

## Effects of Age, Safety Environment, and Fair Salary on Work Satisfaction

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### ABSTRACT

**Background:** Job satisfaction generally describes how satisfied a person is in carrying out their work. Job satisfaction can also be influenced by various factors such as competitive salaries, adequate staff numbers, a pleasant work environment, opportunities for growth and professionalism, reasonable workload, recognition by superiors, positive relationships with colleagues, autonomy at work, security, work, career advancement and fair rewards. This study aims to estimate the effects of age, a safe work environment and fair payment on the job satisfaction of health workers..

**Subjects and Method:** A systematic review and meta-analysis was conducted using PRISMA guidelines and the PICO model. The articles used range from 2014 to 2023. Population= Health workers. Intervention= age range >30 years, safe work environment, fair pay. Comparison= age range <30 years, unsafe work environment, fair pay. Outcome = job satisfaction. Articles were collected from databases such as Google Scholar, PubMed, and Science Direct. The literature search used the keywords "Safety Environment or Conducive Environment" AND "Fair Salary" AND "Health Provider" AND "Job Satisfaction" AND "Cross Sectional". A total of 9 articles met the inclusion criteria for meta-analysis, and were further assessed using RevMan 5.3.

**Results:** Meta-analysis of 9 cross-sectional studies from Ethiopia and Myanmar showed that age over 30 years did not affect job satisfaction among health workers (aOR=1.00; 95% CI= 0.94 to 1.07; p= 0.940). A safe work environment (aOR= 1.23; 95% CI= 0.92 to 1.65; p= 0.160) increase job satisfaction in health workers, but it was statistically not significant. Fair pay significantly increased job satisfaction (aOR= 2.38; 95% CI= 1.78 to 3.19; p<0.001).

**Conclusion:** A safe work environment increase job satisfaction, but it is statistically not significant. Fair pay significantly increase job satisfaction in health workers.

**Keywords:** safety environment, fair salary, health provider, job satisfaction

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### BACKGROUND

Job satisfaction is defined as employees' feelings towards their work and various asp-

ects of their work (Haitao, 2022). Job satisfaction is an important variable in work and organizational psychology, which is considered an indicator of the quality of work life,

and is a crucial variable used to determine the quality of life of the workforce.

Job satisfaction generally describes how satisfied someone is with their job. One of the variables to measure an employee's loyalty to their job is job satisfaction. This is an important aspect in which employees have views about their work, their careers and who they work for (Sato et al., 2017). In most literature it is found that job satisfaction has many definitions. The online business dictionary defines job satisfaction as satisfaction that arises from the interaction between employees' positive and negative feelings towards their work.

Research conducted (Unsworth et al., 2021), shows that job satisfaction is determined by the total number of employees' positive and negative perceptions of their work environment. A quality work environment on the other hand has been linked to health workers' job satisfaction, organizational commitment and intention to remain at work (Sato et al., 2017).

Many studies have shown that job satisfaction can be influenced by a variety of factors such as competitive salaries, adequate staff numbers, a pleasant work environment, opportunities for personal and professional growth, reasonable workload, supervision, recognition, visible progress from patients, positive relationships with coworkers, autonomy in work, job security, career advancement and contingent rewards.

Therefore, job dissatisfaction has a negative impact on the structure and workflow of the organization. Some of the negative impacts identified include greater non-compliance with procedures and policies, increased work accidents, and organizational conflict (Alrawahi et al., 2020), which can increase medical error rates, thereby jeopardizing patient safety (Menon et al., 2020), and higher labor costs, which contribute to a shortage of healthcare providers (Memarian et al., 2020). Job

satisfaction is needed to retain existing doctors, as well as to encourage the recruitment of new doctors (Faeq, 2022). In short, the quality of healthcare workers depends on the level of job satisfaction (Scanlan et al., 2021).

Based on the description of the problem above, it is necessary to conduct research on the factors that influence the job satisfaction of health workers with the aim of knowing the factors so that they can increase the job satisfaction rate of health workers.

## SUBJECTS AND METHOD

### 1. Study Design

This research used a systematic review method and meta-analysis was carried out using PRISMA guidelines and the PICO model. Population = health workers. Intervention = Age > 30 years, Safe work environment, fair payment. Comparison = Age .30 years, Unsafe work environment, unfair pay. Results = Job satisfaction of health workers. Articles were collected from databases such as Google Scholar, PubMed and Science Direct. The literature search used the keywords "Safety Environment or Conducive Environment" AND "Fair Salary" AND "Health Provider" AND "Job Satisfaction" AND "Cross Sectional". A total of 9 articles met the inclusion criteria for meta-analysis, and were further assessed using RevMan 5.3.

### 2. Steps of Meta-Analysis

Meta-analysis analysis was carried out through 5 steps as follows:

- 1) Formulate research questions using the PICO model.
- 2) Search for primary study articles from electronic databases such as Google Scholar, PubMed, and Science Direct.
- 3) Conduct screening and critical assessment of primary studies.
- 4) Extract data and enter impact estimates from each primary study into RevMan 5.3. The results of the article analysis are

presented in the form of aOR, with 95% confidence intervals (CI) using model effects and data heterogeneity ( $I^2$ ).

- 5) Interpret the results and draw conclusions

### 3. Inclusion Criteria

The study inclusion criteria were full text of primary research articles from 2014 to 2023 with a cross-sectional research design, analysis using multivariate Odds Ratio (OR), research subjects were health workers, and the outcome was health workers' job satisfaction.

### 4. Exclusion Criteria

Research articles published before 2014 and after 2023, research results that do not comply with the PICO criteria or formula in research, and articles that do not include an OR.

### 5. Operational Definition

**Age** is a parameter that measures the length of time since the birth of a person or an object. In a human context, age is often measured in years, usually starting from the date of birth. Age is a fundamental aspect of the human experience and is used to categorize individuals into various stages of life.

**The work environment** is everything related to the physical conditions of the workplace around health workers that can influence them in carrying out their duties.

**Fair pay** is a compensation system that refers to fairness in the work environment. This includes the belief that each individual should receive payment commensurate with his or her contribution, skills, and responsibilities in the job

**Job satisfaction** is the level of satisfaction and fulfillment experienced by health workers in viewing their work.

### 6. Instrument

The study instrument used in this study was the Critical Appraisal Checklist for Cross-sectional Study from the Center for Evidence Based Management (CEBMA, 2014).

### 7. Data Analysis

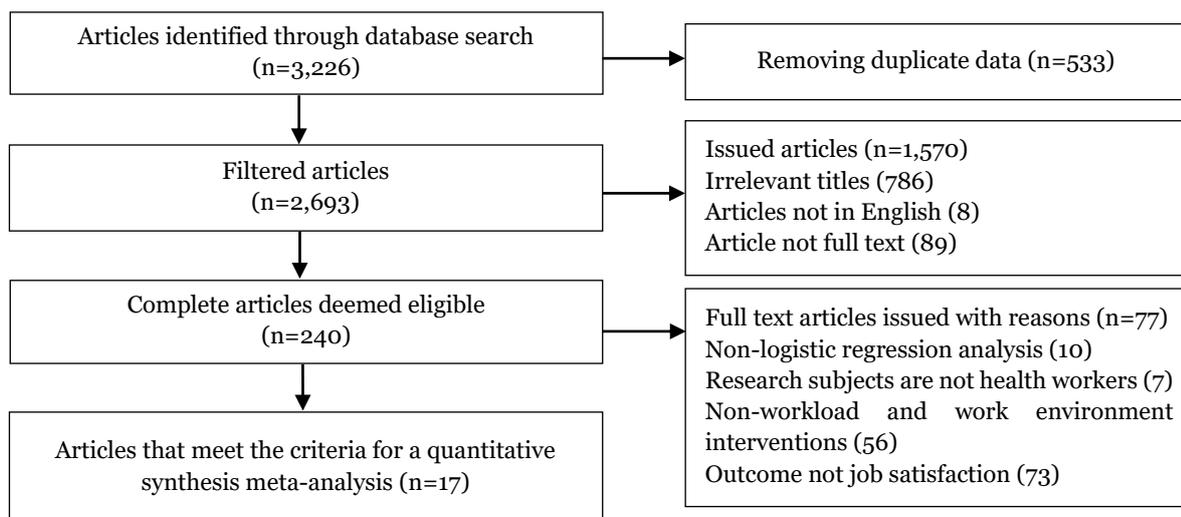
Data analysis was carried out using RevMan 5.3. Forest plots and funnel plots are used to determine the size of the relationship and heterogeneity of the data. The fixed effects model is used for homogeneous data, while the random effects model is used for heterogeneous data between studies.

## RESULTS

The process of searching for articles in this meta analysis was carried out by searching through journal databases, namely Pub-Med, Science Direct, and Google Scholar with a time span between 2014-2023. Keywords "Safety Environment or Conducive Environment" AND "Fair Salary" AND "Health Provider" AND "Job Satisfaction" AND "Cross Sectional". Article searches are in accordance with the PRISMA flow diagram which can be seen as follows.

Figure 1 shows the results of the prism flow diagram, there were 1,150 main articles, after deleting duplicate articles there were 567 articles, after that the articles were selected taking into account the inclusion criteria, and 9 articles were included in the meta. - analysis

Figure 2 shows a map of the distribution of research on the effect of workload and work environment on job satisfaction in the obtained health workers. Based on 17 research articles obtained from 4 continents, 1 study was obtained from the Americas, namely Canada. 3 studies were obtained from the European continent, namely Switzerland, Belgium and Denmark. 3 studies were obtained from the Asian continent, namely China and Israel. And 10 studies were obtained from the African continent, namely the country of Ethiopia.



**Figure 1. PRISMA Flow diagram**



**Figure 2. Map of the distribution of research on the effect of workload and work environment on job satisfaction**

**Table 1. The Quality Assessment Results of Articles with a Cross-sectional Study using CEBM**

Primary Study	Criteria													Total
	1a	1b	1c	1d	2a	2b	3a	3b	4	5	6a	6b	7	
Geleto et al. (2015)	2	2	2	2	2	2	2	2	2	2	2	2	2	26
Gedif et al. (2018)	2	2	2	2	2	2	2	2	2	1	2	2	1	24
Geta et al. (2021)	2	2	2	2	2	2	2	2	2	2	2	2	2	26
Gregoriou et al. (2023)	2	2	2	2	2	2	2	2	2	2	2	2	2	26
Soe et al. (2023)	2	2	2	2	2	2	2	2	2	2	2	2	2	26
Ayalew et al. (2019)	2	2	2	2	2	2	2	2	2	1	2	2	1	24
Engeda et al. (2014)	2	2	2	2	2	2	2	2	2	1	2	2	2	25
Bekru et al. (2017)	2	2	2	2	2	2	2	2	2	2	2	2	1	25
Geleto et al. (2015)	2	2	2	2	2	2	2	2	2	2	2	2	2	26

**Description of the answer score:**

2 = Yes; 1 = Hesitate; 0 = No

**Question criteria descriptions:**

1. Formulation of research questions in the acronym PICO?
  - a. Is the population in the primary study the same as the population in the PICO meta-analysis?
  - b. Is the operational definition of intervention, namely the exposed status in the primary study, the same as the definition intended in the meta-analysis?
  - c. Is the comparison, namely the unexposed status used by the primary study, the same as the definition intended in the meta-analysis?
  - d. Is the outcome variable examined in the primary study the same as the definition intended in the meta-analysis?
2. Methods for selecting research subjects:
  - a. In analytical cross-sectional studies, do researchers choose samples from the population randomly (random sampling)?
  - b. Do researchers select samples based on outcome status or based on intervention status?
3. Methods for measuring exposure (intervention) and outcome variables:
  - a. Are the exposure and outcome variables measured with the same instruments (measuring tools) in all primary studies?
  - b. If the variable is measured on a categorical scale, are the cut-offs or categories used the same across primary studies?
4. Design-related bias:

If the sample was not selected randomly, has the researcher made efforts to

- prevent bias in selecting research subjects?
5. Methods for controlling confusion:

Have primary study investigators made efforts to control the influence of confounding (e.g., conducting a multivariate analysis to control for the influence of a number of confounding factors)?
  6. Statistical analysis methods:
    - a. Did the researcher analyze the data in this primary study with a multivariate analysis model (e.g., multiple linear regression analysis, multiple logistic regression analysis)?
    - b. Whether the primary study reported effect sizes or associations was the result of multivariate analysis (e.g., adjusted OR, adjusted regression coefficient)

Table 1 shows the assessment of the quality of primary articles using CEBMa used in this study. Based on the results obtained, the total score of the 17 selected primary studies was around 12. This indicates that the quality of all the primary articles used in this study is worthy of meta-analysis.

Table 2 presents a summary of the source articles obtained by 8 primary articles with a cross-sectional study design used for meta-analysis on the effect of workload on job satisfaction in health workers. The total sample is 8,455 samples.

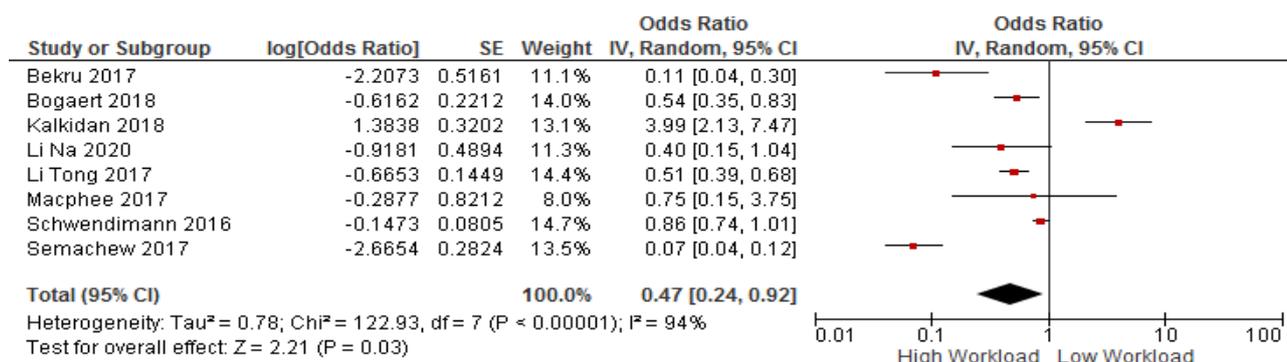
Table 3 explains that there are 8 articles with cross-sectional studies on the influence of age on job satisfaction of health workers with the highest aOR in the study (Geta et al., 2021), and the lowest aOR in the study (Bekru et al., 2017)

**Table 2. PICO cross-sectional articles on the influence of age on job satisfaction of health workers (n=3,581).**

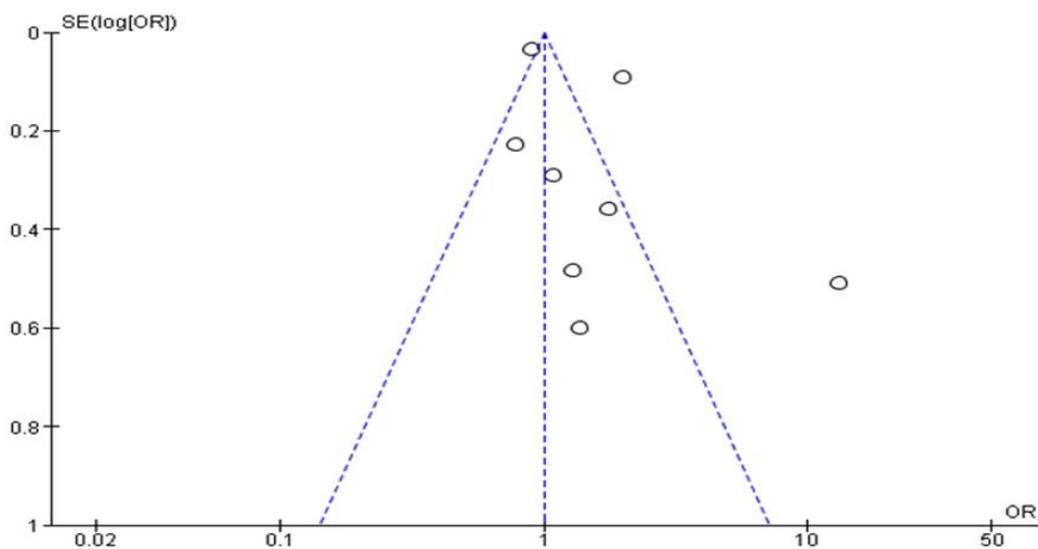
Author	Country	Sample	P	I	C	O
Geleto et al. (2015)	Ethiopia	405	Health Care Provider	Age less than 35 years old	Age more than 35 years old	Job Satisfaction
Gedif et al. (2018)	Ethiopia	383	Health Care Provider	Age more than 30 years old	Age less than 30 years old	Job Satisfaction
Geta et al. (2021)	Ethiopia	520	Health Care Professional	Age more than 30 years old	Age less than 30 years old	Job Satisfaction
Gregoriou et al. (2023)	Cyprus	690	Physicians	Age more than 30 years old	Age less than 30 years old	Intention to leave job
Soe et al. (2023)	Myanmar	536	Health Provider	Age more than 30 years old	Age less than 30 years old	Job Satisfaction
Ayalew et al. (2019)	Ethiopia	424	Nurse	Age more than 30 years old	Age less than 30 years old	Job Satisfaction
Engeda et al. (2014)	Ethiopia	389	Nurse	Age more than 30 years old	Age less than 30 years old	Intent to stay
Bekru et al. (2017)	Ethiopia	234	Midwife	Age more than 30 years old	Age less than 30 years old	Job Satisfaction

**Table 3. aOR and 95% CI data regarding the effect of age on job satisfaction of health workers**

(Author, year)	aOR	95% CI	
		Lower Limit	Upper Limit
Geleto et al. (2015)	2.00	1.67	2.88
Gedif et al. (2018)	1.36	0.42	1.28
Geta et al. (2021)	13.06	4.83	35.34
Gregoriou et al. (2023)	0.89	0.83	0.95
Soe et al. (2022)	1.08	0.61	1.91
Ayalew et al. (2019)	1.29	0.50	3.34
Engeda et al. (2014)	1.74	0.86	3.44
Bekru et al. (2017)	0.78	0.5	11.61



**Figure 3. Forest plot of the effect of age on job satisfaction of health workers**



**Figure 4. Funnel plot of the influence of age on health worker job satisfaction**

**a. Forest plot**

The forest plot in Figure 3 shows that age >30 years does not affect job satisfaction among health workers compared to health workers aged < 30 years, this result is not statistically significant (aOR= 1.00; 95% CI= 0.94 to 1.07; p= 0.94). The forest plot also shows high data heterogeneity across primary studies (I<sup>2</sup>= 93%; p= 0.94), thus the calculation of the average effect estimate was carried out using a random effect model approach

**b. Funnel plot**

The funnel plot in Figure 4 shows the distribution of the asymmetric effect estimates. The distribution of effect estimates is mostly located to the left of the estimated average vertical line, thus indicating publication bias. Because the distribution of effect estimates is mostly located to the left of the vertical line of the average estimate in the funnel plot which is the same as the average effect estimate in the forest plot which is located on the left, the publication bias tends to overestimate the true effect.

**Table 4. PICO cross-sectional articles on the influence of a safe work environment on job satisfaction of health workers (n=1,813).**

Author	Country	Sample	P	I	C	O
Gedif et al. (2018)	Ethiopia	383	Health care provider	Safe work environment	Not safe working environment	Job Satisfaction
Geta et al. (2021)	Ethiopia	520	Health care personnel	Safe work environment	Unsafe work environment	Job Satisfaction
Ayalew et al. (2019)	Ethiopia	424	Nurse	Safe work environment	Unsafe work environment	Job Satisfaction and Motivation
Kibwana et al. (2017)	Ethiopia	252	Anesthetist	Safe work environment	Unsafe work environment	Job Satisfaction

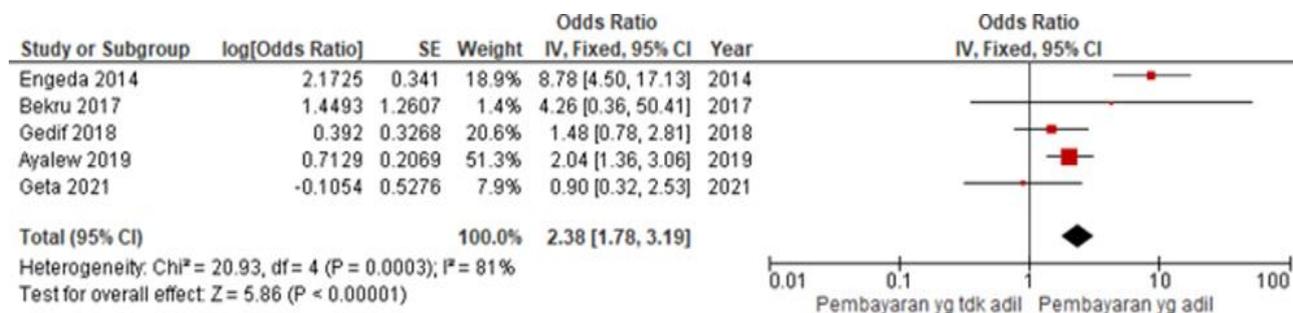
Author	Country	Sample	P	I	C	O
Bekru et al. (2017)	Ethiopia	234	Midwife	Conductive working condition	Not conducive working condition	Job Satisfaction

**Table 5. Odds Ratio (OR) regarding the influence of a safe work environment on job satisfaction of health workers**

(Author, year)	aOR	95% CI	
		Lower Limit	Upper Limit
Gedif et al. (2018)	1.03	0.60	1.76
Geta et al. (2021)	1.25	0.52	3.00
Ayalew et al. (2019)	1.24	0.72	2.14
Kibwana et al. (2017)	1.87	1.06	3.31
Bekru et al. (2017)	0.37	0.10	1.32

Table 4 presents a summary 9 cross-sectional studies used for meta-analysis of the influence of the work environment on job satisfaction in health workers (n= 4,497). Table 5 presents the Adjusted Odds Ratio (aOR) and 95% Confidence Interval (CI 95%) on the effect of the work environment on job satisfaction in health workers.

Table 5 explains that there are 5 articles with cross-sectional studies on the effect of a safe work environment on job satisfaction of health workers with the highest aOR in the study (Kibwana et al., 2018), and the lowest aOR in the study (Bekru et al., 2017).

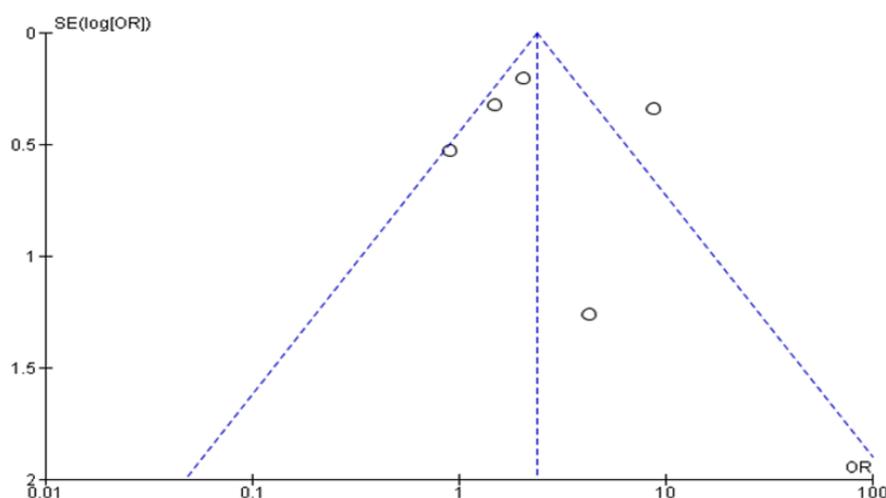


**Figure 7. Forest plots of the effect of fair pay on health workers' job satisfaction**

**c. Forest Plot**

The forest plot in Figure 7 shows that fair payment will influence the job satisfaction of health workers. Health workers who receive fair payment will be 2.38 times more satisfied at work compared to health workers who do not receive fair payment, this result

is statistically significant (aOR= 2.38; 95% CI= 1.78 to 3.19; p<0.001). The Forrester plot also shows high heterogeneity in impact estimates across primary studies (I<sup>2</sup>= 81%; p<0.001). Thus, the calculation of the estimated average effect was carried out using a random effect model approach.



**Figure 8. Funnel plots of the effect of fair payment on health worker job satisfaction**

**d. Funnel Plot**

The funnel plot in Figure 8 shows a larger distribution of influence estimates on the left than on the right of the vertical mean line. Thus, funnel plots identify publication bias that tends to underestimate the true effect.

**DISCUSSION**

**1. The effect of age on health workers job satisfaction**

Job satisfaction refers to employees' positive emotions and attitudes towards work, the work environment, and their role in an organization (Alam & Asim, 2019). Experts have shown a consensus on the important role of job satisfaction in improving the practices and performance of workers (García-Juan et al., 2023). In addition, job satisfaction is a significant predictor of job happiness, commitment and increased productivity.

In the employment context, younger healthcare workers choose to pursue goals that open up opportunities for future career growth by focusing on acquiring new knowledge and skills. Conversely, as they get older, they often show less interest in professional training and development, the acquisition of new skills, and future success.

Meta-analysis of 8 cross-sectional articles with a population of health workers shows that age over 30 years does not affect job satisfaction compared to health workers aged less than 30 years.

Based on the conservation of resources (COR) theory (Hobfoll, 1989), it states that employees strive to obtain, maintain and protect valuable resources, such as knowledge, skills, conditions, objects, social support and energy. Thus, we suggest that employees with subjective older age bias may lack resources (e.g., such as passion, energy, and skills) necessary to carry out their work roles which may lead to a mismatch between expected and actual performance as well as low levels of job satisfaction.

In addition, empirical studies show that a young workforce is positively related to productivity, performance, employee work motivation and job satisfaction (Kunze et al., 2015). In addition, although empirical studies on the subjective age-satisfaction relationship in the work context do not exist, studies regarding non-work contexts show that a young workforce is positively associated with life satisfaction.

## **2. The influence of a safe work environment on health workers' job satisfaction**

As social creatures, the environment created by interactions between staff and leadership impacts how people behave and how they feel about their work. The experiences people have at work have an impact on personal well-being as well as job satisfaction. Over the past few decades, much research has focused on the psychosocial impact of the work environment on individual health and well-being.

The psychosocial work environment includes several factors that influence individuals and contribute to the health of workers, especially health workers. Psychosocial factors include job demands; work organization including influence, freedom, meaning of work, and possibilities for growth; interpersonal relationships such as leadership and coworkers, sense of community, role clarity, feedback, and support; as well as individual and personal health factors, including a person's ability to cope and family support (Kristensen et al., 2005). All of these factors come together to create a space where people interact and perform.

This meta-analysis was conducted on 5 cross-sectional articles with a population of health workers, showing that a safe work environment will increase job satisfaction 1.23 times among health workers, but this increase is not statistically significant (aOR= 1.23; 95% CI= 0.92 to 1.65; p= 0.160).

A healthy and safe work environment is significantly correlated with job satisfaction as well as other positive outcomes for the healthcare workforce, including engagement, productivity, and organizational commitment. Additionally, when healthcare workers feel comfortable and experience satisfaction at work, they report increased self-efficacy, autonomy, higher levels of personal accomplishment, and organizational commitment.

This includes the areas of collaboration and teamwork, growth and development, recognition, employee involvement, fair leadership, autonomy and empowerment, appropriate staffing, skilled communication, and a safe physical workplace (Lindberg & Vingård, 2012). In addition, leader support and leader effectiveness protect against the negative consequences of stressful environments (Birkeland et al., 2015), contribute to the provision of high-quality and timely care (Cleary et al., 2012), reduce burnout (Green et al., 2014), and reduce employee turnover (Redknap et al., 2015)

## **3. The effect of fair payment on health workers' job satisfaction**

Based on the results of research (Yatimul Kais Diyanto et al., 2022), on January 11 2021, among 10 health workers at the Nong-gunong Community Health Center, Sumenep Regency, it was found that 7 research subjects (70%) had low job satisfaction, which was due to Due to lack of appreciation from superiors, this causes health workers' perception of their work to be less good. Meanwhile, 3 research subjects (30%) had high job satisfaction where the health worker felt that what he got at work was quite appropriate and the health worker really appreciated his work as a health worker.

Several aspects of work such as salary, company management, supervision, intrinsic factors of work, working conditions, social aspects of work, communication, and coworkers greatly influence job satisfaction. Apart from that, other aspects that influence job satisfaction, namely; wages, jobs, promotions, supervisors, and coworkers (A. J. Mohammad et al., 2022). Meanwhile, according to (Paais & Pattiruhu, 2020), there are factors that influence job satisfaction, namely the job itself, salary, coworkers, superiors, promotions, work environment. The nurse's job satisfaction factor is very important for the health center to pay attention to.

Meta-analysis of 5 cross-sectional articles shows that fair payment will influence health worker job satisfaction. Health workers who receive fair payment will be 2.38 times more satisfied at work compared to health workers who do not receive fair payment, this result is statistically significant (aOR= 2.38; 95% CI= 1.78 to 3.19; p<0.001).

Providing fair and decent wages to employees can increase job satisfaction. A decent salary results in the fulfillment of all needs, including food, clothing and shelter, as well as for their families or dependents. Research conducted by (Jafari et al., 2014), said that the level of staff satisfaction at Teching Tehran Hospital was in the low category including salary or benefits and management policies. This research also states that work equipment and salary differences or accuracy are the most important factors that can increase nurses' job satisfaction. Meanwhile, based on research (Jarupathirun & De Gennaro, 2018), it is said that rewards or salary have a significant influence on job satisfaction.

#### **AUTHOR CONTRIBUTION**

Hanisah was the main researcher who chose the research topic, carried out data collection searches in this research. Dwi Nina Wijayanti and Dewi Utary carried out data analysis and reviewed research documents.

#### **CONFLICT OF INTEREST**

There was no conflict of interest in the study.

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