

Impact of Low Healthcare Employees Job Satisfaction to Organization

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ABSTRACT

Job satisfaction among healthcare employees remains a decisive factor in shaping the quality, continuity, and integrity of healthcare delivery. This study explores the underlying contributors to low job satisfaction and examines how these conditions influence organisational performance within the healthcare sector. The literature consistently points to workload pressure, burnout, limited recognition, inadequate remuneration, and unsupportive work environments as central issues that weaken employee morale and reduce overall engagement. These conditions have been associated with higher turnover, greater financial strain on organisations, and increased risks to patient safety. Evidence from multiple settings indicates that dissatisfaction disrupts service quality, contributes to medical errors, and places additional stress on remaining staff, creating a cycle that is difficult to reverse once established. The discussion further highlights how global health crises, including the recent pandemic, intensified existing structural weaknesses and magnified the emotional and professional burden carried by healthcare workers. The findings reinforce the argument that strengthening job satisfaction is not merely an employment concern but a strategic priority for organisational resilience. Fostering supportive work environments, ensuring fair and transparent compensation, improving recognition practices, and creating meaningful opportunities for growth are essential pathways toward sustaining a committed and competent healthcare workforce.

Keywords: Job satisfaction, healthcare employees, organisational performance, burnout, work environment

INTRODUCTION

Job satisfaction among healthcare employees is a crucial determinant of both the quality of patient care and the overall functioning of healthcare systems (Nepal et. al. 2022). This complex phenomenon is influenced by a myriad of factors ranging from individual employee characteristics to broader organizational policies and practices. Job satisfaction signifies an employee's overall attitude towards their work and the organization they are a part of (De-la-Calle-Durán & Rodríguez-Sánchez, 2021).

The significance of addressing job satisfaction among healthcare employees has never been more critical than in the current climate, marked by unprecedented pressures on the healthcare system due to ongoing global health challenges such as recent COVID-19 pandemic, evolving patient expectations, and a rapidly changing healthcare landscape (Perego et al., 2023). The unique challenges of the healthcare sector, including high stress levels, the emotional labor involved in caregiving, and the critical nature of the work, make it imperative to address the well-being of healthcare workers (Joshi et al., 2023). Workload, staffing levels, autonomy, collegial support, leadership quality, professional development opportunities, and compensation are identified as key determinants of job satisfaction (İPSİRLİ & NAMAL, 2023). These factors are not just workplace variables; they are critical components that influence a healthcare worker's ability to perform optimally, cope with the pressures of the job, and maintain a commitment to providing high-quality care.

The impact of low job satisfaction among healthcare employees on organizational performance is an issue with profound implications. At its core, job satisfaction among healthcare professionals is essential for the delivery of high-quality patient care, the maintenance of employee morale, and the overall efficiency of healthcare organizations (Santana & Pérez-Rico, 2023). On top of that, the World Health Organization (WHO) has highlighted the global health workforce crisis as one of the most pressing challenges of our time, with an estimated shortage of 18 million health workers by 2030, primarily in low- and middle-income countries (van de Pas et al., 2023). This makes the retention of existing healthcare staff through enhancing job satisfaction an urgent priority.

The cycle of dissatisfaction and turnover can strain existing staff, leading to burnout and further dissatisfaction, creating a vicious cycle that can be challenging to break. Therefore, addressing low job satisfaction in healthcare settings is not just about improving the workplace experience for employees; it is a strategic imperative that directly influences the effectiveness, reputation, and resilience of healthcare organizations. Through a comprehensive understanding of the factors that contribute to job satisfaction, healthcare organizations can develop targeted strategies to enhance employee well-being and, by extension, improve the overall quality of healthcare delivery. This study will investigate the impact of low healthcare employees job satisfaction to organization.

METHODOLOGY

This narrative review was conducted by searching peer-reviewed journals in ScienceDirect, Scopus, Emerald Insight, and Google Scholar. Keywords used included “job satisfaction,” “healthcare employees,” “burnout,” “turnover,” and “organizational impact.” Articles published between 2018 and 2024 were considered to capture current trends following the global healthcare crisis period. Studies were included if they focused on healthcare employee job satisfaction and its organizational implications. Opinion pieces, conference abstracts, and studies not related to healthcare settings were excluded. Themes were derived through inductive reading, comparison of recurring concepts, and grouping of findings related to determinants of low job satisfaction and organizational outcomes.

Theory

The study of job satisfaction among healthcare employees can be grounded in several theoretical frameworks that provide insight into the complex dynamics of work satisfaction and its impacts on organizational outcomes. Among the most relevant theories is Herzberg's Two-Factor Theory, which distinguishes between hygiene factors and motivators (Lundberg et al, 2009). Hygiene factors, such as salary, work conditions, and job security, do not necessarily enhance job satisfaction but, if absent or inadequate, lead to job dissatisfaction. Motivators, on the other hand, such as recognition, achievement, and personal growth, directly contribute to job satisfaction. Applying this theory to the healthcare context underscores the importance of addressing both the foundational needs of healthcare workers and the aspects that can enrich their job experience and satisfaction.

Another pivotal theory is Maslow's Hierarchy of Needs, which posits that individuals are motivated by a hierarchy of needs, starting from basic physiological needs to higher-level psychological needs, culminating in self-actualization (Mustofa, 2022). Within the healthcare sector, ensuring that employees' basic needs for security and safety are met is critical, especially considering the high-risk environment in which they operate. Moreover, facilitating opportunities for advancement and personal growth can help healthcare workers achieve higher levels of job satisfaction through self-actualization.

Lastly, the Conservation of Resources (COR) Theory is particularly relevant in the high-stress environment of healthcare (Bon & Shire, 2022). This theory posits that individuals strive to obtain, retain, and protect their resources, including personal characteristics, conditions, or energies that are valued. In healthcare settings, where resources can be quickly depleted due to high demands and emotional strain, strategies that help employees conserve or replenish their resources are crucial for maintaining job satisfaction and preventing burnout.

LITERATURE REVIEW

Workload and Burnout

Excessive workload remains the most dominant driver of dissatisfaction among healthcare employees. Burnout, constant emotional strain, and staffing pressure are repeatedly identified as internal stressors reducing morale and commitment (Yusuf & Wulandari, 2023). During the COVID-19 crisis, already demanding work conditions intensified, amplifying emotional labour, psychological fatigue, and role overload (Perego et al., 2023). The persistent high-demand environment contributes to exhaustion, reduced engagement, and eventual intention to exit healthcare settings (Mere et al., 2023). These findings confirm that workload-related burnout is one of the most critical predictors of declining job satisfaction.

Compensation and Recognition

Inadequate remuneration, limited promotion opportunities, and lack of recognition are consistently identified as core elements of dissatisfaction among healthcare workers (Cunningham et al., 2022; Karaferis et al., 2022). Pay and reward systems were reported as highly unsatisfactory during the pandemic, further weakening morale (Cunningham et al., 2022). Recognition efforts, although valued, are irregular and fail to address emotional and professional needs of healthcare professionals, as evidenced in the Make 'EM Well Project, where quality time, service-based appreciation, and verbal affirmation were scarcely practiced despite being desired (Krywko, 2019). These conditions discourage long-term retention and contribute directly to reduced motivation.

Work Environment and Organisational Support

Unsupportive workplace climates, insufficient autonomy, and gaps in leadership quality heighten dissatisfaction across healthcare institutions. Work environment conditions directly influence stress levels, turnover intentions, and workplace culture (İPŞİRLİ & NAMAL, 2023). Even in facilities facing workforce shortages, improvement of work environments demonstrated measurable benefits in reducing dissatisfaction and burnout (Diakos et al., 2022). Structural constraints, leadership limitations, and emotional strain contribute to an organisational culture that struggles to sustain worker resilience and commitment (Schlak et al., 2022).

Psychological Well-being and Motivation

Healthcare workers face continuous psychological demands, balancing emotional labour with high-stakes responsibilities that threaten mental well-being (Joshi et al., 2023). Job satisfaction is closely tied to intrinsic and extrinsic motivational drivers, where adequate salary, institutional support, and clear advancement pathways remain central to perceived value and self-efficacy (Karaferis et al., 2022). Burnout-driven exhaustion compromises emotional stability, coping capacity, and professional engagement, indicating that addressing psychological strain is fundamental to sustaining healthcare workforce motivation.

Impact on Turnover and Patient Safety

Low job satisfaction is directly associated with harmful organisational outcomes including turnover, service disruption, and patient safety risks (Yusuf & Wulandari, 2023). The economic burden of turnover extends far beyond recruitment, with replacement of a single healthcare employee costing between 90 percent and 200 percent of salary expenditure, depending on role and institution (Jian et al., 2022; Nath, 2022). Furthermore, dissatisfaction has been linked to increased medical errors and weakened safety culture across clinical units (Paneerselvam et al., 2022; Purwani et al., 2020). Stress-driven dissatisfaction leads to breakdowns in communication, poor clinical judgment, and reduced attentiveness, ultimately threatening quality of care and institutional stability.

Critical Analysis of Existing Evidence

The reviewed studies collectively confirm that workload pressure, compensation dissatisfaction, and inadequate recognition are central drivers of low job satisfaction among healthcare employees. A major strength across these works is the consistency of burnout-linked findings, particularly in highlighting how emotional and operational

pressure correlates with disengagement and turnover (Yusuf & Wulandari, 2023; Perego et al., 2023). This provides a strong evidence base for the argument that structural work strain remains the most persistent threat to retention.

However, several weaknesses are evident. Many studies emphasize burnout and compensation but provide limited examination of leadership behaviours, staffing policy structures, or long-term organisational redesign. While remuneration issues were widely noted as primary dissatisfaction factors during the pandemic (Cunningham et al., 2022), some findings under-represent intrinsic motivators such as professional identity, autonomy, and commitment to patient care. This creates partial visibility into the full spectrum of healthcare motivation.

Contradictions also emerge. While recognition is found to significantly influence retention (Krywko, 2019), compensation-focused studies suggest that monetary frustration overrides appreciation efforts when systemic strain persists (Karaferis et al., 2022). This tension implies that recognition alone cannot rebuild satisfaction without corresponding structural and financial corrections. Similarly, work environment studies demonstrate the value of supportive culture (Diakos et al., 2022), yet turnover-centred analyses focus largely on economic burden rather than psychosocial dynamics (Jian et al., 2022; Nath, 2022).

Variations across healthcare systems further complicate interpretation. High-income contexts report dissatisfaction due to career stagnation and recognition gaps, while lower-resource settings emphasize safety risks, shortages, and inequitable workloads. Pandemic-intensified environments, particularly in Malaysia, revealed accelerated resignation patterns and clinician migration, signalling system-specific fragilities not uniformly reflected across regions.

Collectively, these gaps indicate that future research must extend beyond burnout and salary determinants to include leadership culture, organisational justice, integrated mental health systems, and retention-focused policy reforms within diverse healthcare settings. These analytical observations provide the foundation for interpreting how job satisfaction determinants influence organisational resilience and employee outcomes, as discussed below.

DISCUSSION

Healthcare is a critical sector that provides essential services, especially during global crises, which emphasizes the need for sustainability and an engaged workforce. Job satisfaction plays a pivotal role in ensuring continuity and quality of service, with workload, pay, recognition, and work environment functioning as central determinants.

The observed dissatisfaction trends reflect Herzberg's explanation that inadequate hygiene factors, particularly compensation, recognition, staffing support, and working conditions, serve as direct triggers of disengagement. Maslow further clarifies that when safety and esteem needs remain unmet during high-pressure healthcare delivery, professionals are unable to reach fulfilment in their roles. COR theory complements both perspectives by explaining how sustained emotional strain and resource depletion culminate in reduced commitment and patient safety risks.

Systemic pressures, particularly in contexts facing workforce shortages, have shown that unresolved stressors jeopardise organisational resilience. Breaking this pattern requires strategic reinforcement of staffing policies, mental health resources, balanced workloads, and transparent compensation frameworks to maintain operational continuity and protect clinical performance.

Meaningful retention depends on financial security and clear career pathways. Fair remuneration and advancement opportunities create stability, reinforce meritocracy, and support long-term engagement. These measures sustain professional identity and strengthen the psychological commitment needed to withstand clinical demands.

Ultimately, creating a sustainable healthcare environment means ensuring that healthcare professionals are supported both operationally and emotionally. Consistent investment in staffing, compensation equity, and organisational support remains central to long-term workforce resilience and patient care quality.

LIMITATIONS

This paper is based entirely on secondary literature, which may not capture the full range of lived experiences of healthcare professionals in diverse operational contexts. The studies reviewed are predominantly concentrated in specific regional systems, limiting transferability across differing healthcare structures, staffing regulations, and financial models. In addition, publication bias may be present, as most included research reflects peer-reviewed sources that favour significant or confirmatory outcomes over neutral findings. As the paper adopts a conceptual and interpretive approach rather than empirical field measurement, causal inferences are indicative rather than definitive. Future empirical research incorporating multi-country sampling, longitudinal measurement, and primary workforce data would enhance the depth and applicability of the findings.

CONCLUSION

This review reinforces that job satisfaction among healthcare employees is not simply a matter of workplace comfort, but a foundational driver of patient safety, organisational continuity, and workforce retention. Across the reviewed literature, workload intensification, inadequate compensation, inconsistent recognition, and unsupportive work environments emerge as the most persistent determinants of dissatisfaction, shaping the decision of healthcare staff to remain or exit the profession. The application of Herzberg's hygiene factors, Maslow's hierarchical needs, and Conservation of Resources principles collectively illustrates how unmet basic, psychological, and emotional resource requirements translate into disengagement and declining performance in clinical settings.

The findings indicate that healthcare systems cannot sustain service delivery without prioritising staff well-being and structural support. Efforts to stabilise the workforce require reforms that encompass staffing sufficiency, mental health support, equitable remuneration, and clear professional development pathways. These measures directly influence motivation, reduce burnout escalation, and strengthen organisational resilience during both routine operations and crisis periods.

Ultimately, enhancing job satisfaction is both a strategic and ethical obligation. By committing to conditions that protect psychological safety, acknowledge professional contribution, and sustain financial security, healthcare organisations can cultivate a workforce capable of enduring operational pressures while maintaining care quality. Sustained investment in human capital, rather than reactive retention measures, remains central to securing a resilient, competent, and committed healthcare workforce for the long term.

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