Job Satisfaction and Perceived Self-Efficacy among Greek Nurses

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ABSTRACT:

Aim: The aim of this study is to evaluate job satisfaction and perceived self-efficacy of nurses working in a general hospital in Greece.

Background: Most people spend a considerable part of their lifetime working. Work and social life form a whole by being interconnected and also give each other meaning. For this reason, job satisfaction becomes important for all professions.

Methods: A quantitative, cross-sectional, and descriptive research design was used in this study. Data were collected using the Minnesota Job Satisfaction Scale, the General Perceived Self-efficacy Scale and a demographic questionnaire.

Results: The study sample was composed of 101 participants. We found that a positive significant relationship between job satisfaction, liking one's job, salary, and choosing the department to work where one works. There was no significant difference between perceived self-efficacy and job satisfaction in our sample of Greek nurses. **Conclusion:** Further studies should be carried out in different countries with larger samples and different nursing specialties to shed light on nurses' job satisfaction.

Implications for nursing management: The obtained findings show that nursing managers should try to provide these factors related to working conditions in order to improve job satisfaction.

Keywords: Nursing Management, Job Satisfaction, Self-Efficacy, Greece.

I. INTRODUCTION

Job satisfaction is an important subject that affects nurses in many aspects such as productivity, performance, patient safety, nurse-based patient output, and the quality of nurses' business life. It also affects the commitment of nurses to their organizations and the nursing profession (Adams & Bond 2000, Best & Thurston 2004). Spence *et al.* (2016) also found that strengthening and supporting nurses' practicing environments positively affects job satisfaction. In order to reveal different factors affecting nurses' job satisfaction levels, several studies have been carried out with different sample sizes. Self-efficacy is one of the most important elements that affects job satisfaction and patient care directly in the nursing profession (Aiken *et al.* 2002). There are also a few studies that have considered the relationship between self-efficacy and job satisfaction (Feather 2015), and more research is required in order to collect data regarding this relationship.

The main objective of this descriptive study is to investigate the correlation of job satisfaction with socio-demographic factors and perceived self-efficacy in nurses working in the Sotiria General Hospital in Greece.

Background

Job Satisfaction:

The definition of job satisfaction is generally based on Abraham Maslow's and Frederick Herzberg's theories. In general, Maslow's hierarchy of needs theory was developed to describe human motivation. This theory can also be utilized to describe job satisfaction (Maslow 1943). Employees working in an organization may focus on their feelings related to their work as long as some of their basic needs, such as financial stability and health care, are met. Furthermore, organizations that want to increase employees' job satisfaction should firstly supply them with their basic needs. After completely meeting these needs, the last step, called self-actualization, can be achieved. Then, any steps conducted in addition to these provide positive contributions to the self-actualization process (Maslow 1970, Maslow 1943). Herzberg's motivator-hygiene theory also suggests that job satisfaction and dissatisfaction cannot be considered as different from each other. They could, however, be considered as two separate facts and even unrelated concepts in some cases. (Herzberg 1968). The theory includes two main factors for job satisfaction. The first one is motivation, including job satisfaction, responsibility, advancement opportunities, status, achievement, and recognition factors. Existence of these factors will motivate people as well as their sense of personal achievement. The absence of these factors will demotivate people working in an organization (Herzberg 1966). The second group of factors are collectively known as hygiene factors. These factors include wages, salaries, working conditions, and job security. Hygiene

factors do not directly affect people's motivation in an organization, but their absence can cause demotivation (Herzberg 1966). The most cited explanation of job satisfaction was made by Schaufeli & Bakker (2010) and also by Locke (1976). Schaufeli & Bakker (2010) stated that job satisfaction centers upon all the different emotions that employees experience. Locke's definition for job satisfaction is as follows: "job satisfaction is a pleasurable or positive emotional state resulting from an appraisal of one's work or work experiences" (Locke 1976). Job satisfaction is an important element that represents the working environment and job characteristics (Karsh et al. 2005). Locke stated that there is a positive relationship between the feelings employees have regarding their job and their social life (Locke 1976).Job satisfaction also refer to the feelings concerning the job such as placidity, boredom, anger, or excitement. Cognitive components of job satisfaction also refer to the feelings concerning a person's work-related thoughts, such as being being late for work, or being ill and avoiding work (Bernstein & Nash 2008). Locke (1976) believes that job satisfaction affects not only physical and mental health but also the social lives of employees. Coaster (1992) also observed that job satisfaction affects the quality of life of employees.

General Perceived Self-efficacy:

Interactions of behavioral and environmental factors are seen as the most important elements for employment (Bandura 1977). Self-efficacy is defined as the "beliefs in one's capabilities to incite the motivation, cognitive resources, and courses of action needed to fulfill given situational requirements" (Wood & Bandura 1989). General self-efficacy is also described as "one's self estimation of basic ability to cope, fulfill and achieve" (Judge & Bono 2001). Self-sufficiency plays an important role; it affects not only employees' behavior but also other determinants such as perception of barriers and opportunities in the social environment, emotional tendencies, goals and expectancy in employment (Bandura 2006). Bandura (1993) also states that people who have low self-efficacy abstain from difficult tasks, keep away from performing these tasks, and perceive these tasks as a personal threat for themselves. They also have small goals and weak self-confidence to achieve these goals. When they face a difficult task or an unexpected result, they slowdown their work and always think of their own deficiencies. Thus, they can easily get stressed and depressed. On the other hand, Luszczynska et al. (2005) observed that people with high self-efficacy in a specific field, select more challenging and ambitious targets. Therefore, these people have a strong intention to do things in the best way possible. The concept of general perceived self-efficacy has also been applied in numerous fields, and it has become a key factor in different areas including health and personality psychology, and in clinical, educational, and social development (Schwarzer 1994). Many researchers have shown that self-efficacy is related to workrelated results such as job attitudes (Saks 1995) and job performance (Stajkovic & Luthans 1998).

Design and Sample:

II. MATERIALS AND METHODS

This study was a descriptive, cross-sectional, and correlational research. It was conducted between August and September during the summer holidays. We chose the four most crowded clinics as our sample. The units involved in this research were the surgery department, the intensive care unit, the pathology unit, and the pulmonary diseases unit. Other services and emergency services were excluded from the sample. Participants were 101 nurses who participated voluntarily in the research (response rate was 75%) during the data collection period.

Instruments

Job satisfaction Scale

To measure job satisfaction, respondents were asked to complete the short version of the Minnesota Satisfaction Questionnaire (MSQ) developed by Weiss *et al.* (1967). Many studies investigating job satisfaction have used this questionnaire. The short form of the MSQ provides three different dimensions, namely general satisfaction, intrinsic satisfaction and extrinsic satisfaction. The short form of the MSQ is a self-administered questionnaire and is composed of twenty items. These items are rated on a 5-point Likert scale (1 "very dissatisfied with this aspect of my job," 2 "dissatisfied with this aspect of my job," 3 "can't decide if I'm satisfied or dissatisfied with this aspect of my job," 4 "satisfied with this aspect of my job," and 5 "very satisfied with this aspect of my job," A "satisfied with the averaged to create a total score – the lower the score, the lower the level of job satisfaction. Participants usually complete the questionnaire within 5 to 10 minutes.

General Perceived Self-efficacy

The German version of the General Self- Efficacy Scale (GSE) was originally developed by Jerusalem and Schwarzer in 1979. This scale was comprised of twenty items. It was reduced to 10 items and has

subsequently been translated into 32 languages (Scholz *et al*, 2002). The Greek version of the GSE has been validated in a sample of advanced cancer patients. The Greek version of the GSE has a Cronbach's alpha value of 0.927 (Mystakidou *et al.* 2008). GSE is a self-administered scale. The questionnaire part of the scale contains ten items, and these items are anchored with a 4-point Likert scale ranging from 1 "not at all true" to 4 "exactly true" for each item. Summing up the responses to all items reveals the final composite score, which ranges from 10 to 40. People with high perceived general self-efficacy scores and people with low perceived general self-efficacy, respectively. The scale takes about 4 minutes to complete (Schwarzer & Jerusalem 2010).

Data analysis

Data analysis was conducted using Statistical Package for Social Sciences (SPSS for Windows; IBM Corp. 2013). Descriptive statistics were produced to examine individual demographic variables, level of job satisfaction, and level of general self-efficacy. Demographic data including age, gender, marital status, children, education, working department, work duration (months), duty, liking one's job, salary, and willingness to quit job were collected. In order to identify correlations between demographic characteristics (age, gender, education, working department, working duration, liking one's job, and salary) and job satisfaction, Spearman's correlation statistic test was used. Moreover, Spearman's Rho correlation was adopted to analyze the relationship between General self-efficacy and job satisfaction. Statistical significance for all analyses was accepted at a level of $p \le .05$.

III. RESULTS

Sample characteristics:

In our sample, 83 participants (82.20%) were women and 24 were (17.80%) men. The age range of the nurses was from 26 to 55 years, and the mean age of the sample was 41.43 years (SD \pm 5.0). Sixty-four respondents (63.4%) were married, 20 respondents (19.81%) were single, 2 respondents (1.98%) were widowed, and the remaining 15 participants (14.85%) were divorced. Seventy-one nurses who participated in the study (70.30%) had a child and 60.4% (n = 60) had a Bachelor's degree. The majority of nurses were working in the pulmonary diseases unit (33.66%, n = 34) and 76.20% did not choose the services where they worked themselves (n = 77). Nearly all (95%, n = 96) of the nurses had at least 19 months of work experience, and just over half (53.47%, n = 54) had 8 or more duty hours per week. The majority of the nurses liked their job (81.20%, n = 82). Despite the fact most nurses stated that their salary was not enough (97.03%, n = 98), they did not want to quit their job (86.10%, n = 87). These statistical data are also shown in Table 1.

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Table 1. Demographic characteristics of all participants (n = 101)

25 or more	96	95.05	
Duty			
No duty	16	15.84	
1-8 hours	31	30.69	
8 and more	54	53.47	
Liking Job			
No	19	18.80	
Yes	82	81.20	
Sufficient Salary			
No	98	97.03	
Yes	3	2.97	
Willing to quit			
No	87	86.10	
Yes	14	13.90	
Total	101	100.00	

Job satisfaction and nurses' characteristics variables

Table 2 shows that the mean job satisfaction score of the sample was 59.5, ranging from 28 to 78 (SD = 10.7). Job satisfaction was significantly correlated with liking one's job (t = 3.074, p = .004) and sufficient salary (t = 1.95, p = .005) from the nurses' point of view. Moreover, job satisfaction and choosing one's working department (t = 3.074, p = .004) produced a statistically significant relationship. However, there were no apparent significant relationships between mean participant total job satisfaction scores and age (F = 1.298, p = 1.298), gender (t = 1.200, p = .233), education (Welch = 1.415, p = .257) and working time (F = 1.139, p = .324).

Table 2. Comparison of Job satisfaction and nurses' demographic variables (n = 101)

	Characteristic	n	Mean	Std.	P value	Test value	Test
	Age						
	26-35	20	56.60	13.20			
	36-45	53	61.01	9.27	.278	F = 1.298	ANOVA
	46-55	28	59.03	11.17			
	Gender						
	Male	18	62.33	8.60	.233	t = 1.200	T-test
	Female	83	59.00	11.06			
	Education						
с	2 years nursing school	41	58.04	11.02			
Job Satisfaction	Bachelor	45	61.48	8.47	.257	Welch = 1.415	Welch
	Master	15	58.13	14.98			
	Choosing the unit						
	No	77	57.94	10.62	.004*	t = 3.074	T-test
	Yes	24	64.87	9.30			
	Duration of work (months)						
	6-12	3	68.66	8.08			
	13-24	2	61.00	8.48	.324	F = 1,139	ANOVA
	25 or more	96	59.28	10.75			
	Liking Job						
	No	19	61.06	9.93	.004*	t = 2.971	T-test
	Yes	82	53.26	11.82			
	Sufficient Salary						
	No	98	59.23	5.50	.005*	t = 1,95	T-test
	Yes	3	71.33	10.67			

Correlations between job satisfaction and general self-efficacy:

The mean score for general self- efficacy was 29.7 (SD = 3.5). Correlations between job satisfaction and general self-efficacy scales are given in Table 3. There was no distinct correlation between job satisfaction and general self-efficacy ($\chi^2 = .078$, p = .501).

Table 3. Correlations between job satisfaction and general self-efficacy

Job Satisfaction	General self-efficacy					
	Low	High	Total	2 ²	sd	P value
Low	7	40	47			
High	7	47	54	.078	1	.501
Total	14	87	101			

IV. CONCLUSION

The purpose of the present study was to analyze job satisfaction and perceived self-efficacy of nurses working in the Sotiria General Hospital in Greece. The findings indicate that nurses have a relatively moderate

level of job satisfaction. Karanikola et al. (2007) found that professional satisfaction of Greek nurses are below the average in Greece. Iliopoulou & While's survey of Greek critical care nurses also reported that job satisfaction is below the national average (Iliopoulou & While 2010). A study by Gurková (2012) on Slovakian nurses noted that nurses were most dissatisfied with their professional opportunities. Additionally, similar results were also reported for nurses in China and Turkey (Zhang et al 2013, Celik & Hisar 2012). It seems that in the literature there is a relationship between job satisfaction and gender but these results may be inconsistent. The findings obtained in this study showed that gender and age have no significant correlations with job satisfaction. Kavanaugh (2006) also specified that gender is not significant with regard to the job satisfaction scale. Some researchers have found that women tend to be more satisfied with their jobs compared to men. (Bellou 2010, Clark 1997). On the other hand, other researchers have shown exactly the opposite, that is, that men are more satisfied (Malliarou 2009, Kalisch 2010). Evidence for a relationship between job satisfaction and age is also rather complex. Although some researchers have expressed that there is a direct proportional relationship between job satisfaction and age, other researchers do not confirm such results. In our study, there was no significant correlation between age and job satisfaction. These findings are not compliant with the findings obtained by Wilson et al. (2008) who pointed out that there are substantial differences in overall job satisfaction among different generations (Baby Boomer, Generation X or Generation Y based on birth year) of hospital nurses. Furthermore, Bellou (2010) found that two age groups, older and younger employees, are affected by opportunities for professional progress. At the same time, this value had an important impact on job satisfaction of older individuals, compared to their younger colleagues. It can also be said that there were no apparent relations of job satisfaction with educational level and nursing experience; these findings are consistent with a Chinese study (Wang et al. 2007). On the contrary, Nabirye et al. (2011) showed that there was a significant statistical similarity between the level of job satisfaction and the level of nursing education. Additionally, a significant difference in job satisfaction was shown in nurses with different years of experience. The outcomes of the current study show a significant difference in job satisfaction and nurses' liking their jobs. These results correspond to the findings of other researchers in Greece and other countries; Ning et al. (2009) also found that there is a positive relationship between job satisfaction and liking the nursing profession in question. Nurses who enjoy their nursing profession are more satisfied with their job. In the present study, we found a statistically significant positive correlation between choosing the service one works in and nurse job satisfaction. When nurses do not choose the service they work in, their job satisfaction level is low. Tambağ et al. (2015) found that nurses who are pleased with their service have high job satisfaction levels. Bowling and colleagues' meta-analysis (2010) presents relationships of global and complete job satisfaction with happiness. Positive affect is positively correlated with being satisfied with one's work, with job satisfaction and its promotion. A positive relationship between adequate salary and job satisfaction was also found. That is, a higher salary was connected with higher job satisfaction. The findings of the present study correspond to the findings reported in the international literature. A systematic review (Coomber 2007), showed that the level of wage was found to be linked to job satisfaction, although the results for these factors are not consistent. Aiken et al. (2013) found that wages are a source of dissatisfaction for a substantial share of nurses in all countries; the lowest dissatisfaction rates were in Switzerland with only 34%, whereas in Greece it was 83%. There were no statistically important correlations between job satisfaction and general self- efficacy. Duggleby et al. (2009) stated that there is no statistically important relationship between the General Self Efficacy Scale and Global Job Satisfaction scores in Healthcare providers. Moreover, Kang et al. (2014) found that the degree of self-efficacy that nurses perceived played as a mediator on the relationship between teamwork and job satisfaction on a significant level. In the current study, we tried to evaluate the relationship between job satisfaction variables and perceived self-efficacy levels. The findings showed that nurses have a relatively moderate level of job satisfaction. It seems that liking one's job, receiving an adequate salary, and choosing the services in which one works have a significant positive effect on job satisfaction in nurses working in Sotiria General Hospital in Greece. We also found that there is no difference between job satisfaction and perceived self-efficacy of Greek nurses. An analysis of the literature indicates that despite the fact that a majority of studies have been conducted to examine job satisfaction in many countries, this is still an ambiguous concept. The relationship between job satisfaction and self-efficacy has not been thoroughly analyzed within Greek nurses. Therefore, the outcomes of this study will shed light on future studies. Further studies in this field should extend the scope of this study to different countries, larger samples, and different nursing specialties; this may help increase job satisfaction among nurses.

Implications for Nursing Management

The findings indicate that Greek nurses have a relatively moderate level of job satisfaction. In addition, we found that a positive significant relationship between job satisfaction, liking one's job, salary, and choosing the department to work where one works. There was no significant difference between perceived self-efficacy and job satisfaction in our sample of Greek nurses. Nurse managements may promote the improving factors

which have affects on nurses' job satisfaction identified in this study in order to enhance nurses' job satisfaction. For that reason, it is required a more humanized administrative system to increase nurse job satisfaction from nurse administrators.

Source of funding:

For this study, no funding was received.

Ethical considerations:

Institutional ethical approval was obtained from the General Hospital Sotiria Ethics Committee (15.7.2013). All participants were informed about the aim of this study. Respondents were assured that participation was voluntary and that anonymity would be maintained. An opportunity to opt-out without giving any explanation was given to all participants if they felt uncomfortable with the question contents. At the end of the survey all participants thanked us. Also they informed us that they were happy to be a part of such an important survey on job satisfaction of nurses.

Conflict of interest:

There is no conflict of interest in this study

REFERENCES

- [1]. Adams A. & Bond S. (2000) Hospital nurses' job satisfaction, individual and organizational characteristics. *Journal of Advanced Nursing* 32 (3), 536-543. doi: 10.1046/j.1365-2648.2000.01513.x
- [2]. Aiken L.H., Clarke S.P., Sloane D.M., Sochalski J. & Silber J.H. (2002) Hospital nurse staffing and patient mortality, nurse burnout, and job dissatisfaction. *Journal of the American Medical Association* 288, 1987–1993. doi:10.1001/jama.288.16.1987
- [3]. Aiken L.H., Sloane D.M., Bruyneel L., Van den Heede K., Sermeus, W. & RN4CAST Consortium. (2013) Nurses' reports of working conditions and hospital quality of care in 12 countries in Europe. *International Journal of Nursing Studies* 50 (2), 143-153. doi: 10.1016/j.ijnurstu.2012.11.009
- [4]. Bandura, A. (1977) Self-efficacy: Toward a unifying theory of behavioral change. *Psychological Review*, 84 (2), 191-215. doi: 10.1016/0146-6402(78)90002-4 ·
- [5]. Bandura, A. (1993). Perceived self-efficacy in cognitive development and functioning. *Educational Psychologist* 28 (2), 117-148. doi: 10.1207/s15326985ep2802_3
- [6]. Bandura, A. (2006) Guide for constructing self-efficacy scales. In F. Pajares & T. Urdan (Eds.). Self-efficacy beliefs of adolescents, Vol. 5 (pp.307-337). Greenwich, CT: Information Age Publishing.
- [7]. Bellou, V. (2010) Organizational culture as a predictor of job satisfaction: The role of gender and age. *Career Development International* 15 (1), 4-19. doi: http://dx.doi.org/10.1108/13620431011020862
- [8]. Bernstein D.A. & Nash P.W. (2008) *Essentials of psychology* (4th ed.). Boston: Cengage Learning. Retrieved from http://books.google.com/books?id=4Do-bFrt9tUC.
- [9]. Best M.F. & Thurston N.E. (2004) Measuring nurse job satisfaction. Journal of Nursing Administration 34 (6), 283–290
- [10]. Bowling N.A., Eschleman K.J. & Wang Q. (2010) A meta-analytic examination of the relationship between job satisfaction and subjective well-being. *Journal of Occupational and Organizational Psychology* 83 (4), 915-934. doi: 10.1348/096317909X478557
- [11]. Çelik S. & Hisar F. (2012) The influence of the professionalism behaviour of nurses working in health institutions on job satisfaction. *International Journal of Nursing Practice* 18 (2), 180-187. doi: 10.1111/j.1440-172X.2012.02019.x.
- [12]. Clark, A. E. (1997) Job satisfaction and gender: why are women so happy at work? *Labour Economics* 4 (4), 341-372. doi:10.1016/S0927-5371(97)00010-9
- [13]. Coomber B. & Barriball K.L. (2007) Impact of job satisfaction components on intent to leave and turnover for hospital-based nurses: a review of the research literature. *International Journal of Nursing Studies* 44 (2), 297-314. doi:10.1016/j.ijnurstu.2006.02.004
- [14]. Coster E.A. (1992) The perceived quality of working life and job facet satisfaction. *Journal of Industrial Psychology* 18 (2), 6-9. doi: 10.4102/sajip.v18i2.540
- [15]. Duggleby W., Cooper D. & Penz K. (2009) Hope, self-efficacy, spiritual well-being and job satisfaction. Journal of Advanced Nursing 65 (11), 2376-2385. doi: 10.1111/j.1365-2648.2009.05094.x.
- [16]. Feather R. (2015) Tools assessing nurse manager behaviors and RN job satisfaction: a review of the literature. Journal of Nursing Management 23 (6), 726-735. doi: 10.1111/jonm.12202
- [17]. Gurková E., Čáp J., Žiaková K. & Ďurišková M. (2012) Job satisfaction and emotional subjective well-being among Slovak nurses. *International Nursing Review* 59 (1), 94-100. doi: 10.1111/j.1466-7657.2011.00922.x
- [18]. Herzberg, F. (1968) One more time: How do you motivate employees? Harvard Business Review pp. 52-62.
- [19]. Herzberg, F., (1966) Work and the Nature of Man. Cleveland, World Publishing Company,
- [20]. Iliopoulou K.K. & While A. E. (2010) Professional autonomy and job satisfaction: survey of critical care nurses in mainland Greece. Journal of Advanced Nursing 66 (11), 2520-2531. doi: 10.1111/j.1365-2648.2010.05424.x
- [21]. Judge T.A. & Bono J.E. (2001) Relationship of core self-evaluations traits-self-esteem, generalized selfefficacy, locus of control, and emotional stability-with job satisfaction and job performance: A meta-analysis. *Journal of Applied Psychology* 86, 80-92. doi: 10.1037//0021-9010.86.1.80
- [22]. Kalisch B.J., Lee H. & Rochman M. (2010) Nursing staff teamwork and job satisfaction. Journal of Nursing Management, 18 (8), 938-947. doi: 10.1111/j.1365-2834.2010.01153.x
- [23]. Kang S.Y., Kwon H.K. & Cho M.R. (2014) Effects of Nurses' Teamwork on Job Satisfaction at Hospital: Mediating Effect of Selfefficacy. *The Journal of the Korea Contents Association* 14 (12), 881-894. doi: 10.1111/j.1365-2834.2010.01153.x
- [24]. Karanikola M.N., Papathanassoglou E.D., Giannakopoulou M. & Koutroubas A. (2007) Pilot exploration of the association between self-esteem and professional satisfaction in Hellenic Hospital nurses. *Journal of Nursing Management* 15 (1), 78-90. doi: 10.1111/j.1365-2934.2006.00673.x

- [25]. Karsh B., Booske B.C. & Sainfort, F. (2005) Job and organizational determinants of nursing home employee commitment, job satisfaction and intent to turnover. *Ergonomics* 48 (10), 1260-1281. doi: 10.1080/00140130500197195
- [26]. Kavanaugh J., Duffy J.A. & Lilly J. (2006) The relationship between job satisfaction and demographic variables for healthcare professionals. *Management Research News* 29 (6), 304-325. doi: http://dx.doi.org/10.1108/01409170610683842
- [27]. Locke E.A. (1976) The nature and causes of job satisfaction. In M.D. Dunnette (Ed.), *Handbook of industrial and organizational psychology* (pp.1297-1349). Chicago: Rand McNally.
- [28]. Luszczynska A., Scholz U. & Schwarzer R. (2005) The general self-efficacy scale: multicultural validation studies. *The Journal of Psychology* 139 (5), 439-457. doi: 10.3200/JRLP.139.5.439-457
- [29]. Malliarou M., Moustaka E. & Konstantinidis T.C. (2009) Job satisfaction among nurses staff in military health care of Northern Greece. Balkan Military Medical Review 12 (2), 63-71.
- [30]. Maslow A.H. (1943) A theory of human motivation. Psychological Review 50, 370–396. doi: http://dx.doi.org/10.1037/h0054346
- [31]. Maslow, A. H. (1970). Personality and motivation 3rd ed. Addison Wesley Longman Inc.
- [32]. Mystakidou K., Parpa E., Tsilika E., Galanos A. & Vlahos L. (2008) General Perceived Self-Efficacy: validation analysis in Greek cancer patients. *Supportive Care in Cancer* 6 (12), 1317-22. doi: 10.1007/s00520-008-0443-z.
- [33]. Nabirye R.C., Brown K.C., Pryor E.R. & Maples E.H. (2011) Occupational stress, job satisfaction and job performance among hospital nurses in Kampala, Uganda. *Journal of Nursing Management*, 19 (6), 760-768. doi: 10.1111/j.1365-2834.2011.01240.x
- [34]. Ning S., Zhong H., Libo W. & Qiujie L. (2009) The impact of nurse empowerment on job satisfaction. Journal of Advanced Nursing, 65 (12), 2642-2648. doi: 10.1111/j.1365-2648.2009.05133.x.
- [35]. Saks A. M. (1995) Longitudinal field investigation of the moderating and mediating effects of self-efficacy on the relationship between training and newcomer adjustment. *Journal of Applied Psychology* 80, 211-225. doi: 10.1037/0021-9010.80.2.211
- [36]. Schaufeli W.B. & Bakker A.B. (2010) The conceptualization and measurement of work engagement: A review. In A.B. Bakker & M.P. Leiter (Eds.), *Work engagement: A handbook of essential theory and research*. New York: Psychology Press.
- [37]. Scholz U., Dona B.G., Sud S. & Schwarzer R. (2002) Is General Self-Efficacy a Universal Construct? European Journal of Psychological Assessment 18 (3), 242.251. doi: http://dx.doi.org/10.1027//1015-5759.18.3.242
- [38]. Schwarzer R. (1994) Optimism, vulnerability, and self-beliefs as health-related cognitions: A systematic overview. *Psychology and Health* 9 (3), 160-180. doi: 10.1080/08870449408407475
- [39]. Schwarzer, R., & Jerusalem, M. (2010) The general self-efficacy scale (GSE). Anxiety, Stress, and Coping, 12, 329-345.
- [40]. Spence Laschinger H.K., Zhu J. & Read E. (2016) New nurses' perceptions of professional practice behaviors, quality of care, job satisfaction and career retention. *Journal of Nursing Management* 24(5):656-65. doi: 10.1111/jonm.12370.
- [41]. Stajkovic A. D. & Luthans F. (1998) Self-efficacy and work-related performance: A meta-analysis. Psychological Bulletin 124, 240-261. doi: 10.1037/0033-2909.124.2.240
- [42]. Tambağ H., Can R., Kahraman Y. & Şahpolat M. (2015) Hemşirelerin Çalışma Ortamlarının İş Doyumu Üzerine Etkisi. Medical Journal of Bakırköy 11 (4), 143-149. doi: 10.5350/BTDMJB201511402
- [43]. Wang L., Tao H., Ellenbecker C.H. & Liu X. (2012) Job satisfaction, occupational commitment and intent to stay among Chinese nurses: a cross-sectional questionnaire survey. *Journal of Advanced Nursing* 68 (3), 539-549. doi: 10.1111/j.1365-2648.2011.05755.x
- [44]. Weiss D.J., Dawis R.V., England G.W. & Lofquist L.H. (1967) Manual for the Minnesota Satisfaction Questionnaire. Vol. 22, Minnesota Studies in Vocational Rehabilitation, Minneapolis: University of Minnesota, Industrial Relations Center.
- [45]. Wilson B., Squires M.A.E., Widger K., Cranley L. & Tourangeau A.N.N. (2008) Job satisfaction among a multigenerational nursing workforce. *Journal of nursing management*, 16 (6), 716-723. doi: 10.1111/j.1365-2834.2008.00874.x.
- [46]. Wood R. & Bandura A. (1989) Impact of conceptions of ability on self-regulatory mechanisms and complex decision making. *Journal of Personality and Social Psychology* 56, 407-415. doi: 10.1037//0022-3514.56.3.407
- [47]. Zhang A., Tao H., Ellenbecker C. H. & Liu X. (2013) Job satisfaction in mainland China: comparing critical care nurses and general ward nurses. *Journal of Advanced Nursing*, 69 (8), 1725-1736. doi: 10.1111/jan.12033