

Factors Influencing Nurses' Intention to Leave their Profession in the Midst of the Economic Crisis in Greece

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Received date: December 04, 2018; Accepted date: January 30, 2019; Published date: February 06, 2019

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Abstract

Aim: The aim of the present study was to investigate the intention of nurses working in a Greek public general hospital to leave either the nursing profession or the hospital they work for and to identify the factors correlated to this intention.

Materials and methods: It is a quantitative cross-sectional study with a sample of 245 nurses (response rate 94.6%) working in the clinical departments of the General Hospital of Kavala (n=420 beds). The survey was conducted between June and July 2016. Data were collected via a structured questionnaire with closed-ended questions, filled out by the participants. The data analysis was conducted using the SPSS v 21.0 statistical package. The significance level was set to 0.05.

Results: Two-third of the study population (154 out of 232 nurses) stated their intention to leave the nursing profession and most of them quite soon, due to poor salary (60%), absence of work incentives (70%) and lack of skills development and career improvement opportunities (60%). However, about 50% of the participants reported that they didn't want to leave the hospital they were working for. Correlation analysis indicated that young age, reduced job satisfaction, years of working experience and improved level of education were positively correlated with nurses' intention to leave their profession ($p < 0.05$).

Conclusions: As with most hospitals in the world, the issue of nurses' intention to leave is increasing in Greece as well, especially during the years of the economic crisis. Effective practices for maintaining human resources, wage adjustments, education and distribution of benefits in a fair manner are needed in order to prevent the phenomenon ensure better healthcare services and patient safety conditions and enable the healthcare system to respond effectively to the negative consequences of the economic crisis.

Keywords: Nursing; Intention to leave nursing; Withdraw from nursing; Job satisfaction

Introduction

The intention to withdraw from work is a common problem in organizations around the world, especially those in the healthcare sector. A large number of studies have been recorded concerning nurses' intention to leave hospitals, factors that "trigger" it and the potential increase of this intention as well as the consequences of a shortage of nurses in hospitals. The problem has been greatly intensified by the economic crisis that hit Europe, especially the southern countries [1-8].

The aim of the present study was to investigate the intention of nurses working in a Greek public general hospital to leave either the nursing profession or the hospital they work for and to identify the factors correlated to this intention.

Theoretical framework

The intention to withdraw from work is similar to the ones such as for delays, absenteeism, slowness at work, and so on and causes several serious difficult to handle problems in most countries worldwide [1,9].

This innermost wish to leave the organization that a nurse is currently working in or to quit the nursing profession constitutes a conscious and deliberate act [10]. This phenomenon is particularly widespread among workers of a higher educational level and leads to significant costs and additional negative impacts for the organization [11-15]. The loss of highly skilled workers often brings about disruptive effects on the organizational capacity, the quality of the services provided and the administration and increases the costs for new recruitments and re-training of the existing staff [16,17].

Early retirement of workers has even worse consequences in health organizations due to the constantly evolving medical needs. Population aging, low fertility rates, increased non-communicable diseases prevalence, nursing staff aging and increased healthcare requirements

of the baby boomer generation underline the necessity of an immediate solution against the reducing number of nurses. Furthermore, the increased departures negatively affect the confidence of the remaining nurses as well as their ability to meet patients' needs in providing quality healthcare services [18-21]. In addition, the effectiveness of the healthcare services provided is negatively affected by the recruitment of less experienced nurses [22].

It is important to note that the effects of the recent economic crisis (after 2009) which have impacted most European countries have been particularly unfavorable for the nursing profession [5]. Also, the imposed reduction on healthcare budgets in most European countries has led to mergers of public hospitals and/or department mergers, staff cutbacks [23], halts in hiring and wage cuts further aggravates the problem.

Determinants of withdrawal intention

According to Salminen, young people in Finland with low job satisfaction, little organizational commitment, limited competency and skills related to job requirements showed increased levels of intention to leave work. Also, older workers intended to leave the hospital in order to get early retirement, a finding related to male gender, night shifts, low working capacity, lack of job satisfaction and inefficient work inspection [20].

According to the results of a survey conducted by Drennan et al. at the National Health System (NHS) in England, the most effective ways to limit nurses' intention to withdraw from hospitals were related to the provision of career improvement opportunities, increased wages and improved working conditions. Another study, conducted in Turkey, showed that emotional exhaustion affects the intention of nurses to leave the organization as well as to leave the profession. The aforementioned findings were confirmed by the results of a European survey in 10 countries and those of other studies conducted in Greece, Turkey, the United States and Australia [24-30].

The situation in Greece

The current economic crisis that hit most European countries has also brought about adverse consequences in the healthcare sector in Greece due to significant reductions in healthcare budgets. The subsequent wage cuts, understaffing and the growing demand for public healthcare services have further negatively affected the working conditions for nurses and further exacerbated the situation. With regard to staffing ratios according to the OECD statistics nurses' shortage and understaffing are constant problems in Greece; only 3.25 nurses per 1,000 inhabitants were employed in Greece in 2016 compared to 9 nurses per 1,000 inhabitants in OECD countries, 17.02 in Switzerland (the highest rate) and 2.89 in Mexico (the lowest rate). Concerning the annual wages of nurses in OECD countries, there is a significant gradual reduction in Greece from \$41,000 purchasing power parities (PPPs) in 2009 to \$34,000 PPPs in 2015. In 2015 nurses in Greece are paid much lower in comparison to other OECD countries such as Italy (~\$41,000 PPP) France (~\$42,000 PPP) and Belgium (~\$59,000 PPP) [31].

The aforementioned conditions have also affected nurses' decision either to retire early and/or to migrate abroad in order to work for European hospitals [32-34]. In particular, the low wages and the insufficient staff at healthcare units, in conjunction with the increasing flow of patients to public hospitals (from 2,129 million discharges in 2010 to 2,238 in 2014 and 2,211 in 2015), have made nurses' working

conditions increasingly difficult and the intention to withdraw a particularly current issue [35-38].

Methods

Design, participants and setting

A quantitative cross-sectional study was conducted in all 245 nurses working in shifts in clinical wards/departments of the General Hospital of Kavala (with 420 beds and 366 nurses) between June and July 2016. Participants were from all nursing education levels, different age groups and various years of working experience. Nurses working in non-clinical departments of the hospital, such as laboratories and outpatient clinics, were not included in the study, mainly because of the different working and shift conditions in those departments. Actually, participants consisted a census of all nurses working in clinical departments of the above mentioned hospital.

Data were collected using a structured self-completed anonymous questionnaire with closed-ended questions and the response rate was 94.6% (232 questionnaires were completed out of 245 delivered).

Description and validation of the questionnaire

A structured, self-completed anonymous questionnaire with closed-ended questions was used for the purpose of the study. To develop the questionnaire, researchers drew on similar studies [36-38] and collaborated with specialists in the fields of healthcare management and healthcare administration. The questionnaire consisted of four modules: (a) job satisfaction, (b) intention to withdraw from nursing profession and from the hospital, (c) factors deterring withdrawal from nursing profession and the hospital and (d) demographic characteristics. Most of the 30 questions used a five-point Likert scale where 1 indicated Strongly Disagree and 5 indicated Strongly Agree.

A pilot study (N=25 nurses) was conducted between April and May 2016; A test-retest was carried out within 15 days (with high correlation coefficient for the majority of questions). The Cronbach's alpha reliability coefficient was: 0.7 for job satisfaction, 0.848 for intention to withdraw from the nursing profession and 0.777 for factors deterring withdrawal from the nursing profession and the hospital.

Data collection

Participants were informed verbally and in writing for the purpose of the study and assured for their data anonymity and confidentiality. After their written informed consent they were provided and filled out a questionnaire in print. The completed anonymous questionnaires were placed by the participants in a dossier located at the nursing office of each clinical ward. Researchers had no involvement in the completion of the questionnaires so as to ensure that the participants freely expressed themselves.

Data analysis

The data analysis was conducted using the SPSS v 21.0 statistical package. The categorical variables were presented as absolute (n) and relative (%) frequencies, while the quantitative variables were presented as a mean, standard deviation. Pearson's correlation coefficient was used to investigate the relationship between two quantitative variables following a normal distribution. A multivariate linear regression was applied to the intention to withdraw from the

nursing profession and the hospital as the dependent variable in cases where more than two independent variables (age, gender, level of education, years of working experience, hours and shift of work, job satisfaction) showed statistically significant differences at the level of 0.2 ($p < 0.2$) in the bivariate analysis. The selection of independent variables was based on the results of similar studies [20,24,27,29]. The significance level was set at $p < 0.05$.

Results

Demographic and professional characteristics

The vast majority of the participants were women ($N=203$, 87.4%) with a permanent full-time job in the hospital. About two third of them were working in shifts. The mean age was 44.7 years ($SD=6.04$) and the average years of working experience were 19.02 (SD 8.94). Additionally, majority of the respondents (>70%) were married with children. About half of the participants were secondary school graduates (50.4%), 41.4% were graduates of a technological institution and less than 4% of the participants held a university master's degree.

Intention to withdraw from the nursing profession

About 66% (154 of 232 participants) stated their intention to leave the nursing profession and most of them quite soon. With regard to their intention to migrate, more than half of the nurses (52.8%) responded that they would like to work in a foreign hospital given the chance, while a similar percentage would consider it if they were given a job similar to their current job in a foreign hospital. However, about 50% of the participants stated that they did not want to leave the hospital they were currently working for.

Job satisfaction

Job satisfaction was found to be moderate in general and low in particular areas. In terms of financial earnings and skills development, more than 60% stated little to no satisfaction; in terms of labour incentives, 70% stated little to no satisfaction and in terms of their participation in decision-making in nursing tasks, 41% stated little to no satisfaction.

Additionally, 80.6% of the participants responded negatively to the question whether their children would choose their profession and 63.8% answered negatively to the question whether they would make the same professional choice again. Table 1 shows the average score according to job satisfaction.

Questions	Mean (standard deviation)
Collaboration and team spirit	3.72 (1.02)
Well-qualified nurse supervisor	4.12 (0.96)
Supervisor performance appraisal	3.87 (1.06)
Satisfaction by the compensation	2.07 (1.02)
Satisfaction in working environment	3.08 (1.03)
Pressure in performing tasks*	3.28 (1.07)
Understaffing*	3.70 (1.32)
Completion of tasks by colleagues	3.83 (0.94)

Degree of responsibility	3.77 (1.03)
Workload*	3.88 (0.94)
Routine rate	3.45 (0.95)
Influence on social life*	3.92 (1.18)
Skills development	2.19 (1.13)
Work motives	2.00 (1.15)
Participation in decision-making	2.69 (1.16)
Note: Excellent=5; Worst=1; *Scores of the factors indicated with have been reversed.	

Table 1: Participants' satisfaction with the nursing profession.

Potential factors that prevent the intention of withdrawal

The respondents' answers to the factors that could prevent their intention to leave the profession are summarized in Table 2

Initiatives	Mean (standard deviation)
Salary increase	4.18 (1.14)
Career opportunities	3.79 (1.26)
Pleasant work environment	4.10 (1.18)
Additional days off	4.00 (1.23)
Change in job position (rotation)	2.74 (1.47)
Staff training	3.44 (1.20)
Compensation based on productivity	4.12 (1.04)
Individual grand awards	3.54 (1.35)
Financial incentives - motivating practices	4.12 (0.91)
Job insecurity	3.15 (1.24)
Note: Excellent=5; Worst=1	

Table 2: Factors that prevent job withdrawal.

It is impressive that 90% of the nurses stated that a pay rise or an increase in their earnings could prevent them from leaving the nursing profession. In the period of economic crisis, they consider financial incentives (91.2%) as the main method of motivation. Similarly, 85.7% of the respondents stated that availing additional leaves from work would be another deterrent factor.

The potential association of payment to productivity for 81.2% was an incentive to remain in the organization, as did the provision of educational advancement opportunities (77.2%).

Approximately half of the nurses (54.6%) stated that rotations at various working places could prevent their intention to leave the profession.

Correlation analyses

Bivariate analyses between the demographic and occupational characteristics of the nurses with the dependent variables: intention to

quit the nursing profession and intention to leave the hospital is presented in Table 3

	Intention to leave the nursing profession	P-value	Intention to leave the hospital	P-value
Gender		0.4 ^a		0.2 ^a
Females	2.2 (1.3)		2.3 (1.3)	
Males	3.2 (1.4)		2.7 (1.4)	
Age	0.23 ^β	0.00 ^β	0.23 ^β	0.00 ^β
Children		0.4 ^a		0.6 ^a
Yes	2.6 (1.4)		2.6 (1.4)	
No	2.7 (1.4)		2.7 (1.5)	
Marriage status		0.4 ^a		0.8 ^a
Single	2.7 (1.4)		2.7 (1.4)	
Married	2.6 (1.3)		2.6 (1.3)	
Divorced	2.3 (1.5)		2.6 (1.5)	
Widower	2.7 (1.5)		3.2 (1.5)	
Educational status		0.21 ^γ		0.2 ^γ
Secondary	2.7 (1.4)		2.7 (1.4)	
Technological/Post-Secondary	2.7 (1.5)		2.7 (1.5)	
University	2.3 (1.5)		2.3 (1.5)	
Master degree	1.9 (1.0)		1.9 (1.5)	
Years of work experience	0.23 ^β	0.00 ^β	0.23 ^β	0.00 ^β
Work hours		-		0.2 ^a
Normal hours	2.7 (2.7)		2.7 (1.4)	
Part-time due to maternity	1.0 (-)		1.5 (-)	
Shift		0.23 ^γ		0.21 ^γ
On Rotation	2.6 (1.4)		2.6 (1.4)	
Morning hours	2.7 (1.5)		2.7 (1.5)	
Afternoon hours	5.0 (0.0)		5.0 (0.0)	
Evening hours	3.0 (2.8)		3.0 (2.8)	
Job Satisfaction	-0.30 ^β	0.00 ^β	-0.30 ^β	0.00 ^β
Note : Values are expressed as average (standard deviation) ^a t test ^β Pearson coefficient correlation ^γ Variation analysis.				

Table 3: Bivariate correlation of the independent variables (demographic and professional characteristics) with the intention to quit the nursing profession and leave the particular hospital.

The multivariate linear regression performed was based on statistically independent variables: age, work experience and job satisfaction, at the level of 0.2 ($p < 0.2$) affecting the dependent variable

“Would you like to quit the nursing profession?”. The job satisfaction showed a negative linear correlation with the desire to quit the nursing profession with $p = 0.000$ and a coefficient ($b = -1$). This indicates that

the intention to leave the profession decreases as satisfaction rate increases.

Furthermore, multivariate linear regression was performed for the statistically independent variables: gender, age, education, working experience, shifts and job satisfaction at the level of 0.2 ($p < 0.2$) and was found to affect the dependent variable "intention to leave the particular hospital". The work satisfaction showed a negative linear correlation with the intention to leave the hospital ($p = 0.000$) and a coefficient ($b = -1.1$). This indicates that the intention to leave the particular hospital decreases as job satisfaction increases.

Discussion

The nurses' intention of leaving their profession is a challenge for healthcare and hospital administrators in many countries as well as in Greece.

In the present study, the rate of withdrawal intention corresponds to 66.3% of the study population. In another earlier survey by Aiken conducted in twelve European countries including Greece, the corresponding percentage was found to be less at 49%. Obviously, as the economic crisis evolved and labour conditions worsened, the intention to withdraw from the profession increased [39].

An even lower intention to leave the profession was recorded in the Salminen survey [20], in a Finnish hospital where work conditions are better and, consequently, nurses' satisfaction is higher: a quarter (25%) of the nurses reported how they often thought of dropping out of the profession and 19% of the nurses thought of getting early retirement.

The intention to withdraw from the profession was found to be directly related to the level of wages (90% of nurses). Furthermore, the increase in wages is to be considered as the main motivation for employees (91.2%), especially in times of economic crisis. Greece recorded an 18% decrease in earnings from 2009 to 2015, as found in international literature [40,41].

It is noteworthy that more than 80% of the nurses who participated in this survey recognized earnings as an important incentive to remain in the profession linking it to productivity. This is true in the business world, as evidenced by a variety of studies [42,43].

Moreover, the majority of surveyed nurses (over 75%) believe that staff training opportunities could bind them to the organization and more than 65% stated that career advancement opportunities would prevent them from leaving their profession.

The importance of providing educational opportunities for the employees' future commitment to the organization is also demonstrated by the Ability Motivation Opportunities model of Professor Purcell et al. and other subsequent authors [43-46].

The vast majority of nurses (>85%) stated that an additional leave would be a deterrent to their intention of withdrawing from work, which is confirmed by the previous studies [36,47-49]. Another issue that was investigated was the intention to leave the hospital to corresponding hospitals abroad, where it is believed that better working conditions prevail. More than 50% responded that if they were given the opportunity, they would decide to migrate. More than half of them said they would seriously think about accepting a similar position in a foreign hospital.

This trend is justified, as nurses in low-income countries are aware of the shortage and corresponding increased demand for nurses in

wealthy nations and have the alternative to work in these states. Furthermore, the type of incentives that encourage migration, as grouped by Kingma direct them to corresponding countries where they would be assimilated into the new system existing in the country and develop professionally [50,51].

However, despite the increased professional opportunities in foreign countries, about half of the respondents said they would never want to leave the hospital, possibly related to the good building infrastructure of the hospital or the lack of resources required to move to foreign countries.

The lack of jobs and choices within the country due to the economic crisis affects the staff in choosing to stay in the nursing profession and in the particular hospital, which inadvertently leads to emotional burnout, increased work stress and depression in a large number of employees with the passage of years of intense psychological problems [38,52,53].

However, besides the wider socio-economic conditions affecting the intention to leave, job satisfaction plays an important role in limiting and restraining workers to an organization [21,54]. This is also confirmed by the results of the current study where job satisfaction was found to be negatively related to the intention of leaving the nursing profession or the hospital.

Decision-makers who are well informed of nursing strategies, including effective leadership, career development opportunities and an attractive work environment have to visualize beyond smaller actions to minimize the phenomenon of nurses' departure from hospitals [24].

Conclusions

As with most hospitals in the world, the issue of nurses' intention to leave is increasing in Greece as well, especially during the years of the economic crisis. The conclusion derived from this study is that well-known effective practices for maintaining human resources should not be edged out. Particular emphasis needs to be placed on wage adjustments, education and distribution of benefits in a fair manner to prevent the intention of withdrawal and reverse the impetus to quit the profession or migrate to northern countries.

These strategies, in combination with human resource planning, form a stable and positive working environment and, thus, commit nurses to the organizations they work for. Moreover, they ensure better healthcare services and patient safety conditions enabling the healthcare system to respond effectively to the negative consequences of the economic crisis [55,56].

Limitations and Further Research

There are some limitations in the present study which may affect the generalizability and represent ability of its results.

Data from other hospitals and/or other parts of Greece were not collected because of time restraints. Thus, new studies across a wider hospital network in the country are needed in order to evaluate the extent of the phenomenon in Greece.

Moreover, additional factors such as organizational commitment have been shown to be associated to the intention to withdraw from the nursing profession [54,57]. These factors were not investigated in the present study, which also reinforces the need for further relevant

studies to increase the generalizability of these results and capture and interpret the phenomenon in greater depth.

Source of funding

The authors did not receive any financial support for conducting the present survey and publishing the report.

Ethical approval

For the conduction of the survey, ethical approval was received at the request of the researchers (No. 984/22-1-2016) both from the Nursing Department of the General Hospital of Kavala and the administration of the 4th Health Region of Macedonia and Thrace. There was also a commitment regarding the delivery of findings after data collection. Completion of the questionnaires was voluntary based on the consent of the participants. There was absolute confidentiality and anonymity in data collection and processing.

Acknowledgements

The authors acknowledge the contribution of the nurses from the General Hospital of Kavala who participated in the survey in their willing, crucial and important response in completing the questionnaires in order to carry out this study.

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