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Relationship of Healthcare assistants working hours, job tenure to job satisfaction and job-related affective well-being

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Abstract

This study aimed to investigate associations between working hours, job tenure to job satisfaction and job related affective well-being. The study was a correlational design. Job Satisfaction Survey (JSS) and Job-related Affective Well-being Scale (JAWS) were used as measurements. 93 healthcare assistant participants completed the questionnaires. Results: There was a significant strong positive relationship between length in organisation to job-related affective well-being and job satisfaction. There were gender differences on job-related affective well-being, with males ranking higher on High Pleasurable Higher Arousal (HPHA) than females. Strong positive relationship between job-related affective well-being and job satisfaction was found. No correlations between working hours to job satisfaction and job-related affective well-being. Limitations and implications for future research are discussed.

Introduction

Literature review

Work schedules plays an important role in an individual's life and beneficial for well-being, satisfaction, work or family balance and general health. In terms of daily work schedule it varies between 1 to 12 hours of work. Therefore, time is fundamental in peoples working life (Warren, 2010). Furthermore job tenure may impact the way people feel about their jobs. Although previous researchers have focussed on the associations between length of shift (short /long working hours per day) to job satisfaction and well-being (Dembe, 2009, Hugh & Parkes, 2007, Estryn-Behar, Heiden, 2012), limited research has been done focusing on correlations between job tenure, working hours to job-related affective well-being (people's emotional reactions to their job) and job satisfaction of Healthcare Assistants working with the elderly.

The number of elderly people living in nursing homes, residential setting and living alone is increasing in most countries (Powell, 2010; Forma, Rissanen, Aaltonen, Raitanen & Jylha, 2011). Most healthcare assistants work between 1 and 12 hours shift, depending on whether is home care or residential care. This current study will explore their emotional reaction (i.e. positive and negative) towards their jobs using Job-related Affective Well-being Scale (JAWS). Health Care assistant supports the elderly until the end of life, so their emotions may be affected more especially if they were supporting an elderly on palliative care. Furthermore, this study will look at how job tenure may affect job satisfaction using Job Satisfaction Survey (JSS) scale. The results of this study hope to extend or add to existing knowledge and benefit everyone who works in the healthcare sector (i.e. Home Care and Residential Home Care)

Gender differences on job satisfaction and job-related affective well-being

Providing care for the elderly can be stressful to health care assistants, and it can be detrimental to the caregiver's health (Pinquart, & Sorensen, 2003b). And this in return may have an input in how satisfied caregivers are to their jobs. According to Pinquart and Sorensen (2006) meta-analysis (229 studies published from 1983 to 2005) they found that women provided greater amount of care and had lower levels of physical health and well-being, and higher levels of depression than men, additionally they found that there were lack of gender differences in the length of caregiving. Based on this meta-analysis findings regarding women's health, women may feel less satisfied with their jobs than men. In addition, Del-Pino-Casado, Frías-Osuna, Palomino-Moral, and Ramón Martínez-Riera, (2012) reported that men were more satisfied with their job (caregiving) than women; however the difference only differed by 3% (e.g.83% for men and 80% for women). Men and women can have personal different comparison and expectations when evaluating their jobs.

Although previous studies (e.g Del-Pino-Casado et al., 2012; Kuuppelomaki, Sasaki, Yamada,Asakawa, & Shimanouchi, 2004) found that male caregivers were more satisfied with their job than female caregivers, McKee, et al., (2009) found lack of gender differences to job satisfaction in health caregivers. Further studies (Jathanna, & Bhandary, 2011; Quinn, Clare, & Woods, 2009) reported a poor physical and psychological well-being on health caregivers working with older persons with dementia (progressive degenerative condition caused by brain disease or injury and marked by memory disorders, personality changes, and impaired reasoning).

Quinn, et al., (2009), meta-analysis review of 15 studies, found that relationship quality between the caregiver and the person receiving care may have an impact on the caregiver's well-being. Furthermore, gender was found to be important when working with

the elderly. This review was for home-based carers and residential carers. Most elderly women prefer to be supported by female carers than male carers, and with most elderly woman living longer than elderly men (Powell, 2010; Forma et al. 2011), female carers end up working more than male carers in a given day shift, thus result in exhaustion and physical health problems for female carers (Pinquart, & Sorensen, 2003b).

The above findings are related to the current study, as the study will look at gender differences on job satisfaction and job-related affective well-being of health care assistants working with elderly people.

Working hours and well-being

Working hours as used in this study refers to length of shift a person work per day. Well-being is defined as the positive and negative affect of an individual's emotion (Dodge, Daly, Huyton, & Sanders, 2012). Therefore, an individual will have higher levels of psychological well-being if positive affect and lower levels if negative affect. Recent researchers associated working long hour shifts with poor recovery and well-being (Dembe, 2009, Hugh & Parkes, 2007, Estryn-Behar, Heiden, 2012). Working long 8 hour shifts were found to carry twice as much accident and risk in transport and health sectors to 12 hour shifts and affected well-being of employees (Wagstaff & Sigstad, 2011). Interestingly, Gash, Mertens, & Gordon, (2012) for example, suggested that a decrease in work hours for women increases well-being. From the findings that have been identified by researchers above, we can conclude that workers have to be aware of the impact working long hours have in well-being and minimise the amount of hours they work.

Furthermore, Tucker, Macdonald, Folkard, and Smith, (1998) compared the impact of 8 and 12 hour shift changeover to health and well-being and find that 8 hours shift system reported less physical ill health than the 12 hour shift. In addition, Hughes, & Parkes, (2007)

suggested that working long hours was associated with poorer recovery and impaired well-being. The results of these studies provide further understanding of the importance of working less hours and the potential negative impact of long work hours on well-being. However, this interpretation has not been without its limitations, for example (Costa, Sartori, & Akerstedt, 2006) suggested that flexibility at work plays a role in employees' health and well-being, regardless of whether they work long or short hours shift.

Further studies have examined the relationship between working hours to health and social well-being and find that working long and unusual hours increases the risk of psychovegetative (disturbances of the general condition and well-being caused by stress-related disorders and depressive conditions) health impairment and poor social well-being (Wirtz, & Nachreiner, 2010). This research suggests that the longer and unusual hours a person spent working the less social they will be. In addition, longer work hours have been associated with high levels of work-family interference (Hughes, & Parkes, 2007). In this current study, working hours of health care assistant will be correlated with job satisfaction and job-related affective well-being. The hours of work range from one hour to twelve hours per shift.

Working hours and Job satisfaction

Job satisfaction plays an important role in for an employee and organisations. Christen, Iyer, and Soberman, (2006) suggested that job satisfaction determines the outcome of how employees perform at work and can benefit both an individual and organisation. According to Bhatnagar, and Srivastava, (2013), job satisfaction is considered to be a global feeling about the job and its various aspects. Beckers, et al, (2008) reported a positive association between working hours and job satisfaction. Further study, job satisfaction was

found to be a predictor of how pilots can handle stress and pressure than their unusual work hours (Andresen, Domsch, & Cascorbi, 2007).

In addition, Beckers, et.al, (2008) suggested that employees who volunteer to work overtime without a reward were satisfied with their job. An Australian study reported that when it comes to job satisfaction women prefer working part-time (less than 30 hours per week) but their life satisfaction was not affected by hours of work (Booth & Van Ours, 2008). The study also reported that women are much happier if their partner works full-time. Furthermore, Booth and Ours, (2013) suggested that decrease in working hour's increases job satisfaction.

Building upon research conducted by Booth, and Van Ours, (2013) above, Gash, Mertens and Gordo, (2012) also reported that women who worked fewer than 30 hours per week were satisfied with their job. However, men were only satisfied with their job if they worked full time without overtime (Booth, & Van Ours, 2008). In other study proposed by Portegijs, Cloin, Keuzenkamp, Merens and Steenvoorden, (2008), women in the Netherland preferred to work fewer hours between 20 and 27 hours per week, and they were satisfied with their job.

Although working less hours has been shown to increase well-being in women and job satisfaction, conflicting evidence suggests that part time workers have negative association with job satisfaction due to insufficient hours to satisfy their needs and desires (Kalleberg, Reskin, & Hudson, 2000; McGovern, Smeaton, & Hill, 2005).

The results of the above studies provide an understanding that job satisfaction and well-being are important elements in organisations and labour market. Although other factors that may affect this elements, for example; working long hour shifts at work and length in an organisation. According to Ajala (2013) well-being improves work life and job satisfaction. Therefore, if workers are satisfied with their job, organisations may gain because job

satisfaction is reported to have positive correlation with commitment, motivation, and improves performance and productivity (Žemgulienė, 2012; Ouedraogo, & Leclerc, 2013; Rapheephan, 2013; Böckerman & Ilmakunnas, 2012)

Furthermore, Hom, (1979) reported a higher score on demographic linear of greater job satisfaction, on married part time employees. Changes in work hours were associated with satisfaction with life on a study of two countries; United Kingdom and German (Gash, Mertens & Gordo, 2012). It also shows that decrease in working hours brings about positive and significant improvement on well-being for women, even though the hourly pay for part time workers is lower than those on full-time employment (Bardasi & Gornick, 2008). This result suggest that, woman who moved from working full time to part time were much happier in life.

Scandura, and Lankau, (1997) reported an association between job satisfaction and flexible working hours. The result of their study revealed that women who perceived that the organisation was giving flexible working hours reported an increase in level of job satisfaction and organisational commitment. Those with family responsibilities reported similar result. The findings of this research indicated that work structure in terms of hours, has a strong influence on job satisfaction (Costa, Sartori, & Akerstedt, 2006). These conclusions are relevant to the present study, as it aims to look at the relationship between structures of shift in terms of hours and job satisfaction.

Job-related Affective well-being

Robertson and Cooper, (2011) defined affective well-being as an experience of regular positive affect or irregular negative affect. Therefore, job-related affective well-being can be defined as people's positive or negative emotional reaction towards their job. The positive and negative emotions are depicted by psychosocial work environment (Mäkikangas,

Feldt, & Kinnunen, (2007). Furthermore, Robertson and Cooper (2011) describe psychological well-being as 'Affective and purposive psychological state'. In a longitudinal 10 years study of occupational related well-being by Hyvönen, Mäkikangas, Kinnunen, Ruoppila, and Feldt, (2008), they reported that positive experiences of managers reflected achievements, promotions and interest in projects were as negative experiences reflected change in position, losing position and ill health. Duyan, Aytac, Akyıldız, and Van Laar, (2013) reported a negative correlation between job related affective well-being and stress at work, however stress at work was positively related to depression and anxiety. In addition, Warr, (2007) suggest that there is a relationship between job-related affective well-being and work characteristics (e.g. promotion, pay rise, job satisfaction).

Furthermore, Dimotakis, Scott, and Koopman, (2011) suggested that interpersonal interaction were associated with positive affective state and job satisfaction. They concluded that positive affect alleviated the negative association between negative affect and job satisfaction. Therefore, positive affective emotions have an effect on people towards their job. Further research associated positive affective well-being at work between employees and their leaders with reduced level of stress (Skakon, Nielsen, Borg, & Guzman, (2010). Correspondingly, negative affectivity and poor schedules of working hours were found to be the predictor of distress (Gareis & Barnett, 2002).

One study among health care physicians using JAWS revealed that job-related negative emotions were associated with stress reactions (Uncu, Bayram, & Bilgel, 2007). In addition, Tucker, Macdonald, Folkard, and Smith, (1998), suggested that poor sleep levels reported by 12 hour shift workers, were related to job affective well-being of negative affect. The research above does suggest that negative affective emotions at work may affect job satisfaction as Skakon, Nielsen, Borg, and Guzman, (2010); Dimotakis, Scott, and Koopman, (2011) have suggested. The present study will be looking at the positive and negative

emotions of health care assistant employees using JAWS. Health Care assistant provide emotional and social support to the elderly with various illnesses (e.g. Alzheimer's, Dementia, Parkinson's, Old aged etc.). In addition, most health care assistant (males and females) know that working with the elderly who suffers from degenerative disorders can be challenging, and they can be affected emotionally more especially if supporting an elderly on palliative care (i.e. end of life).

Male leaders received lower effectiveness ratings when expressing sadness (negative emotional expression) compared to neutrality, while female leaders received lower ratings when expressing either sadness or anger emotions (Lewis, 2000). Additionally, Gardener, Carr, MacGregor, and Felmingham, (2013) results indicated that women had significantly greater N1 and N2 amplitudes (reflecting early emotional reactivity) to negative stimuli than men, supporting a female negativity bias.

Job tenure and Job satisfaction

Job tenure in this context refers to the number of years a person spent working in an organisation. Therefore, the longer an individual is with the organisation/occupation the more experienced they become. In a study by Natarajan and Nagar, (2011) managers with longer service tenure (i.e. 15 years plus) shown a higher affective and normative commitment and intrinsic job satisfaction, than those with lesser service tenure (i.e. 1-7 yrs.). Previously, Hunt, and Saul, (1975) reported that the associations between job tenure and job satisfaction were greatest among females of less than 25 years of age, however the correlation of overall job satisfaction and age was higher for employees with less than 12 months tenure. In addition job satisfaction was found to be more strongly related with age than with tenure for males, whereas strongly associated with tenure than age for females.

Furthermore, Akinlawo, Akinbobola, and Ahmefule, (2013), reported that there was a strong positive relationship between job tenure and job satisfaction. However, Oshagbemi, (2003) found that university teachers who were with the organisation for 30 years and above, were more satisfied with their job, negative association between length in occupation and job satisfaction in university teachers who were less than 10 years in service was also reported. In addition to the above, Gibson and Klein, (1970) also reported a negative linear association between job tenure and job satisfaction, interestingly; positive linear association was reported between job satisfaction and job age.

Smith, Roberts, and Hulin, (1976) found a decline in job satisfaction in 10 year longitudinal study. In brief, these findings suggest that, as length in occupation increases job satisfaction decreases. However, Katz, (1978) study of 3500 respondents, on Job longevity as situational factor in Job satisfaction suggested a stronger positive relationship between job satisfaction and the length in organisation. Further research associated length in occupation with both job satisfaction and job dissatisfaction (Ronen, 1978). The results of these studies provide an understanding that length in occupation, may predict job satisfaction or dissatisfaction. Many people may remain in their current occupation because of economic situations (e.g. recession) than being satisfied with their job.

Further research in the area suggests that length in occupation or service is associated with job satisfaction, however; age altered the effect of satisfaction (Sarker, Crossman, & Chinmeteepituck, 2003). Conversely, research conducted by Ghazzawi, (2011) in the United State of Information technology professionals found no significant relationship between age and job satisfaction. Additionally, Onuoha, and Segun-Martins, (2013), also found a significant negative relationship between age and job satisfaction on married female employees. However, older employees (i.e. 44 years of age) exhibited positive relationship

towards motivation and job satisfaction. In the current study job tenure will be correlated with job satisfaction and job related affective well-being of healthcare assistants.

Working hours, Job satisfaction, health and well-being in general

The effect and correlations of working hours in general have long been the subject of interest in research, for example, recent research conducted by Artazcoz et al., (2013) among European employees found that there was a strong association between long working hours and family responsibilities (e.g. male breadwinners) thus affecting health and well-being. Furthermore, Suwazono et al., (2008) study of Japan steel workers reported an association between long working hours and job related stress. In addition, Park, Kim, Chung, and Hisanaga (2001) associated long working hours with subjective fatigue and chronic job stress due to employees working up to 52 hours a week and sleeping less than 8 hours a night.

McDonald, (2008) highlighted the law and policy of working hours in health care on 6 countries (Australia, Canada, Denmark, New Zealand, the United Kingdom, and the United States) and noted that the reduction of working hours will be of beneficial not only to the health professionals well-being but also to the health and safety of the patients. Further research from the Korean National Health and Nutrition Examination Survey (2007-2009) reported that working long hours was related to depressive symptomatology (Kim et al., 2013). Depressive mood was found to be related to working schedules/hours, additionally; shift work was reported to have higher depressive mood than day work (Driesen et al. (2010).

Further to the studies above, Kawada, (2011) reported an association between depression and overtime working hours. However, Beckers, et.al, (2008) suggest that voluntary overtime carries less risk of depression due to employees being satisfied with their job, therefore less job-related stress. Therefore when an individual is satisfied with their jobs chances of feeling job related stress may be low. Additionally, Tourigny, Baba, and Xiaoyun,

(2010) reported that nurses in Japan and China associated depression with job satisfaction and absence. This findings suggest that employers should pay attention to issues that influences job satisfaction so as to lower the need for employees to be absent from work.

Recent study in Germany reported job satisfaction to be associated with different aspect of organisation in primary care (Gavartina et al., (2013), and among the organisational attribute for primary care which were of concerned where decision making, stress and communication. Conversely, Skinner, Madison, and Humphries, (2012) reported that 96% of nurses were satisfied with their jobs; however 57.6% reported job dissatisfaction at least once in a month. Therefore stress was not associated with job dissatisfaction. The results of these studies provide an understanding that it is possible for an individual to be satisfied with their job, but not at all times; for example in health care, new admission may be more demanding, and that may cause an individual to be dissatisfied but only for a day.

Building upon the above research conducted by Skinner, Madison, and Humphries, (2012), job dissatisfaction have been found to be the cause of nurses to leave their jobs. Furthermore, Bhatnagar, and Srivastava, (2013) emphasized that job satisfaction in healthcare organisations can be improved by focusing on motivating factors (e.g. ‘making work more interesting, requiring more initiative, creativity, and planning’) and understanding what domain of job satisfaction is important at work for employees.

According to Delp, Wallace, Geiger-Brown, and Muntaner, (2010), home care workers reported unpaid overtime hours as a predictor to stress and job dissatisfaction . Furthermore, Messing, Caroly, Doniol-Shaw, and Lada, (2011) highlighted that time pressure of home care workers affect the quality of the care being given to the clients. These results suggest that if home care workers are working under pressure, clients may not receive adequate care, and that may affect the health and safety of both the carer and the client.

Research objectives

Whereas previous research had focused more on the associations of long work hours and well-being on other occupations, limited research has been done on how working hours and job tenure is associated with job satisfaction and job-related affective well-being in healthcare sector of the elderly.

The aim of this quantitative study is to investigate whether there is a relationship between working hours, job tenure to job satisfaction and job-related affective well-being. There is a need to understand how health care assistant cope under working hours and their emotional reaction towards their job in general. After reviewing the above literature; below are the hypotheses for the current study;

Hypotheses

1. It is hypothesized that working hours will have significant positive relationship with job satisfaction for healthcare assistants.
2. It is hypothesized that there will be a significant positive relationship between job tenure and job satisfaction.
3. There will be a significant gender difference on job satisfaction and job-related affective well-being.
4. It is hypothesized that job tenure will have a significant positive relationship with job-related affective well-being.
5. It is hypothesized that there will be a significant positive relationship between working hours and job-related affective well-being.
6. It is hypothesized that there will be a significant positive relationship between job satisfaction and job-related affective well-being.

Methodology

Research Sample

For the present study a sample of 93 healthcare assistants (i.e. working in various nursing homes, residential homes and home care) in Dublin were involved. Snowball sampling was used because participants suggested someone else who was willing to participate and who fit the characteristics and inclusion criteria. Of the entire 100 questionnaire that was sent out, 97 responded, however 4 questionnaires have to be excluded because were not filled properly (e.g. no gender or ticked two questions at once). Of all the 93 participants 35 were males and 58 were females (i.e. most health care assistant are female, this is because in nursing home there are more elderly women than elderly men and elderly women were found to live longer than elderly men (Hsiang-Ping, 2013; Lubitz, Cai, Kramarow, & Lentzner, 2003) and for the reasons of human rights and maintenance of dignity, elderly women prefer to be assisted by female carers). Furthermore, of all participants 17.2 per cent have been with the organisation less than a year, 40.9 per cent between 2 and 4 years, and 42 per cent from 5 years and above.

Inclusion criteria for participants was that they worked between 1 and 12 hour shift, day, evening and night, over the age of 18 and with the same job description (e.g. Assisting residents with personal care, feeding, using hoist and other daily activities). Nurses and activity co-ordinators were excluded in this study simply because though they support and assist residents, some do not use a hoist or assist in giving residents personal care.

Design

To test the research questions; correlational design was used to measure relationship between predictor variables; working hours and job tenure to criterion variables; job satisfaction and job-related affective well-being. The variables were measured using self-reporting questionnaires. Between subjects design was also used to measure gender differences on dependent variables (i.e. job satisfaction and job-related affective well-being).

Power Analysis

Power analysis was calculated using the sample size, and the necessary sample size for power of .80 according to Cohen's (1992) power primer table, for correlation coefficient r with the medium effect size of .30 at a significance criterion of .05 is $N=85$, the sample size for this study is above $N=85$, thus the increase in sample size, the greater the probability of correctly rejecting the false null hypothesis.

Data collection Method

Questionnaire is used as a method to collect data in this study. Respondents were assigned the same questions from two points along scale (Likert scale) questionnaire. To collect data, collection envelopes were given to participants to return questionnaires at the collection point. Participants were given an instruction to return the questionnaires within a week. Participation was voluntary and anonymous since no names were to be written on the questionnaires.

Scales Used

1. Job-related affective well-being scale

Job-related affective well-being scale (JAWS) was developed by Van Katwyk, Fox, Spector and Kelloway, (2000), in order to assess people's emotional reaction towards their jobs (i.e. positive affect and negative affect). The scale consists of 20 items rated on a 5 point scale with anchors *Never, Rarely, Sometimes, Quite often, and Extremely often*. It includes a wide variety of emotional experiences, both negative and positive. The five most extreme items are placed into subscales: high pleasure high arousal, HPHA (ecstatic, enthusiastic, excited, energetic, inspired); high pleasure low arousal, HPLA (satisfied, content, at ease, relaxed, calm); low pleasure high arousal, LPHA (furious, angry, frightened, anxious, disgusted); and low pleasure low arousal, LPLA (depressed, discouraged, gloomy, fatigued, bored). For each subscale, high values represented high levels of that state.

JAWS was validated by various researchers (e.g. Guerrero & Herrbach, 2008; Wilkerson, Boer, Smith, & Heath, 2008; Meier, Semmer, Elfering, & Jacobshagen, 2008). It is however, important to note the limitations of JAWS, participants who may be experiencing positive affect on a given day, may rate their overall experience positive (Brose, Lindenberg, & Schmiedek, 2013), and those experiencing negative affect may rate their experience negative.

2. Job Satisfaction Survey

Job satisfaction survey scale (JSS) was developed by Spector (1994) to assess employee attitudes about the job and aspects of the job. The scale consists of 36 items and is measured on the basis of six point Likert scale ranging from '*strongly agree*' to '*strongly disagree*'. JSS has been validated by several researchers (e.g. Auerbach, McGowan, Ausberger, Strolin-Goltzman, & Schudrich, 2010; Chou, Fu, Kroger, & Ru-yan, 2011;

Haggard, Robert, & Rose, 2011). The JSS can yield 10 scores. It assesses 9 facets including pay, promotion, supervision, fringe benefits, contingent rewards, operating conditions, co-workers, nature of work and communication. Each of the subscales consists of four items. The overall job satisfaction score is computed by summing all 36 items. Although JSS was originally developed in USA it have been found for example by Astrauskaitė, Vaitkevičius, and Perminas, (2011); Mahmoud, (2012), that it can be of less dimensions.

Reliability

Cronbach's alpha was used as a method to test internal consistency in this current study, and reliabilities for both questionnaires items were .99 similar to previous researchers (Guerrero & Herrbach, 2008; Wilkerson, Boer, Smith, & Heath, 2008; Meier, Semmer, Elfering, & Jacobshagen, 2008; Haggard, Robert, & Rose, 2011; Chou, Fu, Kroger, & Ru-yan, 2011) According to Gliem, and Gliem, (2003) the closer Cronbach's alpha coefficient is to 1.0 the greater the internal consistency of the items in the scale. George and Malley (2003, p. 231) provided the rules of thumb regarding Cronbach's alpha (i.e." alpha of above 0.9=Excellent, above 0.8=Good, above 0.7=Acceptable, above 0.6=Questionable, above 0.5= Poor, and below 0.5=Unacceptable"). In this current study Cronbach's alpha for each variable ranged from .80 to .99. However, very high reliability is not necessary, Tavakol, and Dennick, (2011) concluded that a high value of alpha (> 0.90) may suggest redundancies and show that the test length should be shortened.

Model of study

In this current study Job satisfaction and Job-related affective well-being are criterion variables, and Job tenure and Working hours are predictor variables.

Statistical Analysis of Data

The analysis of data received from respondents is conducted by Statistical Packages for the Social Sciences (SPSS 21). Mann Whitney U was used to test Hypotheses 3, Spearman's Rho to test hypotheses 1, 2, 4 and 5 and Pearson's correlation coefficient to test hypotheses 6.

Ethical consideration

This study was approved by the college's ethical panel (Dublin Business School), and met the PSI ethical procedures. Participants were given additional information on a separate piece of paper not attached to questionnaires for them to keep, which stated that participation is voluntary and anonymous and that they can choose not to participate if they wish to or they can withdraw from participating at any time. Furthermore, they can email me if they have any questions and if they want to find out about the result of the study.

Additional Information

Demographic questions

In the beginning of the questionnaires participants were asked single demographic questions: Gender, (i.e. male or female), on average how many hours do you work per day? (e.g. 1 to 5 hours; 6 to 8 hours; 9 to 12 hours). How long have you been with the organisation? (e.g. up to 1 years; 2 to 4 years; 5 to 8 years; 9 years and above); what shifts

do you work? (Day, Evening or Night) How many days per week do you have to work? (1 to 2 days; 3 to 4 days; 5 to 7 days)

Participants returned the completed questionnaires within a week in collection envelopes that were provided marked clearly in capital letters (i.e. COLLECTION ENVELOPE FOR COMPLETED QUESTIONNAIRES), which were given to participants who knew other healthcare assistant participants who took part in this study (snowball sampling). In addition, participants were instructed to leave blank the questions that they did not want to answer. Participants were not given rewards to participate in this study.

Results

Descriptive and inferential statistics was used to analyse the associations between measured variables for working hours and job tenure among the sample. Hypothesis 1;2;3;4;5 were analysed using non-parametric tests (e.g. Spearman's rho and Mann-Whitney U) because the assumptions for parametric test were broken. However, Hypothesis 6 was analysed using Pearson correlation coefficient, because the assumptions for parametric test were met.

Descriptive statistics

Hypothesis 1: *Working hours (i.e. 1 to 5 hours; 6 to 8 hours; 9 to 12 hours) will have significant positive relationship with job satisfaction for health care assistant.*

Spearman's rho, found that there was no significant relationship between working hours and job satisfaction for healthcare assistants ($r_s(91) = .11, p = .14$). These results suggest that working hours does not affect job satisfaction of health care assistant in this current study. Therefore the null is accepted.

Hypothesis 2: *There will be a significant positive relationship between job tenure and job satisfaction.*

Spearman's Rho found that there was a significant strong positive relationship between Job satisfaction and job tenure ($r_s(91) = 0.97, p < .001$), this suggest that as job tenure increases, job satisfaction also increases. Furthermore, Mann-Whitney U test was used to compare 2 groups at a time to see which group differed significantly from the other groups (i.e. up to 1 years job tenure group and 2- 4 years job tenure group; 5-8 years job tenure group and 9 years

job tenure and above group) in terms of job satisfaction. The 2-4 years job tenure group had a mean rank of 23.49 compared to the mean rank of 48.45 for the 5-8year group. The Mann-Whitney revealed that 2-4 years group and 5-8 years group differed significantly ($U = -5.172$, $p < .001$). In addition, the up to 1 year job tenure group had a mean rank of 10.07 compared to mean rank of 30.65 for the 9 years and above job tenure group. The Mann-Whitney U revealed that the up to 1 year group and 9+ years group differed significantly ($U = -4.952$, $p < .001$)

Hypothesis 3: *There will be a significant gender differences on job satisfaction and job-related affective well-being.*

A Mann-Whitney U test was used to test the hypothesis that there will be a significant difference between males and females on job-related well-being. Males had a higher mean rank of 62.81, compared to the lower mean rank of 37.46 for females. The Mann-Whitney revealed that males and females differed significantly ($U = -4.39$, $p < .001$). Therefore the null can be rejected. Furthermore, a Mann-Whitney U test was used to test the hypothesis that there will be a significant difference between males and females on job satisfaction. Males had a mean rank of 58.5, compared to the mean rank of 40.06 for females. The Mann-Whitney revealed that males and females differed significantly ($U = -3.19$, $p = .001$).

Additionally, job-related affective well-being was divided in to subscale (e.g. HPHA (ecstatic, enthusiastic, excited, energetic, inspired); high pleasure low arousal, HPLA (satisfied, content, at ease, relaxed, calm); low pleasure high arousal, LPHA (furious, angry, frightened, anxious, disgusted); and low pleasure low arousal, LPLA (depressed, discouraged, gloomy, fatigued, bored) to test gender differences of each subscale. A Mann-Whitney U test revealed that males and females differed significantly; males (HPHA) had a high mean rank of 61.26 compared to females (HPHA) of 38.40. ($U = -3.98$, $p < .001$)

Hypothesis 4: *There will be a significant positive relationship between job tenure and job-related affective well-being.*

Spearman's rho found that there was a strong positive significant relationship between Job-related affective well-being and job tenure ($r(91) = 0.58, p < .001$), these results suggest that as the scores on job tenure increases the scores in job-related affective well-being increases. Furthermore, Mann-Whitney U test was also used to compare 2 groups at a time to see which group differed significantly from the other groups (i.e. up to 1 years job tenure group and 2- 4 years job tenure group; 5 - 8 years job tenure group and 9 years job tenure and above group) in terms of job related affective well-being. . The 2-4 years job tenure group had a mean rank of 26.28 compared to the mean rank of 44.40 for the 5-8year group. The Mann-Whitney revealed that 2-4 years group and 5-8 years group differed significantly ($U = -3.675, p < .001$). Additionally, the up to 1 year job tenure had a mean rank of 9.88 compared to mean rank of 18.56 for the 9+ year's job tenure group. The Mann-Whitney U revealed that the up to 1 year group and the 9+ years group differed significantly ($U = -2.837, p = .005$).

Hypothesis 5: *There will be a significant positive relationship between working hours and job-related affective well-being.*

Spearman's rho found that there was no significant relationship between working hours and job-related affective well-being ($r_s(91) = -.099, p = .344$). Therefore the null is accepted. The results suggest that working hours does not affect job-related affective well-being.

Hypothesis 6: *There will be a significant strong positive relationship between job-related affective well-being and job satisfaction.*

A Pearson correlation coefficient found that there was a strong positive significant relationship between Job-related affective well-being ($M = 69.44, SD = 25.5$) and Job satisfaction ($M = 125.6, SD = 61.1$) ($r(91) = 0.97, p < .001$). Therefore the null hypothesis is

rejected. This relationship can account for 47.61% of variation of scores. These results also suggest that as job satisfaction increases, job- related affective well-being also increases.

Discussion

The purpose of this study was to examine the relationship between working hours, job tenure to job satisfaction and job-related affective well-being amongst health care assistant working in nursing homes and home-based care.

Working hours and job satisfaction

The present study does not support the hypothesis that working hours have a positive significant relationship with job satisfaction. The study found no significant relationship between working hours and job satisfaction for health care assistant. Very limited research has been done previously focusing on healthcare assistants working hours and job satisfaction. These results however conflict the findings of previous research which reported a positive significant associations between working hours and job satisfaction (Beckers, et al., 2008), the findings were generated on a sample of 1612 Dutch full time workers, which included those in caring jobs.

Further research on working hours found a negative associations between working less hours (part time) and job satisfaction (Kalleberg et al., 2000; McGovern et al., 2005), these findings suggest that as working hours decreases job satisfaction increases, although both studies concluded that the negative relations were due to insufficient hours to satisfy participants needs and desires. The current study also contradicts the suggestion that working overtime hours has an impact on job satisfaction (Delp, et al., 2010). Furthermore, other researchers on working hours and job satisfaction, focused on gender differences and found that, women preferred to work less hours and that there were more satisfied with their jobs (Booth and Ours, 2013; Merens and Steenvoorden, 2008; Bardasi & Gornick,2008)

Job tenure and job satisfaction

The result of the current study showed that there was a significant positive relationship between job tenure and job satisfaction for health care assistants. These results are in accordance with the earlier findings of Katz, (1978), who reported the strong positive relationship between longevity and job satisfaction, on a sample of 3500 respondents. These findings are also in support of Akinnawo, et al. (2013) who reported significant positive associations between length in occupation and job satisfaction. The current study is also in accordance with the findings of Natarajan and Nagar, (2011) and Akinnawo, et al., (2013) who reported that those with longer service tenure are more satisfied with their jobs compared to those with lesser service tenure. In the current study those with 5-8 years tenure differed significantly with those less than five years.

The results of the current study contradict the findings of Gibson and Klein, (1970) who reported a negative linear relationship between job satisfaction and length in occupation, suggesting that as length in occupation increases job satisfaction decreases. Much of the research which has explored the relationship between job satisfaction and job tenure, associated age with both job satisfaction and job tenure (Sarker, et al, 2003) and job satisfaction with age (Onuoha, 2013), They found that as age increases so does the level of job satisfaction, regardless of the length in occupation. These findings suggest that health care sectors need to understand the factors affecting the carer's job satisfaction in order to manage turnover and absenteeism among other associations of job dissatisfaction.

Gender differences on job satisfaction and job-related affective well-being

The result of this study revealed that there was a significant gender differences between males and females on job satisfaction and job-related affective well-being. Males were found to have ranked higher on job satisfaction than females. The pattern of gender differences in determination of job satisfaction in this study is similar to that reported by Del-Pino-Casado, Frías-Osuna, Palomino-Moral, & Ramón Martínez-Riera, (2012). According to Del-Pino-Casado et al., (2012), males were more satisfied with their job than females, even though there was a slight difference in percentages. However, the findings of the current study are in conflict with the findings of McKee, et al., (2009) who reported the lack of gender differences on job satisfaction.

In addition, the current study found that males had higher levels of well-being than females. These findings are in accordance with Pinqart and Sorensen (2006) meta-analysis of 229 studies of health caregivers. They found that women reported higher level of depression and lower levels of subjective well-being and physical health than men. Conversely, the meta-analysis review by Quinn et al., (2009) of 15 studies, found that caregivers well-being was determined by the relationship with the person they are caring for, this findings was mostly for the home-based carers for dementia elderly people. Because most elderly people in need of care at home, they could have lost their close partners, and thus they may react differently to caregivers.

Job tenure and job-related affective well-being

The findings of the current study revealed that there was a significant strong positive relationship between job tenure and job-related affective well-being. These result suggest that the longer the person is in organisation, the high the positive affect, as job-related affect

provided a more comprehensive view of emotional states at work than current measures of job satisfaction (Van Katwyk et al., 2000). These results contradict the findings reported by Pinquart and Sorensen (2006) in their meta-analysis review. They reported the lack of gender differences in job tenure and well-being. The current study reported that males ranked higher on high pleasure low arousal HPHA (i.e. ecstatic, enthusiastic, excited, energetic, inspired) subscale of Job-related affective well-being, than females regardless of how long they have been caring for the elderly. Furthermore, the findings of the current study revealed that females differed from male participants on negative affect (Lewis, 2000) of how they felt about their job. Conversely, females ranked lower on low pleasure high arousal, LPHA (i.e. furious, angry, frightened, anxious, and disgusted) compared to males. Furthermore, the current study reported a significant difference between the group with long tenure and the less tenure group. These results suggest that 5-8 years tenure have a positive job related affective well-being, than those with 2-4 years tenure.

Working hours and job-related affective well-being

The current study found no significant relationship between working hours and job-related affective well-being. The results presented are surprising as they contradict majority of the studies done in this area (Estryn-Béhar & Van der Heijden, 2012; Dembe, 2009, Hugh & Parkes, 2007). Working 8 hour shift have been found to carry risk and twice as much accidents in health care sector than 12 hour shift (Wagstaff & Sigstad, 2011). However, when comparing the impact of 8 and 12 hour shift to health and well-being, Tucker et al., (1998) found that 12 hour shift workers reported a higher level of physical ill health and well-being than 8 hour shift. In addition, Hughes, & Parkes, (2007) associated working longer hours with poorer recovery and impaired well-being.

The current study also contradicts the findings of Costa, Sartori, and Akerstedt, (2006), who concluded that flexibility plays a major role at work on health and well-being, regardless of longer or shorter shift. Further research in the area of working hours, associated working hours with health impairment and poor social well-being (Wirtz, & Nachreiner, 2010)

Job satisfaction and job-related affective well-being

The current study found significant strong positive associations between job satisfaction and job-related affective well-being. These results are in accordance with Warr, (2007), who found a significant relationship between job-related affect and job satisfaction. These findings suggest that as job satisfaction increases so does the job-related affective well-being. However, the increase in job satisfaction is depending on job related affective well-being, either positive affective state or negative affective state. Dimotakis et al., (2011) found an interpersonal interaction between positive affective state and job satisfaction. In addition, negative affective state was associated with stress (Uncu et al., (2007) and found to be a predictor of distress (Gareis & Barnett, 2002).

Further research; found that negative affectivity may affect job satisfaction (Skakon et al., (2010); Dimotakis et al., (2011). These findings suggest that if carers are having negative affect emotions about their job, their satisfaction may be affected. In the current study females were found to have ranked high on negative affect compared to man, this may affect their job satisfaction.

Limitations

This current study focused only on various nursing homes and home-based healthcare assistants in general, were as if both groups were compared separately the results could have varied. The groups were not represented well, more especially the 9 years + job tenure compared to Natarajan and Nagar, (2011) study. The current study also had few sample of

participant to represent those who worked less than 5 hours per day (e.g. the study only had 15 participants), this may have had an impact on the results as previous studies indicated that working fewer hours have a positive relationship with job satisfaction (Booth et al., 2013; Gash et al., 2012; Bardasi & Gornick, 2008). Other limitation to this study was that on the demographic questions the participants were only asked how many hours they worked per day instead of per week, previous research found that those working less hours per week were satisfied with their jobs than employees who worked full time (Booth and Ours, 2013).

Furthermore, snowball sampling was used in the current study, the study could have been much better with a larger sample (e.g. 300) which could have shown different outcome results.

Finally, job-related affective well-being scale used in the current study measures the persons emotional feelings about their jobs. Health care assistant support the elderly until end of life, thus their emotions may be affected more especially if they have a resident on palliative care. Therefore, JAWS can result in different responses depending on how carers are feeling.

Future recommendations

This study should be replicated with a larger sample and by focusing on comparing three groups of healthcare assistants separately (e.g. 1. residential nursing home; 2. long-term care institutions; 3. home-base care assistants). Furthermore, demographic questions should include how many hours they work per week, so as to get a clear picture and get broad results. The sample group should be well-represented, in job tenure and hours worked per day. Permission to be acquired to go to home-based organisations that provide care for the elderly, and long-term care hospitals including residential nursing homes to randomly select the sample size for further investigations on associations between working hours and job tenure to job satisfaction and job-related affective well-being. Different scale should be used

instead of JAWS, since it measures emotional feelings about the job, scales for example; Satisfaction with life scale can be considered to replace JAWS.

In spite of all the above mentioned limitations, the study contributes to the limited research regarding associations between working hours and job tenure to job satisfaction and job affectivity of health care assistants who care for the elderly.

Conclusion

This study has investigated the relationship of working hours, job tenure to job satisfaction and job-related affective well-being. Job tenure was found to be significantly associated with job satisfaction and job-related affective well-being. Working hours was not significantly related to job satisfaction and job-related affective well-being. However, previous research (Estryn-Béhar & Van der Heijden, 2012; Dembe et al., 2009, Hugh & Parkes, 2007; Kalleberg et al., 2000; McGovern et al., 2005) has found evidence for positive and negative relationship of working hours to job satisfaction and job-related affective well-being. The result of this study suggest that more research need to be done focusing on health care assistants working hours and job tenure, and how it relates to job satisfaction and job-related affective well-being.

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APPENDIX

Please tick one that applies to you.

Gender Male___ Female___

Length in organisation: up to 1yr___ 2-4yrs___ 5-8yrs___ 9+yrs ___

How many hours do you work per day? 1-5___ 6-8___ 9-12___

How many days do you work per week? 1-2___ 3-4___ 5-7___

What shift do you work? Day___ Evening ___ Night___

Please indicate the amount to which any part of your job (e.g., the work, coworkers, supervisor, clients, pay) has made you feel that emotion in the past 30 days.

Please check one response for each item that best indicates how often you've experienced each emotion at work over the past 30 days.	Never	Rarely	Sometimes	Quite often	Extremely often
1. My job made me feel angry.					
2. My job made me feel anxious.					
3. My job made me feel at ease.					
4. My job made me feel bored.					
5. My job made me feel calm.					
6. My job made me feel content.					
7. My job made me feel depressed.					
8. My job made me feel discouraged.					
9. My job made me feel disgusted.					
10. My job made me feel ecstatic.					
11. My job made me feel energetic.					
12. My job made me feel enthusiastic.					
13. My job made me feel excited.					
14. My job made me feel fatigued.					
15. My job made me feel frightened.					
16. My job made me feel furious.					
17. My job made me feel gloomy.					
18. My job made me feel inspired.					
19. My job made me feel relaxed.					
20. My job made me feel satisfied.					

	PLEASE CIRCLE THE ONE NUMBER FOR EACH QUESTION THAT COMES CLOSEST TO REFLECTING YOUR OPINION ABOUT IT.	Disagree very much Disagree moderately Disagree slightly Agree slightly Agree moderately Agree very much
1	I feel I am being paid a fair amount for the work I do.	1 2 3 4 5 6
2	There is really too little chance for promotion on my job.	1 2 3 4 5 6
3	My supervisor is quite competent in doing his/her job.	1 2 3 4 5 6
4	I am not satisfied with the benefits I receive.	1 2 3 4 5 6
5	When I do a good job, I receive the recognition for it that I should receive.	1 2 3 4 5 6
6	Many of our rules and procedures make doing a good job difficult.	1 2 3 4 5 6
7	I like the people I work with.	1 2 3 4 5 6
8	I sometimes feel my job is meaningless.	1 2 3 4 5 6
9	Communications seem good within this organization.	1 2 3 4 5 6
10	Raises are too few and far between.	1 2 3 4 5 6
11	Those who do well on the job stand a fair chance of being promoted.	1 2 3 4 5 6
12	My supervisor is unfair to me.	1 2 3 4 5 6
13	The benefits we receive are as good as most other organizations offer.	1 2 3 4 5 6
14	I do not feel that the work I do is appreciated.	1 2 3 4 5 6
15	My efforts to do a good job are seldom blocked by red tape.	1 2 3 4 5 6
16	I find I have to work harder at my job because of the incompetence of people I work with.	1 2 3 4 5 6
17	I like doing the things I do at work.	1 2 3 4 5 6
18	The goals of this organization are not clear to me.	1 2 3 4 5 6

	PLEASE CIRCLE THE ONE NUMBER FOR EACH QUESTION THAT COMES CLOSEST TO REFLECTING YOUR OPINION ABOUT IT. Copyright Paul E. Spector 1994, All rights reserved.	Disagree very much	Disagree moderately	Disagree slightly	Agree slightly	Agree moderately	Agree very much
19	I feel unappreciated by the organization when I think about what they pay me.	1	2	3	4	5	6
20	People get ahead as fast here as they do in other places.	1	2	3	4	5	6
21	My supervisor shows too little interest in the feelings of subordinates.	1	2	3	4	5	6
22	The benefit package we have is equitable.	1	2	3	4	5	6
23	There are few rewards for those who work here.	1	2	3	4	5	6
24	I have too much to do at work.	1	2	3	4	5	6
25	I enjoy my coworkers.	1	2	3	4	5	6
26	I often feel that I do not know what is going on with the organization.	1	2	3	4	5	6
27	I feel a sense of pride in doing my job.	1	2	3	4	5	6
28	I feel satisfied with my chances for salary increases.	1	2	3	4	5	6
29	There are benefits we do not have which we should have.	1	2	3	4	5	6
30	I like my supervisor.	1	2	3	4	5	6
31	I have too much paperwork.	1	2	3	4	5	6
32	I don't feel my efforts are rewarded the way they should be.	1	2	3	4	5	6
33	I am satisfied with my chances for promotion.	1	2	3	4	5	6
34	There is too much bickering and fighting at work.	1	2	3	4	5	6
35	My job is enjoyable.	1	2	3	4	5	6
36	Work assignments are not fully explained.	1	2	3	4	5	6

My name is Precious Hlatshwayo and I am conducting research in the Department of Psychology that explores Job-related affective well-being and Job satisfaction. This research is being conducted as part of my BA (Hons) Psychology and will be submitted for examination.

You are invited to take part in this study and participation involves completing and returning the attached anonymous survey. While the survey asks some questions that might cause some minor negative feelings, it has been used widely in research, and you may leave a question that you don't wish to answer.

Participation is completely voluntary and so you are not obliged to take part.

Participation is anonymous. Thus responses cannot be attributed to any one participant. For this reason, it will not be possible to withdraw from participation after the questionnaire has been collected.

The questionnaires will be securely stored and data from the questionnaires will be transferred from the paper record to electronic format and stored on a password protected computer.

It is important that you understand that by completing and submitting the questionnaire that you are consenting to participate in the study.

Should you require any further information about the research, please contact Precious Hlatshwayo at

Thank you for taking the time to complete this survey.

Please complete and return questionnaire to the envelope provided at collection point within one week.