Relationship of Job Satisfaction and Quality of Life among Taiwanese Nurses: A pilot study

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Background:

Under shrinking National Health Insurance System budgets, Taiwan hospitals have been forced to restructure and downsize the number of nursing staff. The decreasing nurse-to-patient ratio has imposed a higher work burden on nurses. This may impact nurses' job satisfaction and quality of life. Though the relationship between job satisfaction and quality of life of nurses has been examined extensively in western countries, few such studies have been conducted in Taiwan.

Purpose:

The purpose of this pilot study was to explore the relation between job satisfaction and quality of life of nurses in Taiwan. Another objective was to examine the relationship between the demographic characteristics of nurses and their job satisfaction and quality of life.

Methods:

The pilot study used a cross-sectional survey design. The purposive sampling method was used to administer questionnaires to informed participants. Thirty-one professional nurses working in medical centers in central and northern Taiwan returned completed questionnaires. Items on the questionnaire fall into three major categories(**Figure** 1.). In the current pilot study, data analysis was carried out on SPSS 18.0 Chinese version. Besides descriptive analysis, t tests, One-Way ANOVA, and Pearson correlation coefficients were also calculated to examine associations between each of the five job satisfaction domains and each of the six quality of life domains. Furthermore, Pearson product-moment correlation coefficients were used to test demographic variables and quality of life variables. Finally, the significant correlation found between demographic variables and quality of life variables was tested with job satisfaction variables through regression analysis. A significance level of 0.05 was accepted.
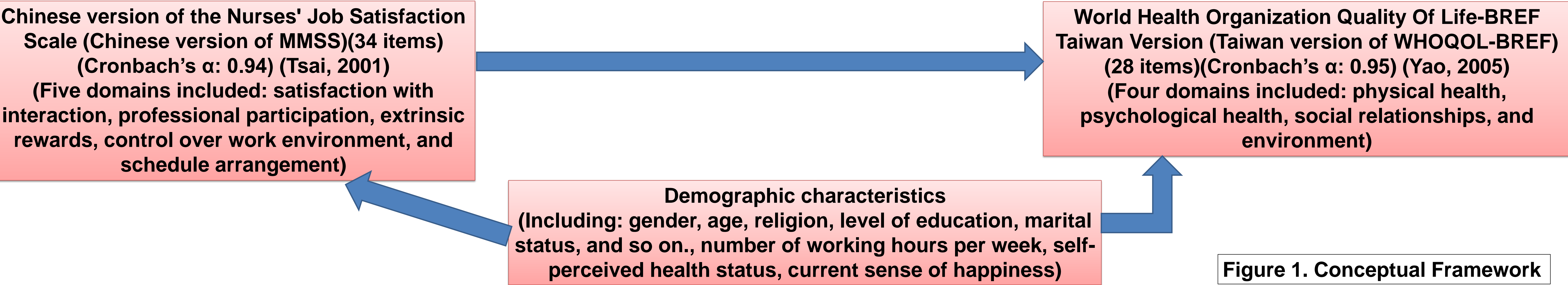
Chinese version of the Nurses' Job Satisfaction Scale (Chinese version of MMSS)(34 items) (Cronbach's α: 0.94) (Tsai, 2001) (Five domains included: satisfaction with interaction, professional participation, extrinsic rewards, control over work environment, and schedule arrangement)

World Health Organization Quality Of Life-BREF Taiwan Version (Taiwan version of WHOQOL-BREF) (28 items)(Cronbach's α: 0.95) (Yao, 2005) (Four domains included: physical health, psychological health, social relationships, and environment)

Demographic characteristics (Including: gender, age, religion, level of education, marital status, and so on., number of working hours per week, self-perceived health status, current sense of happiness)

Figure 1. Conceptual Framework

Result:

The mean age of the participants was 27.6±4.25 years. All were female, with baccalaureate degree. Most were single (87.1%), working in the internal medicine wards (93.5%). Of the five job satisfaction domains, extrinsic rewards (mean score=2.43 /5) and professional participation (mean score=2.45 /5) were found to have the lowest scores. Number of working hours per week and self-perceived health status were shown to be significantly correlated with job satisfaction and quality of life. Self-perceived health status was reported to have a positive relationship with quality of life. Also, working less than forty-hour per week and having a positive self-perceived health status were demonstrated to have significant positive relationships with job satisfaction and quality of life. However, the study identified no significant relationship between job satisfaction and quality of life (**Table** 1, 2, and 3).

Table 1. Relationships Between Demographic characteristics and Job satisfaction

Categories	Job satisfaction			N=31 P value
		N	mean(SD)	
Number of working hours per week				.003*
	forty and under forty-hour	8	3.05(.24)	
	over forty-hour	23	2.71(.26)	
Job satisfaction				.011*
	dissatisfied	10	2.61(.24)	
	well enough	21	2.89(.28)	
Self-perceived health status				.028*
	bad、fine	20	2.71(.26)	
	good、great	11	2.95(.30)	

Note. *: *p* < 0.05

Table 2. Relationships Between Demographic characteristics and Quality of life

Categories	Quality of life			N=31 P value
		N	mean(SD)	
Number of working hours per week				.020*#
	forty and under forty-hour	8	79.04(10.38)	
	over forty-hour	23	69.98(8.41)	
Job satisfaction				.009*#
	dissatisfied	10	65.99(6.59)	
	well enough	21	75.34(9.52)	
Self-perceived health status				.000*#
	bad、fine	20	67.89(6.80)	
	good、great	11	80.38(9.01)	
Religion				.020*&
	None	17	74.23(8.41)	
	Buddhist	6	69.34(4.53)	
	Taoist	3	81.71(13.86)	
	Christian	2	55.30(2.19)	
	A believer	3	69.44(9.72)	
Current sense of happiness				.013*&
	Feel unhappy	7	68.51(8.98)	
	Well enough	17	70.19(8.18)	
	Feel happy	7	81.32(9.08)	

Note. *: *p* < 0.05 ; #: Independent *t-test* ; &: ONE-WAY ANOVA

Table 3. Correlation Coefficient of each variable

Variables	Quality of life	Number of working hours per week	Job satisfaction	Self-perceived health status	Current sense of happiness	N=31 Job satisfaction
Quality of life						
Number of working hours per week	-.321*					
Job satisfaction	.352*	-4.07*				
Self-perceived health status	.541**	-.168	.338			
Current sense of happiness	.337*	-.104	.196	.434**		
Job satisfaction	.342	-.410**	.384*	.189	.309*	1.0

Note. *: *p* < 0.05 ; **: *p* < 0.01

References:
Tsai, S. L., & Lin, S. L. (2001). The Reliability and Validity of the Nurses' Job Satisfaction Scale. *VGH Nursing, 18*(3), 270-280.
Yao, K. P. (2005). *Development and Instructional Manual of Taiwan version World Health Organization quality of life measure - abbreviated version.* Taipei: The Whoqol-Taiwan Group.

Enforcement Rules of the Labor Standards Act of Taiwan - Chapter Ⅳ **Working Hours, Recess and Holidays** Article 20-1: The term "overtime" referred to in the Act shall mean the part of working hours that exceeds eight hours per day or the part of working hours that exceeds a total of eighty-four hours every two weeks.

Conclusion:

Nurses who work over forty-hour per week tend to feel more dissatisfied with their jobs and have negative perceptions of their health statuses. This in turn affects the quality of life of nurses. It is quite likely that these factors lead to greater nurse turnover. The pilot study has implications for nursing administrators regarding the nursing overtime issue in Taiwan; Taiwanese nurses should continue to push policy makers to introduce nursing overtime regulations. One limitation of the current study is the small sample size. Evaluating whether there is a relation between job satisfaction and quality of life of nurses in Taiwan will necessitate the use of larger sample sizes in future studies.