

IJBHS 2010054/6306

Assessment of job satisfaction and working conditions of Nigerian oral health workers

E. B. Ezeja¹, C. C. Azodo*², A. O. Ehizele², O. Ehigiator³ and H. O. Oboro⁴

¹Department of Preventive Dentistry, University of Benin Teaching Hospital, Benin City, Nigeria.

²Department of Periodontics, University of Benin Teaching Hospital, Benin City, Nigeria.

³Department of Oral Medicine & Pathology, University of Benin Teaching Hospital, Benin City, Nigeria.

⁴Department of Restorative Dentistry, University of Benin Teaching Hospital, Benin City, Nigeria.

(Received April 15, 2010; Accepted June 1, 2010)

ABSTRACT: **Objective:** To assess the job satisfaction and working conditions of dentist and dental auxiliaries working in Southern Nigeria. **Methods:** A questionnaire-based cross-sectional survey of dental professionals working in Oral healthcare centres of University Teaching hospitals in Southern Nigeria was conducted. **Results:** The survey response rate is 82.3%. The respondents were dentist (59.7%), dental nurse (15.3%), dental therapist (9.0 %), dental technologist (13.2%) and dental record officers (2.8%). Seven-tenth (70.1%) of the respondents expressed satisfaction and fulfillment in their career as Oral healthcare worker. Sixty-five respondents (45.1%) would like one of their children to take up their profession. Only 32% agreed that they have the necessary facilities and equipment to perform their work successfully. Less than half (46.5%) felt that their work area is comfortable enough for them to do their best. Only 29.2% agreed that their salary was enough to cater for their personal and family needs. Dental auxiliaries were more satisfied than dentists ($p=0.004$). Job satisfaction was influenced by ethnicity and geographical location ($p<0.05$). About two-third of the respondents (31.9%) had thought about leaving their profession in the last 12 months with two-third of them being dentists. **Conclusion:** Data from this study revealed that job satisfaction among Oral healthcare workers particularly the dentist should be taken seriously if marked improvement of oral healthcare delivery is desired.

Keywords: Job satisfaction, Dentists, Dental auxiliaries.

Introduction

Historically, the concept of job satisfaction and the assessment of job satisfaction began first in 1911 with the research of Frank Taylor¹. However, job satisfaction research among health workers started on laboratory personnel in United States of America in 1971². Since then multiple researches on various categories of health worker like physicians³, dentists^{4,5}, nurses⁶, physiotherapists^{2,7}, and primary health care workers⁸ in different parts of the world have been conducted. The implication of job satisfaction of health worker on patient care, patient satisfaction, improved patient outcome and overall health care delivery quality may have been the driving force⁹.

*To whom correspondence should be addressed: Email: clementazodo@yahoo.com
Phone: +2348034051699

Studies on conducted on dental professionals were majorly in developed countries^{5,10,11}. Studies on this subject matter remain scanty in the African continent where shortage of health manpower and high burden of the disease coexists. The only retrievable a study on job satisfaction of Nigerian dental professional focused only on dentist and has been more than a decade old⁴. Functionality of oral health center and oral health delivery is dependent on the activities of dentist and non- dentist oral health worker. If this is undermined, less optimal care patients' care, adverse patient outcomes and increased cost to the health care system will result. Changes in the mode of governance, minimum wage and prevalence of oral disease may have significantly impacted on job satisfaction on oral health care workers.

The objective of this survey was to assess the job satisfaction and working conditions of dentist and dental auxiliaries working in Southern Nigeria.

Materials and Methods

A questionnaire-based cross-sectional survey of dental professionals working in Oral healthcare centres of five selected University Teaching hospitals in Southern Nigeria was conducted in 2009. The mode of distribution was by a combination of hand and postal delivery. The questionnaire was divided into 2 sections: Section A assessed the demography of the respondents Section B: was made up of 24 questions on job satisfaction and work related conditions and issues like work conditions, facilities at the work place, nature of work, salary, promotion, professional training, interpersonal relationships and co-workers, intention to leave the profession (**Table 1**). The response in a 5 point likert scale: strongly agree, agree, undecided, disagree and strongly disagree. For the purpose of analysis, the responses were collapsed into 3; agree, undecided and disagree. Informed consent was obtained prior to the onset of the survey, the survey was anonymous and participation was voluntary. Data analysis was done using Statistical Package for Social Sciences (SPSS version 15.0). The test for significance was done using chi square. $P \leq 0.05$ was considered significant.

Results

A total of 144 questionnaires were returned out a total 175 distributed questionnaire given a response rate is 82.3%. Age range is 19-60 with mean age 31.8 ± 8.1 years. Male: female ratio is 1:1. 56.9% were single, 42.4% married and 0.7 widowed. The respondents were dentist (59.7%), dental nurse/DSA (15.3%), dental therapist (9.0 %,) dental technologist (13.2%) and dental record officers (2.8%). About three quarters (74.3%) of the respondents had worked for less than 10 years work experience. The geographic locations of teaching hospital of the respondents were Benin City, 26.4; Ibadan 23.6; Enugu, 19.4; Ile Ife, 18.1; Lagos, 12.5.

Seven-tenth (70.1%) of the respondents expressed satisfaction and fulfillment in their career as Oral healthcare worker. Dental auxiliaries were more satisfied than dentists ($p=0.004$). Job satisfaction was influenced by ethnicity and geographical location ($p<0.05$). Sixty-five respondents (45.1%) would like one of their children to take up their profession and 43.1% would still chose their profession if given another opportunity. About two-third of the respondents (31.9%) had thought about leaving their profession in the last 12 months with two-third of them being dentists (**Figure 1**).

TABLE 1: SECTION B OF THE QUESTIONNAIRE

Section B

Instructions: please circle your best response on the specific question. The categories of the responses are Strongly Agree (SA), Agree (A), Undecided (U), Disagree (D), Strongly Disagree (SD).

Item(s)	SA	A	U	D	SD
1.In my career as an oral health worker, I am satisfied and fulfilled					
2.If am given another opportunity, I will still choose this same profession					
3.I will like one of my children to take up my children					
4.I have had thoughts about leaving this profession in the last one year					
5.I know what is expected of me at work					
6.I have opportunity everyday to do what I do best everyday at work					
7.I have a comfortable working area well enough for me to do my best					
8.I have the facilities and equipments I need to do my work successfully					
9.I am worried about contracting infection at work					
10.I see myself at work as a team player					
11.I have good friend at work					
12.My coworkers are committed to doing quality work					
13.I feel am adequately valued, recognized and appreciated as a member of dental staff					
14.I am frequently blamed when there is error with patient's treatment					
15.I am frequently stressed out at work					
16.I finding much of my job repetitive, not challenging and boring					
17.I am mentally and/or physically exhausted at the end of a day at work					
18.I have energy at the end of each work day to attend to the people I care about					
19.I have energy at the end of each work day to engage in my hobby					
20.My salary is able to cater for my needs and my family needs					
21.My job gives me a reasonable level of financial security					
22.My profession gives me a relatively high status in the society					
23.I have been sent for professional training by my employer					
24.I get promoted as at and when due					

Majority (93.1%) knew what is expected of them at work. More than (55.6%) agreed that they have opportunity to do their best at work everyday. Less than (46.7%) felt that they have a comfortable working well enough for me to do my best and agreed that they have the necessary facilities and equipment to perform their work successfully. A total of 69.4% of respondents are worried about contracting infection at work (**Figure 2**). Majority (83.3%) see themselves as team player at work. 83.3% have good friend at work. 78.5% agreed that are coworker that are committed to doing quality work. 71.5% felt that are adequately valued, recognized and appreciated as a member of dental staff. 25.7% are frequently blamed when there is error with patient's treatment (**Figure 3**).

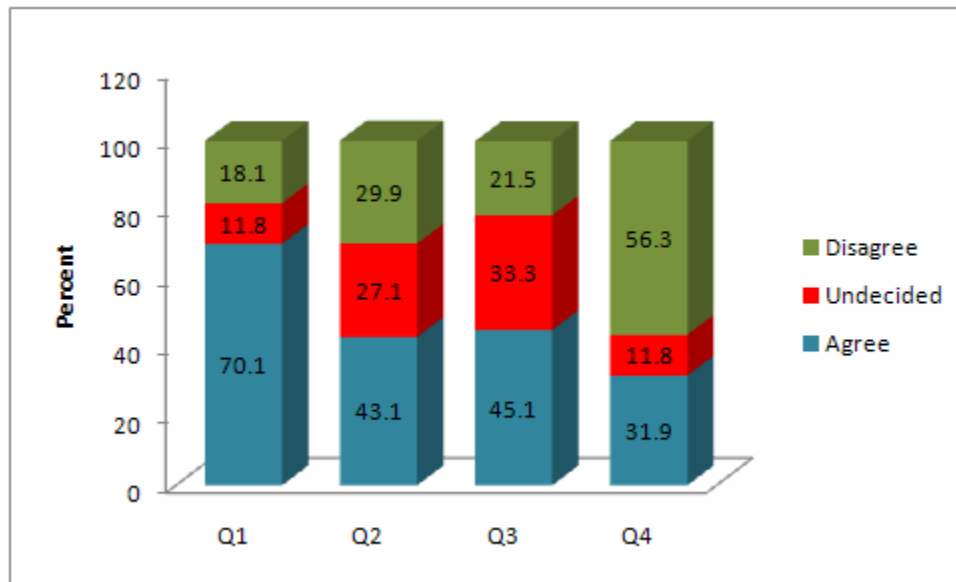


FIGURE 1: JOB SATISFACTION AND INTENTION TO LEAVE THE PROFESSION AMONG RESPONDENTS

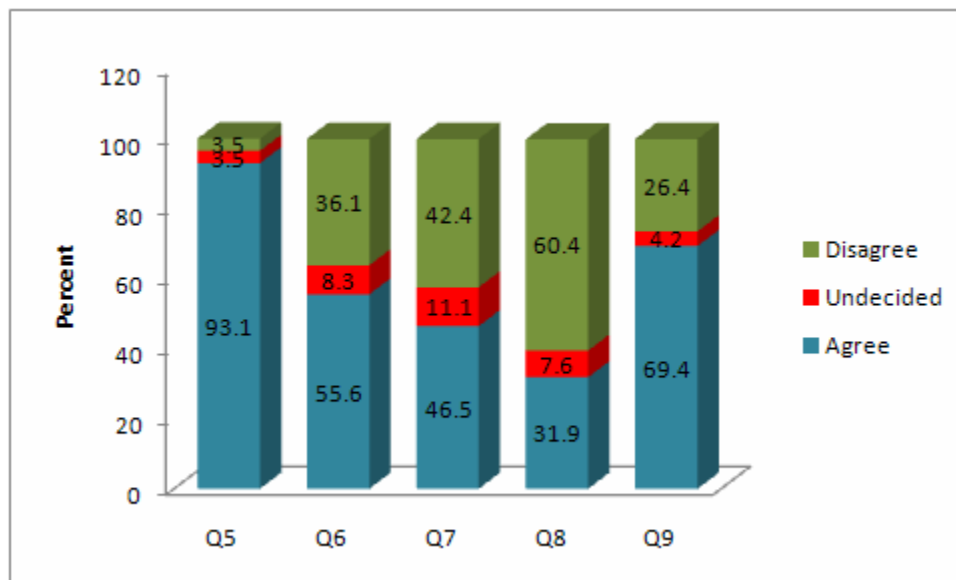


FIGURE 2: RESPONDENTS OPINION OF THE WORKPLACE CONDITIONS

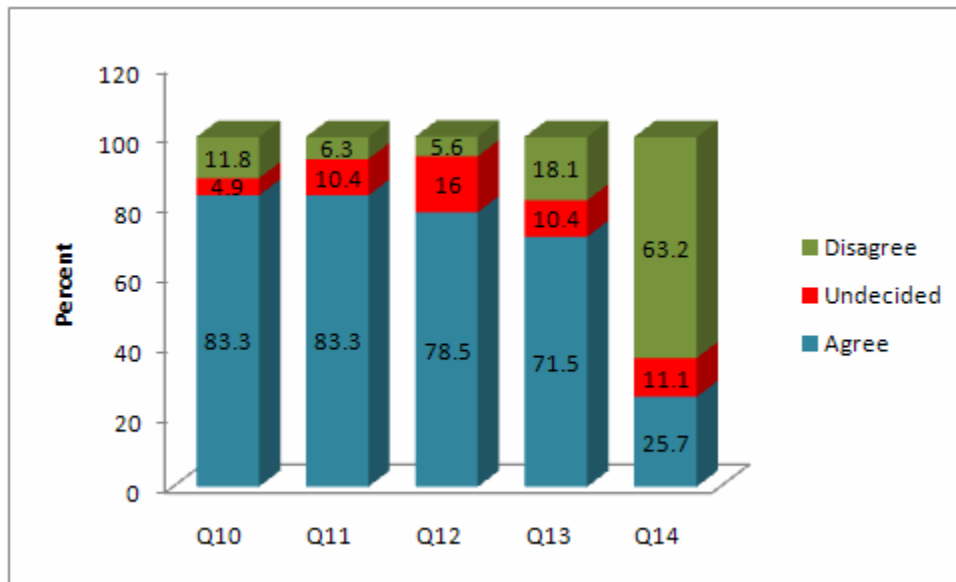


FIGURE 3: RESPONDENTS OPINION OF INTERPERSONAL RELATIONSHIP AT WORKPLACE CONDITIONS

36.8% are frequently stressed out at work. 31.9% reported their job as repetitive, not challenging and boring. Exhaustion at the end of each day at work was reported 42.4%. 60% and 54.9% still have enough energy at the end of work to attend to the people the care for and engage in their hobbies (**Figure 4**).

Only 29.2% agreed that their salary was enough to cater for their personal and family needs. 51.4% agreed that their job gives them a reasonable level of financial security. Three quarter (75.7%) agreed that their job gives them a relatively high status in the society. Only 19.4% have received professional training at their work place and 27.8% got promotion as at and when due (**Figure 5**).

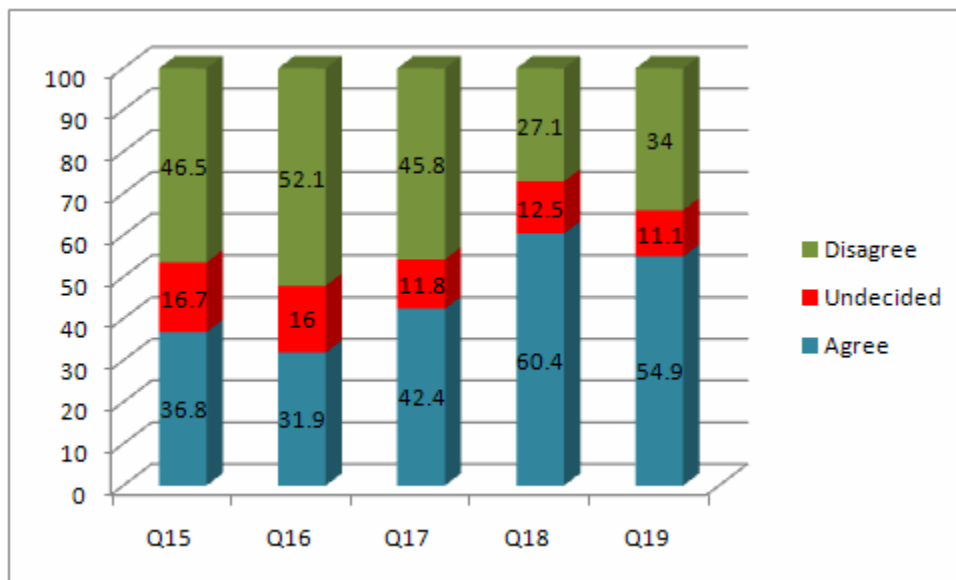


FIGURE 4: RESPONDENTS VIEW AND IMPACT OF OCCUPATION

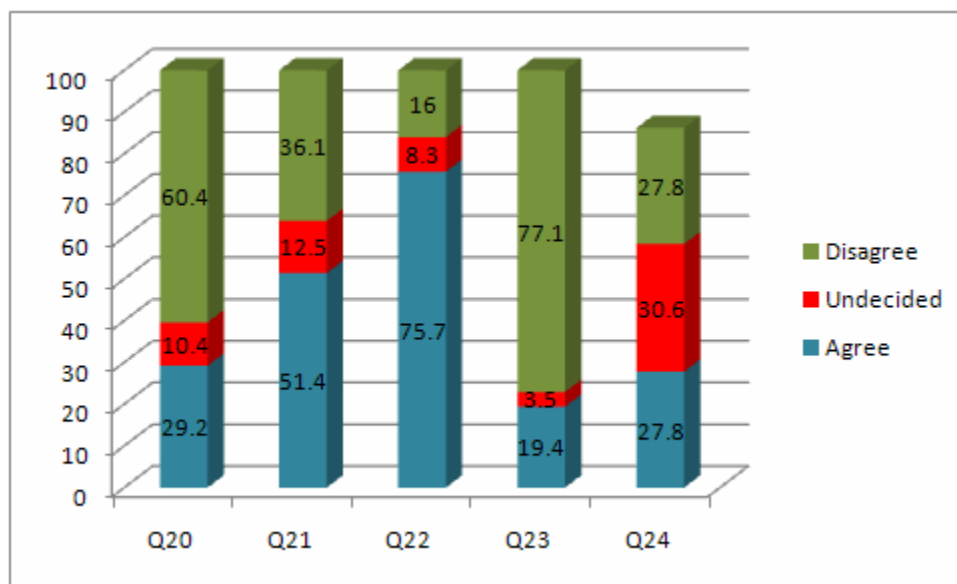


FIGURE 5: REMUNERATION, PROFESSIONAL TRAINING AND PROMOTION OF RESPONDENTS

Discussion

Job satisfaction research in the Oral healthcare facilities in Southern Nigeria is necessary because it has implication on quality of patients care and treatment⁹ and also because increased job satisfaction produces improved job performance. In this study, Seven-tenth (70.1%) of the respondents expressed satisfaction and fulfillment in their career as Oral healthcare worker. This is higher than 30.3% documented among doctors in a Nigerian teaching hospital³. This is comparable to 75.9% documented among Nigerian dental practitioners about a decade ago⁴. The differences would have been masked by differences in the methodology as the previous study was conducted in only dental practitioners throughout the country but in this present study concentrated on dentist and dental auxiliaries in public tertiary oral healthcare facilities in Southern Nigeria.

Variations exist in job satisfaction among dental professional. In this study, dental auxiliaries were more satisfied than dentists ($p=0.004$). This contrasted to the findings of a research which showed that dental practitioners expressed lower levels of job satisfaction than other groups of dental professionals¹². Job satisfaction among dental practitioners is related to a number of socio-demographic factors. In this study, Job satisfaction was influenced by ethnicity and geographical location ($p<0.05$).

Workplace is assumed a second home for workers as the time spent at work accounts for one third of man's life span. It is clear that the work environment has an enormous impact on all of us. Healthy and safe work environment results in more satisfied personnel with consequent improved effectiveness and productivity. Job satisfaction can be influenced the quality of the physical environment in which they work and degree of fulfillment in their work. Dentists and many staff enjoy characteristics of work associated with high levels of satisfaction and performance. Patient relations, perception of income, personal time, staff, and specialty training are important work environment factors for job satisfaction among South Korean dentists¹³. In this study, 32% agreed that they have the necessary facilities and equipment to perform their work successfully and 46.5% felt that that their work area is comfortable enough for them to do their best.

There is no ambiguity in job description in oral healthcare among dental professionals. Majority (93.1%) of the respondents know what is expected of me at work in this study. Orientation on employment which is a common practice in public sector employment, may have accounted a high knowledge of job description among the respondents.

When an individual is motivated, there is tendency for him to go an extra mile at achieving results at work place. In this study 55.6% agreed to having opportunity everyday to do best at work. This gives clue to the level of motivation among the respondents.

In this study, 46.5% of workers expressed worry about contracting infection at work. The prevalence of undiagnosed HIV in dental clinic in Nigeria is high¹⁴ and also high level of percutaneous injuries among Nigerian dental professional¹⁵ may be the obvious explanation.

Oral healthcare services like other healthcare services is based on committed team work and this why 83.3% saw themselves as myself at work as a team player. It may be hinged on the fact that Nigerians are generally happy people and enjoy interaction with one another to achieve better results. Evaluation of interpersonal relationship showed that 83.3% had good friend at work, 71.5% felt that they are adequately valued, recognized and appreciated by their coworker, 78.5% believed that their coworkers are committed to doing quality work. 25.7% were frequently blamed when there is error with patient's treatment. Value of this reasonable positive interpersonal relationship in workplace cannot be overemphasized. It contributes to achievement of the common goal speedily and excellently. Dentistry has long been recognized as a stressful profession^{16,17}. Only 26.8% felt that they are not frequently stressed out at work and 42.3% are exhausted at the end of each days work. The difficulty in getting employed in Nigerian oral healthcare due limited opportunities, and a lot of serious environment stressor may be the reason for the respondent to quantify the stress at work as small. Challenging occupation is associated with increased job satisfaction. In this study, 31.9% of the respondents agreed that their job was repetitive, not challenging and boring. More than half (60.4%) still have enough energy to attend to the people they care about, 54.8% have enough energy at the end of each work day to engage in my hobby. The resilience nature of Nigerians makes them less likely report exhaustion despite high workload.

Prestige and financial reasons are among indicated reason for choosing their career in health profession¹⁸. Three-quarter of the respondents (75.7%) agreed that their profession gave them relatively high status in the society. Poor remuneration of health workers in Nigeria has long been documented and has lead to migration to other countries for greener pastors. A total of 51.4% of the respondents agreed that their job gives reasonable level of financial security and 29.2% agreed that their salary is enough to cater for their needs and their family needs. Careers in business and commerce degrees offer quicker routes to better earnings than career in health making it less attractive. In this study, 45.1% would like one of their children to take up their profession. Immediate action may be need if worsening of the shortage of manpower of oral health worker is to be prevented.

Professional training improves commitment to service delivery and gives employee a sense of belonging. In this study, 19.5% have been sent for professional training. Limited funding of health sector as exemplified by low health budgetary and nonchalant attitude of politician to improved healthcare service delivery are the principal reasons. Promotion in public service in Nigeria is not prompt with health sector inclusive thus it is not surprising that only 27.8% of the respondents were promoted as at and when due in this study.

Every career has the potential for producing personal satisfaction and dissatisfaction, and reactions to it have individual variability¹⁹. Less than half (43.3%) would still choose this same profession, If given another opportunity. This is lower than 94% documented among Danish general practitioners²⁰. The inability of the salary of the respondents to cater for their needs and their family needs may be the reasonable explanation. This may have a serious implication on recruitment of future oral health workers. In this study, about one-third of the respondents (31.9%) had thought about leaving their profession in the last 12 months with two-third of them being dentists. In developing countries, stress and burnout is high due to remuneration is poor, heavy workload and high rates of violence which culminates into low job satisfaction.

Conclusion

Job satisfaction as the barometer of the dental profession has provides insights about issues in the dental profession needing attention in Southern, Nigeria. Data from this study revealed that job satisfaction among Oral healthcare workers particularly the dentist should be taken seriously if marked improvement of oral healthcare delivery is desired. Policy makers may find thus data useful when designing plans to increase the level of job satisfaction among Nigerian dental professionals. Specific emphasis on improvement of working conditions, training, salaries and promotion of Nigerian oral health worker cannot be overemphasized.

References

1. Donuk B. The comparison of the job satisfactions of the sport managers who work private and public sectors. *Selcuk Universitesi Sosyal Bilimler Enstitusu Dergisi* 2009; 21: 179-185.
2. Ogiwara S, Araki H. Job Satisfaction among Physiotherapists in Ishikawa Prefecture, Japan. *Journal of Physical Therapy Science* 2006; 18(2): 127-132.
3. Ofili AN, Asuzu MC, Isah EC, Ogbeide O. Job satisfaction and psychological health of doctors at the University of Benin Teaching Hospital. *Occupational Medicine* 2004; 54:400-403.
4. Saheeb BDO, Mafeni JO. Job satisfaction among Nigerian dental Professional. *Nig Qt. J. Hosp. Med* 1999; 9(1): 42-46.
5. Luzzi L, Spencer AJ, Jones K, Teusner D. Job satisfaction of registered dental practitioners. *Aust Dent J.* 2005; 50(3):179-85.
6. Hu J, Liu H. Job Satisfaction among nurses in China. *Home Health Care Management & Practice* 2004; 17(1): 9-13.
7. Oyeyemi AY. Job satisfaction traits of Nigerian physical therapists. *Physiotherapy Theory and Practice* 2001; 17(4): 257-268.
8. Amoran OE, Omokhodion FO, Dairo MD, Adebayo AO. Job satisfaction among primary health care workers in three selected local government areas in southwest Nigeria. *Niger J Med.* 2005; 14(2):195-9.
9. Kaldenberg DO, Regrut BA. Do satisfied patients depend on satisfied employees? Or, do satisfied employees depend on satisfied patients? *QRC Advis.* 1999; 15(7):9-12.
10. Harris RV, Ashcroft A, Burnside G, Dancer JM, Smith D, Grieveson B. Facets of job satisfaction of dental practitioners working in different organisational settings in England. *Br Dent J.* 2008; 204(1):E1; discussion 16-7.
11. Harris R, Burnside G, Ashcroft A, Grieveson B. Job satisfaction of dental practitioners before and after a change in incentives and governance: a longitudinal study. *Br Dent J.* 2009; 207(2):E4; discussion 74-5.
12. Newton JT, Gibbons DE. Levels of career satisfaction amongst dental healthcare professionals: comparison of dental therapists, dental hygienists and dental practitioners. *Community Dent Health.* 2001; 18(3):172-6.
13. Jeong SH, Chung JK, Choi YH, Sohn W, Song KB. Factors related to job satisfaction among South Korean dentists. *Community Dent Oral Epidemiol.* 2006; 34(6):460-6.
14. Amadi E, Ononiwu C, Aballa N, Oladimeji S, Aneke F, Aneke C, Azeez O. Seroprevalence Of Human Immunodeficiency Virus among patients attending Federal Dental Clinic, Enugu, Nigeria. *The Internet Journal of Dental Science.* 2009;7 Number 2
15. Sofola OO, Folayan MO, Denloye OO, Okeigbemen SA. Occupational exposure to bloodborne pathogens and management of exposure incidents in Nigerian dental schools. *J Dent Educ.* 2007; 71(6):832-7.
16. Kaney S. Sources of stress for orthodontic practitioners. *Br J Orthod.* 1999; 26(1):75-6.
17. Chukwunke FN, Okoye LO, Mgbeokwere U, Folaranmi N, Akaji EA, Ekwueme OC. A questionnaire survey on the level of occupational Stress among dental practitioners in eastern Nigeria. *Journal of College of Medicine* 2007; 12(2): 56-60
18. Orenuga OO, da Costa OO. Characteristics and study motivation of clinical dental students in Nigerian universities. *J Dent Educ.* 2006; 70(9):996-1003.
19. Logan HL, Muller PJ, Berst MR, Yeane DW. Contributors to dentists' job satisfaction and quality of life. *J Am Coll Dent.* 1997; 64(4):39-43.
20. Brøndt A, Vedsted P, Olesen F. General practitioners' job satisfaction. *Ugeskr Laeger.* 2007; 169(26):2521-5.