



Research Paper

Intentions To Leave And Associated Factors Among Health Professionals In Health Centers Of Yeka Sub City Public Health Centers, Addis Ababa, Ethiopia

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ABSTRACT

Background: Health worker shortages endanger healthcare facilities' continued operation and degrade the standard of nearby medical care where effective interventions are covered. The organization needs to be aware of the primary causes of the employees' intention to quit if it hopes to lessen the magnitude of that intention. In addition to job satisfaction, other factors, such as work pressure, the workplace environment, and organizational management, can have an impact on a health worker's decision to leave a public health center in either a positive or negative way. These factors must be seriously taken into account if management wants to keep health workers in their organization.[1]

Objective: To assess the magnitude of intentions to leave and associated factors among health care professionals in Yeka sub city health centers.

Method: Institutional cross-sectional study was conducted from July, 2021 up to, August, 2021. Data was collected via 5% pretested self-administered questionnaires in 17/20 health center. Data was cleaned and entered in to Epi-info version 7.1 and exported to SPSS version 24 for further Analysis. And Binary logistic regression was employed. In bi-variable analysis those variables with P-value less than 0.2 considered as a candidate variable for multivariable analysis.

Results: The result show that 61% health professionals have intention to leave, this is a high percentage with varies factors involvement in decision making decision making 24(27.3%), All decision made by only head managers account 172(63.5%) and I should be involved in decision making regarding only my profession 170(62.7) ,216(79.7%) of unsatisfied with Payment and rewards ,working environment 216(79.4%) were unsatisfied ,180 (66.4%) participants were a long distance between the work and living area, 198(73.1%) had not good Social relation with their co-workers, in addition only some of the variables are analyzed by multivariate logistic regression shows statistically significant variables like male 3.98(AOR: 3.98 95 % CI: 2.067- 7.692), laboratory technicians 5.14 (AOR: 5.141 95 % CI: 1.417-18.652), training opportunity 1.935(AOR: 1.935 1.018-3.678) and monthly salary >9001 4.3(AOR: 4.30 95 % CI:1.132- 19.349)) times intention to leave.

Conclusion: There is a high magnitude of intention to leave in the study area with associated factors like male 3.98(AOR: 3.98 95 % CI: 2.067-7.692), laboratory technicians 5.14 (AOR: 5.141 95 % CI: 1.417-18.652), training opportunity 1.935(AOR: 1.935 1.018-3.678) and monthly salary >9001 4.3(AOR: 4.30 95 % CI: 1.132-19.349)) times intention to leave.

Recommendation: All the Stakeholders that are involved in the health system need to work on strengthening human resources for health management through implementing different retention strategies like BPR, transfer policy and Promotional Policy regarding health centers.

Key word: Intention to leave,turn over, job satisfaction, Health care professionals, Health centers. Health care providers.

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I. Introduction

The possibility that a person will quit their current work is referred to as turnover intention of employees. Every organization, regardless of its location, size, or style of business, has always provided a key worry about employees' turnover intention. [2]

Promoting patient-centered, courteous, and compassionate care by all health professionals is one of the key goals of human resources management. This calls for a variety of interventions, starting with identifying students who have the drive and motivation to pursue careers in the health sciences, actively encouraging health science students to consider what it means to be a health professional, and motivating currently employed health professionals to show dedication to their communities, their patients, and their country. [3]

The education, distribution, retention, and success of the workforce will undoubtedly provide a number of difficulties for all nations, regardless of their social development position. Health priorities like eliminating AIDS, tuberculosis, and malaria; achieving drastic reductions in maternal mortality; enhancing access to essential surgical services; preventing preventable deaths of newborns and children under the age of five; lowering premature mortality from non-communicable diseases; promoting mental health; addressing chronic diseases; and guaranteeing access to essential surgical services would not be achieved until work on health workforce capacity is completed. [7]

In Sub-Saharan Africa, the density of health workers increased from 0.64 per 1,000 people in 2003–2004 to 0.84 per 1,000 people in 2008–2009 to 1.63 per 1,000 people in 2015–2016. However, when the density is broken down by profession type, it is lower at 0.74 per 1,000 people for doctors, nurses, and midwives and 0.04 for medical laboratory workers (Miriam Schneidman et al., 2014), which is significantly lower than the WHO benchmark of Low training output and outmigration are the causes of the shortfall. [3]

Additional inequalities brought about by labor mobility may necessitate greater workforce management, pay equity considerations, and workforce planning. Since many health workers in developing nations are underpaid, unmotivated, and extremely unsatisfied, developing countries adopt other strategies in addition to financial incentives, such as housing, infrastructure, and possibilities for job rotation. An important human resources issue that needs to be properly examined and controlled is the movement of health professionals.[8]

II. Literature review

Magnitude of Intention to Leave and Association Factors

A cross-sectional analytic tool with both quantitative and qualitative aspects Intention to Leave and Associated Factors among Health Professionals in Jimma Zone Public Health Centers, Southwest Ethiopia, by Kalifa and his team found that 63.7% of health professionals had this intention, with statistically significant factors like career satisfaction, working environment, organizational management, and work burden. [1]

A cross-sectional study with a focus on facilities that was carried out in the Gambella Region. The study's objective was to determine the extent and factors that would cause medical staff in the Gambella Region to consider leaving public health facilities. According to the report, 48.4% of respondents plan to quit within a year. The final predictors of desire to resign were educational level, job quality, career happiness, and perceived involvement in decision-making. [10]

According to a study carried out in the Oromia region of Ethiopia to ascertain the likelihood of turnover and associated factors among medical professionals working at Central Oromia Hospitals. The approach employed was quantitative cross-sectional analysis. The results showed that 75.5% of medical staff in central Oromia intended to quit the hospital, with career concerns, working conditions, and organizational considerations statistically significant determinants in intention to leave. [11]

According to a research by Girma and his colleagues, 70.7% of respondents planned to take a leave of absence. High affective commitment to their medical center (95% confidence interval; adjusted odds ratio [AOR]: 0.3) Poor continuation commitment (AOR: 9.6; CI: 2.4-38.0), low satisfaction with compensation (AOR: 15.3; CI: 6.0-38.9), low contentment with supervision (AOR: 4.1; CI: 1.5-11.1), and low autonomy (AOR: 3.3; CI: 1.1-10.0) were discovered to be significant predictors of turnover intention. [12]

According to the study almost half 50.2% of nurses had leave intention in the next year and the associated factor was degree holders nurse showed 2 times intention than diploma holder. Working few years showed 0.9% and limited professional development showed 1.3 times at 95% confidence interval intention to leave [13]

A thesis performed in Addis Ababa nurses who are working in hospital emergency department showed that 77.5% of the nurses had the intention to leave, with significant factors such as educational status, monthly income, and professional autonomy leading to the nurses' intent to leave. [14]

A study was conducted in Yirgalem and Hawassa referral hospitals by using health institutional based cross sectional survey. the study aim was assessing Health professional's intention for turnover and determinant

factor the result show that about 83.7% had intention to leave because of qualification and income categories have significant relation to intention to leave [15]

A study found that 52% of health extension workers planned to leave their jobs. Service term >10 years (34.4%), level IV educational status (30.5%), married health extension workers (61.7%), and age category 26-30 years (40.6%) had the highest turnover intentions. Motivation (=2.801; 95% CI 5.097, to 0.505), heavy workload (=3.35; 95% CI 6.038, to 0.661), and career structure (=3.452; 95% CI 6.267, to 0.638) were all statistically significant variables. Conclusion: A significant predictor of turnover intention was heavy workload, lack of enthusiasm, and a constrained career structure. [16]

Only 32.7% of pharmacy professionals in Ethiopia who participated in a survey by Ayele and his colleagues reported being satisfied with their jobs. Working more than 40 hours per week (AOR = 6.2, 95% CI, 2.4-16), being between the ages of 20 and 25 compared to older than 30 years (AOR = 3.5, 95% CI; 1.1-9.7), having a bachelor's degree compared to only having a diploma (AOR = 4.2, 95% CI; 1.8-10.00), and working in dispensing units (AOR = 2.4, 95% CI; 1.1-5.5). [17]

65.5% of experts had intentions to leave their hospitals, according to a survey on medical laboratory professionals by Dellie and his colleagues. key factors There was a significant correlation between dissatisfaction with the availability of educational opportunities (AOR: 3.59, 95% CI 1.61-7.99), poor pay and benefits (AOR: 3.89, 95% CI 1.53-9.89), lack of recognition (AOR: 2.69, 95% CI 1.35-5.38), poor working environments (AOR: 2.77, 95% CI 1.45-3.30), high workload (AOR: 1.94, 95% CI 1.04-3.63) [18]

Study results on nurses working at Amhara Regional State referral hospitals show that 39.8% had reported desire to stay, with characteristics including age 40 to 49 (AOR [95% CI] 4.5 [1.6-12.8]), being married (AOR [95% CI] 2.0 [1.0-3.8]), and holding a bachelor's degree in nursing (AOR [95% CI] 2.2 [1.2-4.1]), contentment with autonomy and professional opportunities (AOR [95% CI] 2.6 [1.2-5.9]), scheduling (AOR [95% CI] 3.4 [1.6-7.5]), salary and benefits (AOR [95% CI] 8.8 [4.5-17.1]), strong continuation commitment (AOR [95% CI] 2.4 [1.3-4.8]), and high normative commitment (AOR [95% CI] The major predictors of intent to remain in the nursing profession were 3.7 [1.9-7.2]. [19]

59.4% of health workers planned to quit, according to research by Gesesew and his colleagues. Male gender (AOR =1.6, 95%CI: 1.001-2.5), overall satisfaction (AOR=0.5, 95%CI: 0.2-0.8), institutional satisfaction below the mean (AOR =1.7, 95%CI: 1.06-2.7), and organizational satisfaction below mean (AOR=1.8, 95%CI: 1.08-2.8) were independent predictors of intention to leave. [20]

Socio demographic characteristics of study participant

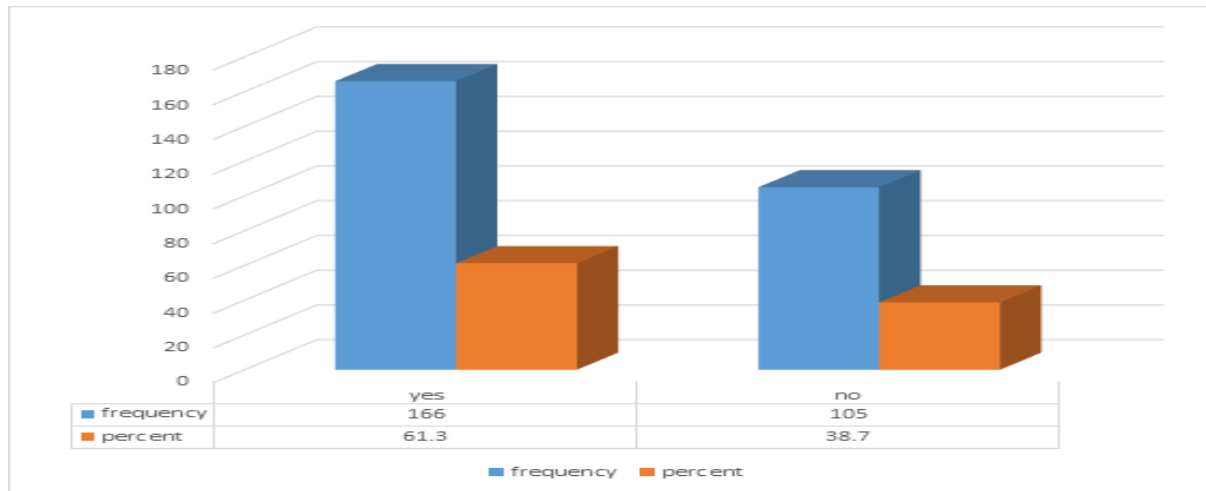
III. Result

Variable	Category	Frequency	Percentage
Sex	Male	123	45.4
	Female	148	54.6
	Total	271	100.0
Age	20-30 year	183	67.5
	31-40 year	78	28.8
	41-50 year	10	3.7
	Total	271	100.0
Marital status	Married	146	53.9
	Unmarried	109	40.2
	Divorced	16	5.9
	Total	271	100.0
Monthly income	3000-5000	61	22.5
	5001-7000	77	28.4
	7001-9000	92	33.9
	>9001	41	15.1
	Total	271	100.0
Profession	Health officer	57	21
	Nurse	79	29.2
	Midwife	44	16.2
	Laboratory Technician	63	23.2
	Pharmacist	18	6.6
	Health extension	4	1.5
	Others	6	2.2
	Total	271	100
	Level of education	Diploma	68
Degree		181	66.8
Masters		22	8.1
Total		271	100.0

Current work experience	1-5	214	79.0
	6-10	50	18.5
	>11	6	2.2
	Total	271	100.0

Descriptive analysis of Intention to leave

This study shows that the overall intention to leave among the health professionals majority of participants in the study area shows 166 (61%). This indicates there is a high level of intention to leave the health centers.



Descriptive Analysis of Factors

Intention to leave affecting by different factors such as Training opportunities unsatisfied 136(50.2%), majority of participants 216(79.7%) of unsatisfied with Payment and rewards, Leadership style good 160(59.0%) and bad 111(41.0%), 198(73.1%) had not good Social relation with their co-workers, Job satisfaction satisfied 139(51.3%), Opportunity to develop 162(59.8%), work load 137 (50.6%), working environment 216(79.4%) of participants unsatisfied, high number of study participants 180 (66.4%) were a long distance between the health center and their families or home, I am involved in decision making accounts 24(27.3%) ,All decision made by only head managers account 172(63.5%), I should be involved in decision making regarding only my profession 170(62.7).

Variables	Frequency	Percent
Training opportunities		
Satisfied	135	49.8
Unsatisfied	136	50.2
Pay and reward		
Satisfied	55	20.3
Unsatisfied	216	79.7
Leadership style		
Good	160	59.0
Bad	111	41.0
Social co-worker's relation		
Good	73	26.9
Bad	198	73.1
Job satisfaction		
Satisfied	139	51.3
Unsatisfied	132	48.7
Opportunity to develop		
Satisfied	109	40.2
Unsatisfied	162	59.8
Work load		
High	137	50.6
Low	134	49.4
Work environment		
Satisfied	55	20.2
Unsatisfied	216	79.4

Work place distance from families live		
Yes	180	66.4
No	91	33.6
I am involved in decision making		
Yes	74	23.3
No	197	72.7
All decision made by only head manager		
Yes	170	63.5
No	101	36.5
I should involve in decision making regarding only my profession		
Yes		
No	170	62.7
	101	37.3

Logistic regression analysis of factors associated with intention to leave

The study shows Male health professionals were 3.98 (AOR; 95 % CI: 3.98 (2.067-7.692)) times intention to leave compare with female participants, based on their profession laboratory technicians shows 5.14 (AOR: 95 % CI:5.141 (1.417-18.652)) times intention to leave from others professions, Health professionals who were Nurse (AOR: 95 % CI:0.363(0.147-0.900)) , Midwife (AOR: 95 % CI:0.125(0.043-0.361)), Pharmacist(AOR: 95 % CI: 0.136 (0.036-.511)) had an average of 0.20 times decrease intention to leave than the public health officers. those who have monthly income >9000 were 4.302 (AOR: 95 % CI:4.302 (1.132 – 16.349)) ETB times more likely to have intention, unsatisfied participants on training opportunity in the studied health centers 1.935(AOR: 95 % CI:1.935 (1.018-3.678)) timesmore likely to haveintention to leave than satisfied

Variable	Categories	Intention to leave		COR (95%CI)	AOR (95%CI)	P value
		Yes	no			
Sex	Male	97	26	4.271(2.489-7.330) *	3.987(2.067-7.692) **	0.000*
	Female	69	79			
Age	20-30	116	67	.674 (.394-1.153) *	.583(.269-1.264)	.171
	31-40	42	36			
	41-50	8	2			
	>51	0	0			
Profession	Public health	43	14	1	1	0.029*
	Nurse	38	41			
	Midwife	14	30			
	Laboratory technician	59	4			
	Pharmacist	8	10			
Health extension	Other's	4	2	.152(.063-.365) *	.125(.043-.361) **	0.000*
	Health extension	0	4			
Monthly income	3000-5000	33	28	.651(.107-3.945)	.310(.031-3.072)	0.317
	5001-7000	42	35			
	7001-9000	58	34			
	>9001	33	8			
Social relation	Good	36	37	1.018(.519-1.999)	1.359(.566-3.262)	0.492
	Bad	130	68			
Training opportunities	Satisfied	74	92	1.447(.750-2.795)	.760(.293-1.973)	0.573
	unsatisfied	61	44			
				3.5(1.392- 8.801) *	4.302(1.132 – 16.349) **	0.032*
				1.965(1.140-3.387) *	1.784(.885-3.596)	0.105
				1.724(1.052-2.824) *	1.935(1.018-3.678) **	0,044*

*P-value less than 0.25

**p-value less than 0.05]

IV. Discussion

This study is in line with other studies conducted in Ethiopia, studies indicate that similarity with this studies North Shewa zone 61.3 % [22], Ethiopian federal police referral hospital 65.1% [21] ,in Jimma Zone health institutions59.4% [20], Amhara region referral hospital 60.2% [19], Amhara National Regional State public hospitals 65.5% [18] and Jimma Zone Public Health Centers, Southwest Ethiopia 63.7% [1]. health professionals had intention to leave.

Similar Studies and results in other countries like Senegal mid wives 58.9%, Ghana 69%, Saudi Arabia pharmacist 61.9% and 60.9% in Jordan nurses. [24], [25], [30], [31] respectively.

Other studies reveal showed higher intention like in Ethiopia Hawassa and Yirgalem hospital 83.7% [15],Nurses who are working in emergency department 77.5% [14] , 70.7% [12] ,77.5% [11].

However Low results showed in the studies in Gambella 48.4%[10], health extension workers 52% [16], also other countries in south Africa 41.4%, Tanzania 18.8% and Malawi 26.5%, [29] and studies in Korea 30.5% [26] ,China 42.3% [27], Iran 55.2% [28] , showed lowest intention to leave. Additionally, other multinational study on midwives showed 31.5%, 41.4%, 34.7%, 49.1%, 49.5%, 36.5%, 34.8% in Czech Republic, Italy, Portugal, Singapore, Slovakia, south Korea respectively. [32]and study in Canada Ontario registered nurses 45.5% intention [33] . this low result might be the sampling method, human resource

management practice variation and who had working in developed countries have better economic and financial support.

This study reveals the associated factors for intention to leave are male's health professionals are 3.98 times more intention to leave than the females and this supported by Gesesew et al 1.6 times [20], Aster F et al 1.49 times [22], by Ali jadoo 4.2 times[28] and Jordan nurses by Momina MA 1.47 [31] times had intent. This might be the nature and the family's responsibility lead to move for better life.

This study also reveal medical laboratory professionals are associated 5.141 times than other health professionals this result supported by studies at north east Ethiopia by Abera et al 9.15 [23] but study in North Showa zone in Ethiopia by Aster et al showed medical doctors 0.318 times intention [22]. This high level intention might be laboratory professionals usually not participate in the decision making in the institutes, the uncomfortable working area and limitation of resources.

This study reveal the one factor associated to intention to leave of health professionals was dissatisfaction with training providing process and criteria 1.93 times. this result showed similarity with other studies in Ethiopia Axum region nurses showed higher intent about 2.55 times more likely intention of leave. [34] This variation could be more frequent training program in our study area because it is urban areas better opportunities than the rural area and the Axum study performed only nurse's profession

Recommendation

- All the Stakeholders that are involved in the health system need to work on strengthening human resources for health management through implementing different retention strategies like BPR, transfer policy and Promotional Policy regarding health centers.
- Yeka sub city department and health offices should develop strategies by create comfortable working environment, provide transportation for distance workers, strength the co-worker's relation by creating different events and increases the payment and rewards of the health care workers and increasing involvement of health care providers in decision making process through involving health care providers in the planning, monitoring and evaluation process
- Dissatisfaction on Training opportunity also the one factor so it is better to follow the proper method of training criteria to solve the problem
- Specially, it is to be better the health system develops post exit interview for leaving employees to identify the cause and improve it for the future.
- Future researches are recommended to exhaustively address all potential factors associated with intent to leave on health professionals.

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