

Career choice motivation and job satisfaction among experienced clinical nurses

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ABSTRACT

Background and Objective: Amidst the lack of desire to join the profession, the limited awareness about the expanded roles and advancement opportunities, the view of the profession as physically challenging and less respected, there are varied motives for a career choice in nursing. This study aims to explore the motives and the influence on job satisfaction among experienced clinical nurses. **Methods:** In a cross-sectional study, 1057 nurses were randomly selected as a proportionate sample. **Results:** Descriptive analysis showed prospects as the most reported career choice motive followed by social influence. Family influence was the least reported. Structural equation modelling showed no significant influence of career choice motivation on job satisfaction. However, regression analysis indicated significant influence of prospects and combined influence with social influence on job satisfaction among nurses, but not family influence. ANOVA showed significant association between qualification, level and sector of health care organization and job satisfaction among nurses. Age, marital status, area of work and experience had no significant association with job satisfaction. **Interpretation and Conclusion:** Generally nurses pursue career in nursing to achieve personal and professional prospects and satisfaction. Health care administrators need to plan effective strategies towards career counseling for the aspiring nurses and monitoring and improving job satisfaction among experienced nurses.

Keywords: career choice motivation, job satisfaction, nurses, regression, ANOVA.

INTRODUCTION

Choosing a professional career, one of the important decisions of a lifetime entails making a choice from among the varied career options that conform an individual's goals and expectations. The decision requires greater earnestness when the choice is nursing profession, wherein the core function is to care for others, healthy or sick.

Nurses across the globe have evolved as knowledgeable professionals and are recognised for their qualities, however not for their inevitable professional role in health care. They are engaged in developing protocols and guidelines for managing patient care activities, but lack the independence in decision making and are dominated by the medical profession¹. Nursing is viewed as a profession with limited opportunities, and rarely as an ideal career². Also, the negative, stereotypical and imprecise public image portrays nursing career as undesirable. The cynical representation has massive consequences on job satisfaction among these professionals³.

Career choice in nursing

Research indicates controversial views about nurses and the nursing profession. The general population considers nursing as a high status humane profession, although lacking independence and not requiring high academic studies⁴. And that those involved in healthcare rate nursing as a less esteemed profession. Participants from healthcare and higher educational institutions perceive nursing as being subjected to greater gender stigma and reported that they were less likely to pursue higher qualification, achieve career advancement and enjoy satisfying career as nurses. They were also apprehensive about not being able to gain parental support and making their parents proud⁵.

The prevalence of negative, stereotypical historical image of nursing and nurses impacts career choice among prospective nurses and probably dissuades them from choosing nursing as a career⁶ and half of qualified nurses do not recommend career in nursing⁷. Most of the nurses view nursing as a tiring profession lacking autonomous practice. Hence most of them do not join continuing education programs and would not recommend career in nursing⁸.

Career choice motivation is the reason why nurses pursue a career in the nursing profession. Researchers have reported a number of reasons for the career choice in nursing amidst the lack of desire to join profession and the limited awareness about the expanded roles and advancement opportunities, the view of nursing as physically challenging and less respected, yet helping and caring profession. Employment opportunities, job security, nurturance, financial benefits, emotional needs, interest in science, interesting work⁹⁻¹¹, opportunity to serve humanity, respect and due societal recognition¹²; work availability and career opportunity¹³; personal satisfaction⁸, help family and work and study abroad¹⁴ are among the identified

reasons for career choice amidst the negative perceptions related to the social role of nursing, reputation, economic and societal status and self image among nurses.

Interestingly a few researchers have revealed the influence of practicing nurses^{10,14}; parents, friends, and other family members¹³⁻¹⁴, formation from intern⁹ and peers¹⁵; hence influencing students' career choice of nursing.

Job Satisfaction

Job satisfaction is an overall, universal feeling on the job or as an associated constellation of attitudes related to the various features or aspects of the job¹⁶. It amplifies commitment and efficiency among employees in the organization¹⁷ and is an essential determinant of quality patient care¹⁸. The swift changes in healthcare industry and the impending nurse shortage and retention in the recent years have posed increasing demands on nurses. This has further influenced the quality of patient care and the related costs, highlighting the need for planning organisational strategies towards sustaining and improving nurses' job satisfaction¹⁹

The choice of a career is based on the motivating factors which a person considers as significantly influencing his satisfaction on the job. The motivators could be parents, teachers, counsellors and significant others, high earnings, societal and environmental pressures, mass media and chance. In choosing nursing as a career, there could be intrinsic pressures such as individual ability, interest, altruism, values and significant relationships influencing the choice²⁰.

Autonomy, pay and professional status are identified as important determinants of nurses' career satisfaction, and lack of respect, welfare, rights and benefits as causes of dissatisfaction among these professionals^{17,21}.

Aim of the study

The continual shortage of qualified and experienced nurses is a concern across health care settings that warrant more attention and involvement of all health-care stakeholders²². Although, nursing shortage has been studied worldwide, research on understanding why individuals choose nursing career is recommended²³. There are studies that have explored and identified reasons for career choice in nursing among students; however research on the reasons for career choice among experienced nurses remains unidentified. Also, there is limited research on the relation between career choice among experienced registered nurses and job satisfaction. The purpose of this article is to evaluate the relation between the

reasons for career choice in nursing and job satisfaction among experienced clinical nurses in a developing country.

MATERIALS AND METHODS

A cross-sectional design was adopted for this study. Registered clinical nurses from all the clinical settings in the government, private and autonomous sectors within the state of Goa constituted the research population. List of nurses obtained from the management of each setting indicated that there were around 1662 nurses employed in the different settings. The calculated sample size for the accessible population at 95% confidence level and 5% margin of error was 322. Individual sampling frames were prepared for each sector and around 70% of the nurses, i.e. 1057 (government = 830; private = 209 and autonomous = 18) were randomly selected as a proportionate study sample using lottery method.

Ethical considerations

Ethical approval was sought from the ethical committee in the government sector and written permission was obtained from individual private and autonomous hospital administrative heads. Written informed consent was obtained from every respondent after due explanation and confidentiality assurance.

Data Collection

Data were collected as self reports from nurses regarding the reasons for joining nursing profession using the 10 item, three dimension Career Choice Motivation Scale (CCMS). The items for the scale were drawn based on literature review, discussion with guide and nurse colleagues and personal experience of the researcher. Validity of the scale was ascertained by considering the feedback of four clinical nurses, five nursing and three management faculty. The calculated scale validity index was 0.87. Reliability determined using Cronbach alpha was 0.64. The scale was tested in exploratory factor analysis using principal component analysis, Promax rotation at Eigen value one. Items with commonalities above 0.5 were retained. Total variance explained by three factor solution was 65.7 and the retained items factor loading were above 0.6. The scale was arranged on three dimensions; prospects, social influence and family influence and five point rating scale with strongly disagree (1), disagree (2), neutral (3), agree (4) and strongly agree (5). Data regarding job satisfaction was measured using the 20-MSQ-short version Minnesota Satisfaction Questionnaire. The tools were administered to 1057 nurses. After cleaning, data obtained from 830 nurses were used for analysis in SPSS version 25 and Amos 22. Structural equation modelling and regression analysis were used to test the influence of career choice motivation on job satisfaction. Association of demographic variables with professionalism was evaluated using analysis of variance (ANOVA). The sample demographics are shown in Table 1.

TABLE 1

RESULTS

Data analysed using mean and standard deviation indicate that prospects was the most reported career choice motivation among experienced clinical nurses (Mean=12.8; SD=4.2) followed by social influence (Mean=8.26; SD=3.2), and family influence (Mean=4.5; SD=1.96) was the least reported as shown in Table 2.

TABLE 2

TABLE 3

Table 3 shows that career choice motivation has no significant influence on job satisfaction among nurses (Standard regression weight= 0.02; P =.755).

TABLE 4

Table 4 shows that the model fit indices are within acceptable range and hence the model is used to explain the influence of career choice motivation on job satisfaction among nurses, although the influence is not significant in this data.

Figure 1

Fig. 1 shows the structural model used to depict and explain the influence of career choice motivation on job satisfaction among nurses.

Further the data was tested for the influence of dimensions of career choice motivation on job satisfaction using step wise method in multiple regression analysis. Results indicate significant influence of career choice motivation on dimension prospects (R^2 change =.089; $P < 0.010$) and the combined influence with dimension, social influence ($r=123$; $P < 0.014$) on job satisfaction among nurses as shown in Table 5 and Table 6. However the dimension family influence is not found to have significant influence on job satisfaction among nurses.

TABLE 5

TABLE 6

TABLE 7

Data in table 7 show that there is significant association between qualification ($F = 10.884$; $P < .001$), level ($F = 4.751$; $P < .009$) and sector of health care organization ($F = 3.784$; $P < .023$) and job satisfaction among nurses.

The level of satisfaction among nurses is higher among the diploma qualified nurses (Mean = 72.50) as compared to the degree (Mean = 69.73) and post graduate (Mean = 62.89) qualified nurses. Similarly, nurses working in the primary level (Mean = 74.42) are more satisfied as compared to those employed in secondary level (Mean = 72.07) and tertiary level (Mean = 70.58) health care settings. Also, those employed in the private sector are more satisfied (Mean = 73.15) as compared to those in the autonomous (Mean = 72.42) and government (Mean = 70.73) health care sector hospitals.

There is no significant association between age, marital status, area of work and experience and level of job satisfaction among nurses.

DISCUSSION

The results of the study indicate that prospects is the most reported career choice motivation among experienced clinical nurses followed by social influence; and the influence of family is the least reported motivation. These findings highlight the focus on clinical nurses' need for personal and professional growth, financial benefits, job security and opportunities for migration, rather than merely the traditional ways of life or taking up the traditional family profession. There has been tremendous development in every domain including the ease of migration across the globe. Also, the increasing demand for nurses especially in the developed countries has opened doors for nurses from the developing countries like India to aspire and realize their personal and professional goals. These factors can be a motivation for the individuals to pursue career in nursing profession.

Earlier researchers have reported a number of reasons for the choice of nursing as a career such as employment opportunities, good income potential, job security^{8,13}, opportunity to serve humanity and due societal recognition¹². A few researchers have revealed the influence of practicing nurses¹⁰; parents, friends and other family members¹³ and peers¹⁵ as influencing students' choice of nursing.

This study findings show that career choice motivation has no significant influence on job satisfaction among experienced clinical nurses. However, there is significant influence of the dimensions prospects and social influence on job satisfaction among nurses, although the dimension family influence has no significant influence. This finding is in consensus with the above finding which shows that prospects is the most reported career choice motivation among nurses to pursue career in nursing profession. Probably the persistent traditional stereotypical image of nurses and nursing that deferred students from taking up the profession and the clinical nurses from experiencing satisfaction is overshadowed by the financial and the professional opportunities along with the continual advancement in the profession. Nursing is pursued as a

professional career not only for the traditional caring and altruistic reasons but more for personal and professional progress. With regards to the overall influence on job satisfaction among nurses, there could be more vital factors such as work environment, actual public image, emotional intelligence or the work life balance among nurses which need to be explored to have a better and deeper understanding of this construct in the nursing profession.

Earlier researchers have reported relationship between image of nurse and nursing profession³, and intent to migrate²⁴ and job satisfaction. Negative influence of community view of nursing²⁵ and influence of professional status and autonomy²¹ on job satisfaction have been also reported. However, studies related to relation between career choice motivation and job satisfaction among experienced clinical nurses have not been identified.

Significant association has been identified between qualification, level and sector of health care organization and job satisfaction among nurses. There is no significant association between age, marital status, area of work and experience and job satisfaction among nurses in this study. Diploma qualified nurses reported greater level of satisfaction as compared to the degree qualified and post graduate nurses. The diploma qualified nurses in this study are the senior nurses as compared to the degree qualified and post graduate nurses. Hence they could be experiencing adequate level of job satisfaction for all the altruistic nursing service they did provide throughout their career. Also, it is commonly observed that the new entrants join the four year duration, B. Sc. Nursing program not by choice, rather as an alternative because they are unable to secure admission into medicine. They perceive nursing as a profession that is at a level next to medicine, wherein they can gain adequate scientific knowledge and skill that is little less in-depth as compared to medical professionals²⁷. However, in actual clinical area, there is no difference in their roles and responsibilities based on qualification. Also there is dominance by the doctors in all aspects of patient care besides work overload and paucity of resources. The post graduate nurses might experience frustration for being unable to use their knowledge and potential in routine practice, although they might be expected to know and exhibit greater potentials within the given nurse practice environment. These situations could affect their experience of adequate job satisfaction.

Nurses working in primary level of health care settings experience higher level of satisfaction as compared those in secondary and tertiary level of health care settings. Workload and the criticality of patients, types of service and demand for intensive patient care activities in the tertiary level settings could influence team relation, nurses-patient and nurse-family interactions leading to emotional and physical burnout in the tertiary level setting. Comparatively, greater authority and independence with respect to patient care activities, team spirit, coordination with patient, preventive level health care activities could be less stressful at the primary level.

Sector of health care organization is associated with level of job satisfaction among nurses wherein the nurses in the private sector settings are more satisfied as compared to those in the autonomous and government hospitals. Comparatively, the type of patients in these settings differs in terms of severity of illness, socioeconomic background, literacy and duration of hospitalization wherein nurses in the government settings, amidst the shortage are required to perform multiple roles. At times there is no patient attendant and even if present, the nurses have to take complete responsibility for the patients. Also, there could be more visibility, hence more respect and acknowledgement for their services in the private sector hospitals as compared to government settings.

Association has been identified between age, gender, marital status and tenure, but not with relation to educational level and location of PHC^{25,26}. However, others²⁸ reported educational level as a significant determinant of job satisfaction. Additionally Mrayyan¹⁸ revealed association with the type of work unit. Nurses employed in the public sector hospital and working with limited resources and in difficult service conditions expressed dissatisfaction although they chose the profession and the choice was supported by their families²⁹. Significant difference in the level of job satisfaction and performance is demonstrated among nurses employed in the government and private hospitals in Uganda³⁰. In India, better job satisfaction among nurses in the government sector has been reported as compared to those in private sector nurses who face job insecurity and long working hours³¹. Also, majority tertiary care hospital nurses are highly satisfied with respect to their jobs except in relation to independence and compensation³².

Limitations: The major limitation of this study is the exploration of career choice motivation among heterogeneous group of clinical nurses in terms of age and experience which could have created some bias due to the varied gap between the time of career choice decision and the time of data collection although a large sample was selected using random sampling method

CONCLUSION

This study identified significant influence of career choice motivation dimensions; prospects and social influence on job satisfaction among clinical nurses. Prospectus was the highest reported career choice motivation among these nurses. Qualification, level and sector of health care were associated with job satisfaction but not age, marital status, experience and area of work. Further studies can be conducted in order to confirm the findings in similar settings. Also, studies can be conducted among nursing students, especially the final year students to obtain rich, valid and reliable findings. **Implications:** This study findings draw attention of the health care managers and administrators towards planning effective career counseling to empower the prospective or aspiring nurses in making the right career decisions. In addition, develop and implement strategies to monitor and improve job satisfaction among nurses.

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TABLES AND FIGURES

Table 1. Sample Demographics in the study

n=830

Variable	Classification	Frequency	Percentage
Age in Years	20-30 (Class 1)	407	49
	30-40 (Class 2)	238	28.7
	40-50 (Class 3)	147	17.7
	50-60 (Class 4)	38	4.6
Marital Status	Married	503	60.6
	Single	327	39.4
Level of health care	Tertiary	563	67.8
	Secondary	210	25.3
	Primary	57	6.9
Area of work	Medicine	168	20.2
	Surgery	182	21.9
	Obst-Gynec	82	9.9
	Pediatric	99	11.9
	ICU-OT-Cas	178	21.4
	Psychiatry	28	3.4
	Community	93	11.2
Qualification	GNM	468	56.3
	B. Sc. Nursing	353	42.6
	M. Sc. Nursing	9	1.1
Level of experience	Novice	245	28.8
	Competent	308	37.3
	Expert	277	33.9
Sector	Government	658	79.3
	Private	158	19
	Autonomous	14	1.7

Table 2. Mean and Standard Deviation of Career Choice Motivation among clinical nurses.

n=830

Dimension	N	Minimum	Maximum	Mean	Std. Deviation
Mot_Pros	830	4.00	20.00	12.8096	4.18538
Mot_Soc_Influ	830	3.00	15.00	8.2566	3.18931
Mot_Fam_Influ	830	2.00	10.00	4.5386	1.96724
Valid N (listwise)	830				

Table 3. Influence of Career Choice Motivation on Job Satisfaction among nurses: Regression output. n=830

Influence of CCM on J_Sat	Standardised Reg. Weights	Estimate	S.E.	C.R.	P
J_Sat<---Mot	0.02	.059	.190	.312	.755

Table 4. Model fit indices: Influence of Career Choice Motivation on Job Satisfaction among nurses. n=830

C/df	RMR	GFI	AGFI	IFI	TLI	CFI	RMSEA	P CLOSE
3.355	0.085	.939	.921	.914	.900	.914	.053	.144

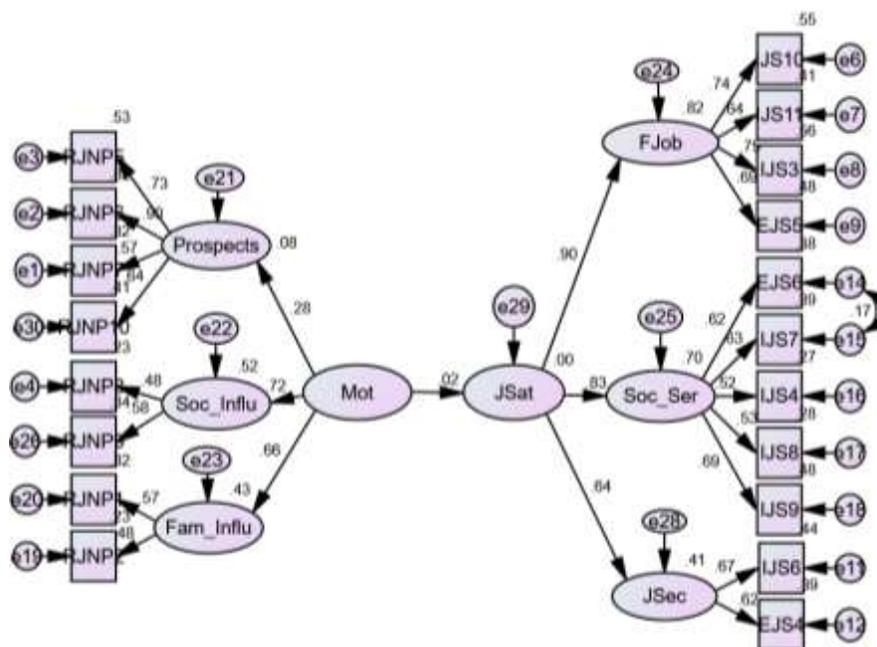


Fig.1. Structural Model showing the influence of Career Choice Motivation on Job Satisfaction among clinical nurses.

Table 5. Regression analysis testing the influence of dimensions of Career Choice Motivation on Job Satisfaction among clinical nurses n=830

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	R Square Change	Change Statistics			Sig. F Change
						F Change	df1	df2	
1	.089 ^a	.008	.007	10.08891	.008	6.669	1	828	.010
2	.123 ^b	.015	.013	10.05811	.007	6.079	1	827	.014

a. Predictors: (Constant), Mot_Pro

b. Predictors: (Constant), Mot_Pro, Mot_Soc_Influ

Table 6. ANOVA Showing the significant influence of dimensions of Career Choice Motivation on Job Satisfaction among clinical nurses

n=830

	Model	Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	678.852	1	678.852	6.669	.010 ^b
	Residual	84278.913	828	101.786		
	Total	84957.765	829			
2	Regression	1293.821	2	646.910	6.395	.002 ^c
	Residual	83663.945	827	101.166		
	Total	84957.765	829			

a. Dependent Variable: J_Sat

b. Predictors: (Constant), Mot_Pro

c. Predictors: (Constant), Mot_Pro, Mot_Soc_Influ

Table 7. Association between the demographic variables and Job Satisfaction among nurses using ANOVA.

n=830

Variable		N	Mean	Df	F	P value
Age	Class 1	407	71.15	3	2.406	.066
	Class 2	238	71.78	826		
	Class 3	147	69.73			
	Class 4	38	74.18			
Marital status	Married	503	71.48	1	.843	.359
	Single	327	70.82	828		
Qualification	GNM	468	72.50	2	10.884	.000
	B. Sc.	353	69.73	827		
	M. Sc.	9	62.89			
Area of work	Med	168	72.03	6	1.150	.332
	Surg	182	70.19	823		
	Obst-Gynec	82	71.47			
	Ped	99	69.63			
	ICU-OT-Cas	178	71.85			
	Psy	28	70.92			
	Com	93	72.10			
Level of health care	Primary	57	74.42	2	4.751	.009
	Secondary	210	72.07	827		
	Tertiary	563	70.58			
Experience	Novice	245	70.95	2	.050	.952
	Competent	308	71.56	827		
	Expert	277	71.07			
Sector	Government	658	70.73	2	3.784	.023
	Private	158	73.15	827		
	Autonomous	14	72.42			

Level of significance P < 0.05