

# **CHAPTER 1**

## **INTRODUCTION**

According to a World Health Organization report, the workforce crisis in every country in the field of healthcare is seriously affecting the ability of many countries to fight disease and improve the health of their people (WHO, 2006). A shortage of nursing is by no means a new problem; it seems to recur on an almost cyclical basis. Health policy experts and nurse leaders recognize that a deepening global shortage of nurses is leading to new challenges for health systems all over the world (OECD, 2005). The issue of work environments has been widely discussed as an important issue in attracting and retaining professional nurses involved in hospital care (Peter, Sean, Karel, Herman, & Paul, 2009). Since hospitals are a major pillar of an effective health care system and nurses provide a crucial primary-care-giver function within hospitals, the ability to attract and retain nurses in hospital environments remains a critical issue (Tallman & Bruning, 2005).

In 2006, Thailand had 97,942 full-time professional nurses whereas demand required 119,700 full-time professional nurses, as a result of which Thailand had a shortage of professional nurses amounting to approximately 31, 260 vacancies (MOPH, 2007). Thailand has 74 nursing colleges/institutions: 64 public and 10 private, and since 2004 two more public institutions (Kasetsart University and Suranaree Technology University) have begun offering nursing training programmes. In the

production of professional nurses, since 2005, the public sector, especially the Ministry of Public Health (MOPH), has had a tendency to increase its production capacity by 2,500 nurses from present capacity 1,500 nurses each year as the previously planned number did not meet the increase in demand (MOPH, 2007). A high turnover in nurse can impact negatively on an organization's capacity to meet patients' needs and provide quality health care (Gray, Phillips, & Normand, 1996; Shields & Ward, 2001; Tai, Bame, & Robinson, 1998). Inadequate pay, overwork, stress, bureaucratic pressures, and unrealistic expectations lead to poor quality work, a high patient rate and low standards of care. The relationship between the turnover in nurses and job satisfaction or job dissatisfaction are essential quality indicators indicating the factors underlying this turnover. Job satisfaction is necessary for professional nurses, and it leads to organizational efficiency.

The healthcare system in Thailand is being confronted by a massive problem. The demand for health care is increasing, whilst the number of professionals such as nurses and doctors working in the public healthcare system is not increasing at the same rate. The entire healthcare profession has been affected by this shortage of professionals and patients' demands are becoming increasingly higher. The healthcare system in Thailand is both public and private. Private healthcare providers that operate healthcare services in urban areas include pharmacies or drugstores, clinics (without in-patient beds), and hospitals (with in-patient beds) (MOPH, 2007).

The Ministry of Public Health (MOPH) provides healthcare services in all urban and rural areas. It provides a wide variety of public health services

both in Bangkok metropolis and in remote areas, and operates a network of hospitals, including regional hospitals, general hospitals, community hospitals and sub-district health centers. Similar institutions are also operated by other ministries, such as the Ministry of Education (medical school), the Ministry of Defense, the Ministry of Interior, state enterprises, local administrative organizations (include Bangkok Metropolitan Administration), and community primary health care centers (MOPH, 2007).

Hospitals throughout the world are currently undergoing massive changes to their organizational structure in an effort to reduce costs (Yin & Yang, 2002). Nurses working in the public health sector in Singapore were generally dissatisfied with their working conditions and half of them had been thinking of quitting the profession (Boey, 1998). In 2009, the economic crisis will impacted on the Thai government in terms of introducing fiscal and monetary discipline. During periods which require austerity measures, other governments have attempted to reduce health care costs by restructuring healthcare services, resulting in a deterioration in hospital working conditions and more stress for nurses (Tyson & Pongruengphant, 2004) Dissatisfaction and burnout regarding the quality of care were common among hospital nurses in terms of nurse-assessed quality of care, pointing to the poor organization, such as the poorly financed health care system (Aiken, Clarke, & Sloane, 2002). Efforts to reduce costs through reductions in nursing staff or skill mix alterations, coupled with the increased demand for nursing care for more acutely ill hospitalized patients and quality of care, are of great concern



to nurses and nurse leaders, such changes have an effect the staffing and well-being of nurses, and the quality of nursing care (Areerut, 2002).

Numerous researchers have focused on how job satisfaction has an effect on the working environment, such as (Bowling, Beehr, & Lipisto, 2006; Fried & Ferris, 1987; Tsui & O'Reilly, 1989). Thus, the nurse's level of job satisfaction depends largely on the work environment. Demographic factors have been shown to impact both job satisfaction and intention to leave. Some of these factors include age, education, job level, gender, and tenure with the organization (Mor Barak, Nissly, & Levin, 2001). Thus, the hospitals can increase job satisfaction and commitment between nurses and the organization for which they work by influencing an organization's ethical climate (Ming-Tien & Chun-Chen, 2008). Michalski (2005) identifies the importance of the relationship between corporate ethical values and commitment between nurses and the organization that employs them, a finding supported by hospitals themselves.

This research study examines corporate ethical values in relation to professional nurses, and the impact on job satisfaction and commitment between nurses and medical organizations among public hospitals in southern Thailand. As a result, hospital administrators in particular will gain knowledge regarding the factors influencing job satisfaction and commitment to their respective organizations on the part of professional nurses. As reported by professional nurses who work in public hospitals in southern Thailand, input regarding the levels of job satisfaction, and the commitment between nurses and the organizations for which they work will provide an



impetus to better ascertain the magnitude of staffing shortages and develop or revise appropriate recruiting and retention strategies.

## **Background of the Study**

Hospitals, including public and private hospitals, are a critical healthcare system. The economic crisis in 2009 affected many people in terms of declining purchasing power as a result of which they could not afford private hospitals, turning instead to public hospitals. The public's concern regarding access to and the quality of hospital services continue to influence health care as professionals such as doctors and professional nurses. In hospitals, nursing professionals represent the largest employee group (Flanagan, 1997). Registered Nurses (RNs) are an essential component of health care, with the present nurses shortage, a declining workforce, and decreased enrollment in nursing programs, the recruitment, satisfaction, and retention of nurses staff are of paramount importance (Tanya, 2004). If job satisfaction continues to deteriorate, the present nursing shortage will worsen (Ma, Samuels, & Alexander, 2003).

Nursing shortages seem to recur on an almost cyclical basis. Although nursing shortages are not unusual, this first shortage of the 21st century exhibits unique characteristics that could undermine the very fiber of nursing, and healthcare in general (Carter, Ehrhardt, Jurrus, & Sommerville, 2000). In their previous research, it was attributed to several factors, including an imbalance in the supply of nurses less than demand for patient care, and an

imbalance in the wage rate compared to the hours of work involved (Buerhaus, 1991; Buerhaus, Donelan, Ulrich, Norman, & Dittus, 2005), the image of nursing and nursing school enrollment (Albaugh, 2001), job burnout and dissatisfaction (Siela, Twibell, & Keller, 2009). However, the older a nurse is, the more likely that he or she will stay on until retirement, and so the tendency aging nursing workforce; with poor replenishment rates through recruitment and poor retention, the more this become a problem (Watson, 2005).

According to the Ministry of Public Healthcare (MOPH, 2008), the two main reasons for a lack of professional nurses in Thailand are a decline in the recruitment of professional nurses of the order of 40 % between 1999 to 2005, and secondly, a high turnover rate of professional nurses between 2000 and 2005 respectively of the order of 2.4 to 4.2. This shortage of professional nurses leads to less organizational efficiency in the treatment of client patients. Nurses working with critically ill patients experience unique working conditions. The problems of professional nurses arise as she/he confronts a work environment with a high workload, low pay, low organizational efficiency and nursing shortages, all of which have an adverse effect on job satisfaction among nurses. Nurses have occupation concern with patients' lives, which means the nurse is a partner of doctor in treating patients. If nurses are dissatisfied with their job, have main root of problem for hospitals in Thailand. Hospitals have a responsibility not only to their patients, but also to the employee working in their organization. Nurses constitute a high portion of the employees in a hospital. Professional represents the largest

employee groups in the hospitals (Flanagan, 1997). Job dissatisfaction on the part of nurses in work leads to poor quality of patient care, but when nurses are satisfied with their job, it leads to high-quality healthcare.

In the nursing literature, job satisfaction is recognized as one of the important factors relating to a nurse's desire to remain in the nursing profession in Thailand. Areerut (2002) examines the relationship between nursing staff, nurses' job satisfaction, and patient satisfaction in public hospitals in Thailand. What is the factor influence job satisfaction? The literature determining the factors that contribute to the job satisfaction of current employees is important to the mental health profession currently working in hospitals. Job satisfaction is an important area of research for several reasons. Eklund and Hallberg's (2000) study of job satisfaction found that there is a need for general satisfaction with work, communication and co-operation among team members, managerial feedback, the patient's influence on care and the relatives' influence on care. Severinsson and Hummelvoll (2001) identified the factors pertaining to job satisfaction with regard to quality of care: (1) a high level of job satisfaction may lead to high-quality care, possibly through enhancing the staff's motivation and interest in their work; and (2) poor job satisfaction would have the opposite effect. Chen-chung (2002) studied the individual, work-related, and geographical factors that influence job satisfaction on the part of nurses. James-Francis (2005) studied the key motivational factors (affiliation, power, and achievement) that influence job satisfaction. Scher (2006) examines the determinants of job satisfaction/dissatisfaction for staff nurses, including the impact of



demographic variables, such as level of education, and experience, in addition to which satisfaction with pay and promotion was also examined to determine its effect on the nurses' satisfaction with the job in general. Thus, the factors affecting job satisfactions were the work environment, quality of patient care, motivation, as well as geographical and demographic factors. Furthermore, no study has been published in the field of nursing dealing with corporate ethical values on job satisfaction and the commitment between nurses and the organization for which they work. Surprisingly, there are few published studies that are concerned with nurses' job satisfaction and commitment to the organization (i.e. hospital) and their influence on an organization's ethical climate (Ming-Tien & Chun-Chen, 2008). The ethical climate partially mediates the relationship between ethical stress and job satisfaction, while job satisfaction completely mediates the relationship between ethical stress and intent-to-leave (Ulrich, O'Donnell, Taylor, Farrar, Danis, & Grady, 2007).

The question arises as to whether professional nurses working in public and private hospitals in Thailand have parallels in terms of their satisfaction with their job. There has been a little literature relating to job satisfaction within private and public hospitals in Thailand, such as that conducted by Tyson and Pongruengphant (2004) who found that in Thailand, professional nurses who work in private hospital receive higher salaries, more stable workloads, and organizational support than their counterparts working in public hospitals. Surprisingly, however, nurses' satisfaction with their job increased, particularly in public hospitals, which may be attributable to age, improvement in monetary compensation and organizational support. Thus, job

satisfaction is related to age, monetary compensation, and organizational support in public and private hospitals in Thailand.

In previous nursing literature, Blythe, Baumann, Zeytinoglu, Denton, Akhter-Danesh, and Danies, et al., (2008) studied the generational difference among nurses (Baby Boomers, Gen-Xers and Gen-Ters), and found that it had different effects on nurses' job satisfaction (financial rewards, work environment, and the job in general). Michalski (2005) studied the relationship between corporate ethical values and organizational commitment in different generations of nurses (Baby Boomers, Generation Xers, and Post Generation Xers). Thus, there are certain demographic factors, such as generational differences, that influence nurses' job satisfaction, commitment to their respective organizations and corporate ethical values.

A study conducted by Chaaban (2006) examined job satisfaction, organizational commitment and their impact on turnover intent among Certified Registered Nurse Anesthetists (CRNAs) employed in rural and urban counties in the state of Michigan. Brewer and Nauenberg (2003) studied of hospital RNs, their level of job satisfaction, organizational commitment and their intentions to leave/turnover, and found the relationship to be consistent. It is clear, therefore, job satisfaction and organizational commitment are both reflections of the rate of turnover. In addition, Michalski (2005) examined the relationship between ethical values and organizational commitment leading to an increase in the retention of nursing professionals.

The previous studies demonstrate a relationship between job satisfaction and organization commitment; job satisfaction and ethical values;

job satisfaction and demographics. No published in nursing literature link the job satisfaction and corporate ethical values. And there are some nursing literature links the professional nurse (demographic) to organization commitment and corporate ethical values. In this particular study, the researcher focuses on the following factors in terms of their effect on job satisfaction, namely corporate ethical values, commitment to the organization (employer), and the demographics of professional nurses. In this study, therefore, the factors that have the potential to increase job satisfaction on the part of professional nurses in public hospitals in southern Thailand are explored.

### **Rationale of the Study**

There are several reasons that contribute to justification of this study. First the growing shortage of profession nurses is described as the most extreme problem. Nursing shortage problem is to improve profession nurse's job satisfaction. Profession nurses confront work environment such as more work load and low pay. The factor of job satisfaction with regard to quality of care: (1) high level of job satisfaction may lead to high-quality of care, possibly through increase staff motivation and interest in their work; and (2) poor job satisfaction would have the opposite effect (Severinsson & Hummelvoll, 2001).

Second, the ethical principle of justice general is characteristic as fair and appropriate treatment in context professional nurses. Profession nurses



encounter serious ethical problem in providing patient care service. Ethical problem that result in ethic-relate stress in healthcare service (Ulrich et al., 2007). The outcome of an ethical organization is job satisfaction (Price & Mueller, 1986). Ming-Tien and Chun-Chen (2008) study the hospitals can increase job satisfaction and organization commitment by influencing an organization's ethical climate. The Corporate Ethical Values (CEV) is a major dimension of organizational culture, one that can significantly impact the behavior of individuals within the organization (Baker, Hunt, & Andrews, 2006; Schein, 1984). Valentine, Martin, and Sandra (2006) found that, statistically speaking, the Perceived Organizational Support (POS) partially acted as a mediating link between Corporate Ethical Values (CEV) and Job Satisfaction (JS). Thus, the public hospitals have ethical values and support ethical value with regard to their professional nurses, thereby leading to job satisfaction on their part.

Third, commitment to the organization and job satisfaction are of particular importance to healthcare organizations. A number of studies have been published dealing with organizational commitment in field of nursing. which focus on the individual and his or her actions, beliefs, and opinions toward to organization. (Wu & Norman 2006), Sinan, Carolyn, and Stephen (2007) founded the relationship between job satisfaction and organizational commitment. Mowday, Steers, and Porter, (1979) defined organizational commitment as all of a committed individual's belief in, and acceptance of, organizational goals and values. According to Meyer and Allen (1984), commitment to an organization reflects the degree to which an individual is

emotionally attached to the organization and identifies with its goals.

Although some authors assess the subsidiary of the one dimension and three dimension of component of organizational commitment. There are a substantial number of published studies on the relationship between one dimension of component of organizational commitment (affective commitment) and job satisfaction (Helena & Praveen, 2006; Yating, 2005). And the publishers study the relationship between the three dimensions of organizational commitment (affective commitment and continuance commitment and normative commitment) and job satisfaction (Jennifer, Andrea, Isik, Margarte, Akhtar-Danesh, Sharon, & et al., 2008; Ming-Tien & Chun-Chen, 2008; Munevver, 2006; Yannis, Davis, & Rolf, 2007). Meyer and Allen (1991) propose that the three components of organizational commitment, the three components model, should include the following:

- (1) affective commitment (emotional attachment to one's organization);
- (2) continuance commitment (attachment based on the accumulation of valued such as pension, skill transferability, relocation, and self-investment, which co-vary with organizational membership); (3) normative commitment (attachment based on the motivation to conform to social norms regarding attachment).

Satisfied nurses are more committed to their jobs and more productive, whereas dissatisfied ones experience absenteeism, grievances and turnover (Al-Aameri, 2000). Thus, professional nurses that are committed to their organization such as organization commitment and subsidiary one dimension of component of organization commitment is affective

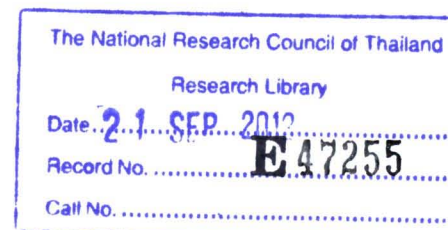


commitment influence job satisfaction and play a critical role in the nursing profession in hospitals.

Finally, professional nurses play a critical role within the hospital. Lambert, Lambert, Itano, Inouye, Kim, Kuniviktikul, and et al. (2004) studied demographic characteristics as predictors of physical and mental health among hospital nurses from Japan, South Korea, Thailand, and the USA (Hawaii). Professional nurses with a different demographic affect the hospital in different ways. Demographic factors are found to be statistically significantly in relation to intentions to move from the public to the private sector and demographic have an indirect effect on private practice and job satisfaction (Kankaanranta, Nummib, Vainiomäki, Halila, H., Hyppölä, Isokoski, & et al., 2007). Professional nurses are a critical part of any public hospital service, especially when working with critically ill patients where they have unique knowledge and the ability to deal with human response.

### Research Problem

There are many factors affecting the current nursing shortage. The problem appears to be multifaceted in nature and influenced by factors associated with a lack of autonomy, an unsupportive work environment, and job dissatisfaction (Kelly, 2003). There are numerous studies that attempt to solve the problem of job satisfaction among nurses; Abualrub (2007), for example, focuses on solutions to the nursing shortage that involve improvement in terms of satisfaction and greater commitment to their





profession. The outcome of an ethical organization is job satisfaction (Price & Mueller, 1986). Ming-Tien and Chun-Chen (2008) studied the level of job satisfaction and commitment to an organization in terms of their influence on an organization's ethical climate. Demographic factor were related to intentions to move from the public to the private sector in a statistically significant manner, while demographics had an indirect effect on private practice and job satisfaction (Kankaanranta et al., 2007). Therefore, the influence of such factors as ethical values, commitment to the organization and, as will be seen, demographics have an effect on the job satisfaction of professional nurses as explored in this study.

### **Research Objectives**

The major purpose of this study is to examine the relationship between job satisfaction, commitment to an organization, perceived organizational support and the demographics of professional nurses. Specifically this study intends to explore the potential correlation between job satisfactions, organization commitment, perceived organizational support and the demographics of professional nurses.

Public hospitals in Thailand are confronted with the problem of a shortage of professional nurses. The main reason for lack of trained nurses in Thailand is twofold: First, there has been a decline in the recruitment of potential nurses and a high turnover rate among those already employed in the profession (MOPH, 2008). Public hospitals also provide a suitable working

environment and support ethical values in their nurses, including separate different in professional nurses demographic characteristic. The demographic characteristics of professional nurses such as gender, age, job status, number of patients per day, number of years working as a nurse and their current hospital unit, plan to leave current their nursing position. (Chang, Daly, Hancock, Bidewell, Johnson, Lambert, & et al., 2006; Garrosa, Moreno-Jime'nez, Liang, & Lez, 2008). Given the above, it is the objective of this study to determine the factors involved in corporate ethical values, perceived organizational support and the commitment between nurses and the organization for which they work (organizational commitment and affective commitment). A further objective is to determine how these elements affect the level of job satisfaction on the part of professional nurses in south public hospitals of Thailand. The researcher also plans to collect data pertaining to the demographics of professional nurses and examine the relationship between the different demographics and job satisfaction, corporate ethical values, and commitment between nurses and their organization (organizational commitment and affective commitment).

## **Research Questions**

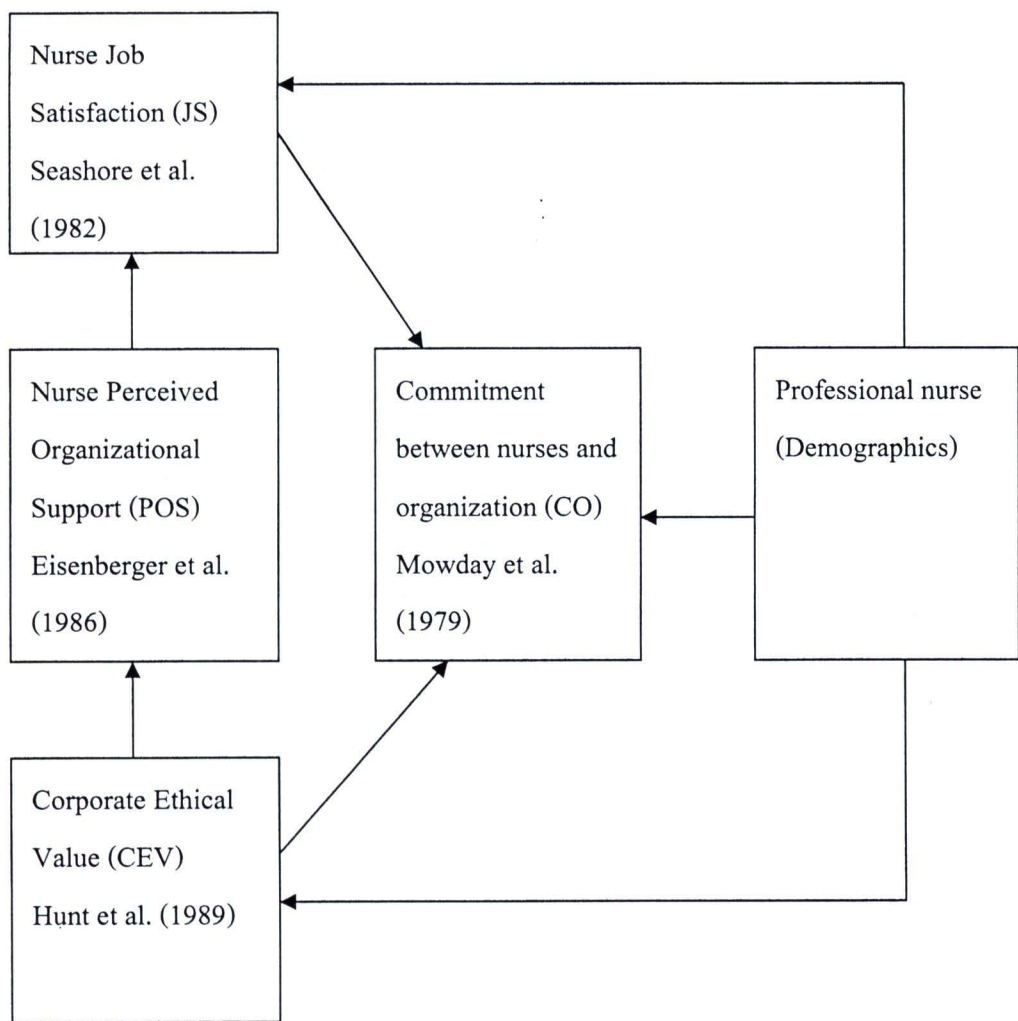
The study of job satisfaction among professional nurses may be affected by their demography and influences of the relationship between job satisfaction, commitment between nurses and organization, and corporate ethical values. If this is the case, one can in particular ask:

1. What is the relationship between Job Satisfaction (JS) and commitment between nurses and their organization (Organizational Commitment (OC) and Affective Commitment (AC))?
2. What is the relationship between Corporate Ethical Values (CEV) and Job Satisfaction (JS), and does Perceived Organizational Support (POS) partially mediated the link between Corporate Ethical Values (CEV) and Job Satisfaction (JS)?
3. What is the relationship between Corporate Ethical Values (CEV) and commitment between nurses and the organization which employs them (Organizational Commitment (OC) and Affective Commitment (AC))?

## **Theoretical Framework**

The theoretical framework that the researcher has developed in this study arises from the combined works of Valentine et al. (2006), Komal and Imran (2008) and Michalski (2005), from which a new conceptual model arises. The Valentine model is interested in ethical influences relating to job satisfaction; the Komal and Imran model is concerned with organizational commitment by professional nurses and job satisfaction; finally, the Michalski model is concerned with ethical support and its affects on high levels of commitment and the professional nurse's intention to stay with an employer. The combination of these concepts allows a fuller understanding of the factors that influence professional nurses in relation to the research questions, resulting in the conceptual model in Figure 1 below.





**Figure 1** Research model: Showing the relationship between corporate ethical values, perceived organizational support, commitment between nurses and organization, and job satisfaction, within the context of professional nursing.

**Methodology, Results and New Knowledge**

This research project arose due to an interest in resolving the problem of the shortage of professional nurses in Thailand, which in turn is linked to

their level of job satisfaction and organizational commitment (Komal & Imran, 2008). The researcher will use the conceptual model developed to investigate the factors that influence professional nurses, for instance, in terms of their job satisfaction and organizational commitment. With regard to the conceptual model presented in figure 1, the methodological aim is to create a valid instrument to measure corporate ethical values, perceived organizational support, commitment between nurses and their organization (organizational commitment and affective commitment), job satisfaction, and demographic variables pertaining to professional nurses working in public hospitals in southern Thailand.

From the research questions, it is possible to create a number of hypotheses that can be tested given the appropriate measuring instrument. There are some useful references that connect these questions to hypothesis. For instance, the first research questions refer to the instrument used by Seashore, Lawler Mirvis, and Cammann (1982) to assess overall Job Satisfaction. Relevant is the study by (Meyer & Allen 1991; Mowday et al., 1979). These studies enable researchers to determine the relationship between Job Satisfaction (Js) and commitment between nurses and their organization (Organizational Commitment (OC) and affective commitment (AC)). Thus, the correlation between job satisfaction and organizational commitment and affective commitment is explored in hypothesis 1: There will be a significant relationship (correlation) between job satisfaction and commitment between nurses and the organization by which they are employed.

The second question relates to Hunt's instrument to measure Corporate Ethical Values (CEV). Of relevance is the study by Eisenberger, Huntington, and Sowa (1986) who created an instrument for measuring Perceived Organizational Support (POS), and that of and Seashore et al., (1982) who devised an instrument for measuring Job Satisfaction (JS). This study enables an exploration of the relationship between Corporate Ethical Values (CEV) and Job Satisfaction (JS): Under condition Perceived Organizational Support (POS) that partially mediated the link between Corporate Ethical Values (CEV) and Job Satisfaction (JS). Thus, the correlation between corporate ethical values and perceived organizational support and job satisfaction is explored in hypothesis 2: There will be a significant relationship (correlation) between corporate ethical value and job satisfaction.

The third question relates to Hunt's instrument for measuring Corporate Ethical Values (CEV). Of relevance here is the study by Mowday et al., (1979) who devised an instrument for measuring Organizational Commitment (OC), and Meyer and Allen (1991), who created an appropriate instrument for measuring Affective Commitment (AC). This study explores the relationship between Corporate Ethical Values (CEV) and Commitment between Nurses and their Organization (CO) (Organizational Commitment (OC) and Affective Commitment (AC)). Thus, the correlation between corporate ethical values on the one hand, and organizational commitment and affective commitment on the other, is explored in hypothesis 3: There will be a significant relationship (correlation) between corporate ethical values and



commitment between nurses and the organization by which they are employed.

Part of the methodology will relate to the conceptual notions of Job Satisfaction (JS); Corporate Ethical Value (CEV); Commitment between Nurses and their Organization (CO) include Organizational Commitment (OC) and Affective Commitment (AC), and professional nurses demographic variables. This will be shown to be important.

The relationship between the first demographic variable, age, is strongly connected with Job Satisfaction (JS) (Jennifer et al., 2008), Affective Commitment(AC) (Jennifer et al., 2008; Haluk, 2008; Thomas & Daniel, 2008); and Organizational Commitment (OC) (Jeffrey & Rajan, 2005), as well as with Corporate Ethical Values (CEV) (Michalski, 2005). Thus, it would be expected that there is a the significant relationship that exists between age and job satisfaction, organizational commitment, affective commitment, and corporate ethical values will be explored in a hypothesis.

With regard to the second variable, education, there is a strong connection with Job Satisfaction (JS) (Joseph, 2005) and Organizational Commitment (OC) (Jeffrey & Rajan, 2005). Thus, the relationship between education on the one hand, and job satisfaction and organizational commitment on the other, will be explored in a hypothesis.

The third demographic variable is tenure, which bears a strong relationship with Job Satisfaction (JS) (Chen, 2005), and it is relate to a lesser degree with Affective Commitment (AC) (Olivier & Karim, 2007). Thus the

relationship between tenure and job satisfaction, affective commitment, and corporate ethical values will be explored in a hypothesis.

The fourth demographic variable is work experience, which is strongly related with Job Satisfaction (JS) (Dawal, Taha & Ismail, 2009; Marianne, 2008); and with affective commitment (Thomas & Daniel, 2008). Thus, the relationship between work experience and job satisfaction, affective commitment is explored in a hypothesis.

The fifth demographic variable is marital status, which bears a strong relationship with Job Satisfaction (JS) (Chi-Ming, Ching-Wen, Pesus, Jorn-Hon, Tze-Kai, Jeng, & et al., 2005; Maureen, Anke, & Marshall, 2008; Naser, Rafiq, Makhdoom, & Muhammad, 2009), as well as with affective commitment (Therese & Steve, 2006). Thus the relationship between work experience, job satisfaction, and affective commitment, is explored in a hypothesis.

The finally demographic variable is income, which bear a strong relationship with Job Satisfaction (JS) (Joseph, 2005). Thus, the relationship between income and job satisfaction is explore in a hypothesis.

### ***The Instrument***

The instrument is a statistical one that arises from the set of hypotheses, and adopts a highly structured questionnaire to identify the attitudes of professional nurses, their managers, and hospital employer executives, from which the requisite data is assembled. The data will be

analyzed appropriately using both ANOVA and correlation techniques, to provide results from which new knowledge can be inferred.

The new knowledge that arises identifies a variety of factors that can be used as a forecasting tool to predict job satisfaction and commitment between nurses and the organizations for which they work. More broadly, it also highlights the fact that job satisfaction and organizational commitment are both dependent upon an organization's commitment to, and consistency in, its ethics in relation to professional nurses.

### **Benefits of the Research**

The nursing profession plays an important role in the health care system. In many advanced countries, nurses are beginning to take clinical decisions, previously a province of doctors. This requires not only better-qualified nurses, but also nurses who are committed to their profession and to their hospitals. This research examines the relationship between the nurses, the ethical climate of their organizations and their commitment to their organizations. If nurses are to stay with their organizations, it is necessary for them to be committed to their organizations. This study provides new knowledge that identifies the extent to which the nurses are committed, knowledge that will be of significance to the/ Thai hospitals, the Ministry of Health and to the nursing profession.



## **Definition of Terms**

The definitions of key terms used in the study are as follows:

**Professional Nurses:** The term ‘professional nurses’ refers to those who provide nursing care in public hospitals in the south of Thailand. The professional nurse is a registered nurse (RN), who has graduated with a bachelor’s degree in nursing (BSN) (Michalski, 2005).

**Job Satisfaction:** Profession nurses in public hospital in the southern Thailand. That she has the degree to which her like their jobs or “the degrees to which people like their jobs” (Spector, 1997).

**Commitment of Nurses and Professional Nurses’ Organization:** This refers to the commitment between nurses and organizations in the form of public hospitals in the south of Thailand. Commitment between nurses and the organizations for which they work includes Organizational Commitment and Affective Commitment.

**Organizational Commitment:** This reflects the degree to which an individual professional nurse in a public hospital in the south of Thailand is emotionally attached to the organization and identifies with its goals. There are three major types of commitment between nurses and the organizations for which they work: (1) a strong belief in, and acceptance of, the organization’s goals and values; (2) a willingness to exert considerable effort on behalf of the organization; (3) a strong desire to maintain membership in the organization (Mowday et al., 1979).

**Affective Commitment:** Professional nurses in public hospitals in the south of Thailand who stay in their organizations with a strong sense of commitment, not only because they need the job but also because they want to do it (Meyer, Allen, & Smith, 1993).

**Corporate Ethical Values:** These are “a composite of the individual ethical values of managers and both the formal and informal policies on ethics of the organization” (Hunt, Wood, & Chonko, 1989).

**Perceived Organizational Support:** The employee’s global beliefs concerning the extent to which the organization values their contribution and cares about their well-being (Eisenberger et al., 1986).

**Demographics:** The demographic variables of this research include: age, education, tenure, marital status, work experience, and estimated bath income.

**Age:** The ages of professional nurses in public hospital in the south of Thailand are measured in integer years.

**Education:** This refers to the fact that professional nurses in public hospital in the south of Thailand have completed a bachelor’s degree or a higher degree in nursing.

**Tenure:** ‘Tenure’ refers to the total number of years a professional nurse has worked in a public hospital in the south of Thailand.

**Marital Status:** This denotes whether a professional nurse working in a public hospital in the south of Thailand is single, married, divorced, or has remarried.

**Work Experience:** The average numbers of years' working experience professional nurses have had in previous and current hospitals.

**Income:** Monthly income includes the monthly salary and other monthly money received for working in the position of expert professional nurses and the monthly remuneration received for overtime by professional nurses working in public hospitals in the south of Thailand.

### **Limitations of the Study**



The limitations of this study are as follows:

1. The study is limited to professional nurses in public hospitals in southern Thailand and thus cannot be generalized beyond this population.
2. The study will be/is limited to the subject of the survey and questionnaires.
3. The instruments were translated from English to Thai language; thus, the potential bias to the translation procedure might be occurred.
4. The instruments used in this study are based on those created in the West, and thus might be incongruent the Thai context.

### **Organization of the Dissertation**

The organization of this dissertation is as follows:

Chapter 1 provides the background of this study by relating the factors that affect the level of job satisfaction among professional nurses in public



hospitals in southern Thailand. The conduct of chapter includes the rationale underlying the study, the research problem, the benefits of the research, the objectives of the research, the research questions, the theoretical framework and hypothesis, the conceptual model, definitions of key terms, the limitation of this study, and the organization of the dissertation.

Chapter 2, literature reviews concerning job satisfaction, commitment between nurses and organization, corporate ethical values, perceived organization support, and demographic.

Chapter 3, present the research methodology and research method of the study including the project research design and produce data collection, instrumentation to measure job satisfaction, commitment between nurses and organization, corporate ethical values, perceived organization support, and demographic.

Chapter 4, present the survey response rate discusses the actual data collection and analysis using the proposed methodology in chapter 3.

Chapter 5, the final chapter of the study, summarizes the finding and conclusions from the data analysis presented in chapter 4. And suggestions for future research