

# Factors Influencing Retention and Job Satisfaction among Health Workers in Public and Private Health Care Facilities: A Comparative Study

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## Abstract:

### ➤ *Background:*

Health workers retention and job satisfaction are critical to the stability and efficiency of any well performing healthcare systems in the world. However, factors affecting retention and job satisfaction vary between public and private healthcare facilities; they include salary, work environment, career growth, and job security among others. This study sought to identify key factors that contributing to retention and job satisfaction and their differences among health workers private and public healthcare facilities.

### ➤ *Methods:*

The study was a descriptive cross-sectional study was out among 353 and 60 health care workers in a public and private health facility in Keffi. Purposive sampling technique was used to select the sample size. A semi structured self-administered questionnaire was used to collect data. The collected data was analyzed by using descriptive and inferential statistic.

### ➤ *Results:*

The study had more female respondents with M: F ration of 1:1.2. Majority 344(85.6%) of the respondents works in the public health facilities, they are Nurse 179(44.5%) with over 10 years of working experience 208(51.7%). Salary was not competitive when compared with other clime in both public 150(37.3%) and private 90(22.3%) health facilities. Public health workers enjoy timely payments of salary, promotion and access to training. Overall health workers in both public 270(67.1%) and private health facilities are not satisfied with their job. A higher proportion of health workers 47 (81%) intend to leave the private healthcare facility when compared to 218 (63.4%) who intend leaving from the public health facility and the association is significant with a p-value is 0.009. Comparing job satisfaction between employees in public and private health facilities, Private health facility showed a higher level of job satisfaction with a mean rank value of (224.17), when compared to their counterparts in the public healthcare facilities with a mean rank value of (197.68) but it's not statistically significant p-value is 0.060.

### ➤ Conclusion:

This study revealed clearly the poor remuneration status in both the public and private health facilities. with many of the health worker ready to leave their jobs due to lack of satisfaction and poor job retention strategies. This research therefore, provides valuable insights for healthcare administrators and policymakers to improve retention and job satisfaction, ensuring a stable and motivated healthcare workforce.

**Keywords:** Job Satisfaction, Retention, Health Workers, Facilities, Public, Keffi.

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## I. INTRODUCTION

Health workers retention and job satisfaction are critical to the stability and efficiency of any well performing healthcare systems in the world. Job retention is defined as the ability of an organization to retain its employees or workers in its service (Rana & Shakya, 2021; Buffington et al., 2012). Healthcare institutions (Public or Private) can retain workers through various strategies such as supportive management systems and constructive leadership (Noufa & Maye, 2013). Retention of health workers is influenced by both intrinsic and extrinsic factors such as working environment, compensation, work-life-balance and superior-subordinate relationship. Factors that encourage job retention include the presence of positive feedback, job-autonomy, innovative and supportive organization culture (Irshad, 2014; Raziq & Maulabakhsh, 2015).

Job satisfaction on the other hand refers to employees' feelings about the different aspects of their jobs (Gyang, 2018). It is a complex function of a number of variables such as gratification, fulfillment, joy, happiness, compensation, excitement, and self actualization from performing their jobs (Gesinde & Adejumo, 2012). A worker might be satisfied with an aspect of his or her job and at the same time be dissatisfied with some other aspect of the same job (Roopalekha, 2011). The factors that contribute to job satisfaction can be broadly divided into individual, group and organizational (Mohase & Khumalo, 2014).

Job satisfaction is a catalyst for improved performance, efficiency and workforce retention (Ezeja, et al 2010; Cabrita & Perista, 2007). Contrariwise job dissatisfaction is profound cause employee absenteeism, job migration, workers burn out and poor productivity among others. (Diaz-Serrano, 2005; Gazioglu & Tansel, 2002) However, factors affecting job satisfaction and retention vary between private and public healthcare facilities, influenced by aspects such as salary, work environment, career growth, and job security (Masum, 2016). The delivery of health services anywhere in the world is dependent on factor like human resources, delivery systems, and health infrastructures. The availability of human resources is sine qua non to any well function health care service delivery system (Kolo, 2018). The study of job retention and satisfaction among health workers in Nigeria remains critically important due to

several evolving factors: like the 2024 national policy on health workforce migration, persistent challenges in job satisfaction from workload, inadequate infrastructure and limited professional (due to the JAPA SYNDROME). The present economic landscape in the country has a profound influence on healthcare funding and resource allocation. Thus, need for tailored retention strategies as generic retention strategies may not effectively address the unique challenges faced by Nigerian healthcare workers. Several research findings had shown different levels of job satisfaction, dissatisfaction and job retention determinants among healthcare professionals in Nigeria. Notably at the time of our study, no research had been done in our center and no studies had compared these factors between public and private health facilities (Onwujekwe, 2024; Adeniran & Olawale, 2023; Eze & Nwosu, 2023; Senbounsou, et al 2013).

### ➤ Aims and Objectives

The aim of this study is to explore the determinants of job satisfaction and retention among health workers in private and public healthcare facilities using Federal Medical Centre and Nagari Hospital both in Keffi, Nasarawa State.

The objectives of the study are as follows

- To determine factors contributing to job retention in private and public health facilities.
- To determine factors affecting job satisfaction among healthcare workers in private and public health facilities.
- To analyze differences in job satisfaction and retention between private and public healthcare facilities.

## II. METHODOLOGY

### ➤ Study area

The study was conducted at two facilities namely the Federal Medical Center (Public facility) and Nagari Hospital (Private facility) both in Keffi, North Central, Nigeria. The Federal Medical Centre, Keffi is a government owned tertiary institution with an approximate staff strength of 3,000 while Nagari Hospital has approximate staff strength of 70 healthcare workers providing a range of healthcare services across various departments to dwellers of Keffi and its adjoining environs. The researchers chose these facilities for the study in view of their large staff strength.

### ➤ Study Population/ Design

The study was a descriptive cross-sectional study was carried out to assess factors influencing retention and job satisfaction among healthcare workers including doctors, nurses, administrative staff, laboratory scientists, and other support staff at Federal medical Centre, Keffi and Nagari Hospital, Keffi between the months of April and May 2025. The calculated sample using Taro Yamane's formula was 353 and 60 for Federal Medical Centre, Keffi and Nagari Hospital respectively. (Yamane, 1967) This sample size allows for sufficient statistical power and representativeness of the study population. Purposive sampling technique was used to select sample ensuring that participants from various departments and job categories were included to improve the diversity of the sample. Participation in the study was voluntary and an informed consent was obtained from all the participants. The inclusion criteria were all categories of health professionals who were present and working in the hospital during the study period and those who were absent or declined to participate in the study were excluded. The workers in both hospitals were grouped according to their professional status. Participants were selected by taking a simple random selection from each professional group taking their population into consideration. Data collection was done with a semi-structured, self-administered questionnaire developed by researcher based on reviewed literature and consulting with subject experts. Instrument consisted of 4 parts. Part I related to socio demographic characteristics, part II focused on factors contributing to retention comprised of 21 items graded on a 4 Point Likert Scale (strongly agree, agree, disagree and strongly disagree). These items covered remuneration, promotion/ evaluation system, work environment, training and leadership style. Part III consisted of Job satisfaction (9 items) graded on a 5 Point Likert Scale (very satisfied, satisfied, neutral dissatisfied, very dissatisfied). Questions in this part of the questionnaire were developed from a published study by Okaro, 2010. Part IV consisted of 2 questions on intention to leave work. The tool was pretested among 10% of sample. Reliability in terms of

consistency of tool was tested by calculating Cronbach's alpha value which was 0.82. In the descriptive analysis of part II, categories strongly agree and agree were combined as positive response. Similarly, disagree and strongly disagree were combined as negative response. While part III, categories very satisfied and satisfied were combined as positive response. Similarly, dissatisfied, very dissatisfied were combined as negative response. Both responses are displayed on tables 2 and 4. For the purpose of analysis, the questionnaire employed a 4 and 5 Linkert scale with responses allocated points from 1-4 and 1-5 respectively. The total score received= (total number of responses of 5×5)+(total number of responses of 4×4)+(total number of responses of 3×3)+(total number of responses of 2×2)+(total number of responses of 1×1). The maximum total score was calculated by summing the total number of questions with answers against each response× 4 or 5 based on the Linkert scale used. Data collected will be entered into a computer and analyzed with IBM Statistical Package for the Social Sciences, version 27. Descriptive statistics (frequency, percentage, mean and standard deviation) ,Chi-square test will be used to evaluate association between types of facilities and job retention, and P value < 0.05, at 95% confidence interval(CI) will be taken as level of statistical significance. Comparative analyses, such as Mann-Whitney U test were conducted to assess differences in job satisfaction between the two facilities.

### ➤ Ethical Considerations

Ethical approval was obtained from the health research ethics committee (FMH-Ref No: C.5187/76 IT). Participation was voluntary, and respondents were assured of confidentiality and anonymity. No personal identifiers were collected, and data were used solely for research purposes.

### ➤ Data Availability

The derived data supporting the findings of this study are available from the lead author on request.

## III. RESULTS

Table 1 Socio-Demographic Characteristics of Respondents

Age		
	Frequency	Percentage
<40 Years	197	49%
40 years and above	205	51%
Total	402	100%
Gender		
Male	185	46.0%
Female	217	54.0%
Total	402	100%
Tribe		
Yoruba	88	21.9%
Hausa	33	8.2%
Igbo	50	12.4%
Others	218	54.2%
Fulani	13	3.2%
Total	402	100%

Marital Status		
Single	70	17.4%
Married	319	79.4%
Widowed	7	1.7%
Divorce/Separated	6	1.5%
Total	402	100%
Years of Experience in the Health Sector		
<5 years	73	18.2%
5–10 years	121	30.1%
>10 years	208	51.7%
Total	402	100%
Types of Health Facility		
Public Hospital	344	85.6%
Private Hospital	58	14.4%
Total	402	100%
Current Job Title		
Doctor	72	17.9%
Administrative staff	37	9.2%
Nurse	179	44.5%
Pharmacist	29	7.2%
Laboratory Technician/other paramedics	32	8.0%
Others	53	13.2%
Total	402	100%

Table 1 showed that of the 413 questionnaires administered, 402 were completed and returned given a response rate of 97.3%. The age distribution was nearly even, 51% of the respondents were aged 40 years and above. There were 185 (46%) males and 217 (54%) females in the study with M:F ratio of 1:1.2. Majority of the respondents belong to tribe identified as others 218 (54.2%), followed by the Yoruba tribe 88 (21.9%) and the Fulani tribe ranked least accounting for 13(3.2%). A larger proportion of the

respondents 319 (79.4%) were married with slightly above half 208 (51.7%) having a working experience for more than 10 years. Many of the respondents 344 (85.6%) were employed in public facilities, while only 58 (14.4%) were employed in private facilities. The Nurses form the largest group of health workers accounting for 179 (44.5%), followed by Doctors 79 (17.9%) and the pharmacists 29 (7.2%) ranking the least.

Table 2 Retention Factors by Type of Facility

S/N	Retention Factor	Facility	SA N(%)	A N(%)	Total N(%)	D N(%)	SD N(%)	Total N(%)
1	My salary is competitive compared to similar roles	Public	20(5.0%)	102(25.4%)	122(30.4%)	100(24.9%)	50(12.4%)	150(37.3%)
		Private	2(0.5%)	27(6.7%)	29(7.2%)	77(19.1%)	13(3.2%)	90(22.3%)
2	I receive timely salary payments	Public	21(5.2%)	200(49.7%)	221(54.9%)	130(32.3%)	30(7.5%)	133(39.8%)
		Private	10(2.5%)	1(0.2%)	11(2.7%)	8(2.0%)	0(0.0%)	8(2.0%)
3	My benefits (health insurance, housing, bonuses) are satisfactory	Public	3(0.7%)	60(15.0%)	60(15.7%)	200(49.7%)	100(24.9%)	300(74.6%)
		Private	0(0.0%)	14(3.5%)	14(3.5%)	10(2.5%)	22(5.5%)	32(8.0%)
4	Clear policies for career advancement	Public	18(4.5%)	200(49.7%)	218(54.2%)	80(19.9%)	30(7.5%)	110(27.4%)
		Private	4(1.0%)	14(3.5%)	18(4.5%)	48(11.9%)	8(2.0%)	56(13.9%)
5	Equal opportunities for promotion based on performance	Public	10(2.5%)	208(51.7%)	218(54.2%)	100(24.9%)	40(10.0%)	140(34.9%)
		Private	8(2.0%)	0(0.0%)	8(2.0%)	34(8.5%)	1(0.2%)	35(8.7%)
6	Promotion based on merit not favoritism	Public	10(2.5%)	100(24.9%)	110(27.4%)	100(24.9%)	30(7.5%)	130(32.4%)
		Private						

		Private	8(2.0%)	104(25.9%)	112(27.9%)	43(10.7%)	5(1.2%)	48(11.9%)
7	My performance is evaluated fairly and objectively	Public	10(2.5%)	200(49.7%)	210(52.2%)	100(24.9%)	20(5.0%)	120(29.9%)
		Private	1(0.2%)	53(13.2%)	54(13.4%)	14(3.5%)	3(0.7%)	17(4.2%)
8	Feedback from evaluations helps improve performance	Public	40(10.0%)	200(49.7%)	240(59.7%)	80(20.0%)	10(2.5%)	90(22.5%)
		Private	3(0.7%)	43(10.7%)	46(11.4%)	11(2.7%)	8(2.0%)	19(4.7%)
9	Satisfied with performance appraisal system	Public	8(2.0%)	150(37.3%)	158(39.3%)	100(24.9%)	20(5.0%)	120(29.9%)
		Private	1(0.2%)	56(14.0%)	57(14.2%)	56(14.0%)	9(2.2%)	65(16.2%)
10	Workplace has adequate resources	Public	4(1.0%)	100(24.9%)	104(25.9%)	100(24.9%)	90(22.4%)	190(47.3%)
		Private	0(0.0%)	34(8.5%)	34(8.5%)	66(16.4%)	6(1.5%)	72(17.9%)
11	Good work-life balance	Public	5(1.2%)	100(24.9%)	105(26.1%)	80(20.0%)	60(15.0%)	140(35.0%)
		Private	0(0.0%)	62(15.4%)	62(15.4%)	89(22.1%)	5(1.2%)	
12	Feel safe working in current facility	Public	10(2.5%)	200(49.7%)	210(52.2%)	80(20.0%)	20(5.0%)	100(25%)
		Private	9(2.2%)	57(14.1%)	66(16.3%)	9(2.2%)	7(1.7%)	16(2.9%)
13	Workload is manageable	Public	10(2.5%)	100(24.9%)	110(27.4%)	100(24.9%)	60(15.0%)	160(39.9%)
		Private	4(1.0%)	89(22.1%)	93(23.1%)	32(8.0%)	6(1.5%)	38(9.5%)
14	Access to continuous professional training	Public	13(3.2%)	200(49.7%)	213(52.9%)	100(24.9%)	50(12.4%)	150(37.3%)
		Private	1(0.2%)	0(0.0%)	1(0.2%)	36(9.0%)	1(0.2%)	37(9.2%)
15	Organization supports further education	Public	10(2.5%)	20(5.0%)	30(7.5%)	100(24.9%)	20(5.0%)	120(29.9%)
		Private	9(2.2%)	50(12.4%)	59(14.6%)	12(3.0%)	0(0.0%)	12(3.0%)
16	Training programs are relevant to job role	Public	11(2.7%)	200(49.7%)	211(52.4%)	60(14.9%)	20(4.9%)	80(19.8%)
		Private	8(2.0%)	59(14.7%)	67(16.7%)	16(4.0%)	0(0.0%)	16(4.0%)
17	Supervisor/manager is supportive	Public	30(7.4%)	200(49.7%)	230(57.1%)	50(12.4%)	10(2.5%)	60(14.9%)
		Private	5(1.2%)	97(24.1%)	102(25.3%)	4(1.0%)	9(2.2%)	13(3.2%)
18	Leadership values employee contributions	Public	10(2.5%)	200(49.7%)	210(52.2%)	100(24.9%)	10(2.5%)	110(27.4%)
		Private	1(0.2%)	35(8.7%)	36(8.9%)	31(7.7%)	12(2.0%)	43(9.7%)
19	Management decisions consider employee welfare	Public	10(2.5%)	100(24.9%)	110(27.4%)	90(22.4%)	50(12.4%)	197(34.8%)
		Private	0(0.0%)	53(13.2%)	53(13.2%)	95(23.6%)	2(0.5%)	97(24.1%)

Table 2 showed that workers in both public 150 (37.3%) and private 90 (22.3%) health facilities reported that salaries were not competitive when compared to similar roles in other climes. Public health facility workers enjoyed timely payment of salary 221 (54.9%), clear policies for carrier

advancement 218 (54.2%), equal opportunity for promotion 218 (54.2%), access to training 213 (52.9%) and useful feedback 240 (59.7%). However, these were not readily obtainable in the private health facilities.

Table 3 Job Satisfaction by Type of Facility

S/N	Factor	Facility	VS N(%)	S N(%)	Total N(%)	D N(%)	VD N(%)	Total N(%)
1	Salary and benefits package	Public	6(1.5%)	101(25.2%)	107(26.7%)	163(40.5%)	55(13.7%)	218(54.2%)



		Private	0(0%)	6(1.5%)	6(1.5%)	48(12%)	4(1.0%)	52(13%)
2	Opportunities for career growth/promotion	Public	2(0.5%)	170(42.3%)	172(42.8%)	108(26.9%)	31(7.7%)	139(34.6%)
		Private	0(0%)	6(1.5%)	6(1.5%)	48(12%)	4(1.0%)	52(13%)
3	Work-life balance	Public	0(0%)	154(38.3%)	154(38.3%)	133(33.1%)	31(7.7%)	164(40.8%)
		Private	1(0.7%)	13(3.2%)	14(3.9%)	42(10.4%)	1(0.7%)	43(11.1%)
4	Relationship with colleagues/supervisors	Public	30(7.5%)	246(61.2%)	276(68.7%)	27(6.7%)	4(1.0%)	31(7.7%)
		Private	9(2.2%)	34(8.5%)	43(10.7%)	14(3.5%)	1(0.2%)	15(3.7%)
5	Job security	Public	16(4.0%)	233(58%)	249(62%)	61(15.2%)	7(1.7%)	13(16.9%)
		Private	0(0.0%)	13(3.2%)	13(3.2%)	42(10.4%)	3(0.7%)	45(11.1%)
6	Availability of necessary resources	Public	5(1.2%)	115(28.6%)	120(29.8%)	147(36.6%)	56(13.9%)	203(50.5%)
		Private	1(0.7%)	20(5.0%)	21(5.7%)	31(7.7%)	6(1.5%)	37(9.2%)
7	Training and skill development	Public	3(0.7%)	162(40.3%)	165(41.0%)	120(29.9%)	33(8.2%)	153(38.1%)
		Private	0(0.0%)	174(43.3%)	174(43.3%)	163(40.5%)	35(8.7%)	198(49.2%)
8	Leadership and management support	Public	10(2.5%)	208(51.7%)	218(54.2%)	20(5.0%)	15(3.7%)	35(8.7%)
		Private	1(0.7%)	30(7.5%)	31(8.2%)	2(0.5%)	10(2.5%)	30(3.0%)
9	Overall job satisfaction	Public	4(1.0%)	110(27.4%)	114(28.4%)	208(51.7%)	16(4.0%)	224(55.7%)
		Private	1(0.2%)	11(2.7%)	12(2.9%)	43(10.7%)	3(0.7%)	46(11.4%)

Table 3 compared public and private health facilities employees' responses to various job satisfaction factors, using a 5-point Likert scale. Public health facilities workers generally showed a higher job satisfaction in career growth (42.8%), job security (62%), leadership/management support (54.2%), relationship with colleagues (68.7%) and

training/skill development (41.0%). However, there were no job satisfaction in the area of salary/benefit package (54.2%), work-life balance (40.8%) and resource availability (50.5%). Majority of the health workers 270 (67.1%) in both public and private health care facilities were not satisfied with their jobs.

Table 4a Relationship between Retention and Facility Type

		Do you intend to leave your current job within the next year?		Total
		Yes	No	
Type of Health Facility	Public Hospital	218(63.4%)	126(36.6%)	344
	Private Hospital	47(81.0%)	11(18.9%)	58
Total		265(66%)	137(34%)	402

Table 4a showed a cross tabulation of the relationship between retention and type of facility. Out of 402 respondents, 265 (66%) said Yes, they intend to leave their job within the next year and only 137 (34%) said No. By the type of facility

a higher proportion of health workers 47 (81%) intend to leave the private healthcare facility when compared to 218 (63.4%) who intend leaving from the public health facility.

Table 4b Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	6.892 <sup>a</sup>	1	.009		
Continuity Correction <sup>b</sup>	6.128	1	.013		
Likelihood Ratio	7.494	1	.006		
Fisher's Exact Test				.010	.005
Linear-by-Linear Association	6.875	1	.009		

Table 4b showed the association between the type of health facility and job retention was statistically significant with a p-value of 0.009.

Table 5a Comparison of Job Satisfaction between the Types of Facility

	Ranks			
	Type of Health Facility	N	Mean Rank	Sum of Ranks
Overall job satisfaction	Public Health Facility	344	197.68	68001.00
	Private Health Facility	58	224.17	13002.00
	Total	402		

Table 5a showed a comparison of the overall job satisfaction between employees in public and private health facilities, using mean ranks from a non-parametric test. A higher mean rank indicates higher overall job satisfaction.

Private health facility showed a higher level of job satisfaction with a mean rank value of (224.17), when compared to their counterparts in the public healthcare facilities with a mean rank value of (197.68).

Table 5b Mann Whitney U Test

	Job satisfaction
Mann-Whitney U	8661.000
Wilcoxon W	68001.000
Z	-1.881
Asymp. Sig. (2-tailed)	0.060
a. Grouping Variable: Type of Health Facility	

Table 5b showed a p-value of 0.060 and Z-score = -1.881. There was no statistically significant difference in the overall job satisfaction between public and private healthcare workers at the 0.05 level.

#### IV. DISCUSSION

The health care service delivery in most African countries is generally considered to be inadequate and sub-optimal in operation. This is due to myriads of challenges bedeviling the health system ranging from financing, leadership/governance, medical products and most importantly the human resources which is on an increasing decline. The present study attempted to identify factors influencing retention and job satisfaction among health workers in the public and private health facilities. The finding revealed that the age of the respondents was nearly evenly with 51% of the respondent being above 40 years, indicating a balanced distribution between the old and the young workers in both the public and private health facilities. The respondents from both the public 150 (37.3%) and private 90 (22.3%) health facilities reported that salaries were not competitive when compared to similar roles in other climes. Thus, the mass exodus of health workers we are presently experiencing (JAPA SYNDROME). Public health facility workers enjoyed timely payment of salary, clear policies for advancement, equal opportunity for promotion, access to training and useful feedback. However, these are not readily obtainable in the private health facilities. This can be as a result of better funding of the public health facilities when compared to the private health facilities which are usually owned by individuals.

Regarding job satisfaction many of the public health facility workers expressed high satisfaction in areas of career growth, job security, leadership/management support, relationship with colleague and training/skill development.

But they were dissatisfaction in the area of salary/benefit package, work-life balance and resource availability. Majority of the health workers 67.1% were not satisfied with their jobs. These findings were similar to the report of (Ene & Ogoh, 2016; Yami, et al., 2011) in Abuja and Ethiopia respectively, although these studies did not consider private health facilities. These findings were in contrast to report of (Kolo, 2018) from AKTH, Kano who reported 90.4% satisfaction among health workers. The reason might be due to the present economic crisis and inflation in the country. In comparing the differences between retention and job satisfaction among health workers in public and private facilities, the study revealed a higher proportion of health workers 47 (81%) intend leaving the private healthcare facility when compared to 218 (63.4%) who intend leaving from the public health facility. The association between the type of health facility and job retention was statistically significant with a p-value of 0.009 in the study. This could be due to delayed payment of salary, no clear policy career advancement and promotion amongst others. These findings were in contrast to the report of (Kolo, 2018) from Kano who reported 76.0% of health worker have no intention of leaving their jobs. Meanwhile for job satisfaction the mean rank value was higher among the private worker which pre-supposes a better job satisfaction when compared with their counterparts in the public health facilities. However, these finding was not statistically significant.

#### V. LIMITATION

➤ This Study is not Without Limitations Which Include:

- Poor response from health worker.
- Limited studies on the subject comparing public and private health facilities.
- Most studies are on job satisfactions in public facilities.

## VI. CONCLUSION

This study revealed clearly the poor remuneration status in both the public and private health facilities. It also highlights key differences in retention and job satisfaction between private and public healthcare workers in areas like timely payment of salary, clear policies on training, promotion and job security, which are not obtainable in the private settings. Majority of the health worker are ready to leave their jobs within the next year, due to lack of satisfaction and poor job retention strategies. This research therefore, provides valuable insights for healthcare administrators and policymakers to improve retention and job satisfaction strategies thus, ensuring a stable and motivated healthcare workforce for effective service delivery.

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- *Conflicts of interest: There are no conflicts of interest.*

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FMH-Ref No: C.5187/76 IT,  
14<sup>th</sup> April, 2025.

Our Ref: FMC/KF/HREC/02672/25

DR. OJURONGBE ADEGORIOLA.O,  
DEPARTMENT OF OBSTETRICS & GYNACOLOGY,  
NASARAWA STATE.KEFFI,

## RE: ETHICAL CLEARANCE TO CONDUCT RESEARCH

Your application for ethical clearance dated 7<sup>th</sup> April 2025, refers.  
I write to convey full ethical approval for you to embark on the said research study.

Title: **FACTORS INFLUENCING RETENTION AND JOB SATISFACTION  
AMONG HEALTH WORKERS IN PRIVATE AND PUBLIC HEALTHCARE  
FACILITIES: A COMPARATIVE STUDY.**

This follows a successful defense of your research proposal during the Committee's  
ethical screening interview held on the 10<sup>th</sup> April, 2025.

You are however expected to adhere strictly to the internationally acceptable ethical  
standards governing the conduct of research. Accordingly, all rights and  
Privileges of the volunteering participants must be respected.  
No form of alteration shall be made on this approved protocol without the express  
permission of the Committee.

Extracts of your findings should be forwarded to our Committee at the end of the  
research work for filing and/or possible intervention via our official email address: 1

Thank you.

