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Job Satisfaction and Retention among Direct Care Workers in Times of COVID-19

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This is to certify that the doctoral dissertation by

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Walden University
2020

Abstract

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MA, Delta State University, 1997

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Proposal Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Human Services

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Abstract

Low employee satisfaction and retention have been identified as major challenges in the American mental health workforce. High turnover rates and the growing demand for direct care workers necessitates further research regarding satisfaction and retention. The purpose of this generic qualitative study was to determine how direct care workers employed by mental health organizations describe what motivates their satisfaction and retention during the COVID-19 pandemic. Herzberg's theory of job satisfaction was the theoretical framework. Research questions explored job satisfaction and retention among a group of 8 direct care workers. Semi-structured interviews were used to collect participants' perceptions of their work experiences. Data were analyzed using thematic inductive analysis. Findings from the analysis indicate the importance of intrinsic motivation and the role of extrinsic recognition as key in direct care worker retention. Implications for social change include providing an understanding of job satisfaction and retention of direct care workers to organizational leadership, managers, and trainers in various mental health settings.

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Dedication

I dedicate this doctoral study to my daughter whom I love more than life itself. She is the best part of me and inspires me to be all that I can be. Throughout this journey, she has been my constant. She is bold and beautiful, and intelligent beyond her years. I cannot wait to see how she propels in life. Also, I dedicate my doctoral study in memory of mom Alice Boone and my sister Cynthia Boone, who died on last year, just months apart of each other. "Thumbs up ladies", we did this".

Acknowledgement

I would like to express my sincere appreciation to my chair, Dr. Barbara Benoliel, for her support and encouragement. At my lowest point, she reminded me why I began this journey and why I had to complete it. Thanks for being the soft voice with a strong message. I would like to thank my committee members, Dr. Eric Youn and Dr. Jeffrey Harlow, for your guidance at every stage of this research project. Without your insightful comments and suggestions, I could not have reached my goal. I also express my sincere gratitude to the faculty of Walden University for giving me the opportunity to become an agent of social change. Finally, I would like to offer my special thanks to my brother Lamar and my niece Jada who encouraged me from start to finish. I also appreciate the "Boone", family who always provided me with a much-needed distraction, thanks for hanging in there with me, but most of all, thanks for the love and laughter. Without their understanding and support over the years, this day would not have been possible.

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Chapter 1: Introduction

One of the largest growth sectors in the United States which is projected to be one of the largest occupational groups by the year 2028 is direct care workers (Paraprofessional Healthcare Institute [PHI], 2019). A subset of this occupational group are direct care workers employed in mental health settings such as psychiatric hospitals, residential mental health facilities, and related healthcare settings under the direction of nursing and medical staff (Bureau of Labor Statistics [BLS], 2018). This occupation will grow by 12% between 2018 and 2028 (BLS, 2018).

Direct care workers in the mental health sector can be interchangeably referred to as psychiatric aides or behavioral or mental health workers. For this study, I referred to them as direct care workers. This group of workers provide most of the hands-on care for residents in mental health facilities. They perform tasks and assist residents with daily living skills such as dressing and bathing, accompanying residents to and from educational activities, medical appointments and other treatments, and restraining residents to prevent harm to self or others (BLS, 2018). Further, direct care workers who work with residents in mental health facilities may experience occupational stressors as a result of changes in residents' emotional states and unpredictable behaviors that can be disruptive (Sailaxmi & Lalitha, 2015). These stressors may have been exacerbated by the extra requirements of COVID-19 care.

With the projection of growth in direct care workers employed in mental health settings and with the work environment challenges facing this work sector, understanding

the motivators that are important to these workers could help strengthen this direct care workforce and the organizations employing this workforce. This study examined perceptions of the impact of intrinsic motivators that account for job satisfaction and retention among direct care workers. Herzberg's two-factor theory of motivation was used to gain insight into perceived motivators that contribute to job satisfaction within this mental health workforce.

The sections that follow include a background of the mental health workforce with a description of direct care workers and problems faced in the mental health sector. This includes the purpose of the study, research questions, theoretical framework, nature of the study, definitions of key terms, assumptions, limitations, and the significance of the study.

Background

A mental health workforce crisis exists in terms of the provision of treatment and service delivery. An estimated one-third of the average ten million Americans with mental illnesses receive no mental health treatment (Substance Abuse and Mental Health Services Administration [SAMHSA], 2015). The mental health workforce has had issues with shortages in staffing, maldistribution of providers, and challenging work environments. Mental health workers are at high risk for burnout, which has a negative effect on providers' well-being, quality of services provided to their clients, and organizations' overall functioning (Green, Albanese, Shapiro, & Aarons, 2014). The mental health system is faced with ongoing challenges in the delivery of services to those

in need; correspondingly, the need for mental health workers in the United States continues to increase (Beck, Manderscheid, & Buerhaus, 2018; Bukach, 2015).

Mental health workers experience high levels of burnout (Salyers et.al., 2015). Goetz, Kleine-Budde, Bramesfeld, and Stegbauerr (2017) described work requirements for mental health professionals as complex and highly structured, focusing on collaborative interactions with multidisciplinary teams of providers. Mental health workers experience work-related stressors such as high workload, lack of perceived job control, and adverse work conditions that can lead to burnout, mental health issues, physical issues, and intent to quit (O'Brien, et.al., 2018). Failure to retain employees negatively impacts mental health organizations and overall performance (Bukach, Ejaz, Dawson, & Gitter, 2015; Rose, 2016).

Employee job satisfaction and retention are linked and can be the result of various conditions within and outside of the organization. Motivators such as the work environment and perceived support from organizational leadership influence both job satisfaction and employee retention decisions among direct care workers (Yoon et.al., 2015). Holmberg, Caro, and Sobis (2017) said that nurses working in acute inpatient settings identified their experiences of collaboration and close teamwork as significant motivators that account for their job satisfaction.

Direct Care Workers in Mental Health

Within the context of a mental health workforce characterized by challenges in the job and work environment as well as growth of the industry and constant shortages,

direct care workers provide essential services for those with mental health issues. Direct care workers in mental health represents one of the fastest--growing occupations in the U.S., and their projected growth is 12% faster than all other occupations (BLS, 2019). This group of workers is tasked with observing and reporting patients' behaviors while providing hands-on assistance with daily life skills including eating and bathing, as well as restraining individuals who demonstrate physical violence (BLS, 2019). In all healthcare settings but particularly mental health, the work of direct care workers is essential to the lives of the individuals they serve, as they have considerable influence on individuals' wellbeing and treatment.

While direct care workers are critical to the daily operations of their organizations, most are not unionized, and few are licensed health care providers. Despite the work provided by these workers, compensation is much less than that of other workers. The BLS (2018) reported the average income for this group of workers as $11.57 per hour or $24,060 annually. Discrepancies do exist in the reporting of the average rate of pay for these workers; however, the rate reported at its highest level is still considered to be below the poverty line for a family of four.

While enduring work aspects that lead to burnout, direct care workers provide care characterized by high physical demands, long work hours due to staff shortages, and labor-intensive tasks which include lifting and restraining clients who may become aggressive, often leading to high injury rates (BLS, 2019). Retention rates are low (Bukach et al., 2015).

Problem Statement

The mental health workforce in general is faced with many organizational

stressors that relate to job satisfaction and low retention of employees (Yoon et al., 2015).

These workers are faced with increased workloads that are both emotional and physically

demanding (BLS, 2018). Within this context, current and future demands for direct care

workers remains high (BLS, 2018; Kepley & Streeter, 2018), while retention rates are

low (Bukach et al., 2015). Failure to retain employees negatively impacts mental health

organization (Bukach et al., 2015) and organizations' overall performance (Rose, 2016).

Job satisfaction has been linked to employee retention. However, I have not found the

nature and extent of such findings involving direct care workers in the mental health

sector. Further, employee motivation among direct care workers employed in mental

health organization remains understudied. A gap in literature exists regarding direct care

workers and perceived motivators that influence their job satisfaction and retention,

specifically during the period of COVID-19.

Purpose of the Study

This study addressed the work lives of direct care workers and perceived

motivators that may contribute to employee job satisfaction and retention. Herzberg's

two-factor theory of work motivation was selected as the theoretical framework for this

study and used to determine perceived motivators that account for job satisfaction and

retention among direct care workers within the mental health sector. The purpose of this

generic qualitative study was to explore the perceptions of motivators that contribute to

job satisfaction among mental health direct care workers. Mohamad and Leng (2018) said that employee motivation is one of the driving forces that accounts for success of any organization, and when motivated, human capital is said to function at its best. Information from findings may be used to assist mental health organizations in improving workplace practices that seek to improve satisfaction and increase retention of direct care workers. These improved practices can assist mental health organization in stabilizing this workforce by reducing employee turnover, which may in turn reduce the financial repercussions of having to train new employees.

Research Question

The research question used to support my study is: What are lived experiences and perceived motivators involved in job satisfaction and retention of direct care workers in the field of mental health?

Theoretical Framework

Herzberg's two-factor theory, first presented in 1959 and later amplified and extended, was used to understand motivation to work. Herzberg (1966) said workers' job satisfaction is categorized into two domains: motivators (intrinsic) and hygiene (extrinsic). Herzberg (1959) concluded that determinants of job satisfaction, which he described as motivators, are different from the determinants of job dissatisfaction, which he described as hygiene-related. Motivators satisfy workers' needs for self-actualization whereby organizations should seek to eliminate to prevent job dissatisfaction. This research focused on intrinsic motivators that may lead to job satisfaction. Jobs that are

perceived as interesting, meaningful, and enriching to employees contribute to job satisfaction and motivation (Herzberg, Mausner, & Snyderman, 1959). Motivators include promotions, achievement, responsibility, growth, and recognition (Herzberg, 1966). While motivation and job satisfaction are not considered to be interchangeable, motivation is an essential element of job satisfaction (Herzberg, 1966).

Hygiene needs are the psychological and physical conditions under which individuals work. The structure of the organization is an important hygiene factor, as are characteristics within the organization such as physical working conditions, company policies, job security, quality of supervision, salary, and employee relationships with others (Herzberg, 1966). Hygiene motivators often determine levels of dissatisfaction (Herzberg, 1966).

Herzberg (1959) suggested that motivator and hygiene factors are not opposites but two different constructs. Herzberg et al. (1959) identified these factors as job satisfiers (intrinsic motivators) which relate to the content of the job and job dissatisfiers (extrinsic hygiene factors) which involve the job setting itself.
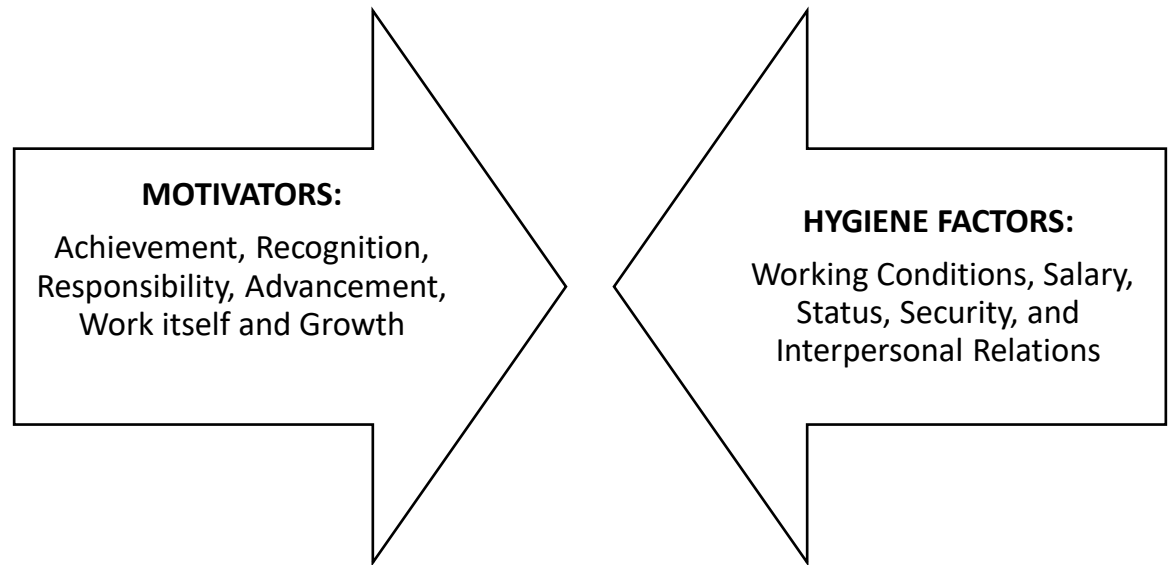
Figure 1. Herzberg's motivation/hygiene model.

Non-managerial workers employed in one of the largest private sectors in Jordan believed that recognition of their opinions from their employers created a motivating environment and increased their levels of job satisfaction (Alfayad & Arif, 2017). A link between employee retention and job satisfaction is grounded in Herzberg's two-factory theory. Almaaitah, Harada, Sakdan, and Almaaitah (2017) articulated retention strategies consisting of intrinsic and extrinsic factors such as employee recognition, workplace conveniences, employer support, personal growth, and training opportunities. In my study, Herzberg's theory was used to assess the presence of intrinsic motivators that could account for job satisfaction and retention of direct care workers. While Herzberg (1959) suggested that organizational management should examine effective strategies that employ both intrinsic and extrinsic motivators as a means of influencing employee retention, my study involved focusing only on perceived intrinsic motivators.

Nature of the Study

This study involved a generic qualitative approach designed to provide an understanding of perceived motivators that contribute to job satisfaction and retention. It also provided participants the opportunity to share personal experiences from their perspectives. Interpretations of participants' responses helped construct meaning in terms of what satisfies them to stay on the job.

Since it is not clearly understood which motivators lead to satisfaction and retention of direct care workers, particularly in terms of challenges inherent in their jobs, a generic qualitative analysis was used to assist in gaining an understanding of this phenomenon. I conducted interviews during the data collection process that helped to explicate perceived motivators that generate job satisfaction among this distinct group of workers.

The sample population included direct care workers who are employed in mental health organizations throughout Mississippi. These individuals are direct care workers who provide hands on care for individuals who suffer from serious mental illnesses. Participants were asked to respond to an oral survey. Recruitment strategies included identifying eligible sites and posting flyers in public settings in areas where employees met study criteria.

Definitions of Key Terms

The following key terms were used in this study:

Analogous staff: Personnel employed as counselors, treatment specialists, residential workers, therapeutic recreational specialists, caseworkers, case managers, and employment counselors, all of whom have varying direct contact with clients in a helping role (Packard & Kauppi, 1999). They are not considered to be direct care staff.

Direct care workers: Individuals who provide hands on care and personal assistance in daily living to individuals with mental and/or medical disabilities or other chronic conditions (PHI, 2013).

Extrinsic Motivators (Hygiene Factors): Factors such as physical working conditions, company policies, job security, quality of supervision, salary, and relationships with others (Herzberg, 1966).

Intrinsic Motivators: Factors that lead to positive attitudes toward jobs because they satisfy needs for growth or self-actualization (Herzberg, 1966).

Job satisfaction: The positive emotional state a person feels about his or her job (Frey, Bayon, & Totzek, 2013).

Motivation-hygiene theory: A theory involving motivators that cause job satisfaction and dissatisfaction (Herzberg, 1987; Herzberg et al., 1959).

Peer Support Providers: Individuals with lived experiences involving psychiatric disabilities who work to provide support to others with lived experiences (Cronise, Teixeira, & Rogers, 2016).

Retention: The length of time an employee stays on the job which is the result of actions that business managers take to encourage employees to maintain employment with their organization (Goud, 2013; Deeba, Usmani, Akhtar, Zahra, & Rasool, 2015).

Serious Mental Illness (SMI): SMI is a severe, chronic, and long-lasting disability attributable to a mental impairment or combination of impairments such as schizophrenia, bipolar disorder, or retardation (American Psychological Association [APA], 2013).

Assumptions

For this study, I made the following assumptions. First, that the survey questions used will elicit reliable responses. The participants will fully understand the questions being asked of them. Participants in the study were employed during the period of the COVID-19 pandemic in residential centers .Participants in this study gave truthful feedback that was useful for the study and had minimal concerns about sharing information in an open forum.

Delimitations

The results of this study were restricted to direct care workers who currently work in mental health organizations located in or near a metropolitan area of a southern state. The decision to study populations and groups within this location was made because there is a greater number of mental health organizations located in this area when compared to rural surroundings locations. Although various organizations employ paraprofessionals, the primary criterion for inclusion in this study was that respondents provided direct care services to clients who receive treatment for a mental illness. All

participants met criteria for inclusion into the study by working as direct care workers in mental health facilities for a minimum of two years. Excluded from this study were psychologists, psychiatrists, social workers, administrators, and other support staff working in mental health organizations. Furthermore, the scope of this study was limited to studying intrinsic motivators influencing job satisfaction and retention of direct care workers within the mental health workforce during the period of COVID-19 pandemic and is therefore not applicable to other time periods.

Limitations

This study involves Herzberg's motivational factors, excluding hygiene motivators that account for job dissatisfaction. Further, results may not be generalizable to other direct care staff who perform similar health care duties as this study is limited to direct care staff in mental health settings.

Significance of the Study

It is estimated that from 2018 to 2028, employment for individuals who provide hands on care to those in need of psychiatric services will grow by 12% (BLS, 2018). Direct care worker retention rates are low; with the growing demand for these workers, recruiting and retaining them is critical for the performance of mental health organizations in terms of treatment and delivery of those with mental health issues (Hamstra, Van Yperen, Wisse, & Sassenberg, 2015). However, current research is limited in terms of identifying motivators that contribute to satisfaction and retention among this unique population of workers. This study involved perceived motivators that

contribute to job satisfaction and retention among direct care workers. Results could benefit managers, supervisors, and policy makers as they seek insight into increasing retention of direct care workers. Further, results could assist direct care workers in choosing a career path that they are motivated to work toward.

Summary and Transition

There is a global shortage among mental health professionals, and such shortages are detrimental to meeting the growing needs of the profession (Yanchus, Periard, & Osatuke, 2017). Direct care workers make up an essential group of workers in the mental health workforce but are often unnoticed. While workforce development approaches often focus on degreed professionals in the mental health field, direct care workers account for a vital part of the mental health workforce who are often stigmatized due to the nature of their work.

To further strengthen this workforce, understanding perceived motivators that contribute to their satisfaction and retention is critical. Using Herzberg's theory of motivation, I concentrated on discovering perceptions of motivators considered to be determinants of job satisfaction that lead to the retention of direct care workers in the mental health field. This will lead to positive social change by contributing to growing discussions regarding mental health disparities of frontline staff with other mental health staff in the U.S.

In Chapter 2, I provide a review of scholarly literature related to the mental health sector. Information in this chapter includes unique characteristics of the workforce and

work environment in the mental health sector. Further, this section includes information regarding the theoretical framework and motivators within the study that influence job satisfaction and retention of the target population. In Chapter 3, I discuss the methodology, data collection procedures, data analysis, and ethical implications.

Chapter 2: Literature Review

Introduction

The purpose of this study was to explore perceived motivators experienced by direct care workers and the impact these experiences have on job satisfaction and retention. Herzberg's two-factor theory was used to inform this qualitative study. This literature review involved examining previous studies regarding job satisfaction and retention within the general workforce and mental health sector. It also includes studies of analogous mental health workers such as nurses, social workers, and psychiatrists. Literature relevant to this current study involves human behavior within the workforce and perceptions of how motivators serve as a driving force in job satisfaction and retention within organizations.

Literature Search Strategies

I conducted a literature search using full-text databases including Academic Search Complete, Medline, EBSCOHost, and Google Scholar. These databases allow access to peer-reviewed journals, scholarly articles, and books. For my literature review search, I used the following key words: *job satisfaction*, *mental health workers*, *direct care workers*, *recruitment and retention*, *direct care shortage*, *direct care paraprofessionals*, *mental health*, and *motivation and employee turnover*. I reviewed peer-reviewed journals, dissertations, government publications, historical data, and other published works regarding satisfaction and retention in healthcare systems and other organizations.

Herzberg's two-factor theory was used to study the relationship between job satisfaction and retention of mental health direct care workers. The purpose of this generic qualitative study was to identify perceived motivators that account for direct care workers' job satisfaction and retention.

Theoretical Foundation

Herzberg's Two-Factor Theory

Motivation factors and hygiene factors influence employee satisfaction. Hygiene factors include salaries, job security, and quality of supervision while motivation factors include interest in the vocation, prospects of career growth, and acknowledgment of individual achievements. Different combinations of motivation and hygiene factors can lead to situations where employees exhibit a high level of performance and are free of complaints or situations in which they become chronic complainers (Karadağ, 2015). Job satisfaction consists of two distinct dimensions: job satisfaction and job dissatisfaction (Herzberg et al., 1959). The two-factor theory provides a mechanism for evaluating satisfaction levels and clarifying how positive or negative employee outcomes occur.

Herzberg's Theory in Use

Goetz et al. (2017) found that community mental health workers reported motivators such as relationships with colleagues, increased job responsibilities, greater recognition, and flexibility in terms of job tasks as contributing motivators that increased their job satisfaction. Raza, Akhtar, Husnain, and Akhtar (2015) revealed that motivators such as job security, achievement, responsibility, and the work itself were significantly

related to positive job satisfaction among these workers. Damij, Levnajić, Skrt, and Suklan (2015) identified how aligning motivation with organizational strategies leads to a satisfied workforce.

Motivators include challenging work, recognition for achievement, responsibility, opportunities to do something meaningful, involvement in decision-making, and a sense of importance to organizations (Ackah, 2015). The presence of these circumstances serves as motivators when they are present in the workplace, but when not present, employees are not necessarily dissatisfied (Herzberg, 1966; Herzberg et al., 1959).

Herzberg's Variables

Achievement. When employees had motivators in their jobs, their job satisfaction levels were higher (Sinha & Trivedi, 2014). Sinha and Trivedi (2014) found that patient relationships (80.2%) and intellectual stimulation (69.7%) related intrinsically to the work itself and ranked as the two most satisfying motivators among those practicing medicine. Kang, Gatling, and Kim (2015) said that an employee's career satisfaction emerges from feelings of achievement due to the job itself.

Recognition. Employee recognition is another means of motivating employees (Robescu & Iancu, 2016). Acknowledging an employee's efforts is greatly appreciated and could be instrumental in improving overall employee performance (Robescu & Iancu, 2016). In support of this perspective, Shonubi, Abdullah, Hashim, and Hamid (2016) examined perceptions of appreciation among IT employees in Melika. Findings

indicated that immediate recognition of employee efforts is one of the best ways to inspire and strengthen commitment (Shonubi, Abdullah, Hashim, & Hamid, 2016).

The work itself. Herzberg et al. (1959) described work as the relationship of the employee to the customer or group of customers inside or outside the organization. A customer or a group of customers inside the organization is the employee of the organization (Scheers & Botha, 2014). Mbogo (2016) examined the relationships among spirituality, working conditions, and job satisfaction of 146 administrators and faculty of extension studies from six selected Christian universities in Kenya. Mbogo found significant differences between faculty personnel and administrators' perceptions of their global job satisfaction and their work. He discussed how educated personnel of extension studies were more satisfied with their jobs than were their counterparts with less education, in part due to differences in promotion opportunities; faculty were more satisfied with their work globally and the actual work than were administrators, in part due to differences in work responsibilities.

Responsibility. Employee responsibility within a job has four aspects: (a) self-scheduling, (b) authority to communicate, (c) control of resources, and (d) accountability (Herzberg, 1974; Herzberg et al., 1959). In self-scheduling, the client's needs are more important than employee needs (Herzberg et al., 1959; Herzberg, 1974). Empowering employees plays a vital role in employees assuming and fulfilling assigned responsibilities (Herzberg, 1974; Herzberg et al., 1959). Employers empower employees

by allowing them to have power, control, and authority within their jobs in the organization (Efferin & Hartono, 2015).

Advancement. Employee advancement is linked to new learning; thus, training is a significant factor in addressing employee growth needs (Herzberg, 1974; Herzberg et al., 1959; Maslow, 1943). To be accountable within their jobs, employees must be trained and equipped with appropriate resources (Herzberg et al., 1959). Noor, Khan, and Naseem (2015) confirmed that job promotion and job advancement have positive relationships with job satisfaction. Motivators such as flexible promotion policies, job advancement, a reward policy that provides for equal opportunity to all employees, and professional training for job improvement were contributing factors to job satisfaction among the employees under study (Noor et al., 2015).

Alternatives to Herzberg's Theoretical Framework

Herzberg's original theory has been examined and criticized. Initially, the theory's underlying methodology was challenged as being too limited. House and Wigdor (1967) said no empirical support for Herzberg's theory exists and that Herzberg oversimplifies the nature of job satisfaction. Further, methodological flaws have been found (Ncube & Samuel, 2014 attempts to replicate Herzberg's findings have not consistently supported the original study Bryan (2013).

Maslow's work inspired many motivation theories. Maslow (1943) argued that motivation needs are ordered in a hierarchy. Maslow identified five levels of need consisting of, beginning with the lowest level: physical needs, safety needs, social needs,

esteem and achievement needs, and self-actualization needs. Lower level needs must be satisfied first, or motivation will arise from the desire to satisfy the unmet need (Maslow, 1943). In work situations, Maslow's need-hierarchy theory considered not only the need for money to pay for necessities, but also psychological needs such as social, esteem, and self-actualizing. As such, Maslow's lower level needs overlap with Herzberg's extrinsic motivators.

McClelland's needs theory. McClelland's needs theory proposes that the work orientation of most individuals is affected by three intrinsic needs: the need for affiliation, the need for power, and the need for achievement. McClelland (1961) argued that individuals with strong achievement needs are predisposed to react positively to work environments where they are personally responsible for accomplishing difficult, but feasible, goals and subsequently receive feedback about their performance (Rasch and Harrell, 1989). The need for affiliation is defined as the desire for friendly and close interpersonal relationships; the need for power is defined as the need to make others behave in a way that they would not have behaved otherwise; and the need for achievement as the drive to excel, to achieve in relation to a set of standards, to strive to succeed (McClelland, 1961). This theory focuses on the motive to achieve.

Adams' equity theory. Adams' equity theory is one well-known process theory which holds that individuals compare what they are getting from their job to that of others, and if they perceive that they are getting less, their job satisfaction is affected. It treats the employment situation as an exchange relationship of inducements/contributions

between an employer and employee. The employee's contributions (inputs) are the things

one invests in the job. Inputs include any contribution to the exchange such as the amount

of effort put into the job, prior experience, training, and education. Inducements

(outcomes) are anything of value to the employee that he or she obtains from the job

situation. Inducements include getting adequate pay, receiving status from a position, and

making friends (Harpaz, 1983). Steers (1983) argued that Adams' theory is perhaps the

most rigorously developed statement of how individuals evaluate social exchange

relationships

Vroom's expectancy theory. Victor H. Vroom proposed a motivational theory of

job satisfaction based on the belief that people are motivated to achieve goals which they

deem as worthy. Vroom's theory identifies three variables: valence, expectancy, and

instrumentality. Employees choose a level of performance (valence) that results in the

greatest reward; employees choose tasks that are within employees' ability (expectancy);

and employees assume that the completion of given tasks will likely result in benefit to

the employees (instrumentality).

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Literature Review of Key Concepts

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Caring for the Mentally Ill

Living with a severe mental illness such as schizophrenia, bipolar disorder, or

depression has a debilitating impact on quality of life (Delespaul, 2015). Individuals who

suffer with serious mental disorders are no longer cared for in psychiatric hospital beds;

instead, they are cared for in long-term residential facilities or nursing homes (Torrey et.al., 2015).

Staff shortages, a lack of training, and other occupational stressors are challenges within the mental health workforce. Although considered one of the fastest growing workforces in the country (SAMHSA, 2015), the projected outlook for employment in this field remains grim. With the aging United States population, the need for a stronger mental health workforce will soon be considered critical. The importance of these alarming statistics is that access to mental health services is based on the number of providers available to render the services needed (SAMHSA, 2015). When compared to other areas of the healthcare workforce, disparities in the mental health workforce between what exists today and what is needed in the future are far-reaching. As the demand for mental health services increase, the shortage of mental health workers to provide services and supports increases contributing to a gap in human resources and a lack of training for individuals who work in the mental health care profession (Becker & Kleinman, 2013). Factors such as high employee turnover present challenges to the growth of any organization (Dong, Seo, & Barton, 2014) and with the growing demand for mental health services, retaining talented workers is a vital component to workforce success (Van Der Westhuizen, 2014).

Transcending Perspectives on Job Satisfaction

Employee job satisfaction has been studied extensively since the 1900's; various opinions exist as to what job satisfaction is and what motivators contribute to workers'

satisfaction and dissatisfaction in the workplace. Herzberg (1959) said that there are some job factors that produce satisfaction and some others that prevent satisfaction. Herzberg identifies hygiene factors such as pay, the work environment, company policy, etc., as extrinsic motivators that can prevent satisfaction, with intrinsic factors known as motivators such as recognition, responsibility and meaningful work are factors that produce satisfaction (Herzberg, 1959).

Schneider and Snyder (1975) defined job satisfaction as a personal evaluation of conditions present in the job, or outcomes that arise because of having a job. Job satisfaction is based on the perception and assessment individuals form about their job. Similarly, Locke (1976) said that job satisfaction is simply a pleasurable or positive emotional state resulting from the appraisal of one's job or job experiences. McCormick and Ilgen (1980) regarded job satisfaction as individuals' attitude towards their jobs but described attitude as an emotional response to the job, which may vary along a continuum from positive to negative. Harpaz (1983) suggested many people in industrialized societies spend most of their day working, hoping that the job would be both satisfying and challenging. When this does not happen, employees begin to feel frustrated about the job; and their response to such frustration may be costly to the individual, the employer, the economy, and society in general (Harpaz 1983). Similarly, Sempane et al. (2002) suggested that job satisfaction involves employees' emotions and feelings. The level of job satisfaction will therefore have a major impact on employees' personal, social, and work lives (Semppane et al., 2002), and influence their behavior as

employees, e.g. absenteeism (Locke, 1976; Visser, Breed & Van Breda, 1997). Collective

job satisfaction of employees may represent an organizational culture (Sempane et al.,

2002). Schultz and Schultz (1998) held that job satisfaction considers both positive and

negative feelings and attitudes people hold about their jobs and is based on many work-

related characteristics and personal demographics, such as age, gender, health and social

relationships. Arnold and Feldman (1986) described job satisfaction as "the amount of

overall affect that individuals have toward their job" (p.86). This would indicate that

individuals who are highly satisfied with their jobs tend to generate positive feelings

about their work. Within the many descriptions of job satisfaction, two perspectives are

captured. Job satisfaction entails overall feelings individuals have about their job.

Second, various aspects of the job such as the environment, rewards, and the actual

nature of the work contribute to or detract from feelings of job satisfaction.

Job satisfaction is one of the most frequently researched variables in investigative

and actual settings and has been extensively studied in organizational social sciences

(Yucel & Bektas, 2012). Job satisfaction has been associated with employee motivation,

behavior, and productivity (Dobre, 2013). Job satisfaction can refer to how a worker feels

about the work (Chughati & Perveen, 2013), or how an employee feels about the

workplace (Sypniewska, 2014). Both intrinsic and extrinsic motivators can increase

employees' job satisfaction and improve their performance in the workplace (Edrak et al.,

2013). Saeed et al. (2013) defined job satisfaction as how much a worker enjoyed doing

the job, highlighting that many internal and external organizational motivators influence

employee job satisfaction, including working conditions, leadership, office politics, and pay. Edmans (2012) examined the relationship between job satisfaction and an absent employee. The correlation between those two motivators can assist the manager in setting measurement and standards to recruit, retain, and motivate employees (Edmans). Edmans (2012) indicated that an employer's value to their employees promotes job satisfaction. Job satisfaction includes all aspects of working within a company, even those things that are not directly related to the work task itself (Awang, Amir, Osman, & Mara, 2013).

The relationship between job satisfaction and voluntary turnover has been the most studied and documented subjects in the turnover literature (Government Accountability Office, 2013; Lee, Burch, & Mitchell, 2014). Research suggests that job satisfaction has a relationship to turnover and intentions (Habib, Aslam, Hussain, Yasmeen, & Ibrahim, 2014). The most common finding is that there is a correlation between job satisfaction and turnover, in which dissatisfied employees are more likely to leave their jobs than employees who are satisfied (Khan, 2014; Sukriket, 2015). Richardson (2014) found that when job satisfaction is high, motivation and performance increase, while attendance problems and turnover decrease. Further, job satisfaction predicts ways to decrease attendance problems (Richardson, 2014) and deter voluntary employee turnover (Cho, Lee, Mark, & Yun, 2012; Diestel et al., 2014; Nobuo, 2014; Richardson, 2014; Schmidt, 2014).

Job satisfaction can be a precursor of commitment (Panaccio, Vandenberghe, & Ben-Ayed, 2014). Without the employee's experience of job satisfaction, work

commitment decreases along with the employee's commitment to the organization and its objectives (Ridzuan, 2014). Omar and Ahmad (2014) identified job satisfaction and organizational commitment as significant predictors of turnover intention.

These transcending perspectives on motivators that may lead to job satisfaction have similar views to that of Herzberg's. However, further research on these perceptions is required to understand the influence of job satisfaction among direct care workers and facets significant to the retention of direct care workers.

Job Satisfaction among Mental health Professionals

Having a broader knowledge of factors that lead to job satisfaction of mental health professionals may help improve the quality and continuity of care provided by this group of workers (Fleury, Grenier, Bamvita, & Farrand, 2018). A significant impact on practices among mental health professionals is expected due to the ongoing efforts to reform the mental health sector by providing improved funding and increased access to care (Fleury, Grenier, Bamvita, & Farrand, 2018). Employees who experience high levels of satisfaction are better motivated to work to support the efforts of their overall team and in collaboration with other groups or organizations (Fleury, Grenier, Bamvita, & Farrand, 2018). A review of the literature on different groups of mental health professionals support Herzberg's theory that job satisfaction is influenced by both intrinsic and extrinsic motivators.

Job satisfaction among mental health nurses. The demand for mental health services continues to increase, with an even greater need for strategies to recruit nursing

professionals (Holmberg, Caro, & Sobis, 2017). Nursing students tend to shy away from mental health nursing because it is not as desirable as other career choices in the field (Holmber, Caro, & Sobis, 2017). When looking at job satisfaction among nurses in the field of mental health, researchers found that satisfaction for this group of employees was motivated by the work itself, trust, good mutual communication among staff, and interpersonal relationships with colleagues and patients (Holmberg, Caro, & Sobis, 2017). The authors conclude that having and understanding motivation and sources of job satisfaction of nurses who choose to work in the mental health field is important for workforce planning and in the efforts to recruit and retain nursing employees (Holmberg, Caro, & Sobis, 2017).

Job satisfaction among mental health social workers. Social workers who provide case management to individuals faced with serious and persistent mental illness are faced with challenges inherent in the mental health sector and servicing clients (Sullivan, Kondrat, & Floyd, 2015). The role of mental health social workers is considered complex due to the population being served and the various services they provide. Given the demands and challenges that come with the job, many social workers are satisfied with both their work and the clients they serve. Sullivan, Kondrat, & Floyd (2015) conducted a study among mental health social workers to examine factors that led to job satisfaction and frustration and their impact on recruitment and retention of these workers. Their study revealed that sources of satisfaction come from their direct service to their clients, having flexibility with their job, and having the ability to design their own

work schedule. These findings are consistent with Herzberg et al.'s (1959, 1966) theory that the work itself is a source of satisfaction.

Job satisfaction among psychiatrists and psychologists. Baumgardt, Moock, Rossler, & Kawohl (2015) examined job satisfaction, cooperation, aspects of sustainability, and burnout among Swiss psychiatrists. The findings indicated that job satisfaction was generally high and burnout rates were below crucial values in the dimensions of emotional exhaustion, and depersonalization (Baumgardt et al., 2015). Intrinsic and extrinsic factors such as relationship with patients, autonomy, personal rewards, and intellectual stimulation contributed to overall job satisfaction (Baumgardt et al., 2015). Further, factors such as age and cooperation from patients were sociodemographic and work-related characteristics that contributed to greater levels of satisfaction (Baumgardt et al., 2015). Jiang et al. (2018) examined job satisfaction and sociodemographic characteristics among psychiatrist in China. Findings revealed that when compared to their counterparts, these psychiatrist experience a lower level of job satisfaction due to factors such as their work conditions, salary, and security (Jiang et.al., 2017). The findings from this study provide support for Herzberg's theory of motivation.

Job satisfaction among direct care workers. Direct care workers, nursing assistants and other frontline health care workers provide most hands-on care for patients in mental health facilities and nursing homes, performing tasks to assist with their daily living skills such as dressing and bathing. Given the nature of their work and the

increased demand for this group of workers, understanding factors that lead to their satisfaction and retention could benefit the workers and their employers.

Limited research exists on studies that inform on job satisfaction among direct care workers in mental health. Most literature about this group of workers is centered on burnout and turnover. A dearth of research on direct care workers in general exists as most research on satisfaction in mental health and general health care tend to focus on professional staff. This disparity in research adds not only to the gap in knowledge on satisfaction among these workers but also limits the knowledge needed in understanding the motivational experiences that lead to satisfaction within the growing workforce.

Research findings indicate that both hygiene and motivators are relevant in understanding job satisfaction and turnover among direct care workers. Low-wage workers experience turnover which is likely to influence the quality of care provided through: disruptions in the continuity of care, an increase in the number of inexperienced workers, weakened standards of care, potential psychological distress for some patients, and greater expense for the facility. The impact of turnover diverted funds from patient care and increased workloads for remaining staff (Knapp & Missiakoulis 1983, Staw 1980). Caudill and Patrick (1989) said that staff who have emotional ties to residents and are friendly with co-workers stayed longer. Grieshaber, Parker, and Deering (1995) found that the quality of direct care workers' social relationships with those for whom they provided care had a significant effect on their satisfaction and turnover, concluding that socializing with residents was considered the most satisfying aspect of the care-

giving job. Further, social support from family and friends helped to reduce burnout and stress (Chappell & Novak, 1992). Gray and Muramatsu (2013) said that factors such as work overload, role ambiguity, and lack of supervisory and coworker support were sources of dissatisfaction that could contribute to intentions to quit. Gray-Stanley and Muramatsu (2014) said that workers' perception of common factors like day to day routine contributed to stress and burnout.

Job Satisfaction and Retention

An employee's job satisfaction leads to better job performance and retention (Tehseen & Ul Hadi, 2015). Atchison and Lefferts (1972) found that job satisfaction had an inverse relationship with turnover and absenteeism–that is, as job satisfaction increased, turnover and absenteeism decreased. Lee, Miller, Kippenbrock, Rosen, & Emory (2017) found that the work environment and institutional leadership were presented as primary motivators in the satisfaction and retention of college nurses.

Relevance of the Study

The findings of this research carried out to understand the influence of intrinsic motivation on the job satisfaction and retention of direct care workers is important to organizations who employee these workers. Using the findings may be helpful to organizations in developing and improving strategies for satisfying and retaining valuable employees. Using these findings may also help to improve employee engagement thus improving the growth of the organization. As such, the relevance of this study is its potential contributions to organizational practice and implications for social change.

Conclusion and Summary

Chapter 2 began with the theoretical foundation of the research and how Herzberg's theory was used to inform past and present research as well as alternative theories that explain job satisfaction. This was followed by key concepts in the field of mental health and perspectives on job satisfaction and retention which included studies that identified sources of motivators that lead to satisfaction among mental health professionals including direct care workers. My review of the literature indicated that research on motivators that lead to job satisfaction and retention of direct care workers is underexplored. My study was used to fill this gap in knowledge through documenting experiences of workers and exploring their perceptions of intrinsic motivators that may lead to job satisfaction and retention.

Chapter 3: Research Method

Introduction

The purpose of this generic qualitative study is to explore the experiences of direct care workers and perceptions of motivators contributing to job satisfaction. The research question is: What are the lived experiences and perceived motivators involved in job satisfaction and retention of direct care workers? Generic qualitative research is useful for providing researchers the opportunity to explore opinions and world experiences as well as participants' self-reflections. My study involved exploring experiences of satisfaction from the perspective of these workers. This chapter includes a summary of the research methodology I used to guide the present study. I discuss the research design and its justification. I also provided a rationale for further research regarding this topic. I describe participants and the setting for research and outline characteristics of the sample size and procedures. Subsequent sections include a discussion of my role as the researcher, data collection and analysis procedures, validity, and procedures I used for the protection of human participants.

Research Design

The experiences of direct care workers in mental health facilities are diverse. The generic qualitative approach allowed me to explore perceived motivators that may contribute to job satisfaction and retention among direct care workers. Use of this approach enabled me to explore participants' understanding of meanings they derived

from their motivational experiences. I explored participants' subjective reflections of their actual experiences within their work environment.

Using the qualitative approach allowed me to address the research problem by exploring the lived experiences of these workers. I sought to gain an in-depth understanding of motivational experiences of direct care workers in mental health and how Herzberg's intrinsic factors impact their job satisfaction and intent to stay with the organization. This description of attitudes, experiences, and perceptions involving job satisfaction and retention provided valuable data to help understand this phenomenon.

Rationale

The purpose of my study was to gain an understanding of participants' lived experiences about their work and how they are intrinsically motivated. A generic qualitative approach was used to capture detailed and descriptive data regarding direct care workers' experiences; through thematic analysis, I gained clarity and an understanding of their experiences. Participants in the study were given the opportunity to share their individual perspectives about their satisfaction with work and personal viewpoints in terms of why they remain in their profession and current organization.

I used a generic approach to understand the experiences of direct care workers. The study highlighted Herzberg's perceived motivators which include interpersonal relations, achievement, recognition, work itself, responsibility, advancement, and growth. The following research question was explored: what are the perceived motivators involved in the job satisfaction and retention of mental health direct care workers?

Role of the Researcher

My professional experience includes working as a manager of multiple psychiatric units, licensed clinician, and former direct care worker in the field of mental health. With over 28 years of mental health experience, and having previously worked as a direct care worker, I have insight into the phenomenon being studied. My roles in leadership and paraprofessional positions including as a direct care worker have allowed me to experience mental healthcare from various perspectives. As a former direct care worker, I have experienced firsthand the conditions and responsibilities of direct care workers.

As such, my experience increases the potential for researcher bias to exist based on my personal interactions with direct care workers. For this study, I used myself as an instrument. I conducted semi-structured open-ended interviews that allowed participants to discuss perceptions and lived experiences working as direct care workers. Collins and Cooper (2014) said that the role of the researcher is to gather information accurately and report all data. My role as the researcher was to promote and maintain a balanced dialogue between participants and myself by using questions related to the research topic. I recorded all sessions to gather data.

Participants

Participants were selected based on their roles as direct care workers in the mental health sector. Participants for this study worked in mental health facilities that employed mental health direct care workers throughout the Metropolitan area of a

southern state. Recruitment began by placing flyers in local stores and restaurants near organizations that employ these workers. Flyers contained specific criteria for participation from the target population, guarantee of privacy, and contact information (see Appendix C). I contacted relevant facilities within the area to gain permission to recruit participants by posting flyers on their premises. Participants were selected based upon specific work and tenure. Tenure qualifications required mental health direct care workers to be employed by the mental health residential facility for 2 years or more. Two years is the average length of agency commitment for direct care workers (BLS, 2014).

Sampling

Participants of this study were selected through purposive criterion sampling. For this research, I chose purposive sampling because the participants criterion is compatible with the study. Using purposeful sampling allows researchers to make a deliberate selection of participants based on the qualities possessed to understand and enhance the knowledge of the phenomenon under study (Etikan, Musa, & Alkassim, 2016). Participants provided direct care services to children or adults in mental health facilities, spoke English, and were able to read required informed consent forms.

The sample size for this study included eight participants. When using a qualitative sampling strategy, smaller samples are used to gain a clear understanding of the complexity, depth, variation, or context surrounding a phenomenon (Gentles, Charles, Ploeg & McKibbon, 2015). A small sample of participants can be valuable, as a small but highly informed sample can provide rich information about the topic (Percy et al., 2015).

In a study on understanding the lived experiences of satisfaction among Gen Y nurses, a sample size of 10 nurses was used to assess job satisfaction and intent to stay (Anselmo-Witzel, 2017). Use of a smaller number of participants provided in-depth perceptions of direct care workers about the phenomenon.

Informed Consent

Prior to conducting the study, permission to proceed with my research was obtained by Walden University IRB and other participating organizations. This permission relies on adherence to various protocols such as informed consent. The process for informed consent for the participants complied with ethical research requirements. All participants signed an informed consent form and consented to be audio taped which is in alignment with the Institutional Review Board (IRB) of Walden University (see Appendix A). Participants were informed of the purpose of the study and their rights as research participants. They were made aware of the fact that their participation was voluntary and that they could withdraw from the research study at any time without penalty or retribution. Risks posed to the participants were viewed as minimal such as time away from other activities. It was estimated to take at least an hour and a half to conduct the interview.

Confidentiality

Participant interviews along with the consent forms were coded for tracking and record-keeping purposes. Only the consent forms had the actual names of the participants; consent forms were placed in a secure file accessible to me only.

Participants were supplied with the researcher's name, e-mail address, and contact information. Participants were advised of their rights to request and receive a copy of the results of the study or a summary of the results.

Participants were assured that their names or any other personal identifying information would in no way be used or printed. This information was communicated in a letter of informed consent when the actual interview took place. As with the informed consent, the participants were informed that if at any time they felt uncomfortable, they could discontinue the interview without fear of retribution. The participants for this study were drawn from community-based mental health facilities.

Data Collection

During this unique period of time where face to face contact was limited, electronic data collection using video conferencing was the primary method of collecting data. This interview protocol involved incorporating a semi-structured interview questions (Appendix B) that allowed for a broad range of opinions and reflections about the real-life events experienced by this group of workers. In using this data collection method, the primary focus was to extrapolate opinions and reflections of real-world events about the experiences that lead to job satisfaction. In generic qualitative research, the flexibility of using different methods allows researchers to achieve their research objectives by using various methods that provide insight and understanding to the research being studied (Lui, 2016). Once willing participants agreed to the study, I described the purpose of the study and how the information gathered was used to identify

perceived motivators important to their job satisfaction. The interview was conducted in a conversational dialogue by which I asked the questions and allow the participants to give their responses based on their perceptions of their outer experiences.

In preparation to conduct the interviews using video conferencing, I was guided by the survey questions in the Minnesota Satisfaction Questionnaire (MSQ-short-form), to help validate that I asked the right questions to participants. Weiss et al. (1967) said work fit is multifaceted and involves correspondence between the worker and their skills as well as the reinforcements present in the work environment. The Minnesota Satisfaction Questionnaire short form (MSQ)\, is a pencil-paper 20 item questionnaire that uses a 5-point Likert scale response format to examine the level of job satisfaction. The MSQ short form requires five minutes for completion and has the advantage of measuring components of extrinsic and intrinsic job satisfaction.

Data Analysis

Data analysis is a major step in report writing as it entails the planning, organization, transcribing, storing, analyzing and coding of the information gathered from the research respondents. I reviewed the content of the interview and transcribed the taped interviews. I used both audio and handwritten notes for the interviews to ensure the highest level of gathering information from each participant. I recorded the date, time, and location of each interview.

Analysis of the qualitative data began after the completion of each interview with the participants. I used a thematic inductive approach to analyze the participants

responses to the interview questions. The questions used were designed to prompt

participants to share their experiences from their personal reflections. Responses from the

interview questions were then analyzed using a step-by-step inductive analysis process.

When analyzing the data from the study, I identified primary patterns in the data through

identifying themes and coded them as they related to job satisfaction and retention.

Following the first interview, I identified similarities in how other participants measured

their satisfaction. The process included identifying and labeling relevant words and

phrases in the transcripts. I then placed these repeated patterns into codes that assisted in

analyzing the information and guided the process of completing the identification of

codes.

Trustworthiness

An advantage of conducting qualitative research is the richness of the data

collected that is interpreted and coded in a valid and reliable manner. Trustworthiness of

the analysis is critical to the quality of qualitative research. A powerful strategy used to

ensure trustworthiness and support the credibility of the data is to explore the

phenomenon from multiple views. To achieve this, I used a qualitative approach to my

data collection method which enabled me to triangulate the results. To enable

triangulation, I gave close attention to how I interpreted the views of participants'

experience, used data collection strategies such as observation and field notes, and

reviewed relevant documents when reporting results. As the researcher, it was important

that I examined and triangulated multiple sources of data to address trustworthiness.

Transferability, conformability, and credibility are equally important when reporting the results of content analysis (Elo et al., 2014). Techniques such as member checks and peer review decrease the presence of researcher's subjectivity in the findings which is an important aspect of phenomenological research (Cilesiz, 2010). The researcher must verify with the respondent groups the constructions that emerge from data collected and analyzed. I conducted member checks throughout the interview process to help improve the accuracy, credibility, and transferability of the study. I conducted formal member checks in that I checked for accuracy of information by summarizing the response received from participants and sharing the relevant summary with each participant. Maintaining transparency is another important element of phenomenological research. Transparency allows readers to understand the process by which the findings of the study are produced and interpreted, providing an audit of decisions related to the research (Cilesiz, 2010). I performed a detailed content analysis and then shared the findings and the final draft, so that readers can assess the validity of the research and comment on the findings. Further, I ensured that the results of the study were applicable to the organizations in which the study took place (Shenton, 2004). When presenting the data, I assured each participant the opportunity to have an equal voice.

Summary

In this section, I focused on the research design and methodology for the study. I

used a generic qualitative approach that identified experiences and perceptions involving satisfaction and its impact on retention among direct care workers. I outlined my role of the researcher and the format I used to assist participants in terms of sharing their perceptions and experiences that lead to satisfaction. I described how the design allowed me to identify and gain insights into motivating factors that could contribute to job satisfaction and increased retention. Further, I identified proposed participants for the study and sampling procedures along with data collection and analysis tools. Finally, I discussed the importance of trustworthiness during the research process. In Chapter 4, I present the results of the study.

Chapter 4: Results

This chapter contains the results of the generic qualitative study conducted to answer the primary research question: What are the lived experiences and perceived motivators involved in job satisfaction and retention of direct care workers? In this chapter, I used a generic qualitative study approach with data gathered from in-depth interviews with direct care mental health workers. This chapter also details participants' demographics. The process used to analyze transcripts from the eight individual interviews involved coding and thematically categorizing the data. There were three levels of analysis: open, selective, and theoretical coding. During each level of analysis, constant comparison was used until themes emerged from the data. Included in the chapter are data as well as summaries of from interviews used to emphasize key themes. This chapter concludes with a summary of findings as they relate to the research question.

Setting

Due to COVID-19, each interview took place over the phone. During this data collection process, several participants had to reschedule their initial interview dates or times due of work-related issues attributed to the pandemic. Those who rescheduled reported that due to the pandemic, they were asked to work longer hours due to a shortage of direct workers. Participants selected the day and time that was most convenient for them. Participants were contacted at home, but I called each participant from my office to avoid interruptions. Each participant was interviewed over the phone.

The environment was quiet and posed little interference in terms of my ability to transcribe recorded interviews. The average length of each interview was 45 minutes. No other conditions interfered with participation in the study.

Demographics

All participants in the study were African Americans between the ages of 21-55. Participants were a group of eight direct care workers currently working in mental health settings throughout a metropolitan area of a southern state. Participants consisted of three females and five males. Age demographics, gender and setting are reported below (see Table 1).

Table 1

Demographics of Participants

Participant	Gender	Age	Setting
1	M	50-64	Community Mental Health
2	F	26-49	Mental Health Hospital
3	M	26-49	Mental Health Hospital
4	F	50-64	Mental Health Hospital
5	M	18-20	Mental Health Hospital
6	F	26-49	Community Mental Health
7	M	26-49	Mental Health Hospital
8	M	26-49	Mental Health Hospital

Ethical Procedures

To ensure ethical compliance during the research process, I adhered to the IRB protocols to guide this research project. I included in the consent form my approval number 06-17-20-0310981 with an expiration date of June 16, 2021. Ethical research is important when collecting rich data to understand the phenomenon being studied. As the researcher, I was accountable for the protection of human rights of participants, guarantees of confidentiality, and addressing any ethical concerns. Yin (2018) said that when soliciting voluntary participation for research, each participant should be given an informed consent form which advises them of their rights and the nature of the study. In addition, I followed Belmont Report protocol to ensure that participants had a clear understanding of their rights as participants in the study. Participants were informed of risks involved in the research as well as their right to discontinue their participation at any time. Due to COVID-19, consent forms were emailed to participants detailing research procedures such as the nature of the study, risks, privacy, benefits, and contact information. Participants were required to respond via return emails with a typed statement of consent stating, "I consent to participate in the study" prior to their interview. I also used an audio recorder to make it easier to focus on the interview content and assist with notes. Each interview was recorded on an audio recorder, and participants were informed of the recording both in the consent form and orally prior to the start of the actual interview.

Data Collection

Prior to the start of my research, I obtained permission from business owners near areas that employed direct care workers. Owners were accommodating and offered to post flyers themselves. I also posted announcements on LinkedIn. For this study, semi-structured interviews were the primary data collection source for narrative data. I served as the primary data collection instrument. DeJonckheere and Vaughn (2019) said semi-structured interviews are commonly used in qualitative research and are a primary source of qualitative data in health services research. Participants were eight direct care workers working in the field of mental health. Because of the COVID-19 pandemic, interviews took place over the phone with direct care workers who work and live in metropolitan area of a southern state. Prior to the study, consent forms were emailed to each participant and each participant responded. Participants were invited to answer a set of open-ended questions guided by a flexible interview protocol that I supplemented with follow up questions, probes, and comments in keeping with recommended interview practices. Interviews varied from 45 minutes to an hour (see Appendix A).

I interviewed participants using open-ended questions and used active listening skills to help them feel comfortable sharing their stories. I also used probing to allow participants to draw out rich and detailed descriptions of their experiences. All interviews were recorded, and participants seemed to have put thought into their responses to questions. Upon interviewing eight participants and finding no new data, saturation occurred. Once saturation was achieved, no additional data were collected. Moser and

Korstjens (2018) said that data saturation is achieved when information becomes redundant and participants have provided enough information about the topic under study. As participants reflected on their personal experiences and beliefs, there similarities in terms of responses. Data went through triangulation to ensure findings remained consistent. Each participant seemed forthcoming and comfortable sharing in-depth experiences and beliefs about their work. Conducting semi-structured interviews that included interview questions and probing assisted in prompting deeper reflections for participants and provided unique findings.

Data Analysis

At the conclusion of the interviews, I transcribed each interview and prepared the transcriptions for data analysis. According to Sundler, Lindberg, Nilsson, and Palmér (2017), thematic analysis aims at gaining an understanding of the meanings of patterns from the data from lived experiences. In the analysis of data, I engaged in a step-by-step analysis. I reviewed the content of the interview questions and manually transcribed the recorded interviews. After the completion of each interview, I began analysis by identifying patterns, themes, and dimensions in the data. My initial process of analysis included listening to each taped interview several times to ensure accuracy in reporting the data. I highlighted and identified statements with similar messages, and assigned a descriptor based on the intrinsic factors under study. While reading the data, I created codes and looked for additional themes and patterns to emerge. Responses from participants were then analyzed using a step-by-step inductive analysis process. The goal

of the analysis was to identify meaning of patterns as described by participants as they

share their experiences in their own words. I utilized the following steps to perform the

thematic analysis:

1.   I reviewed recordings and all interview transcripts; highlighted sentences and

     phrases that seemed meaningful based on the key terms in the literature and in

     the framework.

2. I reviewed the highlighted data and determined if the highlighted data was

    relative to the research question.

3. I coded each item of data with a descriptive word.

4. I then connected the data to develop patterns.

5. I defined properties of the themes.

6. I created categories that represented the themes and looked for subthemes

7. After all data was analyzed, I arranged themes to correspond with supporting

    patterns.

8. I wrote a detailed analysis describing the scope and the theme.

9. After the analysis, I described each and elucidated by supporting quotes from

    the data.

10. I then combined themes together to form a composite synthesis of the research

    questions being studied.

After listening to the audio recordings multiple times and transcribing the

interviews, I identified a list of codes, then established which code was related to, or

addressed the research questions. I then grouped the codes into categories that reflected

the themes based on the theoretical concept of intrinsic rewards.

Table 2

Example of Coding Process

Raw Data	Code
"I know I've done a good job when my patients shake my hand and thank me when they are being discharged"	Client feedback
"No opportunities exist if you don't have college hours"	Stagnated
"I've been on the job for almost 25 years and received the recognition in my later years"	Acknowledgment
"I'm responsible for making sure my patients and co-workers are safe"	Ensuring safety
"The work itself is challenging and can be unpredictable because this is mental health"	High performing workforce

Table 3

Example of Code Placement into Larger Categories

Codes	Categories
• Client Feedback • Reaching goals • Praise from clients	• Relationship with clients
• No Career Growth • Feeling limited based on education and experience • Stagnated	• Limitation of Training and development
• High performing workforce • Challenging work • Difficult tasks • Uncertainty	• Work Environment
• Lack of acknowledgment • Appreciation from leadership	• Getting good responses from leadership

Some key coding that emerged from the data were helping others, relationships

with others, commitment, and contentment with a job well done (see Table 4)

Table 4

Inductively Developed Thematic Categories

Research Questions	Thematic Category	Summary
What do you value most about being a DCW?	Achievement	Each participant expressed how their relationship with and positive feedback from their clients is what they value most about working as a DCW.
What are your experiences or opportunities in seeking advancement on your job	Advancement	Overall, participants referred to advancement for DCW's as being limited to job experience and lack of education.
In what ways are you recognized as a valuable employee?	Recognition	Participants described how recognition programs highlighted their job commitment.
What responsibilities do you have in your role as a direct care worker?	Responsibility	Each participant seemed to view their greatest responsibility as ensuring the safety and care of their clients.
What are some of the day to day experiences in working as a DCW?	Work-itself	Each participant described the work itself as challenging when staffing is short, unpredictable due to the client's illness, but rewarding because they can help people in need.

Evidence of Trustworthiness

Credibility, dependability, confirmability, and transferability are the key focus in

terms of trustworthiness of data analysis (Eli et.al., 2014). Participants were identified

based on their age, gender, and the number of years they worked in mental health as a DCW. To ensure credibility in describing the participants lived experience, I recorded each interview and took detailed field notes to help report rich and thick descriptions of experiences conveyed by the participants. At the end of each recording, I listened to the content for a minimum of 3 to 4 times for accuracy in transcribing the interviews verbatim. I then transcribed the interviews, highlighting and underline meaningful content. To ensure dependability, I carefully documented and followed a step-by-step process to code the data. I organized the data and group the information into categories. The categories were used to identify themes. To ensure accuracy of the transcripts, I double checked the transcripts with the audio recordings. I transcribed and kept field notes, followed my interview guide, I used codes to identify themes, and I secured the files of each participant. To address confirmability, I journaled following each interview and made notes of words or phrases that stood out during the interviews. I also made notes of my thoughts on details such as reasons participants gave for rescheduling as it related to working conditions and the pandemic. To guarantee transferability, I reviewed the transcripts and verified that each response aligned with the recorded interview. I then provided readers with evidence that the sample participants possessed the knowledge and experience that fully represented their field and that the information they provided w meaningful to the topic under study.

Results

Raw data best captured participants' perceptions of how intrinsic factors impact their job satisfaction and retention. In this generic qualitative inquiry, open-ended interview questions were used for guiding each participants response to the same sequence of questioning. Using open-ended questions provided me the opportunity to avoid steering respondents in a particular direction when responding to the questions, and instead gave each direct care worker an opportunity to present reliable and valid information based on their lived experience.

There was a consensus among the participants that the bond with their clients and the appreciation received from client feedback was perceived as achievement. All reported having a meaningful relationship with their clients and a sense of satisfaction with their work performance which also was supported by the clients' responses. The bonding relationship between the participants and their clients tend to resemble that of a family commitment.

Themes

The themes that emerged from the guiding questions are summarized and identified based on intrinsic rewards of (a) achievement, (b) advancement, (c) recognition, (d) responsibility, and (e) work itself. The quotes from participants are used to support the perceptions of the data collected during the interview.

Theme 1: Experiences with Achievement

Participants perceived their relationship with their clients as the greatest measure of achievement. Each participant reported having developed a strong bond with their clients and that they "looked forward" to assisting clients and providing their day to day needs. Most cited a genuine concern for ensuring the safety and wellbeing of their clients as their achievement. Participants also described their achievement in terms of the good feedback they received from the clients and family members they cared for. Participants described their achievements with the following statements:

"I know I've done a good job when my patients shake my hand and thank me when they are being discharged".

"My patient always tells me how he appreciates the time I take out to just sit and talk with him".

"My greatest achievement and what I value most about being a direct care work is caring for people in need and hearing them say "I did a good job".

"I cared for a patient until he died, and I felt good for being able to do that".

To summarize the theme that emerged from the data in relation to achievement, the research question asked, "What do you value most about being a DCW"? Participants described how taking care of their clients was meaningful to them and what meant even more was feedback from their clients that indicated a job well done. The client-staff relationship seemed to have made a significant impact on their achievement.

Theme 2: Experiences with Advancement

Many participants described their experience with as advancement as limited due to a lack of education and years of experience. Some participants voiced a sense of contentment with their jobs even though they believed that advancement opportunities were limited. Three of the eight participants reported having participated in training that allowed them to advance to supervisory positions over fellow direct care workers, while others felt that there was no real opportunity provided for advancement. One participant reported being on the job for at least five years with no opportunities to advance, and others confirmed similar statements.

Comments included:

"There's not too many opportunities for promotions or raises in this role".

"I really don't want a promotion because I work a shift that allows me to do other things like go to school".

"No other opportunities exist if you don't have some hours of college".

"Because of my education, I am at the height of my career but my years of experience made it possible to advance to the point of a direct care supervisor".

"You can sometimes move up if you go to training, but it's still direct care work".

To summarize the theme that emerged from the data in relation to advancement, the interview question asked, "What are your experiences or opportunities in seeking advancement on your job"? Overall, participants experienced limited to no significant

training for opportunities to advance. Nevertheless, this experience did not appear to change their sense of commitment to the job or the organization.

Theme 3: Experiences with Recognition

In addressing the theme that emerged from recognition, participants offered statements regarding their recognition. Most believed that their organization had standard recognition programs for all employees, and few were directed to direct care workers specifically. One participant highlights a recognition program geared directly to direct care but believed that over the years, effort placed in the program had diminished. The participants gave the following examples:

"I was recognized for both employee of the month, and employee of the year".

"I've been on the job for almost 25 years and received the recognition in my later years".

"The Employee Recognition Program recognizes the years on the job but not the work we do".

"I seldom attend the recognition program due to shortage of staff and an inability to leave my assigned post".

"We're not really appreciated".

"My clients recognize the work that I do, and that's enough for me".

To summarize the participants response to being recognized as a valuable employee. Most seemed to view recognition programs as adequate while others expressed a dissatisfaction with administration due to the lack of recognition, they felt deserved. Interestingly, each participant in the study had been recognized as employee of

the month at some point in their career. Participants also reported not feeling valued by their supervisors or hospital administration and seemed to have placed more value on the recognition they received from their clients.

Theme 4: Experiences with Responsibility

Most participants described their primary responsibility as taking care of and meeting the needs of the clients. Participants who had supervisory roles felt responsible to both the staff and clients in their care. Participants seemed to have a deep sense of accountability to the clients and appeared to prioritize their clients care over any additional responsibility they had.

Participants stated the following:

"Making sure my clients daily needs are met such as dressing, bathing, and getting them ready for appointments, is a responsibility that has not changed in my twenty years working here".

"As a supervisor, I'm responsible for the staff, their schedule, daily assignments, and making sure staff take care of their assigned clients".

" I'm a responsible person in general, but my biggest responsibility at work is to make sure my patients and co-workers are safe and I'm committed to coming to work "day after day", "year after year" and "hanging in there".

To summarize the theme that emerged from the data in relation to responsibility, the research question asked, "What responsibilities do you have in your role as a DCW"? Participants pointed out that their primary responsibility was to the clients they served.

This included but was not limited to assisting them with activities of daily living, ensuring their safety, and being present to make sure the other activities take place. There was also co-worker responsibility whereby most believed that showing up and working as a team was important to the outcome of ensuring a safety work environment for everyone on their service.

Theme 5: The Experience of Work itself

When describing some of the day to day experiences in working as a direct care worker, participants described their job duties as providing hands on assistance to clients with daily skills like bathing, eating, going to appointments, and observing their behavior. Most participants shared similar experiences about work overload, having a challenging and unpredictable work environment, and working short. Participants believed that their work was considered routine practice given the environment and role that they work in. Participants stated the following:

"Taking care of patients when you're short of staff is hard, but the work has to get done".

"The work itself is challenging and can be unpredictable because this is mental health".

"I feel even more valued being able to succeed in performing a difficult task".

"I take special care in making sure my clients are shaved and dressed properly every day and that's the one thing I really like about my work, and it gives them a sense of pride in how they look".

To summarize the emerging theme of the work itself, it was found that most employees experience challenging times due to shortage of staff, high turnover, and

unpredictable clients who suffer from a mental illness but require hands on assistance and

monitoring from these workers. Despite this, participants stressed the importance of

doing the best at their jobs. Statements such as these demonstrates the value participants

place in the work they do.

Participants also described their current experiences with work due to Covid-19.

Most described the working conditions as even more stressful for similar reasons like

"work overload and shortage of staff" however, they now attribute the fear of contracting

the virus as a cause for even more concern. Only one participant voiced concern about

the lack of protective gear and believed that it was a major reason why "half the staff are

out", whereas the majority of the participants described having adequate PPE supplies but

were more concerned about social distancing with clients who require hands on

assistance with most of their needs.

<div align="center">**Summary**</div>

Participants in this study described the importance of their client relationships,

which appeared to be a much better indicator of their job satisfaction and retention when

compared to other rewards They described challenges involved with the job such as

work overload due to staff shortage and limited career advancement. Participants'

perceptions of bonds with their clients seem to show the presence of intrinsic motivators

that lead to both job satisfaction and retention.

Chapter 5 includes the findings from the study and how the study relates to the

current body of literature regarding job satisfaction and retention among direct care

workers in the field of mental health. Also included in Chapter 5 are limitations of the

study, recommendations for future research, and implications for positive social change.

Chapter 5: Discussion, Conclusions, and Recommendations]

Introduction

I conducted this generic qualitative study to answer this research question: What are lived experiences and perceived motivators involved in job satisfaction and retention among direct care workers in the field of mental health? Participants in the study were direct care workers who currently work in mental health organizations located in the metropolitan area of a southern state. Participants responded to semi-structured interview questions involving themes based on Herzberg's intrinsic rewards. In this chapter, I present an interpretation of findings, limitations, recommendations for future studies, and implications for social change.

Interpretation of the Findings

Participants mentioned intrinsic rewards such as recognition, sense of achievement, opportunity for advancement, and the work itself contribute to job satisfaction and retention of direct care workers who work in mental health settings.

Participants identified achievement in terms of the work they performed and the positive feedback they received from their clients. Most reported having developed strong bonds with their clients and looked forward to caring for them. One participant stated, "When I cared for a patient until he passed was the time when I felt most satisfied." Khanna (2017) said that employees experience a sense of achievement when their job duties reflect their capabilities and allow them to maximize the use of their skills and talents. Participants in the study expressed a sense of value in the way they performed

their jobs under challenging conditions. Khan, Waqas, and Muneer (2017) said intrinsic

rewards fulfill employee motivation and are characterized by factors such as performing

challenging tasks. Participants said that their duties and responsibilities to clients

contributed to their commitment. They expressed that a job well done was their definition

of achievement.

Data also showed that employees believed that advancement opportunities were

limited due to their lack of education and work experience outside of direct care.

Improving these opportunities would lead to a greater sense of satisfaction and retention.

Another participant said, "I always look for ways to better myself on the job so that I can

move up, but the opportunities are just slim to none." Khan et al. (2017) said job

advancement leads to long term satisfaction of employees and promotional opportunities

are vital to employee engagement. Promoting employee engagement is challenging;

however, organizations are realizing the importance of providing adequate training and

building meaningful work environments intended to encourage employees responsible for

providing meaningful contributions to the organization. According to Momanyi and

Kaimenya (2015), lack of employee training and development opportunities result in

inadequate promotion and career advancement, which in turn leads to turnover intention

of employees.

The outcome of an organizations failure to implement strategies that transcend

into intrinsic rewards could be detrimental to any organization. Allam (2017) said that

employees not fully engaged in their work can generate negative relationships with job

satisfaction, commitment, and retention within organizations. Osborne and Hammoud (2017) said employees who experience intrinsic rewards such as dedicated and meaningful work are more likely to recognize their value within the organization, which in turns fosters increases in employee engagement.

Participants highlighted what they perceived to be meaningful work despite inadequate training and opportunities for promotion. This again highlights the importance of recognition among these participants. A primary determinant of raising job satisfaction and morale is recognizing employees' good performance.

The findings of the study suggest that recognition is important to most participants; however, most believed that recognition efforts within their organizations were inadequate. To improve their satisfaction and retention, participants suggested recognizing employees for their hard work, not only in terms of their years of commitment but for the work they performed. Khan et al. (2017) said that recognizing an employee's performance through verbal praise or even an informal pat on the back has been proven to boost employees' self-esteem and happiness, which results in contributing efforts that lead to satisfaction. Ensuring a sense of appreciation among employees using tangible rewards such as bonuses, achievement certificates, and prizes in the presence of their coworkers have all been indicators that support employee retention (Khan & Qadir, 2016).

Participants also shared experiences involving challenges inherent to working in the field of mental health, such as responsibilities for caring for clients diagnosed with a

serious mental illnesses, work overload due to staff shortages, and unpredictable work environments, yet despite these factors, they found value in terms of ensuring the safety and care of their clients.

Participants also reported that the absence of certain work conditions made it difficult for workers to stay. They identified concerns that may contribute to turnover such as shortage of staff in general, especially during COVID-19. One participant said that the "administration is not getting patients who test positive for Covid-19 off the building but if they did, maybe staff wouldn't call out." While being shorthanded has always been a genuine concern for these workers, the burden seems to be heightened during a national pandemic.

Outside of staff shortages, participants perceived that advancement and extrinsic rewards such as pay and working conditions may contribute turnover. Participants reported that, "having to wait for a pin to open to apply for a promotion sometimes run people away". "If they pay more, the younger people might stay longer". "The supervisors can run people away with the way that they talk to you". Direct care workers in the study also pointed out their belief that turnover rates are greater in younger employees and for those who have been employed for under a year. One participant stated, "I can tell when a new employee walks on the building, how long they will stay."

It was found from the study that Herzberg's theory of job satisfaction based on intrinsic satisfaction can be successfully applies to this unique group of workers. Overall, most participants seemed satisfied in the areas of recognition, achievement, and the work

itself. Participants took their responsibilities to both clients and co-workers very seriously and viewed their relationships with their clients as a strong indicator of their satisfaction and the reason why they stay. Participants perceived their work as satisfying but most believed that if efforts to improve recognition and advancement opportunities improved, so would their satisfaction and retention.

Limitations of the Study

The purpose of this study was to determine how intrinsic rewards affect job satisfaction and retention among direct care workers in mental health settings. My first limitation was the focus on direct care workers in mental health settings in a metropolitan area of a southern state. Because this study addressed the beliefs of mental health direct care workers, the opinion of direct care workers from other specialties may not be generalized. Therefore, focusing on this unique population may limit the transferability of results. The research is also limited to understanding intrinsic rewards which only examine one aspect of Herzberg's two-factor theory. The next limitation of this study is that the study was conducted during a national public health crisis due to the COVID-19 pandemic. During this global epidemic, mortality rates increased worldwide including health care settings. Participants performed their duties under more adverse working conditions. During recruitment, interviews were delayed or postponed due to a higher demand for workers to cover additional shifts. Participants describe the added stress they endured due to concern of exposure to the virus, receiving adequate protective gear to perform their duties, and having to work in close proximity of their clients when

performing their job duties that required hands on care.   Another limitation was in the recruitment process that was limited to posting flyers at a time when due to COVID-19, most businesses were closed or modified their hours of operation. Also, a result of the health crisis, face to face contact was prohibited and data collection procedures were limited to e-mail correspondence to receive consent, and over the phone interviews. The small sample size could also serve as a potential limitation, yet though it met the requirements for a generic qualitative study, having more participants could strengthening the knowledge on satisfaction and retention of direct care workers.

Recommendations

According to Espinoza (2017), the demand for direct care workers is projected to increase from at least 5.2 million by 2024 to even further growth by the year 2030. Challenges faced in satisfying and retaining this unique population led me to the following recommendations. One recommendation is that future research be conducted using extrinsic motivators and their role in the satisfaction and retention of these workers. The information gathered in my study focused on perceptions of intrinsic rewards that may contribute to satisfaction and retention. In addition, further research on employee recognition could support efforts toward employee retention and satisfaction among these workers.

Another recommendation is that future research studies should not be limited to inclusion criteria of at least two years of employment. The average length of stay for the participants in the study ranged from 2 years to 25 years with most participants having

worked an average of 15 years. Because recognition was perceived as a strong indicator

of satisfaction, another recommendation is that this aspect of intrinsic rewards be pursued

in further research to examine whether a connection exists between achievement and

recognition. The findings from this study suggest that participants believed that intrinsic

rewards such as achievement, responsibility, and the work itself enhanced their

satisfaction and motivation to stay on their jobs. However, they believed that

organizational leadership could provide improvement in the areas of advancement and

employee recognition. Sahir, Phulpoto, and Zaman (2018) said that to retain employees

long term, organizations should provide training and develop opportunities for their

employees, to generate self-achievement and growth. The data revealed that direct care

workers enhanced recognition, training, and advancement opportunities. Implementing

programs that provide for support in these areas could make a difference in the work lives

of these employees, the clients they serve, and organizational leadership.

Implications

Job satisfaction and retention is important to the success of any organization. The

findings from this study produced several implications for social change. One

implication is organizational policy as it relates to programs that provide for skills

training and development, and ways to offer advancement opportunities for these

workers. Enhancing and implementing new polices that address these changes could

have a positive impact on employees' overall work experiences. The results of this study

can also inform mental health organizations, stakeholders, and policy makers about the

importance of addressing issues of satisfaction and retention that can impact the overall

success of the organizations.

Another implication for positive social change derived from this study is the need

to listen to the voices of direct care workers. Most participants shared experiences of

their relationships with their clients more so than that of their co-worker, supervisor, or

upper level administration. One participant described a time when the administrators

along with their supervisors toured the buildings and talked directly with employees and

patients. The experience was described as "meaningful and a good way to connect and

get to know the staff." Having face to face conversations about the day to day challenges

and acknowledging employees' viewpoints could promote a sense of autonomy within

the workforce. Because participants expressed the gratitude and value in having close

relationships with their clients, providing opportunities for social engagement with their

clients, could contribute to bonding relationships which in return may have and positive

impact on the overall work environment. It is also significant to recognize these workers

for the critical role they play in caring for their clients and ensuring safety in a

challenging work environment. Another implication of this study is that in order to

motivate direct care workers in mental health organizations, administration should find

solutions to address the needs of these workers. With that, social change may be

observed in the increase of employee and patient satisfaction and an increase in employee

retention. All participants reported that they would refer others to their organization

therefore, having satisfied employees could also have an impact on recruitment efforts for the organization.

Conclusion

Previous literature on job satisfaction in mental health services has focused on burnout and employee turnover . Current efforts to understand what satisfies direct care workers and keep them on the job particularly in mental health settings commonly focus on extrinsic measures such as pay, organizational leadership, and working conditions. While understanding these factors is necessary given the low salaries and reported burnout in these workers, understanding the impact of intrinsic motivators should also be studied in greater length.

This present study raises many questions for future research regarding lived experiences that lead to satisfaction and retention among mental health direct care workers. It also adds to dearth of research on these workers and provides a foundation for future researchers to expand the knowledge and understanding of job satisfaction and retention in mental health settings as well as ways to create a work environment that fosters improved satisfaction and retention among this understudied population.

The results of the study show that the presence of intrinsic factors like achievement, responsibility, and the work itself, are perceived motivators, or indicators that lead to satisfaction and retention. Furthermore, findings indicate that strategies designed to improve recognition and opportunities for advancement are particularly important ways to increase job satisfaction and retention among these workers.

Recurring themes expressed by the participants suggests that the greater their autonomy, the greater their job satisfaction. While a range of job demands were influential in the perception of what satisfied these workers, the level of care they provided under demanding work conditions, offered these workers a sense of fulfillment in knowing that they played an integral part in someone improving to the point of discharge. Furthermore, providing a safe environment for co-workers and clients and developing a bonding relationship with the client seemed to outweigh the demands of a challenging work environment. While participants voiced their opinions of the need for improvement in the area of growth and recognition for their hard work from supervisors and administration, the presence of their intrinsic experiences were perceived as fulfilling and personally satisfying to this group of workers.

Overall, contributions from this study include a better understanding of how intrinsic motivators impact job satisfaction and retention among mental health direct care workers. I concluded from the findings that greater attention should be paid to their intrinsic motivation to stay committed to the job. The research shows that the demand for these skilled workers will continue to rise, thus should efforts to satisfy and retain this skilled group of workers. In an effort to increase their satisfaction and commitment, the voices of these workers have called on leadership and administration to create better growth opportunities and improve ways that acknowledge and show appreciation for their work and dedication to the organization.

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Appendix A: Minnesota Satisfaction Questionnaire]

Minnesota Satisfaction Questionnaire (MSQ)* Short Form

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Ask yourself: How satisfied am I with this aspect of my job?

5 = Extremely Satisfied 4 = Very Satisfied 3 = Satisfied 2 = Somewhat Satisfied 1 = Not Satisfied

1. **Being able to keep busy all the time.**

2. **The chance to work alone on the job.**

3. **The chance to do different things from time to time.**

4. **The chance to be "somebody" in the community.**

5. **The way my boss handles his/her workers.**

6. **The competence of my supervisor in making decisions.**

7. **Being able to do things that don't go against my conscience.**

8. **The way my job provides for steady employment.**

9. **The chance to do things for other people.**

10. **The chance to tell people what to do.**

11. **The chance to do something that makes use of my abilities.**

12. **The way company policies are put into practice.**

13. **My pay and the amount of work I do.**

14. **The chances for advancement on this job.**

15. **The freedom to use my own judgment.**

16.   **The chance to try my own methods of doing the job.**

17.   **The working conditions.**

18.   **The way my co-workers get along with each other.**

19.   **The praise I get for doing a good job.**

20.   **The feeling of accomplishment I get from the job.**

Appendix B: Sample Questionnaire

(Job satisfaction sample questions)

1. Describe a time when you felt satisfied with your work?

2. What were the circumstances that may have contributed to your job retention?

3. What do you value most about being a direct care worker?

4. How would you categorize your experiences as a direct care worker?

5. What are your experiences with seeking advancement within your workplace?

6. What specific considerations have influenced your decision to remain in your organization?

7. How has leadership at your organization contributed to your job satisfaction?

8. How likely are you to refer someone to work at your organization?

9. In what ways are you recognized as a valuable employee?

10. In your opinion, what could your organization do to increase your job satisfaction?