

CHAPTER 5

DISCUSSION AND RECOMMENDATIONS

Based on the data analysis of the job satisfaction of the public health staff at the sub-district level in Krabi province, issues for discussion are presented as follows;

5.1 Demographic characteristics

Results from this study show that the public health staff recruited as the samples were female more than male in the ratio of 1.5: 1 (64%: 36%). The average age of the staff was 34.16 years and most of them (26.1%) were in the age range of 30-34 years. In addition, the majority of the staff members were married (70.7%). Their average duration of employment was 12.48 years and 23.9% of the staff worked for 10-14 years. Regarding the education, 52.2% completed an undergraduate program and more than half of the staff members (52.2%) were working as public health officers while 30.2% were heads of the health center.

5.2 Leadership of the district health officer

In the perception of the public health staff at the sub-district level, the leadership of the district health officer was rated at the high level (74.8%). If considering four aspects of the leadership; namely, charisma, individualized consideration, intellectual stimulation and inspirational, results indicate that all of these aspects were rated at the high level (77%, 77%, 68.5% and 61.1% respectively).

Honesty, being a good role model, sensibility, caution and creativity in problem-solving, treating colleagues with respect and fairness, self-confidence and timely decision-making were mentioned most often. On the other hand, in the perception of the public health staff, the following statements were rarely mentioned; they experimented new innovative solutions to tackle problems, they were capable of verbally convincing their colleagues to love and feel proud of their job which is very vital, their skills in speaking to provide moral support when the staff feel like giving up.

Based on these results, imply that the district health officers tended to conduct their behaviors in aspects of charisma and individualized consideration which could be easily manageable with their own self rather than the other two aspects; namely, intellectual stimulation and inspirational. For the latter two, they had to induce and encourage other public health staff to work to their best of knowledge and competencies and aim to accomplish expected results.

In conclusion, the district health officer and public health staff members inspired each other. They helped elevate each other's morality to the higher level and also they both recognized and valued benefits of the majority over their own interests.

5.3 Job satisfaction of the public health staff

The majority of the public health staff members were satisfied with their work (54.1%) and when looking in detail of each aspect, results show that supervision, work itself and coworkers were at the high level (61.7%, 66.7% and 49.5% respectively). Pay and promotions were rated at the moderate level (59.9% and 50.9%). The majority of the staff members were satisfied with their work. They

believed the job was relevant to their knowledge and competencies and it benefited the society and at the same time their job was honorable and respected by the society. Regarding the up-to-date knowledge of the district health officer, the following statements were rated at the moderate level; adequate incomes to afford regular expenses and have some left for savings. The public health staff members were satisfied with the supervision at the high level. There was just a small gap between the district health officer and the public health staff. Both usually empathized and understood each other and their relationships were very good. The district health officer understood what the public health staff members had in mind and had a very good level of knowledge required for their work. Pay and promotions were rated by the public health staff in the moderate level. This generally occurs to most people as they are often not satisfied with their payments and promotions. These are two factors which people need without any limit. In addition, the fact that their incomes were very low is because some of the public health staff first started working at C1 or C2 level and with such post levels came with low payments, very few opportunities for promotion and small increases of salary. All of these are due to economic crisis faced by the government and the fact that the number of government officers is too large and must be reduced.

Results of this study are consistent with previous ones conducted by Chuchaisaengrat (1996) which reveal that the job satisfaction of registered professional nurses was at the moderate level. Vroom concluded that if people were inspired and satisfied with their work and they developed their passions at work, they would perform their job efficiently. Regarding the work itself, the results of this study share some similarities with those conducted by Muangkwaek (1999) and Navikan

(1995). These studies recommend executives encourage and make their operational staff feel they are useful and important to the organization.

5.4 Associations between the demographic characteristics of the public health staff and their job satisfaction:

Results indicate that age and duration of employment had the correlation coefficient (r) equaling to -0.066 and 0.88 respectively and sex, marital status, job post and education were related to the job satisfaction (chi square = 2.008 , 1.408 , 2.137 and 1.888). So, it can be said that the demographic characteristics of the public health staff were not significantly related to their job satisfaction at the level of 0.05 and it is against the hypothesis of this research.

In addition, results of this study regarding age and duration of employment were not different from the study of Suvannit (1991) which shows that age and duration of employment were not related to the job satisfaction of the public health staff at the sub-district level in Mukdaharn province. Marital status also is not related to the job satisfaction of the public health staff which is consistent with other studies conducted by Suvannit (1991), Kwanchuen (1992) and Muangkwaek (1999).

Regarding the education, results of this study are similar to Kwangchuen (1995) which shows no correlation between education and the job satisfaction of professional nurses.

5.5 Associations between the leadership of the district health officer in the perception of the public health staff and the job satisfaction of the staff:

The result of the correlation coefficient was equal to 0.531 and p-value < 0.001 at the moderate level. If considering each aspect of the leadership, individual, intellectual stimulation, inspiration and charisma had a moderate degree of correlation coefficient ($r = 0.505, 0.505, 0.4888$ and 0.448 respectively) and p-value < 0.001. This is consistent with a study by Ruengphukdee (1991) that the leadership of staff at the patient ward is positively related to the job satisfaction of the professional nurse. It can be implied that the public health staff members paid more attention to the transformational leadership and this is in line with the principle of administration and management. The public health staff members were confident with their operational capacity and would like to apply their knowledge and competencies to solve problems at work. They were aware of problems and obstacles at work and found them challenging. They tried very hard to improve their work and solve the problems rather than focusing on building the charisma or inspiring other public health staff like the district health officer. The public health staff members tended to be more focused in their work and responsibilities and were eager to perform the work rather than paying attention on whether the district health officer would inspire or intellectually stimulate them or making acquaintances with them. The district health officer should build autonomous authorities at work for the public health staff to perform their work.

5.6 Recommendations for the future research

1. Similar studies should be conducted at the provincial and district levels to investigate the leadership of the district health officer and the job satisfaction of the public health staff and the comparison between these two levels should be made.

2. District health officers and operational public health officers should be interviewed. So, their perspectives will be included and the research discussion will, thus, cover all aspects.

3. In-depth studies should be implemented to explore problems at the health center in providing services to people and measure their satisfaction toward the service to improve the services.

4. Religion should be investigated if and how it has any effect on job satisfaction.

5. Studies should be conducted to make comparisons between staff who have worked for a long time and those who have just started working.

6. Studies should be made to find out if single and married people would have similar or different job satisfaction.

7. Job satisfaction and work outcomes should be explored.