

Determinants of Job Satisfaction Among Nurses in Saudi Arabia: A Review

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Abstract

Background: Nurses are crucial in the healthcare system in Saudi Arabia, yet are experiencing considerable obstacles such as workforce shortages, increasing service demand, and continuous reform due to the struggle against Saudization and privatization plans.

Objective: The goal of this review was to look into the meanings and drivers of job satisfaction among Saudi nurses. **Methods:** A comprehensive search was conducted in the Cochrane Library, PubMed, Google Scholar, and CINAHL databases, yielding 52 relevant papers published between 2000 and 2024.

Findings: Job satisfaction ratings in the survey ranged from 58 to 86 percent, with age, gender, nationality, marital status, and education background all having an impact. Young nurses were typically less happy, whereas expatriate nurses experienced issues such as salary disparities and cultural challenges. Some of the negative aspects included work stress, bullying, job uncertainty, and physical strain. Conversely, contentment grew as a result of acceptable workloads, a stable work environment, and opportunities for advancement.

Conclusions: These findings are consistent with trends in high-income nations, but not in resource-constrained settings. To improve work satisfaction and retention, as well as the quality of care and organizational performance, the Saudi healthcare sector's recognition systems, promotion channels, and supportive leadership practices must be strengthened.

Key Words: Saudi Arabia; Job Satisfaction; Nurses; Nurse Retention; and Organisational Commitment

1. Background

Nurses are the primary providers of patient care in the healthcare industry, hence work happiness is a big concern for healthcare organizations. Job satisfaction among nurses has a direct impact on the provision of high-quality healthcare, particularly in Saudi Arabia, where the healthcare system is evolving (Halawani et al., 2021).

Saudi Arabia's population is expected to reach 39.5 million by 2025, with 4.63 million elderly people. The healthcare system is under significant strain as the population grows and noncommunicable illness rates, such as obesity and diabetes, rise (Alghnam et al., 2024). Nurses are key stakeholders in healthcare delivery who are

directly impacted by systemic challenges such as recruitment, retention, and performance, which are now regarded as critical to sustaining and improving healthcare delivery (Alluhidan et al., 2020).

Saudi Arabia, like the rest of the globe, is facing a catastrophic nursing shortage, which is aggravated by the COVID-19 pandemic and the country's significant reliance on expatriates for nurses (Aboshaiqah, 2016; Alluhidan et al., 2020; Alsufyani et al., 2020; Jester, 2023). The Saudization project and healthcare system privatization are the two most significant variables influencing the Saudi nursing profession (Alsadaan et al., 2021; Rahman, 2020).

Saudization is a royal order that was issued in 1992 to reduce reliance on foreign workers and boost the Saudi labor force. Similarly, health privatization attempts to reduce government spending. These developments may become destabilizing forces, resulting in an altered healthcare system with less experienced expatriate nurses, potentially affecting the present nursing workforce (Aboshaiqah, 2016; Alsadaan et al., 2021; Rahman, 2020). There has been a significant increase in the number of Saudi nurses, from 9% in 1997 to 38% in 2018. However, the number of nurses required in the market remains significantly larger than the number of teachers and nurses supplied, with an additional 100,000 nursing jobs expected by 2030 (Yousef, 2013).

According to the WHO, the ratio of the nurse and midwifery staff to the population of 10,000 has increased by 38.1 percent since 2000, when it was 16.9, to 55.1 in 2022. Nonetheless, these figures are still quite low when compared to other affluent countries such as the United States and the United Kingdom, which have 118.8 and 91.5 nurses and midwives per 10,000 population, respectively (World Health Organisation, 2024).

Pay, corporate culture, career advancement prospects, and work-life balance are the primary factors that influence job satisfaction in the country. Additionally, cultural and societal influences, such as the significance of family and society in professional choices, influence employees' job perceptions. The increasing number of women joining the labor market, as well as efforts to improve working conditions, has fueled interest in the relationships between job happiness and performance in Saudi Arabia (Al Mutair et al., 2023; Alotaibi et al., 2016a).

The aim of this literature review was to identify and investigate the problem of job satisfaction among nurses in Saudi Arabia, with a focus on global factors influencing the nursing workforce, as well as challenges and problems unique to the Saudi context, as well as social and cultural policy factors. This evaluation aims to provide information on how to overcome these obstacles in order to improve nurse retention and performance, which is critical to meeting the country's increasing healthcare needs.

2. Literature Review

Research on workforce strengths and psychological capacities highlights the importance of nurses' relationships to their profession. Nurses' evaluations of career chances, well-being, and self-confidence in professional progress are critical for reducing turnover intentions (Chami-Malaeb 2022). Specifically, work satisfaction emerges as a key predictor of intention to stay in an organization within the nursing profession (Kelly et al. 2022). Indeed, when nurses are satisfied and have a strong feeling of commitment to their work, organizational loyalty and engagement act as stabilizing forces, positively reinforcing their intention to stay with the organisation or nursing profession (Pressley and Garside 2023).

Job satisfaction is a quality that not only encourages employees to stay, but also connects with better individual performance and overall organizational outcomes (Alhalal et al., 2020). Employees that are extremely satisfied with their occupations are excited about their work and careers. They understand that their performance is closely linked to the success of the organisation (Rahmadani et al. 2020).

This alignment creates synergy, which increases individual and organizational performance. According to studies in healthcare, nurses' job satisfaction, work engagement, and self-efficacy are positively related to improved individual performance and key organizational objectives such as patient satisfaction and patient-centered care. (Decuyper and Schaufeli, 2020). Job satisfaction happens when people believe their needs are being met, they stay motivated, and they successfully resolve workplace issues. A number of factors influence job satisfaction in general nursing populations, including self-efficacy and a sense of belonging (Wang et al. 2023). Furthermore, workplace factors such as supportive relational leadership, recognition, organizational justice, and opportunities for career advancement have a significant impact on outcomes such as job satisfaction and intention to stay (Hult et al. 2023).

Positive factors associated with high job satisfaction, such as a stronger sense of belonging, self-confidence, work efficiency, and a more organized work environment, all contribute to high-quality healthcare services and patient safety. Negative elements that create job discontent, such as work errors, absenteeism, and nurse turnover, can lead to operational issues, low productivity, and poor service quality. Job satisfaction is critical in assessing the work environment, service quality, job performance, and overall health, and it must be addressed effectively to avoid a vicious loop (Dor and Halperin, 2022). The global shortage of nurses poses a problem to providing high-quality treatment. To address this, O'Callaghan and Sadath (2025) suggest studying the factors that influence job satisfaction among both beginner and experienced nurses. Low job satisfaction in nurses can lead to burnout, work

stress, disappointment, and poor work quality. It can also lead to employment resignations, aggravating the labor crisis. As a result, it is critical to address both the hygienic (extrinsic) and motivational (intrinsic) elements that influence nurses' job happiness in order to increase their work efficacy, job retention, and the overall quality of patient care and healthcare services.(Alshammari et al., 2023).

2.1 Previous Studies:

Studies have shown that job satisfaction among nurses varies by area and country. For example, Liu et al. (2019) found specific characteristics linked with job satisfaction among acute care nurses. They discovered that peer support in the workplace, supervision quality, job performance, job interest, and work responsibility all had a substantial impact on job satisfaction. Interestingly, they found that hygienic (extrinsic) variables had a bigger impact on job satisfaction than motivational (intrinsic) factors.

In contrast, Yoon et al. (2022) discovered that demographic parameters such as age, educational level, salary, and role were the most important predictors of job satisfaction in nurses. Given that the majority of Macao's nurses are women, it is critical to provide childcare help, as this can impede their professional progress.

Studies have investigated job satisfaction among nurses with varied levels of experience, revealing that nurses may have distinct demands and criteria for job satisfaction (Chien et al., 2022; Sigursteinsdottir, 2022). When researching characteristics linked with job satisfaction, it is critical to consider the cultural background as well as nurses' distinct tasks and responsibilities (Choi et al., 2022). A recent study looked at the impact of toxic and transformational leadership techniques on nurses' job satisfaction, psychological discomfort, absenteeism, and intentions to leave the organization or the nursing profession. Background Transformational leadership is associated with positive nurse outcomes; yet, the nursing literature is mute on the causal link between toxic leadership and nurses' job outcomes (Labrague et al., 2020).

3. Methods

3.1 Search Strategy and Databases

The search strategy included the use of the following keywords: "job," "occupation," "career," "work," "satisfaction," and "nurse," "nurses," "nursing staff," "registered nurses," "RNs," combined with "Saudi Arabia," "KSA," and "Kingdom of Saudi Arabia." The search time frame was between January 2000 and December 2024. The Cochrane Library, PubMed, Google Scholar, and CINAHL databases were used to search for relevant studies.

3.2 Inclusion and Exclusion Criteria

Predefined inclusion and exclusion criteria guided the study selection process. All papers were independently checked by two writers, who first reviewed the titles and abstracts before moving on to the full text. Disagreements were handled through debate until a consensus was achieved. The PRISM flowchart (Page et al., 2021) describes this procedure in full.

Inclusion Criteria

- Studies published in English.
- Studies conducted in Saudi Arabia.
- Studies focusing on job satisfaction among nurses.
- Studies conducted between 2000 and 2024.

Exclusion Criteria

- Studies published in languages other than English
- Studies conducted outside Saudi Arabia
- Studies not targeting nurses

3.3 Data Extraction and Synthesis

Data extraction was performed using a standardized Excel sheet that captured the following information.

- Author Name
- Year of Publication
- Main Findings

4. Results

We identified 226 articles through database and citation searches. After removing duplicates, **217 articles** were included in this review. These were screened by title and abstract and **80 articles** were assessed for full-text eligibility. Of these, **52 articles** met the inclusion criteria and were included in the review (Figure 1).

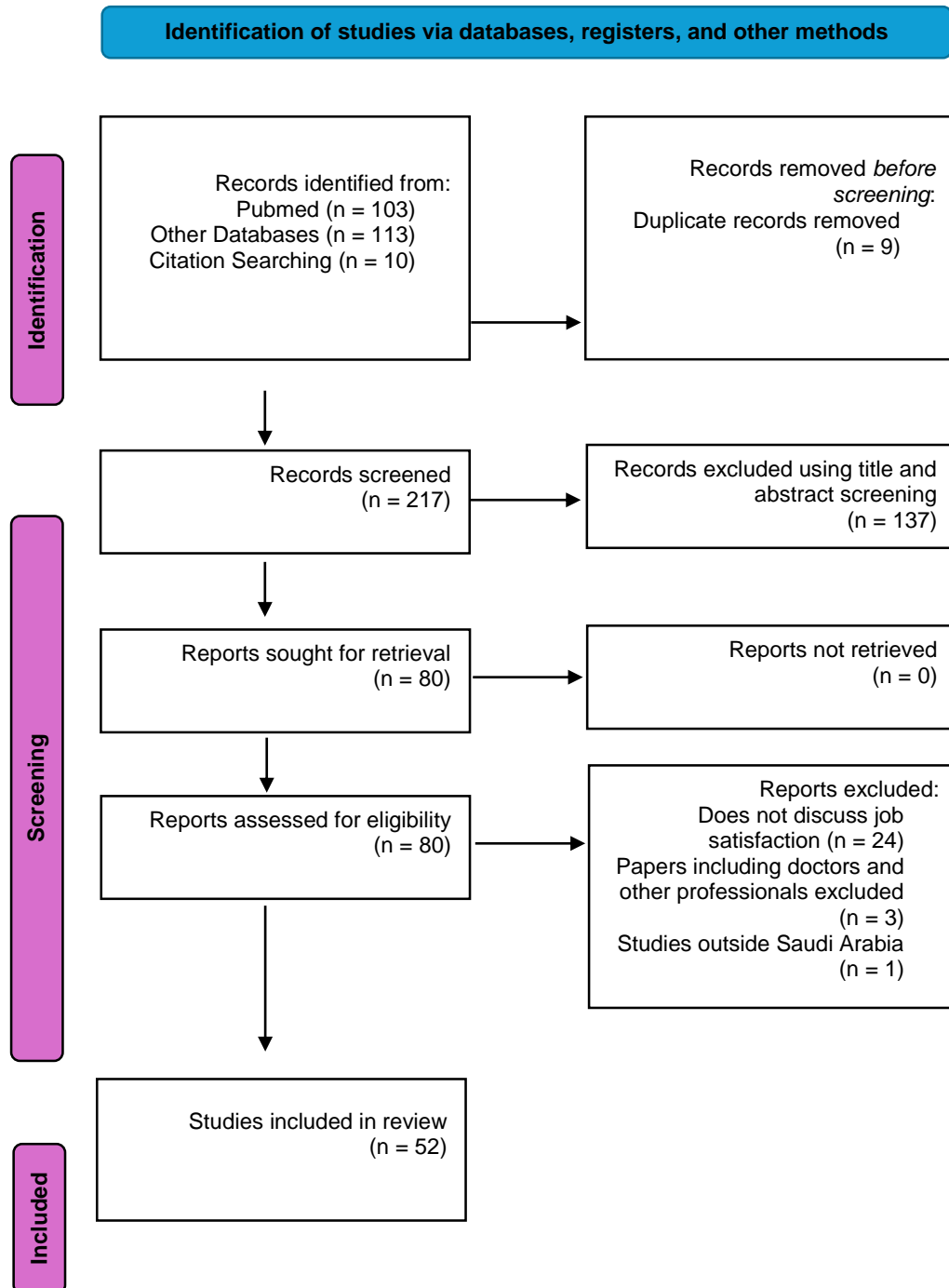


Figure 1: PRISMA Flow Diagram for Included Studies (Developed by Author)

4.1 Job Satisfaction and Key Determinants

Overall Job Satisfaction

The study's findings reflect differences in nurses' job satisfaction levels. Job satisfaction ranged from 58% to 86% (Alhalal et al., 2020; H. H. Alharbi et al., 2024; Bahnassy et al., 2014; Falatah and Conway, 2019; Wali et al., 2023). It is worth noting that a survey of 198 Hajj nurses revealed a high proportion of job satisfaction (82.6%) (Banaser et al., 2020). However, another study reported a significant dissatisfaction rate, with 67.1 percent of nurses expressing discontent (Al Juhani & Kishk, 2006). Another study indicated that just 22.4% of patients were dissatisfied (Al-Haroon and Al-Qahtani, 2020).

Age, Years of Experience and Ageist Behaviors.

The studied results show that there is variability in the associations between age, years of experience, and job satisfaction among nurses across research. There are also favorable associations between years of experience and job happiness (H. A. Al-Ahmadi, 2002; R. Al-Dossary et al., 2012; A. A. Alharbi et al., 2020; Alshahrani and Baig, 2016), but no significant correlations between years of experience and job satisfaction (Mari et al., 2018).

Younger nurses had lower ratings of job satisfaction and greater burnout than older nurses, particularly in public hospitals (Alrashe). Nonetheless, other research has suggested that younger nurses or those with fewer years of experience reported higher levels of satisfaction when aided by a positive work environment (Al Shayeb et al., 2024), whereas older nurses experienced professional marginalization and low levels of satisfaction as a result of ageist behaviors (Mohamed and Shaban, 2024).

Gender

Even though some studies have found no significant change in the level of satisfaction between the male and female nurses (Al-Ahmadi, 2002; Al-Dossary et al., 2012; Banaser et al., 2020; Mari et al., 2018), some studies found that the level of satisfaction of the female nurses was lower and the level of dissatisfaction or burnout was higher compared with male nurses (Almalki et al., 2012; Ambani et al., 2020; Falatah et al., 2016). In certain types of settings, cultural and societal reasons like the low perceived status of female nurses, male-female work environments, etc. are also associated with a lower level of satisfaction among female nurses (Alotaibi et al., 2016). Besides, nurses in the environment of male managers exhibited a greater level of job satisfaction compared to those in the environment of female managers, which underscores the power of managerial sex (Alghamdi et al., 2018).

Factors that are specific to the Nationality and Expatriate.

The study's findings reveal a slight association between nationality and job satisfaction among nurses with varying levels of experience, depending on cultural, professional, and personal aspects. A lot of studies have found a significant link between nationality and job happiness. For example, Filipino nurses were found to be more content with their occupations than Saudi nurses (Alshahrani and Baig, 2016), whereas nurses with Indian education were more satisfied than Saudi and Philippine-trained nurses (Alharbi et al., 2020). Other researches found no significant differences in satisfaction based on nationality (Al-Ahmadi, 2002; Almansour et al., 2020). Nonetheless, Almansour et al. (2020) found some differences in specific areas, such as Saudi nurses being more satisfied with extrinsic rewards and work-life balance, but non-Saudis were more satisfied with professional possibilities and job recognition.

The level of unhappiness was also considerable among expatriate nurses, particularly Filipino and Indian nationals, who reported low job satisfaction and greater levels of bad nursing work life (QNWL) scores. Expats' dissatisfaction is caused by high workloads, insufficient resources, and cultural challenges such as difficulty connecting with Arabic-speaking patients, unequal compensation and benefits (Almansour et al., 2020; Billah et al., 2021). Family separation difficulties can contribute to discontent, since married expatriates with family contracts report higher levels of satisfaction due to additional advantages such as family housing (Almansour et al., 2022).

In terms of mental health, a recent study found significant links between workload dissatisfaction and teamwork, as well as serious depression and anxiety among expatriate nurses (Saqib et al., 2019). Unsatisfaction in several domains increases the likelihood of poor mental health.

Interestingly, a recent study found that satisfaction levels varied by nationality, with Indian nurses reporting the greatest levels, followed by South African, Saudi, Malaysian, and Filipino nurses (Sharif et al., 2023). Another study found that migrant nurses were dissatisfied with wage and maternity leave but very satisfied with nursing colleagues and married nurses (Shatnawi et al., 2023).

Marriage

Two research found that marital status had no significant impact on how many jobs nurses are satisfied with in general (Al-Aameri, 2000; Al-Ahmadi, 2002). In contrast, a separate study found that married nurses with children

reported higher job satisfaction (Almalki et al., 2012). On a related note, the same study found that nurses with children under the age of 18 did not report job dissatisfaction, and those who intended to leave their jobs did not do so, indicating that parental roles may be positively related to job satisfaction under certain conditions (Ambani et al., 2020).

Educational Level

Studies on the effect of education level on job satisfaction among nurses have yielded inconsistent results. Previous research indicated differences in satisfaction levels based on education level (Al-Ahmadi, 2002), however more recent studies found no difference between diploma, bachelor's, and master's degree graduates (Al-Dossary et al., 2012; Mari et al., 2018). Similarly, whether or not the nurses had a bachelor's degree, their levels of satisfaction were equal.

A 2021 study (Falatah et al., 2021) found a significant difference in job satisfaction between diploma holders and those with master's and bachelor's degrees ($F = 7.07$, $p < .001$). Diploma holders reported the highest level of satisfaction, followed by master's and bachelor's holders. Furthermore, the suppression effect was discovered when collegial nurse-physician connections ($OR = 0.42$) had a detrimental impact on job satisfaction (Alharbi et al., 2020).

All problems at the workplace that present a challenge and are stressful should be addressed.

Burnout

Burnout is a significant factor in determining job satisfaction among nurses, with varying levels of impact documented in publications. In one study, emotional weariness was found to predict lower levels of job satisfaction among critical care unit nurses, accounting for 10% of the variation ($R^2 = 0.102$) (J. Alharbi et al., 2016). On the same topic, another study found that job unhappiness is closely related to burnout and is a strong predictor of nurses' intentions to leave their jobs. (Ambani et al. 2020).

In contrast, a single study indicated that burnout and work satisfaction showed a weak link ($r = 0.09$, $p < 0.05$), showing that the relationship is mediated by other variables (Shdaifat et al., 2023). In a recent study, the author highlighted the dependency of low job satisfaction and poor sleep in leading to burnout, with the whole data in their model explaining 39.8 percent of the variance (Rayani et al., 2024).

Workload and Job Stress

Workload has been a key element in determining job happiness. One study discovered that workload was the most dissatisfying area among nurses (Al Juhani and Kishk, 2006), and another found that excessive documentation, long working hours (48 hours per week with no part-time opportunities), and a lack of overtime compensation were some of the factors that made nurses unhappy (Alotaibi et al., 2016). Similarly, one study discovered that a higher patient/nurse ratio and working conditions in a public hospital led to burnout and job dissatisfaction. Nurses who worked at military hospitals reported a better working environment and less unhappiness. (Ambani et al. 2020).

A study found that there is a positive relationship between manageable workloads and job happiness ($r = 0.72$, $P = 0.00$), and that fair workloads are vital in ensuring job satisfaction (Banaser et al., 2020). Nurses who worked more night shifts (9-13 per month) and longer working days ([?]11 hours) reported higher levels of discontent (Billah et al., 2021). Another study found a substantial difference in satisfaction across different types of hospitals, with teaching institutions outperforming public hospitals ($p = 0.005$) (Alanazi et al., 2023).

Not all findings, however, were the same. In one study, the association between patient-to-nurse ratios and satisfaction was found to be non-significant (Spearman correlation = 0.015, $p = 0.836$), implying that other factors, such as institutional support, could mitigate the workload-satisfaction relationship (Al-Dossary et al., 2012).

Stress has a wide range of effects on employee job satisfaction, most of which are negative. A prior study found a substantial negative link between stress and satisfaction ($r = [?]0.437$, $p < 0.05$), with patient death and dying being the most stressful variables (Saleh, 2013). One of the research that validated the adverse impact of such events on Saudi Arabian nurses was conducted in 2022 (Almanasif et al.). A more recent study found that 47% of nurses were unhappy due to work-related stress caused by working hours (Wali et al., 2023).

An analysis of nurses during COVID-19 highlighted the overall repercussions of job-related stress, which was linked to low job satisfaction, retention problems, and poor patient care (Rasheed et al., 2024). Previous research (Shdaifat et al., 2023) found a low negative association between stress and satisfaction ($r = [?]0.02$, $p < 0.05$), indicating that stress does not predict unhappiness in all circumstances but still has a significant impact in most cases.

Bullying

The argument regarding aggressive behavior against healthcare staff established that bullying in the workplace reduces employee satisfaction, negatively impacts practitioner health, and increases the risk of patient harm, all of which have a negative impact on the entire facility. Women, adults aged 31 to 41, nurses, non-Saudi practitioners, and inpatient staff are the most vulnerable (Syed et al., 2022).

Job Insecurity vs. Job Security

There was a significant influence on expatriate nurses' job instability, mental health, and contentment. It was shown that 20% of nurses felt uncomfortable about their professions, and 18.4% believed they would be sued by patients. Employees who face job instability are more likely to experience severe depression, anxiety, and stress (Saquib et al., 2020). The second study found that expatriate nurses on temporary contracts were three times as likely to experience work dissatisfaction (Billah et al., 2021). Furthermore, job security is positively connected to job satisfaction and adversely related to turnover intention, highlighting the importance of job security in health care professional retention. (Falatah et al. 2021).

Lower Back Pain

Job dissatisfaction was significantly associated with lower back pain (LBP), with an odds ratio (OR) of 1.87 (95% CI: 1.24-3.58) (Jradi et al., 2020)

Impact of COVID-19

A survey of 322 nurses before and 201 after the COVID-19 outbreak found substantial decreases in mean ratings across all categories (including job satisfaction, teamwork, and professional dedication) ($p < 0.005$). Satisfaction fell in all demographic variables, including age, sex, marital status, job experience, educational status, nationality, principal role, and working unit ($p < 0.005$), except for nurses over 50 years old and with 6-10 years of experience (Al Baker, 2022).

4.3 Workplace Rewards and Professional Development

Professional Growth and Recognition

A lot of studies have identified the primary causes of job discontent among nurses. In a previous study, nurses reported dissatisfaction with achievement recognition, scoring 1.5 ± 0.5 on a five-point scale (Zaghloul et al., 2008). Another study highlighted professional possibilities, workload, and acknowledgment or rewards as the primary sources of discontent (Aljuhani & Kishk, 2006). Another study found no significant association between job satisfaction and employment status (Al-Dossary et al., 2012). A study on the determinants of job satisfaction among Saudi Arabian nurses found frustrations caused by insufficient educational advancement opportunities, such as diploma graduates becoming bachelor's degree graduates, and unfair practices associated with career development, which were typically traced to personal attachment to the hospital administration (Alotaibi et al., 2016). It was also discovered that nurses' involvement in hospital matters, support from nurse supervisors, and staffing sufficiency were all positively related to job satisfaction (Alharbi et al., 2020). Another survey found that 44% of nurses were unsatisfied with their chances for advancement (Wali et al., 2023).

Salary and Financial Rewards

According to studies, there is a considerable association between nurses' pay and job happiness. Al Juhani and Kishk (2006) highlighted appreciation rewards as a major dissatisfying domain, while Zaghloul et al. (2008) reported significant discontent with bonuses (1.1 ± 0.3) and hospital benefits (1.2 ± 0.4). According to Almalki et al. (2012), nurses with greater wages report higher levels of job satisfaction. According to Alshahrani and Baig (2016), higher perceived income leads to greater job satisfaction ($p < .01$).

Nurses earning less than 5000 SAR were much less happy (53.5%) than those earning more than 7000 SAR (4.3%) (Billah et al., 2021). Similarly, another study discovered that nurses earning SR7000 or more reported considerably higher job satisfaction ($p = 0.021$), with incentives or motivation sources contributing ($p = 0.002$) (Alanazi et al., 2023). Another survey discovered that 49% of nurses were unhappy with their wage rates (Wali et al., 2023).

4.4 Cultural and Contextual Influences

Leadership Styles

A study discovered a substantial positive association ($r = 0.45$, $P < 0.001$) between transformational leadership (TF) and nurses' job satisfaction. This suggests that nurses with transformational leaders are more content with

their professions. Transactional leadership (TA) had a weak negative connection ($r = -0.14$, $P < 0.01$) with job satisfaction (AbuAlRub & Alghamdi, 2012).

Nurses who worked under transformational leaders reported higher job satisfaction ($p < 0.05$). However, operating conditions (workload, stresses) had a detrimental impact on job satisfaction, regardless of leadership style. Leadership style accounts for 23% of the variance in job satisfaction prediction models, with professional support and intellectual stimulation having a major impact (Alshahrani and Baig, 2016).

A study found that nurses working under transformational leaders reported higher job satisfaction ($p < 0.05$), with leadership factors such as professional support and intellectual motivation accounting for 23% of the difference (Alshahrani and Baig, 2016).

Work Environment

Job satisfaction among ICU nurses was comparable to that of charge nurses (40.5) and bedside nurses (43.1), with surgical ICU nurses reporting the greatest levels of job satisfaction (Alayed et al., 2014). The most common issues were recognized as bad relationships with non-Saudi supervisors and the perception of favoritism (Alotaibi et al., 2016b). According to Alshahrani and Baig (2016), nonsurgical department nurses are more content with their professions than surgical department nurses, and day shift nurses are happier than night shift nurses. The connections with coworkers and the nature of work are linked to good job satisfaction, however the work unit is not (Mari et al., 2018). Communication with coworkers, coworker connections, and appropriate supervision are all substantially associated with high job satisfaction (Banaser et al., 2020). Job satisfaction was lower among nurses in the northern region, indicating the impact of geography (Alrasheedi et al., 2021). Job satisfaction was significantly associated with a better nurse-patient interaction (Alenazy et al., 2023). Inpatient units had the highest job satisfaction, followed by the ICU and outpatient units (Sharif et al., 2023). Job satisfaction is positively connected to compassion satisfaction (Rayani et al., 2024; Shdaifat et al., 2023).

Religious, Spiritual and Cultural Influences.

Religion also boosted job satisfaction to a considerable extent, and most of the participants considered their work as a path to spiritual compensation (Alotaibi et al., 2016).

4.5 Safety and Quality Account.

Safety and Teamwork Climate

They discovered a statistically significant relationship between safety atmosphere and job satisfaction among nurses, with a Pearson correlation coefficient of 0.488 ($p = 0.001$). Teamwork climate is positively connected to job satisfaction (Pearson = 0.742, $p < 0.001$). (Basuni, Bayoumi, 2015).

Life Quality and Work-Life Balance

Negative work settings, weak support, and resources were strongly connected with lower levels of job satisfaction, while work design characteristics such as job autonomy, clarity, and physical surroundings also had an impact, albeit to a lesser extent than the work context. Nurses whose tasks were unclear or whose work lacked variation were more likely to be dissatisfied, while work-life balance had an important role in increasing satisfaction. There is also poor management and recognition or reward, resulting in low employee satisfaction (Almalki et al., 2012).

There were mixed results on job satisfaction and work-life balance, with 68.9 percent of nurses believing that rotational schedules had a negative impact on their lives and 46.3 percent reporting feeling weary after work. Nonetheless, the existence of on-site childcare and the flexible daycare option for family leave was valued, with more than 90% of respondents stating that the facilities will assist them. (Alrasheedi et al. 2021).

Technology Integration

Training and the use of technology in nursing have a favorable impact on job satisfaction. Self-efficacy and social support have a beneficial influence on job satisfaction. According to the mediation study, self-efficacy and social support mediate the relationship between training/technology integration and job satisfaction, as well as the influence of prior technological experience (Alshammari and Alenezi, 2023).

Missed Nursing Care

A research of 604 nurses found that job satisfaction had a negative predictive value for missing care ($B = -0.864$, $t = -4.788$, $p < 0.001$) and a substantial negative connection ($r = -0.297$, $p < 0.001$) (Al Muharraq et al., 2022). On the same topic, another study found a negative link between job satisfaction and missing nursing care. (Al Salem et al., 2023).

4.6 Organizational Success

Organizational Commitment

Both articles have shown that nurses' job satisfaction is a significant variable in determining an organization's success and performance, and that job contentment and organizational commitment are highly predictive variables on nurse performance, resulting in improved organizational performance outcomes (Al Juhani & Kishk, 2006; Al-Ahmadi, 2009). The other study reported a higher commitment level among the pleased nurses. Job satisfaction had a positive link with task and contextual performance ($r = 0.601$, $p < 0.01$), and a negative relationship with counterproductive work behavior. According to Hakami et al. (2020), job satisfaction is positively connected with affective ($r = 0.636$), continuation ($r = 0.654$), and normative ($r = 0.723$, $p < 0.01$) commitment, implying that satisfied nurses are more committed to the organization (Al-Dossary, 2022).

Nurse Retention

Salary and incentives have been shown to induce work discontent and limit nurse retention, whereas leadership styles and challenging opportunities have a stronger association with retention intention. A study found a weak positive correlation ($r = 0.15$, $p < 0.01$) between job satisfaction and intention to stay among nurses. Relational coordination, which promotes communication, shared goals, and mutual respect, has been linked to higher job satisfaction and lower turnover intentions (Falatah & Conway, 2019). Job satisfaction was found to explain 26% of the variance in turnover intention, with work setting and design playing major roles (Almalki et al., 2012). Retention and job satisfaction showed a moderate positive correlation ($r = 0.60$, $p = 0.00$) (Banaser et al., 2020). Alanazi et al. (2023) found a substantial negative association between intention to leave and job satisfaction ($b = -0.454$, $p < 0.001$), while Alonazi and Omar (2013) found a strong positive link between length of employment and job satisfaction. Perceived workload, professional support, and opportunities for advancement were revealed to be important predictors of employment tenure.

5. Discussion

This literature review provides a complete analysis of job satisfaction among Saudi nurses. These findings serve as a starting point for developing a theoretical framework to investigate the causes and mitigating factors that influence job satisfaction and discontent among nurses in this region. Our findings are presented in the conceptual framework (Figure 2).

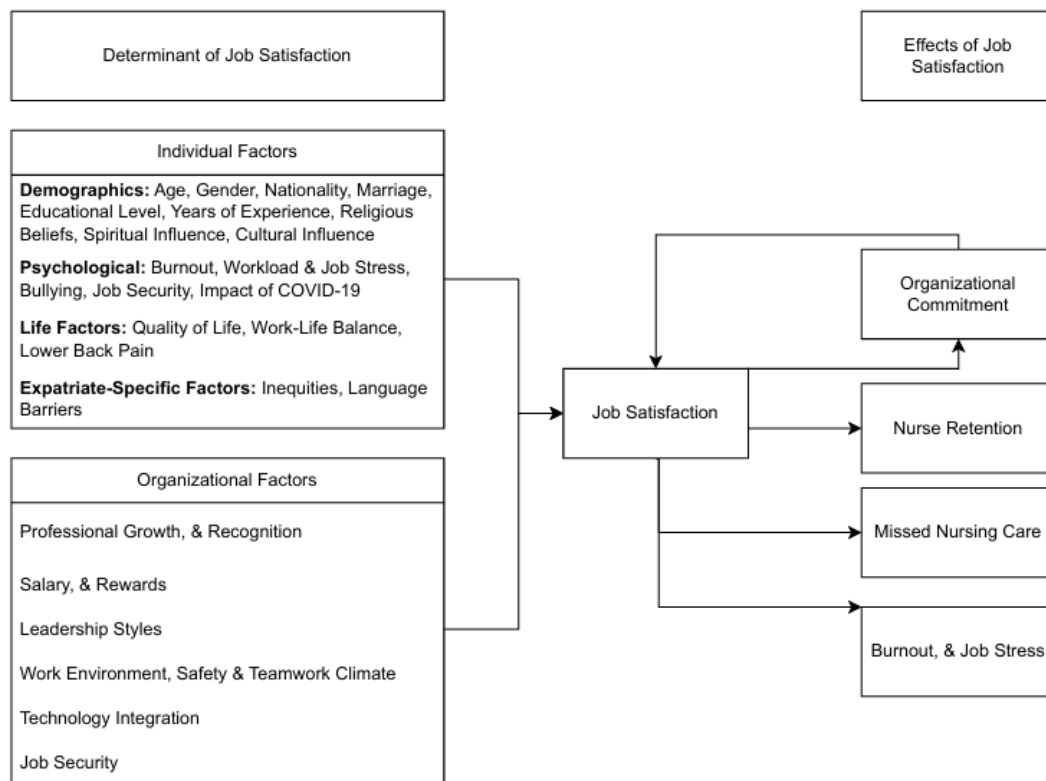


Figure 1: Conceptual Framework of Job Satisfaction in Saudi Arabia (Developed by Author)

In a comparative analysis with regional data, the level of nurse satisfaction is similar to that of nurses in countries such as Oman, Lebanon, and Palestine, where satisfaction levels ranged from 55.6 to 84.2% (Abushaikha & Sacca-Hazboun, 2009; AL-Yaqoubi and Arulappan, 2023; Kaddourah et al., 2013). There were also no changes detected when compared to research conducted in high-income nations such as Finland, Norway, and Sweden, where work satisfaction was greater, ranging from 72 to 79% (Lindqvist et al., 2014). Nonetheless, in low- and lower-middle-income situations, satisfaction ratings are lower, typically around 50 percent, and are mostly attributed to a lack of resources (such as low salaries), health difficulties, and ineffective leadership. Certain authors on the topic used a quasi-experimental design, making it impossible to validate their claims. Some scholars on the subject used a quasi-experimental paradigm, making it impossible to validate his arguments.

The findings revealed a complicated interplay affecting job satisfaction among nurses, which was influenced by age, gender, nationality, marital status, and education level. Studies have revealed mixed results about the relationship between age, years of experience, and job satisfaction in nursing. Other researchers have discovered a positive relationship between years of experience and job satisfaction (Al-Ahmadi, 2002; Al-Dossary et al., 2012; Alharbi et al., 2020; Alshahrani and Baig, 2016), which may indicate that experienced nurses are more confident and perform their duties more effectively than inexperienced nurses. The workload and role problems tend to reduce job satisfaction in younger nurses and promote burnout, particularly in public hospitals (Alrasheedi et al., 2021; Ambani et al., 2020; Billah et al., 2021). However, younger or less experienced nurses reported higher levels of satisfaction with the supportive environment (Al Shayeb et al., 2024). Ageist behaviors, on the other hand, imply that senior nurses are often professionally sidelined and have low job satisfaction, which undermines their work and leads to discontent (Mohamed & Shaban, 2024). These findings suggest that there is a need to address the specific requirements of nurses at various phases of their careers. Job satisfaction can be increased for all nurses by providing supportive working conditions, promoting professional development among younger nurses, and combating ageist attitudes among older nurses.

Despite studies that show no significant differences in satisfaction levels based on gender, female nurses are more likely to report discontent and burnout. This shortcoming has been frequently attributed to societal attitudes, work relationships, and cultural influences, such as difficulties in mixed gender situations and female nurses' inferior status in the workplace. Furthermore, Saudi Arabian women are more likely to face cultural norms that limit their opportunities and have a substantial impact on job satisfaction. Women's social demands after working in families, as well as their desire to stay at home, can be contrasted with nursing needs, particularly the necessity to work rotations and night shifts (Alboliteeh et al., 2017; Elmorshedy et al., 2020). The intriguing observation that nurses with male bosses were more satisfied complicates the situation, indicating that leadership styles and cultural expectations are worth investigating.

Nationality has emerged as a crucial determinant of modest differences in happiness levels. Filipino nurses were consistently found to be more content than Saudi nurses in specific studies, although Indian-educated nurses had the greatest overall satisfaction percentages, which could be attributed to greater remuneration rates than in their home countries. Nonetheless, expat nurses typically face unique pressures such as high workloads, insufficient communication with patients and colleagues due to language challenges, and salary and benefit discrepancy (Almansour et al., 2022; Alosaimi and Ahmad, 2016; Gerchow et al., 2021). It is worth noting that restrictions on female Saudi nurses in terms of rotating shifts or night shifts tend to push the burden of these difficult tasks onto expatriate nurses (Al Hosis, 2012). Emotional concerns, particularly isolation from family, increased discontent, although the benefits of family contracts were absent among married expatriates. The impact on mental health was clear, since dissatisfaction in the primary areas was linked to despair and anxiety. (Saquib et al. 2019).

Marriage status is another complicating element. Although some studies have found no significant link between marital status and job happiness, others have found that married nurses, particularly those with children, are more fulfilled in their jobs. This could be an indication of stability or an aim related with family responsibilities, but more research is needed to explain such interactions.

The educational level had varying effects on job happiness; some studies found that it had no significant affect, while others found that diploma holders had higher job satisfaction, and vice versa for nurses with master's and doctoral degrees. This finding calls into question the impact of higher education on professional fulfillment. Diploma nurses are also likely to struggle with further growth since they are unable to choose a master's or doctoral program and invest in career development without becoming unsatisfied (Nasser, 2024). Advanced degree nurses, on the other hand, have been known to take on leadership roles that carry more responsibility and pressure. Nurses were more stressed and unsatisfied during the COVID-19 pandemic because they were under so much pressure to stay up to date on emerging information that data were restricted. (Shariff et al., 2023).

Burnout is engaged in the problem, since studies show that it has a cyclical association with work discontent and poor sleep, which exacerbates each other. Nonetheless, the relationship between these two characteristics is not always strong, and it is plausible that it is mediated by contextual factors such as institutional support or personal resilience.

Workload and burnout have remained the leading causes of unhappiness, with overcrowding with patients, long working hours, and poor wages becoming frequent themes. Although workloads are positively connected to happiness, other researchers argue that elements such as institutional support and team dynamics have the potential to mitigate the impact of heavy workloads (Bragadottir et al., 2023; Kalisch et al., 2010). Stress, particularly in emotionally demanding circumstances such as patient death, has a fully negative impact on satisfaction, which can be changed by personal or organizational coping mechanisms (Iwanowicz-Palus et al., 2022).

The negative effects of workplace bullying on job satisfaction are significant, and the implications extend beyond personal health to patients and corporate success. Women and expatriate nurses are particularly vulnerable due to language problems. Although another study in Iran found that men are more likely to be bullied, it should be noted that women make up approximately 61.8 percent of the nursing workforce in Saudi Arabia, therefore there is more reporting that can occur (Al Mutair et al., 2023; Homayuni et al., 2021). It was also more prevalent among female nurses, who were more likely to be victims of repeated workplace bullying (Carter, 2013; Ling et al., 2016).

Another key concern is employment uncertainty, particularly among expatriate nurses, who face a variety of challenges such as temporary agreements and the danger of being sued. Researchers conducted a study on medico-legal litigation in Saudi Arabia and discovered that 7.6% of the defendants were Saudi nurses (Henry et al. 2012). Furthermore, hospital privatization has an impact on employment security, and one of the Saudi Ministry of Health's aims is to privatize all healthcare systems. As a result, the situation with job security varies across the country (Rahman, 2020).

LBP is a common physical health concern among nurses, and it is strongly associated with job discontent. Dissatisfaction causes physical strain, and the contrary is true, resulting in a vicious cycle. (Jradi et al., 2020). The COVID-19 pandemic has had a significant impact on job satisfaction, with unfavorable trends observed across the majority of population categories. The primary causes of discontent are increased workload, emotional stress, and infection risk, while older nurses and those with moderate experience appear to be more resilient (Al Baker, 2022; Rasheed et al., 2024; Sharif et al., 2023). Dissatisfaction with nurses in Saudi Arabia during and after COVID-19 is comparable with the findings of other research in the nation, such as those in Egypt, Iran, and South Korea (Heidari et al., 2022; Hwang, 2022; Said and El-Shafei, 2021). Nonetheless, research on nurses in the COVID-19 situation in Brazil, the United States, and China has revealed higher levels of satisfaction with the pandemic, indicating healthcare systems that can respond quickly in times of crisis (Appel et al., 2021; Da Rosa et al., 2021; Niu et al., 2022).

Saudi nurses reported a lack of satisfaction with acknowledgment, inadequate educational growth, and a sense of partiality in promotions. As a result, a number of studies have identified improved managerial support and engagement in decision making as major determinants of job satisfaction (Chen et al., 2024; Inoue et al., 2021). Nonetheless, low promotion opportunities are a serious issue.

Dissatisfaction is linked to low earnings and a lack of financial incentives, whereas high wages and bonuses can have a large beneficial impact on morale. To retain nurses, it is critical to close these compensation disparities. Transformational leadership improves satisfaction, particularly by offering intellectual stimulation and support, but transactional leadership is ineffective. A comprehensive evaluation of 12 research on leadership styles and job satisfaction among nurses found that transformational leadership styles had the highest positive correlations, followed by authentic, resonant, and servant leadership styles (Specchia et al., 2021).

Religious values play a unique role in job satisfaction because they provide spiritual motivation for the majority of nurses. Religion has been demonstrated to be highly connected with spirituality, which improves job happiness and performance. Him/her: Atashzadeh-Shoorideh et al. (2024); Lee and Yu (2023); and Zeladita-Huaman et al. (2024). Reducing workplace stress and increasing nurse satisfaction need safety and collaboration (Bragadottir et al., 2023; Kalisch et al., 2010). Organizations should prioritize developing a culture of safety and teamwork in order to improve overall worker satisfaction and patient care outcomes.

Job satisfaction is dependent on work-life balance and overall quality of life. Research has shown that negative work environments, such as a lack of support, unclear positions, and rotational schedules, have a significant negative impact on employee happiness. Even though various programs help nurses balance work and family life, resources like on-site daycare and family leave alternatives are insufficient to reduce fatigue and unhappiness (Ferri et al., 2016; Kim et al., 2024; McHugh et al., 2011).

The use of technology improves job satisfaction since it simplifies workflow and gives nurses confidence in their work. The ability to be trained, self-efficacy, and social support are the most important aspects of successful technology adoption in the digital age. Healthcare organizations must invest in training efforts and support systems to increase employee happiness and productivity (Alshammari and Alenezi, 2023).

Our investigation revealed a strong link between missing nursing care and work discontent. A recent meta-analysis supported this finding, revealing a considerable negative connection between missed nursing care and job

satisfaction (Algin et al., 2024). The higher the satisfaction, the lesser the likelihood of missing care, and in this situation, adequate staffing, workload, and resources should be supplied to ensure the patient's safety. The problem of missing care not only improves patient safety but also increases nurse satisfaction.

Nurses who are satisfied have a higher level of organizational commitment, which improves performance and reduces counterproductive conduct. Companies are expected to prioritize job happiness in order to increase commitment, which is a direct predictor of organizational success and stability. It is crucial to highlight that job satisfaction and organizational commitment are not mutually exclusive. A study conducted in India discovered that devoted (permanent) nurses reported higher job satisfaction than temporary nurses. (Panchal et al., 2022).

Job satisfaction has a significant impact on retention, as do salaries, incentives, leadership, communication, and possibilities for career advancement. Providing workload, recognition, and promotion possibilities is one method healthcare companies can reduce turnover and retain experienced nurses, hence improving continuity of service (Putra et al., 2020).

6. Conclusions

This review examines the elements that lead to job satisfaction among Saudi nurses. The levels of satisfaction are comparable to those of regional and high-income nations, but they differ from low-income environments due to resource limitation. The main ones were age, gender, nationality, marital status, and educational level. Workload, burnout, leadership style, and cultural expectations all had a significant impact on employee satisfaction. It is critical to address recognition, promotions, and salary disparities while also encouraging supportive working conditions and transformational leadership. Better job satisfaction leads to higher retention rates, fewer incidents of missed care, and increased organizational dedication and performance.

Ethical Compliance: Ethical approval was obtained from the Institutional Review Board of King Fahad Specialist Hospital, Dammam (IRB number: NED0425).

This article serves as a review of the current literature and does not include any research involving human or animal subjects conducted by the authors.

Data Access Statement: The data used and examined in this review were sourced from previously published studies, all of which are cited in the reference list. No new datasets have been created.

Conflict of Interest declaration: The authors declare that they have no affiliations with or involvement in any organization or entity with any financial interest in the subject matter or materials discussed in this manuscript.

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What is already Known

- Lower levels of job satisfaction were reported among younger nurses than among older nurses.
- Immigrant nurses face inequity, limited recognition, and cultural barriers.
- Nurses' job satisfaction is adversely affected by bullying and stress.
- Professional growth, supportive leadership, and job security enhance nurses' job satisfaction.

What this paper adds

- This study addressed the impact of workplace and demographic factors on nurses' satisfaction.
- This study examined expatriate challenges as key determinants of job dissatisfaction.
- These findings highlight the importance of recognition, growth opportunities, and leadership in enhancing nurses' retention.

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