

PREDICTORS OF JOB DISSATISFACTION & INTENT TO QUIT – PRELIMINARY RESULTS

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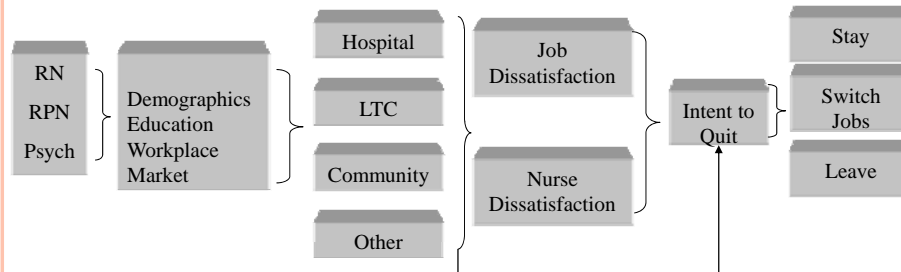


CIHR IRSC

CONTEXT

- Concerns with adequate supply of health human resources (HHR) makes retention a key policy issue
- How to measure retention issues?
 - Is Job satisfaction a good predictor of intent to quit as other studies have found?
- Generally, nurses have high satisfaction however, what is different about the population that isn't satisfied?
 - Are they concentrated in specific areas? Are there unique characteristics in this population?
- Important to understand this “at-risk” population of nurses.

DRAFT THESIS CONCEPTUAL FRAMEWORK



3

THESIS QUESTIONS

1. What is the relationship between demographic, education and employment factors (including dissatisfaction) on the intent to quit?
 - a) Is there an age and/or sector differential in intent to quit?
 - b) What is the relationship between job dissatisfaction and intent to quit?
2. What is the relationship between demographic, education and employment factors and job dissatisfaction by nurse type?
 - a) Is there an age and sector differential in satisfaction in job and nursing?

4

DATA SOURCE

- 2005 National Survey of the Work and Health of Nurses:
Cross-sectional survey of nurses across Canada conducted by Canadian Institute of Health Information, Statistics Canada and Health Canada

- Survey included 27 main areas
 - education in nursing , work history, current employment, job satisfaction, work hours, role overload, absences from work, exposure to risk, general health, work stress, depression, medication use

5

PREDICTORS OF JOB DISSATISFACTION

Outcome Variable

- Job Dissatisfaction: Binary response variable dichotomized at:
 - Very Satisfied/Satisfied (0)
 - Very Dissatisfied/Dissatisfied (1)

6

TODAY'S PRESENTATION: PRELIMINARY ONTARIO RESULTS

Model Population

- RNs employed in nursing in Ontario

Methodology

- Estimating job dissatisfaction using a binary probit model and sub-analysis by:
 - A. Less Than 45
 - B. Greater Than 45

7

INDEPENDENT VARIABLES

Individual Characteristics

Demographics

1. Age
2. Marital Status
3. Presence of Children by Age
4. Household Income
5. Self-Reported Health Status

Education

1. Highest Education in Nursing
2. Highest Education outside of Nursing

Other Work Variables

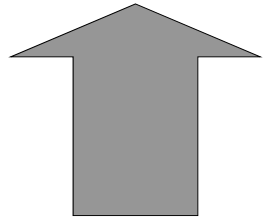
1. Number of Jobs
2. Non-Nursing Job

Work Variables

1. Union Status
2. Work Sector
3. Full-Time/Part-Time/Casual
4. Area of Responsibility
5. Shift Type, Shift Hours, Shift Changes
6. Choice in Work Hours and Days
7. Childcare Availability
8. Role Overload
9. Skill Discretion
10. Decision Authority
11. Job Insecurity
12. Physical Demand
13. Social Support
14. Job Strain

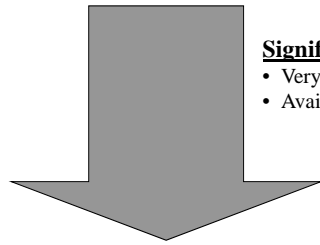
8

PREDICTORS OF JOB DISSATISFACTION IN ONTARIO



Significantly Increase Job Dissatisfaction (p <0.05)

- High Role Overload
- Low Decision Authority✦
- Low Social Support
- High Job Strain
- Casual Employment✦
- Community Sector
- Shift > Eight Hours



Significantly Decrease Job Dissatisfaction (p <0.05)

- Very Good Self-Reported Health
- Availability of Childcare

9

PRELIMINARY CONCLUSIONS

1. Work characteristics appear to be significantly driving job dissatisfaction indicating potential policy levers to improve satisfaction.
2. Differences between younger and older RNs include being in casual employment, working in the community sector and concern with decision authority.
3. Appears that the work sector does influence dissatisfaction specifically community sector. This may indicate structural issues within the sector.

10

DISCUSSION

- Dissatisfaction may be signalling retention issues.
- Policies targeted at work structure and characteristics may help improve dissatisfaction such as healthy workplaces.
- Policies need to consider generational needs as results highlight differences in nurses by age.
- Structural factors appear to influence dissatisfaction e.g. casual employment and community sector. What is it about these factors that influences dissatisfaction and how can we mitigate them?

11

FURTHER INVESTIGATION

- Are the results similar for RPNs?
- Are there regional differences in predictors of dissatisfaction in nurses? What can we learn from other provinces/territories?
- Are there work sector differences specifically the community sector?
- How do both job and nurse dissatisfaction influence intent to quit? Are there characteristics that directly influence intent to quit outside of dissatisfaction?

12

THANK YOU.

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