

# Job Satisfaction of Primary Health-Care Providers (Public Sector) in Urban Setting

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## ABSTRACT

**Introduction:** Job satisfaction is determined by a discrepancy between what one wants in a job and what one has in a job. The core components of information necessary for what satisfies and motivates the health work force in our country are missing at policy level. Therefore present study will help us to know the factors for job satisfaction among primary health care providers in public sector. **Materials and Methods:** Present study is descriptive in nature conducted in public sector dispensaries/primary urban health centers in Delhi among health care providers. Pretested structured questionnaire was administered to 227 health care providers. Data was analyzed using SPSS and relevant statistical test were applied. **Results:** Analysis of study reveals that ANMs are more satisfied than MOs, Pharmacist and Lab assistants/Lab technicians; and the difference is significant ( $P < 0.01$ ). Age and education level of health care providers don't show any significant difference in job satisfaction. All the health care providers are dissatisfied from the training policies and practices, salaries and opportunities for career growth in the organization. Majority of variables studied for job satisfaction have low scores. Five factor were identified concerned with job satisfaction in factor analysis. **Conclusion:** Job satisfaction is poor for all the four groups of health care providers in dispensaries/primary urban health centers and it is not possible to assign a single factor as a sole determinant of dissatisfaction in the job. Therefore it is recommended that appropriate changes are required at the policy as well as at the dispensary/PUHC level to keep the health work force motivated under public sector in Delhi.

**Keywords:** Dispensaries, health-care providers, job satisfaction, motivation, public sector

## Introduction

Health sector is labor intensive where service quality and efficiency are directly influenced by workers satisfaction, motivation and health worker's willingness to apply resources to the task at work place. Job satisfaction has been defined as a pleasurable emotional state resulting from the appraisal of one's job, an affective reaction to one's job and an attitude toward one's job.<sup>[1]</sup> According to Locke's range of affect theory (1976) satisfaction is determined by a discrepancy between what one wants in a job and what one has in a job.<sup>[2]</sup> It is well-known fact that human resource management issues are the most essential component for better and effective implementation of health activities and providing the quality health-care. Provision of adequate infrastructure, funds and health personnel to manage the health sector may not lead to

desired results and output in the health sector.<sup>[3]</sup> Factors such as availability of resources and technical competency of staff are not sufficient in themselves to produce desired work behavior. It is felt that core components of information necessary for what satisfies and motivates the health work force in our country is missing at policy making at the government level. If health providers are not satisfied then desired goals and targets of health programs will not be achieved by the system. To achieve the quality health-care the provider's level of satisfaction has to be achieved.<sup>[4]</sup> The human resource (HR) in the health-care system is unique in the sense that they are not just employees, but the provider of quality health-care where the human touch is also required for patient care. Therefore present study will help us to know the job satisfaction among primary health-care (PHC) providers in the public sector dispensaries and primary urban health center's (PUHCs) in Delhi. The findings would also raise policy makers and manager's awareness level and may help them to improve the level of job satisfaction of PHC providers.

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## Materials and Methods

### Study design

Present study is descriptive in nature with a focus on the quantitative aspect.

### Study area

Study was conducted in the public sector dispensaries/PUHCs in State of Delhi in 2011.

### Study population

PHC providers in Delhi. PHC providers are those who are dealing with beneficiaries (patients) i.e., the medical officers (MOs), auxiliary nurse midwives (ANMs), pharmacists, lab assistants (LAs)/lab technicians (LTs). After going through, the manpower patterns of dispensaries it is learnt that on average one MO, two pharmacists, 2-3 ANMs are posted in each dispensary, but LT or LA are not available in each dispensary.

### Sampling design

Two stages random sampling technique was used in the present study. There were 228 dispensaries of Delhi Government in the State. Out of which 20% dispensaries (45 dispensaries) had been chosen randomly. From these, 45 dispensaries PHC providers were selected.

### Inclusion criteria

Health-care providers with more than 6 month of job are included in the study.

### Tools and technique used for data collection

Primary data is being collected using the pretested structured questionnaire. The questionnaire was designed after intensive review of the literature for job satisfaction in the health sector and standard job satisfaction tools available from other countries, but tools developed in other countries were not culture free and fair. Therefore, 25 item (job satisfaction statements) job satisfaction tool was developed based on Indian conditions and tested in the field for the understanding by the study population. Once it was finalized then administered to the entire study population. The questionnaire was divided into three parts; Part 1: Background characteristics of health-care provider; Part 2: Job satisfaction statements (five point Likert scale); Part 3: Intrinsic job motivation items (five point Likert scale). Among 45 dispensaries questionnaire was distributed. Informed consent was taken. Out of 45 dispensaries; 39 MOs (response rate 78%), 106 ANMs (response rate 70.6%), 45 pharmacists (response rate 64.2%) and 37 LTs/LAs (response rate 67.2%) had given the response. Total sample size was 227.

### Reliability of job satisfaction scale

For internal consistency of job satisfaction scale Crohnbach's alpha was calculated (0.836), according to George and Mallery alpha value of more than 0.7 is acceptable for the scale.<sup>[5]</sup>

Content validity of scale was performed by three experts in the subject area.

### Data analysis

Data was collected, computed, coded and analyzed by using SPSS version 18 developed by IBM Corporation. Filled questionnaires were checked for completeness of data. Scoring of job satisfaction items and intrinsic job motivation was carried out at a scale of 1 to 5. Score 1 was given to highly dissatisfied and Score 5 was given to highly satisfied respondents. Mean scores and standard deviation for the job satisfaction and intrinsic job motivation among the study populations was calculated. Relevant statistical Student's *t*-test, analysis of variance and factor analysis was performed.

## Results

The total health-care provider's involved in the study are 227, which includes 39 MOs, 106 ANMs, 45 pharmacist and 37 are LAs/LTs. As shown in the Table 1; majority of MOs (43.6%) are in the age of 35-45 years whereas 51.4% LAs/LTs are in the age group of 25-35 years. Among the MOs majority (71.8%) are graduates and 28.2% are post-graduates. Among the ANMs 67.9% are undergraduates and 29.2% are graduates. Among the pharmacists 64.4% are graduates. Among MOs majority (46.2%) have 5-15 years of job experience, whereas majority of ANMs (51.9%) have up to 5 years of job experience [Table 1].

### Assessment of job satisfaction of health-care provider in Delhi Government Dispensaries

Job satisfaction is the degree, to which a health worker reports satisfaction with different features of their job in the dispensaries/PUHCs. This is measured in the present study using 5 point Likert scale. Score 1 was given to 'I am very much dissatisfied' score 2 was given to 'I am dissatisfied' score 3 was given to 'I am not sure/cannot say' score 4 was given to 'I am satisfied' and score 5 was given to 'I am very much satisfied.'

Analysis of study reveals that ANMs are more satisfied than MOs, pharmacists and LAs/LTs; and the difference is significant ( $P < 0.000$ ), MOs and pharmacist have almost same level of job satisfaction (mean score 3.0) but LAs/LTs are more satisfied than MOs (mean score of LAs/LTs is 3.1 and MOs is 3.0), but the difference is not significant. Difference in job satisfaction between pharmacists and LAs/LTs is also non-significant ( $P = 0.725$ ) [Tables 2 and 3].

Age of health-care providers don't show any significant difference in job satisfaction ( $F = 1.213$ ;  $P = 0.306$  non-significant) [Table 4].

Education level of health-care providers also not showing any significant difference in job satisfaction in the present study ( $F = 1.876$ ;  $P = 0.156$  non-significant) [Table 5].

**Table 1: Background characteristics of the health-care providers in dispensaries/PUHCs**

Characteristics studied	Categories of characteristic	Medical officers <i>n</i> =39 (%)	Pharmacists <i>n</i> =45 (%)	ANM <i>n</i> =106 (%)	LAs/LTs <i>n</i> =37 (%)
Age	<25 years	NIL	17.8	20.8	13.5
	25-35years	23.1	35.6	26.4	51.4
	35-45 years	43.6	33.3	34.9	24.3
	>45 years	33.3	13.3	17.9	10.8
Sex	Male	53.8	77.8	Nil	37.8
	Female	46.2	22.2	100	62.2
Education level	Undergraduate	NA	20.0	67.9	48.6
	Graduate	71.8	64.4	29.2	48.6
	Post graduate	28.2	15.6	2.8	16.2
Duration of service	Up to 5 years	33.3	46.7	51.9	59.5
	5-15 years	46.2	28.9	17	16.2
	More than 15 years	20.5	24.4	31.1	24.3
Nature of job	Contractual	64.1	24.4	54.7	64.9
	Permanent	35.9	75.6	45.3	35.1

PUHCs: Primary Urban Health Centers; ANM: Auxiliary nurse/midwife; LAs: Lab assistants; LTs: Lab technicians

**Table 2: Job satisfaction mean score and SD in four groups of primary health-care providers**

Medical officers		ANMs		Pharmacists		Lab assistants/Lab technicians		Total	
Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD
3.0	0.42	3.3	0.28	3.0	0.57	3.1	0.41	3.2	0.43

SD: Standard deviation; ANM: Auxiliary nurse/midwife

**Table 3: T-test between job satisfactions of different groups of primary health-care providers**

Group of health-care providers	Mean (SD)	<i>t</i> value	<i>P</i>
Medical officer and ANM	3.0 (0.42); 3.3 (0.28)	4.40	0.000**
MO and pharmacist	3.0 (0.42); 3.0 (0.57)	0.11	0.909 (NS)
MO and LA/LT	3.0 (0.42); 3.1 (0.41)	0.53	0.595 (NS)
ANM and pharmacist	3.3 (0.28); 3.0 (0.57)	3.44	0.001**
ANM and LA/LT	3.3 (0.28); 3.1 (0.41)	3.71	0.001**
Pharmacist and LA/LT	3.0 (0.57); 3.1 (0.41)	0.35	0.725 (NS)

NS: Non-significant; \*\*significant at 0.01 level; LA: Lab assistant; LT: Lab technician; ANM: Auxiliary nurse/midwife; SD: Standard deviation; MO: Medical officer

**Table 4: One-way ANOVA; job satisfaction of health-care providers in different age group**

Age group	<i>n</i>	mean	SD	Between groups <i>F</i>	Significant
<25 years	35	3.2	0.50	1.213	0.306 (NS)
25-35 years	72	3.1	0.38		
35-45 years	78	3.1	0.43		
>45 years	42	3.3	0.41		
Total	227	3.2	0.43		

ANOVA: Analysis of variance; SD: Standard deviation; NS: Non-significant

**Table 5: One-way ANOVA; job satisfaction of health-care providers according to education level**

Education level	<i>n</i>	mean	SD	Between groups <i>F</i>	Significant
Undergraduate	117	3.2	0.41	1.876	0.156 (NS)
Graduate	80	3.1	0.46		
Post-graduate	30	3.4	0.34		
Total	227	3.2	0.43		

ANOVA: Analysis of variance; SD: Standard deviation; NS: Non-significant

Female health-care providers (mean score 3.3) are more satisfied than male (mean score 3.0) and the difference is significant at 0.01 level [Table 6].

In the present study, duration of job (experience) has no effect on job satisfaction variation as *F* value is 0.772, *P* is 0.468 (non-significant) [Table 7].

As shown in Table 8; the mean score of physical working condition of entire study population was 3.2 and the score were low among all the study population particularly pharmacists having a score of 2.8. The mean score for salary and allowances for the entire population are 2.7 (dissatisfied); ANMs and LAs/LTs are maximally dissatisfied with salary and allowances they get. All the health-care providers are dissatisfied from the material and means of working in the dispensary and facilities of water supply, condition of toilets, sitting space they get for working. All the health-care providers are dissatisfied from the training policies and practices in the organization. Dissatisfaction is more among MOs (mean score 2.6) and LAs/LTs (mean score 2.5). The way officers work and their work is not appreciated by seniors in the organization mean score for MOs is 2.9, means they are dissatisfied. Score for the opportunity for professional advancement in the organization are low for all categories of health-care providers. Majority of variables studied for job satisfaction has low scores [Table 8].

Intrinsic job motivation — defined as the degree to which a job holder is motivated to perform well in his work because of his inner drives. It is measured in the present tool at 5 point scale. Score 1 was given to response *No, I strongly disagree*, score 2 was

**Table 6: T-test; job satisfaction of health-care provider's according to gender**

Gender	Mean	SD	t value	P
Male health-care providers	3.0	0.48	4.305	0.000**
Female health-care providers	3.3	0.37		
Total	3.2	0.43		

\*\*Significant at 0.01 level; SD: Standard deviation

**Table 7: One-way ANOVA; job satisfaction of health-care providers according to duration of job (experience)**

Duration of job	n	Mean	SD	Between groups F	Significant
Up to 5 years	111	3.2	0.43	0.762	0.468 (NS)
5-15 years	55	3.1	0.46		
>15 years	61	3.2	0.40		
Total	227	3.2	0.43		

ANOVA: Analysis of variance; SD: Standard deviation; NS: Non-significant

**Table 8: Mean score of sub variables studied for job satisfaction in dispensaries/PUHCs**

Sub variables studied for Job satisfaction	Medical officers (n=39)		ANMs (n=106)		Pharmacist (n=45)		LAs/LTs (n=37)		Total (n=227)	
	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD
Physical working conditions of dispensary	3.3	1.40	3.5	1.02	2.8	1.27	3.3	1.08	3.2	1.19
Salary and allowances	3.0	1.07	2.5	1.1	2.7	1.22	2.5	1.23	2.7	1.17
Materials and means of working in the dispensary	3.0	1.27	2.8	1.21	2.7	1.19	2.4	1.23	2.7	1.23
Training policy and practices in the organization	2.6	0.90	3.4	0.96	2.7	1.11	2.5	0.98	2.8	0.99
Supervision by seniors	3.3	1.19	3.7	0.85	3.5	1.01	3.3	1.05	3.4	1.03
Recognition and appreciation of work by seniors	2.9	1.10	3.6	0.87	3.4	1.12	3.3	1.00	3.3	1.02
Working hours in the dispensary	4.0	0.16	4.0	0.60	4.0	0.56	4.0	0.36	4.0	0.42
Working in the community	3.4	0.79	3.8	0.60	3.6	0.66	3.8	0.44	3.7	0.62
Working with co-workers	3.9	0.39	3.8	0.64	3.9	0.59	3.8	0.58	3.8	0.55
Working space in the dispensary	3.2	1.14	3.3	0.98	3.3	1.04	3.2	1.09	3.2	1.06
Equipment and infrastructure of the dispensary	3.1	1.08	3.3	0.92	3.0	1.04	3.2	0.97	3.1	1.00
Opportunity of professional advancement in the organization	2.6	0.96	2.9	0.92	2.5	1.13	2.3	0.74	2.6	0.94
Opportunity of career growth/promotion	2.2	0.80	2.4	0.92	2.2	1.12	2.0	0.66	2.2	0.87
Chance of obtaining new skills	2.6	1.11	3.9	0.38	2.4	1.07	2.4	0.98	3.4	0.88
Chance of getting official trainings for skill development	2.6	1.06	3.3	0.96	2.5	1.05	2.5	0.86	2.7	0.98
Professional satisfaction with present job content	3.0	1.10	3.2	1.04	3.0	1.10	2.9	1.01	3.0	1.06
Treatment/cure of patients and implementation of health program in the dispensary	3.8	0.50	3.7	0.70	3.2	1.03	3.7	0.53	3.6	0.69
Encouraging system for the well-accomplished job	3.0	0.83	3.4	0.86	2.8	1.07	3.1	0.81	3.1	0.89
Up-to-date information and instructions about your job, you get in the organization	2.6	1.06	3.2	0.99	2.6	1.05	3.0	0.92	2.8	1.00
Higher study leave related issues	2.2	0.96	2.7	0.86	2.4	0.89	2.8	0.77	2.5	0.87
Transfer policy and practices in the organization	2.5	0.91	2.7	0.97	2.4	1.03	2.3	0.92	2.5	0.96
Prevailing retirement age for health-care personnel's in Delhi	2.6	0.95	3.5	0.71	3.5	0.72	3.2	0.71	3.2	0.77
Support you get from your boss for family related problems/issues	3.2	1.10	3.7	0.71	3.4	0.89	3.5	0.90	3.5	0.90
Recognition of your work by community people (dispensary catchment area)	3.7	0.61	3.6	0.79	3.6	0.79	3.7	0.63	3.7	0.71
Overall satisfaction for working in the dispensary environment	3.2	1.10	3.5	0.91	3.3	1.02	3.6	0.7	3.4	0.94

PUHCs: Primary Urban Health Centers; LA: Lab assistant; LT: Lab technician; ANM: Auxiliary nurse/midwife; SD: Standard deviation

given to *No, I disagree*, score 3 was given to *I am not sure about this*, score 4 was given to *Yes, I agree* and score 5 was given to *Yes, I strongly agree*.

In the present study intrinsic job motivation was assessed by modified tool of Warr, Cook and Wall (1979) and it is measured on a 5 point Likert scale. The mean score for intrinsic job motivation for the total study population is 3.9. However, score for individual providers are 4.0 for MOs, ANMs and LAs/LTs. This means intrinsic job motivation is present in the study population [Tables 9 and 10].

## Factor analysis

Factor analysis was done using SPSS package developed by IBM Corporation version 18. Kaiser-meyer-olkin measure of sampling adequacy was 0.793, which means sample size was adequate for factor analysis. Method used for factor analysis was the principal component analysis and rotation method used was the Varimax with Kaiser normalization. Five factor were identified concerned with job satisfaction in factor analysis as shown in Table 11.

## Discussion

HR is the essential element of a health system and HR is an important organizational asset. The mean score of physical working condition for health-care providers were low among all the study population particularly pharmacist having a score of 2.8. This can be attributed to low satisfaction level of health-care providers. Similar findings were reported in the study conducted in Employees' State Insurance (ESI) dispensaries where doctors were dissatisfied with working conditions of dispensaries.<sup>[6]</sup> In the present study providers are dissatisfied with the salary and allowances they are getting in the organization. The response that job satisfaction is dependent on income has been suggested by Kaur and Singh.<sup>[7]</sup> World Health Organization has also

identified low salaries as a major reason for low motivation and job dissatisfaction and which can lead to migration in health-care providers.<sup>[8]</sup> Low salary has been found to be major demotivator for public sector employees.<sup>[9-12]</sup> Study by Soeters and Griffiths has focused that performance based financial incentives for health staff led to better health services, increased productivity in the health sector.<sup>[13]</sup> Health-care providers in the study population are dissatisfied from the material and means of working in the dispensary and facilities of water supply, condition of toilets, sitting space and also from the training policies and practices in the organization. Dissatisfaction is more among MOs and LAs/LTs. Providers are not getting appreciation of their work. According to Herzberg theory "recognition of work" is a very important satisfier and motivator.<sup>[14]</sup> Workers at all levels of organization wish to be recognized for their achievement on the job. Study by Dieleman *et al.* suggested a positive correlation between recognition and job satisfaction.<sup>[9]</sup> Many earlier studies found recognition of work by seniors, peer group and patients as the major motivator for health-care providers.<sup>[9,12,15,16]</sup> According to Pestonjee and Mishra organizations where people lack trust in co-workers, climate may not be congenial for better organizational performance.<sup>[17]</sup> Interpersonal relations have an important effect on the overall job satisfaction of providers. Majority of providers are not satisfied with working with coworkers. Pharmacists and LAs/LTs do not have any scope for professional advancement in the organization leading to dissatisfaction. Earlier studies state that promotions constitute important aspect of health-care provider's career mobility.<sup>[18]</sup> Promotions results in increase in salary and raises health-care provider to a higher level. Promotional opportunities have a positive relation with job satisfaction. Hertzberg in his two factor theory emphasized the fact that opportunities for growth and advancement are strong motivators and hence lead to job satisfaction.<sup>[14]</sup> Previous studies also found professional advancement as significant motivator for health-care providers.<sup>[12,15,19]</sup>

**Table 9: Intrinsic job motivation among primary health-care providers in dispensaries/PUHCs**

Medical officers		ANMs		Pharmacists		LAs/LTs		Total	
Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD
4.0	0.79	4.0	0.62	3.9	0.66	4.0	0.64	3.9	0.08

PUHCs: Primary Urban Health Centers; LA: Lab assistant; LT: Lab technician; ANM: Auxiliary nurse/midwife; SD: Standard deviation

**Table 10: Mean scores of sub variables for intrinsic job motivation of primary health-care providers**

Sub variables for Intrinsic Job satisfaction	Medical officers		ANMs		Pharmacist		LAs/LTs		Total	
	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD
I feel sense of personal satisfaction when I do my job well	4.1	0.50	4.0	0.57	4.0	0.70	3.8	0.61	4.0	0.59
I take pride in doing my job well as I can do	4.0	0.72	4.0	0.52	3.9	0.70	4.1	0.50	4.0	0.61
I look back on the day's work with a sense of my job done well	3.9	0.94	4.0	0.45	3.8	0.63	4.0	0.52	3.9	0.63
I try and keep on thinking the ways of doing my job effectively	3.8	0.97	4.1	0.65	3.8	0.72	4.0	0.59	3.9	0.73
I feel unhappy when my work is not up to my standards	4.2	0.73	3.8	0.83	4.0	0.52	3.8	1.01	3.9	0.77

LA: Lab assistant; LT: Lab technician; ANM: Auxiliary nurse/midwife; SD: Standard deviation



**Table 11: Factor analysis of job satisfaction items among health-care providers**

Factors	Items used in job satisfaction scale	Loading factors
Factor 1: Organization facilities	Equipment and infrastructure of dispensary you get	0.748
	Working space you get in the dispensary	0.745
	Physical working condition of dispensary	0.717
	Materials and means of working in the dispensary	0.603
Factor 2: Interpersonal relations in the organization	Working with co-workers	0.789
	Treatment and cure of patients and implementations of health programs in the dispensary	0.737
	Recognition and appreciation of work by seniors	0.727
	Supervision by seniors	0.674
	Up-to-date information and instructions about your job, you get in the organization	0.657
Factor 3: Policies and practices of organization	Encouraging system for the well-accomplished job	0.605
	Training policy and practices in your organization	0.736
	Higher study leave related issues	0.722
	Opportunity of career growth/promotion	0.646
	Chance of getting official trainings for skill development	0.601
	Opportunity of professional advancement you get in the organization	0.600
Factor 4: Organizational climate	Transfer policy and practices in your organization	0.538
	Support you get from your boss for family related problems/ issues	0.616
	Recognition of your work by community people (dispensary catchment area)	0.604
	Professional satisfaction with present job content	0.573
Factor 5: Job privileges	Working in the community	0.541
	Prevailing retirement age for health-care personnel's in Delhi	0.833
	Working hours in the dispensary	0.764
	Overall satisfaction for working in the dispensary environment	0.654
	Salary and allowances you get	0.628
	Chance of obtaining new skills you get	0.459

Majority of providers reports that there is no learning for new skills at the work place, which leads to de-motivation of workforce. Health-care providers are dissatisfied on the issue of getting official instruction and information about the job in time. Earlier studies report that those organizations, which handled the grievances of their work force efficiently had more satisfied workforce.<sup>[7]</sup> Entire study population is dissatisfied with transfer policy and practices. Study conducted in Gujarat by CBHI, MoHFW also highlighted dissatisfaction in Gujarat by medical staff.<sup>[20]</sup> Mean score for the entire study population for overall job satisfaction are low. It can be stated that job satisfaction is a multidimensional phenomenon where it is not easy to assign a single factor as a sole determinant of satisfaction with the job. For job satisfaction number of factors operates at the same time.

Intrinsic job motivation is present in the study population. As suggested by Maslow and Herzberg association exists between job satisfaction and motivation.<sup>[14,21]</sup> In the present study, Pearson correlation coefficient was calculated and it was found that no correlation exist between job satisfaction and intrinsic motivation of health-care providers ( $r = 0.125$ ;  $P = 0.06$ ). Therefore, present findings are against the earlier theories.

Age of health-care providers doesn't show any significant difference in job satisfaction. Studies performed by Bowen *et al.* reported that older staff tends to have more job satisfaction than younger ones.<sup>[22]</sup> Fulfillment of higher order need with

increasing age and getting senior position can account for higher satisfaction levels reported by Clark *et al.*<sup>[23]</sup> Education level of health-care providers doesn't show any significant difference in job satisfaction in the present study. Female health-care providers are more satisfied than male. In the present study, duration of job (experience) has no effect on job satisfaction variation. Research carried out by Bowen *et al.*, Bretz and Judge, Boltes *et al.* found that overall job satisfaction increased as years in job experience increases.<sup>[22,24,25]</sup> Factor analysis [Table 11] reveals five factor, which have bearing on the job satisfaction; which are; organizational facilities, interpersonal relations in the organization, policies and practices of the organization, organizational working climate and job privileges.

## Conclusion

Job satisfaction is poor for all the four groups of health-care providers in dispensaries/PUHCs and it is not possible to assign a single factor as a sole determinant of dissatisfaction in the job. Majority of job satisfaction variables studied were having low job satisfaction score. Recommendations emerging out of the study are at the policy level as well as at the dispensary/PUHC level. At the policy level; improving the physical working conditions of dispensaries, introduction of performance based incentives, framing of transfer and training policy for the organization, job rotation of health-care providers from dispensaries to hospitals, career growth potential in the job are the required actions at the policy level. At the dispensary level; proper distribution of work, job clarity, recognition and appreciation of good work

performed by paramedical staff, job enrichment and timely dissemination of information/instructions in the dispensaries are the actions at the dispensary level. Finally, it is recommended that appropriate changes are required at the policy level as well as at the dispensary/PUHC level to keep the health work force motivated under public sector in Delhi.

## References

1. Weiss HM. Deconstructing job satisfaction: Separating evaluations, beliefs and affective experiences. *Hum Resour Manage Rev* 2002;12:173-94.
2. Brief AP, Weiss HM. Organizational behavior: Affect in the workplace. *Annu Rev Psychol* 2002;53:279-307.
3. Joint Learning Initiatives. Human Resource for Health Overcoming the Crisis. Washington, D.C: Harvard University's Global Equity Initiative (GEI); 2004.
4. Sutherland VJ, Cooper CL. Job stress, satisfaction, and mental health among general practitioners before and after introduction of new contract. *BMJ* 1992;304:1545-8.
5. George D, Mallery P. SPSS for Windows Step by Step: A Simple Guide and Reference. 11.0 Update. 4<sup>th</sup> ed. Boston: Allyn & Bacon; 2003.
6. Sharma AK. Study on factors affecting satisfaction from employees state insurance corporation services provided at the dispensaries, New Delhi. *J Health Popul Perspect Issues* 1997;20:3.
7. Kaur G, Singh G. Identification and analysis of factors determining job satisfaction among health professionals. *J Hosp Adm* 1994;31:91-9.
8. World Health Organization. The Migration of Skilled Health Personnel in the Pacific Region: A Summary Report. WHO Regional Office for The Western Pacific; Manila Philippines. 2004.
9. Dieleman M, Toonen J, Touré H, Martineau T. The match between motivation and performance management of health sector workers in Mali. *Hum Resour Health* 2006;4:2.
10. Chaudhary S, Banerjee A. Correlates of job satisfaction in medical officers. *Med J Armed Forces India* 2004;60:329-32.
11. Ravindran P, Sood AK. Job satisfaction of staff nurses working in a large metropolitan hospital. *Health Popul Perspect Issues* 1996;19:89-95.
12. Manongi RN, Marchant TC, Bygbjerg IC. Improving motivation among primary health care workers in Tanzania: A health worker perspective. *Hum Resour Health* 2006;4:6.
13. Soeters R, Griffiths F. Improving government health services through contract management: A case from Cambodia. *Health Policy Plan* 2003;18:74-83.
14. Herzberg F. The motivation hygiene concept and problems of manpower. *Pers Adm* 1964;26:1-6.
15. Franco LM, Bennet S, Kanfer R, Stubblebine P. Health Worker Motivation in Jordan and Georgia: A Synthesis of Result. Bethesda, Maryland, USA: Partnership for Health Reforms, ABT Associates; 2001. p. 1-29.
16. Dunstone DC, Reames HR Jr. Physician satisfaction revisited. *Soc Sci Med* 2001;52:825-37.
17. Pestonjee DM, Mishra PK. Role stress and job satisfaction among doctors. *J Health Manag* 1999;1:117-31.
18. Michael RP, Veum JR. "What is a promotion?" *Ind Labor Relat Rev* 1999;52:581-601.
19. Krogstad U, Hofoss D, Veenstra M, Hjortdahl P. Predictors of job satisfaction among doctors, nurses and auxiliaries in Norwegian hospitals: Relevance for micro unit culture. *Hum Resour Health* 2006;4:3.
20. CBHI. Managing Human Resources for Health in India - A Case Study of MP and Gujarat. New Delhi: Ministry of Health and Family Welfare, DGHS; 2007.
21. Maslow AH. A theory of human motivation. *Psychol Rev* 1943;50:370-96.
22. Bowen CF, Radhakrishna R, Keyser R. Job satisfaction and commitment of 4-H agents. *J Ext (Online)* 1994;32:1.
23. Clarke AE, Oswald AJ, Warr P. Is job satisfaction U shaped in age? *J Occup Organ Psychol* 1996;69:57-81.
24. Bretz RD, Judge TA. Person-organization fit and the theory of work adjustment: Implications for satisfaction, tenure, and career success. *J Vocat Behav* 1994;44:32-54.
25. Boltes BV, Lippke LA, Gregory E. Employee satisfaction in extension: A Texas study. *J Ext* 1995;33:5. Available from <http://www.joe.org/joe/1995october/rb1.php> [Last accessed on 2013, Aug 15].

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