



To determinate stress and job satisfaction in health-care and educational administrative jobs in Ahvaz city, Iran.

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Abstract: We aimed to determine job stress and job satisfaction between two groups of administrative-educational and health-care jobs. It was a cross-sectional study which has done on 274 women that 137 of them were employees of government agencies and offices and the rest of them (137 people) were teachers of all educational levels. Data collecting tool was a three-part questionnaire including a- personal characteristics; b- job satisfaction questionnaire; c- job stress questionnaire. Data were entered into the SPSS (version 21) software and analyzed using descriptive and analytical statistical tests such as t-test. A significant level was considered less than 0.05. Finding of this study has shown that the total score of job satisfaction and all its dimensions except the supervisor, based on the jobs, have a significant difference and given to this issue that the mean and standard deviation of the total score of job satisfaction and all its dimensions except the supervisor in the administrative-educational jobs are more than the mean and standard deviation of the total score of job satisfaction and all its dimensions except the supervisor in the health-care jobs so we can say that people in health-care jobs have less satisfaction. low job satisfaction in health-care jobs, should be provided in a way that a balance can be kept between performing job duties and family duties and job security hereby we observe the improving the productivity level and servicing among staff in different educational-administrative and health-care areas.

Key words: Stress; Job Satisfaction; Health-Care; Ahvaz

INTRODUCTION

With the onset of the Industrial Revolution, the traditional roles of women have changed to some extent, so that instead of merely domestic work, part of their lives have been spent on outdoor activities (1). Women totally make up one-third of the labour force in the world which is more in developing countries (about 40 percent) and in the rest of the world it is less than one-third (2). Currently, there is over 2.1 million employed women in the country (3). Work is one of the most interesting things that can be talked or thought about, because most of the daylight hours are spent on it. Work for some people is a source of happiness and for others sadness (4). In recent decades, the crucial role of promoting mental health in workplaces as one of the most important aspects of promotion and development of human resources in organizations and the importance of physical and mental health of work force in financial, service, training and industrial institutions to promote the productivity level have been considered (5). No matter what the job people have, they have feelings and attitudes toward it. They may be happy or unhappy with some aspects of their work and they have positive or negative ideas toward the desirability of what they are doing. Regardless to financing aspect of work, it can provide some basic human needs, such as mental and physical mobility, social contact, sense of self-worth, confidence and ability. However, it could be a major source of stress (6). Job stress is the stress that a certain person has at a certain job. This stress is created from the mutual interaction between working conditions and individual characteristics of an employed person. So that the demands of the workplace and its associated pressure is more than the extent that one can cope (7).

Disorders of cardiovascular, digestive, nervous systems and even physical illnesses arising from mental and emotional sources are some of job stress complications (8). Studies show that each year about 164 million people worldwide are suffered with heart, lung, neuropsychiatric diseases arising from job and 1.1 million people lose their lives due to job stress and work-related diseases (9). Aghili's study and colleagues shows that job stress and stressful life events are predictive variables for mental health (10). Complications arising from job stress lead to job dissatisfaction so that one of most common signs of job dissatisfaction is absenteeism from work and leaving the profession (11). Job satisfaction is an emotional and positive state arising from job assessment or experiences which has various aspects and factors. In fact, what forms job satisfaction is not its nature but is the expectations that a person has from that job (12). Researchers have estimated that 60 to 70 percent of all nurses leave their job. They believe that the main reason of leaving job is job dissatisfaction (13). Studies show that one third of nurses in England and Scotland and more than one fifth of all nurses in America have tended to leave their job (14). Studies indicate that the effect of shortage of nurses will reach to the highest degree in 2015 – 2020. This shortage of force leads to not receiving to global goals of health systems and job dissatisfaction among nurses (13). Lee and Shin (2010) in a study started to investigate the relationship between stress and job satisfaction. The results of this research confirm the significant and negative effect of job stress on job satisfaction (15). The results of meta-analysis of a research on 15000 nurses have shown that there is a strong relationship between job satisfaction and stress and also a strong relationship between job satisfaction and the work quality of nurses has been observed (16). And also other

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researches on the personnel of a public hospital showed that less job satisfaction had relationship with more mental disorders (17). All associated researches have also shown that among faculty members of universities, women compared to men experience more job stress. Also studies have shown that the main source of job satisfaction decline among women is conflict role and ambiguity role (18). Meng and Liu (2008) performed a research entitled, "stress in math teachers in high schools in China". This research was designed to investigate the general level of stress in Chinese math teachers, its main sources and ways to deal with it. This study showed that Chinese teachers had higher level of stress than their western counterparts. Problems related to students' motivation and parents' inattention as well as general inattention to high workload of teachers have been placed at the top of the teachers' job stress sources. Attention to salary and healthy life and getting feedback from given educations respectively have been mentioned by them as the best ways to struggle with job stress (19). Due to increasing the number of employed women and this fact that promotion of employment Status lead to improvement of service quality, the present study was performed to determine job stress and job satisfaction between two groups of administrative-educational and health-care jobs.

MATERIALS AND METHODS

It was a cross-sectional study. Random sampling method was available. Administrative-educational staff were 274 women that 137 of them were employees of government agencies and offices and the rest of them (137 people) were teachers of all educational levels. And all health-care staff were 137 people. Data collecting tool in the present study was a three-part questionnaire including a-personal characteristics including age, age of marriage, duration of marriage, number of children, age of the youngest child, age of the spouse and family income; b-job satisfaction questionnaire [(JDI) Job Descriptive Index]; c-job stress questionnaire [(HSE) Health and Safety Executive]. To provide the scientific validation (validity) of the questionnaire of demographic information, content validity was used. In the way that after studying the latest books and articles, the questionnaire and check-list were prepared and then were sent to 10 people of faculty members of Ahvaz Nursing and Midwifery school to be studied and modified and after carrying out the necessary revisions, according to them, the final version was drafted. The job satisfaction has 75 questions and 6 components and consists these dimensions: the nature of job, supervisor, colleagues, promotion, salary and benefits and workplace. The nature of job consists of 22 questions, the supervisor dimension 14, colleagues 11, promotion 7, salary and benefits 9 and workplace dimension 7 questions. This questionnaire is scored in a way that answer to each phrase is given a score from one to five, based on the Likert scale. Then the sum of scores of phrases of each scale are added. Thus individual's score on each scale is obtained, which can be divided on the number of phrases of that scale and for each scale a score from 1 to 5 is obtained in which a less than 1.5 score means "very little job satisfaction", 1.5 to 2.5 "a little job satisfaction", 2.5-3.5 "moderate job

satisfaction", more than 3.5 "much job satisfaction" (20). This questionnaire was standardized by five experts and professors in Tarbiat Modarres University in 2012-2013 using face and content validity. Reliability of this questionnaire was conducted using a split-half reliability. The reliability of the questionnaire was approved with 94% confidence (21). The stress questionnaire consists of 35 questions and 7 subscales: demand, control, authorities support, colleagues support, relationships among colleagues, role and change. The Subscale of demand includes questions 3, 6, 9, 12, 16, 18, 20, 22; the subscale of control includes questions 2, 10, 15, 19, 25, 30; the subscale of authorities support, questions 8, 23, 29, 33, 35; the subscale of colleagues support, questions 7, 24, 37, 31; the subscale of relationships among colleagues, questions 5, 14, 21, 34; the subscale of role, questions 1, 4, 11, 13, 17; and the subscale of change, questions 26, 28, 32. To score the questions, for answering each question 5 options, based on the Likert scale, (never, rarely, sometimes, usually and always) have been considered and each question is given a score from 1 to 5. Thus in questions 3, 5, 6, 9, 12, 14, 16, 18, 20, 21, 22, 34, "never" is given 5, "rarely" 4, "sometimes" 3, "usually" 2 and "always" 1. But in other questions "never" is given 1, "rarely" 2, "sometimes" 3, "usually" 4 and "always" 5. Then the sum of scores of all phrases are added. Thus individual's raw score on each scale is obtained, which can be divided on the number of phrases of that scale to reach to the person's score in that scale. Then by adding all scores of a person in each scale, a score from 1 to 5 is obtained. A less than 1.5 score indicates "high stress", 1.5 to 2.5 "moderate stress", 2.5 to 3.5 "a little stress" and a score more than 3.5 indicates "no stress". This questionnaire in Iran and by Azad Marz Abadi from Research Centre of Behavioural Sciences of Iran University of Medical Sciences in 2010-2011 using the construct and content validity was standardized. Reliability of this questionnaire was calculated using split half reliability method. The reliability of this questionnaire was approved with 78% confidence (21 and 22). The questionnaires were given to staff after doing coordination with the relevant authorities. Each subject in each group was given the same explanation about the goals of the study and an oral and a written consent letter were taken from all subjects. All subjects were let leave the study whenever they tended to not participate in the study any more. The researcher was present in the place to answer the probable questions of the subjects about the questions of the questionnaire. Data was statistically analyzed using SPSS software version 22.

RESULTS

Mean and standard deviation of all demographic characteristics based on the separated jobs have been shown in the Table 1. All demographic characteristics except the years after marriage one, based on the separated jobs, show a significant difference. This issue that mean and standard deviation of demographic characteristics in administrative-educational jobs are more than them in health-care jobs means that administrative-educational jobs have more relationship with demographic characteristics except the years after marriage one (Table 1).

Table 1: Comparison of mean and standard deviation of demographic characteristics based on the separated jobs

Demographic characteristics	Administrative-educational jobs	Health-care jobs	P-value
	Mean and standard deviation	Mean and standard deviation	
Age	35.57±5.10	33.05±5.65	0.001
Age of marriage	24.21±4.16	24.40±3.48	0.64
Years after marriage	11.28±6.13	8.73±5.58	0.001
The number of children	1.51±0.84	1.15±0.93	0.001
Age of the youngest child	6.16±4.77	4.02±4.26	0.001
Age of spouse	39.93±6.23	36.72±6.74	0.001
Family income	2.47±0.72	2.70±0.80	0.03

Having a look at the Table 2 shows that the total score of job stress and all its dimensions, in terms of jobs, have a significant difference and given to this issue that the mean and the standard deviation of the total score of job stress and all its dimensions in administrative-educational jobs are more than the mean and standard deviation of the total score of job stress and all its dimensions in health-care jobs, so the administrative-educational jobs are without stress. And also the results show that the total score of job satisfaction and all its dimensions except the supervisor, based on the jobs, have a significant difference and given to this issue that the mean and standard deviation of the total score of job satisfaction and all its dimensions except the supervisor in the administrative-educational jobs are more than the mean and standard deviation of the total score of job satisfaction and all its dimensions except the supervisor in the health-care jobs so we can say that people in health-care jobs have less satisfaction (Table 2).

Table 2: comparison of mean and standard deviation of dimensions and the total score of job stress and job satisfaction based on the separated jobs

The measured feature	Dimensions of characteristics and the total score	Administrative-educational jobs	Health-care jobs	P-value
		Mean and standard deviation	Mean and standard deviation	
Job stress	Demand dimension	3.08±0.63	2.72±0.63	0.001<
	Control dimension	3.28±0.60	3.13±0.69	0.023
	support of authorities dimension	3.38±0.75	3.23±0.70	0.041
	co-workers support dimension	3.46±0.70	3.34±0.71	0.125
	Relationships among colleagues dimension	3.79±0.84	3.29±0.82	0.001<
	Role dimension	4.32±0.57	4.15±0.64	0.006
	Change dimension	3.48±0.85	2.97±0.90	<0.001
	total score of job stress	3.54±0.47	3.26±0.44	0.001<
	nature of job dimension	3.60±0.71	3.02±0.72	0.001<
Job satisfaction	supervisor dimension	3.89±0.80	3.77±0.84	0.16
	colleagues dimension	3.70±0.87	3.40±0.76	0.001<
	Promotion dimension	3.16±1.08	2.73±1.01	0.001<
	Salary and benefits dimension	2.47±0.77	2.27±0.77	0.015
	Workplace dimension	3.35±0.88	2.48±0.87	0.001<
	Total score of job satisfaction	3.36±0.61	2.95±0.58	0.001<

DISCUSSION

The results of this study showed that in spite of this issue that demographic characteristics have a meaningful relationship with health-care and administrative-educational jobs but these demographic characteristics and job satisfaction do not have correlation and job stress and job stress are just affected with job groups. According to the results of this study, the health-care jobs have job stress that due to stressful factors of job in workplaces such as unsuitable workplace, tolerating patients' pain, dealing with emergencies cases and the burden of the health of patients and working alternative shifts, it can be expected that employees in health-care jobs have stress. Neely in his study called the hospital jobs, which are related to caring the sick, as stressful jobs (17). And also results show that the job satisfaction of health-care jobs is less than it in administrative-educational jobs. In fact, the extent of job stress and time shortage are two main reasons for job dissatisfaction. So administrative jobs because of enough time and no job stress have more job satisfaction than health-care jobs. In the study of Soleiman, 43.8 percent of nurses were dissatisfied with their job and 54.2 percent had relative satisfaction. The research of Afshar Moghaddam and Golchin show that 63 percent of participants were

dissatisfied with their job. And also Rajabe Yekta announced that there was 67.9 percent job dissatisfaction (23). Koolbell in his research on nurses and midwives, concluded that people in health-care jobs do not have much satisfaction with their jobs (4). But the results of Nolan's study and colleagues showed that 85 percent of nurses called their job interesting and they were satisfied with their job (22). The results of Price's study showed that half of nurses, who were under study, were satisfied with their job (24). It is hoped that providing multi-faceted and interdisciplinary interventions can minimize the differences of health-care jobs including nursing profession in Iran and other parts of the world. In terms of the dimension of "nature of job", health-care jobs have less mean and standard deviation than administrative-educational jobs. The research of Lovo and colleagues show that there is a relationship between the job satisfaction and the type of job (25). The results of Afshar Moghaddam and Golchin showed that 57.6 percent of nurses were dissatisfied with their job and duties and 58.7 percent of nurses were dissatisfied with the relationship between their job and their personal life. And also the results of Tovey's study and colleagues show that Job insecurity is one of the effective

factors in dissatisfaction of nursing profession. In terms of “supervisor” of job satisfaction, there was no meaningful relationship with job satisfaction, in terms of jobs ($P=0.16$). However, Modeli and colleagues in their study showed that there was a relationship between the manner of supervising and job satisfaction in nurses (23). The dimension of “colleagues” of job satisfaction in health-care jobs had less mean and standard deviation than administrative-educational jobs. The results of Adams’s and colleagues study show that the highest correlation exists among job satisfaction and nursing team coordination, staff, the professionalism of staff and doctors cooperation (26). The dimension of “promoting” of job satisfaction in health-care jobs had less mean and standard deviation than administrative jobs. The results of Rajabi Yekta show that 63 percent of nurses were dissatisfied with personnel evaluation system (23). And also the results of Wang’s study showed that promoting and increasing salary is one of the most important factors of job satisfaction (27). In this regard, providing facilities for the further education of people in health jobs is essential, because increasing the knowledge and skills of health-care staff improves the quality of services to the sick and patients’ satisfaction and in the other hand, the satisfaction of health-care staff. Therefore, continual education not only removes this information need, but also leads to job improvement in health-care jobs which itself increases the salary and benefits and job satisfaction. The dimension of “salary and benefits” of job satisfaction in health-care jobs had less mean and standard deviation than administrative-educational jobs. The results of Rajabi Yekta indicate that in terms of salary and benefits, 75.12 percent of nurses were dissatisfied. Afshar Moghaddam and Golchin also confirm this issue that dissatisfaction with salary has gained the highest score (22). The results of Wang’s study showed that financial pays and increasing salary was one of the most important factors of job satisfaction (26). In this regard, some movements have been made by policy making organizations. Thus, it is hoped that continuing of these movements improves the payments of staff in health-care jobs. The dimension of “workplace” of job satisfaction in health-care jobs had less mean and standard deviation than administrative-educational jobs. Rajabi Yekta in his research indicated that 50 percent of participants were dissatisfied with their work conditions and welfare facilities (22). In our country, very little welfare facilities have been designed for health-care jobs which itself limits using welfare facilities and work conditions for them. Given to this point that job stress among staff of this group of jobs is high, it seems that planning and providing these conditions are necessary.

CONCLUSION

According to the results of this study which indicate the high stress in educational-health jobs, it is better to plan some measures to help people to do their duties collectively not individually and interestingly and with minimum mental pressure. And also because of low job satisfaction in health-care jobs, conditions should be provided in a way that a balance can be kept between performing job duties and family duties and job security hereby we observe the improving the productivity level and

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