

# Assessment of Factors of Job Satisfaction among Healthcare Professionals: The Case of the North Gonja District in the Savannah Region of Ghana

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## ABSTRACT

**Background:** Health Professionals manage the day-to-day delivery of healthcare services and other activities of the healthcare system. They do this via planning, directing, organizing, and coordinating health services. The overall job satisfaction of healthcare professionals has been a matter of concern, having been classified by pundits as a key factor underpinning performance, principally where patient care is delivered. This study investigates the factors connected to job dissatisfaction and satisfaction among Health Professionals in both public and private healthcare delivery facilities.

**Method:** In this study, a census method with a quantitative approach was used. The total population of health professionals in the North Gonja District (204 staff) took part in the study. Hard copy and Google form questionnaires were used for data collection. The hard copies were used to enable those with internet connectivity difficulties to also participate in the study. Descriptive statistics, regression, and correlation tests were run from SPSS to present and analyze data with p-values less or equal to 0.05 considered statistically significant.

**Results:** The mean ( $\pm$  Standard Deviation [SD]) age of all respondents was ( $M = 39.72$ ,  $SD = \pm 5.947$ ) with an age range of 30–58 years. While demographic variables predicted 32.7% of the variance in the outcome variable with  $F(5, 199) = 10.666$ ,  $p < .001$  with age negatively correlating with job satisfaction ( $r = -.730$ ,  $p < .01$ ), the independent variables explained 81.5% of the variance in the outcome variable with  $F(6, 198) = 77.785$ ,  $p < .001$  all of which are statistically significant. Apart from professional growth and manager-employee relationships, all other independent variables negatively impacted job satisfaction with strong correlations. About 68% of respondents were dissatisfied with their jobs ( $M = 3.84$ ,  $SD = \pm 1.495$ ) but with some variation in opinions.

**Conclusion:** The study concluded that job satisfaction declines with an increase in age, limited job opportunities, one-man show work environment, limited career growth opportunities, imbalanced work, and personal life, lack of appreciation, recognition, and respect, poor safe work environment, bad manager-employee relationships, poor annual performance appraisal, poor remunerations, lack of professional independence, absence of professional development opportunities.

**Recommendations:** The study recommended that health policymakers, managers, and other stakeholders should focus on the development, implementation, and safeguarding of employee-related job satisfaction policies such as commensurate remuneration and other fringe benefits, regular skills development training, mentorships, or education assistance, and social and mental welfare assistance policies to improve employees working conditions within the health sector

**Keywords:** Job satisfaction; Healthcare professionals; Census, North Gonja, Savanna Region, Ghana,

**Abbreviations:** CC- Company Culture, PG- Professional Growth, MR- Manager Relationship, WLB- Work-Life Balance, CB- Compensation and Benefits, JS- Job Satisfaction, OJS- Overall Job Satisfaction

## INTRODUCTION

Healthcare professionals are staff who administer the daily operations of healthcare facilities such as planning, directing, organizing, and coordinating health services. Clinical and non-clinical staff ensure that healthcare facilities are sufficiently resourced to perform proficiently (Coursera Staff,2023). Health professionals make and take crucial decisions and actions that impact the good organization, productivity, and overall success or failure of health facilities concerning quality patient care (AHRQ, 2015). Extant literature revealed that job satisfaction drives high accomplishment in healthcare organizations. It has been documented that without highly motivated and satisfied health professionals, the functionality of the healthcare system will be in jeopardy. It has also been asserted that explained, one inescapable factor that expounds the motivational resolve and the loyalty of health workers to be committed to their work and by extension to deliver quality health services is job satisfaction (Khunou and Davhana-Maselesele, 2016; Blaauw et al. (2013). The World Health Organization (WHO) underscored the need for improvement in overall performance, quality service delivery, and influence of the health workforce on the global community as policy directions toward the achievement of Sustainable Development Goals (SDGs) targets especially 3.8 by 2030 (WHO, 2016). WHO's position has been corroborated by several studies on the nexus between job satisfaction, dissatisfaction, and health worker's resolve to stay with or quit their jobs (Akuffo et al. 2021; Geta et al. 2021; Merga & Fufa 2019; Mulugeta & Ayele 2015; Temesgen, Aycheh & Leshargie 2018). In Ghana, Akuffo, et al (2021) found 25.7% reported job dissatisfaction which was blamed on poor compensation, lack of financial incentives, and career advancement opportunities. Datuah et al, (2022) also discovered that job category influences job satisfaction, however, the study established that there is no association between gender, age, level of education, and working experience as demographic factors and job satisfaction.

In job satisfaction studies in Ethiopia, Mulugeta and Ayele (2015) found 65.1% job dissatisfaction, Merga and Fufa (2019) found 61.5%, Geta et al. (2021) found 44.8% job dissatisfaction, Scanlan et al. (2021) discovered 17.0% of the same, and others also found 25.7%, 14.8%, and 2.8% job dissatisfaction respectively (Akuffo et al. 2021; Qiu et al. 2021; Singh et al. 2019). Temesgen et al. (2018) in their cross-sectional study in Ethiopia also found 68.3% dissatisfaction among healthcare professionals. Some studies listed inter alia poor work environment (Akuffo et al. 2021; Bonenberger et al. 2014; Kumar et al. 2013; Mulugeta & Ayele 2015), organizational climate or culture (Munyewende, Rispel & Chirwa 2014), work-life balance (Gulavani & Shinde 2014; Jin et al. 2019) bad organizational arrangement which does not address issues of shortage of staff, proper planning of duty schedules and training staff Guan et al., 2021; Yang et al., 2019; Mere et al.,2023). Other studies also discovered poor remuneration and the absence of other fringe benefits (Akuffo et al. 2021; Anand et al. 2022; Khunou & Davhana-Maselesele 2016; Kumar et al. 2013), neglect of training opportunities (Mengistu and Bali, 2015) as contributors to job dissatisfaction among healthcare professionals. Many studies also found some demographic factors such as age, gender, educational qualification, and work experience have negative impacts on health professionals' job satisfaction (Asegid et al. 2014; Ayalew et al. 2019; Lu et al. 2016).

From extant literature and empirical evidence, it is clear there are varied conclusions on the contributors to job satisfaction among healthcare professionals. To mirror these conclusions in the Ghanaian context and provide a detailed account of the contributors to job dissatisfaction among Ghanaian health professionals, this study sets out to establish factors connected to job satisfaction and dissatisfaction among health professionals in the North Gonja District of the Savannah Region and to also assess the gravity of these factors to job satisfaction

and dissatisfaction among the health professionals.

## LITERATURE REVIEW

### Job Satisfaction

Job Satisfaction has been variously defined. Some earliest definitions are that job satisfaction is an amalgamation of psychological, physiological, and environmental factors that motivates a person to say I am satisfied with my job (Hoppock, 1935) and is an emotional orientation on the part of an individual toward work roles which they occupy (Vroom, 1964). Statt, (2004) maintained that job satisfaction is the extent to which workers are pleased with the intrinsic rewards they get from their jobs. Armstrong (2006) provides a more comprehensive understanding of job satisfaction when he states that it refers to the attitude and feelings people have about their jobs such that positive and favorable attitudes indicate job satisfaction and negative and unfavorable attitudes indicate job dissatisfaction.

### Importance of Job Satisfaction

Job Satisfaction plays a crucial role in shaping employee performance. Herzberg, et al., (1959) and Pushpakumari (2008) noted that when employees are satisfied for a long time through recognition, and reward for responsibility, they become inspired to perform their jobs, and this can bring about achievements. Job satisfaction is found to be directly connected to the satisfaction or otherwise that employees derive from the work itself and related factors. Job satisfaction manifests in high productivity driven by workplace motivation and life satisfaction, implying private lives of employees also affect their job satisfaction (Abuhashesh et al., 2019). Job satisfaction is the definer of employee accomplishments and achievements and is directly related to productivity, work performance, and personal well-being, and often manifests in employees doing the work they like, doing it to the best of their abilities, and being compensated as such (Kaliski, 2007; Aziri, 2011). It explains employee's emotional conditions about their jobs in terms of their expectations and what they finally get out of performing the job (Cranny, Smith, and Stone, 2014; Ndulue & Ekechukwu, 2016). Aziri, (2011) explained that a dissatisfied employee is a disgruntled and non-performing employee while a satisfied employee is a successful, resourceful, and productive employee. Pietron-Pyszczek, (2010) and Saranya, (2014) conceded that employee satisfaction and the entirety of the organization's environment and its activities are strongly associated. Job satisfaction impacts commitment to work and work performance (Yalabik et al., 2013), so to improve employee efficiency and personal satisfaction, job satisfaction is paramount (Weiss, 2002). Woods, (2018) admitted that job security is fundamental to job satisfaction and offers employees firmness of mind to work, but job insecurity can trigger employee anxiety leading to poor performance and low productivity (Artz & Kaya, 2014). Supervisor and employee relationships can also affect job satisfaction or dissatisfaction. Positive supervisor and employee relationships can increase workplace confidence resulting in employees feeling secure, recognized, and valued which can contribute to job satisfaction and by extension high productivity (Essays UK, 2013). Raziq and Maulabakhsh (2015) thus, noted that if work environments allow employees to feel unthreatened to work, that can contribute to the achievement of organizational goals.

### Models of Job Satisfaction

Extant literature documents several models or frameworks of job satisfaction. Here we provide a snapshot of four of the models: Christen, Lyer, and Soberman's Model Of Job Satisfaction, Lawler and Porter's model of job satisfaction, Locke and Latham's model of job satisfaction, and Maslow's model of job satisfaction. Christen, Lyer, and Soberman's model of job satisfaction consists of the following elements working together to determine job satisfaction. They include job-related factors, role perceptions, Job performance, and firm performance. Christen, Lyer, and Soberman (2006) asserted that in every organization, job-related factors and employee role perceptions affect job satisfaction which further impacts job performance and finally the organization's overall performance. Lawler and Porter's model (1967) advanced a model of job satisfaction that, unlike Christen, Lyer, and Soberman's model, considered the influence of rewards on job satisfaction. According to Lawler and Porter's model of job satisfaction, other factors rather than intrinsic and extrinsic rewards are directly connected with job satisfaction, because of the employee's views on the deserved level of

pay. Locke and Latham (1990) provide a completely different position by playing down the assumption that the objectives set at the highest level and high expectations for success in work can provide job satisfaction. They contended that achievement and success in performing tasks are what create job satisfaction. Maslow's job satisfaction model is premised on the Hierarchy of Needs and specifies that one can only be fully satisfied not when that person achieves physiological, safety, love and belonging, and esteem needs but when the person attains self-actualization (Maslow, 1943). Maslow maintained that a person could satisfy the needs of Air, Water, Food, Shelter, Sleep, Clothing, Reproduction (Physiological needs), Personal Security, Employment, Resources, Health, Property (Security needs), Friendship, Intimacy, Family, Sense of connection (social belonging and love needs), and Respect, Self-Esteem, Status, Recognition, Strength, Freedom (Esteem needs), but the person is not fully satisfied until the person achieves the desire to become the most that one can be (Self- Actualization needs) (Maslow, 1943).

### **Empirical Studies on Job Satisfaction**

The complexity of the concept of Job Satisfaction with its multifaceted elements including internal and external factors such as work environment, wages (compensation and benefits), working hours, employee autonomy, organizational structure, communication channels between employees and management (Manager-employee relationship), promotion, the work itself and its associated conditions, supervision, relationships with co-workers (social relationships), professional growth, company culture, and organizational justice have been elucidated in extant literature (Armstrong, 2006; Opkara, 2002; Herzberg, 1968; Spector, 2008; Lane, Esser, Holte, & Anne, 2010; Revenio Jr., 2016; Ndulue and Ekechukwu, 2016). Empirical evidence abounds to support the influence of managers, supervisors, and leaders on employee satisfaction, commitment, loyalty, and performance through the application of appropriate and inappropriate leadership styles. Timely availability of managers, supervisors, and leaders in responding to and addressing employee needs and concerns, encouraging inventive thinking and knowledge of employees, and open communication are noted to contribute to job satisfaction or otherwise (Schroffel, 1999; Raziq & Maulabakhsh, 2015). In his work, Brenninger, (2015) found four factors that fundamentally provoke employee satisfaction: the manager/supervisor/leader, job design, workplace environment, and performance pay or compensation for work done. Concluding from his study, Soonhee, (2002) advanced that vigorous inclusivity and participation in the operations and activities of an organization and its decision-making process are the triggers of employee motivation and by extension, job satisfaction. Soonhee's position was confirmed by Golemann et al., (2004) when they illuminated that disregarding the concerns of employees can upshot impulse behaviours and unpredicted outcomes that can influence adverse effects for the organization.

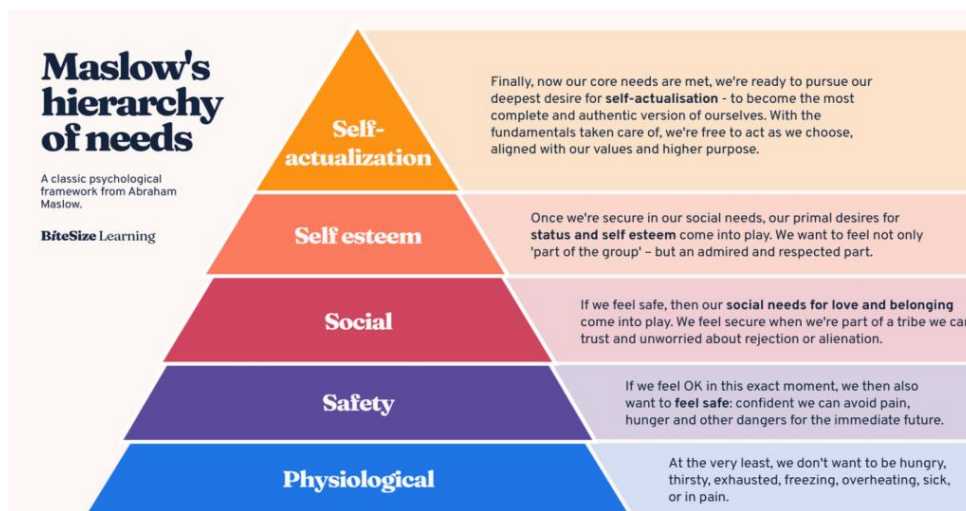
Some studies outside Africa especially in Pakistan, Spain, and Iran on employee job satisfaction lend credence to the complexity of the issue. Rukh, Choudhary, and Abbasi (2015), Viñas-Bardolet, Velazco, and Torrent-Sellens (2013), and Mosadegh Rad and De Moraes (2009) respectively found that the main triggers of job satisfaction or dissatisfaction include promotion, employee relations, their characteristics, manager-employee relations, stress, and job security. The authors also discovered that the job satisfaction of employees was drastically impacted by demographic, financial, and other non-financial factors depending on where the pendulum swings. In Korea for example, Park (2020) in a study on the direct implications of supervisor satisfaction, public service motivation, and job characteristics on job satisfaction intermediated by organizational commitment discovered that all three indicators affect employee job satisfaction. Another study by Abdelmoula and Boudabbous (2021) also identified three indirect factors: achievement, the work itself, and recognition, and four direct factors: salary, relationship with the supervisor and co-workers, working conditions, and company policy that affect job satisfaction. Javed, Balouch, and Hassan, (2014) in their study on job satisfaction concluded that employee empowerment, workplace environment, job loyalty, and job performance have strong relationships with job satisfaction, with employee empowerment alone accounting for 37% of overall job satisfaction. Javed, Balouch, and Hassan, (2014) discovered that employee dissatisfaction accounts for 32% of employee turnover.

Other studies discovered varied factors contributing to job satisfaction or dissatisfaction. Cheginy, Isfahani, Mohseni, Khakian, and Khosravizadeh (2014) found that personnel's perceptions of their working conditions, compensation and benefits, supervision mode, coworker relationships, and job content significantly impact job satisfaction. Amoateng Sabeng, Dominic & Mensah, John. (2023) noted that social status, recognition,

remuneration, and a conducive work environment affect job satisfaction with job responsibility, employee autonomy, and task identity having strong positive connections with employee job satisfaction. Duah, Evans & Ephraim, Richard & Amoah, Samuel & Addy, Nii Armah. (2023) in their study on job satisfaction and retention of employees in the health sector in Ghana found various factors responsible for job dissatisfaction and retention including imbalanced work and personal life, lack of appreciation, recognition, and respect, and poor safety work environment.

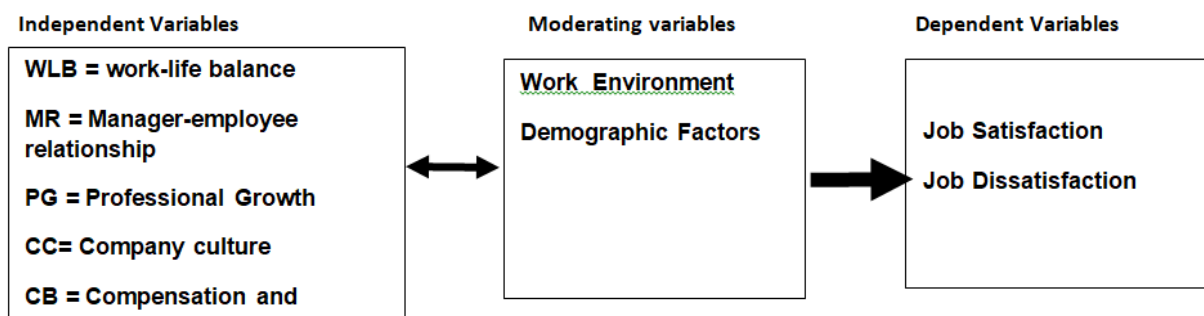
### Theoretical Framework for the Study

This study explores the factors responsible for job satisfaction and dissatisfaction among healthcare professionals, a critical dimension of quality healthcare delivery. This study adopts Maslow's Hierarchy of Needs theory (Maslow, 1943) as its theoretical framework which identifies five human needs; physiological, safety, love and belonging, esteem, and self-actualization, and posits that people must satisfy all lower-level needs before progressing to deal with the next higher-level needs. Maslow underscored the need for the satisfaction of lower-level needs before the higher ones. This is because, Maslow believes that in human lives, some needs take precedence over others. His assumptions were premised on the fact that a hungry person can never feel secure, so it is important to get food before thinking about one's security inter alia. Maslow's hierarchy of needs theory is particularly suited for this study as it accounts for the complex nature of satisfaction and the need for people to understand that until people meet their physiological, safety, love and belonging, and esteem needs, they can never achieve self-actualization which is the level of their overall satisfaction. The following conceptual model illustrates the framework's components:



Source: BiteSize Learning. <https://www.bitesizelearning.co.uk/resources/maslows-hierarchy-of-needs-theory>

### Conceptual Framework for the Study



The framework assumes that five factors: the Company Culture (CC), Work-life balance (WLB), Manager-employee relationship (MER), Professional Growth (PG), Compensation, and benefits (CB), affect work environments and employees' level of satisfaction or dissatisfaction. It further presumes that within the workplace, although employee demographic factors are not directly related to the work itself, they moderate the employee's performance and latently define their levels of job satisfaction and dissatisfaction.

## METHODOLOGY

### Design and Initial Study Population

This study used a census design method with a quantitative approach. The study was conducted between August and October 2024. The scope of the study was North Gonja District of the Savannah Region of Ghana, and the study population consists of a cross-section of health professionals. North Gonja District has a total population of 204 staff.

### Sampling and Sample Size

Since the total population of health professionals in the district is only 204 which is very small, the study conducted a census instead of sampling the population. Thus the total population was used as a sample for the census.

### Data Gathering

Data were collected via a hard copy and Google form online questionnaires. The survey instruments were thoroughly evaluated based on extant literature (Payne et al. 2020; Morton et al. 2020; Khunou & Davhana-Maselesele 2016; Khamisa et al. 2015) and consisted mainly of two parts: first, demographic details and second questions requesting responses on job satisfaction. Demographic details included in the questionnaire are age, gender, professional category, level of education, and years of experience as a health services or hospital administrator. The second division of the questionnaire has six dimensions dealing with factors likely to affect an employee's job satisfaction including company culture (ten items), job satisfaction (thirteen items), professional growth (seven items), manager relationship (five items), compensation and benefits (five items), and work-life balance (five items). The study collected data between August and October 2024.

### Reliability and validity

The **Reliability and validity of the instrument were measured using the Cronbach Alpha test** (Cronbach,1951). The reliability coefficient values of the individual dimensions ranged between 0.752 – 0.797, while the overall reliability coefficient was 0.745, which is considered satisfactory and outstanding (*refer to Table 1*). Expert judgment and advice were used to secure the validity of the instrument. The instrument was piloted ahead of field data collection.

Table 1. Instrument Reliability Results

S/N	Research Instrument (Scale)	Number of Items	Cronbach Alpha Coefficient
1	Company culture	10	.744
2	Professional growth	7	.734
3	Manager relationship	5	.756
4	Compensation and benefits	5	.769
5	Work-life balance	5	.766
6	Job satisfaction	13	.797
	<b>Overall</b>	<b>45</b>	<b>.745</b>

### Data analysis

SPSS version 21 was used to analyze data. Regression and correlation analysis was run to determine the

association between demographic variables and job satisfaction and also between the predictor variable (Company culture, Professional growth, Manager relationship, Compensation and benefits, Work-life balance) and Job satisfaction with p-values of less than 0.05; ( $p < .05$ ) accepted as statistically significant.

### Ethical considerations

Administrative permission was obtained from the North Gonja District Health Management Team for the conduct of the study. The consent of all participants was obtained before the data collection. No personal information of participants was contained in the study.

### Results

The study recorded a 100% response rate with all 204 participants responding to and submitting the questionnaire. Online Google form questionnaires recorded a 92 (45%) response rate while the rest 112 (55%) were hard copies.

### Socio-demographic characteristics of Participants

Variables	Categories	Frequency	Percent	Mean	SD
Age	up to 40	61	29.9	39.72	5.947
	41-45	78	38.2		
	46-50	39	19.1		
	51-56	22	10.8		
	Above 56	4	2.0		
	<b>Total</b>		<b>204</b>		
Gender	Male	84	41.2		
	Female	120	58.8		
	<b>Total</b>	<b>204</b>	<b>100.0</b>		
Professional Category	Clinical staff	146	71.6		
	Non-clinical staff	58	28.4		
	<b>Total</b>	<b>204</b>	<b>100.0</b>		
Level of Education	Up to SHS	20	9.8		
	Certificate	33	16.2		
	Diploma	118	57.8		
	First Degree	23	11.3		
	Master's Degree	10	4.9		
	<b>Total</b>		<b>204</b>	<b>100.0</b>	
Years of Experience	Up to 1 year	47	23.0		
	Up to 2 years	40	19.6		
	Up to 3 years	70	34.3		
	Above 3 years	47	23.0		
	<b>Total</b>		<b>204</b>	<b>100.0</b>	

The study population was largely middle-aged. The mean ( $\pm$  Standard Deviation [SD]) age of all respondents was (M = 39.72, SD =  $\pm$  5.947) with an age range of 30–58 years. Most participants were females (58.8%) while (41.2%) were males. The majority of the respondents (71.6%) were Clinical staff while (21.6%) of them were Non-clinical staff. Only 4.9% of the study participants obtained a Master’s Degree, (11.3%) had a First Degree, (57.7%) had a Diploma, 16.2% had a certificate, and 9.8% had educational levels up to Senior high school. For years of work experience, (23%) of the respondents have worked for up to 1 year, (19.6%) for up to 2 years, (34.3%) for up to 3 years, and 23% have worked for over 3 years.

### Regression analysis between Demographic Variables and Job Satisfaction

#### Coefficients

Source	B	SE B	$\beta$	t	p
(Constant)	-.343	.684		-.502	.616
Age	-1.57	.011	.310	2.156	.033
Gender	.479	.104	.355	3.664	.000
Professional_Category	.702	.142	.115	.720	.023
Leevel_of_Education	.764	.136	.329	1.938	.045
Years_of_Experience	.651	.011	.010	.124	.001

a. Dependent Variable: Job Satisfaction

The Beta (B) values indicate a strong positive correlation between the demographic and dependent variables and all these associations are statistically significant at  $p < 0.05$ . The coefficient results compare the strength of the effect of each independent variable to the dependent variable. The results indicate that for a one-unit increase in age, job satisfaction would decrease by 1.57 units, meaning an increase in age has a negative effect on job satisfaction. However, a one-unit increase in gender, professional category, level of education, and years of experience, would result in all result in positive effects on job satisfaction such that if gender increases by 1 unit, job satisfaction would increase by 0.479 units, and if professional category increases by a unit, job satisfaction would also increase by 0.702 units, and with the level of education, a unit increase would induce a 0.764 unit increase in job satisfaction, while a unit increase in years of experience would see a 0.651 unit increase in job satisfaction.

#### Model Summary<sup>b</sup>

R	R Square	Adjusted R Square
.346 <sup>a</sup>	.327	.078

a. Predictors: (Constant), Years\_of\_Experience, Porfessional\_Category, Gender, Age, Leevel\_of\_Education

b. Dependent Variable: Job Satisfaction

ANOVA <sup>a</sup>						
Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	5.752	5	.565	10.666	.003 <sup>b</sup>



Residual	42.580	199	.716		
Total	48.332	204			

a. Dependent Variable: Job Satisfaction

b. Predictors: (Constant), Years\_of\_Experience, Professional\_Category, Gender, Age, Level\_of\_Education

The regression tables show the impact of demographic variables on job satisfaction. The  $R^2$  value of .327 indicates that demographic variables predicted 32.7% of the variance in the outcome variable with  $F(5, 199) = 10.666, p < .001$ . The results suggested that all demographic variables predicted job satisfaction with Age ( $\beta = 1.57, p < .001$ ), Gender ( $\beta = .479, p < .001$ ), Professional Category ( $\beta = .702, p < .001$ ), Level of Education ( $\beta = .764, p < .001$ ), and Years of Experience ( $\beta = .651, p < .001$ ). The results show strong associations and impacts on job satisfaction implying the close relation and association of demographic variables of the respondents and their level of job satisfaction. The R-squared value suggested that demographic variables are strong contenders to demographic variables.

**Pearson correlation: Relationship between Demographic variables and Job satisfaction**

	Age	Gender	Professional Category	Level of Education	Years of Experience	Internal Job Satisfaction
Overall Job Satisfaction	-.730**	.660**	.658**	.658**	.775*	.657**

\*\* . Correlation is significant at the 0.01 level (2-tailed). \* . Correlation is significant at the 0.05 level (2-tailed).

The correlation results indicate strong negative and positive correlations between demographic variables and overall job satisfaction and these correlations are statistically significant between  $.01 < r < .05$ . The correlation between

age and overall job satisfaction is strongly negatively correlated ( $r = -.730, p < .01$ ). Gender and overall job satisfaction are strongly positively correlated ( $r = .660, p < .01$ ). Between Professional Category and overall job satisfaction is also strongly positively associated ( $r = .658, p < .01$ ). Correlation between Level of Education and Job satisfaction is equally strongly correlated ( $r = .658, p < .01$ ) and between Years of Experience, ( $r = .775, p < .05$ ), and internal Job satisfaction, and overall job satisfaction positively correlated at  $r = .657, p < .01$ . The results mean that while an increase in age comes with job dissatisfaction, increases in gender, professional category, level of education, years of experience, and internal job satisfaction rise together.

**Regression analysis between Company culture, Professional growth, Manager relationship, Compensation and benefits, and Work-life balance and Job satisfaction**

Regression was run to determine the variation between the independent variables and the dependent variable using SPSS. v21.

**Model Summary**

R	R Square	Adjusted R Square
.746 <sup>a</sup>	.815	.079

Predictors: (Constant), JS, CC, MR, PG, WLB, CB; where WLB = work-life balance, MR = Manager relationship, PG = Professional Growth, Company Culture, and CB = Compensation and benefits

**ANOVA**

	Sum of Squares	df	Mean Square	F	Sig.
Regression	349.249	6	59.442	77.785	.000 <sup>b</sup>
Residual	76.764	198	.877		
Total	426.013	204			

a. Dependent Variable: Overall Satisfaction

b. Predictors: (Constant), JS, CC, MR, PG, WLB, CB: where WLB = work-life balance, MR = Manager relationship, PG = Professional Growth, Company Culture, and CB = Compensation and benefits

**Coefficients**

Source	<i>B</i>	<i>SE B</i>	$\beta$	<i>t</i>	<i>p</i>
(Constant)	11.939	1.150		10.378	.000
CC	-2.339	.341	-.615	-7.625	.000
PG	.505	.477	.088	.764	.005
MR	.777	.512	.855	4.762	.007
CB	-6.982	.412	-.783	-10.887	.000
WLB	-3.974	.609	-.114	-7.093	.000
IJS	-3.779	.564	-.765	-7.009	.000

Dependent Variable: Overall Satisfaction (JS). \*. Correlation is significant at the 0.05 level (2-tailed)

The regression results show the influence of the independent variables on the dependent variable. The derived regression equation for Overall Job satisfaction, OJS = 8.789 – 2.339CC+ .505 PG + .777MR -2.982CB - 3.974WLB -3.779JS. The  $R^2$  Value of 0.815 implies that the independent variables explain 81.5% of the variance in the outcome variable with  $F(6, 198) = 77.785, p < .001$ . PG and MR have positive relations with job satisfaction PG ( $\beta = .505, t = .764; p < .005$ ), MR ( $\beta = .777, t = 4.762, p < .005$ ). Company culture (CC), Compensation and benefits (CB), Work-life balance (WLB), and Internal Job satisfaction (JS) are negatively related to overall job satisfaction such that CC ( $\beta = -2.339, t = -7.625; p < .001$ ), CB ( $\beta = -6.982, t = -10.887; p < .001$ ), WLB ( $\beta = -3.974, t = -7.093; p < .001$ ), IJS ( $\beta = -3.779, t = -7.009; p < .001$ ) implying a statistically significant inverse association between company culture (CC), Compensation and benefits (CB), Work-life balance (WLB), internal Job satisfaction (JS), as predictors and Overall Job Satisfaction (OJS) as an outcome.

**Pearson correlation: Relationship between Independent Variables and Job satisfaction**

Persson Correlation was run to assess the strength of associations between the independent variables and the dependent data variable.

### Correlation

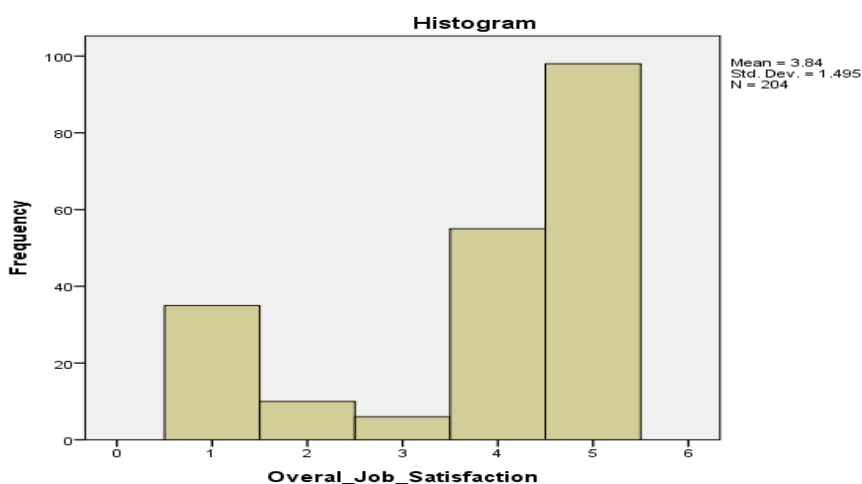
	Company Culture	Professional Growth	Manager Relationship	Compensation & Benefits	Work-Life-Balance	Internal Job Satisfaction
Overall Job Satisfaction	-.698*	.791**	.865**	-.870**	-.885**	-.692*

\*\* . Correlation is significant at the 0.01 level (2-tailed). \* . Correlation is significant at the 0.05 level (2-tailed).

CC, PG, MR, CB, WLB, MR, and IJS imply Company culture, Professional Growth, Manager relationship, Compensation and benefits, Work-life balance, and Job satisfaction. Correlation between the independent variables and the dependent variable also indicates strong positive and negative associations and is statistically significant between  $0.001 < r < 0.05$ . The result indicates a strong positive association between PG ( 0.791) and MR (.865). The result further shows a strong inverse relationship between CC, CB, WLB, MR, and IJS with CC (-.698), CB (-.870), WLB (-.885), and IJS (-.692).

### Combined Effect of Demographic and Independent Variables on Overall Job Satisfaction

Sources	Frequency	Percent
Satisfied	35	17.2
Somewhat Satisfied	10	4.9
Fully Satisfied	6	2.9
Somewhat Dissatisfied	55	27.0
Fully Dissatisfied	98	48.0
<b>Total</b>	<b>204</b>	<b>100.0</b>



On the combined effect of demographic and independent variables on overall job satisfaction, the mean and standard deviation were (M = 3.84, SD = ± 1.495) with 35 of the respondents (17.2%) saying they were satisfied, 10 of them (4.9%) said they were somewhat satisfied, 6 of them (2.9 %) said they are fully satisfied, 55respondents (27%) said they are partially dissatisfied, while 98 (48%) said they are completely dissatisfied. This implies that 75% of respondents are dissatisfied with their jobs. The mean of 3.84 and a standard deviation (SD) of ±1.495 provide valuable insights into the distribution of your data. The Mean indicates the

average value of your dataset suggesting that in the context of the 5-point Likert scale used, respondents tend to agree or slightly agree with the statement that demographic and independent variables affect overall job satisfaction. The Standard Deviation (SD) ( $\pm 1.495$ ) measures the spread or dispersion of the data. A Standard Deviation (SD) of 1.495 indicates moderate variability, with most responses clustering around the mean. Approximately 68% of responses fall within 1 SD (1.495) of the mean, i.e., between 2.345 ( $3.84 - 1.495$ ) and 5.335 ( $3.84 + 1.495$ ) implying that respondents normally agree with the statement demographic and independent variables affect overall job satisfaction, but with some variation in opinions. The moderate SD suggests that some respondents are fully satisfied or dissatisfied, while others are somewhat satisfied or dissatisfied and others neutral.

## DISCUSSION

The study determined the level of job satisfaction and dissatisfaction and its associated factors among health professionals in the North Gonja District of the Savannah Region of Ghana. The study found that 75% of the respondents were dissatisfied with their jobs. This discovery connects with the findings of previous studies on job satisfaction (Merga & Fufa 2019; Mulugeta & Ayele 2015) which also found large proportions of job dissatisfaction among respondents. This study matched the combined effect of demographic and independent variables on job satisfaction which was not done in previous studies that ignored the impact of demographic variables (Geta et al. 2021; Akuffo et al. 2021; Scanlan et al. 2021; Qiu et al. 2021; Singh et al. 2019). This current also uncovered a 48% total dissatisfaction rate which depart from studies that other studies (Temesgen et al. 2018). North Gonja District is one of the severely deprived in the Savannah Region, so the high job dissatisfaction rate of 75% (48% total dissatisfaction and 27% partially dissatisfied) presents a serious concern because the more become discontented, a lot of possible outcomes can be anticipated including low productivity, wastage (transfers, retirement, reposting) inter alia. The key contributors contributing positively to job satisfaction as evidenced in this study comprise prospects for professional growth and manager relationships, while unfriendly company culture, poor compensation and benefits, inconsistent work-life balance, and poor internal job satisfaction were factors that triggered job dissatisfaction among health workers. These discoveries are in tandem with findings of previous studies and extant literature (Akuffo et al. 2021; Guan et al. 2021; Yang et al. 2019; Jin et al. 2019; Bonenberger et al. 2014; Kumar et al. 2013; Mulugeta & Ayele 2015; Gulavani & Shinde 2014). This study also discovered that of the factors contributing to job dissatisfaction among health professionals, poor compensations and benefits (conditions of services), CB ( $\beta = -6.982$ ,  $t = -10.887$ ;  $p < .001$ ), work-life balance WLB ( $\beta = -3.974$ ,  $t = -7.093$ ;  $p < .001$ ), and internal job satisfaction IJS ( $\beta = -3.779$ ,  $t = -7.009$ ;  $p < .001$ ) explained the highest levels of overall job dissatisfaction as was the case in the following studies (Akuffo et al. 2021; Anand et al. 2022; Asegid et al. 2014; Ayalew et al. 2019; Khunou & Davhana-Maselesele 2016; Kumar et al. 2013; Khunou and Davhana-Maselesele, 2016). Unlike many previous studies that found no substantial association between demographic characteristics and overall job satisfaction (Chaulagain & Khadkas 2012; Elsherbeny & El-Masry 2018), this study found significant relationships between demographic characteristics and overall job satisfaction and dissatisfaction ( $p < 0.05$ ) as is the case of (Ayalew et al. 2019; Lu et al. 2016; Asegid et al. 2014) which also reported some associations between demographic attributes and overall job satisfaction and dissatisfaction indicating that demographic characteristics play a role in employees appreciation of satisfaction and dissatisfaction with their jobs.

## CONCLUSION

This study examined the factors determining job satisfaction and dissatisfaction among health professionals in the North Gonja District of the Savannah Region of Ghana. The study concluded that the generally high level of job dissatisfaction found among the health professionals in the North Gonja District of the Savannah Region stemmed from unfriendly company culture, poor compensation and benefits, mismatch of work-life balance, and poor internal job satisfaction. It is also evident that age, level of education, and work experience (demographic factors) have also contributed to dissatisfaction.

## RECOMMENDATIONS

Based on the findings, the study recommends that health policymakers, managers, and other stakeholders

should develop and ensure the implementation of employee-friendly human resource policies that will lessen staff apprehensions and increase the rates of employee job satisfaction. Health professionals in the district in addition to increased remuneration, should be incentivized prospects of professional growth in areas of competency-based training. Health authorities should also provide work-life balance opportunities like mental health and on-site fitness support programs and insurance schemes to cushion employees during hard times. Employees should be rotated regularly to afford them opportunities to change their workplaces and environments as a means of invigorating them. Regular skill development training, mentorships, or education assistance should be churned out to support staff build their capacity and add value to themselves. In addition to the above recommendations, stakeholders and health managers should embrace a culture of inclusivity to ensure staff have their voice in how issues affecting them and addressed. There should be regular meetings to discuss staff satisfaction-related issues and develop collective approaches to solve them. It is also important to make efforts to increase the staff strength of the district since the total number of 204 staff for the district is woefully inadequate considering the volume of work. The staff inadequacy puts a lot of pressure on the few available ones and consequently saps their energies and makes them dissatisfied with time.

### Study limitations

Although in the end, all 204 health professionals in the district participated in the study, there was difficulty in reaching them due to the bad nature of roads and also poor internet connectivity in the area. Some of the staff had to be assembled at vantage points for easy accessibility, which comes with costs to the investigators.

### Conflict of Interest

The researchers proclaim no conflict of interest in the study.

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### Disclaimer

The views, perceptions, and opinions articulated in this article outside literature, empirical evidence, and participants' responses are exclusively those of the authors and do not essentially replicate the official policy or position of any affiliated agency of the authors or participants.

### Further Research

Future studies should focus on other settings outside the Savannah region to discover factors responsible for job satisfaction and dissatisfaction among health professionals to aid a holistic job satisfaction policy for the public health sector.

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### APPENDIX

**Study Instrument/Questionnaire:** <https://docs.google.com/forms/d/e/1FAIpQLSeTkUMWY54A893zFloT-vytPSxxAADWyk81P8sJWsn9CtGCiQ/viewform?usp=sharing>