

Factors that Contribute to Work Motivation and Job Satisfaction among Hospital Nurses in Trinidad and Tobago

Onuoha P, Stephen A, Bernard P, Corban A, Mahabir M, Israel-Richardson D

The UWI School of Nursing, University of the West Indies, St. Augustine, Trinidad and Tobago.

Corresponding Author: Onuoha P.

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ABSTRACT

Purpose: The purpose of this study was to determine the factors that may motivate the nurses in Trinidad and Tobago following an earlier study that the satisfaction levels of the nurses in Trinidad and Tobago is low.

Methodology: A descriptive cross-sectional design was undertaken. It attempted to document the responses from nurses who gave their consent at a particular point in time. The population was from four selected major hospitals in the Island nation using an adapted instrument from Society of Human Resource Management Foundation (SHRM), Employee Engagement Survey Template Software (2014).

Result: Results showed that nurses in Trinidad and Tobago were from of varied ethnicity, mostly females, have different employment statuses. They also showed that the nurses' motivation/satisfaction are not related to their gender, and age. Results found that aspects of ethnicity, institution of employment, level of education and employment statuses among others, are significantly related to some of the motivation factors for the nurses in Trinidad and Tobago.

Discussion: These results were discussed based on their relatedness with literature.

Conclusion: This study has documented some of the motivational factors for the nurses in this Island state. It is hoped that this will provide the impetus for the policy makers to begin to address this perennial problem that arguably contributes to dissatisfaction, attrition and acute shortages of this important health personnel in the Twin Island state of the Caribbean.

Keyword: Nurses, motivation, Caribbean, Health care.

INTRODUCTION

Nurses are important resource in the provision of quality health care in any society and. It follows that contributing to the development of the nursing profession through research and its applications, nurses, as with most professional bodies, desire to be motivated and satisfied to accomplish their tasks. ^[1] We live in a world that has limited resources, and most notably, that healthcare industry faces this limitation more than any other industry, and with these challenges facing healthcare, the concept of

productivity, job satisfaction and motivation become of greater importance. ^[2] Work motivation influences nurses' behaviour and performance when providing high-quality nursing practice. ^[3] Because nurses' work motivation (together with their preferences and multiple work-related factors such as working conditions and incentive systems) affects their behaviour and performance, it has been widely recognized as one of the prerequisites for high-quality nursing practice.

There is an overall acknowledgment that highly motivated nurses perform better and are more productive. [4-6] while motivation activates and guides all verbal and physical activities at work, the level and orientation of motivation determines how and to what extent a nurse commits and performs in nursing practice. [1]

Theories of motivation can be used to explain the behaviour and attitude of employees and are based on the assumption that people have individual needs, which motivate their actions. [4] The factors that influences nurses' motivation and satisfaction show results which partly confirm Herzberg's predictions that rewards lead to an increase of behaviour repetition, and so when the worker is rewarded he/she continues to produce better, while punishment does not have a permanent effect and leads to negative attitudes. [5] Gomes and Proenca [5] indicated that there are some job factors that result in satisfaction while there are other job factors that prevent dissatisfaction. According to Herzberg, the opposite of "Satisfaction" is "No satisfaction" and the opposite of "Dissatisfaction" is "No Dissatisfaction." [6] In a complex and dynamic environment the leader of the organization used to create the environment in which employee feel trusted and are empowered to take decisions in the organization which leads to enhance motivation level of employee and ultimately organizational performance are enhanced. [7]

Factors Influencing Motivation and Job Satisfaction

The different actions that can promote nurses' motivation, which have been revealed by many studies, include: increasing salaries; giving opportunities for education, training and professional development; enhancing working and living conditions; improving social recognition; improving benefits and allowances; developing decentralised structures; enhancing interpersonal relationships, communication and feedback; improving job descriptions, criteria for promotion and

career progression; using a reward system; and improving supervision and management.

Nakládalová, Vévoda, Ivanová and Marečková [8] were more concerned with personal reasons that inspire individuals to work, and almost everyone works for pay. Whether it is called salary, benefits, bonus, in-kind compensation, or anything else, the fact is that people work to support themselves and their families. Other factors have been mentioned by nurses, such as stability attained at work and commitment to the population. However, when these authors evaluated dissatisfaction, remuneration was indicated as one of the factors of greatest dissatisfaction in nurses' work. Yet, where remuneration is concerned, Vévoda, Ivanová, Nakládalová and Marečková concluded from a study at 122 hospitals in the Czech Republic that nurses considered wages and the care given to the patients as the most important factors at work. [5,7,9]

Also, opportunities for growth, working conditions and supervision help to increase nurses' motivation as the workers who work in normal working conditions (in the administration) reported higher level of job satisfaction than workers who work in difficult working conditions. [10,11]

Difficult working conditions can be influenced by external factors, subjective factors, and factors related to the organization of production. External factors include: climate - meteorological conditions, temperature, humidity, drafts, lighting in the workplace, noise and interference, gases, radiation, dust, smoke and other harmful factors. Subjective factors include: gender and age of the worker, fatigue, monotony, unfavourable posture during work, etc. Factors related to the organization of production include: duration of the work shift, work schedule, working time, work pace, excessive strain etc. Difficult working conditions influence employees' performances. [11]

Different factors within the working environment such as wages, working hours,

autonomy given to employees, organizational structure and communication between employees & management may affect job satisfaction. [12-15]

In Rwanda, the nurses had a moderate level of motivation. They were unmotivated as a result of dissatisfaction with remuneration; opportunities for growth and promotion; working conditions; recognition, rewards and appreciation; as well as benefits and allowances. [1]

In China, levels of overall stress perception and scores on all five work stress subscales were higher in dissatisfied workers relative to satisfied workers. In addition, the main determinants of job satisfaction were occupation; age; title; income; the career development, and wages and benefits subscales of work stress; and the recognition, responsibility and financial subscales of work motivation [16] while in Pakistan, salary, feedback, relationship with co-workers and work environment were the factors that the teachers of a high school identified as their extrinsic factors of motivation, while promotion and participation in decision making were the intrinsic motivational factors. [17]

However, in Trinidad and Tobago, Mitchell and Esnard, [18] identified that the levels of job satisfaction for selected nurses were relatively low. Levels of satisfaction were lowest with autonomy, organizational policies, nurse-nurse interaction and professional status, while Onuoha, Ramcharan, London, Ramlal, Sheen-Daniel and Ezenwaka [19] identified the motivational techniques that results in nurses' job satisfactions at their job laces- a study that underpins lack of motivations among nurses.

In this study, (a) given the importance of nurses in the health care industry particularly in the provision of quality health care to the population, and (b) given that nurses overall, including in Trinidad and Tobago have low motivation, there has not been any study in Trinidad and Tobago that identified the factors responsible for their nurses' low motivation,

even though Onuoha et al [19] had identify the techniques to motivate the nurses. This gap is what the investigators attempted to fill in this study.

Aim

The aim of this study is to explore the factors that contribute to work motivation and job satisfaction among hospital nurses in Trinidad and Tobago, to determine what contributes to nurses' desire to be motivated and satisfied to achieve personal and institutional goals. Furthermore, the research aims to distinguish those factors that administration managers can use to inform policy to ensure nurses are motivated and satisfied to prevent adverse outcomes such as industrial and strike action, and ultimately safeguard the quality of patient care and health outcomes within health institutions in Trinidad and Tobago.

Research Questions

1. What are the social demographic characteristics (age, gender, ethnicity, highest level of schooling, institution of employment and employment contract status) of hospital nurses in the four selected hospitals in Trinidad and Tobago?
2. What factors contribute to work motivation and job satisfaction among hospital nurses in Trinidad and Tobago?
3. Do the responses of these hospital nurses regarding the factors that affect their work motivation and job satisfaction at work are relate to their social demographic characteristics?

Research Objectives

1. To determine the social demographic characteristics of hospital nurses in the four selected hospitals in Trinidad and Tobago
2. To determine the factors that affect hospital nurses regarding their work motivation and job satisfaction at work.
3. To ascertain if the responses of these hospital nurses regarding the factors that affect their work motivation and job

satisfaction at work are related to their social demographic characteristics.

METHODOLOGY

Research Design

A descriptive quantitative cross-sectional survey was undertaken. This was done using a proportional representation of the population, at one point in time or over a short period, and to provide a 'snapshot' of the outcome and the factors affecting nurses' motivation in Trinidad and Tobago. [20]

Population

The population was all hospital nurses on the medical unit(s) within four public hospitals from four different regions within Trinidad and Tobago. These hospitals included Port of Spain General Hospital (POSGH), San Fernando Teaching Hospital (SFTH), Eric Williams Medical Sciences Complex (EWMSC) and Sangre Grande Hospital (SGH). The population was as follows:

POSGH- 15 RN per ward within 6 wards = 90 total

SFTH- 20 RN per ward within 10 wards = 200 total

EWMSC- 14 RN per ward within 7 wards = 98 total

SGH- 20 RN per ward within 2 wards = 40 total

Total population = 428

These selected hospitals were the major hospitals from the regions. They were selected on purpose as large enough population, which was our attempt to capture large number of nurses to ensure representativeness.

Sample

As stated the population was the total number of Registered Nurses working on the medical wards within the four hospitals, which totaled 428 in number. Researchers targeted 50% of the population as the target sample to conduct this research, of which the sample was proportionately divided among the four hospitals to ensure representativeness. The total population by ratio=SFTH: EWMSC: POSGH: SGH=200:98:90:40, and 50% of the

population which represented the research sample, totaled 214 respondents, which by ratio SFTH: EWMSC: POSGH: SGH = 100:49:45:20. A convenience sample was used from each of the four hospitals' medical wards, from nurses who were willing and signed the consent to participate in the research at the time of sampling. 61% of the target sample, totaling 131 nurses participated in the study. By ratio of SFTH: EWMSC: POSGH: SGH the samples were 61:31:26:13. We used normal approximations to determine the sample size for small population. [9-21]

Instrument/Tool

Data was collected utilising a researchers'-developed questionnaire, self-completed by hospital nurses within each of the four major public hospitals identified. The questionnaire was number-coded to ensure accountability for all those distributed. The tool comprised 50 items assessing work motivation and job satisfaction, which were generated with assistance from the Society of Human Resource Management Foundation (SHRM), Employee Engagement Survey Template Software, purchased on May 10th, 2015. The tool assessed 7 key areas which included the respondents' demographic characteristics, and their perception of their career development, work engagement, compensation, relationship with management, benefits and work environment, which helped to determine the variables related to work motivation and job satisfaction.

The questionnaire was divided among 7 blocks assessing each area. The demographic block included 6 items which assessed the age, gender, ethnicity, highest level of schooling attained the institution of employment, and the employment contract status of the respondents. The career development block included 7 items which assessed respondents' perception with their career development within their institution. The work engagement block included 12 questions which assessed respondents' perceptions of their work engagement on the

job. The compensation block included 4 questions which assessed respondents' perceptions of the compensation provided by their institution. The relationship management block included 7 questions which assessed respondents' perceptions of their relationship with management within their institution. The benefits block included 5 questions which assessed respondents' perceptions of their benefits provided by their institution. The work environment block included 8 questions which assessed respondents' perceptions of their work environment on the job. One open ended question on respondents' perception of strategies to improve work motivation and job satisfaction was also added to the amended questionnaire following a pilot study.

Validity/Reliability

The researchers developed questionnaire was generated with guidance from the SHRM Foundation Employee Engagement Template. This template was designed by Survey Monkey which has partnered with the SHRM Foundation to develop an Employee Engagement Template that provides the tools to ask employees about their motivation and job satisfaction, and was proven to be reliable and valid for evaluating employee motivation and satisfaction. This instrument was adjudged valid and reliable having pretested among local nurses not involved the study prior to commencement of data collection.^[22]

Data Analysis Plan

All of the questions were scored using Likert scales so numerical statistical calculations could be made and inferences concluded. Each of the questions in the demographic block were scored using a Likert scale between 0 to 6 assigned in descending order, where 0 represented 'no answer' to questions, 1 represented the first answer available, 2 represented the next answer immediately below the first, and so on until the last answer. The following 43 questions, which included the career development, work engagement,

compensation, relationship management, benefits and work environment questions, were scored with a Likert scale ranging from 0 to 5 also in descending order, where 0 represented questions with no answers, 1 for the first answer available which was 'strongly disagree', 2 for the next answer immediately below the first answer which was 'disagree', followed by 3 for 'neither agree or disagree', 4 for 'agree', and finally 5 for the last available answer 'strongly agree'.

The final question was an open ended question, and was scored similar to the 43 questions following the demographic block, with a Likert scale ranging from 0 to 5 also in descending order, where 0 represented 'no answers' to questions, however the score for 1-5 were assigned according to the order of the blocks which came after the demographic block. 1 represented an answer referring to career development, 2 represented an answer referring to work engagement, 3 represented an answer referring to compensation, 4 represented an answer referring to relationship management, and 5 represented an answer referring to work environment. That score was determined by placing the single answer or answers that appeared most often or the first answer if all were differing into the block which they were most related to, then score them as previously mentioned.

The data was analysed using the IBM Statistical Package for the Social Sciences (SPSS) predictive analytic software, which is a data management and analysis product produced by IBM SPSS, Inc. in Chicago, Illinois. Using its features, statistical data was analysed for descriptive statistics of the frequency of the responses regarding demographic characteristics, as well as the mean and standard deviation for responses regarding career development, work engagement, relationship management, benefits and work environment among the respondents were calculated. Inferential and multivariate statistical procedures were conducted, specifically one way analysis of variance

(ANOVA) between the responses regarding the relationship among the demographic characteristics of respondents and their responses to career development, work engagement, relationship management, benefits, as well as work environment.

RESULTS

This study evaluated the work motivation and job satisfaction among hospital nurses employed within four public hospitals in Trinidad and Tobago, to determine those factors which contribute to these variables.

Findings of Figure 1 shows the demographic characteristics of the respondents, which indicated that 13.7% of the respondents are male and 84% of the respondents are female. When the

respondents were divided on the basis of their age, majority of the respondents (27.5%) were in between 31-35 years of age and the minority of the respondents (5.3%) were in between 20-25 years of age. Most of the respondents (34.4%) were of African descent, with an Associate's Degree as the highest level of schooling attained by the majority of respondents (38.2%), closely followed by a Bachelor's Degree (36.6%). The ratio of the sample surveyed was SFTH: EWMSC: POSGH: SGH = 60: 31: 27: 13 which represented the majority (97%) of the respondents targeted. On the basis of their employment contract, the majority of the respondents (73.6%) were permanent and (22.1%) were on contractual basis.

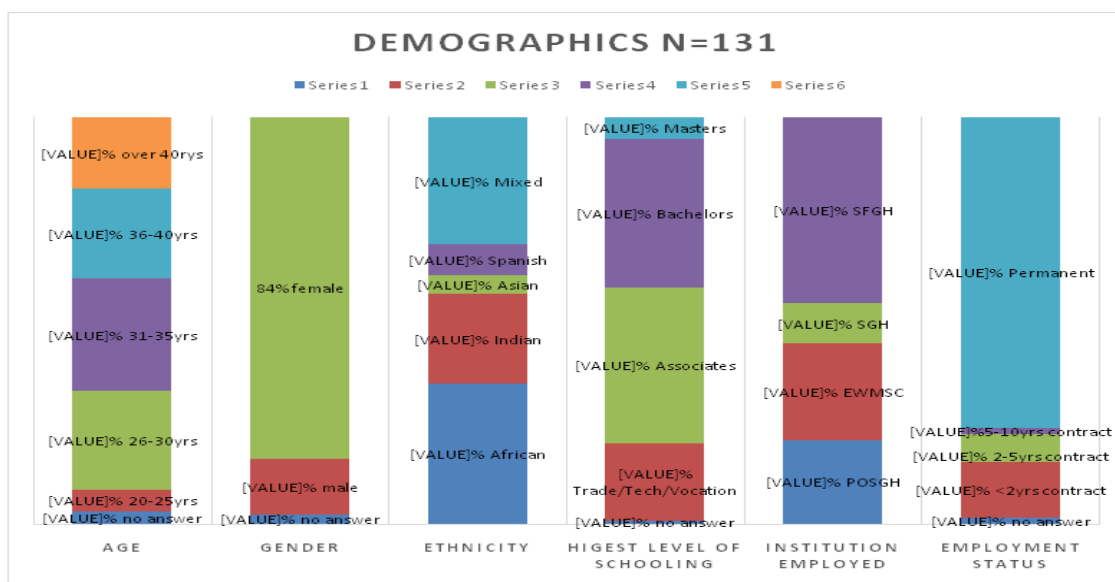


Figure 1: Demographics Statistics

Table 2: Mean Responses of the respondents to the dependent variables (N=131)

	Mean	Std. Deviation
Career Development	2.75	0.923
Work Engagement	3.27	1.023
Compensation	2.35	0.999
Relationship Management	3.04	0.872
Benefits	2.43	0.886
Work Environment	3.05	0.876

Descriptive Statistics are given in Table 2, which consists of the mean and standard deviations of responses among the total number of respondents (N=131) working in the hospitals surveyed, for Career Development, Work Engagement,

Compensation, Relationship Management, Benefits and Work Environment. The descriptive statistics indicated that respondents were dissatisfied regarding career development (2.75), compensation (2.35), and benefits (2.43) and were neutral regarding work engagement (3.27), relationship management (3.04) and work environment (3.05).

Table 3a to 3f shows the relationship of explained variables (i.e. career development, work engagement, compensation, relationship management, benefits and work environment) to that of

the independent variables (i.e. age, gender, ethnicity, level of schooling, institution of employment and employment contract). Results show the relationships between the variables and the probabilities less the 0.05 and less than 0.0001 represents those associations most significant to this study. Findings of the analysis regarding the ages of the respondents (Table3a) supported the

null hypothesis because there was no relationship between the ages of respondents and either of the explained variables. Similarly, the gender of the respondents (Table3b) supported the null hypothesis because there was no relationship between the gender of the respondents or the explained variables.

ANOVA of Independent Variables and the Factors of Motivation and Job Satisfaction

Table 3a: ANOVA by Age

	Sum of Squares	df	Mean Square	F	Sig.
Career Development	1.136	5	0.227	0.259	0.934
Work Engagement	2.195	5	0.439	0.41	0.841
Compensation	3.204	5	0.641	0.632	0.675
Relationship Management	2.609	5	0.522	0.678	0.641
Benefits	7.667	5	1.533	2.031	0.079
Work Environment	7.881	5	1.576	2.145	0.064

*p < 0.05, **p < 0.0001

Table 3b: ANOVA by Gender of the Respondents (N=131)

	Sum of Squares	df	Mean Square	F	Sig.
Career Development	0.789	2	0.395	0.46	0.633
Work Engagement	0.401	2	0.201	0.189	0.828
Compensation	0.319	2	0.16	0.158	0.854
Relationship Management	1.467	2	0.734	0.965	0.384
Benefits	1.222	2	0.611	0.775	0.463
Work Environment	0.508	2	0.254	0.328	0.721

*p < 0.05, **p < 0.0001

Table 3c: ANOVA by Ethnicity (N=131)

	Sum of Squares	df	Mean Square	F	Sig.
Career Development	8.586	4	2.146	2.649	0.036*
Work Engagement	7.412	4	1.853	1.814	0.13
Compensation	8.574	4	2.143	2.227	0.07
Relationship Management	1.705	4	0.426	0.553	0.697
Benefits	7.742	4	1.935	2.586	0.04*
Work Environment	4.928	4	1.232	1.637	0.169

*p < 0.05, **p < 0.0001

Table 3d: ANOVA by Highest Level of Education levels of Respondents (N=131)

	Sum of Squares	df	Mean Square	F	Sig.
Career Development	5.561	4	1.39	1.666	0.162
Work Engagement	2.086	4	0.522	0.49	0.743
Compensation	3.883	4	0.971	0.971	0.426
Relationship Management	1.626	4	0.406	0.527	0.716
Benefits	7.876	4	1.969	2.634	0.037*
Work Environment	6.142	4	1.535	2.067	0.089

*p < 0.05, **p < 0.0001

Table 3e: ANOVA by Institution of Employment of Respondents (N=131)

	Sum of Squares	df	Mean Square	F	Sig.
Career Development	5.349	3	1.783	2.15	0.097
Work Engagement	15.923	3	5.308	5.609	0.001**
Compensation	6.439	3	2.146	2.209	0.09
Relationship Management	8.502	3	2.834	3.985	0.009**
Benefits	3.292	3	1.097	1.411	0.243
Work Environment	4.988	3	1.663	2.229	0.088

*p < 0.05, **p < 0.0001

Table 3f: ANOVA by Employment Status of the Respondents

	Sum of Squares	df	Mean Square	F	Sig.
Career Development	5.743	4	1.436	1.724	0.149
Work Engagement	10.936	4	2.734	2.752	0.031*
Compensation	3.243	4	0.811	0.807	0.523
Relationship Management	5.669	4	1.417	1.917	0.112
Benefits	0.604	4	0.151	0.188	0.944
Work Environment	0.76	4	0.19	0.242	0.914

*p < 0.05

Regarding ethnicity (Table 3c) the null hypothesis was rejected for career development ($p < 0.036$), and benefit ($p < 0.04$), as there was a relationship between ethnicity and these variables, but none with work engagement, compensation, relationship management and work environment, so the null hypothesis was accepted for these variables. Regarding the aspect of the highest level of schooling of the respondents (Table 3d) the null hypothesis was rejected because there was a relationship between schooling and benefits ($p < 0.037$), but none with the other variables. While discovering the relationship between institution of employment and work motivation and job satisfaction, again a positive and highly significant relationship is found between work engagement ($p < 0.001$) and relationship management ($p < 0.009$) (Table 3e). Finally, there was also another significant relationship between respondents' employment status and work engagement ($p < 0.031$) (Table 3f).

DISCUSSION

The results of this study indicated that work engagement, work environment, and relationship management were the factors that motivated nurses as opposed to benefits, compensation and career development. This was supported by a study done by Ferreira (1996) in which a study conducted at Coimbra Paediatric 8 Hospital with a sample of 109 nurses, showing that the nurses' satisfaction was connected to relationship variables with other hospital professionals and their relationship with patients, while dissatisfaction was linked to remuneration, structural conditions, incentives and career development perspectives. [5] This is also consistent with a number of studies from literature. [23-25] some of which concluded that even though remuneration is a motivational factor at work it is not the main motivator.

This study also showed that age did not relate too, or did not affect the work motivation and job satisfaction of the hospital nurses employed at the general

hospitals in Trinidad and Tobago. However, this finding was inconsistent with the literature that states that the general findings reported by Gomes et al [5] on the relationship between motivation and job satisfaction and age shows that satisfaction starts high, declines and then starts to improve again with increasing age in a U-shaped curve.

Trinidad and Tobago boast a multicultural society and is rich in diverse ethnicities. There was no evidence to support that career development and benefits are associated with ethnicity among hospital nurses in Trinidad and Tobago. The study also reflected that gender did not affect work motivation and job satisfaction among hospital nurses. However, this finding is in contrast with Njiru [15] that suggests that women are satisfied with jobs in which they can interact with others in a supportive and cooperative way, even though the jobs may be only minimally demanding and challenging and that female workers were less concerned with career aspects and more concerned with social aspects of the job.

This study also revealed that place of work along with type of contract, temporary or permanent, are related to work engagement and relationship management ($p < 0.031$). The results have indicated that a significant number of respondents were dissatisfied with these factors. The literature is replete with indications that there are a number of actions that can motivate the nurses. These include: increasing salaries; giving opportunities for education, training and professional development; enhancing working and living conditions; improving social recognition; improving benefits and allowances; developing decentralised structures; enhancing interpersonal relationships, communication and feedback; improving job descriptions, criteria for promotion and career progression; using a reward system; and improving supervision and management. [23, 26, 27]

CONCLUSION

This study has documented the perceptions of the nurses in Trinidad and Tobago with regard to the factors that contribute to their motivation at their workplaces. It indeed identified that the nurses in this twin Island state are of multi-racial background,-a known factor of this Island state. The result also showed that the levels of motivation among the nurses are very low with the lowest factors being compensation, benefits and career development opportunities. It also indicated that although age, and gender did not affect their responses, ethnicity, level of education, type of employment, and institution of employment are related to their responses. We therefore envisage that this will provide the impetus for the policy makers to begin to address this perennial problem that arguably contributes to dissatisfaction, attrition and acute shortages of this important health personnel in the Twin Island state of the Caribbean.

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