

Original Article

The relation between nurses' quality of work life with intention to leave their job

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ABSTRACT

Background & Aim: Nurses' intention to leave their job is problematic for health system and the quality of work life is one of the important factors affecting this intention. The present study was aimed to show the nurses' quality of work life and its components, their intention to leave the job, and the relation between nurses' quality of work life and their intention to leave the job.

Methods & Materials: This cross-sectional study was conducted on a sample of 300 nurses in teaching hospitals of Kurdistan University of Medical Sciences which were selected through census method. Walton's quality of work life (1988) questionnaire and intention to leave questionnaire designed by Rusbelt et al (1980) were used to collect the data. SPSS 16 software, analytical and descriptive statistics, and statistical tests such as ANOVA, Tukey's HSD test, Independent T-Test and Pearson's correlation coefficient were used to analyze the data.

Results: The results showed that 61% of nurses had low levels of work life quality and 39.7% of the nurses intended to leave their job. Intention to leave job was significantly related to the employment status ($P=0.01$) and gender ($P=0.03$). Also, there was a significant and inverse correlation between the quality of work life components and intention to leave the job ($P=0.0001$).

Conclusion: Nursing administrators must adopt effective strategies to create favorable working conditions under which nurses' work life quality in different aspects would be improved. To prevent the nurses' from leaving their job, nursing managers should administer interventions to improve the atmosphere of organization that affect the components of working life quality.

Introduction

Although nurses play an important role in quality improvement of the health care, there is no sufficient nursing staff to serve the health needs of the citizens in nearly all countries (1, 2). In addition, nurses express high levels of job dissatisfaction and burnout and most of them tend to leave their job (3). Job leaving in nurses is problematic for health system due to the existing nursing shortage and society's investment in nursing education (4). Leaving the job incurs high costs for the health system such as hiring, training and management costs

of the nursing staff and it reduces the quality of services (5, 6). Various studies have reported an intention to leave the job ranging from 4% to 54% among nurses (7). This great disparity could be attributed to different definitions of job leaving. According to the study conducted in 10 European countries, about 9% of the nurses tended to leave their job (4). It amounts to more than 35% in Iran (8).

The researchers have not yet reached an agreement on the definition of the concept of intention to leave (9). Totally, intention to leave a job is staff's perceptions toward leaving their job (10). It has been found to be a predictor of actual leaving (11). There are a variety of factors affecting intention to leave the job among nurses. High work stress,

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mismatch between the number of nurses and heavy workload, unpleasant working environment, low employee engagement, work-family conflict, job burnout, dissatisfaction with salaries, and lack of promotion at work are some of them (4, 7, 12-14). One of the factors that can affect the intention to leave the job is the quality of life and especially quality of work life. Quality of work life (QWL) is a subjective phenomenon that is influenced by personal perceptions and feelings (10). It is like an umbrella term that refers to attitude towards the job and general satisfaction with work life, representing satisfaction with work-life balance, a sense of belonging to the work group, and feelings of being valued and respected within the organization (15, 16).

QWL includes not only occupational factors such as job satisfaction, salaries, and interaction with coworkers but also other factors such as life situation and general feelings of wellbeing (17). It covers a number of measures including welfare and medical facilities, job security, job design, job description, career development plans, training, and improvement (18). QWL is a main criterion for new recruits and current staff retention within all organizations. Hospital administrators must create a positive working environment not only to recruit new nurses but also to retain the current nurses and prevent their turnover (19, 20). QWL increases the productivity of nurses, resulting in the retention of nurses, effective usage of nursing workforce, and increased patients', nurses', doctors' and other staffs' satisfaction (21).

Despite the significant and inverse correlation between quality of work life and intention to leave the job in nurses (6, 22-24), determining the critical factors and formulating a strategy to address them are two of the most important issues to evaluate different aspects of work life. Given the importance of the work life quality

improvement in increasing productivity, reducing work stress and increasing the retention time of the nurses, the present study was aimed to show the nurses' quality of work life and its components, their intention to leave the job, and the relation between nurses' quality of work life and their intention to leave the job.

Methods

The present study had a cross-sectional design. It was conducted on a sample of 480 nurses in teaching hospitals of Kurdistan University of Medical Sciences selected using the census method. The inclusion criteria included all the nurses (with associate's or higher degrees in nursing) who were willing to participate in the study. They were asked to complete the questionnaire. As the exclusion criteria, lack of cooperation from some participants and a number of incomplete questionnaires caused the researchers to finally examine a total of 300 questionnaires (response rate=62.5%). In this study, a questionnaire consisting of three parts was used to collect the necessary data. Part 1 was assigned to demographic information (age, gender, marital status, educational level, employment status, work experience, shifts, service location, work experience and income). Walton's quality of work life (1980) questionnaire(25) and intention to leave questionnaire designed by Rusbelt et al. (1988) (26) were the second and third parts, respectively.

Walton's questionnaire which was designed in America contains 35 questions, examining 8 components of work life quality (adequate and fair payment, safe and hygienic working environment, development of human capabilities, steady growth and security opportunities, social integration, unquestioning obedience to the law, overall atmosphere of work life, and social dependence of work life). Ratings were

completed on a five-point Likert scale (very dissatisfied=1, dissatisfied=2, neither satisfied nor dissatisfied=3, satisfied=4, very satisfied=5). Quality of work life was shown at three levels, namely low, moderate and high. The score range for any particular subject test was from 35 to 175 (27). Rusbelt et al. intention to leave questionnaire which was designed in America contains 3 questions (I often think about quitting. It is very likely that I will actively look for a new job in the next year. I will leave this organization in the next year.) with a five-point Likert scale for scoring (strongly agree, agree, no comment, disagree, and strongly disagree) (26).

Several other studies have also used these questionnaires (24, 27). Experts in this field attested the face and content validity of the questionnaires in terms of questions' transparency and simplicity. Question selection was based on theoretical principles and foundations of the research, and ambiguous questions were avoided. The reliability of the data collection tools was assessed by test-retest and Cronbach's alpha methods. The correlation coefficients of 0.82 and 0.85 were obtained for the quality of work life questionnaire and the intention to leave questionnaire, respectively. Also, Cronbach's alpha coefficient was calculated as 0.91 and 0.93 for the mentioned questionnaires, which confirms their reliability.

Data were analyzed using SPSS, version 16. Descriptive statistics were used to describe participants' characteristics and descriptive data regarding the study sections. One-way ANOVA and T-Tests were used to examine the relation between demographic factors and the quality of work life and intention to leave. Tukey test was then used as a post-hoc test for assessing the differences between all pairs of groups. Pearson's correlation coefficient was used to examine the correlation between the quality of work life components and intention to leave. The level of significance was set at 0.05 (2-tailed).

This study was approved by the Student Research Committee of Kurdistan University of Medical Sciences with the contract number 93/130 and was confirmed for ethical considerations by receiving the code of ethics muk.rec.1393.130 from the ethics committee. Ethical standards required written consent obtained from hospitals administrators. Confidentiality of participants' information was ensured. Questionnaires were administered to all the hospital departments during different shifts. After giving clear explanations and obtaining verbal consent, nurses were asked to fill in the questionnaires.

Results

Table 1. Descriptive analysis of demographic variables, quality of Work Life and Intention to leave the job (N=300)

Variable	N (%)
Gender	Female 219(73)
	Male 81(27)
Marital status	Married 172(57.3)
	Single 128(42.7)
Educational level	Associate's degree 21(7)
	Bachelor's degree 265(88.3)
	Master's degree 14(4.7)
Shifts	Fixed 30(10)
	Rotating 270(90)
Employment status	Mandatory 58(19.3)
	Contractual 69(23)
	Provisional 95(31.7)
	Sub-permanent 16(5.3)
Monthly income (\$)	Permanent 62(20.7)
	<300 41(13.7)
	300-650 204(68)
Quality of Work Life	650-850 55(18.3)
	Low 183(61)
	Moderate 113(37.7)
Intention to leave the job	High 4(1.3)
	Low 43(14.3)
	Moderate 138(46)
Age (years) Mean ±SD	119(39.7)
Work experience (years) Mean ±SD	31.34±6.75
Quality of Work Life Mean ±SD	7.29±6.16
Intention to leave the job Mean ±SD	84.03±21.88
	9.92±3.06

Considering the results of the questionnaires' analysis, majority of the subjects were female (73%), married (57.3%), undergraduate (88.3%), contractual (31.7%), and had rotating shifts (90%). Monthly income and the mean age and work experience respectively were 500 \$, 31 years old and 7 years within most departments. The mean scores of work life quality and intention to leave the job were calculated as 84.03 ± 21.88 (total score=175) and 9.92 ± 21.88 (total score=15), respectively. The frequency of the work life quality level in 61% of the nurses was low, 37.7% was moderate, and 1.3% was high. The level of intention to leave the job among 14.3% of nurses was low, 46% was moderate, and 39.7% was high (Table1). The findings indicated no significant relation between the

mean of work life quality and demographic variables. Intention to leave the job was significantly related to employment status and gender. It meant that female and contractual nurses were more likely intended to leave their job (Table2). There was a significant and inverse correlation between QWL ($r=-0.3$) and its components (adequate and fair payment ($r=-0.2$), safe and hygienic working environment ($r=-0.23$), development of human capabilities ($r=-0.22$), steady growth and security opportunities ($r=-0.27$), social integration ($r=-0.31$), unquestioning obedience to the law ($r=-0.32$), overall atmosphere of work life ($r=-0.32$), and social dependence of work life ($r=-0.27$)) with intention to leave the job ($P=0.0001$) (Table3).

Table2. Quality of work life, intention to leave the job and demographic variables correlation

Variables	Quality of work life		Intention to leave the job	
	Mean±SD	P value	Mean±SD	P value
Age (Year)	20-33	84.58±21.47	9.76±3.02	
	34-47	82.83±23.95	10.1±3.22	0.12
	48-60	75.75±18.85	11.63±2.15	
Educational level	Associate degree	81.92±23.97	9.09±3.37	
	Bachelor	84.45±21.84	10.03±3.05	0.73
	Master	79.47±21.36	9.14±2.71	0.25
Employment Status	Mandatory service	83.82±20.04	9.87±2.93	
	Contractual	85.95±21.17	10.71±2.83	
	Provisional	80.01±22.71	9.14±3.04	0.01
Shifts	Sub-permanent	90.14±23.79	9.25±4.18	
	Permanent	86.47±22.06	9.79±3.05	
	Fixed	81.13±23.19	10.43±3.18	0.33
Work experience (Year)	Rotating	84.32±21.86	9.86±3.06	
	1-10 years	84.14±21.94	9.84±3.1	
	11-20 years	87.89±20.04	9.92±3.02	0.29
Sex	21-35 years	82±30.26	11.13±2.58	
	Female	83.08±22.07	10.15±3.04	0.03
Marital status	Male	86.36±22.23	9.29±3.06	
	Single	83.91±22.23	9.61±3.03	0.93
Monthly income (\$)	Married	84.15±21.62	10.15±3.08	0.12
	<300	82.39±17.66	9.68±2.76	0.67
	300-650	82.89±22.78	9.89±3.17	
	650-850	90.28±19.87	10.21±2.91	

Table3. Quality of work life components and intention to leave the job correlation

	Quality of work life	Adequate and fair payment	Safe and hygienic working environment	Development of human capabilities	Steady growth and security opportunities	Social integration	Unquestioning obedience to the law	Overall atmosphere of work life	Social dependence of work life
Intention to leave the job	$r=-0.302$ $P=0.0001$	$r=-0.206$ $P=0.0001$	$r=-0.235$ $P=0.0001$	$r=-0.226$ $P=0.0001$	$r=-0.271$ $P=0.0001$	$r=-0.312$ $P=0.0001$	$r=-0.327$ $P=0.0001$	$r=-0.321$ $P=0.0001$	$r=-0.271$ $P=0.0001$

Discussion

Based on the results, nurses had a low and moderate quality of work life. The study conducted by Dargahi et al. showed that about two third of the nurses working in the teaching hospitals of Tehran University of Medical Sciences were not satisfied with the quality of their working life (28). Moreover, in their study, Saber et al. showed that quality of working life among the nurses was low (29). In the studies carried out by Khaghanizadeh et al. (30) and Reyasi (31), the nurses had a moderate level of working life quality. Due to the importance of quality of working life in every organization, particularly in nursing profession, and since quality of working life affects different levels of the personnel's work and performance, the managers need to pay attention to its dimensions and factors.

The majority of nurses reported moderate and high intention to leave their jobs. Nikbakht-Nasrabadi et al. reported moderate intention to leave the job among Iranian nurses in emergency departments (32). 67.5% of Lebanese nurses reported intention to leave their job within the next 1 to 3 years (33). Based on a report, the world is currently observing a shortage of nursing staff (34). So, managers ought to investigate the factors affecting the intention of nurses to leave the job and use effective strategies.

A significantly different intention to leave the job was seen in nurses with various employment statuses. Contractual nurses were more likely intended to leave their job. This was in agreement with studies conducted in Italy (35) and Finland (36). They also showed that intention to leave the job was stronger among nurses with unstable employment status. It could be caused by feelings of job insecurity, lack of support by the organization, and dissatisfaction with fringe benefit and salaries (37).

The results of the present study showed a statistically significant correlation between gender and intention to leave the job. Female nurses exhibited a greater intention to leave the job than males. The studies that were carried out in 10 European countries (4) and in Lebanon (33) found the same results. High conflict between work and family roles of women, high workload and stress of nursing profession, social pressures on female nurses to leave their job and lack of women's responsibility to meet the economic costs of the family in Iranian society could be considered as the main factors.

Given the information obtained from questionnaires, nurses had low work life quality. Dargahi et al. found that nearly two thirds of the nurses working in teaching hospitals were dissatisfied with their work life quality (28). Low work life quality was also reported by Saber et al (29). In the studies conducted by Khaghanizadeh et al.(30) and Mogharrab et al.(38), nurses exhibited a good work life quality. Due to the importance of work life quality in any profession especially nursing and its impact on different levels of staff performance, related aspects and factors need to be considered by administrators.

Work life has a variety of components. In this study, nurses were not satisfied with the overall atmosphere of work life, adequate and fair payment, safe and hygienic working environment, and social dependence of work life. The overall atmosphere of work life accounted for the highest dissatisfaction. In the same study, nurses stated that their working environment could not prepare career development opportunities (39). Dargahi et al. observed nurses dissatisfaction with unfavorable working conditions (28). In the present study nurses reported low work life quality in terms of adequate and fair payment. In Khaghanizadeh et al., inadequate and minimum fringe benefits and salaries were reported by nurses (30). The same result was obtained by other studies (28, 40). Therefore,

nursing administrators need to reconsider wage payment systems and improve work life situation. Also, Nurses did not exhibit a safe and hygienic working environment. In the same study, nurses complained about happening work-related accidents, lack of safety regulations at work, and unsatisfactory hygienic situation (28). Moradi et al. concluded that nurses work life quality could be influenced by work-related accidents (41). Thus, it is necessary to evaluate staff's working environment in terms of safety and health. It can result in satisfactory primary health care and quality of work life. The present study generally showed that there was a significant and inverse association between the components of work life quality and intention to leave the job among nurses, which was in agreement with the study conducted in China (22). Safe working environment, promotion and development opportunities within the organization, fair payments, adequate salaries, and work-life balance can lead to satisfied and happy individuals and decrease the intention to leave the job.

It was also found that quality of work life was inversely and significantly associated with intention to leave the job. This finding was similar to that of the studies undertaken in Taiwan (15), Saudi Arabia (42), Iran (24) and China (6). It means that strong interaction between coworkers, reasonable fringe benefits and salaries, and ideal growth opportunities motivated nurses to continue their job. Totally, to prevent nurses from leaving their job, nursing managers should administer interventions to improve the atmosphere of support and regard all the components of working quality of life.

The present study suffered from a number of limitations including minimum cooperation and intention to complete questionnaires from some staff, short time to respond to the questions, and poor mental and physical condition of some of the participants at the time of the study. The researcher encouraged

subjects to participate in the study by explaining its objectives and importance. Another limitation of the study was not investigating the ward of nurses as a variable, so it's recommended to investigate and compare the intention of leaving the job among the nurses of different wards. With regard to the importance and necessity of more studies on predictors and factors affecting intention to leave the job among nurses, it is suggested to assess the impact of other variables and factors such as job burnout, organizational engagement, and job characteristics on their intention to leave the job.

In the present study, nurses in teaching hospitals had a low quality of work life, were more likely intended to leave their job, and were dissatisfied with most components of work life quality (adequate and fair payment, safe and hygienic working environment, overall atmosphere of work life, and social dependence of work life). Considering the important role of nurses in the healing process of patients and improvement of health and the negative effect of leaving their job on the quantity and quality of and health services, their satisfaction with job and working environment in particular and their work life quality in general need to be improved. Considering various aspects of QWL, nursing administrators must adopt effective strategies to create favorable working conditions under which nurses work life quality is improved.

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Conflict of Interest

Conflict of interest: Authors have no conflict of interest to declare regarding this study.

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