

**Investigating the relationship between intrinsic and extrinsic reward, job satisfaction,  
organisational commitment and turnover intention**

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- The references as well as the style as prescribed by the *Publication Manual (6<sup>th</sup> edition)* of the American Psychological Association (APA) were followed in this mini-dissertation. This practice is in line with the policy of the Programme in Industrial Psychology of the North-West University, Potchefstroom Campus to use APA style in all scientific documents.
- The mini-dissertation is submitted in the form of a research article. The editorial style specified by the *South African Journal of Industrial Psychology* (which agrees largely with the APA style) is used, but the APA guidelines were followed in constructing tables.

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- **DECLARATION**

I, Anntha Visser, hereby declare that “Investigating the relationship between intrinsic and extrinsic reward, job satisfaction, organisational commitment and turnover intention” is my own original work and that the opinions and views expressed in this work are those of the authors and relevant literature references shown in the references.

I further declare the content of this research will not be handed in for any other qualification at any other tertiary institution.

ANNTHA VISSER

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Theoretical model of job retention for home healthcare nurses



## SUMMARY

**Title:** Investigating the relationship between intrinsic and extrinsic reward, job satisfaction, organisational commitment and turnover intention

**Key terms:** Intrinsic reward (promotion opportunities, recognition and workload), extrinsic reward (policies and practices, relationships at work and pay satisfaction), job satisfaction, organisational commitment, turnover intention, nurses, skills shortage.

Retention strategies in the nursing profession have been a significant subject among researchers for decades. The current shortages of these skilled professionals have reached an alarming extent globally, making it difficult for organisations to retain these workers, also in South Africa. It has become evident that nursing professionals from South Africa emigrate to other countries for more lucrative remuneration, sophisticated work resources and better career opportunities, impacting the South African economy and nursing workforce negatively.

The general objective of the research was to determine whether a relationship exists between intrinsic and extrinsic rewards, job satisfaction, organisational commitment and turnover intention among a group of South African healthcare workers in the private healthcare sector. Specifically of interest was also to see if nurses' turnover intention could be predicted by the other variables.

A cross-sectional survey design was used. A convenience sample of 152 healthcare workers was obtained from three private hospitals in the Gauteng and North-West provinces. A measuring instrument for intrinsic and extrinsic rewards was adapted from a previous study, and applied with measures of job satisfaction, affective organisational commitment and turnover intention.

Results indicated that the measure of rewards did not present with sufficient reliability, and it was subjected to factor analysis. This delivered two reliable factors, which were labelled *Objective experience of rewards* and *Perceived lacking organisational support*. Objective experience of rewards showed to be significantly related to job satisfaction and inversely to

turnover intention, and Perceived lacking organisational support was significantly negatively related to job satisfaction and positively to turnover intention. It was also seen that both job satisfaction and objective experience of rewards showed predictive value in terms of nurses' turnover intention.

Conclusions and limitations regarding this study were made, and recommendations regarding the profession and future research are made.

## OPSOMMING

**Titel:** Die impak van intrinsieke en ekstrinsieke beloning op verpleegsters se werksbevrediging, organisatoriese verbintenis en voorneme om hul dienste te beëindig.

**Sleuteltermes:** Intrinsieke beloning (bevorderingsgeleenthede, erkenning en werklading), ekstrinsieke beloning (beleid en praktyk van die organisasie, verhouding met kollegas en tevredenheid met beloning), werkstevredenheid, organisatoriese verbintenis en voorneme om werk te beëindig, verpleegsters, vaardighede tekort.

Verpleegretensiestrategieë is 'n geruime tyd reeds 'n belangrike navorsingsonderwerp. Die huidige tekort aan vaardige professionele werkers het 'n kritieke punt op globale vlak bereik, wat dit moeilik maak vir organisasies om hierdie werknemers in diens te behou. Suid-Afrika is geen uitsondering nie. Dit blyk verder dat al hoe meer professionele verpleegpersoneel Suid-Afrika verlaat en na ander lande met aantreklike salarisse, gevorderde toerusting en geleenthede vir beroepsontwikkeling emigreer. Hierdie aspekte het 'n negatiewe impak op die land se ekonomiese groei sowel as die huidige beskikbare verpleegpersoneel in die land.

Die algemene doelstelling van die studie was om vas te stel of daar 'n verhouding bestaan tussen intrinsieke en ekstrinsieke beloning, werkstevredenheid, organisasieverbintenis en voorneme om te bedank onder 'n groep Suid-Afrikaanse verpleegpersoneel in die privaat gesondheidsorgsektor. Spesifiek van belang was om te bepaal of verpleegsters se voorneme om te bedank voorspel kan word deur ander veranderlikes.

'n Dwarssnitopname-ontwerp is in die studie gebruik. 'n Gerieflikheidssteekproef is geneem uit 152 verpleegpersoneel in privaat hospitale in Gauteng en Noordwes. 'n Meetinstrument vir intrinsieke en ekstrinsieke beloning is saamgestel uit 'n vorige studie, en tesame met skale wat werkstevredenheid, affektiewe organisasieverbintenis en voorneme om te bedank meet, gebruik.

Resultate het daarop gedui dat die meetinstrument wat vir beloning gebruik was nie genoegsame betroubaarheid getoon het nie, en was onderworpe aan 'n faktorontleding. Die faktorontleding het twee betroubare faktore opgelewer wat genoem is *Objektiewe ervaring*

*van beloning en Beskoude gebrek aan organisasie ondersteuning.* Objektiewe ervaring van beloning het 'n beduidende verwantskap met werkstevredenheid getoon en 'n omgekeerd negatiewe verband met voorneme om te bedank, verder het beskoude gebrek aan organisasie ondersteuning 'n beduidend negatiewe verwantskap met werkstevredenheid en positief verwantskap met voorneme om te bedank getoon. Dit was ook vasgestel dat beide werkstevredenheid en objektiewe ervaring van beloning voorspellende waarde toon in verpleegpersoneel se intensie om te bedank

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# CHAPTER 1

## 1. INTRODUCTION

This mini-dissertation focuses on the influence of intrinsic and extrinsic rewards on job satisfaction, organisational commitment and turnover intentions of a sample of nurses in the private sector in Gauteng and North-West Province in South Africa. This first chapter presents the problem statement, whereupon the research objectives will be discussed. The methodology that was applied is described, and the chapter closes off with a description of the chapters to follow.

### 1.1.1 Problem statement

There have been substantial changes in the demands placed on nurses in the last few decades. Political and administrative authorities require more work to be done in less time, putting severe pressure on nurses (The Swedish Public Health Report, 2001). Humpel and Caputi (2001) further pointed out that the nature of nurses' work is extremely stressful, with factors like unmanageable working hours, increased workload, poor salaries and working conditions challenging this industry more than others (Mokoka, Oosthuizen & Ehlers, 2010). Concurrently, the scarcity of nurses and high turnover rates within the healthcare system are compromising the quality of care nurses provide patients with (Hwara, 2009). South Africa is a country faced with a real crisis as the high turnover rates among nurses, coupled with the decreasing numbers of nursing recruits, poses a real threat to South African healthcare delivery (Mokoka et al., 2010). It is therefore vital to guarantee motivated nurses, not only to deliver high quality patient care, but also to establish their active participation in health care organisational processes to ensure cost-effective service rendering, high morale and work productivity (Jooste & Klipert, 2002).

As qualified employees are becoming increasingly scarce, it has become essential for managers to develop a better understanding of human motivation, recognition and reward systems to attract, retain and sustain these skilled professionals (Bowen, 2000). People differ in terms of their eagerness to commit their energies and resources to the accomplishment of the organisation's objectives (Cascio & Anguinis, 2005). Most organisations offer various benefits to aid in retaining employees (Popescu, 2011). According to Robbins, Odendaal and Roodt (2005), rewards should be subject to performance, in other words, if the individual

sees the relationship between reward and performance as low, the results could include low performance, a decrease in job satisfaction, and an increase in turnover. Given the finding reported above, it will be of interest to investigate the predictive effects of different types of rewards on job satisfaction, organisational commitment and turnover intention among nurses, as De Gieter et al (2006) highlighted that previous studies placed a lot of emphasis on identifying nurses rewards, focusing primarily on work related attitudes and behaviour, which resulted in reward being studied as an additional and isolated variable. The study further noted that an apparent focus on reward is still quite exceptional in nursing research, probably illustrating the difficulty of differentiating between motivators and rewards, supporting Popescu's (2011) statement that the general assumption has been that intrinsic and extrinsic rewards have an independent influence on a person's motivation. It is therefore evident that rewards play a significant role both on individual and organisational level, as it influences employee's perceptions, behaviour and attitude in a variety of ways, and in turn the organisation's effectiveness and efficiency is affected.

In order for organisations to effectively manage reward systems, employees' satisfaction should be evaluated holistically according to several reward factors. Lawler (in Ivancevich, Konopaske, & Matterson, 2005), summarised five conclusions based on behavioural science research regarding the individual's satisfaction with reward. Firstly, satisfaction with a reward is a function of both how much the individual in actual fact receives and how much the individual thinks they should receive. When the individual perceives their reward as inadequate, they will feel dissatisfied. A typical example will be when individuals work long hours to complete certain tasks and upon completion, receive little or no recognition. The individual becomes dissatisfied because of the perception that they deserved to be adequately rewarded for the tasks rendered. Secondly, an individual's feeling of satisfaction is influenced by their comparison of the reward with that of other individuals who hold similar positions. When individuals compare their personal input/output ratio with those of others and consider the result as unfair, it may contribute to dissatisfaction. Thirdly, satisfaction is influenced by how satisfied individuals are with both intrinsic and extrinsic reward. Intrinsic and extrinsic reward is equally important to individuals as it satisfies different needs. Fourthly, people differ in the type of reward they desire. Preferred reward varies at different points in an individual's career and different situations, and is also dependent on the age of the individual. Lastly, some extrinsic rewards are satisfying because they lead to other rewards. For

example, money is a reward that will subsequently lead to things such as prestige, autonomy, independence, security and shelter.

As noted above, reward can be divided into two broad categories: extrinsic and intrinsic reward. Intrinsic reward can be defined as “a reward self-administrated by the person” (Ivancevich, et al., 2005, p. 217). These rewards provide the employee with a feeling of satisfaction and gratification towards their job. A person will typically experience intrinsic reward when they successfully complete a challenging task (Seta, Paulus, & Baron, 2000). Extrinsic reward, in contrast, can be defined as “a reward that is initiated outside the person” (Ivancevich et al., 2005, p. 218). Extrinsic reward includes external factors like pay, promotional opportunities, fringe benefits and similar manifestations of status and prestige (Vroom, 1990). Most jobs provide opportunities for both intrinsic and extrinsic reward; therefore, it is very important to understand the relationship between these two factors. The general assumption is that extrinsic reward strengthens intrinsic reward when the employee can attribute the source of the extrinsic reward to their own effort (Ivancevich et al., 2005). According to Seta et al. (2000), employees will function optimally when both extrinsic and intrinsic factors are present in the workplace making the understanding of these rewards important to both the science and organisations, in order to attract and retain a high-performance workforce (Popescu, 2011).

Research by Stember (1978) has produced different conclusions about the type of reward that is most related to job satisfaction in the nursing profession. Nurses regard the following intrinsic rewards as the most important: the work itself (Stember, 1978; White & Mequire, 1973); opportunities for professional growth (Seybolt, 1979; Seybolt, Pavett, & Walker, 1978); autonomy (Slavitt & Stamps, 1979; Weismann, 1982) and job responsibility (Slavitt & Stamps, 1979). The extrinsic rewards which are important to nurses are interpersonal relations (Everley & Falcione, 1976; Slavitt & Stamps, 1979), salaries (Ginzberg, Patray, Ostow, & Brann, 1982; Slavitt & Stamps, 1979; Wandelt, Pierce, & Weddowson, 1981) and organisational policies and practises (Everley & Falcione, 1976; Slavitt & Stamps, 1979). These results, although of interest because it is particular to the nursing profession, are quite dated. No other recent literature specifically on rewards relevant to the nursing profession could be traced. The re-evaluation of internal and external rewards thus appears relevant and timeous. It is important that managers recognise the impact intrinsic reward has on the modern work environment, because these rewards are the key to unlocking the power of

personal motivation (Bowen, 2000). Intrinsic reward can be explained through completion, achievement, autonomy and personal growth (Ivancevich et al., 2005). Most motivated employees have the need for successful task completion, because the opportunity to complete a task develops a feeling of self-reward within the individual, creating a very powerful motivating effect. Sense of achievement is a self-administered reward that is derived when a person completes a challenging task. It is important for organisations to consider individual differences carefully before deciding on the implementation of an achievement reward system, as individuals differ in terms of the value they attach to different rewards. Organisations that can provide employees with achievement opportunities and who recognise the achievement when it occurs may significantly increase organisational commitment. Some employees may have the need for an authoritative position within the organisation. The latter aspiration is an indication of a need for autonomy, where individuals have the freedom to make their own choices without being closely supervised. For this class of employee, such conditions will positively reinforce the feeling of personal growth. This important concept refers to an individual's development when they perceive their skills expanding. Most often, employees become dissatisfied with their job and with the employing organisation when there is no provision for or encouragement of new skill development, i.e. no room for personal growth. It is important for employers to ensure intrinsically interesting tasks but also to motivate their employees to work more productively and to know that their efforts will be rewarded (Seta et al., 2000).

Extrinsic reward is external from the job itself and administered externally. There is a strong correlation between employee commitment and how generous or stingy managers appear to be in terms of monetary reward (Bowen, 2000). According to Chingos and Marvick (1997), contemporary organisations are challenged to define an appropriate balance between performance and incentive plans. Ivancevich et al. (2005) divide extrinsic reward into financial reward, in terms of salaries and wages and employee benefits, and interpersonal reward and promotions. Employees will experience a high degree of job satisfaction when the reward system is perceived as fair, and provides a sense of control (Seta et al., 2000).

Job satisfaction is the term used to explain how people feel about their jobs and various aspects of their jobs (Spector, 1997). Kreitner and Kinicki (1995) also define job satisfaction as an affective or emotional response towards various facets of one's job. Job satisfaction therefore cannot be seen as a unitary concept. Rather, an individual can be satisfied with one



aspect of his/her job and dissatisfied with one or more other aspects (van Zyl, 2003). According to Noe, Hollenbeck, Gerhart and Wright (in van Zyl, 2003), job satisfaction is a perception that a person's work fulfils important job values, and explains three aspects that influence employees' job satisfaction. First, job satisfaction includes a person's values. These values are the conscious and unconscious desire of the individual to obtain certain goals. Secondly, since people possess different perceptions about values they consider as imperative, it is crucial to ascertain the nature and degree of job satisfaction that an employee experiences within their working environment. One person will value monetary reward above all else, another work itself and the challenges the job provides. Third, it is a person's perception of their current work situation, relative to their values, that matter. If the individual experiences their current work situation as challenging and perceives their reward as fair, they will experience high levels of job satisfaction. Individuals who experience high levels of job satisfaction are likely to be better ambassadors for their organisations and show more organisational commitment (Agho, Price, & Mueller, 1992).

Robbins, Odendaal and Roodt (2005) define organisational commitment as a state in which an employee identifies with a particular organisation and its goals and objectives to maintain membership in the organisation. Organisational commitment, according to Meyer and Allen (1991), can take three distinct forms, namely continuance, normative or affective commitment. Continuance commitment refers to an employee's commitment to an organisation based on the recognition of the costs it will involve in leaving the organisation. Thus, an employee with strong feelings of continuance commitment will remain working for the organisation because they have to, either because of low perceived alternatives or because of the personal sacrifices involved with leaving the organisation. Normative commitment refers to an employee's commitment to an organisation because they feel obligated to do so. Thus, they might think that staying with the organisation is 'the right thing to do', because the organisation invested in their training or gave them a good opportunity to build a career. Affective commitment refers to identification with the organisation, involvement and emotional attachment to the organisation. An employee who experiences strong affective commitment will stay with the organisation because they want to do so. Organisations value commitment amongst their employees because it reduces withdrawal behaviour like absenteeism and turnover (Maree, 2007). Popescu (2011) identifies three attitudes related to organisational commitment namely: a sense of identification with the organisation's goals; a feeling of involvement in the organisational duties and a feeling of loyalty towards the

organisation, further noting that there is little research on the relationship between organisational commitment and rewards. Of the different forms of commitment, affective commitment is the most effective predictor of voluntary turnover (Griffeth, Hom, & Gaerter, 2002).

According to Fox and Fallon (2003), previous studies have shown that behavioural intention to leave an organisation consistently correlates with actual turnover. Maertz and Campion (1998) conclude that it is evident that the variables associated with turnover intentions are consistent with actual turnover levels. Employees may leave organisations for a number of reasons, some pursue higher career goals, some want to escape a negative working environment and some are drawn to financially more attractive opportunities (Mathieu & Zajac, 1990). Contemporary organisations are challenged to develop reward systems that consider a variety of factors, including the individual employee's personal importance and the organisation's goals. Based on these factors, challenging jobs that will give employees a feeling of satisfaction, and in the process motivate the employee to stay committed to the organisation, need to be designed (Ivancevich et al., 2005). Employee retention has become a perplexing problem for all kinds of organisations. When individuals are dissatisfied at work, it will be evident in a lack of job involvement, satisfaction and organisational commitment, which could eventually lead to the intention to sever the relationship with the organisation (Afolabi, 2002).

Organisations need to foster a feeling of organisational commitment with their employees because an employee who leaves the organisation implies a direct cost on the organisation in the form of recruiting, selecting and training of new employees (Popescu, 2011). Nurses are the closest to the community and therefore act as the link between individuals (whether they are sick or well), their families and the rest of the healthcare system (Klaas, 2007). Job satisfaction and organisational commitment can be viewed as essential factors that influence an employee's perception toward their job, which is clearly related to the intention to leave the organisation due to unfulfilled job needs.

For this study it is important to understand that nurses form part of essential services, meaning that these workers may not legally strike. Major nursing unions, with membership of tens of thousands, engaged in a public servant strike in August 2010 whilst this study was conducted, demanding an 8,6% wage increase, and patients were left with the devastating

consequences. During the strike, it was evident that these workers play a vital role in our society, considering the detrimental effect of their actions, or at least the lack thereof, on the patients. The need for better salaries for nurses and other professional nurses in the health services sector of South Africa has been recognised (South African Department of Labour, 2008).

The hypothesis put forward in this study is that the lower the levels of reward experienced by an employee, the lower their experience of job satisfaction and organisational commitment will be, in turn leading to increased turnover intention. This is supported by Poon (2003) who stated that in many studies job satisfaction was established to be the significant predictor of turnover intention. Thus, turnover is stimulated when employees are not affected by some work environmental aspects (Bigliardi, Petroni & Dormio, 2005). The purpose of this study will be to develop a scientific framework of specific intrinsic and extrinsic rewards identified by nursing practitioners within the private sector in South African contexts, and apply these outcomes on individual and organisational levels in order to ensure increased levels of job satisfaction and organisational commitment and a decrease in turnover intention by these workers. Research regarding the influence of reward on nurses' feelings of job satisfaction, organisational commitment and the occurrence of turnover intention may prove useful in managing these variables for this important occupational group.

The following research questions emerge from the above mentioned problem statement:

- What is the relationship between intrinsic and extrinsic reward, job satisfaction, organisational commitment and turnover intention according to the literature?
- Can the reliability of the measures used for the composition of the adjusted questionnaire be used for the purpose of this study?
- What is the relationship between intrinsic and extrinsic reward, job satisfaction, organisational commitment and turnover intention for a group of nurses in the healthcare industry?
- Can intrinsic and extrinsic reward, job satisfaction and organisational commitment be used to predict turnover intention among nurses in the healthcare industry?
- What recommendations can be made regarding the management of turnover intention of nurses based on their experiences of intrinsic and extrinsic reward, job satisfaction and organisational commitment?

## **1.2 RESEARCH OBJECTIVES**

Research objectives can be divided into general and specific objectives.

### **1.2.1 General objective**

The general objective of this study is to determine the relationship between intrinsic and extrinsic reward, job satisfaction, organisational commitment and turnover intention among nurses in the healthcare industry.

### **1.2.2 Specific objectives**

- To determine the relationship between intrinsic and extrinsic reward, job satisfaction, organisational commitment and turnover intention according to the literature.
- To determine the reliability of the measures used for the composition of the adjusted questionnaire that will be used for the purpose of this study.
- To determine the relationship between intrinsic and extrinsic reward, job satisfaction, organisational commitment and turnover intention among a group of nurses in the healthcare industry.
- To determine if intrinsic and extrinsic reward, job satisfaction and organisational commitment can be used to predict turnover intention among nurses within the healthcare industry.
- To make recommendations regarding the management of intrinsic and extrinsic reward, job satisfaction, organisational commitment and turnover intention.

### **1.3. PARADIGM PERSPECTIVE OF THE RESEARCH**

A certain paradigm perspective, that includes the intellectual climate and the market of intellectual resources, directs the research. The purpose of the paradigm perspective of the research is to define the research within the structure of the relevant research context (Mouton & Marais, 1992). The paradigm perspective will be discussed in terms of the intellectual climate, market of intellectual resources, disciplinary framework and the relevant models and theories.

#### **1.3.1 The intellectual climate**

According to Mouton and Marais (1992), the intellectual climate refers to the variety of non-epistemological value systems/beliefs that are underwritten in any given period in a discipline. Furthermore, they conclude that it refers to a set of beliefs, values and assumptions that do not unswervingly deal with the epistemological views of the scientific research practice, because it normally originates in a non-epistemological context (Mouton & Marais, 1992).

The proposed research forms part of a framework of the behavioural sciences, more specifically Industrial Psychology. Industrial Psychology can be described as the scientific study of people within their work environment. This suggest that the research will include scientific observation, evaluation, optimal utilisation and influencing of normal and to a lesser degree, deviant behaviour, in interaction with the environment (physical, psychological, social and organisational), as part of the individual's interaction with the world of work (Muchinsky, Kriek, & Schreuder, 2002).

Organisational psychology and career psychology are two sub-disciplines of Industrial Psychology and will mainly be focused on in this research. Organisational Psychology is concerned with the organisation as a system involving individuals and groups, and the structure and dynamics of the organisation. The basic aims are fostering worker adjustment, satisfaction and productivity, as well as organisational efficiency (Bergh & Theron, 1999). Organisational psychology is represented in the proposed study by focusing on the organisation's systems that result in nurses' job satisfaction, organisational commitment and

turnover intention (this includes aspects such as recognition, remuneration and support systems).

Career psychology is concerned with the way employees think about their careers, prepare for their occupations, enter the working environment, pursue and change occupations, and withdraw from the world of work in order to devote the knowledge and energies they obtain to leisure activities that may bear a resemblance to the paid work they performed, or that may involve quite different types of knowledge and skill (Vondracek, 2001). Career psychology is very relevant to the proposed study in terms of nurse's satisfaction with their job and the degree of organisational commitment they experience, that in turn may ultimately influence turnover intention.

### **1.3.2. Meta-theoretical assumptions**

Within this study, four relevant paradigms will be presented. Firstly, the literature review is done within the humanistic paradigm and systems theory, and secondly the empirical study is done within the functionalistic and positivistic paradigms.

#### **1.3.2.1 Literature review**

The *humanistic paradigm* is a school of thought that emphasises that people are free agents who have the ability to make choices, and be intentional and aware during their actions. According to this paradigm, people can be affected by their relationships with others and that they are more than the just the sum of their parts. This is considered an essential criterion for psychological health (De Carvalho, 1991). This paradigm is reflected in this research in the assumption that nurses' fulfilment with regards to their current intrinsic and extrinsic rewards in the organisation in which they render their services, can provide a clear indication of their satisfaction concerning their job, their commitment towards their organisation as well as their intention to terminate their services with the particular organisation.

Lundin (1996) defines a system as a set of items together with relationships amid the items and between their attributes. *Systems theory* is one of the most influential conceptual implements available for understanding the dynamics of organisations and organisational change (Lundin, 1996), and in this research it is relevant as far as intrinsic and extrinsic

factors of reward impact on nurses job satisfaction, organisational commitment and turnover intention.

### **1.3.2.2 Empirical study**

According to Babbie, (1979), the functionalistic paradigm, being a quantitative approach, is concerned with perceiving society (organisations) in a way that will produce useful empirical knowledge (this paradigm is primarily regulative and pragmatic). Plug, Louw, Gouws and Meyer (1997) state that functionalism assumes that units of psychological phenomena can be explained through relationships, and that these explanations serve to improve human alteration and endurance.

The positivistic paradigm is based on the hypothesis that only observable and measurable information should be taken into account in research (Winberg, 1997). Furthermore, this paradigm is based on the supposition that one can scientifically determine the rules central to social life. The positivist ontology can be defined as “to be perceived”, and the virtual epistemology is the association theory of truth. This can be the decisive factor for judging a scientific theory, and whether or not our knowledge claims to correspond to what lends itself to our senses (Ardebili, 2001). In this study, nurses are studied as actors and the assumptions are made that significant inferences can be illustrated about their behaviour from survey-type measurements.

### **1.3.3 The market of intellectual resources**

The market of intellectual resources refers to that collection of beliefs that can directly enquire into the epistemological standing of scientific statements. It can be sub-divided into two main types, namely the theoretical beliefs and the methodological beliefs (Mouton & Marais, 1992).

#### **1.3.3.1 Theoretical beliefs**

Theoretical beliefs focus on all judgments regarding social phenomena. These can be classified as judgments regarding the ‘what’ and ‘why’ of human phenomena and includes all conceptual definitions, models and theories of the research (Mouton & Marais, 1992).

### **1.3.3.1.1 Conceptual definitions**

The relevant conceptual definitions of intrinsic and extrinsic reward, job satisfaction, organisational commitment and turnover intention are given below:

Intrinsic reward is defined as one that is self-administrated by the person. This reward provides the individual with a sense of satisfaction or gratification, and often a feeling of pride or of work well done (Ivancevich et al., 2005).

Extrinsic reward is initiated outside the individual. This is all financial reward, interpersonal reward and promotional opportunities the organisation provides employees with (Ivancevich et al., 2005).

Because of the fact that job satisfaction involves employee's emotional feelings, it has major consequences on their lives. Job satisfaction can be defined as a positive affective orientation towards employment (Mueller & McCloskey, 1990). Job satisfaction has thus to do with an individuals' evaluation of his job, and this perception is influenced by the person's unique feelings and values (Buitendach & De Witte, 2005).

Organisational commitment, according to Robbins et al. (2005), is a state in which the employee identifies with the particular organisation and its goals, and wishes to maintain membership in the organisation.

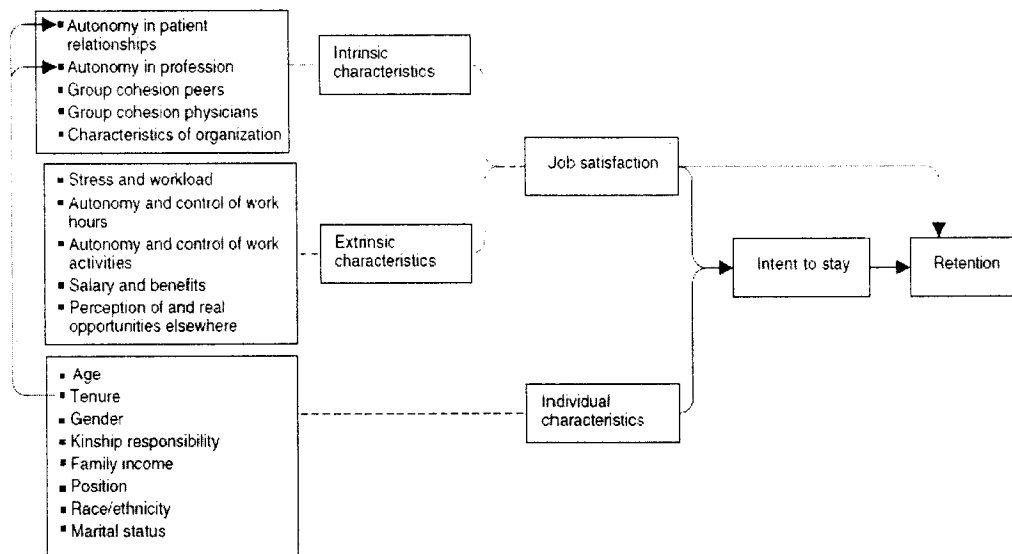
Turnover intention has been described as the conscious and deliberate willingness to leave the organisation. It is often measured within a certain interval, and has been described as the last in a sequence of withdrawal cognitions. It is a mindset of thinking about quitting and intent to search for alternative employment (Tett & Meyer, 1993).

### **1.3.3.1.2 Models and theories**

For this particular study two models will be incorporated: (1) Ellenbecker's (2003) theoretical model of job retention for home healthcare nurses. The study focuses on the theoretical theory of job retention indicating factors within a person that energise, direct, sustain and stop



certain behaviour. This study derived from the content theory, namely Ellenbecker's (2003) theoretical model of job retention for home healthcare nurses.



**Figure 1.** *Theoretical model of job retention for home healthcare nurses*

Ellenbecker (based on Alexander et al., 1998; Taunton et al., 1997; and components of Neal, 2000) designed the theoretical model that suggests that:

- Job satisfaction is directly related to retention.
- Job satisfaction and individual nurse attributes are indirectly correlated to retention, through intention to stay.
- Tenure (number of years in current position) is indirectly correlated to retention through autonomy, as an intrinsic attribute of job satisfaction.
- Intent to stay is directly related to retention.

The model identifies two determinants of job satisfaction, namely: intrinsic (Autonomy in patient relations, autonomy in profession, group cohesion peers, group cohesion physicians and the characteristics of the organisation) and extrinsic (Stress and workload, autonomy and control of work hours, control of work activities, perception of and real opportunities elsewhere) characteristics. Ellenbecker suggests that when a nurse experiences a high degree of job satisfaction, he/she will feel comfortable remaining in their current position reducing his/her intent to terminate their service. The model further suggests that job satisfaction and

nurses' individual characteristics are indirectly correlated to retention through intention to stay. The individual characteristics were identified as: Age, tenure, gender, kinship responsibility, family income, position, race/ethnicity and marital status. However, this model presents some shortcomings for this specific study and could better be explained in conjunction with Herzberg's theory (Herzberg, 1968). This study focuses on the content theories of motivation that determine factors within a person that energize, direct, sustain and stop certain behaviour. This study derived from the content theory namely: Herzberg's Two-factor theory.

Herzberg (1968) developed a content theory known as the Two-factor theory of motivation. In the theory, Herzberg suggests two steps in understanding employee motivation and satisfaction. His findings about an individual's satisfaction with their job are based on a dual continuum. First, there is a set of extrinsic conditions in the job context which may lead to job dissatisfaction when not present. If the conditions are present, it does not necessarily motivate the employees. These conditions are the *dissatisfiers* or hygiene factors, since they are needed to maintain at least a level of "no satisfaction" (these factors include: salary, job security, working conditions, status, company procedures, supervision, interpersonal relations with peers and supervisors). Secondly, there are a set of intrinsic conditions, in the job content, that when present would build strong levels of motivation that will most often lead to good job performance. If these conditions are not present, jobs do not prove to be highly satisfying. The motivators (Achievement, recognition, responsibility, advancement, job content and growth opportunities) are directly related to the nature of the work itself. When these motivators are present, they contribute directly to satisfaction (Ivancevich et al., 2005).

The theory of Herzberg's will be applied in this study to determine whether nurse's intrinsic and extrinsic reward relates to their job satisfaction and organisational commitment, and whether these experiences relate to turnover intention.

### **1.3.3.2 Methodological beliefs**

Methodological beliefs are the beliefs that make conclusions about the structure and nature of science as well as scientific research (Mouton & Marais, 1992). The empirical study is presented within functionalistic and positivistic frameworks. According to Neuman (1997),

the positivistic framework is regarded as a structured method combining deductive information with empirical observation drawn from human behaviour.

The empirical data will be collected in the research process as prescribed from a quantitative approach. This will include statistical analysis of the gathered data, characterised by measuring objective facts, focusing on variables and seeking reliability (Neuman, 1997).

The research method will consist of a literature review and empirical study.

#### **1.4.1 Literature review**

The literature review will focus on intrinsic and extrinsic organisational reward, job satisfaction, affective organisational commitment and turnover intention in general, and specifically how these variables manifest and interact in the nursing profession. The following sources will be consulted:

- Internet search engines and electronic storage facilities such as EBSCOHost: psycINFO, JSTOR.
- The university libraries.
- Psychology, Labour Relations, Industrial Psychology and Nursing journals.

## **1.4.2 Empirical study**

The empirical study will consist of the research design, the participants, the measuring instruments and the statistical analysis.

### **1.4.2.1 Research design**

This exploratory research will be conducted utilising a cross-sectional research design. According to Struwig and Stead (2005), a cross-sectional design is a research design where the participants are assessed at a single time in their life. This design is cost efficient and practical, and allows for studying the relationships between the different variables. This design is suited to the current proposed research project because of the low costs involved and the available time. The nurses will complete a survey questionnaire at one point in time, making it practically feasible and providing sufficient data for the proposed study.

### **1.4.2.2 Procedure**

The measuring battery will be compiled. Permission to conduct the study in the respective hospitals will be obtained from the Hospital Managers. A letter requesting participation will be given to the hospital prior to the administration of the measuring battery. The motivation letter will be included in the survey. Each participant will be informed about the ethical aspects regarding the research. Line Managers will distribute and collect the completed questionnaires. The questionnaires will be distributed to identified hospitals in December 2008 and will be collected by the researcher in January 2009.

### **1.4.2.3 Participants**

The study population will consist of nurses. The participants are employed at private hospitals, in the Gauteng and North West Provinces. The study population represents a diverse group of nurses in terms of language and cultural background. Sufficient nurses are available ( $N=152$ ) to make a survey meaningful.

#### 1.4.2.4 Measuring battery

Measures of intrinsic and extrinsic reward (developed for the purpose of this study and based on Lephala, 2006), pay satisfaction (Judge & Welbourne, 1994), job satisfaction (Hellgren, Sjöberg and Sverke, 1997 - based on Brayfield & Rothe, 1951), affective organisational commitment (Allen & Meyer, 1990) and turnover intention (Sjöberg & Sverke, 2000) will be utilised. The survey will also include a section that requires participants to provide some biographical information.

- **Intrinsic and extrinsic reward**

The questionnaire that will be used in this study will be compiled and adapted from an existing measure developed and reported on by Lephala (2006), for the requirements of a Masters' dissertation measuring the factors that influence nurses turnover in selected hospitals in England.

Intrinsic reward will include aspects such as promotion, recognition and workload. *Promotion* will gauge to what extent the nurses perceive promotion opportunities at the workplace. It is assessed with 3 items taken from the study of Lephala (2006): "I experience fair promotion opportunities"; "In this organisation experience is often the only consideration for promotion" and "Promotions are regular". *Recognition* will be assessed with three items taken from Lephala (2006) to determine the contentment with the degree of recognition nurses experience within their organisation. *Workload* will determine to what extent nurses experience their workload as fair and manageable. It is assessed with 4 items taken from the study of Lephala (2006), an example of which is the item "I have to work very hard". All items will be gauged with a 5-point Likert scale with 1 (Strongly disagree) and 5 (Strongly agree), with a high score thus reflecting greater experience of the measured dimension.

The dimensions of extrinsic reward that will be measured include policies and practices, relationships at work and satisfaction with pay. Items from Lephala (2006), measuring perceived fairness of *policies and practices* in the organisation, involve the nurse's perception of the organisation's systems and practices as being reasonable and fair. *Relationships* at work will be measured to determine nurse's satisfaction with relationships with their supervisors and colleagues. The items that will be used for both these scales are derived from the study of Lephala (2006), and will be measured on a 5-point Likert scale

with 1 (Strongly disagree) and 5 (Strongly agree), with a high score being a reflection of greater perceived fairness of policies and procedures and satisfaction with relationships with supervisors and colleagues. Nurse's *satisfaction with their pay* will be measured by using Judge and Welbourne's (1994) pay satisfaction questionnaire. The questionnaire consists of 5 items and response alternatives vary from 1 (Strongly disagree) to 5 (Strongly agree), with a high score reflecting strong feelings of pay satisfaction. A typical item from this scale is "I am very happy with the amount of money I make" (Item 1). In the study by Judge and Welbourne (1994), Cronbach alpha coefficients were obtained in a longitudinal study of 0,80 and above.

Determining the reliability of these new scales for measuring selected intrinsic and extrinsic reward of nurses presents an important contribution of the proposed study. The reliability of the new scales will be determined through factor analysis and Cronbach alpha coefficients.

The index of **Job Satisfaction** by Hellgren, Sjöberg and Sverke (1997), based on (Brayfield & Rothe, 1951) will be used to determine the participants' overall satisfaction with their work. The scale contains 3 items measuring overall job satisfaction on a 5-point Likert scale (1=strongly agree to 5= strongly disagree), with a high score indicating high levels of job satisfaction. The corrected odd-even reliability coefficient according to Hellgren et al. (1997) is 0,86. A typical item representing this scale is "*I enjoy being at my work*". This scale has been adapted and validated by Näswall, Baraldi, Richter and Sverke (2006).

The **Affective Organisational Commitment Scale (AOC)** is the short version of the scale developed by Allen and Meyer (1990), consisting of 4 items. The response alternatives range from 1 (disagree) to 5 (agree), and a high score reflects strong commitment. A typical item representing this scale is "*I enjoy discussing my organisation with people from outside*". The internal consistency for the scale has been confirmed at the 0,80 level (Suliman & Iles, 2000). Buitendach and De Witte (2005) obtained an alpha-coefficient of 0,65 for a South African sample of parastatal employees.

The **Turnover Intention** scale that will be used is as developed by Sjöberg and Sverke (2000), and consists of 3 items that measure the respondent's intention to leave his/her present position. A typical item representing this scale is "*I feel as if I could leave this job*". The response alternatives range from 1 (Strongly disagree) to 5 (Strongly agree), and a high

score typically reflects a strong intention on the part of the participant to leave his/her position. Sjöberg and Sverke (2000) obtained an alpha coefficient of 0.83 for this scale.

Some biographical questions will also be included. Information that will be gathered includes gender, age, home language, and type of work and position of the participant in his/her organisation.

#### **1.4.2.5 Statistical analysis**

The SPSS version 16.0 for Windows-programme (SPSS, 2008) will be used to carry out the statistical analysis. Descriptive statistics (e.g. means, standard deviations, skewness and kurtosis) will be used to describe the data (Field, 2006). Internal consistencies of the measuring instrument will be assessed by Cronbach alpha coefficients and inter-item correlations (Clark & Watson, 1995). Pearson product-moment correlation coefficients will be used to indicate the relationship between the variables. Effect sizes will be used to determine the practical significance of the findings. The cut-off points of 0,30 (medium effect) and 0,50 (large effect) will be used to determine practical significance of correlation coefficients (Cohen, 1988). Multiple regression analysis will be used to predict turnover intentions among the nurses with the use of job satisfaction, organisational commitment and intrinsic and extrinsic reward.

#### **1.5 Research procedure**

The measuring battery will be compiled. A letter requesting participation will be given to the hospital prior to the administration of the measuring battery. The motivation letter will be included in the test books. Each participant will be informed about the ethical aspects regarding the research, including voluntary participation and withdrawal, informed consent and confidentiality and anonymity of data.

#### **1.6 Chapter Summary**

In this chapter a brief introduction to the research study was given and the problem statement identified. The literature review provided a supportive motivation for the relevance of this study. The specific purpose of the study was formulated, the methodology which formed part

of an extensive literature review and empirical study was outlined, and a description of the methods used for the statistical analysis was described.



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**CHAPTER 2**  
**RESEARCH ARTICLE**

# INVESTIGATING THE RELATIONSHIP BETWEEN INTRINSIC AND EXTRINSIC REWARD, JOB SATISFACTION, ORGANISATIONAL COMMITMENT AND TURNOVER INTENTION

*Anntha Visser*

## ABSTRACT

The retention of qualified nursing staff is critical in managing health care. The objective of the current study was to determine the relationship between intrinsic and extrinsic reward on nursing staff's job satisfaction, organisational commitment and turnover intention. A cross-sectional survey design, with an availability sample, from private hospitals in Gauteng and North West ( $N=152$ ) was used. Five measuring instruments were utilised, specifically focused on pay and job satisfaction, organisational commitment and turnover intention. A measure of intrinsic and extrinsic reward was taken from previous research, and adjusted for the current study. Factor analysis produced two internally consistent factors, namely objective experience of rewards and perceived organisational support. Results indicated that turnover intention is negatively correlated with objective experience of rewards, and job satisfaction positively correlated with perceived organisational support. Regression analysis shows both job satisfaction and objective experience of rewards to be statistically significant predictors of turnover intention.

## OPSOMMING

Die doel van hierdie studie was om die verhouding tussen intrinsieke en ekstrasieke beloning op verpleegpersoneel se werksbevreëding, organisatoriese verbintenis en intensie om te bedank te bepaal. Die deursnee-opname-ontwerp met 'n beskikbaarheidsteekproef van privaat hospitale in Gauteng en Noordwesprovinsie ( $N=152$ ) is gebruik. Vyf meetinstrumente wat spesifiek op vergoeding met salaris, werksbevreëding, organisatoriese verbintenis en intensie om te bedank gefokus het, is in die studie gebruik. Verder is 'n vraelys wat intrinsieke en ekstrasieke vergoeding meet, saamgestel vanuit 'n vorige studie geneem en vir hierdie studie aangepas. Deur middel van faktor-analise is twee intern konsekwente faktore onttrek, naamlik objektiewe ervaring van beloning en waargenome organisatoriese-ondersteuning. Die resultate het getoon dat werkstevredenheid 'n negatiewe korrelasie toon met objektiewe ervaring van vergoeding en 'n betekenisvolle verband het met waarneembare organisatoriese ondersteuning. Regressie-

analyse het getoon dat beide werkstevredenheid en objektiewe ervaring van vergoeding  
voorspellers van 'n verpleegster se intensie om te bedank is.



## INTRODUCTION

According to Calhoun (2002), the nursing profession is significantly challenged in many countries around the world. Political and administrative authorities insist that more work gets done in less time, especially within the healthcare industry (The Swedish Public Health Report, 2001). In the United States, the rising shortage of competent nurses has reached crisis proportions, dramatically influencing the quality of patient care. This has resulted in unnecessary loss of life, insufficient care, unnecessary extended hospitalisation and additional cost of care (Strydom & Roodt, 2006). There is consensus today that South Africa is undergoing a profound and emergent skills shortage (Bhorat, Meyer, & Mlatsheni, 2002). Previously, shortages of nurses were limited to certain areas and specific countries but the current shortage has reached global proportions (Kimball & O'Neil, 2002).

The needs of health care workers in South Africa are profoundly underestimated, with statistics from the Organisation of Economic Cooperation and Development (OECD) clearly indicating that in 2005, as many as 35 000 South African nurses were either working in other countries or are not actively working in the health care system any longer (Horning, 2005). This alarming statistic would suggest that if these 35 000 nurses are contrasted with the 3331 qualified nurses who registered with the South African Nursing Council (SANC) during 2002, it becomes clear that approximately 11 years' worth of newly registered South African nurses were working abroad or outside the health care system during the period of 2005 (Oosthuizen & Ehlers, 2007). The question relevant to this study is whether the needs of nurses in South Africa are being understood, in order to provide the same care for these workers that they so willingly give to their patients.

The existence of numerous job opportunities overseas (Smetherham & Laurance, 2005), the effect of globalisation and the belief that one's career can be enriched by overseas experience, further contributes to making the situation almost uncontrollable for hospital managers. South Africa is one of the five most prominent countries for overseas recruitment (Vujicic, Zurn, Daillo, Adams & DalPoz, 2004), leading South African hospital managers to focus more on aspects of work that nurses find valuable, like processes and policies, managerial support and monetary recognition. Further problems hospital managers are faced with include financial constraints, exchange rates favouring overseas employers and tax-free

salaries, often making it less viable to battle with remuneration offerings from international competitors to retain talent (Jacobs & Roodt, 2006).

It is important to fully understand and comprehend exactly what rewards are considered valuable by nurses in their working environment, the implication of the absence and/or presence of intrinsic and extrinsic rewards, and the broader impact of this on experiences of job satisfaction, organisational commitment and intention to quit. Thus, studying these variables possibly presents an important contribution towards the skills retention of these nurses in South Africa.

### **Literature Review**

Nurses' job satisfaction should be of great importance to hospitals, because higher levels of job satisfaction are associated with a higher likelihood for nurses to maintain their services in an organisation (Irvine & Evans, 1995). Job satisfaction in the nursing industry is extremely important as the task relating to the recruitment of enough qualified nurses into the profession is time-consuming and laborious, and the retention of this staff is an even more daunting task (Booyens, 1993).

A report compiled by Xaba and Phillips (2001), has shown that one of the reasons that South African nurses leave the country is a lack of competitive incentives within the public sector. Moreover, some nurses felt that benefits like overtime and night duty allowances are not adequately provided for within the South African healthcare context. From the Trade Union Research Project (TURP; Xaba & Phillips, 2001) it was evident that nurses felt pessimistic about work pressure, as evidenced in their long working shifts, the fact that hospitals are poorly resourced and the unmanageably high nurse to patient ratio that exists within South Africa. Nurses also noted minimal prospects to grow within their profession, with little opportunity for promotions and upward mobility in hospitals. Nurses also leave their jobs in search for better-resourced working environments. Nurses leave South Africa to accumulate more experience by working in a highly educated environment with sophisticated equipment. Lastly, as a result of the increasing levels of crime and HIV/Aids, some nurses felt that their safety was compromised at hospitals when they had to give care to convicted criminals, and that little effort is done to protect them from potential harm. The research also concluded that

overcrowding in hospitals with HIV/Aids patients and the spread of the infection in South Africa are factors contributing to nurses' emigration to other countries.

Clearly, it is problematic to achieve acceptable outcomes if nurses are not committed to stay within a particular organisation (Booyens, 1993). Neuhauser (2002) emphasizes that for the effective retention of employees, one requires an organisational culture that inspires a high degree loyalty and commitment with an intricate assortment of values, norms, expectations, policies and procedures. Individuals will disburse different degrees of effort and sustain differing affective responses to an organisation, depending upon perceived commitment of an organisation to an employee within the organisation. Therefore, employees will display organisational commitment in return for organisational support and rewards (Eisenberger, Huntington, Hutchinson & Sowa, 1986).

In general, rewards are an important factor in attracting, motivating and retaining highly qualified and skilled employees, and nurses are no exception to this rule. This makes the development of a proficient reward system for nurses a true challenge for every hospital manager, or, alternatively, those persons tasked with creating and implementing such a reward based system. A reward does not necessarily have a financial connotation: non-financial rewards matter too, and may be found to be even more important to employees (De Gieter et al., 2006).

Reward, therefore, must take centre-stage as an extremely important determinant in any organisation: it influences and motivates employees and their behaviour. It is utilized to direct behaviour and performance in an effort to ensnare and retain the finest qualified employees and at the same time keep existing employees satisfied and motivated. Rewarding nurses efficiently and effectively is a challenge for all healthcare organisations, given the vital influence of nurses on organisational performance (De Gieter et al., 2006).

South Africa's health industry should, now more than in the past, focus on developing a well-integrated reward system to ensure health professionals' satisfaction. From various reports, it is now clear that the South African nursing profession is in crisis. Professional nurses leave the country seeking more lucrative work overseas. Early in the new millennium, the opinion was already expressed that the effect of this exodus will be catastrophic on the delivery of health care over the ensuing decade (Brits, 2003).

## **Foundation of the investigation**

A previous study of Lephala (2006) was used as the framework in the development of the intrinsic- and extrinsic reward items chosen for the questionnaire in this study. The study of Lephala (2006) was based on an investigation of intrinsic and extrinsic motivators and was used to contextualize Herzberg's theory of motivation. Intrinsic motivators/factors were identified as: dissatisfaction with irregular promotions, lack of recognition by doctors, and nurses' lack of autonomy. The extrinsic motivators/factors were identified as: dissatisfaction with salaries, and marked discontentment with the organisation's administration policies, practises, the inability to access information regarding their patients care and the management of their specific operating unit. Based on this information from Lephala's (2006) study, the same items were applied in the present study's questionnaire for both intrinsic and extrinsic factors as possible influences of nurses' turnover intention. The study suggested that nurses' turnover intention could be reduced if promotion opportunities are applied consistently in the organisation, doctors value the part of nurses more in the organisation and if nurses' roles were more autonomous. Also, enhanced communication about practises and policies and efficient access to patient information should reduce turnover intention.

The study of Lephala (2006) was based on information of 85 nurses who worked in the private hospital sector in the United Kingdom. The rationale of the current study is to apply and compare the findings of Lephala (2006) in South African context. Importantly, this study also set out to increase the original number of participants, which was only 85 in the initial study (Lephala, 2006).

It is imperative to develop a profound understanding of the role of rewards in the retention of skills of nurses in South Africa. For the purpose of this study, reward will be divided into two categories: Intrinsic and extrinsic reward. The definitions of these two categories are contrasted in Table 1 below.

**Table 1**

*Contrasting definitions of Intrinsic and Extrinsic Reward*

<b>Intrinsic reward</b>	<b>Extrinsic reward</b>
Intrinsic rewards are those generated internally (e.g. personal feelings about the job) and mostly gratify higher-order needs (e.g. self-actualization). They are derived from factors inherent to the method in which the work is designed, meaning the job content (De Gieter et al., 2006).	Extrinsic rewards are mediated externally (e.g. pay) and they essentially satisfy lower order needs (e.g. safety needs). An extrinsic reward is initiated by someone other than the employee (Ivancevich, Konopaske, & Matterson , 2005). Extrinsic rewards include external factors like pay, promotion opportunities, fringe benefits and similar manifestations of status and prestige (Vroom, 1990).

Intrinsic and extrinsic reward will now be discussed as they are conceptualised for the purpose of this study.

**Intrinsic reward**

Intrinsic reward perceived important for nurses relevant to this study will include *promotion opportunities, recognition and workload*.

***Promotion opportunities***

For many employees, promotion does not happen often; some employees may even never experience promotion in their careers. The manager deciding on promotion reward, attempts to match the right person with the job. According to Ivancevich et al., (2005), the criteria often used to reach promotion decisions are based on the employee's performance and seniority. It is essential that hospitals provide nurses with promotion opportunities, as the study of Lephala (2006) indicates - Employees who experience more opportunities for promotion and advancement, intend to stay longer with the organisation, while most employees who felt that they are occupied in a dead-end job had higher intentions to leave their current employer.

***Recognition***

According to Mackenzie and Buchan (1998, p. 100) "investing in people is an important phenomenon within the health care organisation as it helps in gaining formal recognition". If managers are supportive, respect and recognize nurses' contributions, this could boost their morale and could lead to higher levels of job satisfaction and motivation (Lephala, 2006). Recognition creates a sense of being valued within individuals.

### ***Workload***

As earlier stated, it has become evident that South African nurses seek more lucrative working opportunities overseas. Resultant shortages of staff and turnover problems in hospitals create enormous pressure on existing staff (Jewkes, Abrahams & Mvo, 1998; Newman, Maylor & Chansarcar, 2003). According to Ivancevich et al., (2005), work overload can result in insomnia, irritability, increased errors and indecisiveness. The internalised experience of overload could have an enormous negative implication on the standard of care nurses provide their patients with.

### **Extrinsic Reward**

For the purpose of this study, the importance of the following extrinsic rewards will be investigated: *policies and practices, relationships at work and satisfaction with pay.*

### ***Policies and Practices***

Human resources policy formulation and plan development are important factors in the human resources management process World Health Organisation (WHO, 1998). Sethi, Meinert, King and Sethi, (1996) suggest that organisations need to re-examine policies that lead to building commitment. Policies and practices should be designed in a way that supports the needs and expectations of nurses in order for them to stay committed and experience a strong sense of job satisfaction with their organisation. According to Disch (2000), a healthy work environment provides a grounded structure with systems, policies and practices that motivate employees to achieve their personal as well as organisational goals. According to Awases (2006), there are internal organisational factors, such as clearly defined goals, human resource management style, information regarding the norms and standards of the organisation and the support the employee experiences in their working environment, that affect the standard of nurses' performance.

### ***Relationships at work***

In a study by McGilton, McGilles, Pringle, O'Brien-Pallas and Krejci (2004), it was evident that having supportive supervisors is a key factor that influences job satisfaction and job stress of health care aids and personal support workers. The study further showed that factors that supervisors should facilitate are (a) effective communication mechanisms, (b) clear role definitions and accountability, (c) supportive directors of care administrators, and (d) adequate resources. Without these factors, it becomes difficult for supervisors to be

supportive towards their staff, in turn influencing these workers' job satisfaction and stress levels caused by their working environment. In understanding the importance of the type of relationships nurses value in their working environment, valuable information can be retrieved to retain this scarce skill, and for these workers to produce the desired output in health interventions.

### ***Satisfaction with pay***

According to Zeytinoglu and Denton (2005), there is a relation between nurse's satisfaction with their salaries and their overall job satisfaction. However, the salary only usually becomes an issue in the absence of other factors determining satisfaction such as recognition, opportunities for personal growth and development. Investigations into recruitment and retention have shown that low wages and an overall dissatisfaction with their job are the reasons nurses leave their positions (Borda & Norman, 1997; Lu, While, & Barriball, 2005). According to Wilson (2005), recruitment and retention efforts for nurses should focus on increasing financial incentives of the employees and also create a desirable working environment that will lead to greater job satisfaction because the expertise required of these caregivers and their hefty workload more often than not exceeds the financial compensation they receive.

### **Job satisfaction, Organisational commitment and Turnover intention**

According to Seta, Paulus and Baron (2000), job satisfaction is the individual's extent of positive attitudes towards their current position or work. Every person has a unique background, characteristics and needs that influences the way they experience the world and other people (Ivancevich et al., 2005). Individuals experience higher job satisfaction when the tasks they perform are mentally challenging and interesting, but not overwhelming, in conjunction with a working environment that the individual experiences positively (Seta et al., 2000).

Furthermore, Roznowski and Hulin (1992) pointed out that low levels of job satisfaction produces one (or a grouping) of four types of detrimental behaviour. Firstly, individuals who are dissatisfied may endeavour to increase job outcomes by stealing, using work time to pursue personal errands, or by moonlighting. Secondly, they may withdraw from the job psychologically as manifested in such behaviour as not attending meetings, making use of

alcohol during work hours, trying to look busy whilst being unproductive. Thirdly, behavioural withdrawal from the job such as absenteeism, turnover, or early retirement is more than often practiced by dissatisfied employees. Finally, employees may commence particular change behaviours aimed at changing the work situation. This behaviour can manifest in the employee's choice of actions towards their patient, where the patient's best interest is not the main priority, resulting in life threatening decisions.

The work environment is seen as a variable that influence nurses' job satisfaction and a reason why nurses stay or leave a position of employment (Cooper, Frank, Gouty & Hansen, 2002). Therefore, it is important for employing organisations to foster a constructive working environment for nursing professionals in order to keep them satisfied, and as a result, provide optimal care to their patients. Organisational commitment, according to Allen and Meyer (1990), can take three distinct forms, namely continuance, normative or affective commitment. Affective organisational commitment refers to an individual's emotional attachment to, identification with, and involvement in the organisation (Maré, 2007). Employees who experience a strong sense of affective organisational commitment will stay with the organisation because they *want* to do so. Employees who are affectively committed towards an organisation are seen as having a sense of belonging and identification that increases their involvement with organisational activities (Meyer & Allen, 1991; Mowday, Porter, & Steers, 1982). As such, it is considered the most important type of commitment as it has the strongest and most favourable correlation with organisational- and employee relevant outcomes (Meyer, Stanley, Hercovitch & Topolnytskey, 2002). Understanding factors that influence nurse's affective organisational commitment should be an important focus for all organisations employing these professionals, as emphasis is placed on the costly affair relating to the recruitment of these professionals.

When a nurse experiences high levels of organisational commitment he/she should be more motivated to perform at work. Motivated nurses within the healthcare industry are critically important, as they are more actively involved in organisational activities, ensuring quality nursing services, cost effective service rendering, high morale and productivity (Jooste & Klipert, 2002).

When nurses terminate their services with an organisation and accept employment with another, the perception of the scarcity of nurses is intensified because of the time taken to



recruit qualified applicants for the vacant position. Furthermore, efficiency and productivity of the delivery of care are dramatically reduced, labour costs are amplified and there is an unconstructive effect on the cohesiveness of staff left behind (Tai, Bame & Robertson, 1998), which may also lead to a decreased morale and increased employee turnover (Borda & Norman, 1997).

The question facing the South African nursing industry is therefore: Should employers rather focus their retention strategies on variables they can control, or on the individual's personal experience of their job, in order to retain their employees? The question thus beckons as to the importance of intrinsic vs. extrinsic rewards. Given this situation, the present study aims to determine the relationship between intrinsic and extrinsic reward, job satisfaction, organisation commitment and turnover intention among a sample of nurses in the private health care sector in the Gauteng and North West provinces of South Africa.

## **METHOD**

### **Biographical variables**

Specific biographical variables were included in the regression analysis as control variables to predict turnover intention among nurses. These variables included age, nurses with children younger than 12 years, marital status, qualification and union membership.

In a study by Klaas (2007) biographical variables showed to have the following impact on nurses' turnover intention:

- The majority nurses were over the age of 40, and the concern arose that these individuals will soon retire. Age group 21 to 30 showed that they found the transition from graduate to practising nurse difficult.
- Nurses with children aged between 12 and 18 implied that they have to plan ahead for their children's education making satisfaction with their remuneration a strong indicator of their intent to quit their job.
- The unmarried respondents in the study implied that it was easier to change jobs than those who were married.

- Of the respondents in Klaas' (2007) study 52,2% of the respondents (i.e. a slight majority) had formal nursing qualifications.

Although there is no conclusive information that union membership has an influence on nurses' turnover intention, it can be assumed that it could give an employee a sense of security knowing that their working interest is protected. As the problem statement shows, the profession is also highly unionised in South Africa.

### **Research design**

Exploratory research was conducted utilising a cross-sectional research design. According to Struwig and Stead (2001), a cross-sectional design is where the participants are assessed at a single time in their life. This research design was used because of its cost efficiency, and allows for studying the relationships between the different variables. There is no personal relationship between the participants and the researcher, making it easier for participants to freely express their opinions. Data was gathered by means of a survey instrument.

### **Participants**

For this study, an availability sample ( $n=152$ ), that consisted of health care workers in private hospitals in the Gauteng and North West Provinces were approached to participate. The participants had to comply with a certain criteria to qualify for the inclusion in the sample (Struwig & Stead, 2001). For the purpose of this research the criteria were that the participant has to be either a registered-, enrolled- and auxiliaries nurses. A total of 250 surveys were distributed, indicating a response rate of 60,8%. According to Sekaran (2000), sample sizes between 30 and 5000 are adequate for most purposes of exploratory research. Table 2 contains more characteristics of the participants.

**Table 2***Characteristics of Participants (n = 152)*

Item	Category	Frequency	Percentage*	
Gender	Male	14	9.2	
	Female	134	88.2	
	Total	148	97.4	
Children < 12	Yes	76	50	
	No	69	45.4	
	Total	146	96.1	
Marital Status	Single (Living alone)	30	19.7	
	Married ore living with a partner	79	52.0	
	Living with parents	16	10.5	
	Divorced or separated	18	11.8	
	Remarried	4	2.6	
	Total	145	95.4	
Qualification	Grade 10	13	8.6	
	Grade 11	6	3.9	
	Grade 12	53	34.9	
	Technical College Diploma	25	16.4	
	Technical Diploma	19	12.5	
	University Degree (BComm, BSc)	24	15.8	
	Post graduate (Masters/Doctorate)	2	1.3	
	Other	1	0.7	
	Total	143	94.1	
Language	Afrikaans	49	33.1	
	English	24	15.8	
	Sepedi	4	2.6	
	Sesotho	18	11.8	
	Setswana	8	5.3	
	isiSwati	3	2.0	
	Tshivenda	2	1.3	
	isiNdebele	1	.7	
	isiXhosa	9	5.9	
	isiZulu	23	15.1	
	isiTsonga	5	3.3	
	Other	2	1.3	
		Total	148	97.4
	Employee status	Permanent	136	89.5
Substitute Position		2	1.3	
Employed by the hour		3	2.0	
Trainee		7	4.6	
Other		2	1.3	
Total		150	98.7	

**Table 2 continued***Characteristics of Participants (N = 152)*

Item	Category	Frequency	Percentage*
Union Member	Yes	92	60.5
	No	60	39.5
	Total	152	100
Full/Part time Employment status	Part time	9	5.9
	Full time	139	91.4
	Total	148	97.4

\*Where values do not add up to 100, this is due to missing values.

Inspection of Table 2 indicates that only 14 (9,2%) of the participants were male (88,2% females). These results prove to be relatively representative of national statistics (South African Nurses Council (SANC) Geographical Distribution 2010; Nursing manpower (SANC, 2010). On 31 December 2010 it showed that there are 231 086 registered nurses (in the categories: registered-, enrolled- and auxiliaries nurses, across the nine provinces of South Africa, of which 212 572 (91,3 %) are female. Each of these categories is governed by a specific scope of practise determined in the Nursing Act of 2005. An individual with a Gr12 qualification can follow three routes to become a nurse in any one of the above mentioned categories. A registered nurse train four years in Tertiary Institution. There is also other means of training to become a nurse. First level - Enrolled Nursing Auxiliary (ENA) which is a one year course that need to be complete ; Level two – which is a two year course where the graduate is classified as a Enrolled nurse (staff nurse) and lastly a three year course where the graduate is register as a professional Nurse or Sister (Nursing a career \_netcare website). In terms of their marital status, 79 (52%) indicated that they are married and 30 (19,7%) were single and living alone. Of all respondents, 76 (50%) indicated they have children under 12 years of age to care for at home. Of the total sample, 53 (34,9%) indicated that Grade 12 is their highest educational qualification, 19 (12,5%) of the nurses indicated that they have a Technicon Diploma and only 2 (1,3%) have Post-graduate qualifications. In terms of home language, 49 (33,1 %) indicated that they are Afrikaans speaking, 24 (15,8 %) English speaking and 23 (15,1 %) Zulu-speaking. Of the total group, 136 (89,5%) are permanently employed and 139 (91,4 %) indicated that they are full time employees. Some 92 (60,5%) of the nurses indicated that they are members of a union.

## Research procedure

A letter requesting participation and copies of the survey was sent to the Hospital Managers. Surveys were distributed by Line Managers in different wards and the participants were allowed to complete them on their own time. The surveys were distributed in December 2008 and collected in January 2009, and were completed anonymously, only requesting relevant biographical information.

## Measuring Instruments

Measures of intrinsic and extrinsic reward (based on Lephalala (2006), and further developed for the purpose of this study), pay satisfaction (Judge & Welbourne, 1994), job satisfaction (Hellgren, Sjöberg and Sverke, 1997, based on Brayfield & Rothe, 1951), affective organisational commitment (Allen & Meyer, 1990) and turnover intention (Sjöberg & Sverke, 2000) were utilised for the purpose of this particular study. The survey also included a section that requires participants to provide some biographical information.

- **Intrinsic and Extrinsic Reward**

The questionnaire that was used in this study was compiled and adapted from an existing measure developed and reported on by Lephalala (2006), for the requirements of a Masters' dissertation measuring the factors that influence nurses' turnover in selected hospitals in England.

Intrinsic reward included promotion, recognition and workload. *Promotion* refers to what extent the nurses perceive promotion opportunities at the workplace. It is assessed with three items taken from the study of Lephalala (2006): "I experience fair promotion opportunities"; "In this organisation, experience is often the only consideration for promotion" and "Promotions are regular", were used. *Recognition* was assessed with three items taken from Lephalala (2006), to determine the contentment with the degree of recognition nurses experience within their organisation. The items were altered from "Senior nurses enjoy more recognition than junior nurses" to "In this organisation, senior nurses experience more recognition than junior nurses"; "Nurses opinions are undervalued by medical staff" to "In this organisation, nurse's opinions are undervalued by medical staff", and "Additional qualifications are not recognised" to "Recognition is given to staff who better their

education”. *Workload* determined to what extent nurses experience their workload as fair and manageable. It was assessed with three items taken from the study of Lephala (2006). The item “I have insufficient time to do everything” was used, while “The amount of work may interfere with how well it gets done” was altered to “I have a great amount of work that interferes with how well my work gets done”, and the item “I have to work very hard” was also used to measure workload. All items were gauged with a 5-point Likert scale with 1 (Strongly disagree) and 5 (Strongly agree). During analysis, negatively worded items were reverse-scored in order for all scales to indicate a high score as reflecting greater experience of the measured dimension.

The dimensions of extrinsic reward that were measured included policies and practices, relationships at work and satisfaction with pay. Items from Lephala (2006), measuring perceived fairness of *policies and practices* in the organisation, involve the nurse’s perception of the organisation’s systems and practices as being reasonable and fair. The dimension of policies and practices was assessed by four items. The items used were as follows: “Not involved during decision making” was altered to “I am not involved during decision making”, “Not involved during policy making” was altered to “I am not involved during policy making”, “Not familiar with standard operating procedures” was altered to “I am familiar with standard operating procedures” and “Do not know where to access information regarding patient care” was altered to “I know where to access information regarding patient care”. *Relationships at work* were measured to determine nurse’s satisfaction with relationships with their supervisors and colleagues. The items that were used to determine the quality of relationships at work are derived from the study of Lephala (2006). The item “Gives positive performance feedback” was altered to “My supervisor gives me positive performance feedback”, “Does not support subordinates” was altered to “My supervisor does not support subordinates”, the item “There is a lack of social relations with peers in the workplace” was altered to “I have a good social relationship with my colleagues” and “Work with people they do not trust” was altered to “I have to work with people I do not trust”. During coding, negative items were reverse-scored in order for all scales to indicate a high score as reflecting greater experience of the measured dimension.

Determining the reliability of these new scales for measuring selected intrinsic and extrinsic reward of nurses presents an important contribution of the proposed study. The validation and

reliability of the new scales was determined through factor analysis and Cronbach alpha coefficients.

Nurse's *satisfaction with their pay* was measured by using Judge and Welbourne's (1994) pay satisfaction questionnaire. The questionnaire consists of five items and response alternatives vary from 1 (Strongly disagree) to 5 (Strongly agree), with a high score reflecting strong feelings of pay satisfaction. A typical item from this scale is "I am very happy with the amount of money I make". Additionally the following items are used: "I am satisfied with the pay I get", "Considering my skills and effort I put into my work, I am satisfied with my pay", "Overall I am satisfied with the amount of money my work generates" and "I am content with my last salary increase". In a study by Judge and Welbourne (1994), Cronbach alpha coefficients were obtained in a longitudinal study of 0,80 and above.

The index of *Job Satisfaction* (Hellgren et al., 1997, based on Brayfield & Rothe, 1951) was used to determine the participants' overall satisfaction with their work. The scale contains three items measuring overall job satisfaction on a 5-point Likert scale, with a high score indicating high levels of job satisfaction. The corrected odd-even reliability coefficient according to Hellgren et al. (1997), is 0,86. A typical item representing this scale is "I enjoy being at my work". This scale has been validated by Näswall, Baraldi, Richter, Hellgren and Sverke (2006).

The *Affective Organisational Commitment Scale (AOC)* is the short version of the scale developed by Allen and Meyer (1990), consisting of four items. The response alternatives range from 1 (disagree) to 5 (agree), and a high score reflects strong commitment. A typical item representing this scale is "I enjoy discussing my organisation with people from outside". The internal consistency for the scales has been confirmed at the 0,80 level (Suliman & Iles, 2000). Buitendach and De Witte (2005) obtained an cronbach alpha-coefficient of 0,65 for a South African sample of parastatal employees.

The *Turnover Intention* scale that was used was developed by Sjöberg and Sverke (2000), and consists of three items that measure the respondent's intention to leave his/her present position. A typical item representing this scale is "I feel as if I could leave this job". The response alternatives range from 1 (Strongly disagree) to 5 (Strongly agree), and a high score

typically reflects a strong intention on the part of the participant to leave his/her position. Sjöberg and Sverke (2000) obtained a cronbach alpha coefficient of 0,83 for this scale.

Some biographical questions were also included. Information that was additionally gathered includes gender, whether the participants have children under the age of 12, their marital status, qualification, language, employee status, union membership and whether the participants are employed on a full or part time basis.

### **Data Analysis**

The SPSS version 16.0 for Windows-program (SPSS, 2008) was used to carry out the statistical analysis. Descriptive statistics were used to describe the data (Field, 2006). Due to the fact that this was the first time that the questionnaire was used in an adjusted format, principal components extraction was used prior to principal factors extraction to reduce the data and extract factors from the 22 items that was composed from Lephala's (2006) study of items identified for intrinsic- and extrinsic reward, and items from the Pay satisfaction questionnaire by Judge and Welbourne (1994). A cut-off value of 0,30 was set for the inclusion of an item for the interpretation of a factor. The criterion for factors was an eigenvalue greater than or equal to one, after varimax rotation. The scree plot was also employed.

The internal consistencies of the measuring instrument were assessed by Cronbach alpha coefficients and inter-item correlations (Clark & Watson, 1995). The Cronbach alpha coefficient is an important indicator regarding information of the proportion of variance contained in a scale, while the average inter-item correlation coefficient is a useful index to support information supplied by Cronbach alpha coefficient (Clark & Watson, 1995).

Pearson product-moment correlation coefficients were used to indicate the relationship between the factors. In terms of the statistical significance of the data, a 99% confidence interval ( $p \leq 0, 01$ ) was set as the cut off value. Effect sizes were further established to determine the importance of statistically significant relationships. The cut-off points of  $r = 0,10$  (small effect)  $r = 0,30$  (medium effect) and  $r = 0,50$  (large effect) were employed for establishing the practical significance of correlation coefficients (Cohen, 1988). Multiple regression analysis was used to predict turnover intentions among the nurses with the use of



the independent variables (intrinsic and extrinsic rewards, job satisfaction and organisation commitment).

## RESULTS

The 22 items used to indicate intrinsic- and extrinsic rewards were subjected to a confirmatory factor analysis and an internal consistency analysis. However, as a result of the questionnaire being used for the first time in its adjusted form, the expected factor structure could not be confirmed, resulting in many of the Cronbach alpha coefficients being lower than the cut-off point of 0,70 (Nunnally & Burnstein, 2004). This prompted the researcher to return to exploratory factor analysis.

The results of the exploratory factor analysis for the intrinsic- and extrinsic reward items are presented in Table 3. The loadings of the variables on the factors, the eigenvalues, the communalities and percentage of variance are explained. Results of the analysis indicated two factors which were weakly negatively correlated ( $r=0,22$ ), and it was therefore decided to proceed with a varimax-analysis.

**Table 3**

*Factor Loadings, Communalities ( $h^2$ ), Eigenvalues and Percentage Variance for Principal Factors Extraction and Varimax Rotation on Intrinsic- and Extrinsic Reward items.*

Nr	Item	F <sub>1</sub>	F <sub>2</sub>	h <sup>2</sup>
1	I am very happy with the amount of money I make	<b>0,85</b>	0,15	0,69
2	I am satisfied with the amount of pay I get	<b>0,78</b>	0,11	0,59
3	Considering my skills and the effort I put into my work, I am satisfied with my pay	<b>0,80</b>	0,10	0,61
4	Overall I am satisfied with the amount of money my work generates	<b>0,62</b>	0,16	0,36
5	I am content with my last salary increase	<b>0,74</b>	0,05	0,53
6	I have <u>ins</u> ufficient time to do everything	0,06	<b>0,52</b>	0,26
7	I have interferences that influence the quality of my work	0,12	<b>0,75</b>	0,54
8	I have to work very hard	-0,25	0,04	0,07
9	I am not involved during decision making	<b>0,48</b>	-0,01	0,23
10	I am involved during policy making	0,05	-0,26	0,08
11	I am familiar with standard operating procedures	0,16	-0,18	0,07
12	I know where to access information regarding patient care	0,27	-0,21	0,14
13	My supervisor give positive performance feedback	-0,04	<b>0,64</b>	0,40
14	My supervisor does not support subordinates	<b>0,30</b>	<b>-0,35</b>	0,26
15	I have to work with people I do not trust	0,00	<b>0,63</b>	0,39
16	I have good social relationships with my colleagues	0,15	<b>0,41</b>	0,22

17	In this organizations qualifications are not considered for promotions	<b>0,56</b>	-0,15	0,37
18	I experience fair promotion opportunities	<b>0,63</b>	-0,10	0,43
19	Promotions are regular	<b>0,41</b>	-0,08	0,19
20	In this organization nurses' opinion are undervalued by medical staff	0,04	<b>0,50</b>	0,24
21	Recognition is given to staff who better their education	0,09	0,25	0,06
22	In this organization senior nurses enjoy more recognition than junior nurses	0,09	-0,27	0,09
	Eigenvalue	4,47	2,35	
	% Variance	20,32	10,69	

a: Factor labels F1: Objective experience towards rewards F2: Perceived organisational support

Inspection of Table 3 shows that two factors were extracted when the principal component analysis were conducted during the exploratory factor analysis, accounting for 31,01 % of the total variance explained in the data. Variables were reasonably well defined by this factor solution, with communality values that tend to be moderate. With a cut-off of 0,30 for inclusion of a variable in interpretation of a factor, ten items loaded on the first factor, while eight items loaded on the second factor. Six items, namely item eight: “*I have to work very hard*”; item ten, “*I am involved during policy making*”; item eleven, “*I am familiar with standard operating procedures*”; item twelve, “*I know where to access information regarding patient care*”; item twenty one “*Recognition is given to staff who better their education*” and item twenty two, “*In this organisation senior nurses enjoy more recognition than junior nurses*” showed no loading and low communalities and were discarded.

The first factor dealt with pay satisfaction, involvement in policy making and satisfaction with promotion opportunities. These items can be assessed by an employee, for example the percentage salary increase annually, career promotions etc., and hence this factor was labelled *Objective experience of rewards*. The second factor dealt with work pressures, lack of recognition and poor relationships at work. These items are subjectively evaluated by individuals, as perceptions differ, and this factor was labelled *Perceived lacking organisational support*. The mean inter-item correlations showed to be in the range of 0,15 to 0,50 (Clark & Watson, 1995), and thus the internal consistency of the two factors *Objective experience of rewards* ( $r=0,35$ ) and *Perceived lacking organizational support* ( $r=0,23$ ) are upheld.

Descriptive statistics for Objective experience of rewards, Perceived lacking organisational support, Job satisfaction, Organisational commitment and Turnover intention are presented in Table 4.

**Table 4***Descriptive Statistics and Cronbach's Alpha Coefficients of the Measuring Instruments*

<i>Item</i>	<i>Mean</i>	<i>SD</i>	<i>Skewness</i>	<i>Kurtosis</i>	<i>r-Mean</i>	<i>α</i>
Objective experience of rewards	2,08	0,77	0,21	0,42	0,35	0,82
Perceived lacking organisational support	2,62	0,75	0,21	0,41	0,23	0,64
Job satisfaction	3,29	1,10	-0,15	0,71		0,68
Organisational commitment	3,02	0,85	0,24	-0,34		0,50
Turnover intention	2,68	1,16	0,17	-0,81		0,66

George and Mallery (2003, p. 231) provide the following rules of thumb in development of new measures: “ $\alpha > 0,90$  (excellent),  $\alpha > 0,80$  (good),  $\alpha > 0,70$  (acceptable),  $\alpha > 0,60$  (questionable),  $\alpha > 0,50$  (poor) and  $\alpha < 0,50$  (unacceptable)”. Using George and Mallery’s (2003) criteria for evaluating Cronbach alpha coefficients, it is fair to include scales with a  $\alpha > 0,60$  (questionable performance), as this is a new questionnaire that needs further development and the exploration of these scales is valuable for future research on this topic. Therefore the Cronbach alpha coefficients of the measure of rewards showed to be fair. The Cronbach values for Job satisfaction and Turnover intention also tend towards the lower end in terms of reliability. The Organisational commitment scale was however deemed unacceptable for use and is discarded from further analyses.

**Table 5**

*Correlation Coefficients between Objective experience of rewards, Perceived lacking organisational support, Job satisfaction and Turnover intention.*

	Objective experience of rewards	Perceived lacking organisational support	Job satisfaction
Objective experience of rewards			
Perceived lacking organisational support	-0,17*		
Job satisfaction	0,46**	-0,26*	
Turnover intention	-0,34**	0,20*	-0,40**

\* Correlation is significant at the 0.01 level

\* Correlation is practically significant at the  $r \geq 0.10$  level. (small effect)

\*\* Correlation is practically significant at the  $r \geq 0.30$  level. (medium effect)

As seen in Table 5, Objective experience of rewards is practically significantly related to Job satisfaction and inversely to Turnover intention, both with medium effect. Perceived lacking organisational support is statistically significantly negatively related to Job satisfaction and positively to Turnover intention. Turnover intention and Job satisfaction are negatively related (practically significant, medium effect).

A standard multiple regression analysis was used to determine whether job satisfaction and the two factors; Objective experience of rewards and Perceived lacking organisational support, can predict nurses' turnover intention (Table 6).

**Table 6***Multiple Regression Analysis with Turnover Intention as Dependant variable*

Model		Unstandardised Coefficients		Standardised Coefficients	<i>t</i>	<i>p</i>	<i>F</i>	<i>R</i>	<i>R</i> <sup>2</sup>	$\Delta R^2$
		B	SE	Beta						
1	(Constant)	4,19	0,34		12,43	0,00	21,12	0,40	0,16	0,16
	Job satisfaction	-0,44	0,10	-0,40	-4,60	0,00*				
2	(Constant)	4,00	0,59		6,79	0,00	10,18	0,47	0,22	0,06
	Job satisfaction	-0,27	0,11	-0,24	-2,39	0,02*				
	Objective experience of reward	-0,37	0,14	-0,26	-2,60	0,01*				
	Perceived lacking organisational support	0,16	0,14	0,10	1,12	0,27				

Table 6 summarises the regression analyses with job satisfaction controlled for in the first step, and the two reward factors: Objective experience of rewards and Perceived lacking organisational support, in the second step. Entry of job satisfaction in the first step of the regression analysis produced a statistically significant model ( $F_{(1,110)} = 21,17; p = 0,00$ ), accounting for approximately 16% of the variance. From the first model it's apparent that job satisfaction ( $\beta = -0,40; t = -4,60; p \leq 0,00$ ) is a statistically significant predictor of nurses' turnover intention. Considering the beta-coefficients, it is clear that nurses' job satisfaction relates negatively to their turnover intention. When Objective experience of rewards and Perceived lacking organisational support (POS) were entered in the second step of the regression analysis, a statistically significant model was produced ( $F_{(3,108)} = 10,18; p = 0,00; \Delta R^2 = 0,06$ ), which explained 22% of the total variance. It is seen that both Job satisfaction ( $\beta = -0,24; t = -2,39; p \leq 0,02$ ) and Objective experience of rewards ( $\beta = -0,26; t = -2,60; p \leq 0,001$ ) are statistically significant predictors of turnover intention, but that Perceived lacking organisational support is not. The direction of the relationship indicates that Job satisfaction and Objective experience of rewards relate negatively to Turnover intention.

## DISCUSSION

The aim of the study was to determine whether a relationship exists between intrinsic and extrinsic reward, job satisfaction, organisational commitment and turnover intention. Further, it was also the aim of this study to refine a questionnaire and extend findings from a previous study (Lephalala, 2006), to measure nurses' job-related experience of intrinsic- and extrinsic reward. This was a valuable endeavour for future research on this subject, as no reliable measuring instrument for intrinsic and extrinsic reward could be sourced in the available literature. However, due to the poor performance of the scales for the individual dimensions of intrinsic and extrinsic reward, as well as the collapsed scales as indicators of the broader dimensions, much work remains for future research.

For the purpose of this study it was decided to explore three specific dimensions of intrinsic reward namely: Promotions, workload and recognition and another three dimensions for extrinsic reward namely: Practices and policies, relationships at work and pay satisfaction (consisting of 22 items for the six dimensions). The dimensions were retrieved from the previous study by Lephalala, (2006). The reason for the use of these specific dimensions was to explore their significance within South African context, as the study of Lephalala (2006) was based in the United Kingdom.

The 22 items used to measure intrinsic- and extrinsic rewards were subjected to a confirmatory factor analysis and an internal consistency analysis. However, possibly as a result of the questionnaire being used for the first time in a somewhat adjusted form, the expected factor structure could not be confirmed, resulting in poor fit of the measure to the data. This prompted the researcher to return to exploratory factor analysis. The researcher proceeded with a principal component analysis as the first step of the exploratory factor analysis by applying Fields' (2000) rules of thumb in determining the number of factors to be extracted, namely: To retain the factors with eigenvalues larger than one (Guttman-Kaiser rule), and; making a scree-plot and include all factors before the breaking point. This resulted in two factors being retained to illustrate participants' experience of rewards. After careful investigation it was noted that these items did not group together in terms of the expected intrinsic- and extrinsic reward dimensions, but rather by means of the participant's personal perceptions of these "rewards". These factors were named *Objective experience of rewards* and *Perceived lack of organisational support*, and accounted for

31.01% of the total variance in the reward-data. Both these dimensions showed reasonable reliability and performed as expected in subsequent analyses.

Interestingly enough, the two factors obtained from the principal component analysis still resembles rewards, although not intrinsic- or extrinsic but rather measurable (objective) and non-measurable (subjective) experiences of rewards. Items in Factor 1 dealt with pay satisfaction, involvement in policy making and satisfaction with promotion opportunities. These items are measurable by employees, for example the percentage salary increase annually and promotion opportunities available in the organisation. In terms of the relationship among the variables of interest, it was seen that nurses' job satisfaction was found to have a positive relationship with objective experience of rewards and an inverse relationship with turnover intention. The latter relationship is understandable: Normally, progression and satisfaction in terms of one's career (to a next job level or higher level of qualification), is associated with an increase in remuneration, and per implication, one's satisfaction with it, which should likewise result in a reduced intention to quit one's job. Factors such as satisfaction with pay, involvement in decision making and promotion opportunities have been found important in the retention of employees in previous studies (Oshagbemi, 2000; Lum, Kervin, Clark, Reid and Sirola 1998). Other studies by Wang (2006) concurred with these findings and found that pay satisfaction showed a positive relation with job satisfaction. Hwara (2009) also indicated that active participation in decision-making related to employee's use of discretion and initiative drew them to a motivated professional involvement within the organisation.

Items in the second factor dealt with work pressures, lack of recognition and poor relationships at work. These dimensions are subjectively evaluated by individuals as each individual's perception differs. Consequently this factor was labelled *Perceived lacking organisational support*. In terms of the relationships amongst these variables it was seen that Perceived lacking organisational support is statistically significantly negatively related to job satisfaction and positively to turnover intention. This suggests that when an employee perceives the organisation as unsupportive towards their needs, they are likely to experience lowered job satisfaction, resulting in an increased feeling of terminating their services with their employer. Previous studies (Burke & Greenglass, 2001; A-Stassen, Cameron & Horsburgh, 1996; Burke, 2003 and Stamper & Johlke, 2003) found that perceived organisational support was positively related to higher levels of job satisfaction. Three aspects, namely work pressures, lack of recognition and poor relationships at work were identified as issues related to a lack of organisational support. Workload, most often, results directly from a

shortage of nursing staff when a few nurses undertake too many duties. When the demands of these duties exceed their abilities, stress is bound to occur (Jex, 1998). This is supported by Hwara (2009), where the majority of the sample group expressed job dissatisfaction, lack of motivation and negative attitudes towards the shortage of staff, which was in turn positively related to workload. It is further noted that recognition is integral in the retention of nurses, as this should improve productivity, which will also be associated with better health care provided to their patients. According to Laschinger and Havens (1996), the participation in change projects will augment the employee's knowledge of the systems employed in the organisation, having consequential results in expanding their social networking within the company; these outcomes may result in higher awareness of available sources of power in the organisation and increase commitment and motivation to succeed. Hwara (2009) further found that nurses' behaviour, and both positive and negative attitudes, affected their work performance as well as their work relationships. Recognition was also found to influence turnover in the study of Lephalala (2006). It was evident in the study that recognition promoted self-confidence and boosts the self-esteem of employees, and as a result, improves productivity. Rewarding an employee for excellent performance is a comprehensible indication of recognition by the organisation of the effort the employees display in the delivery of their duties (Ströh, 2001).

Lastly, it was found that turnover intention and job satisfaction are inversely related. This finding is supported by Randhawa (2007), who found a significantly negative relationship between job satisfaction and turnover intention, suggesting that increased job satisfaction is most likely to decrease an individual's intention to quite their job. Thus, job satisfaction plays a significant role in influencing turnover intention of employees.

The relationship found between these variables is of great interest for future studies as the way nurses perceive their occupational characteristics in the context of their professional needs, the way they react to their work based on these needs, and their perception of their occupational characteristics, has been majorly overlooked (Takase, Maude & Manias, 2005). This study confirms previous findings in terms of the relationship between these variables, but in the specific nursing context.

Finally, the predictive value of job satisfaction, objective experience of rewards and perceived lacking organisational support in terms of nurses' turnover intention was investigated. Both job satisfaction and objective experience of rewards showed predictive value in the influence of



nurses' turnover intention in this specific study. This finding supports the theoretical stance of Ellenbecker (2003), who suggested that nurses, who experience a high degree of job satisfaction, will feel comfortable remaining in their current position, reducing their intent to terminate their service. The Objective experience of reward factor's contribution can be explained by Herzberg's (1968) Two-factor theory of motivation. The theory suggests that there is a set of extrinsic conditions in the job context which may lead to job dissatisfaction when not present. If the conditions are present, it does not necessarily motivate the employees. Thus, when the employee's experience of reward is low they are most likely to experience a degree of job dissatisfaction. The results here suggest that for this sample, these factors relate to pay satisfaction, involvement in policy making and satisfaction with promotion opportunities.

## RECOMMENDATIONS

It has now been determined that a relationship exist between job satisfaction, objective experience of rewards, perceived lacking organisational support and turnover intention for this sample of nurses. According to Neuhauser (2002), 89% of managers believe that employee retention is primarily tied to money, whilst maintaining that to successfully retain employees more attention should be given to maintaining an organisational culture that inspires loyalty and commitment with a complex mixture of norms, values, expectations, policies and procedures. It is recommended that future studies aim to determine specific variables of intrinsic and extrinsic reward that relate to organisational commitment and job satisfaction, and contribute to turnover intention, as the measures applied for some of these variables in this study did not deliver adequate reliability. It is further suggested that the two factors, objective experience of rewards and perceived organisational support, retrieved from the exploratory factor analysis, should be further investigated to determine their underlying correlations with other variables of interest. Currently there is no reliable measuring instrument that measures intrinsic and extrinsic reward of nurses. Future researchers may focus more specifically on other organisational factors that may be related to nurses' turnover intention. Much more work remains in gathering empirical evidence to develop these findings and generate new relationships which could not be established in this study.

According to Cortina (1993), the Cronbach alpha coefficient is specially dependant on the number of items in the scale, and, the small number of items employed for most scales should be taken into account. When the number of items on the scale increases, the Cronbach alpha coefficient should also increase. It is suggested that future researchers focus on including more items in the development of the subscales of the rewards measure. By including more items, it is likely that the reliability of the scale will increase, providing valuable information to the nursing profession regarding rewards, commitment, job satisfaction and turnover intention of these professionals.

It is further recommended that further research focus on both the Public and Private Health sector, as this study only focussed on the former. A study by Klaas (2007) showed that the rural nature of some facilities has caused many nurses and doctors to migrate, due to a shortage of adequate resources. Hospitals in the private sector are managed like businesses, whilst the public sector hospitals are funded by Government. Future research should also focus on distinguishing between the factors that influence nurses' turnover intention in the public sector and factors that influence nurse's turnover intention in the private sector – if they are indeed disparate.

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## CHAPTER 3

### CONCLUSIONS, LIMITATIONS AND RECOMMENDATIONS

The aim of this exploratory study was to determine the relationship between intrinsic and extrinsic reward, job satisfaction, organisational commitment and turnover intention among nurses in the healthcare industry. Furthermore, the study was designed to determine whether intrinsic and extrinsic reward, job satisfaction and organisational commitment can be used to predict nurses' turnover intention. An extensive literature review was the first step to determine whether such relationships exist, through an examination of previous empirical studies and other relevant literature. Secondly, an empirical study was conducted where the various work characteristics of the nurses who participated in the study were described. In closing, this chapter focuses on the conclusions, limitations and recommendations that flow from the study.

#### 3.1 CONCLUSIONS

In this section, conclusion are drawn in terms of the specific objectives and empirical findings that where obtained in this study.

*The first objective of this study was to determine, by means of a literature review, whether a relationship exists between intrinsic and extrinsic reward, job satisfaction, organisational commitment and turnover intention.*

It emerged from the literature review that shortages of nurses were previously limited to certain areas and countries, but the current situation has reached global proportions (Kimball & O'Neill, 2002), making the understanding of contributing factors an important aspect in all healthcare organisations. According to Lephalala (2006), intrinsic and extrinsic rewards could be important in nurses' decision to stay or terminate their services in a specific organisation. According to this study, nurses' job satisfaction is influenced by intrinsic rewards like advancement, recognition, achievement, work itself, responsibility and growth. In turn, turnover intention is influenced by extrinsic rewards like salary, supervision, organisational administration and policies, working conditions and interpersonal relationships. The absence of these factors may cause employees to become less committed toward their organisation. In studies by Yousef (2000), and Bull (2005), job satisfaction and organisational commitment were found to be inversely related to withdrawal

behaviours such as absenteeism and turnover, and these factors have also been linked to increased productivity and organisational effectiveness (Buitendach & De Witte, 2005). A higher turnover rate can lower the quality and service provided by the organisation (Wang, 2006), which may impact negatively on patient care provided by nurses.

Literature regarding intrinsic and extrinsic rewards is particularly scarce, and it was found that most studies focus on specific factors such as “motivators” rather than on “rewards”. For this specific study, “promotion”, “recognition” and “workload” were identified as intrinsic rewards and “policies and practices”, “relationships at work” and “satisfaction with pay” as extrinsic rewards, based on a previous study by Lephalala (2006). According to this study it was found that the presence of motivators (advancement, the work itself, responsibility and recognition) enhanced nurses’ job satisfaction levels, and hygiene factors (working conditions, supervision, policy and administration as well as group cohesion) reduced levels of dissatisfaction. This is a clear indication that the dimensions of intrinsic and extrinsic motivators will have an impact on nurses’ job satisfaction. In other research (Alexander, Lichtenstein, Oh, & Ullman, 1998), it was found that intrinsic rewards (professional growth opportunities, autonomy, workload and role clarity) were significant predictors of intention to quit, which in turn is a significant predictor of actual turnover. Thus, the higher the job satisfaction levels of an employee, the less likely his or her intention to quit.

Lee, Carswell and Allen (2000) found support for job satisfaction and organisational commitment to be the two best predictors of organisational turnover intention. There is strong support from previous studies that a relationship exists between job satisfaction, organisational commitment and turnover intention, but little conclusive evidence of specific intrinsic and extrinsic rewards that may influence these factors.

From the literature review one could draw the conclusion that the relationship between intrinsic and extrinsic reward, job satisfaction and organisational commitment is likely to be positive. Concordantly, all of these variables should relate negatively to turnover intention, i.e. if nurses experience high levels of intrinsic and extrinsic reward in their employment relationship, are satisfied and committed, they should be less likely to wish to leave such employment.

*The second objective of this study was to determine whether a relationship exists between intrinsic and extrinsic rewards, job satisfaction, organisational commitment and turnover intention among a group of South African nurses in the private healthcare sector.*

In investigating the relationship between variables of interest, the first step was obviously to establish the reliability of the measures. In the analysis conducted, the 22 items used to indicate intrinsic- and extrinsic rewards were subjected to a confirmatory factor analysis and an internal consistency analysis. However, and possibly as a result of the questionnaire being used for the first time in its adjusted form, the expected factor structure could not be confirmed, resulting in many of the Cronbach alpha coefficients being lower than the cut-off point of 0,70 (Nunnally & Burnstein, 2004). An exploratory factor analysis for the intrinsic- and extrinsic reward items was then conducted. Two factors were extracted from the principal component analysis, accounting for 31 % of the total variance explained in the data. Variables were reasonably well defined by this factor solution, with communality values that tended to be moderate. The first factor dealt with pay satisfaction, involvement in policy making and satisfaction with promotion opportunities. These items can be objectively assessed by an employee, for example the percentage salary increase annually and career progression. Hence, this factor was labelled *Objective experience of rewards*. The second factor dealt with work pressures, lack of recognition and poor relationships at work. These items are subjectively evaluated by individuals, as perceptions differ, and this factor was accordingly labelled *Perceived lacking organisational support*. The mean inter-item correlations showed to be in the range of 0,15 to 0,50 (Clark & Watson, 1995), and thus the internal consistency of the two factors of *Objective experience of rewards* ( $r=0,35$ ) and *Perceived lacking organizational support* ( $r=0,23$ ) were upheld. With regards to the reliability, these factors were also deemed acceptable (*Objective experience of rewards*:  $\alpha = 0.84$  and *Perceived lacking organizational support*:  $\alpha = 0.64$ ).

In terms of the relationships between the variables of interest, Objective experience of rewards showed to be practically significantly related to job satisfaction and inversely to turnover intention, both with medium effect. This relationship proposes that when employees experience rewards as reasonable and fair, they are more likely to experience job satisfaction, decreasing their intent to quit their work at their current organisation. Perceived lacking organisational support was statistically significantly negatively related to job satisfaction and positively to turnover intention. This finding would suggest that when employees perceive the organisation as unsupportive towards their needs, they are likely to experience lowered job satisfaction, resulting in an increased

feeling of terminating their services with their employer. Turnover intention and Job satisfaction are negatively related (practically significant, medium effect), which is supported by Randhawa (2007), who found a significantly negative relationship between job satisfaction and turnover intention, suggesting that increased job satisfaction is most likely to decrease an individual's intention to quit their job.

*The third objective of this study was to determine the reliability of the measure of Reward, selected for the survey. Additionally, the reliability of established measures in this specific sample was also re-examined.*

In the descriptive statistics that were done on the data gathered for this study- based on the compiled intrinsic- and extrinsic reward questionnaire – the principle of George and Mallery's (2003, p. 231) criteria for evaluating a Cronbach alpha coefficient in the development of new measures: “ $\alpha > 0,90$  (excellent),  $\alpha > 0,80$  (good),  $\alpha > 0,70$  (acceptable),  $\alpha > 0,60$  (questionable),  $\alpha > 0,50$  (poor) and  $\alpha < 0,50$  (unacceptable)” was applied. It was therefore decided to include scales with  $\alpha > 0,60$  (questionable performance), as this is a new questionnaire that needs further development and the exploration of these scales is valuable for future research on this topic. Therefore, the Cronbach alpha coefficients of the measure of *Objective experience of rewards*:  $\alpha = 0,84$ , *Perceived lacking organizational support*:  $\alpha = 0,64$ , *Job satisfaction*:  $\alpha = 0,68$  and *Turnover intention*:  $\alpha = 0,66$  showed to be fair and were further pursued. The Organisational commitment scale was however deemed unacceptable ( $\alpha = 0,50$ ) for use and was discarded from further analyses, presenting a significant limitation for the present study.

*The fourth objective of the study was to determine whether intrinsic and extrinsic rewards, job satisfaction and organisational commitment can predict nurses' turnover intention.*

A regression analysis found that both job satisfaction and objective experience of rewards showed predictive value in terms of nurses' turnover intention. This result suggests that when employees perceive the rewards in the organisation as satisfactory, they are likely to feel content with their job, reducing the likelihood of terminating their services with their employer. This finding supports the theoretical stance of Ellenbecker (2003), who suggested that nurses, who experience a high degree of job satisfaction, will feel comfortable remaining in their current position, reducing their intent to terminate their services.

The last objective was to make recommendations regarding the management of intrinsic and extrinsic rewards, job satisfaction, organisational commitment and turnover intention, and this will be addressed under 3.3 below.

### 3.2 LIMITATIONS

This study, like any other research, presented certain limitations. This study was done with a cross-sectional survey design and as a result, no casual inferences could be drawn (Baltes, Reese, & Nesselroade, 1988). The questionnaires were completed at one point in time and therefore it cannot be guaranteed that the perceptions of the participants will remain the same for years to come. A longitudinal study would have enabled the researcher to obtain more information regarding the causality of nurses' personal experiences towards their employer and the organisational antecedents that contribute towards their turnover intention. Furthermore, the participants in this study represented mainly female nurses working in the private health sector. The generalisability to nurses in the public sector, as well as specifically male nurses, is therefore limited.

Currently no reliable measuring instruments for intrinsic and extrinsic rewards could be found, and the current study was an attempt to expand on previous work (Lephalala, 2006). A questionnaire was compiled by the researcher, through a literature review and the abovementioned previous study. Concerns exist regarding the reliability and validity of the questionnaire compiled, as it has proved not to present with good psychometric characteristics. Furthermore, most of these dimensions were only gauged with a small number of items. This presented a significant limitation, as not a single dimension/indicator of intrinsic- or extrinsic reward could have been used from the compiled questionnaire. Interestingly enough, two factors (Objective experience of rewards and Perceive lacking organisational support) were retrieved from the principal component analysis, both resembling rewards but in a measurable (objective) and non-measurable (subjective) experience thereof. It is therefore suggested that these two factors should be further investigated to determine their underlying correlations with other variables of interest. Furthermore, due to the poor performance of the *index of Job Satisfaction*-, *Affective Organisational Commitment*- (*AOC*)- and *Turnover Intention* scales used in conjunction with the compiled *Intrinsic- and Extrinsic reward* scale, the generalisability of these individual scales and its reliability when used in conjunction with each other is questionable within the studied context. Most significantly, the *Affective Organisational Commitment Scale (AOC)* that has been confirmed to show internal consistency at the 0,80 level (Suliman & Iles, 2000), showed an unacceptable alpha coefficient of

0, 50 in this sample, and had to be discarded from further analyses. It is therefore suggested that more research is to be done to determine the reliability of these scales when used in conjunction with each other and their generalisability, especially in South African context.

The sample size might also have had a considerable effect on the reliability of the study. A small sample size limits the representative value of the study population and also limits the generalisability of results of the study.

Due to the different working schedules of the nurses, the questionnaires were distributed and collected by line managers. Although the questionnaires were completely anonymous, the possibility still remains that participants were not completely honest as a result of managerial influence.

### **3.3 RECOMMENDATIONS**

In the following segment, recommendations for the specific population and for future research are made.

#### **3.3.1 Recommendations for the organisation**

It is of utmost importance that health organisations in South Africa recognise the value of their employees and start strategising on methods to understand these employees' experiences at work. Research on factors that influence health workers' satisfaction and commitment should be continuous. Strategies should be developed and implemented to ensure that these employees are retained within the healthcare profession and not tempted to emigrate for more rewarding working experiences. Factors over which the organisation has control should be closely monitored to determine the employees' feelings and experiences towards their jobs. If this could be done, organisations can focus on aspects important to their employees and in the process ensure the retention of these employees. Sofie, Belzar and Young (2003) indicated that it is important for organisations to create a supportive working environment and culture where organisational commitment is fostered. If this could be accomplished, employees' turnover intention will dramatically reduce, and a decrease in the continuous and costly hiring of new nurses should result. Staff turnover affects the employees' morale and impairs patient care, highlighting the importance

of the identification of methods to improve employees' job satisfaction, in order to reduce their turnover intention.

In South Africa, the public health sector faces major challenges to produce, recruit and retain scarce categories of health professionals. Wilson (2005) stated that recruitment and retention needs to concentrate more on increasing financial incentives of the nurses and creating a workplace that is more desirable and that will lead to greater job satisfaction, because the expertise that is required and the enormous workload, more often than not, exceed the financial compensation workers receive. Pro-active measures should be implemented by government and private healthcare institutions to provide more lucrative bursaries to students who wish to study this profession. This can be done by initiatives to educate young aspiring candidates about the intrinsic and extrinsic rewards of this profession. Furthermore, initiatives to attract skilled professionals who had emigrated to other countries should be considered (Coetzee, 2009).

This study further indicated that job satisfaction and objective experience of rewards (defined by: pay satisfaction, involvement in policy making and satisfaction with promotion opportunities) are significant predictors of nurses' turnover intention. This would suggest that more focus should be drawn to the development of strategies to ensure employee's active participation in policy making, most likely resulting in the creation of fair promotion opportunities and ensuing increased remuneration structures. According to Wang (2006), pay satisfaction shows a positive relation with job satisfaction. Thus, by ensuring sufficient remuneration structures and opportunities for advancement and progression, a culture can be fostered where these individuals can plan a future within the organisation and experience professional growth within their careers, resulting in a decreased turnover intention. In a study by Xaba and Phillips (2001), it was evident that nurses felt that the opportunities to grow professionally in South Africa were minute, increasing their decision to terminate their services and leave the country for more lucrative and appealing job opportunities abroad.

### **3.3.2 Recommendation for future research**

The first recommendation for future research is that it could be more representative of both gender groups. Most of the respondents in the current study were female nurses (88,2%). This is also representative of the gender representation within this occupational group, but male nurses may

have very different experiences when compared to female nurses, also because of the socialised roles and expectations of the gender groups.

Furthermore, the study was only conducted in private hospitals in the Gauteng and North-West. The results of this study are but a small piece of the whole picture of factors that influence nurses' turnover intention. Future studies should focus on both the private sector and the public sector to draw conclusions about workers' overall experience in the different sectors across the whole of South Africa's different demographic areas.

Future research should be conducted on all levels in the nursing field in order to determine the differences within the different job grades. This could be accomplished by increasing the sample size, as the sample size for the present study was small and not representative of all job grades within the health profession.

Another recommendation for future research is to examine other factors that contribute to nurses' turnover intention. South Africa is one of the most diverse countries in the world and therefore organisations have the challenge of managing this diverse workforce. Researchers should focus more on factors that relate to different cultural groups' turnover intention. These factors may include socio-demographic characteristics, trust in the organisation, supervisory and leadership styles, working hours and availability of resources.

Lastly, it is important to determine a wider spectrum of intrinsic and extrinsic rewards within the healthcare industry. Disappointingly, the questionnaire used in this study did not present with the anticipated reliability and validity. It is essential that more research be conducted in the development of this questionnaire for future studies, in order to measure intrinsic and extrinsic reward factors deemed valuable by nursing professionals. Taking in consideration the abovementioned, a critical recommendation for future research is that it may have to take a step back, and start an investigation into external and internal rewards within the nursing profession within a qualitative design. Although it would be an enormously time-consuming mission, other moderating factors that influence nurses' turnover intention and dimensions of reward, specific to the South African context, may emerge. Alternatively, dimensions can be expanded by the formulation of additional items.



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