RELATIONSHIP BETWEEN JOB SATISFACTION AND INTENTION TO TURN OVER AMONG NURSES AT RWANDA MILITARY HOSPITAL, KIGALI

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RELATIONSHIP BETWEEN JOB SATISFACTION AND INTENTIONS TO TURNOVER AMONG NURSES AT RWANDA MILITARY HOSPITAL, KIGALI

by
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Supervisor: Dr Geldine CHIRONDA

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DEDICATION

I dedicate this work
To my lovely wife MUREKATETE Florence
To my parents
To my brothers and sisters
To the church mates
To my relatives and friends
May almighty God bless every one
ACKNOWLEDGEMENT
I would like to extend my gratitude to the leadership and management of the university of Rwanda, College of Medicine and Health Sciences, School of Nursing and Midwifery and Coordinator of the MScN Program and the staff members of the department for their support, encouragement that helped me accomplish this work.

My special appreciation goes to my supervisor Dr Geldine CHIRONDA for her great assistance and guidance, my wife MUREKATETE Florence for her support and encouragement during the preparation of this research Dissertation. Without their enthusiasm and dedication, this work couldn’t have been carried out.
ABSTRACT

Background
Intention to turnover of nurses remains a major challenge in the health care system and job satisfaction is the likely contributing factor to high intention among nurses. It was evidenced that the poor work environments lead to job dissatisfaction, intention to turnover, and burnout which are also identified as some of the predictors of nurse turnover. However, little is known about examining job satisfaction and intention to turnover among nurses in the context of Rwanda.

Aims of the study
The study aimed at describing and examining the relationship between nurses’ job satisfaction and intention to turn over at Rwanda Military Hospital.

Methods
The researcher used a quantitative approach, the study design used was descriptive correlational. The researcher used probability sampling technique to access the sample size of 154 nurses from a study population of 255 nurses. This was calculated by Rao soft online sample size calculation. Data were collected using a self-administered questionnaire which had 3 sections namely demographic, job satisfaction and intention to turnover. Data were analyzed using both descriptive and inferential statistics.

Results
Seventeen percent (17%) had low levels of intention to turnover, 80 (52%) had moderate levels and 48 (31%) had high levels of intention to turnover. Thirty four percent (34%) had low level of job satisfaction. Thirty two percent (32%) had moderate levels and 63 (37%) had high levels of job satisfaction. A very weak positive non-significant correlation \( r = .057, \ P = .48 \) between job satisfaction and intention to turn over among nurses was found. There is a significant association between all the demographic variables, job satisfaction and intention to turnover.

Conclusion
Both the levels of job satisfaction and intention to turnover were predominantly low. There was also a very weak positive non-significant correlation \( r \) between job satisfaction and intention to turn over among nurses. More research is needed to explore factors which may be related to nurse’s intention to turn over.
KEY TERMS

Intention to Leave: Turnover intention also refers to “employees’ willingness or attempt to quit voluntarily the current workplace” (Takase, 2010). It’s also defined as to “a multi-stage process involving employees’ voluntary departure from their current position” (Takase, 2010, p. 4).

In this study, the researcher uses the term turnover intention to mean the nurses’ mental conception or willingness to quit their current employment either by leaving the profession of nursing or by leaving Rwanda Military Hospital for employment in other hospitals.

Job satisfaction: Job satisfaction is referred to as the emotional feelings as well as the behavioral expression one has for a job (Yılmazel, 2013). The researcher uses the term Job satisfaction to mean how contented the Rwanda Military Hospital nurse is after meeting or not meeting the satisfaction factors such as recognition, Autonomy, work, responsibility, Respect, promotion, achievement, growth, praise, job security, Salary, supervision, work environment, and leadership style and Attitudes.

Intention: An intention is idea that you plan (or intend) to carry out (Yılmazel, 2013). The researcher uses the term intention to mean the desire or tentative to do leave the profession of nursing or shift from Rwanda military Hospital to another Hospital.

Nurses: is referred to as a person who has been trained to provide personal care of the sick, especially those who are confined to bed in a hospital setting (Dictionary of Public Health 2012). The researcher uses the term a nurse to refer to the members of the Rwanda Military Hospital nursing division who were used as study subjects in determining whether there is significant relationship between their job satisfaction and their intention to turnover or not.

The term registered nurse (RN): is used when referring to person who have undergone a full nursing training with an official state certificate of competence (Oxford Dictionary of English 2010). The researcher wants to mean those nurses with valid nursing practicing license and having worked with Rwanda Military Hospital for at least 2 years as the ones allowed to participate in the study.

Profession: is defined as an occupation in which a professional knowledge of some subjects, fields, or sciences are applied. A vocation or career, especially which involves
prolonged training and a has formal qualification” (Oxford English Dictionary 2012). Researcher uses the term profession referring to the nursing profession that continually loses members through turnover and joins other professions out of nursing.

**Nurse turnover:** This has also been defined as a decision-making process for Registered Nurses, which happens on an individual basis (Brewer et al. 2013). Term ‘nurse turnover’ in this study refers to the actual occurrence of a registered nurse voluntarily leaving their unit, organization or the nursing profession.

**Professional turnover:** Nurses who quit nursing to work in other non nursing professions or occupations (Parry 2008). Registered Nurses can have turnover intention regarding their unit, organization or profession. The researcher defines professional turnover as nurses who quit nursing and go to work for other non-nursing jobs.
LIST OF SYMBOLS AND ABBREVIATIONS

WHO: World Health Organization
ICN: International Council of Nurses
BLS: Bureau Labour of Statistics
US: United States
EU: European Union
RMH: Rwanda Military Hospital
UR: University of Rwanda
IRB: Internal Review Bard
CPD: Continuous Professional Development
HR: Human Resources
%: Percentage
=: Equal sign
AACN: American Association of Colleges of Nursing
RN: Registered Nurse
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CHAPTER 1. INTRODUCTION

Nurses make up the largest group of health care professionals in health systems with approximately 19.3 million nursing and midwifery personnel all over the world. However, there is imbalance between the supply and the demand of nursing workforce in many countries (WHO statistical report 2011). These fall in five domains which are policy making; economics and funding in health care system, planning of workforce, including regulations, Nurse working environment, retention of employees (Duffield .C 2011). International momentum is building, providing the opportunity to bring attention to these issues and to take action (Duffield .C 2011). It was also found that Job satisfaction, job performance and leader membership exchange has a direct negative influence on the turnover intention (Iqra. S,et al., 2014).

According to the national human resources for health policy (2014), the number of nurses is as low as 1 nurse for every 1,227 inhabitants whereas the midwife / population ratio 1 for every 18,790 inhabitants. Therefore it is very important to retain the few nurses we have through improved job satisfaction activities like work recognition, motivation, training, promotion and inviting them to the policy table as well as learning managerial positions in the hospital. On the other hand, confirming the number of turnovers, their costs and their consequences is not easy because it takes a lot to identify the important reasons for the turnovers (Heinen, M.M, 2013).
1.1 Background

According to KeLiu, Li-Ming and Shao Xian Cheng (2012), work environments is very important while dealing with the nursing staff shortages. The findings also reveal that provide motivating nurse managers and policy makers regarding improvement of work environments of hospital nurses in China. Further more proper understanding of factors influencing job satisfaction among nurses is essential for good managers to take necessary and appropriate actions (Han & Jekel, 2011). Again Nantsupawat A, Nukaviktikul W and Nantsupawat R (2016) revealed that nursing shortage is a very critical issue globally. It was evidenced that the poor work environments lead to job dissatisfaction, intention to turnover, and burnout which are also identified as some of the predictors of nurse turnover thus high turnover rates among nurses is contributing to these shortages (Nantsupawat A et al, 2016).

It was also identified that Nurses working in university hospitals with better work environments had significantly less job dissatisfaction, intention to leave, and burnout (Nantsupawat A et al, 2016). Although there were differences between the patterns of nurses’ intention to leave the organisation and intention to leave the profession, dissatisfaction and emotional exhaustion were common across both groups and were the most important predictors of nurses’ intention to leave (Havva, A. & Gluseren, K, 2015). More to that (Balogun, A. G., Adetula, G. A., & Olowodunoye, S. A., 2013) revealed that the intention to quit the organization is not only conceived as an important determinant of actual turnover but also provides necessary information for control and management of employees’ avoidance behaviors. For example, employees with high intention to turnover tend to become less productive and less efficient.

Delobelle et al. (2011) described that nurses are inspired for their turnover intention more by managers/supervisors than by coworkers. According to Meeusen VC, Van Dam K, Brown-Mahoney C, Van Zundert AA, Knape HT. 2011, the emotional and psychological fitness of nurses deteriorated because of excessive workload and lack of coworker and supervisor support. Consequently, turnover intention is increased.

Although there were a lot of differences between the nurses’ intention to leave the organization and intention to leave the profession patterns, job dissatisfaction and emotional exhaustion were common across both groups and was said to be the most essential predictors of nurses’ intention to turnover (Havva, A. & Gluseren, K, 2015).
The intention to leave the organization is not only conceived as an essential determinant of actual turnover but also provides adequate information for management of human resource’ avoidance behaviors. For instance, employees with high intention to turnover tend to become less productive and less efficient (Balogun, A. G., Adetula, G. A., & Olowodunoye, S. A., 2013). Delobelle et al. (2011) emphasized that nurses are more likely to have turnover intention by their managers and supervisors than by their coworkers. According to Meeusen V.C, Van Dam K, Brown-Mahoney C, Van Zundert AA, KnapeH.T(2011), There was lack of emotional fitness among nurses due to excessive workload and lack of coworker and supervisor support. Consequently, turnover intention is raised. Nurses’ job satisfaction indicates how contented a nurse is at work. The most common way of measuring job satisfaction is by applying rating scales where employees show their reactions/feelings towards their jobs.
1.2. Statement of the Problem

The government of Rwanda set strategies regarding the training of many nurses, calling those in the countryside to come and take up nursing jobs, repatriation of as many Rwandan health professionals as possible and then allocate them to public hospitals (Rwanda Health Sector Policy, 2005). However, from informal observations, intention to turnover of nurses remains a major challenge in the health care system of Rwanda. The 1994 Rwandan genocide left the health system in a difficult situation. In terms of skilled health employees, qualified nurses were very insufficient. Many nurses had been killed and others had fled the country. Public hospitals were mostly supported by foreign Non-Governmental Organizations and volunteers from abroad until the end of the post-war transition phase (Rwanda Health Sector Policy, 2005). Adding to this problem is that registered nurses (RNs) continue to change their current positions and the profession at a high rate. It has been found out that up to 13% of new nurses plan to leave their jobs within 1 year (Kovner et al. 2007). In addition to that, more than 587 000 new nursing positions will be created (a 23.5% increase). Consequently, it is hoped that nursing will be the nation’s top profession in terms of projected job creation and growth (BLS 2009). There are no studies that have been done in Rwanda which reveal the rate of intention to turnover among nurses. However, nurses’ intention to leave their profession has been shown to vary between different countries. According to a study (n = 33,659 nurses/Europe; 27,509 nurses/United States), the proportion of nurses intending to leave the profession ranged from 5% (in the Netherlands) to 17% (in Germany) (Heinen et al., 2013). Registered nurses intending to change their current profession: 56 % Netherlands, 58% in Finland (Hinno 2011). In the United States, according to the latest projections from the U.S. Bureau of Labour Statistics (BLS), Not less than 1 million replacement and new nurses will be needed by the year 2016 (BLS 2009).

However, little is known about examining job satisfaction and intention to turnover among nurses in the context of Rwanda. Therefore, this research has the purpose of describing the level of job satisfaction and intention to turnover prior to examining the relationship between these two variables among Rwanda Military Hospital nurses.
1.3 Aims of the study

The study aimed at describing and examine the relationship between nurses' job satisfaction and intention to turn over at Rwanda Military Hospital.

Specific objectives.

To assess the level of job satisfaction among nurses working at Rwanda Military Hospital
To determine the level of intention to turn over among nurses working at Rwanda Military Hospital
To examine the relationship between nurses' job satisfaction and intention to turn over at Rwanda Military Hospital.

1.4 Research Questions

What is the level of job satisfaction among nurses working at Rwanda Military Hospital?
What is the level of intention to turn over among nurses working at Rwanda Military Hospital?
What is the relationship between nurses' job satisfaction and intention to turn over at Rwanda Military Hospital?
1.5 Significance/Rationale of the study

**Nursing management:** This study will provide a lot of information regarding the level of job satisfaction and its relationship with the intention to turn over among nurses for policy makers to improve worker environments and work culture. To nurses and midwives council, it will help them understand the levels of both job satisfaction and turnover intention in the nursing profession and how to go about them.

**Education:** This study will help nursing educators to know the situation in nursing practice as far as job satisfaction and intention to turnover is concerned so that the curriculum taught helps students to effectively deal with/solve the problems in the practice that would otherwise lead to turnover intention.

**Practice:** This study will help those in practice to know their levels of satisfaction and intention to turn over thus develop and apply appropriate policies and strategies to reduce job satisfaction factors that negatively influence the nurses’ turnover intention.

**Research:** This study will provide the level of job satisfaction and its relationship with the intention to turnover among nurses which would be the basis for further studies in this field in future.
CHAPTER 2: LITERATURE REVIEW

2.1 Introduction

According to Pautasso.M, (2013), literature review refers to finding and evaluating relevant material to synthesizing information from various sources through paraphrasing, evaluating, and citing the source. This chapter is very important for both researcher and the reader as it highlights the close and relevant findings of the studies which have been done before the current study. It provides the reader with the logical flow of ideas from different authors who published before in your area of study.

2.2 Theoretical literature

Job satisfaction is referred to as the emotional feelings as well as the behavioral expression one has for a job (Yılmazel, 2013). It’s also defined as to “a multi-stage process involving employees’ voluntary departure from their current position” (Takase, 2010, p. 4). Employee retention is one of the most difficult operational areas for human resources managers to determine exactly why employees leave the organization, and what they should do to retain them. This is very important because organizations invest a lot of resources in training of new employees, tangible and intangible compensation, developing, and taking much time to build organizational citizenship (Kazi, &Zadeh, 2011).

However, no one can deny the significant relationship between job satisfaction and life satisfaction based on correlational research (Jones, 2006). Nurses’ turnover rate is among the highest rates for professional groups (3). Nurses’ voluntary turnover has adverse effects on healthcare organisations and patients. Nurses’ voluntary turnover imposes direct (e.g., advertising, recruiting and training new staff) and indirect costs (e.g., low productivity of new staff and decreased morale of other staff) to healthcare organisations (Mosadeghrad A. M, 2013).

2.3 Empirical literature

2.3.1 Job satisfaction

A study done by Fatmah F, Laschinger H.K.S (2016) suggests that the more managers manifest high standards of ethics the more new graduate nurses perceive their work environment to be positive and supportive to professional nursing practice, resulting in greater satisfaction.

Again (Matej Č, Dimovski V.M.M, Penger S, ŠkerlavajM, 2013) revealed that the employees perceptions of authentic leadership indeed determine the employees job satisfaction. It’s also found out that support for the interaction effect of leader and
employee perceptions of authentic leadership, integrating the leader- and employee-centric perspectives of authentic leadership are predictors of nurses job satisfaction. Analysis further supported the fact that the congruence between leader self-perceptions and follower perceptions of authentic leadership is important and that both needs to be present at high levels to produce the most beneficial outcomes in terms of employee’ job satisfaction.

Another dimension of job satisfaction that emerged from Purani and Sahadev’s research (2007) provided a factor of job satisfaction, which relate to the overall satisfaction with the policies regarding human resources and strategies of the organization. This is commonly mentioned in statements like “This company always act for the wellbeing of its personnel” or the “I am satisfied with the overall working conditions”. This is a reflection of the trust in the organization’s inclination in favour of its employees. For instance, even if an individual supervisor is fair and empathetic and the overall policies of the organization with regarding the organization employees are not up to the satisfaction of the nurse, the nurse may have tendency to turnover.

According to the study done in albania by Majlinda. Z et al (2016) Less satisfied groups from nursing profession were young people and high educated nurses. The low level of professional gratifying is expressed as well in the fact that over 70% of nurses in the study would like to practice another profession.

Again another study done in Iran by atefin et al (2013) emphasized that Efforts undertaken to improve working conditions, supportive nursing management, improved professional status, professional development and increased salaries are some of the ways for nurse managers to improve job satisfaction.

In South Africa, nurses in Private healthcare organizations were generally satisfied, while nurses public health care organizations were generally dissatisfied and with likelihood to turn over. (R. Pillay, 2009).

### 2.3.2 Intention to turnover

Nurses’ intention to leave their profession has been shown to vary between different countries. According to a study (n = 33,659 nurses/Europe; 27,509 nurses/United States), the proportion of nurses intending to leave the profession ranged from 5% (in the Netherlands) to 17% (in Germany) (Heinen et al., 2013). Registered nurses intending to change their current profession: 56 % Netherlands, 58% in Finland (Hinno 2011). In the United States, according to the latest projections from the U.S. Bureau of Labour Statistics (BLS), Not less than 1 million replacement and new nurses will be needed by the year 2016 (BLS 2009). Adding to this problem is that registered nurses (RNs) continue to
change their current positions and the profession at a high rate. It has been found out that up to 13% of new nurses plan to leave their jobs within 1 year (Kovner et al. 2007). Consequently, it is hoped that nursing will be the nation’s top profession in terms of projected job creation and growth (BLS 2009).

However, the American Association of Colleges of Nursing (2010) also evidenced that projections of nursing workforce suggest a shortage exceeding 500,000 Registered Nurses by the year 2025. In order to reduce the rate of turnovers, the administration/management of health care organization should plan properly considering the needs and act upon hiring new nursing staff in order to employ nurses with skills and qualifications that they need (Ezzat J.J, Fatemeh H., Marhemat F., Soodabeh J., Fatemeh. H 2014).

It was also identified that Nurses working in university hospitals with better work environments had significantly less job dissatisfaction, intention to leave, and burnout (Nantsupawat.A et al, 2016). Although there were differences between the patterns of nurses’ intention to leave the organisation and intention to leave the profession, dissatisfaction and emotional exhaustion were common across both groups and were the most important predictors of nurses’ intention to leave (HavvaArslanYurumezoglu&Gluserenkocaman 2015). More to that(Balogun, A. G., Adetula, G. A., &Olowodunoye, S. A.,2013) revealed that the intention to quit the organization is not only conceived as an important determinant of actual turnover but also provides necessary information for control and management of employees’. The intention to leave the organization is not only conceived as an essential determinant of actual turnover but also provides adequate information for management of human resource’ avoidance behaviors. For instance, employees with high intention to turnover tend to become less productive and less efficient (Balogun, A. G., Adetula, G. A., &Olowodunoye, S. A., 2013). Delobelle et al. (2011) emphasized that nurses are more likely to have turnover intention by their managers and supervisors than by their coworkers.

Other study findings shed lights on the essential work outcomes in healthcare organizations. Raising quality of work in nursing and organizational commitment are good strategies for declining turnover intentions (Al-Hussami,M,Darawad,M,AliSaleh,F, 2013). No studies about nurses job satisfaction and intention to turnover found in east Africa or particularly in Rwanda.

2.3.3 Relationship between Job satisfaction and intention to turnover

Job satisfaction has a negative relationship with intention to quit among nurses which is congruent with the contemporary studies. Thus, low satisfaction destroys the quality of
healthcare services and builds strongly the intention to leave the organizations (Abdul K.M, AbulKalamA,Kazi E, Wanke,P,2016). Job dissatisfaction is declared to be in strong relationship with nurse turnover (Hayes et al. 2006) and intention to leave (Brewer et al. 2009) thus highlighting the essence of understanding what improves nursing job satisfaction.

More to that, the study of Negussie (2012) further revealed that there is direct and positive relationship between rewards and nurses’ work motivation. On the other hand, nurses perceived that their organizations are not offering the right amount of rewards and this has created low-level work motivation for them. There is a lot of discussion around about nursing practice environment, its complexities, and it’s impact on patient outcomes. Worrying findings of the current study is that nurses’ perceptions of their professional practice environment are still discouraging(Papastavrou et al., 2011).

Abraham Maslow suggests that employees will always tend to want more and more from their employers. When they have satisfied their subsistent needs, they strive to fulfil security needs. When jobs are secure they will seek ways of satisfying social needs and if successful will again seek the means to the ultimate end of self-actualization as a hierarchy. Employees who are job satisfied will always tend to stay in their jobs (A.H.Maslow, 1970). However, the American Association of Colleges of Nursing (AACN), 2010 also evidenced that projections of nursing workforce suggest a shortage exceeding 500,000 Registered Nurses by the year 2025. Previous studies have implicated a relationship between job satisfaction and intention to turnover of nurses like (Meeusen VC, Van Dam K, Brown-Mahoney C, Van Zundert AA, Knape HT. 2011 who revealed that the emotional and psychological fitness of nurses deteriorated because of excessive workload and lack of coworker and supervisor support.
CONCEPTUAL FRAMEWORK

This framework identifies the motivators also known as job satisfaction factors that a nurse needs for him or her to stay in the organization. These factors include but not limited to recognition, Autonomy, work, responsibility, Respect, promotion, achievement, growth, praise, job security, Salary, supervision, work environment, and leadership style and attitudes. The nurse will stay if he or she meets these factors or turnover if they are unmet.

**Based on the literatures reviewed, the conceptual framework is as follows:**

**Figure 2.1 Conceptual framework**

The two-factor theory motivation - maintenance theory (adapted from Owens, 2004).

In the framework, nurses are defined as a person who has been trained to provide personal care of the sick, especially those who are confined to bed in a hospital setting (Dictionary of Public Health, 2012). In this research a nurse is an employee of the organization.
(Rwanda Military Hospital) who needs job satisfaction factors for him or her to stay working for organization or turnover if he or she doesn’t meet them. Not every employee or individual is motivated by the same factor. Efficient management should know and sense what makes their employees motivated and should place the right ways and tools to achieve their goals and objectives of motivation.

Job satisfaction is defined as the emotional feelings as well as the behavioral expression one has for his job. The feeling is influenced by some job related factors like pay, different types of benefits, recognition, working condition, relation with coworker and supervisors, and others. (Yılmazel, 2013). The researcher uses the term Job satisfaction to mean how contented the Rwanda Military Hospital nurse is after meeting or not meeting the satisfaction factors like recognition, Autonomy, work, responsibility, Respect, promotion, achievement, growth, praise, job security, Salary, supervision, work environment, and leadership style and Attitudes. Turnover intention can also be defined as employees willingness or attempts to leave the current workplace on voluntary basis (Takase, 2010). The researcher uses the term turnover intention to mean the nurses’ mental conception or willingness to quit their current employment either by leaving the profession of nursing or by leaving Rwanda Military Hospital for employment in other hospitals.
CHAPTER 3 METHODOLOGY

3.1 Definition
Methodology refers to a systematic way that gives details of the procedures by which researchers go about their work by describing, explaining and predicting phenomena (Rajasekar. S, Philominathan. P & Chinnathambi V, 2013). This chapter covers and describes the design, population, and sampling methods, data collection, research instrument, ethical consideration and data analysis.

3.2 Research approach
The research approach for this study is quantitative approach. Objectivity is important in quantitative approach. Quantitative approaches to data collection and analysis are precise and systematic (Burns and Grove 2009). A quantitative approach may be chosen because the researcher wishes to collect information in a numerical form as the results were based on rigour, objectivity and control (Polit and Hungler 2013; Burns and Grove 2011). In this study, the researcher collected and converted data on job satisfaction and intention to turnover into numerical form so that statistical calculations can be made and conclusions drawn.

3.3 Study design
The study used a descriptive correlational design. Descriptive correlational research is a type of non-experimental research which shows the interrelationship between two or more measured variables without much control of extraneous variables and without manipulating independent variable (Polit and Beck, 2010). The study determined and described level of job satisfaction among nurses working at Rwanda Military Hospital. In addition, the level of intention to turn over among nurses working at Rwanda Military Hospital was be established. After that, the relationship between nurses’ job satisfaction and intention to turn over was assessed.

3.4 Research Setting
The study was conducted in Rwanda Military Hospital located in Nyarugunga Sector, Kicukiro District, Kigali City. Rwanda Military Hospital is one of the five referral hospitals in Rwanda that provides specialized services not only to the army and their families but also the general population (Annual Health Statistical Booklet 2013).

3.5 Population
A population is the whole group from which the data is to be collected ascertained (Amitav, B. and Suprakash, C., 2010). The entire population composed of all qualified nurses having valid Nursing practicing license who are employed in Rwandan Hospitals. Total
number is 255 nurses. **Target Population:** The group of people to whom we want to apply our research results (Vonk.J, 2016). In this study, target population included all the nurses working at Rwanda Military Hospital. **Accessible Population:** refers to the portion of the population to which the researcher has reasonable access; may be a subset of the target population (Vonk.J, 2016). In this study, this was only nurses who were available at work during the time of study.

**3.5.1 Inclusion criterion.**
All nurses working at Rwanda Military Hospital having nursing practicing license.
Nurses having worked with Rwanda Military Hospital for at least 2 years

**3.5.2 Exclusion criteria.**
All nurses without practicing licenses.
Nurses working in non-nursing positions.
Nurses having less than 2 years working experience.

**3.6 Sampling strategy**
The researcher used probability sampling technique. Probability sampling refers to sampling processes which provides guarantee that each of the potential research participants, events or units under investigation have an equal chance of being selected (Endacott, R & Botti, M, 2007). The type of probability sampling was Stratified random sampling where by Participants are grouped according to strata that are essential (Endacott, R & Botti, M, 2007).

Stratified random sampling was applied and all the eight departments/wards were considered as sampling strata namely Intensive Care Unit, Operating Theatre, Paediatric ward, Surgical Ward, Accident and Emergency department, Internal Medicine, outpatient Department and Neonatology.

**Disproportionate stratified random sampling**
This refers to sampling methods where by the strata are not sampled according to the population sizes instead higher proportions are selected from some groups and not others (Mohsin A. 2016) An appropriate number of elements (19) from each subset (department/Ward) was selected using disproportionate stratified random sampling on the basis of their proportion in the population, the goal being to achieve greater degree of representativeness.
Sample Size:
The researcher used the sample size of 154 nurses representing 255 nurses that work at Rwanda military hospital as calculated by Raosoft online sample size calculation (see the table below)

<table>
<thead>
<tr>
<th>The confidence level needed?</th>
<th>95%</th>
<th>confidence level refers to the amount of uncertainty you can accept.</th>
</tr>
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<tbody>
<tr>
<td>What is the population size?</td>
<td>255</td>
<td>How many people are there for you to choose random sample from?</td>
</tr>
<tr>
<td>Your recommended sample size is</td>
<td>154</td>
<td>This is the minimum recommended size of your survey.</td>
</tr>
</tbody>
</table>

(Raosoft online sample size calculation)

3.8 Data Collection Process
Data collection was done immediately after getting ethical clearance. After obtaining permission from Rwanda Military Hospital, the researcher held a brief meeting with the identified nurses in the mentioned institution to make the first contact and to introduce the study, to inform them of their rights, issues of anonymity and confidentiality in relation to the study. The researcher met those willing to participate in the study after working hours to sign the declaration form and to provide them with questionnaires. The participants were requested to return the questionnaire within three days.

3.9 Data Collection Instrument
A self-administered questionnaire was the tool for data collection and it was prepared in English. The questionnaire had three parts namely demographic data, Job satisfaction among nurses and Intention to turnover among nurses. The variables to be assessed using the data collection instrument include issues/variables of praise for good service rendered, whether they have criteria for promotion in their institution, the relationship they have with their Immediate supervisor, if they have the ability to make decisions, whether they have and enjoy teamwork, Person who oriented, Have orientation period, post occupied, shortage of essential drugs, relationship with physicians and staffing in departments and thoughts about RMH Work
3.10 Validity

Validity refers to the degree to which an instrument measures what it is supposed to measure (Brink, 2006). In this study, the instrument measured the relationship between nurses’ job satisfaction and intention to turn over. All aspects of the study were covered in terms of having a questionnaire addressed the mentioned objectives. Three types of validity were enhanced. These are face, content and construct.

3.10.1 Face validity

Face validity basically verifies that the instrument gave the appearance of measuring the content or concept desired for the study (Polit & Beck, 2012; LoBiondo-Wood & Haber 2010). This was assessed by consulting colleagues in the leadership and management area to test-run the instrument to see if the questions appeared to be relevant, clear and unambiguous. Face validity was achieved by structuring the research tool into three separate sections namely: job satisfaction, intention to turnover and demographic characteristics interview guide.

3.10.2 Content validity

According to Parahoo (2006), content validity test checks that there are enough relevant questions covering all aspects being studied and that irrelevant questions are not asked. Evidence for content-based validity of the instrument was obtained from the literature, from representatives of the relevant population and from content experts. The expert was used to evaluate the content validity of the modified instrument. Each item in each research instrument was analyzed with assistance from the research advisers in the School of medicine and health sciences. Experts in leadership and management also assisted in examining the validity of the items included in the research instrument. Inclusion of items in the research instrument obtained from literature also ensured that the research tool have content validity.

3.10.3 Construct validity

Construct validity is the degree to which an instrument measures the construct under investigation (Polit and Beck, 2012). Construct validity was achieved by checking items in the data collection tools against study objectives and concepts in the framework to ascertain whether they had measured all elements to be investigated.

<table>
<thead>
<tr>
<th>Objectives of the study</th>
<th>Components of the conceptual framework</th>
<th>Items in interview schedule</th>
</tr>
</thead>
</table>

27
Table 3.1 Construct validity for variables under study

3.11 Reliability

Reliability refers to consistency, accuracy and dependability with which the instrument measures data (Polit & Beck, 2012). Reliability refers to the degree to which the instrument can be depended upon to yield consistent results if used repeatedly on the same person or used by two researchers (Brink, 2006, p.163). Before the main data-collection session, the instrument was pretested on ten participants who meet the sampling criteria. Consistency of responses and lack of ambiguities during the pre-test gave the investigator confidence that the instrument was reliable. Use of the structured questionnaire and following the items using the same wording and sequencing enhanced the reliability of the data obtained through the instruments. The instruments was administered in exactly the same manner for each study participant.

The instrument consisted of multiple Likert questions that formed a scale, therefore reliability analysis was performed. The coefficient alpha, also called Cronbach’s alpha, is the psychometric test applied to measure the internal consistency of the instrument (Grove et al., 2013). The normal range of coefficient alpha values is between 0.00 and +1.00. Higher values closer to +1 reflected higher reliability and higher degree of internal consistency. The researcher did a test re-test to assess the consistency of scores from one time to another.
3.12 Data Analysis
Firstly, descriptive statistics was used to analyse data. The demographic characteristics, level of job satisfaction and intention to turn over were described using descriptive statistics. Further, inferential statistics of Pearson correlation was used to examine the strength and direction of the linear relationship between job satisfaction and intention to turnover among nurses at Rwandan Military hospital. The Pearson correlation was not significant; therefore, regression analysis to reveal the contribution of job satisfaction to intention to turnover among nurses was not done. Chi-square test was used to find the association between the biographic data, job satisfaction and intention to turnover among nurses at Rwandan Military hospital.

3.13 Ethical considerations
3.13.1 Ethical board: The researcher obtained the approval from the Internal Review Board. From Rwanda Military Hospital, The commandant of Rwanda Military Hospital was requested for permission to access their staff for a brief meeting and later to administer the questionnaire and it was granted.
3.13.2 Study participants rights: The following rights of the participant were observed: Right to self determination, Right to autonomy, Right to Privacy, Rights to anonymity and Confidentiality, Rights to fair treatment and Right to protection from discomfort and harm.
3.13.3 Participants’ authorization and informed consent: An information document and a declaration was given to the identified participants.

3.14 Data Management
The issues of data security, data integrity, data recovery, and protecting the database against unauthorized users was ensured using coded computer password. Data on hard copies were kept in a safe custody for a period of 1 year to facilitate further researches in the related field of study, after this period these hard copies will be destroyed. Whereas data in form of soft copy will be kept for 2 years post presentation of the final dissertation.

3.15 Data dissemination
The researcher will give a copy of the research dissertation to the library of UR, College of medicine and health sciences. The researcher will give a copy of the research dissertation to the management of Rwanda Military Hospital. The researcher will give a copy of the research dissertation to the Nursing services division manager and heads of departments.
CHAPTER 4 PRESENTATION OF THE RESULTS

4.1 Introduction

The research design for this study was descriptive correlational design, which involved collection and analysis of quantitative data. The purpose of the study was to examine the relationship between nurses’ job satisfaction and intention to turn over at Rwanda Military Hospital. The first objective was assess the level of job satisfaction among nurses working at Rwanda Military Hospital, the second objective was to establish the level of intention to turn over among nurses working at Rwanda Military Hospital and the third objective was to examine the relationship between nurses’ job satisfaction and intention to turn over at Rwanda Military Hospital.

A sample size of 154 nurse participants representing 255 nurses that work at Rwanda military hospital was selected using Raosoft online sample size calculation to address the three objectives of the study. An appropriate number of elements (19) from each subset (department/Ward) was selected using disproportionate stratified random sampling on the basis of their proportion in the population, the goal being to achieve greater degree of representativeness. The study centre for this study was Rwanda Military Hospital located in Nyarugunga Sector, Kicukiro District, Kigali City. Rwanda Military Hospital is one of the five referral hospitals in Rwanda. The results for this study was analyzed using descriptive statistics for demographic data, data for job satisfaction, data for intention to turn over whereas inferential statistics were used to examine the relationship between job satisfaction and intention to turnover among nurses at Rwanda Military Hospital.

4.2 Demographic data of participants

As seen in the figure below about the age distribution of nurses at Rwanda military hospital, the age of participants was from a minimum of 20 years to a maximum of 55 years with an age range of 35. The largest age category was 26 years to 35 years which scored 48.7%, and the smallest age category was 46 years to 55 years which scored 5.19%. Other age categories scored as follows 36 years to 46 years (31.17%), 20 years to 25 years (14.94%).
Figure 4.1 Age distribution among nurses participants (N=154)

Figure 4.2 displays results for gender where by 108 study participants equivalent to 70.13% were females whereas 46 study participants equivalent to 29.87% were males.
Figure 4.2 Gender distribution among nurses participants (N=154)

Figure 4.3 below indicated that the majority of participants in this study were married people totaling to 95 participants and a percentage of 62.91%, the remaining 56 participants were single with a percentage of 37.09%
Figure 4.3 Marital status distribution among nurses participants (N=154)

The 4.4 below displays the nursing categories of the research participants where by the majority of them were registered nurses represented by 88.31% and the remaining 11.69% being associate nurses.
Figure 4.4 Distribution of nursing categories among nurses participants (N=154)

Figure 4.5 below displays the level of education of nurse participants and majority of them are advanced diploma (A1) nurses represented by 62.34%, 23.38% being bachelor’s degree nurses whereas the remaining 14.29% being...
Figure 4.5 Distribution of respondents according to their level of education (N=154)

Figure 4.6 below shows the distribution of respondents according to their work experience at Rwanda military Hospital as follows 37.66% of participants had worked with Rwanda Military Hospital for more than 5 years, 25.97% had worked with Rwanda Military Hospital for less than 1 year, 18.83% had worked with Rwanda Military Hospital for less than 1 year whereas the remaining 17.53% had worked with Rwanda Military Hospital for greater than 1 year and less than 3 years.
Figure 4.6 distributions of research participants according to their work experience at Rwanda military Hospital

Table 4.1 Job satisfaction among nurses

The table below displays the results from the study regarding the satisfaction of nurses at Rwanda military Hospital on issues/variables of praise for good service rendered, whether they have criteria for promotion in their institution, The relationship they have with their Immediate supervisor, if they have the ability to make decisions, whether they have and enjoy teamwork, Person who oriented, Have orientation period. The majority of study had had praise for the good service rendered to the level of 38.3% but also those who never had any praise for the services are nearly equal to those who had it where they are represented by 37.7% where as the rest were not sure on whether or not they were praised. Many of the respondents in this study (41.6%) said that Rwanda Military Hospital doesn’t have criteria for promotion, followed by others who were not sure whether the hospital has those criteria or not and these were 34.4% of all respondents. The rest(24%) believed that the hospital has those criteria. Also 59.7% of all respondents had good relationship with their immediate supervisors followed by 33.1% who had very good relationship with their immediate supervisors whereas the rest (7.1%) had a bad relationship with them.
As also displayed in the table below, 51.3% respondents could sometimes have the ability to make decisions whereas the remaining minority (48.7%) could always make decisions for their own. 94.2% of all respondents declared to have had the spirit of teamwork in their day nursing activities leaving out 5.8% who did not have. 70% of all respondents did not have an orientation period when they started working with Rwanda Military Hospital; the remaining 30% had it.

Table 4.1 continues to reveal the results for job satisfaction. Other variables assessed as regards job satisfaction were Post occupied, shortage of essential drugs, relationship with physicians, staffing in departments and thoughts about RMH Work. Majority of the study participants were bedside nurses with a percentage of 90. The RMH work was thought to be challenging to the percentage of 58.4% while others thought it was exciting and boring at the levels of 33.1% and 8.4% respectively.

Insufficient staffing in departments at RMH was revealed to be at 68.2% while 27.9% and 3.9% were for Sufficient and very insufficient respectively. Collaborative relationship with the physicians was confirmed by 71.4% of all the study participants where as 26% and 2.6% were confirmed to have collaboration with difficulty and not having any collaboration at all respectively. Minor shortages of essential drugs were highlighted by 85.7% of all the study participants whereas the remaining 7.1% and 7.1% stands for no shortages at all and serious shortages.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>% Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Praise for good service rendered</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Not sure</td>
<td>37</td>
<td>24%</td>
</tr>
<tr>
<td>No</td>
<td>59</td>
<td>38.3%</td>
</tr>
<tr>
<td>Yes</td>
<td>58</td>
<td>37.7%</td>
</tr>
<tr>
<td>Criteria for promotion in institution</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Not sure</td>
<td>53</td>
<td>34.4%</td>
</tr>
<tr>
<td>No</td>
<td>64</td>
<td>41.6%</td>
</tr>
<tr>
<td>Yes</td>
<td>37</td>
<td>24%</td>
</tr>
<tr>
<td>Relationship with Immediate supervisor</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bad</td>
<td>11</td>
<td>7.1%</td>
</tr>
<tr>
<td>Good</td>
<td>92</td>
<td>59.7%</td>
</tr>
<tr>
<td>Very Good</td>
<td>51</td>
<td>33.1%</td>
</tr>
<tr>
<td>Ability to make decisions</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

37
| Sometimes | 79 | 51.3% |
| Always | 75 | 48.7% |
| Have teamwork | | |
| No | 9 | 5.8% |
| Yes | 145 | 94.2% |
| Enjoy the team | | |
| No Response | 9 | 5.8% |
| Not sure | 11 | 7.1% |
| No | 8 | 5.2% |
| Yes | 126 | 81.8% |
| Have orientation period | | |
| Yes | 46 | 30% |
| No | 108 | 70% |
| Person who oriented | | |
| No response | 42 | 27.3% |
| Other | 8 | 5.2% |
| Friend in hospital | 16 | 10.4% |
| Ward manager | 88 | 57.1% |

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>% Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Post occupied</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Bedside nurse</strong></td>
<td>140</td>
<td>90.9%</td>
</tr>
<tr>
<td>Middle level manager</td>
<td>10</td>
<td>6.5%</td>
</tr>
<tr>
<td>Top level manager</td>
<td>4</td>
<td>2.6%</td>
</tr>
<tr>
<td>Thoughts about RMH Work</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Boring</td>
<td>13</td>
<td>8.4%</td>
</tr>
<tr>
<td>Challenging</td>
<td>90</td>
<td>58.4%</td>
</tr>
<tr>
<td>Exciting</td>
<td>51</td>
<td>33.1%</td>
</tr>
<tr>
<td>Staffing in departments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Very insufficient</td>
<td>6</td>
<td>3.9%</td>
</tr>
<tr>
<td>Insufficient</td>
<td>43</td>
<td>68.2%</td>
</tr>
<tr>
<td>Sufficient</td>
<td>15</td>
<td>27.9%</td>
</tr>
<tr>
<td>Relationship with physicians</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Not collaborative</td>
<td>4</td>
<td>2.6%</td>
</tr>
</tbody>
</table>
Collaborative with difficulty
Collaborative

<table>
<thead>
<tr>
<th>Shortage of Essential drugs</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Serious shortages</td>
<td>11</td>
<td>7.1%</td>
</tr>
<tr>
<td>Minor shortages</td>
<td>132</td>
<td>85.7%</td>
</tr>
<tr>
<td>No shortages at all</td>
<td>11</td>
<td>7.1%</td>
</tr>
</tbody>
</table>

Table 4.1 Job satisfaction among nurses (N=154)

Table 4.2 Total job satisfaction scores among nurses

The table below shows the mean, median, modal minimum and maximum scores for job satisfaction. The mean, median, modal, maximum and minimum scores for job satisfaction were 27, 28, 28, 16 and 33 respectively. The minimum score for job satisfaction was 16 and the maximum score was 30 out of total possible score of Job satisfaction scores of 37. According to the scale, high level of job satisfaction was in the range of 80 to 100 percent, moderate level of job satisfaction was in the range of 70 to 79 percent and low level of job satisfaction was any score below 70 percent. In this regard, 52 (34%) had low level of job satisfaction. Thirty two percent (32%) had moderate levels and 63 (37%) had high levels of job satisfaction.

<table>
<thead>
<tr>
<th>Job satisfaction scores out of 37</th>
<th>% job satisfaction</th>
<th>Level of job satisfaction</th>
<th>Frequency</th>
<th>%Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>16</td>
<td>43%</td>
<td>Low</td>
<td>3</td>
<td>1.9%</td>
</tr>
<tr>
<td>19</td>
<td>51%</td>
<td>Low</td>
<td>3</td>
<td>1.9%</td>
</tr>
<tr>
<td>20</td>
<td>54%</td>
<td>Low</td>
<td>4</td>
<td>2.6%</td>
</tr>
<tr>
<td>21</td>
<td>57%</td>
<td>Low</td>
<td>7</td>
<td>4.5%</td>
</tr>
<tr>
<td>22</td>
<td>59%</td>
<td>Low</td>
<td>8</td>
<td>5.2%</td>
</tr>
<tr>
<td>23</td>
<td>62%</td>
<td>Low</td>
<td>7</td>
<td>4.5%</td>
</tr>
<tr>
<td>24</td>
<td>65%</td>
<td>Low</td>
<td>16</td>
<td>10.5%</td>
</tr>
<tr>
<td>25</td>
<td>68%</td>
<td>Low</td>
<td>4</td>
<td>2.6%</td>
</tr>
<tr>
<td>26</td>
<td>70%</td>
<td>Moderate</td>
<td>4</td>
<td>2.6%</td>
</tr>
<tr>
<td>27</td>
<td>73%</td>
<td>Moderate</td>
<td>11</td>
<td>7.1%</td>
</tr>
<tr>
<td>28</td>
<td>76%</td>
<td>Moderate</td>
<td>22</td>
<td>14.3%</td>
</tr>
<tr>
<td>29</td>
<td>78%</td>
<td>Moderate</td>
<td>12</td>
<td>7.8%</td>
</tr>
</tbody>
</table>
### Table 4.2 Job satisfaction scores (N=154)

<table>
<thead>
<tr>
<th>30</th>
<th>81%</th>
<th>High</th>
<th>19</th>
<th>12.3%</th>
</tr>
</thead>
<tbody>
<tr>
<td>31</td>
<td>84%</td>
<td>High</td>
<td>15</td>
<td>9.7%</td>
</tr>
<tr>
<td>32</td>
<td>86%</td>
<td>High</td>
<td>11</td>
<td>7.1%</td>
</tr>
<tr>
<td>33</td>
<td>89%</td>
<td>High</td>
<td>8</td>
<td>5.2%</td>
</tr>
</tbody>
</table>

### Table 4.3 Turnover among nurses

The table below manifests the nurses intention to turnover where by 84.4% of total participants had attended CPDs where as only 15.6% had not attended them. 98.1% of all study participants confirmed to have had policy and procedures that guide action and the remaining small percentage of 1.9 confirmed not having them. Low salaries in relation to other organizations was revealed by 51.9% of all the study participants. 28.6% of all respondents observed no difference in salary rating compared to other organizations and only 4.5% confirmed a high salary rating in relation to other organizations.

Many of the respondents (82.5%) were satisfied with time for salary payments and only 1.9% of all 154 study participants were not satisfied with the time salaries are paid. Study participants who liked/proud of being professional nurse were 88.3% and only 9.1% did not like to be so. More than a half (54.5%) of the study participants had had a thought of turning over and on the other side 42.9% of them had never had that thought.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>% Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Attendance of CPDs</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>24</td>
<td>15.6%</td>
</tr>
<tr>
<td>Yes</td>
<td>130</td>
<td>84.4%</td>
</tr>
<tr>
<td><strong>Policy that guide action</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>3</td>
<td>1.9%</td>
</tr>
<tr>
<td>Yes</td>
<td>151</td>
<td>98.1%</td>
</tr>
<tr>
<td><strong>Policy and procedures that guide action</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>3</td>
<td>1.9%</td>
</tr>
<tr>
<td>Yes</td>
<td>151</td>
<td>98.1%</td>
</tr>
<tr>
<td><strong>Salary rating in relation to other organizations</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Very low</td>
<td>23</td>
<td>14.9%</td>
</tr>
<tr>
<td>Intention to turnover scores</td>
<td>% intention to turn over</td>
<td>Level of intention to turnover</td>
</tr>
<tr>
<td>-----------------------------</td>
<td>--------------------------</td>
<td>--------------------------------</td>
</tr>
<tr>
<td>8</td>
<td>62%</td>
<td>Low</td>
</tr>
<tr>
<td>9</td>
<td>69%</td>
<td>Low</td>
</tr>
<tr>
<td>10</td>
<td>77%</td>
<td>Low</td>
</tr>
<tr>
<td>11</td>
<td>85%</td>
<td>Moderate</td>
</tr>
<tr>
<td>12</td>
<td>92%</td>
<td>High</td>
</tr>
<tr>
<td>13</td>
<td>100%</td>
<td>High</td>
</tr>
</tbody>
</table>

Table 4.4 Intention to turn over scores and their percentages

As seen in the table, the minimum score for intention to turnover was 8 and the maximum score was 13 out of total possible score of 13. The mean, medium and mode was 27, 28 and 28 respectively. According to the scale, high level of intention to turnover was in the range of 90 to 100 percent, moderate level was in the range of 80 to 89 percent and low level of intention to turnover was any score below 80 percent. Basing on the scale, 26(17%) had low levels of intention to turnover, 80(52%) had moderate levels and 48(31%) had high levels of intention to turnover.
Table 4.5 Relationship/Correlations between job satisfaction and intention to turnover

The table below indicates how job satisfaction correlates with turnover. This analysis was done using inferential statistics of Pearson correlational (r) to find out whether there is correlation between job satisfaction and intention to turnover. It was found out that there was a very weak positive non significant correlation r (r=.057, p=.48) between job satisfaction and intention to turnover among nurses.

This means that as job satisfaction increases the intention to turnover increases among nurses therefore job satisfaction has no impact on turnover intention among nurse. There may be other factors which are correlated to turnover intention and not job satisfaction.

<table>
<thead>
<tr>
<th>Demographic characteristics</th>
<th>Job satisfaction</th>
<th>Intention to turnover</th>
</tr>
</thead>
<tbody>
<tr>
<td>Job satisfaction Pearson Correlation</td>
<td>1</td>
<td>.057</td>
</tr>
<tr>
<td>Sig. (2-tailed)</td>
<td></td>
<td>.484</td>
</tr>
<tr>
<td>Intention to turnover Pearson Correlation</td>
<td>.057</td>
<td>1</td>
</tr>
<tr>
<td>Sig. (2-tailed)</td>
<td>.484</td>
<td></td>
</tr>
</tbody>
</table>

Table 4.5  Relationship/Correlations between job satisfaction and intention to turnover(N=154)

Table 4.6 Associations between demographic variable and job satisfaction

The below table 4.9 indicates the association between demographic variables and job satisfaction among nurses at Rwanda Military Hospital. This analysis was done using inferential statistics of chi-square to find out whether there is an association between the two variables. The results showed strong significant association between the two variables as shown by a p-value of .000 in all the demographic variables.

<table>
<thead>
<tr>
<th>Demographic characteristics</th>
<th>Chi square Value</th>
<th>Degree of freedom</th>
<th>p- value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>188.664&lt;sup&gt;a&lt;/sup&gt;</td>
<td>45</td>
<td>.000</td>
</tr>
<tr>
<td>Gender</td>
<td>79.639&lt;sup&gt;a&lt;/sup&gt;</td>
<td>15</td>
<td>.000</td>
</tr>
<tr>
<td>Marital status</td>
<td>39.072&lt;sup&gt;a&lt;/sup&gt;</td>
<td>15</td>
<td>.001</td>
</tr>
<tr>
<td>Nursing category</td>
<td>86.898&lt;sup&gt;a&lt;/sup&gt;</td>
<td>15</td>
<td>.000</td>
</tr>
<tr>
<td>Level of education</td>
<td>141.425&lt;sup&gt;a&lt;/sup&gt;</td>
<td>30</td>
<td>.000</td>
</tr>
<tr>
<td>Work experience</td>
<td>202.290&lt;sup&gt;a&lt;/sup&gt;</td>
<td>45</td>
<td>.000</td>
</tr>
</tbody>
</table>

Table 4.6 Associations between demographic variable and job satisfaction (N=154)
Table 4.7 Associations between demographic variable and intention to turn over

The below table 4.7 indicates the association between demographic variables and intention to turnover among nurses at Rwanda Military Hospital. This analysis was done using inferential statistics of chi-square to find out whether there is an association between the two variables. The results showed strong significant association between the two variables as shown by a p-value of .000

<table>
<thead>
<tr>
<th>Demographic characteristics</th>
<th>Chisquare Value</th>
<th>Degree of freedom</th>
<th>p- value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>41.662*</td>
<td>15</td>
<td>.000</td>
</tr>
<tr>
<td>Gender</td>
<td>36.807*</td>
<td>5</td>
<td>.000</td>
</tr>
<tr>
<td>Marital status</td>
<td>20.279*</td>
<td>5</td>
<td>.001</td>
</tr>
<tr>
<td>Nursing category</td>
<td>35.146*</td>
<td>5</td>
<td>.000</td>
</tr>
<tr>
<td>Level of education</td>
<td>41.552*</td>
<td>10</td>
<td>.000</td>
</tr>
<tr>
<td>Work experience</td>
<td>41.690*</td>
<td>15</td>
<td>.000</td>
</tr>
</tbody>
</table>

Table 4.7 Associations between demographic variable and intention to turn over (N=154)

Conclusion of the quantitative findings

The sample of 154 nurses from Rwanda Military Hospital was used to assess the relationship between job satisfaction and intention to turn over. Thirty four percent (34%) had low level of job satisfaction, Thirty two percent (32%) had moderate levels and Thirty seven percent (37%) had high levels of job satisfaction. Regarding the intention to turn over, Seventeen percent (17%) had low levels of intention to turnover, Fifty two percent (52%) had moderate levels and then thirty one percent (31%) had high levels of intention to turnover. Further more, a very weak positive non significant correlation $r (r=.057, P=.48)$ between job satisfaction and intention to turn over among nurses was found.
CHAPTER 5 DISCUSSIONS

5.1 Introduction
This study filled a significant gap in the existing knowledge of nurses' job satisfaction and their intention to quit in referral hospitals. This chapter discusses the results of the study presented and analyzed in chapter four above, discusses the limitations this study faced and draws recommendations and conclusion. In this chapter the researcher states the major findings of the study (Objectives), explains the meaning of the findings, relates the study findings to those of similar studies, states the relevance of the findings/Implications and at the end of this chapter the researcher reveals the limitations faced during this period of the study and finally draws recommendations and conclusions.

5.2 Demographic findings
The largest age category was 26 years to 35 years which scored 48.7%, smallest age category was 46 years to 55 years which scored 5.19%. In this study female participants dominated male ones where by 108 study participants equivalent to 70.13% were females whereas only 46 study participants equivalent to 29.87% were males. This is congruent with Ramatu A. A, (2014) whose results indicated that male nurses were more likely to leave their organizations or the profession than their female colleagues. Furthermore, the results showed that younger nurses were more likely to leave their organizations or the profession than their older colleagues. Mahmoud A(2013) found that negative predictors of turnover intentions among female nurses regarding satisfaction work related issues were kind of work they did, physical work conditions, and career future, while negative predictors of turnover intentions among male nurses were satisfaction with hospital identification and career future. It was found in the literature that younger nurses had higher level of turnover intention.

In this study, majority of participants were married people totaling to 95 participants and a percentage of 62.91%, the remaining 56 participants were single with a percentage of 37.09%. This has similarity with Irum S. D,( 2015) who conclude that marital status has great influence on job satisfaction hours. It was also found out that marital status has effect on sense of tolerance reduced. It was also examined duty timing has effect on satisfaction with job, difficulty to concentrate on work and disengaging from work.

The work experience for nurses who worked with Rwanda Military Hospital for more than 5 years were 37.66% of participants, 25.97% had worked with Rwanda Military Hospital for less than 1 year, 18.83% had worked with Rwanda Military Hospital for less than 1 year whereas the remaining 17.53% had worked with Rwanda Military Hospital for greater than 1 year and less than 3 years. The above results are consistent with Delobelle et al.
(2011) who found that the turnover intention of nurses is inversely related with years of nursing experience in South Africa while in Jordan, job satisfaction of nurses is positively correlated with years of nursing experience and their age. This analysis was done using inferential statistics of chi-square to find out whether there is an association between the three variables which are demographic characteristics, job satisfaction and intention to turn over. The results showed strong significant association between the two variables as shown by a p-value of .000, and this is congruent with Mahmoud .A,(2013) who revealed that the perception of pay and age, experience, income, affective commitment, continuous commitment, normative commitment, quality of work, and perception of health was all significantly positive.

5.3 Job satisfaction
The results from the study regarding the satisfaction of nurses at Rwanda military Hospital on issues/variables of praise for good service rendered, whether they have criteria for promotion in their institution. The majority of study participants had praise for the good service rendered to the level of 38.3% but also those who never had any praise for the services are nearly equal to those who had it where they are represented by 37.7% where as the rest were not sure on whether or not they were praised this has shown similarity with (Society for Humana Resource management, 2012) who revealed that Employees rate compensation/pay as the third most important aspect of their job satisfaction. This aspect received a low rating when it came to employees’ actual level of satisfaction: Only 22% of employees were very satisfied with compensation/pay. Many of the respondents in this study (41.6%) said that Rwanda Military Hospital doesn’t have criteria for promotion, followed by others who were not sure whether the hospital has those criteria or not and these were 34.4% of all respondents. The rest (24%) believed that the hospital has those criteria and according to Society for Humana Resource Management (2012), HR professionals can help their organizations train and promote their employees to fill positions that require higher-level skills. This will then open up positions that require lower skill levels, which, in turn, may be easier to fill.

Also 59.7% of all respondents had good relationship with their immediate supervisors followed by 33.1% who had very good relationship with their immediate supervisors whereas the rest (7.1%) had a bad relationship with them this is true as Society for Humana Resource management, (2012) pointed out that employees value their relationship with management, and they are looking for ways to make this relationship more effective, which, in turn, will likely increase employee satisfaction, engagement and productivity.
Employers can build a bridge between employees and senior management by training their line managers regularly and involving them in strategy meetings and activities. RMH work was thought to be challenging to the percentage of 58.4% while others thought it was exciting and boring at the levels of 33.1% and 8.4% respectively. This was also highlighted by Munywende P. O et al, (2014) who said that nursing managers were of the opinion that their salaries were not commensurate with the increasingly complex disease burden, growing number of patients, and various health system reforms. Nursing managers also complained that poor salaries for increased responsibilities were made worse by an unfair performance management and reward system. Insufficient staffing in departments at RMH was revealed to be at 68.2% while 27.9% and 3.9% were for sufficient and very insufficient respectively. Another study by Munyawede P.O et al (2014), highlighted work pressure, exacerbated by shortages of health professionals (nurses, doctors, social workers, pharmacists) and support staff (cleaners, gardeners, security guards).

Collaborative relationship with the physicians was confirmed by 71.4% of all the study participants where as 26% and 2.6% were confirmed to have collaboration with difficulty and not having any collaboration at all respectively. From a study by Munywede O. et al (2014) nursing managers indicated that they were concerned about violence in the workplace, 31% had experienced violence; and 39% had experienced verbal abuse from other colleagues, patients or relatives in the workplace. Minor shortages of essential drugs were highlighted by 85.7% of all the study participants whereas the remaining 7.1% and 7.1% stands for no shortages at all and serious shortages. This is in line with Pillay, R,(2011) who mentioned that the difference in satisfaction levels with resources available—working equipment, medication, examination facilities, time and staff—is also stark, with nurses working in hospitals afforded the ideal opportunity to improve the health care status of patients in an optimal setting with adequate resources and time. This translates into more efficient, effective health care in a more comfortable environment, which ensures that patients become the priority and patients’ needs are met.

This study reveals that 52 (34%) of nurses had low level of job satisfaction, Thirty two percent (32%) of nurses had moderate levels and 63(37%) had high levels of job satisfaction. This is congruent with (R. Pillay, 2009) who revealed that nurses in public hospitals had relatively high degrees of job dissatisfaction and this study was done in a public hospital of Rwanda. Contrary to that in developed countries like Greece, Italy and Spain contrast with very high shares (90% or more) of employees who are contented with their job in Denmark, France, Ireland, the Netherlands and, most notably, Austria”.

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5.4 Intention to turn over

The nurses intention to turnover were manifested in many ways like where 84.4% of total participants had attended CPDs where as only 15.6% had not attended them. This has a strong similarity with society for Humana Resource management, (2012) who mentioned that Career advancement opportunities could become a critical aspect of employee engagement in the workplace. Employees who are using their skills and abilities in their work and contributing fully in their organization could become disillusioned if opportunities to advance in their career are not available within the organization. These employees will be more likely to look for opportunities outside of their organization as the economy improves.

Again low salaries in relation to other organizations was revealed by 51.9% of all the study participants. 28.6% of all respondents observed no difference in salary rating compared to other organizations and only 4.5% confirmed a high salary rating in relation to other organizations. This was supported by Mosadeghrad (2013) which found out that Iranian nurses experienced high intention to turnover, mainly because of inadequate pay, inequality at work, job insecurity, staff shortage, excessive workload, and lack of management support.

More than a half (54.5%) of the study participants had had a thought of turning over and on the other side 42.9% of them had never had that thought. These findings are similar to many there are significant relationships between some of the factors affecting job satisfaction and the rate of nurses’ absences and turnovers, it is advised that the management pay substantial attention to improving these conditions in order to increase the efficacy of staff and therefore increase the patients’ satisfaction and ensure the highest quality of service. (Ezzat J. J, 2013).

Basing on the scale, 26(17%) had low levels of intention to turnover, 80(52%) had moderate levels and 48(31%) had high levels of intention to turnover and this is very similar this study done in Europe and US where by the proportion of nurses intending to leave the profession ranged from 5% (in the Netherlands) to 17% (in Germany) (Heinen et al., 2013) and similar to Hinno (2011) who found out that registered nurses intending to change their current profession: 56 % Netherlands, 58% in Finland.
5.5 Relationship between Job satisfaction and intention to turnover
A very weak positive non significant correlation $r (r=.057, P=.48)$ between job satisfaction and intention to turn over among nurses. These results are in contrast with Abdul K, M, M et al (2016) who revealed a statistically-significant negative relationship from the results between the two main study variables job satisfaction and intention to quit among the nurses. More to that Job satisfaction has a negative relationship with intention to quit among nurses which is congruent with the contemporary studies. Thus, low satisfaction destroys the quality of healthcare services and builds strongly the intention to leave the organizations.

5.6 Limitation
It took the researcher time collect the questionnaires from the respondents (Research participant) because of night and day shifts nurses work
At times the researcher would face the problem of Poor or no internet connectivity
This study examined relationship between job satisfaction and intention to turn over among a sample of Rwanda Military Hospital nurses. In this study, nurses’ participation was voluntary therefore; the findings should be interpreted with caution since the participants were hospital nurses from one referral hospital and do not represent all nurses in referral hospitals of this country. More research in this area is needed before generalizing the study findings.

5.6 Recommendation
Recommendations for practice
The findings of this study suggest that policymakers, nurse leaders and nurse managers should enhance improvements in nursing practice environments in order to retain more nurses who were found to have high intention to turn over.
Balanced nursing workloads, measures to reduce work-related stress.
Communication among multidisciplinary team members and mutual respect between nurses and physicians could be improved.

During performance appraisals, supervisors should address issues like, promotions, salaries, advancement opportunities, recognition, responsibility and achievements in order to address feelings of being in dead-end jobs.
Highlighting the factors of nurses’ job satisfaction, the present study suggests a suitable and strategic plan of professional development for Rwandan nurses so that the probability of
intention to quit may be minimized from their existing workplace as well as the nursing profession.

Recommendations for education
Possibilities for advancement and development through CPDs and other programs.
Sufficient mentoring and orientation programmes,

Recommendations for administration
These improvements should include adequate staffing levels,
Salary increases to the level of other nurses in similar institutions.
Nurses should be formally involved in decision making and policymaking processes so that they feel part of these processes.

Recommendations for research
More research in this area is needed before generalizing the study findings. For future research; a larger and representative random sample of nurses from both private and public hospitals can be investigated.
An other research is needed to investigate other factors which are correlated to turnover intention
5.7 Conclusion
The study is unique in the African context and particularly in the Rwandan perspective, where little is known about the relationship between job satisfaction and intention to turnover among nurses because the phenomenon appears to be underexplored, as noted in current literature. 26 (17%) had low levels of intention to turnover, 80 (52%) had moderate levels and 48 (31%) had high levels of intention to turnover. 52 (34%) had low level of job satisfaction. Thirty two percent (32%) had moderate levels and 63 (37%) had high levels of job satisfaction. This analysis was done using inferential statistics of Pearson correlational (r) to find out whether there is correlation between job satisfaction and intention to turnover. It was found out that there was a very weak positive non significant correlation r (r=.057, P=.48) between job satisfaction and intention to turn over among nurses. In this regard, Future research is needed into whether the motive for choosing a nursing career affects the length of the tenure in the profession. Both quantitative and in-depth research is needed for the comprehensive development of nursing-turnover research.
REFERENCES


Vonk, J(2016) operational definition of the target population. Lecture 6 pp 1-8


APPENDICES