

Research Article

Evaluating the Job Satisfaction of Nurses Working in Pediatric Clinics in Terms of Eleven Dimensions and the Influencing Factors

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Abstract

AIM: This study aimed to evaluate the job satisfaction of nurses working in pediatric clinics in terms of 11 dimensions and the influencing factors.

METHOD: The sample of this descriptive study was composed of 92 nurses who were responsible for patient care in two public hospitals located in Antalya city. The data were collected using the Personal Information Form and Healthcare Environment Survey. The study was conducted between December 2018 and January 2019.

RESULTS: The scale scores of the nurses were found to be moderate (4.20 ± 0.86). Although the nurses obtained the highest mean score for the patient care subscale (5.09 ± 1.04), they obtained the lowest mean score for the distributive justice subscale (2.53 ± 1.42). Job satisfaction was higher in nurses who were aged 31–40 years and were continuously working during day shift than in nurses who were aged 41 years and older and working in the night shift ($p < 0.05$).

CONCLUSION: The job satisfaction of nurses working in pediatric clinics was moderate and affected by many factors. Although the most perceived subscale of job satisfaction by nurses was patient care, the lowest perceived subscale was distributive justice. These results are important for guiding about job satisfaction enhancement practices for nurses working in pediatric clinics.

Keywords: Descriptive study, job satisfaction, nurse, pediatrics

Introduction

Job satisfaction is one of the most studied subjects to evaluate the behaviors and attitudes of nurses toward the institution (Ayamolowo, 2013; McGlynn et al., 2012; Roney & Acri, 2018; Tilev & Beydağ, 2014). It is significant to evaluate the level of job satisfaction to provide professionalization in nursing, enhance the quality of care, and decrease the intention to leave the job (Adwan, 2014; Hsu et al., 2015; Kantek & Kaya, 2017; McGlynn et al., 2012; Risman et al., 2016; Roberts-Turner et al., 2014). Nursing managers need to improve job satisfaction, minimize the intention of leaving the job, and enhance the quality of care by creating a healthy working environment (Adwan, 2014; Kantek & Kaya, 2017; Nelson et al., 2015; Risman et al., 2016). It is stated in the literature that nurses with high job satisfaction have better physical and mental health (Roberts-Turner et al., 2014; Tilev & Beydağ, 2014). Job satisfaction

of nurses, patient satisfaction, and quality of care are positively correlated in a statistically significant manner (Ayamolowo, 2013; Kaya & Boz, 2019; Risman et al., 2016). In addition, nurses with high job satisfaction can learn more easily and communicate better with their colleagues and therefore experience less conflicts (Roberts-Turner et al., 2014). In 2014, the Health Care Development Institute of the World Health Organization expanded the Triple Aim (enhancing patient experience, improving population health, and reducing costs) to the Quadruple Aim by adding goodness of caregivers. The institute states that healthier and happier employees will have a higher commitment to their organization, thus resulting in higher patient satisfaction and quality of care (Bodenheimer & Sinsky, 2014).

Studies on job satisfaction have been conducted with many nurses working in different fields including pediatrics (Adwan, 2014; Hsu et al., 2015; Torun

& Çavuşoğlu, 2018). Being a sensitive and specific area that gives care to children and their families (Gallegos & Sortedahl, 2015; Roney & Acri, 2018), pediatric nursing is very different from adult nursing. The primary aim of a pediatric nurse is to provide continuity of care along with the family of the child through the family-centered care approach. Therefore, the most important roles of a pediatric nurse include ensuring the involvement of the family in the care of the child and supporting the family's strengths (Kaya et al., 2017). However, national and international studies examining the job satisfaction of nurses have not been conducted by using a nursing-specific measurement tool (Akman et al., 2016; Güdücü-Tüfekci et al., 2015; Kantek & Kaya, 2017; Tilev & Beydağ, 2014).

It is a known fact that job satisfaction affects nursing practices (Adwan, 2014; Roberts-Turner et al., 2014). Therefore, it is important to examine job satisfaction in pediatric nurses from different dimensions and the associated factors for the projects planned in the field. In the literature, most of the studies evaluating the job satisfaction of pediatric nurses have revealed that pediatric nurses have a low or moderate job satisfaction (Akman et al., 2016; Güdücü-Tüfekci et al., 2015; Meyer et al., 2015; Torun & Çavuşoğlu, 2018). It is important to conduct job-related studies in specific work fields of nurses for the purpose of developing field-specific strategies. Therefore, this study was conducted to evaluate the job satisfaction of nurses working in pediatric clinics in terms of 11 dimensions as well as the influencing factors.

Research Questions

In this study, answers were sought to the following questions:

1. What are the levels of job satisfaction of nurses working in pediatric clinics?
2. What are the factors influencing the job satisfaction of nurses working in pediatric clinics?

Method

Study Design

This is a descriptive study.

Sample

The population of this study consisted of 198 nurses working in pediatric clinics, who were responsible directly for patient care in these clinics. The

researchers asked at least 40% of 198 nurses from two public hospitals to participate in the study because this rate is defined as an adequate response rate to represent the population (Kramer et al., 2009). The sample of the study consisted of 92 (46.5%) nurses who had the power to represent the universe at the level of 0.05 error, 95% confidence interval, and 0.5 effect size according to the power analysis.

Data Collection

The study was conducted in two public hospitals in Antalya, Akdeniz University Hospital and University of Health Sciences Antalya Training and Research Hospital between December 2018 and January 2019. The researchers collected the data in the meeting room or nurse room during the working hours of the nurses by using the face-to-face interview method without interfering with their workflow in the mentioned pediatric clinics. It took about 10 minutes to fill the data collection tools.

Instruments

The data were collected using the Personal Information Form and the Healthcare Environment Survey (HES). *The Personal Information Form* was prepared by the researchers on literature review (Kaya, 2013; Torun & Çavuşoğlu, 2018). The form consists of nine questions about age, sex, marital status, status of having children, education, clinic, total work experience, and position and work experience in the clinic. *The HES* was developed in 2001 to assess the job satisfaction of nurses and was revised in 2015 (Nelson et al., 2015). The Cronbach's alpha values of the original HES and its dimensions were between 0.75 and 0.97. The HES includes 57 items. All items are scored from 1 (strongly disagree) to 7 (strongly agree) using a 7-point Likert scale. The HES is a very comprehensive measurement tool designed to evaluate the job satisfaction of nurses. The scale deals with the job satisfaction of nurses in 11 dimensions, namely relationship with coworkers, relationship with doctors, workload, autonomy, distributive justice, patient care, relationship with ward manager, professional growth, executive leadership, scheduling, and resources. The survey was found to be reliable and valid in America, Jamaica, and Scotland (Anderson-Johnson & Nelson, 2012; Nelson & Cavanagh, 2018; Nelson et al., 2015; Nichols & Nelson, 2019). Gözüm et al. (2020) adapted the survey into Turkish and found the survey as valid and reliable. The Cronbach's alpha values of the HES and

its dimensions were between 0.83 and 0.96. In this study, the Cronbach's alpha value of the survey and its dimensions was determined as 0.89-0.91.

Statistical Analysis

The Statistical Package for Social Sciences version 23.0 software (IBM Corp.; Armonk, NY, USA) was used for data analysis. Normal distribution of data was evaluated by using the Kolmogorov-Smirnov test. Whereas number and percentage distribution were used to evaluate demographic data, mean and standard deviation were used for continuous data. The independent samples *t* test, Kruskal-Wallis test, and one-way analysis were used for intergroup comparisons. Statistical significance was accepted as $p < 0.05$.

Ethical Considerations

To conduct the study, approval was obtained from the Akdeniz University Clinical Trials Ethics Committee. Institutional permissions were obtained from the related hospitals. This study was performed according to the Helsinki Declaration. The nurses who voluntarily participated in the study were verbally informed about the purpose of the study and that their participation was based on voluntary basis and the personal information and confidentiality of the participants would be kept confidential. Verbal and written consents were obtained from the nurses who participated in the study. Permission was obtained from the authors, who developed the survey and conducted its Turkish validity and reliability, for its use in the study.

Results

It was found that 95.7% of the participants were females and 4.3% were males. The mean age of the participants was 30.00 ± 6.13 years. 64.1% of them were married and 63.0% had children. 71.5% had a bachelor's degree. 59.8% of the participants had a nursing experience in pediatric clinic for ≥ 5 years. 84.8% were clinical nurses. 79.4% nurses worked in shift (Table 1).

It was determined that the mean scores of the nurses were 4.20 ± 0.86 for the overall HES, 4.78 ± 1.17 for relationship with coworkers, 4.21 ± 1.17 for relationship with doctors, 4.38 ± 1.26 for workload, 4.10 ± 1.41 for autonomy, 2.53 ± 1.42 for distributive justice, 5.09 ± 1.04 for patient care, 4.55 ± 1.48 for relationship with ward manager, 4.07 ± 1.47 for professional

Table 1
Characteristics of the Nurses (n=92)

Characteristic	n	%
Age (years)		
≤ 30	45	48.9
31-40	40	43.5
≥ 41	7	7.6
Average age 30.0 ± 6.13 years		
Sex		
Female	88	95.7
Male	4	4.3
Marital status		
Married	59	64.1
Single	33	35.9
Having children		
Yes	58	63.0
No	34	37.0
Education level		
Vocational college	4	4.4
Bachelor's degree	72	78.3
Master's degree	16	17.3
Professional characteristics	n	%
Clinic		
General child clinic	25	27.2
Pediatric hematology oncology clinic	28	30.4
Neonatal intensive care unit	20	21.7
Pediatric intensive care unit	19	20.7
Nursing experience in pediatric clinic (years)		
≤ 5	45	59.8
6-10	26	28.2
≥ 11	21	12.0
Working position		
Ward manager	14	15.2
Clinical nurse	78	84.8
Working time		
Continuous day shift	19	20.6
Shift	73	79.4

Table 2

Mean Scores of the HES and Its Dimensions in Terms of Characteristics of the Nurses (n=92)

Subdimensions	Characteristics									
	Age (years)			Marital status		Having children		Education level		
	≤30	31–40	≥41	Married	Single	No	Yes	Vocational college	Bachelor's degree	Master's degree
	X±SD	X±SD	X±SD	X±SD	X±SD	X±SD	X±SD	X±SD	X±SD	X±SD
HES total score	4.46±0.94	3.85±0.68	4.58±0.56	4.30±0.98	4.15±0.80	4.10±0.79	4.37±0.96	4.28±0.93	4.18±0.82	4.27±1.08
	p=0.003**			p=0.429*		p=0.150*		p=0.926**		
Relationship with coworkers	4.94±1.21	4.55±1.16	5.01±0.78	4.66±1.24	4.84±1.13	4.75±1.20	4.83±1.12	4.98±1.03	4.74±1.21	4.88±1.07
	p=0.233**			p=0.467*		p=0.745*		p=0.871**		
Relationship with doctors	4.37±1.29	3.98±1.05	4.54±0.86	4.19±1.24	4.22±1.14	4.23±1.08	4.19±1.32	4.15±0.91	4.18±1.15	4.40±1.35
	p=0.271**			p=0.878*		p=0.877*		p=0.784**		
Workload	4.67±1.10	3.93±1.35	5.05±0.73	4.56±1.15	4.27±1.31	4.29±1.37	4.52±1.04	4.25±1.01	4.33±1.23	4.33±1.23
	p=0.004**			p=0.310*		p=0.407*		p=0.726**		
Autonomy	4.53±1.41	3.52±1.29	4.64±0.99	4.53±1.45	3.86±1.35	3.85±1.41	4.52±1.33	3.88±0.83	4.13±1.40	4.13±1.40
	p=0.001**			p=0.027*		p=0.027*		p=0.924**		
Distributive justice	3.06±1.58	1.85±0.87	3.11±1.40	2.89±1.60	2.34±1.29	2.19±1.22	3.14±1.57	2.16±1.22	2.59±1.39	2.59±2.38
	p=0.001**			p=0.080*		p=0.002*		p=0.750**		
Patient care	5.18±1.02	4.91±1.09	5.42±0.82	5.02±1.03	5.12±1.06	5.14±1.09	4.99±0.95	5.16±1.25	5.01±1.05	5.38±0.99
	p=0.244**			p=0.656*		p=0.522*		p=0.442**		
Relationship with ward manager	4.71±1.58	4.06±1.32	4.94±0.89	4.56±1.72	4.54±1.34	4.38±1.43	4.84±1.53	5.55±1.27	4.49±1.40	4.58±1.83
	p=0.017**			p=0.948*		p=0.149*		p=0.380**		
Professional growth	4.39±1.58	3.64±1.27	4.46±0.82	4.36±1.50	3.91±1.40	3.95±1.37	4.28±1.56	4.63±0.75	4.05±1.40	4.05±1.79
	p=0.017**			p=0.151*		p=0.298*		p=0.742**		
Executive leadership	4.23±1.14	3.63±0.99	4.04±0.89	4.27±1.33	3.78±0.89	3.74±0.94	4.32±1.24	3.81±0.55	3.97±1.08	3.95±1.29
	p=0.049**			p=0.042*		p=0.015*		p=0.964**		
Scheduling	4.72±1.32	3.69±1.49	4.57±0.83	4.55±1.60	4.11±1.34	4.03±1.43	4.67±1.40	3.94±1.86	4.27±1.36	4.31±1.81
	p=0.003**			p=0.164*		p=0.039*		p=0.897**		
Resources	3.87±1.52	3.74±1.23	4.29±1.43	3.71±1.55	3.93±1.28	3.90±1.31	3.75±1.52	5.17±1.04	3.85±1.31	3.52±1.63
	p=0.618**			p=0.468*		p=0.624*		p=0.103**		

Note. X: Mean, SD: Standard deviation, *Independent sample t test, **Kruskal-Wallis test

growth, 3.97±1.09 for executive leadership, 4.26±1.45 for scheduling, and 3.85±1.38 for resources (Figure 1).

Table 2 shows the mean scores of the HES and its subscales according to the characteristics of the

nurses. It was found that the total score of job satisfaction was statistically significantly higher in nurses aged ≥41 years and older than that in under the age of 40 (KW=4.661, p=0.003). The mean scores of workload (KW=2.131, p=0.004), autonomy (KW=9.092,

Table 3.

Mean Scores of the HES and Its Dimensions according to Professional Characteristics of the Nurses (n=92)

	Professional characteristics									
	Clinic			Nursing experience in pediatric clinic (years)			Working position			Working time
	General child clinic	Pediatric hematology oncology clinic	Neonatal intensive care unit	Pediatric intensive care unit	≤5	6-10	≥11	Ward manager	Clinical nurse	Continuous day shift
Subdimensions	X±SD	X±SD	X±SD	X±SD	X±SD	X±SD	X±SD	X±SD	X±SD	X±SD
HES total score	4.16±0.92	4.40±0.91 p=0.524***	4.04±0.69	4.13±0.89	4.23±0.96	4.10±0.68 p=0.783***	4.29±0.82	4.37±0.57 p=0.426*	4.17±0.90	4.65±0.66 p=0.011*
Relationship with coworkers	4.73±1.07	5.11±1.20	4.46±1.08	4.68±1.31	4.71±1.28	4.71±0.99	5.29±0.93	5.11±1.03	4.72±1.19	5.17±1.06 4.67±1.18
Relationship with doctors	4.05±1.25	4.39±1.21 p=0.274	4.16±0.88	4.23±1.31	4.13±1.26	4.39±0.87 p=0.303***	4.20±1.38	4.20±0.94 p=0.254*	4.22±1.21	4.61±0.97 p=0.098*
Workload	4.27±1.32	4.51±1.32 p=0.770***	4.35±1.03	4.35±1.37	4.42±1.15	4.23±1.32 p=0.647***	4.52±1.68	4.95±0.83 p=0.964*	4.27±1.30	5.21±0.91 p=0.096*
Autonomy	3.93±1.47	4.43±1.46 p=0.914***	3.95±1.23	3.99±1.48	4.16±1.55	3.94±1.24 p=0.766***	4.16±1.14	4.38±0.89 p=0.016*	4.05±1.49	4.62±0.91 p=0.001*
Distributive justice	2.69±1.39	2.57±1.55 p=0.535***	2.57±1.17	2.60±1.60	2.77±1.56	2.08±1.08 p=0.807***	2.44±1.27	2.62±1.00 p=0.046*	2.52±1.49	2.78±1.32 p=0.072*
Patient care	5.11±0.87	5.14±1.12 p=0.785***	5.03±1.23	5.03±1.00	4.97±1.04	5.09±1.01 p=0.122***	5.64±1.06	5.16±0.89 p=0.825*	5.07±1.07	5.52±1.02 p=0.417*
Relationship with ward manager	4.44±1.68	5.01±1.52 p=0.978***	4.21±1.03	4.37±1.48	4.60±1.57	4.60±1.36 p=0.157***	4.20±1.36	4.66±0.96 p=0.047*	4.53±1.56	5.14±0.99 p=0.041*
Professional growth	3.72±1.67	4.44±1.32 p=0.238***	4.03±1.38	4.05±1.35	4.10±1.59	3.93±1.32 p=0.709***	4.25±0.97	4.36±0.65 p=0.770*	4.02±1.54	4.75±0.86 p=0.051*
Executive leadership	4.04±1.05	3.92±1.17 p=0.353***	3.81±1.03	4.05±1.15	4.08±1.20	3.78±0.83 p=0.808***	3.77±1.04	4.04±0.72 p=0.001*	3.94±1.15	4.05±0.69 p=0.021*
Scheduling	4.40±1.23	4.61±1.42 p=0.883***	3.78±1.73	4.09±1.37	4.46±1.44	3.93±1.47 p=0.437***	4.05±1.35	4.52±0.78 p=0.770*	4.22±1.54	4.88±4.10 p=0.669*
Resources	3.71±1.41	3.88±1.56 p=0.228***	4.02±1.31	3.81±1.39	3.95±1.45	3.74±1.19 p=0.267***	3.61±1.52	3.88±1.29 p=0.008*	3.84±1.41	4.16±1.48 p=0.036*
		3.90±1.52 p=0.902***				3.68±1.45 p=0.689***				3.77±1.35 p=0.275*

Note. X: Mean, SD: Standard deviation, *Independent sample t test; ***one-way analysis of variance

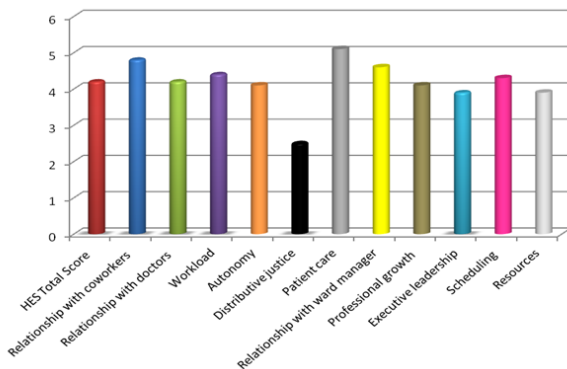


Figure 1
Mean Scores of the HES and Its Dimensions

$p=0.001$), distributive justice ($KW=10.714$, $p=0.001$), relationship with ward manager ($KW=2.932$, $p=0.017$), and professional growth ($KW=5.416$, $p=0.017$) were statistically significantly higher in those aged ≥ 41 years. The mean scores of executive leaderships ($KW=5.123$, $p=0.049$) and scheduling ($KW=1.495$, $p=0.003$) were higher in those younger than 30 years. The mean scores of autonomies ($t=1.382$, $p=0.027$) and executive leadership ($t=1.834$, $p=0.042$) were statistically significantly higher in married nurses. The mean scores of autonomy ($t=1.859$, $p=0.027$), distributive justice ($t=2.020$, $p=0.002$), executive leadership ($t=1.979$, $p=0.015$), and scheduling ($t=0.778$, $p=0.039$) were statistically significantly higher in nurses with children.

The mean scores of the HES and its subscales were examined in the analysis according to the professional characteristics of the nurses (Table 3). It was found that the total score of the nurses continuously working in the day shift was statistically significantly higher than that of others ($t=0.575$, $p=0.011$). The mean scores of workload ($t=0.705$, $p=0.016$), autonomy ($t=0.313$, $p=0.046$), patient care ($t=0.776$, $p=0.047$), professional growth ($t=0.370$, $p=0.001$), and scheduling ($t=0.186$, $p=0.008$) were statistically significantly higher in ward managers. The mean scores of workload ($t=0.976$, $p=0.001$), patient care ($t=1.514$, $p=0.041$), and professional growth ($t=0.970$, $p=0.021$) were statistically significantly higher in nurses continuously working in the day shift.

Discussion

Job satisfaction is an issue that should be considered in terms of the health of individuals and their effects on service quality of institutions (Risman et al., 2016). It is known that there is a positive

and high correlation between job satisfaction and nursing care (Kaya & Boz, 2019). Defining job satisfaction and determinants in nurses for the quality of nursing care is important for solution-oriented work (Risman et al., 2016; Roberts-Turner et al., 2014). This study was conducted to evaluate the job satisfaction of nurses working in pediatric clinics in terms of 11 dimensions and the influencing factors. In this study, it was found that the job satisfaction of the nurses was moderate (Figure 1). The results of similar studies conducted with pediatric nurses revealed that the mean score of job satisfaction was lower (Akman et al., 2016; Torun & Çavuşoğlu, 2018), at medium level (Güdücü-Tüfekci et al., 2015; Meyer et al., 2015), and above average (Roney & Aciri, 2018). The results of this study are consistent with the literature. There are descriptive studies conducted with pediatric nurses. It is known that job satisfaction affects care practices in nurses (Kaya & Boz, 2019). Therefore, interventional studies are needed to increase job satisfaction in pediatric clinics. It is important to conduct job-related studies in nurses' specific work areas and interventions in order to develop site-specific strategies.

The scores of the HES subdimensions were examined, and it was determined that the highest score was obtained for the subscale of patient care. Job satisfaction, which significantly affects the happy, successful, and productive individuals, is quite effective in nursing care practices (Adwan, 2014; Roberts-Turner et al., 2014). The age group to which pediatric nurses provide care ranges from birth to the end of puberty. Furthermore, children have different biological, psychological, and social characteristics. Therefore, pediatric nurses work with a very different group of care needs. In this case, the children's illness perception and acceptance vary. As a result, pediatrics is a sensitive and specific field that takes care of children and their families (Gallegos & Sortedahl, 2015; Roney & Aciri, 2018). The concepts of nurse satisfaction and patient satisfaction are related (Kaya & Boz, 2019). It is believed that a patient's high satisfaction with patient care will be reflected on care practices. Therefore, it is pleasing that the job satisfaction of pediatric nurses working in the field of patient care is high.

The lowest mean score was observed in the dimension of distributive justice. The nursing is a profession with excessive responsibilities and very high workload (Laschinger, 2012; McGlynn et al., 2012).

Roberts-Turner et al. (2014) concluded that distributive justice positively affected the job satisfaction of pediatric nurses. There is no legal reward system for nurses working in public institutions in Turkey. This study was conducted in two public hospitals. This result may have been associated with the fact that public hospitals have no reward system, and the wages of nurses are lower than those of physicians. Many studies on job satisfaction of nurses revealed that wage and rewarding had a negative effect on job satisfaction (Torun & Çavuşoğlu, 2018). In this case, it is expected for nurses to have the lowest mean score in distributive justice.

There was a statistically significant difference in the HES total score of the nurses in terms of age groups (Table 2). Tilev and Beydağ (2014) found that age did not affect the job satisfaction of nurses. In a study conducted with 235 pediatric nurses, it was determined that age was not an effective factor in job satisfaction in Turkey (Torun & Çavuşoğlu, 2018). In this study, it was determined that although the nurses aged 41 years and older had the highest score in overall job satisfaction, the lowest mean score was observed in nurses aged between 31 and 40 years. As one gets older, his/her ability to cope with the difficulties in the profession increases. Experience also brings dignity. These might have been the reason for the results of this study.

Shift work was an effective factor on the total mean score of the scale (Table 3). Torun and Çavuşoğlu (2018) found that the job satisfaction of pediatric nurses working only in the day shift was higher than that of others. In contrast, Güdücü-Tüfekci et al. (2015) determined that shift work did not affect the job satisfaction of pediatric nurses. There are different results in the literature. The job satisfaction of nurses continuously working in the day shift was higher than that of those working in the night shift. Shift work affects the social life of nurses and leads to a decrease in their job satisfaction (Laschinger, 2012; McGlynn et al., 2012). Also, only fewer nurses can work in the night shift in pediatric clinics in Turkey. Therefore, the number of patients to whom the nurse provides care during the night shift is higher than that during the day shift. We thought that intensive workload may also reduce the job satisfaction of nurses working in the night shift.

It was found that the workload satisfaction score of the nurses aged 41 years and over, working in the

position of ward manager and continuously in the day shift, was statistically significantly higher than that of others. It is known that the job satisfaction of nurses working in the night shift is lower than that of those continuously working in the day shift (Kantek & Kaya, 2017). It can be said that nurses older than 40 years are accepted as experienced in hospitals in which this study was conducted, and they are mostly employed in the day shift. In addition, this result might have been associated with the increase in problem-solving skills of experienced nurses over 40.

In this study, it was determined that the nurses who were married, had children, aged 41 years and over, and were working in the position of ward manager had the highest score from the autonomy dimension. Torun and Çavuşoğlu (2018) found that the job satisfaction of pediatric nurses who stated that they used autonomy in their unit was higher than that of others. Roberts-Turner et al. (2014) reported that autonomy had a positive effect on job satisfaction in pediatric nurses. Autonomy means that the nurse takes decision on his/her own even under difficult conditions in clinical practice and assumes the responsibilities of the decision (Fahrenwald et al., 2005; Pang et al., 2009). Autonomy in nursing is a concept that should be considered. The most important reason for this is that decision-making restrictions in nursing practices affect nursing care outcomes in clinics (Akay, 2008). Autonomy is an important indicator of occupational competence, and as competence increases, the field of occupational autonomy expands (Barazzetti et al., 2007). Pediatric nurses are expected to be good in the field of autonomy when necessary to guide the decision-making family on behalf of the child (Esen & Karakoc, 2016). Ward managers are in the leading position in clinical practice. It is therefore pleasing that managers have high scores of autonomy. This result is satisfactory for professional development to guide other nurses about gaining autonomy. Being a ward manager in the clinic requires to have a say. Similarly, getting married and having children are accepted values in Turkish society. Higher autonomy scores of married and having children were thought to be related to this view.

In this study, the nurses working continuously in the day shift and in the position of ward manager had the highest score for the dimension of patient care. In the study conducted by Risman et al. (2016) with 753 nurses, a statistically significant positive

correlation was found between the quality of patient care and the job satisfaction of nurses. Nursing managers are expected to lead the nurses they work with in good presentation of patient care. In addition, the duties of the nursing managers include following new scientific developments, implementing innovations in nursing care, and creating change in line with them (Kaya & Kantek, 2016). For these reasons, high scores of ward manager for the dimension of patient care in the study are important to guide the nurses they work with.

This study revealed that nurses under 30 years had the highest mean score for the dimension of relationship with ward manager. It is known that new nurses have higher job satisfaction and lower burnout than those working for more than 10 years (Torun & Çavuşoğlu, 2018). This result might have been associated with the fact that nurses have high excitement and expectations during the first years of the profession.

The mean score of professional development was found to be the highest in nurses who were continuously working in the day shift, in the position of ward manager, and aged under 30 years. Professionalization in nursing significantly affects an individual's professional behavior and success (Hsu et al., 2015; McGlynn et al., 2012). Therefore, young nurses obtained the highest score for the dimension of professional development, which was a pleasing result on behalf of the profession.

Conclusion and Recommendations

National and international literature review has shown that the HES was not studied previously in the sample of pediatric nursing. In this study, the survey was used in the nurses working in pediatric clinics for the first time, which also constitutes another original value of the study. In this study, a comprehensive tool was used for nurses to identify the level of job satisfaction of nurses working in pediatric clinics and determine the influencing factors. As a result of this study, it was found that the job satisfaction of nurses was moderate and was affected by several factors such as age, marital status, having a child, working position, and continuous day/night shift work. The nurses had the highest job satisfaction in the dimension of patient care and the lowest job satisfaction in the dimension of distributive justice. It is the responsibility of the hospital

managers to seek solutions to the circumstances that lead to these results. It is recommended to plan qualitative studies in this field to reveal situations that cause job dissatisfaction. Experimental studies are needed to increase the job satisfaction of pediatric nurses. It is thought that the qualitative studies will provide important data for future experimental projects. In the Kaya and Boz's (2019) model development study, the responsibilities in increasing the job satisfaction of nurses and achieving quality nursing care were stated. It may be recommended to plan experimental studies within the scope of this model to increase job satisfaction. Based on the data obtained, it will be possible to make and implement the plan to increase the job satisfaction of nurses.

Ethics Committee Approval: This study was approved by Ethics committee of Akdeniz University, (Approval No: 626).

Informed Consent: Written informed consent was obtained from the participants who agreed to take part in the study.

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References

- Adwan, J. Z. (2014). Pediatric nurses' grief experience, burnout and job satisfaction. *Journal of Pediatric Nursing*, 29(4), 329-336. [\[Crossref\]](#)
- Akay, M. (2008). Hemşirelikte otonomi [Autonomy in nursing]. *Vakıf Hastanesi Dergisi*, 13(4), 24-26.
- Akman, O., Ozturk, C., Bektas, M., Ayar, D., & Armstrong, M. A. (2016). Job satisfaction and burnout among paediatric nurses. *Journal of Nursing Management*, 24(7), 923-933. [\[Crossref\]](#)
- Anderson-Johnson, P., & Nelson, J.W. (2012). Testing a model of clarity of self, role, and system as predictors of job satisfaction of nurses in Jamaica. *Virginia Henderson Global Nursing e-Repository*. Retrieved from: <http://hdl.handle.net/10755/243502>.
- Ayamolowo, S. J. (2013). Job satisfaction and work environment of primary health care nurses in Ekiti State,

Nigeria: An exploratory study. *International Journal of Caring Sciences*, 6(3), 531-542.

Bodenheimer, T., & Sinsky, C. (2014). From triple to quadruple aim: Care of the patient requires care of the provider. *Annals of Family Medicine*, 12(6), 573-576. [Crossref]

Barazzetti, G., Radaelli, S., & Sala, B. (2007). Autonomy, responsibility and the Italian code of deontology for nurses. *Nursing Ethics*, 14(1), 83-98. [Crossref]

Esen, B., & Karakoç, A. (2016). Yenidoğan yoğun bakım ebe ve hemşirelerinin etik ikilemleri ve mesleki profesyonellik düzeyleri ile ilişkisi [Ethical dilemmas of neonatal intensive care midwives and nurses and their relationship with their professional professionalism]. *Uluslararası Hakemli Hemşirelik Araştırmaları Dergisi [International Refereed Journal Of Nursing Researches]*, 6(6), 30-46.

Fahrenwald, N. L., Bassett, S. D., Tschetter, L., Carson, P. P., White, L., & Winterboer, V. J. (2005). Teaching core nursing values. *Journal of Professional Nursing*, 21(1): 46-51. [Crossref]

Gallegos, C., & Sortedahl, C. (2015). An exploration of professional values held by nurses at a large freestanding pediatric hospital. *Pediatric Nursing*, 41(4), 187-195.

Gözüm, S., Nelson, J., Yıldırım, N., & Kavla, İ. (2020). Translation and psychometric testing of the Healthcare Environment Survey in Turkey. *Florence Nightingale Journal of Nursing*. (Accepted: 29-Jun-2020)

Güdücü-Tüfekci, F., Kurudirek, F., & Baran, G. (2015). Çocuk hemşirelerinin iş tanımlama ve doyum düzeyleri [Job description and satisfaction levels of pediatric nurses]. *Gümüşhane Üniversitesi Sağlık Bilimleri Dergisi [Gumushane University Journal of Health Science]*, 4(1), 70-83.

Hsu, H. C., Wang, P. Y., Lin, L. H., Shih, W. M., & Lin, M. H. (2015). Exploring the relationship between professional commitment and job satisfaction among nurses. *Workplace Health & Safety*, 63(9), 392-398. [Crossref]

Kantek, F., & Kaya, A. (2017). Professional values, job satisfaction, and intent to leave among nursing managers. *Journal of Nursing Research*, 25(4), 319-325. [Crossref]

Kaya, A., & Boz İ. (2019). The development of the professional values model in nursing. *Nursing Ethics*, 26(3), 914-923. [Crossref]

Kaya, A. (2013). *Antalya il merkezi hastanelerindeki yönetici hemşirelerin profesyonel değerler algısı ile iş doyum düzeylerinin incelenmesi [In Antalya city center hospitals manager nurses' perception of professional values and job satisfaction examination of levels]*. [Yüksek Lisans Tezi, Akdeniz Üniversitesi Sağlık Bilimleri Enstitüsü, Antalya].

Kaya, A., & Kantek, F. (2016). Yönetici hemşirelerin profesyonel değerler algısı ve etkileyen faktörler [Executive nurses perception of professional values and influencing factors]. *Sağlık ve Hemşirelik Yönetimi Dergisi [Journal of Health and Nursing Management]*, 3(1), 18-25.

Kaya, A., Tutar-Güven, Ş., & İslar-Dalgıç A. (2017). Nursing students'level of knowledge on family centered care. *International Journal on New Trends in Education and Their Implications*, 7(4), 40-49.

Kramer, M., Schmalenberg, C., Brewer, B. B., Verran, J. A., & Keller-Unger, J. (2009). Accurate assessment of clinical

nurses' work environments: Response rate needed. *Research in Nursing & Health*, 32(2), 229-240. [Crossref]

Laschinger, H. K. (2012). Job and career satisfaction and turnover intentions of newly graduated nurses. *Journal of Nursing Management*, 20(4), 472-484. [Crossref]

McGlynn, K., Griffin, M. Q., Donahue, M., & Fitzpatrick, J. J. (2012). Registered nurse job satisfaction and satisfaction with the professional practice model. *Journal of Nursing Management*, 20(2), 260-265. [Crossref]

Meyer, R. M., Li, A., Klaristenfeld, J., & Gold, J. I. (2015). Pediatric novice nurses: Examining compassion fatigue as a mediator between stress exposure and compassion satisfaction, burnout, and job satisfaction. *Journal of Pediatric Nursing*, 30(1), 174-183. [Crossref]

Nelson, J. W., Persky, G. J., Hozak, M. A., Albu, A., Hinds, P. S. & Savik, K. (2015). A multistudy validation of an instrument for nurse job satisfaction. *Virginia Henderson Global Nursing e-Repository*. Retrieved from: <http://hdl.handle.net/10755/583356>.

Nelson, J. W., & Cavanagh, A. M. (2018). Development of an international tool to measure nurse job satisfaction by testing the Healthcare Environment Survey beyond Jamaica and the United States to Scotland: A cross sectional study utilizing exploratory factor analysis. *International Journal of Healthcare Management*, 11(4), 314-318. [Crossref]

Nelson, J. W., Nichols, T., & Wahl, J. (2017). The cascading effect of civility on outcomes of clarity, job satisfaction and caring for patients. *Interdisciplinary Journal of Partnership Studies*, 4(2), 1-22. [Crossref]

Nichols, T. M., & Nelson, J. W. (2019, February 23). The effect of civility on the healthcare environment, staff, and the care of patients. *Sigma*. from: https://sigma.nursingrepository.org/bitstream/handle/10755/16782/Nichols_94203_K05.pdf?sequence=1.

Pang, D., Senaratana, W., Kunaviktikul, W., Klunklin, A., & McElmurry, B. J. (2009). Nursing values in China: The expectations of registered nurses. *Nursing & Health Sciences*, 11(3): 312-317. [Crossref]

Risman, K. L., Erickson, R. J., & Diefendorff, J. M. (2016). The impact of person-organization fit on nurse job satisfaction and patient care quality. *Applied Nursing Research*, 31, 121-125. [Crossref]

Roberts-Turner, R., Hinds, P. S., Nelson, J., Pryor, J., Robinson, N. C., & Wang, J. (2014). Effects of leadership characteristics on pediatric registered nurses' job satisfaction. *Journal of Pediatric Nursing*, 40(5), 236-256.

Roney, L. N., & Acri, M. C. (2018). The cost of caring: an exploration of compassion fatigue, compassion satisfaction, and job satisfaction in pediatric nurses. *Journal of Pediatric Nursing*, 40, 74-80. [Crossref]

Tilev, S., & Beydağ, K.D. (2014). Hemşirelerin iş doyum düzeyi [Nurses' job satisfaction level]. *Sağlık ve Hemşirelik Yönetimi Dergisi [Journal of Health and Nursing Management]*, 3(1), 140-147. [Crossref]

Torun, T., & Çavuşoğlu, H. (2018). Examining burnout and job satisfaction of nurses working in pediatric units. *Hemşirelikte Eğitim ve Araştırma Dergisi [Journal of Education and Research in Nursing]*, 15(2), 71-80. [Crossref]