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JOB SATISFACTION AND PSYCHOLOGICAL HEALTH OF BANKERS IN CALABAR, NIGERIA

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ABSTRACT

Background: Satisfied employees tend to be healthier and more productive. There is no known study on the overall job satisfaction and psychological health of bank employees in Nigeria.

Objective: To assess the level of job satisfaction and its relationship to psychological health among bank employees in a southern city of Nigeria.

Design: A cross-sectional descriptive survey.

Setting: Commercial Banks in Calabar, Nigeria.

Subjects: Professional employees engaged in core Banking activities.

Results: Response rate was 75%. About half (52.6%) reported overall job satisfaction. The most commonly mentioned reason for job dissatisfaction was lack of promotion. About one third of respondents were at increased likelihood of having a psychological disorder. There was a statistically significant negative correlation between job satisfaction and GHQ scores. Satisfied respondents were least likely to have psychological disorder.

Conclusion: About half of the bank employees were satisfied with their jobs. A negative correlation was found between job satisfaction and psychological health of these workers. Causes of job dissatisfaction should be addressed by employers of labour to improve job satisfaction, psychological health and productivity.

INTRODUCTION

Satisfied employees tend to be more productive, creative and committed to their employers(1,2). Unfortunately, current trends in employment conditions may be eroding levels of job satisfaction among employees. As banks struggle to meet tight deadlines and targets, employees are regularly being required to work well beyond their contracted hours; bank employees in Nigeria, on the average, work for 11 hours daily and may be required to work for six days in a week(3). This could adversely affect the physical and mental health of employees which could in turn affect productivity.

The global economic crisis has in addition, compounded the problem. Attendant strategies adopted by some banks (e.g. mergers and acquisitions) have been reported to impact negatively on employees' health and job satisfaction(4). Worse still, many job losses have been recorded.

Job satisfaction vary widely among employees of the occupations, with highest levels (usually > 80%) being reported among finance sector employees in

developed countries(5). About 50% of bank employees in Punjab, Pakistan were reported to have overall job satisfaction compared to 81% of bank employees working with e-channels in Tamil, Nadu, India(6,7). To our knowledge, no study has assessed self-reported overall job satisfaction among bank employees in Nigeria.

Employees self-reported job satisfaction has the strongest link to their wellbeing(8). Furthermore, adverse health conditions and stress among employees could negatively affect their job satisfaction and job performance (9,10,11). Using GHQ 30, Yussuf reported that 18% of bank employees had psychological disorders(3).

Bank employees are directly vulnerable to global economic vicissitudes. It is prudent to suspect an impact of the recent economic meltdown on job satisfaction and psychological health of bank employees. We therefore, aimed to assess the self-reported overall job satisfaction and psychological health among bank employees in Calabar, southern Nigeria.

MATERIALS AND METHODS

A descriptive cross-sectional study was conducted among professional bank employees in Calabar between February-March, 2011. Ten commercial banks were randomly selected by simple ballot and all professional bank employees engaged in core banking activities were included in the survey.

A pretested self-administered semi-structured questionnaire was used to collect data. The questionnaire contained three sections: 1) respondents' socio-demographic characteristics and work history; 2) respondents' job satisfaction; 3) psychological health of respondents.

Overall job satisfaction was assessed using a single-item 5-point Likert scale (1-very dissatisfied, 2-dissatisfied, 3-undecided, 4-satisfied, 5-very satisfied) of job satisfaction. Psychological health was assessed using a standard instrument, the GHQ-28. The GHQ-28 is a self-administered screening instrument designed to detect current diagnosable psychological disorders in community and non-psychiatric settings(12). The GHQ-28 has been validated in Nigeria with high sensitivity and specificity(13).

Questionnaires were distributed by the investigator. Only employees who had worked for at least six months in the banks were included. The respondents were informed about the purpose of the study and were also assured of strict confidentiality. Verbal informed consent was obtained from each respondent because of the sensitive nature of the topic and to further safeguard confidentiality. The study was approved by the Joint Research Ethics Committee of the University of Calabar and the University of Calabar Teaching Hospital.

Both the GHQ (0,0,1,1) and the Likert (0,1,2,3) scoring systems were adopted in this study(12,14). The cut-off for psychological disorder was 4/5 and 23/24 on GHQ and Likert scoring respectively. Correlation between job satisfaction and psychological health was calculated using the Pearson's correlation coefficient (r).

RESULTS

A total of 202 questionnaires were distributed and 152 (75.4%) were returned. Mean age of respondents was 30.5 ± 3.9 years. The majority of respondents (55.5%) were between 30-39 years old, 54.4% were male, while 53.6% had worked for 3-5 years in their current employment (Table 1). More than a third (41.3%) of respondents had been promoted at least once. Majority (54.6%) of respondents work in the operations unit, 34.9% work in the marketing unit, while 10.5% work in the administration.

Table 1

Socio-demographic characteristics and work history of respondents

Variable	Frequency (N= 152, 100%)
Age (yrs)	
20 – 29	64 (42.0)
30 – 39	84 (55.5)
≥ 40	4 (2.5)
Sex	
Male	83 (54.4)
Female	69 (45.6)
Religion	
Christian	149 (97.9)
Islam	3 (2.1)
Others	0 (0.0)
Marital Status	
Single	71 (46.7)
Married living with spouse	71 (46.7)
Married not living with spouse	10 (6.6)
Happy with marriage	
Yes	148 (97.4)
No	4 (2.6)
No of children	
1-2	40 (26.3)
3-4	14 (9.2)
>4	0 (0.0)
No child	98 (64.5)
Institutions worked	
1	61 (40.0)
2 – 3 places	77 (50.7)
4 or more places	14 (9.3)
Length of service (Total) (years)	
≤ 2	26 (16.9)
3 – 5	72 (47.1)
≥ 6	54 (36.0)
Length of service (present work, yrs)	
≤ 2	46 (30.0)
3 – 5	81 (53.6)
≥ 6	25 (16.5)
Ever been promoted	
Yes	63 (41.3)
No	89 (58.7)

About half (52.6%) of respondents reported overall job satisfaction (Table 2). Reasons for satisfaction among respondents: "better than nothing" (22.5%), career prospect/opportunity for training (17.5%), good pay (15.0%), fringe benefit (10.0%), enjoy work (8.8%), good coworkers (8.8%), good work hours (5.0%), good supervisor (1.3%), good workload (1.3%), and good work environment (1.3%). Among dissatisfied respondents, reasons given for overall job dissatisfaction included: lack of promotion (47.2%), poor pay (38.9%), long work hours (25.0%), lack of motivation (22.5%), work stressful (13.9%), and job insecurity (11.1%).

Table 2*Overall job satisfaction (single-item)*

Level of satisfaction	Frequency (N= 152, 100%)
Very Satisfied	12 (8.1)
Satisfied	64 (44.5)
Undecided	36 (23.7)
Dissatisfied	32 (20.9)
Very Dissatisfied	4 (2.7)

Respondents' meanscore on the GHQ instrument was 3.93 ± 4.80 (GHQ, maximum total score of 28) and 44.04 ± 12.09 (Likert, maximum total score of 94). About a third of respondents (GHQ cut-off – 35.5%; Likert cut-off – 28.9%) were probable psychiatric cases. Sources of stress beyond work were; lack of time for other aspects of life (44.4%), family pressure/demands (22.2%), pregnancy, nursing, house help-related problems (16.7%), other social problems (11.1%) and

personal engagements (5.6%). In the last 12 months preceding survey, 21.7% of respondents had gone on sick leave for between 1-28 days, 2.6% had gone on sick leave for a total > 28 days. Furthermore, 44.7% had attended work with illness for a total of 1-28 days while 5.3% had attended work with illness for a total of > 28 days.

There was a weak and statistically significant negative correlation (GHQ $r = -0.258$, $p < 0.001$; Likert $r = -0.279$, $p = 0.001$) between overall job satisfaction score and total score on the GHQ instrument. The higher the score on the single-item job satisfaction (i.e. higher job satisfaction), the lower the score on the GHQ-28 instrument (i.e. psychologically healthier). Similarly, there was a statistically significant association between job satisfaction and probable psychiatric caseness. Satisfied respondents were least likely to have psychological disorders (GHQ $\chi^2 = 19.17$, $p < 0.001$; Likert $\chi^2 = 13.94$, $p = 0.001$) (Table 3 and 4).

Table 3*Job satisfaction versus psychiatric caseness (GHQ) among bankers*

Job satisfaction	Psychiatric caseness		Total
	Yes (54)	No (98)	
Satisfied	16 (20.0)	64 (80.0)	80 (100.0)
Undecided	19 (51.5)	17 (48.5)	36 (100.0)
Dissatisfied	19 (51.5)	17 (48.5)	36 (100.0)

$\chi^2 = 19.169$, $p < 0.001$

Table 4*Job satisfaction versus psychiatric caseness (Likert) among bankers*

Job satisfaction	Psychiatric caseness		Total
	Yes (44)	No (108)	
Satisfied	13 (16.3)	67 (83.8)	80 (100.0)
Undecided	15 (42.4)	21 (57.6)	36 (100.0)
Dissatisfied	16 (44.4)	20 (55.6)	36 (100.0)

$\chi^2 = 13.938$, $p = 0.001$

DISCUSSION

Response rate obtained in our study was the same to that reported in a similar study among bankers in Ilorin, Nigeria(3). Majority of respondents were single and younger than 40 years. This may be due to the bank policy of employing young and fresh graduates. Bankers appeared younger in our study compared to the study conducted by Yussuf probably due to inclusion of other ad-hoc workers in the study by Yussuf. Male to female ratio was close to 1:1 in our study. This is comparable to what was reported by a another study among bankers in Nigeria(15).

Studies have shown that women have lower expectation at their work and are thus generally more satisfied(16,17). This factor probably had little or no influence on the results of our study because both male and female were equally represented in the study.

More than 50% of bankers in this study expressed overall job satisfaction. Our finding is similar to what Khalid and Irshad found among bank employees in Punjab, Pakistan; 49.3% reported overall job satisfaction.6 Jegan and Gnanadhas however reported that 81% of bank employees working with e-channel in Tamil Nadu, India, expressed overall satisfaction with their job(7). The differences may be related to the type of work because our study and the Pakistan study were conducted among all bankers while the India study was done only among bankers working with e-channels. Job satisfaction may also be generally lower in developing countries as nationally representative surveys in European region have shown a higher job satisfaction, usually greater than 80%(5).

The most prominent reason for job satisfaction was the fact that having something to do was better than having nothing at all. Respondents may thus, have reported their satisfaction in relative terms especially in an environment where there is massive unemployment like Nigeria(18) Respondents' reporting may also not be unconnected with the rating of their life satisfaction, as these two have been documented to be highly correlated(19). The most commonly mentioned reason for job dissatisfaction was lack of promotion. Almost half of respondents who were dissatisfied with their work stated that they had worked in the same position for many years without promotion. The promotion policy of banks may have other considerations (e.g. cost implications) than performance. This may adversely affect employees satisfaction.

About a third of respondents had probable psychological disorders. Our finding was higher than what was reported by Yussuf, among bankers in Ilorin but lower than what was reported by Silva and Barreto among bankers in Brazil. Yussuf reported 18% (3) while Silva and Barreto reported 43%(20).

Psychological disorders may have increased among bankers in Nigeria over the last decade, or globally, as also reported by Silva and Barreto(20). Differences between these studies may also be partly explained by the GHQ versions used; Yussuf used GHQ-30 while Silva and Barreto used GHQ-12 compared to GHQ-28 used in our study(3,20).

Our study also demonstrated a weak negative correlation between overall job satisfaction scores and GHQ scores. Thus the more satisfied bankers were, the better their psychological health was likely to be. Faragher and colleagues, in a meta-analysis, reported that correlation between job satisfaction and psychological health rarely exceeded 0.3 (21). Our study also supported this finding. Several other studies have also shown that the more satisfied workers were, the healthier they were likely to be(22-25). Lower job satisfaction has also been associated with increase in sickness absence among public service employees in Denmark(26).

In conclusion, satisfied bank employees reported least psychiatric caseness. Causes of job dissatisfaction among bank employees should be addressed by employers to improve the level of job satisfaction and psychological wellbeing. Man-hour loss to illness would reduce and ultimately results in productivity gains.

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