

# Journal of Education, Society and Behavioural Science

29(4): 1-9, 2019; Article no.JESBS.43474

ISSN: 2456-981X

(Past name: British Journal of Education, Society & Behavioural Science,

Past ISSN: 2278-0998)

# Occupational Stress and Job Satisfaction among Nurse Educators in Ahmadu Bello University, Zaria

Bello Hussainat Taiye<sup>1\*</sup>, Bello Hassanat Kehinde<sup>1</sup>, Maimuna. Abdul<sup>1</sup> and Hadiza B. Mustapha<sup>1</sup>

<sup>1</sup>School of Midwifery, Malumfashi-Katsina State, Nigeria.

#### Authors' contributions

This work was carried out in collaboration among all authors. Author BHT designed the study, performed the statistical analysis, wrote the protocol and wrote the first draft of the manuscript. Authors BHK and MA managed the analyses of the study. Author HBM managed the literature searches. All authors read and approved the final manuscript.

### **Article Information**

DOI: 10.9734/JESBS/2019/v29i430116

Editor(s)

(1) Dr. Jyotsana Shukla, Assistant Professor, Amity Institute of Behavioral and Allied Sciences, Amity University, Lucknow Uttar
Pradesh. India.

(2) Dr. Redhwan A. Al-Naggar, Population Health and Preventive Medicine, Faculty of Medicine, Universiti Teknologi MARA, Sungai Buloh, Selangor, Malaysia.

Reviewers:

(1) Lolita Rapoliene, Klaipeda University, Lithuania, Europe.

(2) Jose Carlos Souza, Mato Grosso do Sul State University, Brazil.

(3) Debra Rose Wilson, School of Nursing, Austin Peay State University, Clarksville, TN, USA.

Complete Peer review History: <a href="http://www.sdiarticle3.com/review-history/43474">http://www.sdiarticle3.com/review-history/43474</a>

Original Research Article

Received 30 November 2018 Accepted 26 February 2019 Published 06 April 2019

# **ABSTRACT**

**Aims:** This research was carried out on occupational stress and job satisfaction among nurse educators in Ahmadu Bello University, Zaria with the aim of identifying the type of stress nurse educators encounter in their work, determining the influence of level of education on the stress encountered, identifying the satisfaction nurse educators derive from their job.

**Study Design:** The study population includes nurse educators. A cross-sectional descriptive survey design was used with a sample size of 185 respondents. A multistage sampling and simple random sampling technique were used where nurse educators were stratified based on their ranks.

**Results and Discussion:** The result of the findings showed that majority of nurse educators the stress of insufficient teaching facilities i.e 42.62% (104), the influence of level of education on stress encountered is that of positive influence i.e 90% (144), respect and recognition for a job is the commonest factor that enhances the respondent's job satisfaction 28.71% (960) and the satisfaction derived by respondents is that of impaction of knowledge on junior/student nurses.

**Conclusion:** Occupational stress is high among nurse educators due to insufficient teaching facilities thus negatively affect their satisfaction. Therefore it is recommended that teaching facilities should be provided as well as working holidays so as to reduce job stress and thus enhance satisfaction.

Keywords: Occupation; stress; job; satisfaction; nurse educator.

#### 1. INTRODUCTION

Occupational stress is a major hazard for many workers especially nurses and nurse educators. Stress is a term that is widely used in everyday life with most people having an appreciation about it meaning, it is commonly believed to occur in situations where there is excessive pressure being placed on someone. Occupational stress can then be defined as the physiological and emotional responses that occur when workers perceive an imbalance between their work demands and their capability and/or resources to meet their demands. Stress response occurs when the imbalance is such that the workers perceive they are not coping in situations where it is important to them to cope. Increase workloads downsizing, overtime, hostile working environment and shift work are just a few of the many causes of stressful working conditions (Occupational Stress Factsheet 2006).

The term "Job Satisfaction first described by Hoppock 1933 who observe that job satisfaction is a combination of psychological, physiological and environmental circumstances that cause a person to say "I am satisfied with my job". While there have been many debates on the concept of job satisfaction, in most studies it is described as how people feel about their job and its different aspects. It is the extent to which people like (satisfaction) or dislike (dissatisfaction) their jobs. Job satisfaction is necessary for nursing as it improves the quality of care and also provides effective transfer of knowledge in the part of nurses educators. Achievement, recognition, advancement, responsibility and growth in the job are sources of job satisfaction (Chinweuba, 2007).

Nurse educators are people who help individuals or student nurses to discover, develop and make use of their inner abilities, potentials and capabilities for successful practice in a field that deals with human life and living in the society. Nursing education prepares a practitioner who will be able to transfer nursing theory into relevant professional nursing practice, also

prepare nurse researcher who is charged with the task for further defining the body of nursing knowledge and preparing future educators of nurses [1].

Nurse educators are faced with a task that demands a high degree of commitment and consciousness. In an attempt to accomplish the demands of her job she finds herself faced with a lot of challenges. Occupational stress decreases job satisfaction, increase turnover rate, and reduces nursing quality. At different workplace nurse educators are confronted with different work tasks, working condition and hence different sources of stress. It is therefore pertinent to consider the extent of relationship that exists between the stress the nurse educators experience in the course of their job and the satisfaction they derive from them (Chinweuba, 2007).

#### 1.1 Statement of the Problem

Most nurse educators operate in conditions least conducive to the enhancement of job satisfaction i.e heavy teaching load, poor pay and poor or sometimes non existing physical facilities for effective education unlike counterparts in other occupations. An educational system that saddles nurse educators with heavy teaching assignment may neither have good teaching nor effective nursing practice. A job that causes stressful state and a pressure to meet demands of different categories of individuals, accompanied with some neurotic fear of failure or being removed from office, anxiety or perhaps lack of self-actualization, is likely to result in stress and some form of job dissatisfaction.

In light of the above observations, the researcher felt the need to conduct a study to determine the relationship between occupational stress and job satisfaction among nurse educators at Ahmadu Bello University, Samaru Zaria.

# 1.2 Research Objectives

1. To identify the type of stress nurse educators encounters in their work.

- To determine the influence of level of education on the stress encountered.
- To identify factors which enhance job satisfaction.
- To determine the satisfaction nurse educators derived from their job.

## 1.3 Research Question

The research will answer the following questions,

- What type of stress do nurse educators undergo?
- 2. Does the level of education has an influence on the stress encountered?
- 3. What are the factors that enhance Job satisfaction?
- 4. What satisfaction do nurse educators derive from their job?

# 1.4 Significance of the Study

The result of the study will be significant in the following ways:

- The findings will be useful to the nurse educator (i.e respondents).
- It will be beneficial to the government for policy making.
- It will serve as a reference for further studies.

#### 1.5 Limitation

The element of social desirability may have led some of the lecturers/nurse educators not filling true answers in the questionnaire.

# 1.6 Conceptual Framework

From the above conceptual framework, it can be seen that job rotation affects job satisfaction, in the sense that rotation of a job especially the nursing profession which involves shift work, it usually cause stress on the nurses and thus it reduces the satisfaction they derive, most nurses and nurse educators are not satisfied with the shift work involved in their profession, especially the right shift work and this thus causes occupational stress.

Role stress also is another factor that affects job satisfaction. The role of nurse educators in the nursing profession is tedious and as such affects job satisfaction. The fact that most of the clinical work is done by the nurses when compared to other health personnel also causes stress and negatively affects their satisfaction.

Job rotation, job satisfaction and role stress all depend on organizational commitment. The level of commitment in an organization depends on the satisfaction derived by the workers i.e the commitment in the nursing profession depends on the satisfaction the nurses, as well as the nurse educators, derive from their work. The stress they undergo in their work also affects the organization commitment in the sense that occupational stress among nurse educators affect the nurses and the nurse educators committed to their work.

#### 1.7 Stress

Stress is derived from the Latin words "stinger" which means to draw tight. Stress has been a focus in medical science where it has been defined as a perturbation of the body's homeostasis. This demand for mind-body occurs when it tries to cope with incessant changes in life (Cooper et al. 2002). In the organizational context, stress has been found to be experienced by employees due to job insecurity, performance expectation, technology changes and personal and family problems. Stress is believed to cause depression, irritation, anxiety, fatigue and thus lower self-esteem and reduced job satisfaction [2].

Occupational stress is a condition wherein jobrelated factors, such as too many or too little works, fatique from the physical strain of the work, poor career structure or lack of participation in decision making interact with the worker to change his/her psychological condition. It occurs when there is a discrepancy between the demands of the environment/workplace and an individual's ability to carry out and complete these demands. All workers have their own peculiar job-related stressors and that while there is little research to indicate which occupations are most stressful, there is a consensus among experts in the field that stress is less a function of the type of work than the condition of work [3].

# 1.8 Occupation Stress Leads to

- a) Hostile working environment: When the working environment is not conducive or favourable, it tends to cause stress on the worker.
- b) Lack of recognition for good teaching: Stress occurs when the workers' effort is not appreciated or comprehended and thus workers are not encouraged.

- Work Overload with no Leisure: Workers working without time forest are said to be stressed up.
- d) Lack of Recognition of Recognition of Extra Job: Extra job is sometimes performed by a worker who needs to be compensated and the extra job recognized, but when this is not done stress occurs.
- e) Lack of working facilities: Working facilities help to make work easier and more favourable. But when there are no facilities, it tends to pose stress on workers [4].

# 1.9 Effects of Occupational Stress

- i. **Fatigue:** Mental or physical tiredness, following prolonged or intense activity.
- ii. Headache: Pain felt deep within the skull.
- iii. **Sleep Disturbance:** Inability to rest and sleep or lack of refreshed sleep.
- iv. Eating Disorders: Inappropriate or inadequate way of eating either starvation or overeating.
- v. Anxiety: Generalized pervasive fear.
- vi. **Stoke:** A sudden attack of weakness affecting one side of the body. It is the interruption to the flow of blood to the brain.
- vii. **High Blood Pressure:** Elevation of the arterial blood pressure above the normal range expected in a particular age group.
- viii. Immune System Dysfunction: The destruction of organs responsible for immunity e.g lymphoid aggregates (Spleen, tonsils, gastrointestinal lymph tissue) [1].

# 1.10 Stress Model

The demand control model and effort-reward imbalance model are the two work stress model that help to identify particular job characteristics important for employee's well being.

The Demand Control Model (DC): This model predicts that the most adverse health effects of psychological strain occur when job demands are high and the ability to make a decision is low.

The ERI Model: Assumes that emotional distress and adverse health effects occur when there is a perceived imbalance between effort and occupational rewards.

### 1.11 Satisfaction

The term "Job Satisfaction was describe by Hoppock 1933 who observe that job satisfaction is a combination of psychological, physiological and environmental circumstances that cause a person to say "I am satisfied with my job" while there are many debates on the concept of job satisfaction, in most studies it is described as how people feel about their job and it different aspects. It is the extent to which people like (satisfaction) or dislike (dissatisfaction) their jobs [5].

However, a more direct description is provided which describes job satisfaction as the end state of feeling, the feeling that is experienced after a task is accomplished. The feeling could be negative or positive depending on the outcome of the task undertaken [6].

# 1.12 Factors Influencing Job Satisfaction

- a) Job Design: In organizational development (OD), work design is the application of socio-technical system principles to the humanization of work. Job design is aimed at improving quality and reducing employee's problem e.g grievances, absenteeism.
- b) Job Rotation: This is an approach to managerial development where an individual is moved through a schedule of assignments designed to give him/her a breadth of exposure to the entire operation. It also the scheduled exchange of persons in offices. It is practised to allow qualified employees to gain work and to reduce boredom and increase job satisfaction through job rotation.
- c) Job Enlargement: This means increasing the scope of a job by extending the range of its job duties and responsibilities generally within the same level and periphery. It seeks to motivate workers through reversing the process of specialization and thus enhancing job satisfaction.
- d) Job Enrichment: This involves three (3) steps i.e. linking employee's performance directly to reward, making sure the employee wants the reward and turning employees wants the reward and turning employees' effort into performance. All these provide job excellence performance. All these provide job excellence and thus enhance satisfaction.

Other influence on satisfaction includes;

- Management style and culture
- Employee's involvement
- Empowerment and autonomous work position [7].

# 1.13 Models of Job Satisfaction

- a) Affect theory
- b) Dispositional theory
- c) Two-factor theory (motivator-hygiene theory)
- d) Job characteristics model

# 1.14 Affect Theory

Edwin A. Locker's range of affect theory 1967 is arguably the most famous job satisfaction model. The main premise of the theory is that satisfaction is determined by a discrepancy between what one has in a job. Further, the theory states that how much one value's a given fact of work (e.g the degree of autonomy in a position) moderates how satisfied/dissatisfied one becomes when expectation are/aren't meet. When a person values a particular facet of a job, his satisfaction is more greatly impacted both positively and negatively compared to one who doesn't value that facet.

# 1.15 Dispositional Theory

Another well-known job satisfaction theory is the dispositional theory template. It is a general theory that suggests that people have innate dispositions that cause them to have tendencies towards a certain level of satisfaction, regardless of one's job. This approach becomes a notable explanation of job satisfaction in light of evidence that job satisfaction tends to be stable over time and across careers and jobs. Research also indicated that identical twins have similar levels of job satisfaction [8].

# Two-Factor Theory (Motivation Hygiene Theory)

 Frederick Herzberg's two-factor theory also known as motivator-hygiene theory attempt to explain satisfaction and motivation in the workplace. This theory states that satisfaction and dissatisfaction are driven by different factors i.e motivation and hygiene factor respectively. An employee's motivation to work is continually related to the job satisfaction of the subordinate. Motivation can be seen as an inner force that drives the individual to attain personal organizational goals. These motivating factors are said to be intrinsic to the job or work carried out. Hygiene factor includes aspects of the working environment such as pay, company policies, supervisory factors and other working conditions. However, the model has been criticized in that it does not specify how motivating hygiene factors are to be measured [1].

#### Job Characteristics Model

Hackman and Oldhan [9] proposed the job characteristic model which is widely used as a framework to study how particular job characteristics impact on job outcomes, including job satisfaction. The model stresses that there are five core job characteristics:

- Skill variety
- Task identity
- Task significance
- Autonomy
- Feedback

Which impact three critical psychological states (experienced meaningfulness, experienced responsibility, and knowledge of the actual result) in turn influencing work outcome (job satisfaction, absenteeism, work motivation etc).

# 1.16 Link between Job Stress and Job Satisfaction

Several studies have tried to determine the link between stress and job satisfaction. Occupational satisfaction and job stress are the two hot focuses on human resources management researches. One study of the general practitioner in England identified four job stressors that were predictive of job dissatisfaction.

In a study by Williams, 2004 to determine the relationship between stress, job satisfaction, coping strategies and attributional style among nurses, data analysis suggest that attributional style, job satisfaction and stress are all significantly associated with coping strategies. Having a positive attributional style towards positive events (i.e job promotion, project completion) was significantly correlated with using the coping strategies of reframing (i.e looking for something good in the situation). Having a positive attributional style towards

negative events was significantly correlated with active (i.e. doing something about the situation) and planning (the developing the strategy) coping style. Global job satisfaction, intrinsic job satisfaction (i.e. the feeling of accomplishment, independence) and lower levels of stress were significantly correlated with the more positive type of coping strategies. These results suggest that respondents with a positive attributional style and a high level of job satisfaction cope with stress by focusing on positive ways to resolve the situation (Williams, 2004).

Moreover, emphasis has been made that job stressors are predictive of job dissatisfaction and greater propensity to leave the organization. Studies in the UK found out that there are some occupations that are reporting more than average on each of the factors such as physical health, psychological wellbeing and job satisfaction. The relationship between variables can be very important to academicians. If a definite link exists between two variables it could be possible for an academician to provide interaction in order to increase the level of one of the variables in hope that the interaction will also improve the variables as well (McNeely, 2004).

In regards to the relationship between role stress and job satisfaction, tension at work is caused by role ambiguity, role conflict and role overload has a significant negative correlation with job satisfaction. A study on general practitioners in Hongkong found out that though the medical practitioners were generally satisfied with their work. In another study of military Pilot, it was found that during peace times in Iran, 13.5% pilot out of 89 military pilots studied experienced high stress [10].

Stress is a contributing factor to organizational inefficiency, high staff turnover, absenteeism because of sickness, decrease the quality of care, increased the cost of health care and job decreased satisfaction. Studies of occupational stress among nurses have uncovered a number of common stressor in this population. In a particular field of certified registered nurse anaesthetics (CRNA) the common stressors as finding out in the study are interpersonal patient-related stressors relationship and the operating room environment (McNeely, 2004).

To assist the organization with assessing and managing workplace stress, researchers have devised a number of general stress scales and occupational stress scales. In recent years researchers have argued that occupation-specific and industry-specific stress Scales are more reliable and valid predictors of stress than general occupational stress scales. As a result of this argument, a great deal of recent stress research on various occupational groups (e.g. teachers, nurses and Police officers) has used occupational stress scale that is specifically designed for these groups [8].

Though stressors in workplace cause stress which in turn leads to strains (negative effects on health and quality of work) researchers have identified a number of moderating variables which can reduce the experience of stress or reduce the negative effects of stress. Some example s of these variables are coping strategies social support and hardiness [5].

#### 2. MATERIALS AND METHODS

The design for this study was a descriptive survey.

# 2.1 Sample Size and Sampling Technique

A sample size of 185 was used for the study; this was determined by using 40% of the study population as suggested by Nwanna [11] who stated that if a population is a few hundred, 40% is representative. Multistage and simple random sampling technique was used for the study.

# 2.2 Instrumentation

A structured self-administered questionnaire was designed in such a way that it explores the respondents' knowledge on occupational stress, job satisfaction, the relationship between occupational stress and job satisfaction, and how the two variables affect the nurse educator.

Majority of questions were closed-ended questions, however, some were open-ended so as to obtain further details on some issues by the respondents. The questionnaire has five sections containing a question on a different aspect of interest.

# 2.3 Validity/Reliability of Instrument

The validity of the instrument was measured by calibrating the instrument to a least precision and scrutiny of the items capable of extracting needed information.

# 2.4 Data Analysis

The data was analyzed and represented using descriptive statistical techniques i.e percentage and frequencies.

#### 2.5 Ethical Considerations

- Ethical clearance was sought from the head of department, nursing science and the hospital administration of ABUTH before administering questionnaires to the population concerned.
- Informed consent was sought from all nurse educators involved in the studies before proceeding with questionnaire administration.
- Confidentiality of respondents was strictly ensured.

#### 3. RESULTS AND DISCUSSION

The research finding shows that most of the respondents 44.6% (82) are within the age range of 25-29 followed by age range of 30-34 which is 30.4% (56). This is in contrast to the study carried out in Nnamdi Azikiwe University, Abia state [12] where most of the respondents (104) were aged 41 above and few within (8) 26-30 years.

Majority of respondents 78% (144) are females and few 23.9% (44) are males. 56.5% (104) are Muslims and 43.5% (80) Christians.

Yoruba's are the majority i.e 32.6% (60) followed by other tribes 30.4% (56). Most of the respondents 67.3% (124) are within the rank of nursing officer and senior nursing officer while few 2.2% (4) are within graduate assistant and

lecturer 2.32% (60) of respondents are from medical ward while 15.2% (28) are from nursing department. Many 30.4% (56) of respondents have had 5010 years of experience while 13% (24) have had 10-15 years of experience. This is in agreement with the study carried out in Nnamdi Azikiwe University, Abia state [12] were 21% had 6-10 years of experience and 13%(54) had 11-15 years of experience. While the majority of respondents are females (149).

All respondents (100%) have heard about occupational stress, majority 40.9% obtained their information from educational institution followed by health worker 37.9% (100) while few 4.6% (12) from friends. Work overload with no leisure is the commonest source of stress among respondents. i.e 54.4% (148) ,followed by hostile working environment 22.1% (60) and 8.9% (29) by job insecurity, this is in contrast with the study in Abia state [12] where qualification difference was the commonest source of stress (45.1%) while work overload and too much brain work causes stress among few respondents (17.8%). The commonest effect of occupational stress is fatigue 63.2% (172), followed by headache 17.7% (48) and their immune system dysfunction 11.7% (32).

All respondents 100% were aware of job satisfaction and most of them obtained their information from educational institutions 57.8% (148) followed by health workers 20.3% (52) and few 3% (8) obtained their information from the newspaper. Majority of respondents 67.3% (12%) asserted that occupational stress is related to job satisfaction while few 32.6% (60) considered them unrelated. This is consistent with a study in the UK which found out that in some occupation stress was reported more than



Fig. 1. Conceptual framework of the relationship among job rotation, job satisfaction, organizational commitment and role stress [7]

average on each of the factors such as physical health, psychological well being and job satisfaction, (Sheena et al. 2005). Most of the respondents 82.3% (102) reasoned that the stressful nature of job causes a low turnover, work-related illness and few agreed that stress at work increases job effectiveness and satisfaction 9.7% (12). Most of the respondents considered occupational stress and job satisfaction unrelated because all workers can be satisfied or dissatisfied regardless of the stress they face at work i.e 63.3% (38) while few 8.3% (5) gave other reasons for considering them unrelated. Most of respondents 84.8% (156) asserted that stress at work affects their job satisfaction while few 15.2% (28) answered No. this is consistent with the study at Iran [13] which states that stress is a contributing factor to organizational inefficiency, high staff turnover, absenteeism because of sickliness, decrease quality of care, increased cost of health care and decreased job satisfaction.

Insufficient teaching facilities were the most common source of stress encountered by the respondents 42.6% (104), followed by heaving teaching load 34.4% (84). Most of the respondents are satisfied with their job i.e 69.6% (128) while few 30.4% (56) are not satisfied with their job. This is in agreement with a study in Hongkong [10] which found out that most medical practitioners were generally satisfied with their work.

Majority of the respondents 28.7% (60) are satisfied with their job because of the respect and recognition for the job, followed by good job design 22.9% (48) and then good remuneration. Job insecurity 29.6% (32) is the common reason why women respondents are not satisfied with their job, followed by lack of time to do all work and lack of freedom to control one's working day i.e 22.2% (24) respectively. This is in contrast with the study in Iran [13] where patiently related stressors, interpersonal relationship and the working environment were the reasons for dissatisfaction.

Most of the respondents 86.9% (160) asserted that their level of experience influenced their coping with stress, while few 13% (24) answered no. The level of experience/education affects most of the respondents positively 90% (144) and a few 15% (16) negatively. This is similar to the study in Abia state, Nigeria [12] where 70% of respondents have their level of experience/education affecting their coping with

stress and also there is a perfect positive relationship of (1.00) between job stress and job satisfaction as influenced by the level of education.

Impaction of knowledge on junior/student nurses is the commonest satisfaction derived by most of the respondents 44.6% (82), followed by updating of respondents knowledge and experience i.e 33.7% (62) and then good teaching environment, 21.7% (40).

# 4. CONCLUSION

Occupational stress is one of the major reason for dissatisfaction at work as it affects the physical, mental and social wellbeing thus leads to low performance at work. Most of the respondent is satisfied with their job due to their level of knowledge and experience which made it easier for them to cope well under stress. Hostile working environment, insecurity and lack of holidays lead to stress among the nurse educators. It is therefore important to create a secure working environment, holidays for workers among others to improve satisfaction.

# 5. RECOMMENDATION

Based on the findings of this study, the following recommendations were made:

- Need for reduction of stress at work by the provision of adequate teaching facilities by the government.
- Provision of adequate working holidays and good job security by the university management.
- Nurse educators should further encourage their students so as to boost proper performance in the student, and thus upgrading their satisfaction.

## CONSENT

Informed consent was sought from all nurse educators involved in the studies before proceeding with questionnaire administration.

#### ETHICAL APPROVAL

Ethical clearance was sought from the head of department, nursing science and the hospital administration of ABUTH before administering questionnaires to the population concerned.

# **COMPETING INTERESTS**

Authors have declared that no competing interests exist.

#### **REFERENCES**

- Landsbergis P. The changing organization of work and the safety and health of working people. New York State Public Employees Federation, USA; 2006. Available:http://www.pef.org
- Manivonnan L. Relationship between job satisfaction and job stress amongst teachers and managers. Indian Journal of Industrial Relations, India; 2007. Available:http//www.goliath.com
- Parikh P. Occupational stress and coping among nurses. Indian Institute of Health, India; 2004.
- McNeely E. The consequences of job stress for nurses' health: Time for a checkup: U.S.A. Elsevier; 2005. Available:www//http.pubmed.gov
- Mrayyan IM. Job stressors and social behavours: Content management. Pty Ltd, Jordan; 2011.
- Saiyadain M. Relationship between job satisfaction and job stress amongst

- teachers and managers. Indian Journal of Industrial Relations, India; 2007.
- 7. Hamilton P. Job satisfaction in a Norwegian population of nurses. A questionnaire survey. National Library of Medicine, U.S.; 2007.
- 8. Bhattacharya T. Occupational stress and coping among nurses. Indian Institute of Health, India; 2004.
- 9. Hackman JR, Oldham GR. Motivation through the design of work: Test of a theory. Organisational Behavior and Human Performance. 1976;16:250-279.
- Ahmadi, Allireza. Relationship between job satisfaction and job stress amongst industrial relations, India; 2006.
- Nwanna OC. Introduction to research for student. Teachers, Ibadan; HEBN Publication Plc. 2007;71.
- Chinwueba T. Occupational stress and job satisfaction among nurse educators in Nigeria. West African College of Nursing, Lagos, Nigeria; 2007.
- AbuAlRub RF. Job stress, job performance, and social support among hospital nurses. Journal of Nursing Scholarship. 2004;36(1):73-78.

© 2019 Taiye et al.; This is an Open Access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/4.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Peer-review history:

The peer review history for this paper can be accessed here: http://www.sdiarticle3.com/review-history/43474