senior level, working in different departments of these hospitals.

Out of the 140 nurses employed in the private sector hospitals, as many as 70 (50%) work at junior level as Staff Nurse and 70 work at senior level as Sisters-in- Charge. Similarly, in the public sector hospitals, out of the 140 nurses, as many as 70 (50%) work at junior level as Staff Nurses and 70 work at senior level as Sisters-In-Charge.

2.3. Data Collection Method

2.3.1. Tools for Data Collection

This research uses the Job satisfaction Scale developed by Brayfield and Rothe (1951) and

modified by the researchers. The Job satisfaction scale has 18 items to be rated on a 5-point scale ranging from strongly agree to strongly disagree responses which are scored from 5 to 1 and summed up to obtain the total job satisfaction score. The possible range of scores is thus between 18 and 90. Half the items are reverse scored. This measure was used, as it is applicable to a wide variety of jobs.

2.3.2. Procedure

Data in the public sector hospitals was gathered from the respondents in small groups after obtaining permission from the concerned authorities. In the case of some private sector hospitals, data was gathered after obtaining permission from the concerned authorities. In other cases, personal contacts were used to collect data. This became necessary due to non-cooperation of some private hospitals. The academic nature of the research and its purpose was explained to them. To ensure complete confidentiality, the respondents were not required to mention their names or the names of their hospitals in the questionnaires.

2.4. Hypotheses

This research tested the following hypotheses:

- (i) Job satisfaction differs significantly between the nurses working in hospitals in the private sector and nurses working in hospitals in the public sector.
- (ii) Job satisfaction differs significantly between nurses working at the junior level and nurses working at the senior level.

3. Findings

The study findings have validated both these hypotheses:

- (i) A significant difference was observed between job satisfaction of nurses in the private sector and that of nurses in the public sector \underline{F} (1,276) = 42.673, p 0.000. Job satisfaction of nurses in the private sector (\underline{M} = 67.036) was higher than the job satisfaction of nurses in the public sector (\underline{M} = 62.614).
- (ii) Further a significant interaction effect was also observed between the sector of employment and the level of employment on the job satisfaction of nurses F(1,276) = 8.300,

Table 3.1.1: Anova Results: Job Satisfaction

SOURCES OF VARIATION	df	MEAN SQUARE	F
Sector of Employment (A)	1	1368.432	42.673**
Level of Employment (B)	1	2079.175	64.837**
AB	1	266.175	8.30*
Еггог	276	32.068	
Total	280	Ē1	

p 0.004. Job satisfaction was highest among nurses working at the senior level in private sector hospitals ($\underline{M} = 68.786$) and lowest among nurses working at the junior level in the public sector hospitals ($\underline{M} = 58.914$).

(iii) Further a significant interaction effect was also observed between the sector of employment and the level of employment on the job satisfaction of nurses $\underline{F}(1,276) = 8.300$, p 0.004. Job satisfaction was highest among nurses working at the senior level in private sector hospitals ($\underline{M} = 68.786$) and lowest among nurses working at the junior level in the public sector hospitals ($\underline{M} = 58.914$).

The study results indicate that job satisfaction is higher among nurses working in the private sector as compared to the nurses in the public sector. The reason for this difference could be the fact that nurses from the private sector especially in the large hospitals covered by this study, have comparatively a lower workload and better working conditions. In the public sector hospitals the workload is much higher. Moreover, the types of patients with whom nurses have to deal are also very different. The nurses' job requires constant patient contact. Municipal hospitals provide almost free medical aid and hence are generally frequented by patients belonging to the lower socio - economic strata of society, and also from mofussil areas. which lack good medical facilities. The level of education and awareness and the general levels of hygiene among such patients are low. The private hospitals, on the other hand, cater to the upper middle class and higher income groups in society. The level of education and awareness and the general level of hygiene among such patients are higher. It is the responsibility of the to deal on a one to one basis with these patients every day. Over a period of time this adversely affects their level of job satisfaction. In the interviews with nurses, many from municipal hospitals indicated inter alia, that due to the

lower standards of hygiene, they are also exposed to many infections. In most of the municipal hospitals the actual number of patients far exceeded the sanctioned bed strength of a ward. This was never the case with private hospitals. This study found that the job satisfaction was higher among nurses at senior level as compared to the nurses at junior level. Nurses at the junior level have greater workload and lower level of freedom in decision-making. They are answerable to senior nurses. Most of the nurses are also younger. They have taken up this profession with many idealistic goals. However, when they find the ground realities are harsh they are likely to experience greater levels of frustration and disappointment. As they become older and assume senior responsibilities they learn to adapt to the conditions around them. Also senior nurses have more decisionmaking authority and are less dependent on others. Thus their lot improves leading to higher Job Satisfaction.

The study also found an interaction effect between sector of employment and level of employment. Job Satisfaction was highest among nurses working at the senior level in the private sector hospitals. This group can truly be considered the privileged group. As discussed above these nurses enjoy better working conditions and greater participation in decision-making. They also enjoy a position of authority among patients and nursing staff alike. This contributes to higher Job Satisfaction. The junior level nurses in public sector are the worst hit groups. They have to work under the worst conditions and enjoy lowest levels of authority.

The findings of this study indicate that nurses do not work in the best of conditions and a lot needs to be done to improve their working conditions. The condition of nurses in the public sector hospitals is worse than those in the private sector. Government spending on public health must increase as this would mean more facilities for all staff, and the staff and the patients would both be benefitted. Better infrastructure can be provided, more staff can be appointed, salaries can be increased. These would benefit the patients both directly and indirectly. If need be, private and public partnerships can be worked out.

One aspect of the nurses' job that needs to be addressed is the role of the nurse in the medical

setting. Nursing is a highly skilled job but continuous nurse training is seldom given importance. In the same way nurses are seldom given any decision-making power in the medical set up. They are simply expected to execute the decisions made by the hospital administration. This affects their job satisfaction because they feel their job lacks autonomy. The participation of nurses in the public sector hospitals, especially at lower levels is dismal. This is because of the bureaucratic nature of public sector undertakings. It is high time, public sector hospitals' administration is handed over to professional managers with knowledge and experience in administrative work. Currently it is left to the senior doctors who are excellent doctors but may be poor administrators. Another option would be to give training to medical personnel so that they develop managerial skills. When hospitals are managed professionally they would provide an excellent work set up for nurses. Application of modern management practices would definitely enhance job satisfaction of nurses. This would also lower absenteeism of nurses in public sector hospitals.

This study research focuses only on job satisfaction of nurses and it does not investigate the impact of low job satisfaction on patient care. In future, it would be interesting to correlate these factors with patient's experiences in the hospitals. Hospitals comprise of different departments and these departments differ with respect to the nature of ailments they deal with, the socio-economic strata of patients, the number of patients they have to deal with and many other such factors. Given these differences future research could focus on these differences and their impact on the working life of nurses. This type of research would help hospitals to understand the close connection between nurse satisfaction and quality of patient care. When hospitals see this close link, they would be more willing to undertake initiatives to improve the working conditions prevalent in hospitals. This would help nurses' work as professionals, which, in turn can improve health care systems in the society.

References

- Brayfield, A.H. and Crockett, W.H. (1955) Employee attitudes and employee performance. *Psychological Bulletin*, 52:396-424.
- Brayfield, A.H. and Rothe, H.F. (1951) An index of job satisfaction. Journal of Applied Psychology, 35:307-311.
- Ganguli, H.C. (1994) Job Satisfaction Scales for Effective Management. Manual for Managers and Social Scientists, New Delhi, Concept Publishing Company.
- Hertzberg, F., Mauzner, B., Peterson, R.O. & Capwell, D.F (1957) Job Attitudes. Review of Reserch and Opinion. Pittsburg, PA, Psychological Services of Pittsburgh.
- Hoppock, R. (1935) Job Satisfaction, Newyork, Harper.
- Joshi, G. (2001) Occupational level and job satisfaction: A comparative study of public and private sector organizations. *Journal of the Indian Academy of Applied Psychology*, 27(1-2):157-161.
- Laschinger, H.K.S. (1996) A theoretical approach to studying work empowerment in nursing: A review of studies testing Kanter's theory of structural power in organization. *Nursing Administration Quarterly*, 2(2): 25-41.
- Locke, E.A (1976) The nature and causes of job satisfaction. In: M.D. Dunnette (Ed), Handbook of Industrial and organizational Psychology, Chicago Rand McNally, pp.1297-1349.
- Maheswaran S. Rath S. and Vani N.S. (2003) Job satisfaction among faculty members in select B-schools. *Management & Labour Studies*, 28(2):161-169.
- McNeese-Smith, D.K. (1998) A content analysis of staff nurse descriptions of job satisfaction and dissatisfaction. *Journal of Advances in Nursing*. 29(6):1332-1341.
- Norbeck, J.S. (1985) Perceived job stress, job satisfaction and psychological symptoms in critical care nursing, *Research on Nurses Health*, 8:253-259.
- Sharma, B.R. and Bhaskar, S.(1991) Determinants of job satisfaction among engineers in public sector undertakings. ASCI Journal of Management, 204(4):217-233.
- Singh, A.P. & Srivastava, A.K. (1975) Occupational level and job satisfaction. *Journal of Psychological Researchers*, 19(2):58-59.
- Vekatachalam J., Reddy, K.S. & Samiullah, S.(1998) Effect of job level and the organizations: identity on job involvement and job satisfaction; A study of different organizations. *Management & Labour Studies*, 23(B):421-427.
- Vroom, V.H. (1964) Work and Motivation, Newyork, Wiley.