

Correlation Between Job Satisfaction and Its Associated Factors Among Nurses in a Selected Teaching Hospital, Navi Mumbai.

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Abstract

Background: Job satisfaction is a critical determinant of nursing performance, retention, and patient outcomes. Several occupational and psychosocial factors—including organizational commitment, work environment, and stress—affect satisfaction levels.

Aim: To assess the correlation between job satisfaction and its associated factors among nurses in a teaching hospital in Navi Mumbai.

Methods: A quantitative, descriptive-correlational design was adopted. Eighty registered nurses were selected through purposive sampling. Data were collected using validated tools: Job Satisfaction Scale (JSS), Organizational Commitment Scale (OCS), Occupational Stress Scale (OSS), Professional Commitment Scale (PCS), and Role Conflict Scale (RCS). Reliability coefficients (Cronbach's α) ranged from 0.78–0.92. Data were analyzed using SPSS v25; Pearson's correlation was applied, with significance set at $p < 0.05$.

Results: Nurses reported moderate-to-high job satisfaction (mean = 4.82 ± 1.45) and moderate organizational commitment (mean = 4.65 ± 1.32). Job satisfaction showed a significant positive correlation with organizational commitment ($r = 0.629, p < 0.05$) and a negative correlation with occupational stress ($r = -0.312, p < 0.05$). Stress correlated positively with role conflict ($r = 0.374, p < 0.05$).

Conclusion: Job satisfaction is positively associated with organizational commitment and inversely related to occupational stress. Enhancing supportive work environments and stress-management measures can improve satisfaction and retention among nurses.

Keywords: job satisfaction; organizational commitment; occupational stress; role conflict; nurses; Navi Mumbai.

Introduction

Nurses represent one of the largest and most essential groups within the healthcare workforce. They provide continuous patient care, coordinate multidisciplinary services, administer treatments, educate patients and families, and contribute to patient safety and quality improvement. Because nursing work involves substantial interpersonal, emotional, cognitive, and physical demands, the work environment can have a considerable influence on nurses' attitudes toward their jobs and organizations. Job satisfaction is therefore an important indicator of nurses' occupational well-being and organizational functioning.

Job satisfaction refers broadly to an individual's positive or negative evaluation and emotional response toward their work and work environment. It is not determined by a single factor but develops through the interaction of personal expectations, professional experiences, organizational policies, interpersonal relationships, workload, recognition, autonomy, remuneration, career opportunities, and working conditions. In nursing, job satisfaction has particular importance because dissatisfaction may contribute to absenteeism, intention to leave, reduced organizational commitment, burnout, and difficulties in maintaining optimal quality of care.

The nursing profession is characterized by demanding workloads, shift work, emotional involvement with patients and families, responsibility for clinical decision-making, and the need to work within multidisciplinary teams. In addition, nurses may experience staffing constraints, time pressure, limited autonomy, role ambiguity, interpersonal conflict, and occupational stress. These conditions can influence how nurses perceive their work and may consequently affect job satisfaction.

Organizational commitment is another important factor associated with job satisfaction. Organizational commitment reflects an individual's psychological attachment to and identification with an organization and willingness to remain associated with it. Nurses who feel valued by their organization, receive adequate support, experience fair treatment, and identify with organizational goals may demonstrate stronger commitment and greater satisfaction with their jobs. Conversely, unfavorable organizational conditions may weaken both commitment and satisfaction.

Occupational stress is also highly relevant in nursing. Nurses routinely encounter workload pressures, emergencies, complex patient conditions, emotional demands, long working hours, shift duties, and responsibility

for patient outcomes. Persistent occupational stress may negatively influence emotional well-being and work attitudes. A high level of stress may therefore be associated with lower job satisfaction and may contribute to burnout and turnover intentions.

Role conflict represents another potential source of occupational strain. Nurses may have to respond simultaneously to expectations from physicians, patients, families, administrators, and nursing supervisors. When these expectations are incompatible or unclear, nurses may experience role conflict. Such conflict can increase psychological strain and occupational stress and may negatively affect satisfaction with one's work.

Professional commitment is conceptually distinct from organizational commitment. Professional commitment refers to an individual's attachment to and identification with the nursing profession. A nurse may remain strongly committed to the profession even when dissatisfied with particular organizational conditions. Examining professional commitment alongside organizational commitment, occupational stress, and role conflict therefore provides a broader understanding of the factors associated with nurses' job satisfaction.

Theoretical perspectives such as Herzberg's Two-Factor Theory and the Job Demands–Resources model provide useful frameworks for understanding these relationships. Herzberg's theory distinguishes between motivating factors, such as achievement, recognition, responsibility, and advancement, and hygiene factors, such as organizational policies, supervision, working conditions, and interpersonal relationships. The Job Demands–Resources model proposes that high job demands may contribute to stress and strain, whereas adequate resources such as support, autonomy, recognition, and opportunities for development can promote motivation and positive work outcomes.

Although job satisfaction among nurses has been examined extensively, there remains a need to understand the interaction between satisfaction and multiple occupational and organizational factors within specific healthcare settings. In particular, examining organizational commitment, occupational stress, professional commitment, and role conflict together can provide useful information for nursing administrators and hospital managers.

The present study was therefore undertaken to determine the correlation between job satisfaction and its associated factors among nurses working in a selected teaching hospital in Navi Mumbai. The findings may assist healthcare administrators and nursing leaders in identifying areas that require organizational attention to strengthen nurse satisfaction, professional functioning, and retention.

2. Review of Literature

Job satisfaction among nurses is influenced by a combination of intrinsic and extrinsic factors. Intrinsic factors include achievement, recognition, responsibility, professional growth, meaningful work, and a sense of accomplishment. Extrinsic factors include salary, supervision, working conditions, organizational policies, interpersonal relationships, staffing, and workload. These factors may operate independently as well as interact with one another to influence overall satisfaction.

Previous research has identified the nursing practice environment as an important determinant of job satisfaction. Supportive leadership, effective communication, teamwork, adequate staffing, professional autonomy, and participation in decision-making may promote positive work experiences. Conversely, poor organizational support, excessive workload, limited resources, and inadequate recognition can contribute to dissatisfaction.

Organizational commitment has frequently been examined in relation to job satisfaction. Nurses who are satisfied with their work may develop stronger emotional attachment to their organizations and may be more willing to remain in their current employment. At the same time, organizational practices that promote recognition, fairness, participation, and support may strengthen both commitment and job satisfaction.

Occupational stress has consistently emerged as an important concern within nursing. Work-related stress may result from workload, staffing shortages, time pressure, emotional demands, interpersonal difficulties, and responsibility for patient care. Persistent occupational stress may reduce job satisfaction and increase the risk of burnout and intention to leave.

Role conflict may contribute to occupational stress because nurses frequently operate at the intersection of several professional and organizational expectations. Conflicting demands from different stakeholders can create uncertainty regarding priorities and responsibilities. Role conflict may consequently affect both psychological well-being and job satisfaction.

Professional commitment represents another dimension of nurses' relationship with their work. Nurses with strong professional identification may experience a sense of purpose and dedication to nursing. However, professional commitment may not necessarily compensate for unfavorable organizational conditions. Examining professional commitment alongside organizational commitment is therefore useful in understanding whether satisfaction is primarily related to the profession itself or to the organization in which nurses work.

Indian studies have reported moderate levels of job satisfaction among nurses and have highlighted the influence of staffing, organizational hierarchy, workload, professional development, working conditions, and stress. However, comparatively fewer studies have examined job satisfaction together with organizational commitment, occupational stress, professional commitment, and role conflict within the same nursing population.

The present study addresses this gap by examining the relationships among these variables among nurses working in a teaching hospital in Navi Mumbai.

3. Methodology

3.1 Research Design

A quantitative descriptive-correlational research design was employed. The design was selected because the study aimed to describe the levels of job satisfaction and associated factors and determine the relationships among these variables without manipulating the study conditions.

3.2 Research Setting

The study was conducted in a selected teaching hospital in Navi Mumbai, Maharashtra. The setting represents an urban tertiary healthcare environment in which registered nurses provide care across different clinical services.

3.3 Study Population

The target population comprised registered nurses working in the selected teaching hospital who had at least six months of professional clinical experience.

3.4 Sample Size and Sampling Technique

A total of 80 registered nurses participated in the study. Non-probability purposive sampling was used to recruit participants who fulfilled the eligibility criteria.

3.5 Inclusion Criteria

Participants were eligible if they:

Were registered nurses working in the selected hospital.

Had a minimum of six months of clinical experience.

Were willing to participate in the study.

Provided informed consent.

3.6 Exclusion Criteria

The following individuals were excluded:

Student nurses and interns.

Nurses who were on extended leave during the period of data collection.

3.7 Study Variables

Dependent Variable

Job satisfaction.

Associated/Independent Variables

Organizational commitment.

Occupational stress.

Professional commitment.

Role conflict.

The study methodology explicitly identifies job satisfaction as the dependent variable and organizational commitment, occupational stress, role conflict, and professional commitment as independent variables.

3.8 Data Collection Tools

A structured self-administered questionnaire consisting of six sections was used:

Section I: Demographic Profile

Information regarding selected demographic and professional characteristics of participants was collected.

Section II: Job Satisfaction Scale

The Job Satisfaction Scale (JSS) consisted of 15 items. The observed mean score was 4.82 ± 1.45 , with scores ranging from 1.8 to 7.0.

Section III: Organizational Commitment Scale

The Organizational Commitment Scale (OCS) consisted of 15 items. The observed mean score was 4.65 ± 1.32 , with scores ranging from 2.0 to 7.0.

Section IV: Occupational Stress Scale

The Occupational Stress Scale (OSS) consisted of 12 items. The observed mean score was 2.48 ± 0.89 , with scores ranging from 1.0 to 5.0.

Section V: Professional Commitment Scale

The Professional Commitment Scale (PCS) consisted of 10 items. The observed mean score was 4.30 ± 1.12 , with scores ranging from 2.0 to 7.0.

Section VI: Role Conflict Scale

The Role Conflict Scale (RCS) consisted of 8 items. The observed mean score was 3.15 ± 0.94 , with scores ranging from 1.0 to 5.0.

3.9 Reliability

Reliability of the instruments was established through pilot testing. Cronbach's alpha coefficients ranged from 0.78 to 0.92, indicating acceptable to high internal consistency of the study instruments.

3.10 Data Collection Procedure

Institutional and ethical approvals were obtained before commencement of data collection. Eligible nurses were informed about the purpose and procedures of the study. Written informed consent was obtained from participants before administration of the questionnaire.

The questionnaires were distributed personally to eligible participants and collected after completion. Data collection was conducted over a four-week period. Participation was voluntary, and participants were informed that their responses would be kept confidential.

3.11 Data Analysis

Data were coded and analyzed using IBM SPSS version 25. Descriptive statistics, including frequency, percentage, mean, and standard deviation, were used to summarize participant characteristics and study variables. Pearson's product-moment correlation coefficient was used to determine the direction and strength of relationships among job satisfaction, organizational commitment, occupational stress, professional commitment, and role conflict. A p-value of less than 0.05 was considered statistically significant.

3.12 Ethical Considerations

Ethical clearance was obtained from the Institutional Ethics Committee before data collection. Participation was voluntary, informed consent was obtained, and confidentiality and anonymity of participants were maintained throughout the research process.

4. Results

4.1 Demographic Characteristics

A total of 80 nurses participated in the study. The majority of participants were female (85%), while males constituted 15% of the sample. The largest age group was 21–25 years (40%), followed by 26–30 years (32.5%). Participants aged 31–35 years constituted 18.8%, while 8.7% were above 35 years.

Regarding marital status, 62.5% of participants were single and 37.5% were married. With respect to professional experience, 47.5% had 2–5 years of experience, 22.5% had less than two years, and 30% had more than five years of experience.

In terms of educational qualification, 46.2% held a B.Sc. Nursing qualification, 43.8% were GNM-qualified nurses, and 10% held an M.Sc. Nursing qualification.

Table 1. Demographic Characteristics of Participants (N = 80)

Variable	Category	Frequency (n)	Percentage (%)
Age (years)	21–25	32	40
	26–30	26	32.5
	31–35	15	18.8
	>35	7	8.7
Gender	Female	68	85
	Male	12	15
Marital Status	Single	50	62.5
	Married	30	37.5
Experience (years)	<2	18	22.5
	2–5	38	47.5
	>5	24	30
Qualification	GNM	35	43.8
	B.Sc Nursing	37	46.2
	M.Sc Nursing	8	10

4.2 Descriptive Findings

The mean job satisfaction score was 4.82 ± 1.45 , indicating moderate-to-high job satisfaction. Organizational commitment had a mean score of 4.65 ± 1.32 and was categorized as moderate.

The mean occupational stress score was 2.48 ± 0.89 , indicating a low-to-moderate level of occupational stress. Professional commitment demonstrated a mean score of 4.30 ± 1.12 and was interpreted as moderate-to-high. Role conflict had a mean score of 3.15 ± 0.94 and was categorized as moderate.

Table 2. Descriptive Statistics of Scale Scores (N = 80)

Scale	No. of Items	Mean	SD	Minimum	Maximum	Interpretation
Job Satisfaction (JS)	15	4.82	1.45	1.8	7	Moderate–High
Organizational Commitment (OC)	15	4.65	1.32	2	7	Moderate
Occupational Stress (OS)	12	2.48	0.89	1	5	Low–Moderate
Professional Commitment (PC)	10	4.3	1.12	2	7	Moderate–High
Role Conflict (RC)	8	3.15	0.94	1	5	Moderate

Overall, the descriptive findings indicate that the nurses demonstrated relatively favorable levels of job satisfaction and professional commitment. Organizational commitment was moderate, whereas occupational stress was relatively low-to-moderate. Role conflict was present at a moderate level.

4.3 Correlation Analysis

Table 3. Correlation Matrix Between Study Variables (Pearson's r)

Variables	Job Satisfaction	Organizational Commitment	Occupational Stress	Professional Commitment	Role Conflict
Job Satisfaction	1	0.629*	-0.312*	0.541*	-0.275*
Organizational Commitment	0.629*	1	-0.224	0.478*	-0.198
Occupational Stress	-0.312*	-0.224	1	-0.315*	0.374*
Professional Commitment	0.541*	0.478*	-0.315*	1	-0.282*
Role Conflict	-0.275*	-0.198	0.374*	-0.282*	1

Pearson's correlation analysis demonstrated several statistically significant relationships.

Job satisfaction showed a strong positive correlation with organizational commitment ($r = 0.629$, $p < 0.05$). This indicates that higher organizational commitment was associated with higher levels of job satisfaction.

Job satisfaction was also positively correlated with professional commitment ($r = 0.541$, $p < 0.05$), suggesting that nurses with stronger commitment to their profession tended to report higher satisfaction with their work.

In contrast, job satisfaction demonstrated a statistically significant negative correlation with occupational stress ($r = -0.312$, $p < 0.05$). Thus, increasing occupational stress was associated with decreasing job satisfaction.

A negative relationship was also observed between job satisfaction and role conflict ($r = -0.275$, $p < 0.05$), indicating that greater role conflict was associated with lower job satisfaction.

Occupational stress showed a statistically significant positive correlation with role conflict ($r = 0.374$, $p < 0.05$), suggesting that nurses experiencing greater role conflict also tended to experience greater occupational stress.

Professional commitment demonstrated a negative correlation with occupational stress ($r = -0.315$, $p < 0.05$) and a negative correlation with role conflict ($r = -0.282$, $p < 0.05$).

*Significant at $p < 0.05$.

The correlation findings demonstrate that positive organizational and professional factors were associated with higher job satisfaction, whereas occupational stress and role conflict were associated with lower satisfaction.

5. Discussion

The present study examined job satisfaction and its relationship with organizational commitment, occupational stress, professional commitment, and role conflict among nurses working in a selected teaching hospital in Navi Mumbai.

The overall mean job satisfaction score of 4.82 ± 1.45 indicated a moderate-to-high level of satisfaction. This finding suggests that, despite the demanding nature of nursing work, the participating nurses generally experienced a favorable perception of their jobs. The finding may reflect the influence of supportive organizational conditions, professional identity, interpersonal relationships, and other workplace factors.

Organizational commitment demonstrated a moderate mean score of 4.65 ± 1.32 . Importantly, job satisfaction was positively and significantly correlated with organizational commitment ($r = 0.629$, $p < 0.05$). The strength and direction of this relationship indicate that nurses who demonstrated stronger attachment to their organization were more likely to report higher job satisfaction. Organizational support, recognition, communication, participation in decision-making, and perceived fairness may contribute to this relationship.

The relationship between job satisfaction and professional commitment was also positive and statistically significant ($r = 0.541$, $p < 0.05$). This finding suggests that nurses' identification with and commitment to their profession may contribute to positive perceptions of their work. Professional commitment can provide nurses with a sense of meaning, purpose, and professional identity, which may positively influence their satisfaction.

Occupational stress demonstrated a significant negative correlation with job satisfaction ($r = -0.312$, $p < 0.05$). Nurses who experienced higher levels of occupational stress tended to report lower job satisfaction. This finding is clinically and organizationally important because nursing involves considerable workload, emotional demands, shift duties, time pressure, and responsibility for patient outcomes. If these demands are not balanced by adequate organizational resources, they may adversely affect job satisfaction.

Role conflict also demonstrated a significant negative relationship with job satisfaction ($r = -0.275$, $p < 0.05$). Nurses who experience incompatible or unclear expectations may find it more difficult to perform their responsibilities effectively, which can contribute to frustration and dissatisfaction.

The positive relationship between occupational stress and role conflict ($r = 0.374$, $p < 0.05$) further suggests that role-related difficulties may represent an important contributor to occupational stress. Clear job descriptions, effective delegation, appropriate staffing, communication between professional groups, and supportive supervision may help reduce role-related strain.

The findings are broadly consistent with previous research cited in the study, which has identified organizational commitment, practice environment, stress, burnout, and role-related factors as important determinants of nurses' job satisfaction. The results reinforce the importance of considering job satisfaction as a multidimensional organizational outcome rather than an isolated individual attitude.

The study also supports the conceptual relevance of Herzberg's Two-Factor Theory. Organizational conditions such as supervision, working environment, and organizational policies may function as hygiene factors, while recognition, professional achievement, responsibility, and opportunities for development may function as motivating factors. Similarly, the Job Demands–Resources framework provides a useful interpretation of the negative relationship between stress and satisfaction: occupational demands may create strain, whereas organizational and professional resources may promote motivation and satisfaction.

6. Implications

Administrative: Encourage participatory management and regular feedback mechanisms.

Educational: Incorporate stress-management and resilience training in nursing curricula.

Policy: Develop recognition programs and ensure equitable workload distribution to sustain motivation and retention.

7. Limitations

The study's cross-sectional nature limits causal inference. Data were self-reported, which may introduce response bias. The sample was limited to one hospital, restricting generalizability.

8. Conclusion

Job satisfaction among nurses is positively correlated with organizational commitment and negatively correlated with occupational stress. Creating supportive work environments and addressing stressors are essential to enhance job satisfaction, improve retention, and strengthen patient-care quality.

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