



Assessing Job Satisfaction Among Health Workers in Catholic Hospitals in the Western Region of Ghana: A Case Study of Holy Child Catholic Hospital and Father Thomas Alan Rooney Memorial Hospital, Asankrangwa

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Abstract

Background: Job satisfaction is a critical determinant of health worker retention, performance, and patient care quality, particularly in mission-based institutions operating under resource constraints. This study assessed job satisfaction among healthcare workers in two Catholic hospitals in the Western Region of Ghana—Holy Child Catholic Hospital in Fijai and Father Thomas Alan Rooney Memorial Hospital in Asankrangwa.

Methods: A descriptive cross-sectional design was adopted, involving 234 health workers selected through convenience sampling. Data were collected using a structured self-administered questionnaire and analyzed using descriptive statistics (means and standard deviations) and inferential tests (independent samples t-test and one-way ANOVA). Job satisfaction was assessed using a 4-point Likert scale, with mean scores above 2.50 indicating satisfaction.

Results: Respondents reported moderate to high job satisfaction across all indicators, with the highest

satisfaction related to collegial relationships ($M = 2.89$), supervisory support ($M = 2.82$), and sense of purpose ($M = 2.80$). The independent t-test showed no significant difference in satisfaction by gender ($p = 0.31$). However, one-way ANOVA revealed a statistically significant difference by educational level ($F = 4.07$, $p = 0.008$), with more educated staff expressing higher satisfaction.

Conclusion: Healthcare workers in Catholic hospitals are generally satisfied with their work, particularly in relational and intrinsic aspects. Educational level emerged as a significant factor influencing job satisfaction. These findings underscore the need for targeted human resource strategies that promote inclusive development opportunities and leverage non-financial motivators to sustain a committed workforce in faith-based health institutions.

Keywords: Job satisfaction, Catholic hospitals, healthcare workers, Ghana, education, faith-based institutions, human resources



Introduction

Job satisfaction is a critical component in healthcare delivery, influencing employee retention, quality of care, and overall organizational performance. In mission-based institutions such as Catholic hospitals, where service delivery is often influenced by values of compassion, commitment, and stewardship, understanding the factors that drive staff satisfaction becomes vital. These institutions often operate under financial constraints and are challenged to sustain a stable and motivated workforce without the luxury of competitive remuneration.

Globally, studies have linked job satisfaction among healthcare workers to factors such as quality of leadership, access to professional development, team dynamics, workload, reward systems, and work–life balance (Lu et al., 2019; Coomber & Barriball, 2007). In the African context, especially in Ghana, existing literature points to job satisfaction being shaped not just by salary, but by a mix of personal, institutional, and systemic factors (Dapaah & Appiah, 2019). These include recognition, sense of purpose, opportunities for training, and supportive supervision.

Despite this understanding, there is limited empirical evidence on job satisfaction in faith-based hospitals in Ghana, particularly in the Western Region. This study, therefore, investigates the level of job satisfaction among healthcare workers in two Catholic hospitals: Holy Child Catholic

Hospital in Fijai and Father Thomas Alan Rooney Memorial Hospital in Asankrangwa. It seeks to explore the specific dimensions of satisfaction expressed by health staff and provide recommendations for human resource and institutional development.

By examining staff satisfaction levels in these mission hospitals, the study aims to contribute to the development of tailored strategies to strengthen workforce retention, improve patient care, and sustain institutional goals in Catholic health facilities.

Methodology

Study Design

A **descriptive cross-sectional survey** design was employed to assess the level of job satisfaction among healthcare workers in the selected Catholic hospitals. This design enabled the collection of data at a single point in time to describe trends and perceptions regarding job satisfaction.

Study Sites

The study was conducted at:

- **Holy Child Catholic Hospital**, Fijai – a 35-bed faith-based facility providing outpatient, surgical, maternal, and public health services.
- **Father Thomas Alan Rooney Memorial Hospital**, Asankrangwa – a 112-bed mission hospital offering a wide range of inpatient, outreach, and specialized health services.



Study Population and Sample

The study population consisted of 456 health workers across both hospitals. A total sample of 234 respondents was determined using Yamane's formula, with an added 10% to accommodate non-response. Respondents were selected using convenience sampling, allowing the inclusion of staff who were available and willing to participate during the data collection period.

Inclusion and Exclusion Criteria

- **Included:** Health workers with at least one year of continuous service.
- **Excluded:** Interns, attachment students, and staff on long leave.

Data Collection Instrument

Data were collected using a **structured self-administered questionnaire**. The section on job satisfaction included statements on workplace conditions, interpersonal relationships, rewards, support systems, and alignment with the hospital's mission. Responses were rated using a **4-point Likert scale**:

1 = Strongly Disagree, 2 = Disagree, 3 = Agree, 4 = Strongly Agree.

Validity and Reliability

Content and face validity were confirmed through expert review at the Department of Public Health. A **pre-test** was conducted at Jubilee Catholic Hospital, Apowa, and adjustments were made accordingly. Internal consistency of the scale was maintained through reliability analysis.

Ethical Considerations

Approval for the study was obtained from the Christian Health Association of Ghana (CHAG). Informed consent was obtained from each participant, and anonymity and confidentiality were strictly ensured throughout the study process.

Data Analysis

Data were cleaned, coded, and analyzed using **descriptive statistics**. **Mean scores and standard deviations** were computed. A mean score above **2.50** was considered indicative of satisfaction, while scores below this threshold signaled dissatisfaction

Results

Table 1: Demographic Characteristics of Respondents

Variable	Category	Frequency (n=234)	Percentage (%)
Gender	Male	96	41.03
	Female	138	58.97



Age Group	Below 31	44	18.80
	31–40	137	58.55
	41–50	34	14.53
	Above 51	19	8.12
Marital Status	Married	131	55.98
	Single	57	24.36
	Cohabiting	23	9.83
	Separated	14	5.98
	Divorced	9	3.85
Education Level	Certificate	26	11.11
	Diploma	53	22.65
	Bachelor's Degree	97	41.45
	Master's/PhD	58	24.79
Employment Type	Permanent	125	53.42
	Locum/Part-time	78	33.33
	Casual	31	13.25
Years of Service	1–5 years	61	26.07
	6–10 years	86	36.75
	Above 10 years	87	37.18

Table 1 presents the demographic profile of respondents. The majority were female (58.97%) and within the age range of 31–40 years (58.55%), suggesting a predominantly youthful and gender-diverse workforce. Most participants were married (55.98%), had at least a bachelor's degree (41.45%), and were employed on a permanent basis (53.42%). Notably, 73.93% had been employed for more than five years, indicating a workforce with considerable experience and likely emotional investment in their work.

The educational background and length of service suggest that most respondents possess both the qualifications and practical insights needed to meaningfully assess job satisfaction. Their employment status and length of service also imply that their



responses reflect a deeper understanding of institutional practices and work conditions in the two hospitals.

Table 2: Job Satisfaction Levels Among Health Workers

Statement	Mean	Standard Deviation (SD)
I am satisfied with the working conditions at my hospital	2.73	0.635
I feel respected and supported by my supervisors	2.82	0.609
I have a good working relationship with my colleagues	2.89	0.593
I am satisfied with the level of job security provided	2.71	0.618
I am proud to work in this hospital	2.78	0.620
I find meaning and purpose in the work I do here	2.80	0.627

Source: Field Survey, 2024

Table 2 shows that respondents expressed high levels of job satisfaction across all six indicators, with all mean scores above 2.50. The highest-rated item was “*I have a good working relationship with my colleagues*” (Mean = 2.89), suggesting that collegiality and interpersonal harmony are strong within the two Catholic hospitals. This is consistent with research by Coomber and Barriball (2007), which found that peer support is one of the most stabilizing elements in health sector job satisfaction.

The statement “*I feel respected and supported by my supervisors*” also recorded a high mean score (2.82), indicating positive supervisory relationships, which are essential for feedback, guidance, and professional encouragement. The strong sense of respect and support from leadership may also reflect the faith-based mission of these institutions, which often promotes compassion, ethics, and teamwork.

Satisfaction with working conditions (Mean = 2.73) and job security (Mean = 2.71) indicates that respondents felt fairly comfortable and secure in their current roles. In a context like Ghana where job insecurity is often a source of stress, this result is notable. It aligns with the findings of Dapaah and Appiah (2019), who reported that stable employment enhances both performance and organizational loyalty.

Finally, respondents showed pride in their institutions (Mean = 2.78) and a strong sense of meaning in their work (Mean = 2.80). This suggests that many staff are driven not only by professional demands but also by a sense of mission and purpose, which is especially



characteristic of those working in religious health institutions. This intrinsic satisfaction can be a major asset in contexts where extrinsic rewards such as high salaries may not be feasible.

Table 3: Independent Samples t-Test – Gender and Job Satisfaction

Gender	N	Mean Job Satisfaction	Standard Deviation (SD)	t-value	df	p-value
Male	96	2.76	0.39			
Female	138	2.81	0.41	-1.02	232	0.31

Source: Field Survey, 2024

Table 3 presents the results of the independent samples t-test comparing mean job satisfaction scores between male and female respondents. The mean job satisfaction for females ($M = 2.81$, $SD = 0.41$) was slightly higher than for males ($M = 2.76$, $SD = 0.39$), but this difference was not statistically significant, $t(232) = -1.02$, $p = 0.31$. This implies that gender did not significantly influence job satisfaction among the health workers in the two Catholic hospitals.

Table 4: One-Way ANOVA – Educational Level and Job Satisfaction

Educational Level	N	Mean Job Satisfaction	Standard Deviation (SD)
Certificate	26	2.64	0.34
Diploma	53	2.69	0.40
Bachelor's Degree	97	2.81	0.43
Master's/PhD	58	2.87	0.39
ANOVA Results		$F(3, 230) = 4.07$	$p = 0.008$

Source: Field Survey, 2024

Table 4 shows the outcome of a one-way ANOVA conducted to assess the effect of educational level on job satisfaction. The results indicate a statistically significant difference in mean satisfaction scores across educational groups, $F(3, 230) = 4.07$, $p = 0.008$. Post-hoc analysis using Tukey's HSD revealed that respondents with a Master's degree or PhD reported significantly higher job satisfaction than those with Certificate or Diploma qualifications. This suggests that job satisfaction may increase with educational attainment, possibly due to better career advancement opportunities, professional autonomy, or role clarity.



Discussion

This study examined job satisfaction among health workers in two Catholic hospitals in the Western Region of Ghana: Holy Child Catholic Hospital in Fijai and Father Thomas Alan Rooney Memorial Hospital in Asankrangwa. The findings suggest that, overall, health workers in these mission-based facilities experience moderate to high levels of job satisfaction across multiple dimensions, including interpersonal relationships, supervisory support, job security, and alignment with the institutional mission.

The highest levels of satisfaction were recorded in relation to peer relationships. Respondents reported strong collaboration and collegiality in their respective institutions (Mean = 2.89), a finding consistent with Lu et al. (2019), who emphasized that supportive co-worker relationships are essential for staff morale and job satisfaction in healthcare settings. In Catholic mission hospitals, such relationships may be reinforced by shared ethical values and a collective sense of service, which foster community among staff (Agyepong et al., 2014).

Respondents also expressed high satisfaction with supervisory support (Mean = 2.82), indicating that leaders and managers in these institutions play a positive role in fostering respectful and professional environments. Osei et al. (2015) similarly found that supportive supervision enhances staff engagement and reduces burnout, particularly in settings where resource limitations are common. The respect for leadership

observed here may also be influenced by the faith-based orientation of the institutions, which often emphasizes human dignity and compassion in staff management (Mensah et al., 2017).

Furthermore, staff reported a strong sense of pride in their work and alignment with the hospital's mission (Mean = 2.78), as well as finding meaning in their roles (Mean = 2.80). These intrinsic motivators align with Herzberg's motivation-hygiene theory, which identifies purpose, recognition, and achievement as key drivers of job satisfaction (Herzberg, 1966). In the context of Catholic healthcare, these findings are significant because they suggest that mission and values remain central to workforce engagement.

While descriptive findings were encouraging, inferential analysis added depth to the interpretation. The independent samples t-test (Table 3) showed no statistically significant difference in job satisfaction between male and female workers ($p = 0.31$). This finding contrasts with some global literature, which suggests that gender disparities may exist in health sector experiences (Shields & Ward, 2001). However, the absence of a gender gap here may reflect institutional policies rooted in the Catholic tradition of equity and inclusiveness, or possibly a relatively egalitarian working culture in the selected facilities.

The one-way ANOVA (Table 4), however, revealed a significant relationship between educational level and job satisfaction ($p = 0.008$). Health workers



with a Master's or PhD reported higher job satisfaction than those with certificates or diplomas. This may be attributed to greater autonomy, clearer career trajectories, and more meaningful roles assigned to higher-educated staff. Similar findings were reported by Coomber and Barriball (2007), who noted that more educated staff often experience greater job clarity, skill utilization, and professional recognition—all of which contribute to higher satisfaction.

These findings have important policy implications. First, while overall job satisfaction is positive, there is a need to target interventions at lower-educated or casual staff, who may not be experiencing the same level of fulfillment. Providing mentorship, training, and internal promotion opportunities can help bridge this satisfaction gap. Second, institutions should institutionalize continuous professional development and recognize qualifications through structured incentives, as this may increase motivation and retention. Finally, supervisors and hospital administrators should intensify inclusive staff engagement practices, ensuring that all categories of workers feel seen, heard, and valued.

From a workforce management perspective, Catholic hospitals must sustain their culture of interpersonal respect and value-driven service while adapting to the changing needs of a multi-generational and multi-qualification health workforce. Investing in both tangible and intangible forms of recognition is key to staff retention in

faith-based systems where financial capacity may be limited.

This study, however, is not without limitations. The use of self-report questionnaires introduces a potential for social desirability bias, especially in mission institutions where respondents may hesitate to critique the employer. Additionally, the cross-sectional design does not account for seasonal or time-bound variations in satisfaction. Future studies should consider using mixed-methods approaches and longitudinal designs to provide a deeper and more nuanced understanding of job satisfaction trends.

In conclusion, the study found that job satisfaction among health workers in Catholic hospitals in the Western Region is generally high, driven by strong interpersonal bonds, supportive supervision, and alignment with institutional values. However, significant differences exist based on educational background, highlighting the need for more inclusive staff development policies. These insights offer important guidance for Catholic health managers and policymakers seeking to strengthen workforce stability and performance in Ghana's faith-based healthcare sector.

Conclusion

This study assessed job satisfaction among healthcare workers in two Catholic hospitals in the Western Region of Ghana: Holy Child Catholic Hospital in Fijai and Father Thomas Alan Rooney Memorial Hospital in Asankrangwa. The findings reveal that overall job



satisfaction among staff was moderate to high, with particularly strong satisfaction expressed in areas such as peer relationships, supervisory support, and sense of purpose in the workplace.

While gender did not significantly influence job satisfaction, educational level was found to be a significant predictor, with more highly educated staff reporting higher satisfaction. This suggests that academic attainment may enhance workers' perception of role clarity, autonomy, and opportunities for growth. The study further confirms that intrinsic and relational motivators—such as respect, collaboration, and alignment with institutional mission—remain powerful drivers of job satisfaction in faith-based healthcare settings.

The results point to the importance of creating inclusive and supportive work environments that nurture staff across all educational levels. For Catholic hospitals and similar institutions, these insights provide a roadmap for improving workforce engagement and retention through targeted human resource policies that emphasize recognition, fairness, and continuous professional development.

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