

Effect of Motivation Versus De- motivation on Job Satisfaction among the Nurses Working in Hera General Hospital at Makkah Al-Mukramh

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Abstract: Background: The word "motivation" is derived from the Latin "mover" which means "to move". Motivation refers to psychological forces which move people, bring them into action and keep them going. Motivational psychology is about covert psychological processes that are assumed to explain which behavior or action an individual performs at each moment in time. Motivation explains the degree of effort that is spent while performing an activity, the level of performance in achievement tasks and the satisfaction and well-being that is derived from an activity and/or its outcome(s). **Aim:** The aim of the current study was to investigate the effect of motivation versus de-motivation on job satisfaction among the nurses working in Hera General Hospital. **Study design:** It was a descriptive correlational design. **Subjects and Methods:** A convenient sample composed of 70 nurses who were working in Hera General Hospital at Makkah Al-Mukramh, affiliated to the Ministry of Health in Kingdom of Saudi Arabia. **Tools of data collection:** A Self –Administered Questionnaire, it was` consisted of four parts, the first part was concerned with the demographic data of the nurses, the second part about job satisfaction related to administrative policies, supervision, working condition and doing enjoy job, the third part about motivation and de-motivation,the fourth part was related to job satisfaction and its effect on job. **Results:** The current study indicated that the majority of nurses were female and nearly half of them were single and their ages were ranged from 20-< 25 years old, and they had 2- < 5 years of experience. The majority of nurses were satisfied with their jobs. **Conclusion:** Motivation is considered to be the best way to achieve job satisfaction and to reduce de-motivation. Whereas, the more nurses were motivated, the more they were satisfied with their jobs. **Recommendations:** Financial incentives will increase the levels of job satisfaction among nurses. Also, the hospitals and other institutions are need to know how to motivate their nurses to keep them from burning out or being de-motivated.

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Keyword: Motivation, de-motivation, job satisfaction.

1. Introduction

Motivation is the key of a successful organization to maintain the continuity of the work in a powerful manner and help organizations to survive⁽¹⁾. Motivation is finding a need inside the employees and help to achieve it in a smooth process. Motivating the staff leads to broaden their skill to meet the organizational demands. Each manager should have the responsibility to work with the staff to find out their individual needs and put them side by side to the organization needs. Dissatisfaction also, might work as guidance for the manager to explore the need of the staff and start with it to motivate them and attract them to do better performance⁽²⁾.

Motivation drives the human beings to reach their goals and organization goals through every challenge and constraint they face in their workplace; considering it as an advantage to go ahead in the

direction they have put for themselves. The need of achievement always results in a desire to do extra effort to have something done better, and have the desire for success. The manager should motivate the employees to get things done through them without asking them what to do. Motivation creates a productive employee who saves time and effort. The motivated employee volunteers to do more than what is expected and more. Job satisfaction in staff nurses should be of great concern to any organization. Nurses hold the majority of positions in most health care settings, and replacement of licensed personnel is costly and time consuming⁽³⁾.

The motivation is important in any workplace and it is personal and different for each employee. Depends on different needs; different strategies will be created to satisfy these needs. So, without motivation nothing unique will ever happen that allows the organization to specialize with its

production It is not just the matter of how motivated the staff are, but also how prepared they are for the job. Good performance depends on whether staff able to do things, or whether they are willing to do things. The level of performance depends on the level of motivation that stimulates someone to work and carry out the necessary tasks to achieve the goals⁽⁴⁾.

Job satisfaction defined as “a pleasurable or positive emotional state resulting from the appraisal of one’s job or job experiences”. Additionally, job satisfaction has emotional, cognitive and behavioral components. The emotional component refers to feelings regarding the job, such as boredom, anxiety, or excitement. The cognitive component of job satisfaction refers to beliefs regarding one's job, for example, feeling that one's job is mentally demanding and challenging. The behavioral component includes people's actions in relation to their work. These actions may include being tardy, staying late, or pretending to be ill in order to avoid work Job satisfaction is significant because a person's attitude and beliefs may affect his or her behavior. Attitudes and beliefs may cause a person to work harder, or, the opposite may occur, and he or she may work less. Job satisfaction also affects a person's general well-being for the reason that people spend a good part of the day at work. Consequently, if a person is dissatisfied with their work, this could lead to dissatisfaction in other areas of their life⁽⁵⁾.

De-motivation of staff has a bad effect on the delivery of care of patients and the quality of care. If a nurse cannot find anything motivates him/her to do the work, leaving the workplace could be the better idea; instead of doing medic that could affect their dignity this may occur as a result of lack of interest to work under stress and being less concentrated and less productive. That can explain the presence of shortage within nursing all over the world; however, the causes of demotivation are workplace violence, workplace hazards and injuries., long working hours, effect of night shift, shortage and turnover problem, feeling under paid and lack of appreciation So, hospitals need to know how to motivate their nurses and show them effort was of value to keep them from burning off⁽⁶⁾.

Nursing is a sensitive career, the skill career that should be rewarded because nurses are the eye of health care staff about patients' condition. Nurses are placed in a work which forces them to deal with pain, sickness, depression and dead. They deal with humanly by social needs. Providing promotion opportunities at work, recognizing a person’s accomplishments verbally or through more formal reward systems and job titles are ways of satisfying esteem needs. Finally, self-actualization need may be satisfied by the provision of development and growth

opportunities on or off the job, as well as by work that is interesting and challenging. By making the effort to satisfy the different needs of each employee, organizations may ensure a highly motivated workforce⁽¹⁾.

Significance of the Problem:

Motivation of nurses affects the nurses' satisfaction in their work place. Also, the problems of de-motivation and how adverse effects they have on the delivery of health services that will ensure that, nurses have a work environment with the characteristics of work known to be linked to job satisfaction, motivation and good outcomes.

Aim of the study:

The aim of this study was to investigate the effect of motivation versus de-motivation on job satisfaction among nurses working in Hera General Hospital.

Research question:

Does the motivation versus / and de-motivation for nurses effect on the level of their job satisfaction?

2. Subjects and Methods:

A. Research Design:

The study design was a descriptive correlational design.

B. Research Setting:

The present study was conducted in different sections including operation room (or), emergency unit, male and female medical departments, male and female surgical departments and pediatric department in Hera General Hospital at Makkah Al-Mokaramh, affiliated to the Ministry of Health in Kingdom of Saudi Arabia.

C. Research subjects:

Sample Size and Characteristics:

A convenient sample composed of 70 nurses, their numbers were determined according to Field⁽⁷⁾ there are many rules for calculating sample size for research. One of the most common rules is (10-15) nurses for each predictor in the study. According to this rule, for obtaining statistical significance, the sample size for this study with three researchers and two assistant, could be among (70-75) subjects. The total sample of this study was 70 nurses chosen from different sections in Hera General hospital under the following inclusion and exclusion criteria:

Inclusion criteria:

- Both female and male gender.
- Nurses working in Heraa General Hospital at least since two years ago.

Exclusion criteria:

- Nurses working in Heraa General Hospital for one year or less, to ensure that the participants

have maintained strong adherence to hospital rather than having become learned to a different policies and rules.

- Nurses not able to read and write English and answer questionnaires individually.

D. Tool of data collection:

Data were collected through using the following tool:

1. **A Self –Administered Questionnaire**, it was adopted from **Carter, and Shelton⁽⁸⁾ and Barboza et al.⁽⁹⁾** and developed by the researchers to suit the nature of the study. It was consisted of four parts:

A. First part: It was concerned with the nurses' socio-demographic characteristics such as age, gender, unit, years of experience and marital status.

B. Second part: It was concerned with questions about job satisfactions as administrative policies (8 questions), Supervision (4 questions), questions about interpersonal relations (3 questions), questions about working condition (4 questions), How much you enjoy your job (3 questions) and doing your job (19 questions).

C. Third part: It was concerned with questions about motivation (14 questions) and de-motivation (8 questions).

D. Fourth part: It was concerned with questions about job satisfaction, motivation and its relation with nurses' performance (11 questions).

Tools' Validity:

The study tool was submitted to a panel of Academic nursing experts in the field to test the content validity, modifications were carried out according to the panel's judgment on clarity of sentences and the appropriateness of the content.

Operational design:

A. Preparatory phase:

A review of the past, current, local & international related literature covering all aspects of the study using available books, journals articles and magazines was done to get acquainted with the research problem and develop the study tool and guided the researchers in tools preparation process used in the study.

B. Pilot study:

A pilot study was carried out before starting the actual data collection. The purpose of the pilot study was to ascertain the clarity, applicability of the study tools, and to identify the obstacles and problems that may be encountered during data collection. It also helped to estimate the time needed to fill in the questionnaire. Based on the results of the pilot study, modifications, clarifications, omissions, and rearrangement of some questions were done. The pilot study was done on 10 nurses in Hera General

hospital. Pilot study nurses were excluded from total sample size.

C. Procedure:

An official approval was obtained to conduct the study through a formal letter was issued from the Faculty of Nursing at Umm Al Qura University to the hospital manager of Heraa General Hospital. The researchers were introduced themselves to the nurses in each department and briefly explained the nature and the purpose of the study to the approached ones who full filled the inclusion criteria in the sample. All nurses were informed that their participation is voluntary to participate in the study, after obtaining their verbal acceptance the researchers provided them an overview and clarification about the Self -Administered Questionnaire then, the study tool was distributed to them and answered individually with instructions about its filling and it collected at the same day. The time consuming for filling the questionnaire was approximately 15-20 minutes. The researchers were available at the morning or afternoon shifts for three days/week (Saturday, Monday, and Wednesday). The researchers divided themselves into two groups this was repeated in each unit/ward of the study hospital. The researchers were present most of the time to clarify any ambiguity. After the nurses had completed the self-administered questionnaire: Once all study questionnaires were completed, it checked for any missing data and placed the data into a closed envelope. the data collection phase of the study was carried out within two months from 1/ 3/ 2012 to 30/ 5/ 2012.

D. Ethical considerations and Human Rights:

- Before any attempt to collect data, The aim of the study was explained to the all participants.
- Obtaining a voluntary acceptance of the study subjects to participate in the study.
- The required permissions were obtained through the appropriate channels.
- Code number for each participant was applied to protect their confidentiality rights of their personal data.

E. Statistical Analysis:

Data entry and analysis were done using Statistical Package for the Social Sciences "SPSS" program, version 15. Data were presented using descriptive statistics in the form of frequencies and percentages for qualitative variables and means and standard deviations for quantitative variables.

Scoring System:

The Self-Administered Questionnaire was comprised of twenty one (21) statements related to nurses' motivation and de-motivation, in which the first thirteen statements were related to the nurses' motivation in their work and the second eight

statements were concerned with nurses' De-motivation. All statements were scored on a four points Likert Rating Scale whereas, (strongly agree = 4, agree =3, disagree = 2 and strongly disagree =1). The introduction of four-scale gradient due to the strength The reliability (internal consistency and stability), factor analysis and item analysis of the scale were evaluated by researchers to maintain stability and avoid bias.

3. Results:

As shows in table (1) that approximately half of nurses (44.3% and 51.5%) their ages are between 20-<25 years and they have 2-<5 years respectively, meanwhile very few of them (2.9%) their ages are 40- ≤45 years.

Regarding the nurses' gender, Figure (1) illustrates that the majority of nurses(84.3%) are female and the rest of them (15.7%) are male.

Concerning the nurses' social, figure (2) illustrates that half of nurses(50%) are single compared to 31.4% are married and very few of them(5.7%%) are divorced.

As regards the mean score of nurses according to their job satisfaction table(2) shows that the highest mean score of satisfaction (3.10 ± 0.61) is related to the nurses' enjoying in their job compared with lowest mean distribution of satisfaction(2.93 ± 0.63)

regarding the interpersonal relations between personnel.

Table (3) demonstrates that regarding the mean scores of the nurses' motivation is $X=2.92 \pm SD 0.50$. Whereas, the high nurses' motivation mean score($X=3.48 \pm SD 3.64$), is about the certificate to be a nurse is attractive for working as a nurse and the low mean score ($X=2.55 \pm SD 0.95$)is about having a job that is more like fun than work.

Table (4) illustrates that regarding the mean score of the nurses' de-motivation in their work is 2.78 ± 0.47 . Whereas, the high nurses' de-motivation mean score (2.90 ± 0.76), is about being able to work in accordance with my principles and the low mean score (2.64 ± 0.83)is about not being exposed to the prospect of failure.

Table (5) clarifies that there is inverse correlation between the nurses' motivation versus de- motivation. Whereas, with more nurses' motivation results in less de-motivation for them, while less or no nurses' motivation leads to more de-motivation for them ($R= 0.404$, p. value < 0.001).

Table (6) clarifies that there is strong direct relationship between nurses' motivation and their job satisfaction . Whereas the more nurses' motivation results in job satisfaction, and the less or no motivation for them there is no job satisfaction ($R = 0.615$, p. value < 0.001).

Table (1): Distribution of the Nurses according to their Socio- demographic Characteristics

Characteristics	Frequency	%
Age in years		
20- <25	31	44.3
25- < 30	25	35.7
30- < 35	6	8.6
35- < 40	6	8.6
40- ≤45	2	2.9
Total	70	100.0
Years of Experience		
2-<5	36	51.5
5-<10	22	31.4
10-<15	8	11.4
15-≤20	4	5.7
Total	70	100.0

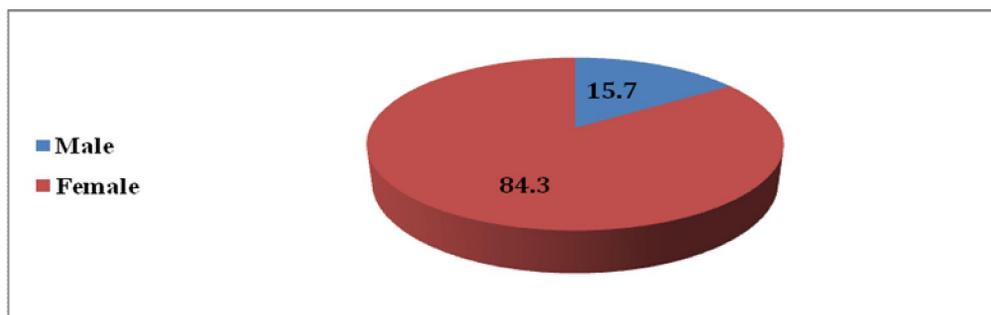


Figure (1): Distribution of the Nurses according to their Gender

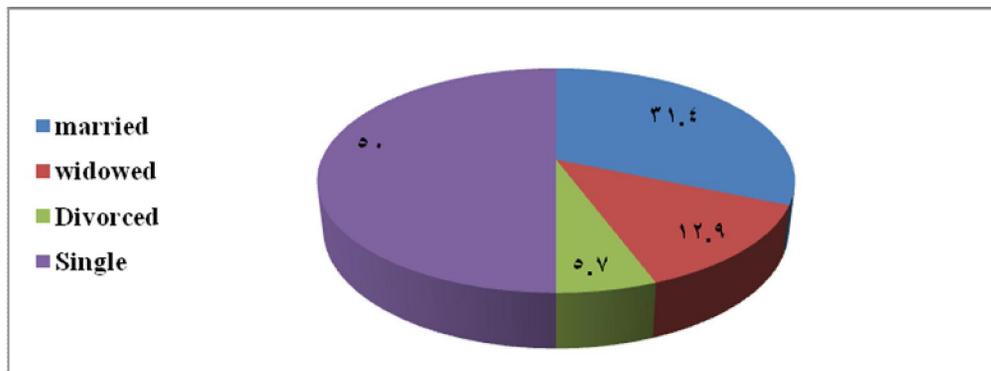


Figure (2): Distribution of the Nurses according to their Social Status

Table (2): Distribution of the Nurses' Mean Score Levels regarding their Job Satisfaction

Job Satisfaction	Mean	± SD
Company and administrative policies.	3.08	0.49
Supervision.	2.96	0.54
Satisfaction about interpersonal relations between personnel.	2.93	0.63
Working conditions.	3.00	0.64
How much you enjoy in your job.	3.10	0.61
Doing in your job.	3.0	0.45

Table (3): Distribution of the Nurses' Mean Score Levels toward their Motivation

Motivation	Fully agree	Agree	Partly disagree	Disagree	Mean	± SD
You are motivated to perform well.	30.0	27.1	11.4	1.4	3.15	0.67
Well you understood what was required.	24.3	58.6	17.1	0	3.07	0.64
The certificate to be a nurse is attractive.	25.7	54.3	17.1	2.8	3.48	3.64
Your boss recognizes your efforts.	21.4	57.1	17.1	4.3	2.95	0.75
The payment you get is fair.	15.7	55.7	22.9	5.7	2.81	0.76
Shift work affects your mood.	22.9	55.7	18.6	2.9	2.98	0.73
Nightshift increase conflict in family.	25.7	47.1	15.7	11.4	2.87	0.93
Nightshift increase conflict in your work.	20.0	50.0	17.1	12.9	2.77	0.91
You feel stressed out most the time.	15.7	37.1	38.6	8.6	2.60	0.85
Having a job that is more like fun.	14.3	45.7	21.4	18.6	2.55	0.95
You are able to do interesting work.	18.6	60.0	14.3	7.1	2.90	0.78
Impact on the organization's performance.	18.6	57.1	22.9	1.4	2.92	0.68
You are satisfied with the incentives provided.	20.0	68.6	11.4	0	3.08	0.55
Total					2.92	0.50

Table (4): Distribution of the Nurses' Mean Scores Level toward their De- motivation

De- motivation	Fully agree	Agree	Partly disagree	Disagree	Mean	± SD
Not being able to grow and develop.	20.0	42.9	32.9	4.3	2.78	0.81
Being able to work in accordance with my principles.	20.0	54.3	21.4	4.3	2.90	0.76
Having to make decisions under pressure.	14.3	57.1	15.7	12.9	2.72	0.86
Not being exposed to the prospect of failure.	11.4	52.9	24.3	11.4	2.64	0.83
Not seeing a link between effort and pay.	10.0	54.3	27.1	8.6	2.65	0.77
Being allowed to take time off for training.	21.4	50.0	24.3	4.3	2.88	0.79
Working for an organization that allows people to take career breaks.	21.4	47.1	28.6	2.9	2.87	0.77
You are working in a competitive environment.	14.3	60.0	18.6	7.1	2.81	0.76
Total					2.78	0.47

Table (5): The Relationship between the Nurses' Motivation Versus De-motivation

Motivation	De-motivation
Pearson Correlation	0.404**
Sig. (2-tailed)	0.001
No.	70

Statistical Significant (P . value < 0.001).

Table(6): The relationship between the Nurses' Motivation and their Job satisfaction

Job satisfaction	Motivation
Pearson Correlation	0.615**
Sig. (2-tailed)	0.001
No.	70

Statistical Significant (P . value < 0.001).

4. Discussion

Nursing is a sensitive career that plays an important role in society. Nurses are the eye of health care staff about patient's condition, whereas they deal with human being so, no mistakes are allowed, nurses are the main persons responsible about a patient life or the patient at risk for suffering. The hospitals have to understand the factors affecting nurses' motivation and demotivation in their job satisfaction to empower all personnel to be more and more productive for this reason, this research was aimed to investigate the effect of motivation versus de-motivation on job satisfaction among nurses in Hera General Hospital.

Regarding the nurses' socio-demographic characteristics, the present study demonstrated that approximately half of nurses their ages were between 20- <25 years and their years of experience were 2- <5, meanwhile very few of them their ages were at 40- ≤45 years. The majority of nurses were female in addition to that half of nurses were single compared to less than one third of them were married and very few of them were divorced. This could be due to that because most of them are in age group (20-<25), with (2-<5) years of experience.

As regards the mean scores of nurses according to their job satisfaction in Heraa General Hospital, the result of the current study illustrated that mean score of the nurses' satisfaction (2.96, ± 0.54) toward their supervision compared to the lowest mean score nurses' satisfaction (2.93 ± 0.63) regarding the interpersonal relations between personnel.

This results were in agreement with previous study carried out by **McNeese-Smit** ⁽¹⁰⁾ who reported that managerial factors effected employees' attitudes, job satisfaction, organizational commitment, and motivation to perform well, and these factors, in turn, influenced organizational outcomes. Organizational outcomes included patient satisfaction and employees' intention to quit. Also, these findings were confined by Study of **Bjorvell and Brodin** ⁽¹¹⁾

who found that half of the nursing staff wanted to quit their jobs and those nurses who had intention to quit, perceived themselves as less satisfied with several aspects (job dimensions of cooperation, job complexity, help received from superiors, and sufficient time for nursing care delivery), than did those who did not have any intention to quit.

The result of the current study confirmed that the highest mean score of satisfaction (3.10 ± 0.61) was related to the nurses' enjoying in their job, this could be due to the kind of work, amount of work, and career future were associated with burnout. Meanwhile, these finding was contradicted with **Daehlen** ⁽¹²⁾ who demonstrated that work support and job stress were predictors of nurses' burnout. Higher turnover rates were associated with poorer self-rated and supervisor rated job performance, more sick leaves, more reported absences for mental health reasons, and higher intention to quit. Also, **Nuttin and Lens** ⁽¹³⁾ pointed out that the major determinants of nurses' job satisfaction were routinize, participation, integration, distributive justice, instrumental communication, promotional opportunity, and positive affectivity.

Regarding the mean score level of the nurses' de-motivation in their work, the result of the present study revealed that it was 2.78± 0.47. Whereas, the high nurses' de-motivation mean score(2.90± 0.76), was about the ability of the nurses to work in accordance with my principles and the low mean score (2.64± 0.83)is about not being exposed to the prospect of failure. This results were similar to **Kivimaki et al.** ⁽¹⁴⁾ who founded that for many people the workplace de-motivation tends to be caused by poor systems or work overload. Clear signs of de-motivation include high levels of absenteeism and poor staff retention. The nurses occupying highly enriched jobs reported significantly higher job satisfaction and motivation. Professional growth opportunities, workload, dissatisfaction with work hazards, and relationship with coworkers, were found

to predict nurses turnover. In nursing care delivery systems, the following aspects support for autonomy, executives' leadership styles, communication, adequate time for patient care, the degree of environmental uncertainty, and reported nursing stress) contributed to job satisfaction, motivation to perform well at work, and a work group's effectiveness.

There was a significant relationship between motivation and de-motivation, so the greater the motivation, Say no demotivation, and vice versa, the less motivation, demotivation grow, this finding was agree with **Skinner**⁽¹⁵⁾ Who emphasized that managers should positively reinforce (motivate) employee behaviors that lead to positive outcomes. Managers should negatively reinforce (demotivate) employee behavior that leads to negative outcomes.

The result of the current study revealed that, the certificate to be a nurse is attractive for working as a nurse was resembled to nearly three quarters of satisfied nurses toward their job. This finding was in accordance to **Parker and Kulik**⁽¹⁶⁾ who stated that job satisfaction describes how content an individual is with his or her job. The happier people are within their job, the more satisfied they are said to be. Logic would dictate that the most satisfied ("happy") workers should be the best performers and vice versa. This is called the "happy worker" hypothesis. However, this hypothesis is not well supported, as job satisfaction is not the same as motivation, although they may be clearly linked. A primary influence on job satisfaction is the application of job design, which aims to enhance job satisfaction and performance using methods such as job rotation, job enlargement, job enrichment and job reengineering. Other influences on satisfaction include management styles and culture, employee involvement, empowerment, and autonomous work position. Meanwhile, according to **McNeese-Smith**⁽¹⁰⁾ who pointed out that job satisfaction is a very important attribute and is frequently measured by organizations. The most common technique for measurement is the use of rating scales where employees report their thoughts and reactions to their jobs. However, questions can relate to rates of pay, work responsibilities, variety of tasks, promotional opportunities, the work itself, and co-workers. Some examinations present yes-or-no questions while others ask to rate satisfaction using a 1-to-5 scale, where 1 represents "not at all satisfied" and 5 represents "extremely satisfied"^(17,18).

In the present study, there was statistical significant relation between the average level of satisfaction for the doing the job medium satisfaction degree and the average axis 3.100 This findings were contradicted by Kind of work, amount of work, and career future were (associated with burnout. **Parker**

and Kulik⁽¹⁷⁾ demonstrated that work support and job stress were predictors of nurses' burnout. Higher turnover rates were associated with poorer self-rated and supervisor rated job performance, more sick leaves, more reported absences for mental health reasons, and higher intention to quit also were contradicted by **Agho**⁽¹⁸⁾ indicated that the major determinants of nurses' job satisfaction were routinize, participation, integration, distributive justice, instrumental communication, promotional opportunity, and positive affectivity.

Also were contradicted by **Muller-Smith**⁽¹⁹⁾ reported that the potential for growth rather than fear of loss invented energy and excitement, which led to a joyful workplace and a strong sense of accomplishment.

The current study revealed that there was direct strong relationship: the more job satisfaction when there was less demotivation the nurses had, this finding was in agreement with **Voom and Deci**⁽²⁰⁾ who stated that a person will exert little motivation if their expectancy of attaining and outcome of satisfied is zero. Motivation can help to improve nurses' performance, nurses have a major role play in health care for all family for this reason, work environment must be motivated to increase job satisfaction and productivity at all time. Also, burnout affects mainly nurses, physicians, social workers and teachers. Burnout seems to be caused by stressful working conditions, disproportional-high efforts (time, emotional involvement, and empathy) and dissatisfaction with jobs.

5. Conclusion

Majority of nurses working in Hera General Hospitals were satisfied with their jobs. Motivation is considered to be the best way to achieve job satisfaction and to reduce de-motivation. The more employees were motivated, the more they were satisfied with their job.

Recommendations

Based on the findings of the current study, the following recommendations are suggested:

Recommendation to the Hospital Managers:

1. Unit managers should embark on proactive measures to ensure nurses' participation in decision making processes though regular meetings with the nursing staff that will enhance the clinical and organizational outcomes.
2. Financial incentives such as pension funds, medical aids, bonuses and financial compensations will increase the levels of nurses' job satisfaction.
3. The allocation of tasks or duties should be within the job profile of the nurse. Mentorship program

increase job satisfaction as the nurses staff feels more empowered and effective which leads to improve the patients' outcomes.

4. Facilitate good team working, support, respect for the roles and contributions of others to provide a motivational work environment.

Recommendations to the Nursing Staff:

5. Nursing staff could engage in corporate social investment programs to promote and create their sense of belonging.
6. Nursing staff should be encouraged to attend social functions such as year-end function, and ceremonies for the awarding of certificates and prizes.
7. Nurses should strengthen their communication links with the hospitals. Whereas, more proficient communication will increase their job satisfaction and improve the quality of nursing care.
8. Hospitals and other institutions need to know how to motivate their nurses to keep them from burning out or being de-motivated that resulted in many hazards to the patients.

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