

## Job Satisfaction among Nurses Working in the Private Sector: A Case Study of Adel Care Medical Centers

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### Abstract

Nurses' job requirements can be stressful and may affect their satisfaction. The majority of nurses in KSA are expatriates. Issues such as turnover and shortage further proves the importance of satisfaction among nurses in KSA. This research aims to assess the satisfaction of nurses in a private sector taking Adel Care Medical Centers as a case study.

The study was applied on nurses working at Adel Care Medical centers. The method used to measure nurses' job satisfaction levels were via semi-structured interviews. The study was qualitative. Thematic analysis was performed manually by filling the results into tables to measure the different levels. The study results showed that the majority of participants said that they didn't experience stress at work since they have become accustomed to handling stress well. Most of the participants financially support their families in their countries. Participants all agree that management accept requests for changes in working schedules and are supportive. The majority of participants agreed that they have become accustomed to the culture. Overall the satisfaction of nurses ranged from satisfied to very satisfied. The study concluded the following: the participants' satisfaction level ranged from satisfied to very satisfied. Most of the nurses reported no stress at their workplace. Several further expressed that they have become accustomed to handling stress well.

**Keywords:** Job Satisfaction; Job Stress; Nurses; AlQassim

### Introduction

#### Research background

Job satisfaction has been described repeatedly by many authors. Job satisfaction has been defined as "any combination of psychological, physiological, and environmental circumstances that cause a person to truthfully say that they are satisfied with a job" [1].

Several factors affect job satisfaction in individuals. Job satisfaction consists of positive and negative feelings a person may have towards their job. It is a group of feelings that a person experiences and how they handle them or feel about them [2]. The extent to which a job's qualities meet a person's demands determines how satisfied they are with their jobs [3].

D'Mello, *et al.* [4] described job satisfaction by: "Job satisfaction can also be seen within the broader context of the range of issues which affect an individual's experience of work, or their quality of working life" (p.15).

D'Mello, *et al.* [4] mentioned that job satisfaction can impact a person's quality of life which may further impact their working abilities or performance. Recognition of an employee's activity/work helps increase job satisfaction [4].

People are more satisfied with their jobs if they are happy [5]. Job satisfaction may be subjective, but some factors may be important in impacting it. Communication between an employee and their superior is an important factor that impacts job satisfaction. Allowing employees to express themselves safely increases their satisfaction. The company culture also affects the satisfaction of employees, it can produce a negative or positive effect on the employees. Employees' feeling of a sense of security directly affects their job satisfaction since they may feel safer in an establishment that has long-term goals that it plans to achieve. Having a clear leader to drive employees and encourage them to achieve their tasks directly affects the satisfaction of employees [6].

Job satisfaction increases when there is a clear path for career development or improvement. Having positive working conditions, such as; accepting other's opinions, preventing harassment, respecting other religions, and providing constructive criticism when needed, helps increase job satisfaction. Additionally, pays and benefit affect employee satisfaction. They may not be the only reason that affects satisfaction but they do have an impact. Rewarding and recognizing employees greatly impact employee satisfaction [6].

According to earlier studies, satisfied employees are more likely to give their best effort in order to meet organizational goals. Highly satisfied workers are frequently punctual, more productive, devoted, and happier in their personal lives. Similar to how safety and positive connections with coworkers and supervisors are the main sources of satisfaction, the nature of the job, the manner in which it is supervised, job stability, acknowledgement, and advancement are significant variables in determining employees' organizational commitment [7].

### Research problem

Abu Al Rub [8] describes nurses by: "Nurses are the nucleus of the health care system. Without the nucleus, the cell will not survive".

It is apparent that nurses are a vital part of any health sector. They form a fundamental part of every practitioner's office. In Saudi Arabia there is a high demand for nurses that cannot be met due to reduced availability [9]. The main role of a nurse is to care for patients, manage their physical needs, treat their underlining illnesses and prevent other illnesses from affecting their patients. They take care of patients more than physicians since they frequently visit the patient to check their vitals and administer drugs. If anything were to decline with a patient's health; the first to know would be a monitoring nurse since they are more closely observing the patient and present more than the physician [10]. Their job requirements can be stressful and may affect their satisfaction [11]. Nurses' roles have increased to include tasks that were previously performed by physicians. Saudi Arabia suffers significant rates of turnover together with an ongoing scarcity of Saudi nurses [12].

Furthermore, the demand for the growing health care services has outpaced the annual supply of Saudi nursing graduates. In addition to this difficulty, registered nurses experience significant turnover rates, which exacerbate organizational issues, disrupt organizational plans, and lead to subpar service delivery. These problems pose a significant threat to the effectiveness and efficiency of many health care services [13,14].

Saudi Arabia depends mostly on expatriate nurses. Only 18% of the total workforce comprised of Saudi nurses. There is a high turnover of nurses experienced worldwide. The shortage of nurses will definitely result in a poorer work performance and a reduction in patient care quality [15].

Al-Takroni, *et al.* [16] measured the productivity of Saudi nurses compared to non-Saudi nurses and found that they showed lower work productivity due to cultural issues linked with being married and working for long hours. Lower work productivity will lead to poorer patient care. It is imperative that Saudi Arabia acts to correct this growing problem.

Alboliteeh [17] who applied his research in private and public hospitals in Saudi Arabia, found that single (un-married) nurses reported being more satisfied than married nurses. Single nurses could focus more on their job and complete their tasks easily without being occupied by family matters; however, married nurses were often occupied by their familial matters. Alboliteeh [17] also mentioned that emigrant nurses reported to be more satisfied than Saudi nurses.

Expatriate nurses were reported to be more easily satisfied with their jobs in Saudi Arabia due to comparison with their working conditions in their own countries. Many reported that they chose to travel and leave their families due to economic reasons. It has been reported that age is also a significant factor that affects satisfaction. The older nurses reported to be more satisfied than the younger ones. It appears that the more mature nurses were more easily satisfied. Maturity appears to make people be more accepting and more easily satisfied [17].

Evidence suggests that the income, shift schedules, and negative public's view of nurses prevent the nursing profession generally from drawing an adequate number of Saudi men and women to pursue nursing as a career [18].

Hamid, *et al.* [3] reported that both nurses working in the private and public sector were dissatisfied but for different reasons. In Pakistan nurses in the public sector complained that they weren't respected by patients. They believe if doctors treated them respectfully in front of patients then the patients also would. Nurses in the private sector were treated with respect by the administration since their importance was recognized. The nurses in the private sector who had previous experience in the public sector noticed the difference in treatment between the private and public sector and were more satisfied than their counterparts [3].

### Research Aim, Objectives, Questions, and Scientific Contribution

This research aims to assess the satisfaction of nurses in a private sector at Adel Care Medical Centers. According to Al-Takroni, *et al.* [16], nurses were unsatisfied about their increased workload, low annual salaries and days offs. Al-Takroni [16] based his research on the public sector in public hospitals and primary health care centers in AlQassim. This study aims to further investigate the satisfaction of nurses in a private center in AlQassim, Saudi Arabia. To the author's knowledge there has not been a study published that aimed to measure the satisfaction of nurses in a private sector in AlQassim region so far.

The objectives of this research are the following:

- To assess the satisfaction of nurses in the private sector with regards to their salaries and benefits.
- To determine the satisfaction of nurses with regard to their workload.
- To investigate whether expatriate nurses are satisfied with their living conditions, days off, and housing allowances.
- To explore if nurses in the private sector are satisfied with their management and leadership.

This study aims to seek answers to the following questions:

1. What are the levels of satisfaction of nurses regarding different factors?
2. Why are the nurses satisfied or dissatisfied with their current conditions?
3. Are there any significant differences in the levels of nurses' satisfaction with regard to the factors considered?

**Research Limitations:**

- Since the research is interview based the sample size is limited for convenience purposes.
- Due to limited time and resources, the study was based at a specific private center located in AlQassim for convenience purposes.
- Many nurses are expatriates in Saudi Arabia so the study was conducted only on those who could speak English or Arabic.
- Additionally, since the study's sample was selected via a convenience sampling technique, it's possible that the findings are not applicable to all nurses in the Kingdom of Saudi Arabia.
- The results may not apply to other healthcare professionals considering the study was targeted on nursing practitioners.

**Theoretical framework**

The following diagram (Figure 1) shows the theoretical framework of the study.

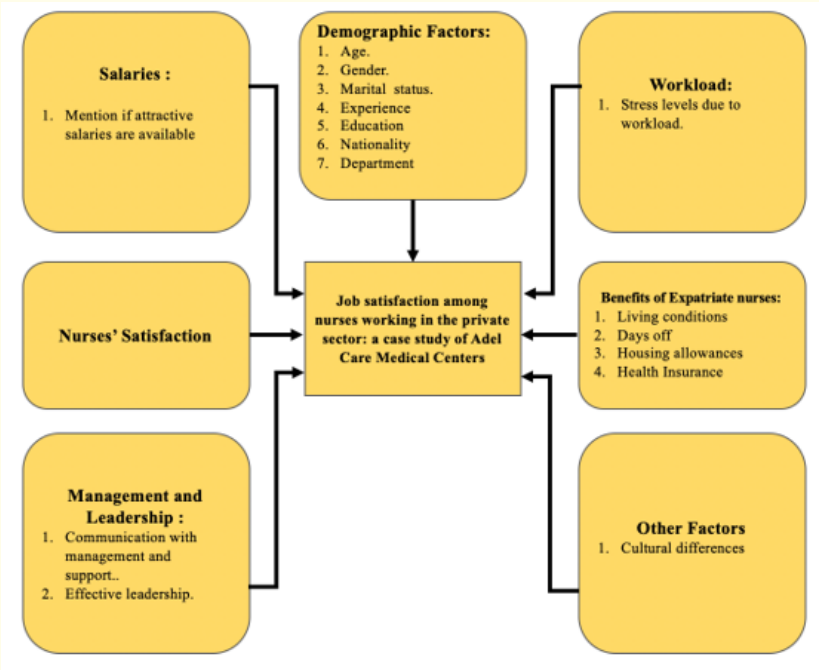


Figure 1: Theoretical framework.

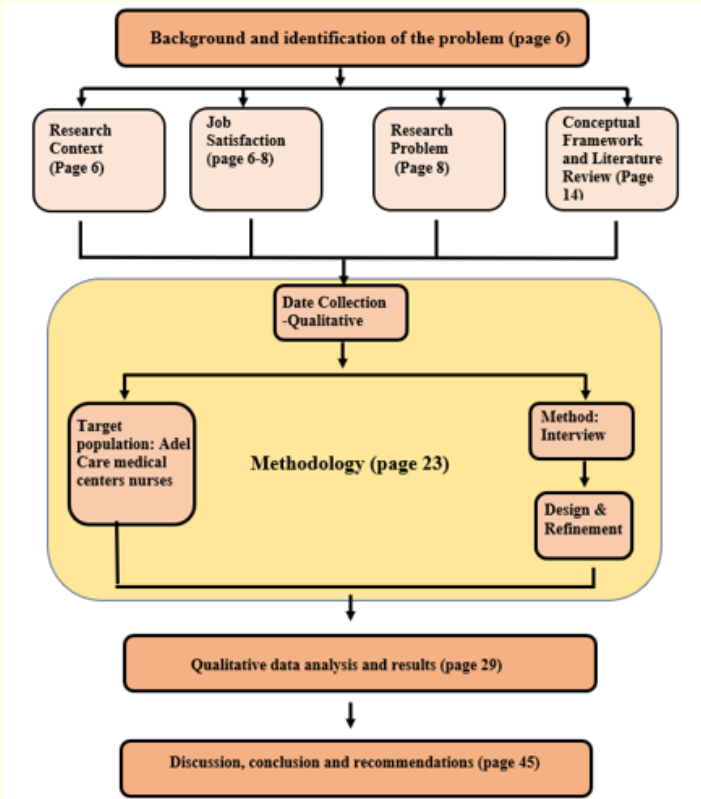


Figure 2: Research outline.

Literature Review

This research is qualitative. In qualitative researches abundant material is obtained from a modest sample size. Plentiful material is gathered but a lot of perception is also gained from a modest sample size. The issue with the modest sample size renders the study’s results not statistically dependable. The responses provided by the nurses might be affected by the researcher’s age, gender, personality, nationality, position, occupation and so on. Qualitative research has been criticized before for its meager sample size and lack of control group. It has been previously mentioned that the results of qualitative studies cannot be generalized due to the previously mentioned reasons [19].

Qualitative research is best used with researches about satisfaction since the participant is allowed to truly and extensively express themselves without being limited to a certain set of options or choices. The participants may express themselves and point out topics and areas that the researcher did not know of or consider. Qualitative research allows subjective answers to be truly expressed clearly without having a predetermined criteria.

The features of qualitative research paradigms

The qualitative data is plentiful and subjective. The sites of qualitative studies are natural and not artificial. The validity is high but the reliability is low. It generally applies from one situation to another [19].

Al-Takroni, *et al.* [16] aimed to assess the level of job satisfaction among staff nurses working in Ministry of Health (MOH) hospitals and primary health care centers (PHC) in Al Qassim region. The study showed that the majority of the nurses were satisfied with the administration. More than 50% were satisfied with their nursing directors' willingness to meet them. The nurses averaged with regard to their satisfaction towards their accommodation. Only 23.59% reported being unsatisfied regarding their housing. The majority of the nurses reported being unsatisfied with the entertainment in their accommodation. More than 48.82% reported being unsatisfied with the housing's utility conditions. Nurses were mostly satisfied with their work schedule, duty rotations, with nurse's assignments, time to perform nursing duties, availability of policy and procedures. However, they were unsatisfied by the staff number in unit and reported being not enough to undertake all nursing work. Most nurses were happy with the appreciation and the recognition from the administration after completing a task done well. The majority of nurses reported being satisfied with their ability to discuss patient health issues with their team members. Only 11.91% of nurses reported doctors being intrusive towards their mechanism in treating patients. Nurses reported being satisfied with informational exercises provided. The majority of nurses were moderately satisfied with the quality improvement activities that took place. Nurses were moderately satisfied with their salaries. The majority of nurses reported being moderately satisfied (38.8%) and unsatisfied (32.6) with their annual allowance. The majority of nurses were satisfied with their annual vacations but many were unsatisfied with their days off. Furthermore, nurses were unsatisfied with the sick leaves given. Al-Takroni [16] results showed nurses' job satisfaction level to being "somewhat satisfied". Al-Takroni [16] suggests the provision of proper housing's utilities. He further recommends improving the entertainment provided at the housing as well as adding additional activities to encourage positive competitiveness. The number of nurse attendant should be increased in order to decrease the workload. Nurses want a larger annual allowance. Furthermore, nurses day off should be revised in order to provide greater satisfaction.

Al Mutair, *et al.* [20] aimed to examine the quality of nursing work life (QNWL) among nurses working in Saudi Arabia and to determine the association between demographic variables and quality of work life among nurses. The study measured the quality of nursing work life (QNWL) and applied his study at numerous tertiary hospitals throughout various regions in Saudi Arabia. A large proportion of the study sample's nurses reported a moderate to high QNWL. It was predicted that a factor greatly impacting the QNWL would be monthly income. The results of this study, however, indicated a negative correlation between income and quality of life. The non-Saudi nurses had salaries less than 10,000 SAR; however this salary is esteemed more in their own countries. Working in Saudi Arabia is presumed to be a good opportunity for them which resulted in their QNWL to be moderate to high. Organizations can measure the quality of nurses' work lives using QNWL to identify areas that require improvement, change, or the implementation of new projects. Applying this may then positively affect the satisfaction of nurses at the institutions leading to higher sustainability.

Alotaibi [22] aimed to determine the connection between working environment and nursing professionals' satisfaction. The study was applied at hospitals in Riyadh region. The lowest score was found in the nurses mentioning that not enough bachelor nurses were available as needed. This may be due to the fact that the selected hospitals had a moderate shortage of nurses at the time. Shortage of nursing has been an issue that has long affected the medical practices in Saudi Arabia [22]. Nurses felt a moderate level of satisfaction to improve at the workplace presumably because they had opportunities where they could develop professionally. Which suggests that the more nurses progress the more their job satisfaction will increase. Other studies showed a link between job satisfaction of nurses and their ability to improve and develop professionally [23]. The possibility of promotion received the highest score while the ability to perform different tasks occasionally scored the lowest. Overall the study sample had moderate level of satisfaction. Additionally, nursing supervisors had higher recognition/impression of their working environment. Alotaibi [22] noticed that nurses who had more experience showed higher job satisfaction than lesser experienced nurses. Alotaibi [22] further mentions the major effect of working conditions on job satisfaction. Employees who reported good working conditions had higher job satisfaction. Providing good working conditions is imperative since it may affect the employees' ability to perform and apply their tasks appropriately.

Wali., *et al.* [25] conducted a study in Makkah region, Saudi Arabia. The aim of his study was to measure the satisfaction levels among the nurses in working in King Abdul Aziz Medical City Primary Health Care Centers. Wali., *et al.* [25] noticed that satisfaction levels among the nurses were moderate. The researchers observed that 58% of the nurses were satisfied while 42% were dissatisfied. About half of the participants were dissatisfied regarding their salaries (49%), working hours (47%), impending chances of advancement (44%). Furthermore, more than half (53%) were satisfied with their relationship between management and staff. The results showed that most of the nurses reported being satisfied towards their relationships with their managers and colleagues. Higher satisfaction scores were seen with nurses aged thirty to forty-four. However, these results were not statistically significant. Wali., *et al.* [24] recommended the application of qualitative studies in order to provide a more detailed analysis of the nurses' current situation and possibly provide solutions to the reduced job satisfaction problem. Hopefully this study will provide explanations and solutions to this dilemma.

Alboliteeh [17] aimed to determine the job satisfaction level of nurses and significant differences in their socio-demographic information. The study was applied in Hail region, Saudi Arabia. The study mentions the importance of nurses' job satisfaction which should be further investigated due to the increased amount of nurses who resign due to organizational issues. Two hundred-eighteen nurse respondents reported being satisfied with their jobs. Alboliteeh [17] found that there was no significant difference between male and female nurses. Regarding marital status there was a significant difference between single and married nurses. Single (un-married) nurses reported higher satisfaction levels than married nurses. This may be due to the fact that single nurses only had to concentrate at work and do not have other familial matters that may occupy them mentally or physically. However, the previous results were contradicted by another study; Olantunji and Mokuolu [30] which found single nurses to have more stress than married ones. The researchers further discovered a significant difference regarding satisfaction of nurses based on their nationalities (eight nationalities were included). Expatriate nurses reported being more satisfied compared to Saudi nurses. According to other studies, nationality did not affect job satisfaction; however, Al-Aameri [31] found that it played an important role regarding the commitment of the nurses. Age difference between the nurses also revealed a significant difference. Older nurses reported higher satisfaction levels compared to younger nurses. Maturity showed that the older nurses were more easily satisfied than their younger counterparts. In contrast, Al-Takroni., *et al.* [16] found that age difference did not affect satisfaction levels. Additionally, salary difference between nurses also showed a significant difference regarding satisfaction. Nurses with higher salaries reported higher levels of satisfaction. Higher salaries are obtained by having more experience or achieving more academic degrees. Nurses who had more experience were more satisfied. This may be due to the more experienced nurses having more salaries and being accustomed to the workload and work environment. Additionally, having more experience means more maturity would likely be gained. Nurses' satisfaction levels based on their characteristics should be taken in to consideration upon hiring so lower turnover may be achieved.

Lorber and Savič [25] aimed to determine the level of job satisfaction of nursing professionals in Slovenian hospitals and factors influencing job satisfaction in nursing. The researchers included nurse managers (96) and attendant nurses (413). Nurse Managers had significantly higher satisfaction levels than nurse attendants. The areas that showed these significantly different levels of satisfaction were with work, handling of the organization, their salaries, their position in the organization, their motivation for professional improvement, the level of security and reliability of employment, the assigned working hours, and the ability to engage in the decision-making process. Nursing job satisfaction was slightly associated with nurses' levels of education and negatively correlated with the nature of their employment, indicating that nurse managers have higher job satisfaction than nurses and that job satisfaction improves with academic achievement. Lorber and Savič's [25] study showed that nurses had a medium level of job satisfaction which is similar to the results of Golbasi., *et al.* [26] who performed his study in Turkey. Golbasi., *et al.* [26] found that nurses who were able to properly handle stress were more satisfied, she further mentions that proper stress management is an important factor that affects nurses' job satisfaction.

The objective of this study was to examine job satisfaction, motivation and associated factors among nurses working in the public health facilities of Ethiopia, with the aim of improving performance and productivity in the health care system [27].



This study found that 60.8% of nurses were satisfied with their professions. Nurses with over ten years of service and nurses older than twenty-eight years reported considerably greater levels of job satisfaction. Ayalew., *et al.* [27] found that nurses who worked at the hospitals were more satisfied with the working and living situations than nurses working at health centers. This is probably due to the fact that the health centers are deficient with regards to essential supplies and equipment, good schooling for children, electricity and clean water. Ayalew., *et al.* [27] also reported a low level of satisfaction due to salaries. The nurses' perception for organizational recognition and opportunities for training and promotion were also negative. The study recommends applying a mixture of quantitative and qualitative research to further understand reasons of poor satisfaction regarding remuneration, working and living conditions.

Javanmardnejad., *et al.* [11] aimed to examine the relationship between happiness and quality of working life and job satisfaction among nursing personnel. This study was performed in Iran and found that nurses working in Iran had a low level of job satisfaction. Javanmardnejad., *et al.* [11] noticed that the greater the happiness the higher the job satisfaction. A directly proportional relationship was noticed. Nurses were happy if they received pay they deemed enough for the work-load they put in. Javanmardnejad., *et al.* [11] also found that nurses felt satisfied with their jobs when they fulfilled all the job requirements.

Methodology

Approval was first obtained from the private sector's organizational heads to apply this research. The private center had eighty-seven nurses currently working at the time the study was applied. A small sample size of ten was chosen due to limited time and resources. Ten nurses were chosen randomly based on who was available at the time.

Data collection procedure

Nurses were asked basic information pertaining to their demographic data. Information such as: age, gender, marital status, experience, education, nationality, salary and current department they were working in. The researcher ensured them that their answers would be kept confidential and their names will be kept confidential. The nurses were asked to provide verbal and written approval before participating in this study. A list of semi-structured questions were prepared prior to applying the interview. The dependent variable was nurses' job satisfaction. The independent variables were the demographic data, workload, benefits of expatriate nurses, salaries, management and leadership, and other factors. Figure 3 shows the relationship between the two variables.

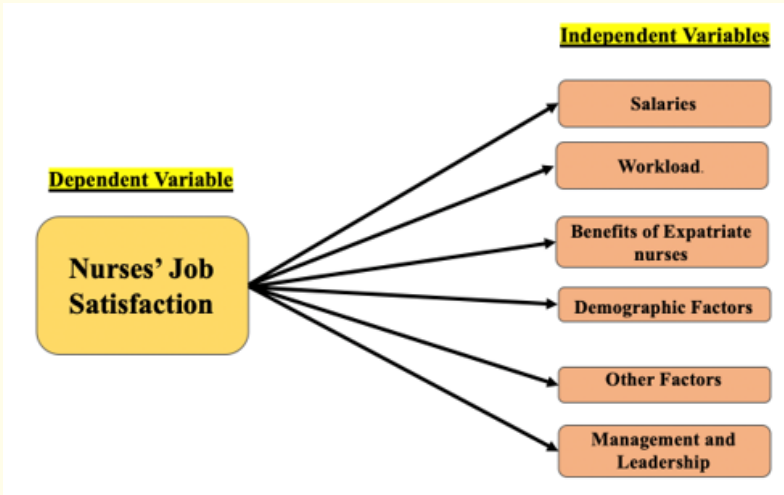
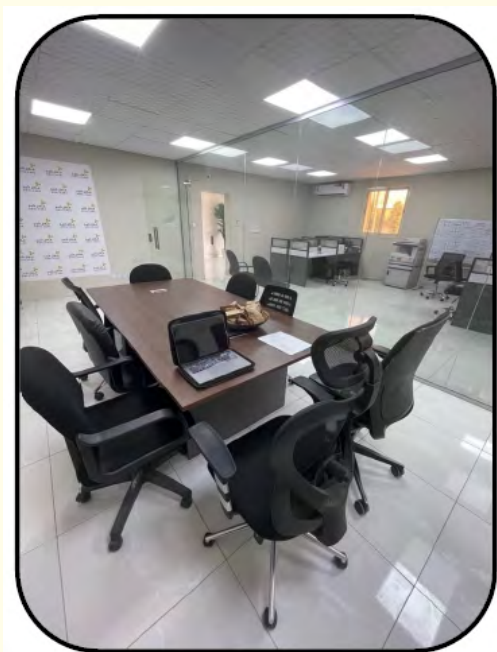


Figure 3: The relationship between independent and dependent variables.



The administration provided a private meeting room at their facility which was utilized as needed (Figure 4). Snacks were served as a mechanism to make nurses more comfortable and relaxed. Introductions were first made followed by brief conversation and opening question (Figure 5) to make nurses more relaxed. After that, explanation of the study was provided to the nurses. Additionally, nurses were informed that they may withdraw from this study if they would like. The nurses were given a printed form of the questions so that they may keep up and understand better. After answering each question, the researcher asked the nurse to read and make any adjustments to the written text if she desired. If the nurses were silent or couldn't answer then probing mechanism was applied to encourage them to express themselves. After filling the questions previously prepared, both the researcher and the nurse reviewed them to ensure that all answers were recorded correctly.

The detailed interviews gave an opportunity for the nurses to express themselves freely and describe their opinions and satisfaction level with several factors. The interview questions encompassed several topics and covered positive and negative factors. Work- related difficulties, work benefits, salary satisfaction levels, and feelings towards management style were discussed. The interviewer acted as a narrative guide that asked the questions and encouraged or probed for answers. On average the interviews lasted for 40 minutes. The interviewer took jottings and typed. The answers provided by the nurses were not judged and the interview style was semi-structured.



**Figure 4:** The meeting room provided to apply the interviews.

### The inclusion and exclusion criteria were as the following:

The study setting was applied at a private center that had two different locations in AlQassim.

Inclusion Criteria
Nurses having at least one year of experience in this specific private sector.
Nurses who understand and speak English or Arabic.
Nurses who are certified and licensed to work in Saudi Arabia.
Nurses 25 years old and above.
Nurses who consent to participate in this study.
Nurses who are working at this particular organization.
Nurses who were present and working at the time the study was applied.
Exclusion Criteria
Nurses having less than one year of experience in this specific private sector.
Nurses who do not understand and speak English or Arabic.
Nurses who are not certified or licensed to work in Saudi Arabia.
Nurses who are less than 25 years old.
Nurses who do not consent to participate in this study.
Nurses who do not work at this particular organization.
Nurses who were not present and working at the time the study was applied i.e. on vacation or leave.

Table 1

Qualitative analysis

Thematic analysis was used to analyze the results of this study [28]. The nurses’ answers were analyzed and grouped manually in tables. A table was made for every question. The nurses’ answers for each were filled and organized in to each table manually. Similarities, differences, patterns and individual responses were recorded [19].

Ethical consideration

Our study did not require ethical approval because all procedures applied in this study were in compliance with the National Health and Medical Research Council ethical standards. Management approval from the private center was obtained prior to contacting the nurses. Written and verbal consent was obtained from all participants prior to conducting this study. Participants were also informed that they may withdraw from this study at any stage if they desire to discontinue (Figure 6).

Analysis and Results

Interview details

Interviews were conducted in Arabic and English languages that was determined by the participants’ preference. All participants spoke and understood English but some citizens from Arab countries preferred to speak and express themselves in Arabic. The researcher provided a printed form of the questions for the participant to read. Interviews of employed nurses were applied in order to further understand the satisfaction of nurses. The researcher conducted 10 interviews. Table 2 shows the interview details summarized.

Participant number	Age (Years)	Gender	Marital status	Experience (Years)	Educational level	Monthly income (SAR)	Nationality	Department
1	45+	Female	Married	20+	Bachelor degree	4000-6000	Philippines	Emergency
2	30 - 35	Female	Engaged	5 - 10	Bachelor degree	4000-6000	Sudan	Pediatric
3	25 - 30	Female	Single	1 - 5	Bachelor degree	4000-6000	Sudan	Dental
4	25 - 30	Female	Married	1 - 5	Bachelor degree	4000-6000	India, Kanyakumari	General Medicine
5	25 - 30	Female	Single	5 - 10	Diploma degree	2000-4000	India, Kerala	Dermatology
6	25 - 30	Female	Single	5 - 10	Bachelor degree	4000-6000	India, Telangana	Dermatology
7	35 - 40	Female	Single	10 - 15	Bachelor degree	4000- 6000	Philippines	Emergency
8	25 - 30	Female	Engaged	1 - 5	Bachelor degree	4000- 6000	India, Kerala	Ear Nose Throat
9	25 - 30	Female	Single	1 - 5	Bachelor degree	4000-6000	India, Tamil Nadu	Dental
10	25 - 30	Female	Married	1 - 5	Bachelor degree	4000-6000	India, Kerala	Emergency

**Table 2**

### Satisfaction of the nurses in Adel care medical centers

The interviews were interpreted according to the different aspects of satisfaction among nurses as shown in figure 1. Each interviewee was assigned a number and their responses were shown in italics. The nurses shared their thoughts based on their past experience while working in this current institution. The researcher analyzed the data by noticing relevant phenomena, finding similarities, differences, and patterns within the responses [19].

### The outcomes of the researcher's observations

#### Nursing as an occupation

The interview was started with an opening question in order to make the nurses more relaxed. Their answers were found to be interesting and inspirational. The interviewees were asked why they chose to become nurses. The nurses' answers were that they enjoyed helping people, wanted to become doctors but got accepted into nursing instead, chose nursing since it was a more affordable choice, and that their parents suggested nursing.

#### Workload Description (Question 1)

Most of the nurses' described of the workload as being different throughout the week. Some days it was considered to be high while other days it could be very low. Eight out of ten nurses chose "some days high, some days low". Only two nurses chose low workload.

Workload Level					
Interviewee	Low	Medium	High	Some days high some days low	Other
1				✓	
2				✓	
3				✓	
4				✓	
5	✓				
6				✓	
7				✓	
8	✓				
9				✓	
10				✓	

Table 3

#### Nurses' Satisfaction level towards the workload (Question 2)

Satisfaction Level Towards Workload						Reason
Interviewee	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	
1	✓					I am very satisfied. I can handle whatever workload I am given.
2	✓					I enjoy the work here and there is no stress.
3		✓				I am satisfied because there is no stress.
4	✓					I am very satisfied because there is no stress.
5			✓			I am satisfied.
6		✓				The work is easy.
7			✓			Sometimes it can be stressful but I have become accustomed to it.
8	✓					Workload here compared to India is very low.
9	✓					There is no stress in the center I work in compared to India.
10	✓					I can handle stress and my supervisor is very supportive.

Table 4

Six participants chose “very satisfied”. Two participants chose “satisfied” and two chose “neutral”.

Participants (2), (3), (4), (7), (8), (9) and (10) all said that they didn’t experience stress at work and have become accustomed to handling stress well.

Participant (5) and (6) said that the work is very easy to accomplish.

Participant number (1) explained “I am very satisfied because I love my job and can handle whatever workload I am given. I also don’t mind taking overtime”.

Participant (5) said “As an employee I am satisfied but as a professional nurse I am not. In nursing to improve you should meet several/ many patients to gain experience”.

Participant (6) who was working in the dermatology department and performed laser hair removal for patients didn’t like that and said nurses shouldn’t be performing laser hair removal. She said “The work is easy and there are a lot of patients but I like to work. Nursing shouldn’t be working in laser department and perform laser, they should treat patients. In India nurses don’t perform laser hair removal. I will do whatever they ask me as long as I fulfil the task requirements”.

Participant (7): said “I am also in charge of the medical waste in my center in addition to orientation of new staff. Sometimes it can be stressful but I have become accustomed to it”.

Participant (9) mentioned “Dentists and doctors are respectful and treat me well. They do not give orders but they kindly request. The doctor treats me well so even when there are more patients and a heavy workload, I can handle it because the doctor is nice and treats me well”.

### Satisfaction of benefits (Question 3)

Satisfaction Level Towards Benefits						Reason
Interviewee	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	
1			✓			Work only no activities. My housing side is good now. I like the days off.
2	✓					I saw the contract before and was satisfied with what they offered.
3	✓					Housing is close 2 minutes. Insurance is provided so I feel safe. I am happy to have my day off. All living conditions are good.

4				✓		Health insurance does not apply in the facility I work in. The housing environment is poor
5				✓		When I came here I was surprised with the living conditions
6		✓				I think of housing as a basic area provided to sleep, eat, and shower so I am satisfied.
7		✓				The housing was fine before but now it has improved.
8		✓				I do not like the housing conditions. I am happy with my day off, and working conditions.
9		✓				I am happy with the conditions at the center but unsatisfied with the conditions in the hostel.
10		✓				In my housing situation my room is in the fourth floor and it can be difficult sometimes to go up and down.

**Table 5**

Five participants chose “satisfied. Two were “dissatisfied”. Two participants chose “very satisfied”. Only one chose “neutral”.

Participants (4), (5), (7), and (9) complained that her insurance was not accepted in the facility she worked in.

Participants (4), (5), (8), and (9), did not like the housing conditions that they stayed at.

Participants (1), (3), and (8) were happy with their days off.

Participants (1) and (3) liked the housing conditions they had additionally they appreciated how close housing was to their job location (same building).

Participant (1) worked in the governmental sector in Saudi Arabia for 35 years and compared her current benefits with what she received before. What she was mostly annoyed about in her current employment benefits is the lack of recreational activities. She said “Work only no activities. Games help nurses to not be board because being board is bad and will cause you to think of negative things and may cause nurses to start problems”.

Participant (2) “I saw the contract before and was satisfied with what they offered. They have kept their word and provided everything they promised. They give me my offs and my salary always comes on time”.

Participant (3) shared “If any technical issues occur they are immediately fixed”.

Participant (5) lived with her family in her grandfather’s house. She said “In my country I lived as a queen but (no money myself but my parents worked) when I came here I was surprised with the living conditions.” Her parents now do not work and she is now financially responsible for her family.

After speaking with their management, they said that they are working on creating better housing for the nurses. They are waiting for appropriate funding to be available to provide better housing conditions. Participants (1), (2), and (3) lived in the newer housing that had been provided. The other participants lived in the older housing which they found to have poor living conditions. They also said that they were trying to get them insurance coverage that is acceptable in the same facility they work in.

#### Benefits received (Question 4)

Benefits Received							
Interviewee	Health Insurance	Iqama	Paid Vacation	Retirement Plan benefits	Housing Allowance	Plane Tickets	Other
1	✓	✓	✓	✓	✓	✓	
2	✓		✓		✓		Overtime provided when requested by nurses, days off.
3	✓	✓	✓				Close housing, days off, family visit iqama is paid by them.
4	✓		✓				
5	✓	✓	✓				
6	✓	✓	✓		✓		
7	✓		✓	✓			
8	✓		✓	✓			
9	✓		✓	✓			
10	✓		✓	✓			

**Table 6**

After interviewing the nurses the researcher noticed that several did not know of all the benefits they had and could utilize. Management informed the researcher that nurses are given health insurance, dental insurance, paid vacation, monthly allowance for food, transportation services, plane tickets, two hospital uniforms, iqama (visa) payments, nurse employee of the month bonus, and continuous education (such as lectures, training, and BLS etc....). What is checked above is what the participants informed the researcher during the interview.



## Nurses' satisfaction with their salary (Question 5)

Satisfaction level towards salary						Reason
Interviewee	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	
1			✓			In my previous governmental job I received more. What I receive now is just enough for you to survive.
2	✓					I am satisfied because my salary covers all my expenses and comes on time.
3		✓				The salary provided is suitable with the workload.
4		✓				My one month salary is enough for one month only, I cannot save.
5		✓				There is not much work performed anyway so I am satisfied with the salary
6		✓				The salary I receive covers all my expenses and I also provide charity
7			✓			I feel neutral and am thankful for the salary I receive.
8	✓					My friends working in other clinics get less salary than me so I am satisfied.
9		✓				My salary covers my expenses.
10	✓					I receive more salary here than in India so that is why I am satisfied

Table 7

Five participants chose "satisfied". Three participants chose "very satisfied". Only two participants chose "neutral".

Participants (1), (4), (5), (6), (7), (8), (9), (10) financially support their families in their countries.

Participant (6), (9), (10) said "In India there is more stress in the workplace (hospital sector) and we also get paid less".

Participant (1) who previously worked in the governmental sector mentions that she had to make cut backs and adjustment towards her new lower salary. "Before I could spend more and live a more luxurious life. Now I need to cut those extra unnecessary expenses".

Participant (5) shared that "There is not much work performed anyway so I am satisfied with the salary. My salary covers your expenses but I would like to send more to my family. I financially support my entire family. I would like to send more money, my family has started building their house. They still need more funding to successfully complete it. I believe whatever hardships I had to endure regarding housing and living abroad are worth it compared to the salary I have received so far because I was able to improve my family's condition".

Participant (7): "I believe I should be receiving more because of my experience and performance but I understand the circumstances that have limited the salary".

Participant (4) who sends money to her family and also her husband's family said "My one month salary is enough for one month only, I cannot save. I would like to send more money but cannot".

#### Satisfaction with leadership and management (Question 6)

Satisfaction Level Towards Leadership and Management						Reason
Interviewee	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	
1			✓			They are not health professionals so sometimes we need to further elaborate and explain things.
2	✓					They are nice and are happy to help.
3		✓				If I have any problems or issues they are happy to help.
4	✓					They are supportive and helpful. We feel comfortable working with management. Management solve our problems when they arise.
5		✓				The upper management work hard to provide satisfaction for the nurses and other aspects.
6		✓				Management treat us with respect and will ask us if we have any problems, they try to help when they can.
7			✓			Mostly management respect me and treat me well. I also feel valued.

8		✓				When I ask management for help or to solve a problem they provide solutions. Management here treat us with respect but in India we are given a lower level of respect by management.
9	✓					Management is very good but I recently encountered an issue with them. I wanted to take my yearly vacation but they refused.
10	✓					They provide everything to us. Any problem we have my manager helps us and solves our problem and provides psychological support. They provide us with time off if we need to.

**Table 8**

Four chose “very satisfied”. Four chose “satisfied” and two chose “neutral”.

Participants (1), (2), (3), (4), (5), (6), (7), (8), (9), and (10) all agree that management accept requests for changes in working schedules and are supportive. They are flexible with working hours and help when they can.

Participants (1), (2), (3), (4), (5), (6), (8), and (10) all agree that management respond to them and help solve their problems.

Participant (1, (5), and (6) “The management team should try to keep the same employees for longer times to avoid confusion, changes may cause difficulties”.

Participants (3), (4), (5) mention that management are staffed adequately and fulfil their tasks properly.

Participant (1) and (5) mention that management do not have medical knowledge which may cause difficulties with communicating work-related issues.

Participants (5) and (6) feel that they are heard by management.

Participant (1) mentioned that more management staff should be employed.

Participant (6) says “Management always listen to us and try to help but they can’t always provide solutions. The hostel issue seems to be out of their hand”.

Participant (7) mentions that Muslims get less working hours during Ramadan since they are fasting but non-Muslims still work for nine hours.

Participant (8) shared “I once was sick and needed treatment for gastric issues, I couldn’t go to another center for treatment so the manager gave me a discount”. She also mentions that in India management treat them with less respect.

Participant (9) who selected “very satisfied” says that she has always been satisfied with management but due to them recently refusing her vacation has become upset with them.

### Other factors (Question 7)

Other Factors	
Participant	Answers
1	Working in Saudi Arabia helped me financially. I became adjusted to the culture and adapted. I learned many things from here and converted to Islam so did my husband but my children did not. I’ve lived in Saudi Arabia so much I will need to adjust when going back to the Philippines.
2	At the beginning the new place affected me but then I became accustomed. The culture is similar to my country and I recognized it quickly. I am a Muslim and we share the same ideologies.
3	Patients’ reaction and treatment of nurses. Some patients can be very rude. The culture is similar and I understand it. I am accustomed to not going out much so coming to Qassim and also not going out much is the same.
4	The city is safe. My friends working in other countries like Oman and Kuwait do not feel safe. Before coming here I was scared because of the stories I heard but after one week only I became comfortable stated feeling safe.
5	Before I came I was scared of coming to Saudi Arabia but then I became accustomed and started liking it. Here they (patients, managers and colleagues) respect the woman compared to India.
6	I would like celebrations to be made. I want activities and parties. We celebrate among ourselves in the housing.
7	Before coming to KSA I attended a mandatory orientation lecture that informed me of the cultural differences so I was prepared and didn’t face any cultural difficulties.
8	I am Christian when I came I found the culture new to me which I am not accustomed to. I soon became accustomed and it has become normal to me. Wearing an abaya was new to me but now I am comfortable wearing it. I prefer colors over black but now colored abayas are accepted in the community so I am happy. In Riyadh women are allowed to walk freely without an abaya, I would like that to be applied in Qassim as well. People should be allowed to live the way they desire. People in Qassim look at you if you do not wear an abaya.
9	When I first came I felt homesick since it is the first time I leave and live away from my family. When I was studying I lived at home as well.
10	I didn’t face any cultural difficulties because they accept our culture. (Bindi, red dot on forehead)

**Table 9**

Participants were asked if they would like to add anything which we may have not included.

Participants (1), (2), (3), (7), (8), and (10) all agreed that they have become accustomed to the culture.

Participant (4) and (5) said that they were scared before coming to Saudi Arabia because of what they heard before.

Participant (4) mentioned that she feels safe in working in Qassim.

Participant (5) shared that patients, staff, and management in Qassim treat them with more respect than in India.

Participant (6) said that she would like the institution to have more celebrations, activities, and parties and allow the nurses to celebrate.

### Summary of satisfaction levels

Topics	Participants' Satisfaction Levels for all Questions				
Satisfaction Levels	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Workload (Question 2)	6	2	2	-	-
Benefits (Question 3)	2	5	1	2	-
Salary (Question 5)	3	5	2	-	-
Leadership and Management (Question 6)	4	4	2	-	-
Total	15	16	7	2	-

**Table**

Fifteen chose "very satisfied". sixteen chose "satisfied". seven chose "neutral" and only two chose "very dissatisfied". Overall the satisfaction of nurses ranged from satisfied to very satisfied.

### Discussion

This study aimed to measure the nurses' satisfaction level in a private sector located in Alqassim. This study showed results similar to Al-Takroni, *et al.* [16]. The majority of nurses reported being satisfied with management in both studies. Nurses were less satisfied with their housing conditions in both studies. Al-Takroni, *et al.* [16] also showed that nurses were satisfied with their schedules similar to this study.

Al-Takroni, *et al.* [16] found that age difference did not affect satisfaction levels. Alboliteeh [17] reported that age difference between the nurses also revealed a significant difference. Older nurses reported higher satisfaction levels compared to younger nurses. Maturity showed that the older nurses were more easily satisfied than their younger counterparts. This study showed the opposite. The two oldest nurses with the most experience showed lesser satisfaction levels. This may be due to both nurses being from the Philippines and having higher expectations. The majority of the study sample were from India.

Al-Takroni, *et al.* [16] reported nurses being moderately satisfied with their salaries. This study showed higher satisfaction among nurses with number of participants' who selected "satisfied" (five) and "very satisfied" (three). Similarly, Al Mutair, *et al.* [20] reported the quality of nursing work life to be moderate to high regarding their salaries in their study. Ayalew, *et al.* [27] also reported a low level of satisfaction due to salaries. Alboliteeh [17] reported that salary difference between nurses also showed a significant difference regarding satisfaction. Nurses with higher salaries reported higher levels of satisfaction. Higher salaries are obtained by having more experience or achieving more academic degrees. Participants in this study all received similar salaries regardless of the difference in experience they had. This may explain participants' (1) and (7) choice of "neutral" towards their satisfaction level of their salary.

In contrast to Al-Takroni, *et al.* [16] who reported nurses were unsatisfied with their days off, this study showed the opposite. Three nursing participants reported being happy with their days off in this study. None of the participants expressed dissatisfaction towards their days off.

Alotaibi [21] reported that participants expressed that their supervisors and managers were good and listened to their concerns which is similar to this study (participants (1), (2), (3), (4), (5), (6), (8), and (10)). Similarly, Wali, *et al.* [24] found that 64% were satisfied

with their immediate managers. Alotaibi [21] noticed a significant moderate positive correlation between working environment and job satisfaction. Similarly participants (3) and (9) described their working conditions positively. Hamid., *et al.* [3] whose study was based in Pakistan, mentioned that nurses in the private sector were treated with respect by the administration since their importance was recognized compared to nurses working in the governmental sector. Participant (8) mentioned that management treat them with more respect here than in India.

Olantunji and Mokuolu [29] found single (un-married) nurses to have more stress than married ones. The results in this study showed no difference between married and single (un-married) nurses. All the participants came to Saudi Arabia for work and left their families behind. This may explain why all nurses (married and single) expressed similar levels of stress. Participants (2), (3), (4), (7), (8), (9) and (10) all said that they didn't experience stress at work and have become accustomed to handling stress well. Participant (5) and (6) said that the work is very easy to accomplish. Participant (5) further expressed that she is satisfied as an employee but she is not satisfied professionally because she cannot improve herself professionally when there are less patients.

Alboliteeh [17] mentioned that expatriate nurses were reported to be more easily satisfied with their jobs in Saudi Arabia due to comparison with their working conditions in their own countries. Participant (6), (9), (10) said "In India there is more stress in the workplace and we also get paid less." Similar to Alboliteeh [17] who mentioned that many reported that they chose to travel and leave their families due to economic reasons. Participants (1), (4), (5), (6), (7), (8), (9), (10) all said that they financially support their families in their countries.

Al-Takroni [16] results showed nurses' job satisfaction level to being "somewhat satisfied". Al Mutair, *et al.* [20] mentioned that large proportion of the study sample's nurses reported a moderate to high quality of nursing work life (QNWL). Alotaibi [21] reported that overall the study sample had moderate level of satisfaction. Additionally, Wali., *et al.* [24] noticed that satisfaction levels among the nurses were moderate. Similarly, Lorber and Savič's [25] study showed that nurses had a medium level of job satisfaction which is similar to the results of Golbasi., *et al.* [26]. Similar to this study, Ayalew., *et al.* [27] found that 60.8% of nurses were satisfied with their professions. In contrast to this study, Javanmardnejad., *et al.* [11] found that nurses working in Iran had a low level of job satisfaction. Contrary to this study, Hamid., *et al.* [3] reported that both nurses working in the private and public sector were dissatisfied. This study showed nurses' satisfaction to range from satisfied to very satisfied.

## Conclusion

The findings of this study showed positive results. The participants' satisfaction level ranged from satisfied to very satisfied. The majority of nurses complained about the housing conditions but half the participants reported being "satisfied" regarding their benefits all together. Mostly, nurses appeared to enjoy their workplace and relationships with their managers. Several nurses mentioned that they were first scared of working in Saudi Arabia, but soon became accustomed. Most of the nurses reported no stress at their workplace. Several further expressed that they have become accustomed to handling stress well. This study showed higher levels of satisfaction compared to nurses working in Iran, Slovenia, and Pakistan [3,11,25]. Nurses working in Ethiopia showed similar levels of satisfaction [27].

## Recommendation of Future Work

Additional research should be applied on a larger sample size to measure the reliability and validity of the results.

- More studies are needed to measure the satisfaction levels of nurses in different cities in Saudi Arabia.
- Some factors mentioned by the nurses such as: culture, should be included and studied further in future researches.
- A more thorough and detailed interview should be applied in future qualitative studies.

Ethical Consideration

Our study did not require ethical approval because all procedures applied in this study were in compliance with the National Health and Medical Research Council ethical standards. Management approval from the private center was obtained prior to contacting the nurses. Written and verbal consent was obtained from all participants prior to conducting this study. Participants were also informed that they may withdraw from this study at any stage if they desire to discontinue.

Appendix

Interview questions: (semi-structured)

First introductions and explanations of the objectives of the research project.

Second: Thank the interviewee for consenting to participate in this research. Mention that the interview would last from 40-60 minutes.

Ask for the demographic data and then start with the interview with the nurse.

Name : \_\_\_\_\_

Mobile Number: \_\_\_\_\_

I consent to be a part of this study \_\_\_\_\_

Age:

- a) Less than 25 years
- b) 25 – less than 30 years
- c) 30 – less than 35 years
- d) 35 – less than 40 years
- e) 40 – less than 45 years
- f) 45+

Gender:

- a) Male
- b) Female

Marital status:

- a) Single
- b) Engaged
- c) Married
- d) Divorced
- e) Widowed

1

Name \_\_\_\_\_ Participant Number \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/23

Experience:

- a) 1- less than 5 year
- b) 5- less than 10 years
- c) 10 – less than 15 years
- d) 15 – less than 20 years
- e) 20+ years

Level of education:

- a) Diploma
- b) Associate Degree
- c) Bachelor Degree
- d) Master's Degree
- e) Post-master's Degree
- f) Doctorate Degree
- g) Other \_\_\_\_\_

Nationality: \_\_\_\_\_

Income:

- a) 1500- Less than 2000 S.R
- b) 2000-Less than 4000 S.R
- c) 4000-Less than 6000 S.R
- d) 6000-Less than 8000 S.R
- e) 8000+ S.R.

Department: \_\_\_\_\_

Questions:

To get nurse to be more relaxed a simple question is asked that is not part of the variables intended to be measured but the answers will still be mentioned in the study. We tried to write questions with simple English since most/all of the nurses did not speak English as their first language.

Why did you take up nursing as an occupation? "Why did you want to become a nurse?"

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2



Name \_\_\_\_\_ Participant Number \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/23

1. How would you describe the workload in the center you are working in?

a) Low workload

b) Medium workload

c) High workload

d) Some days high, some days low (not the same everyday)

e) Other \_\_\_\_\_

2. What is your level of satisfaction towards the workload?

a) Very satisfied

b) Satisfied

c) Neutral

d) Dissatisfied

e) Very dissatisfied

Why?

3. How satisfied are you with the benefits as an expatriate? (Housing allowance, days off, living conditions)

a) Very satisfied

b) Satisfied

c) Neutral

d) Dissatisfied

e) Very dissatisfied

Why?

4. What benefits do you receive? (For example: Health insurance, Paid time off (PTO), Retirement plan benefits, Flexible work schedule, Dental insurance, Paid family leave, Professional development and education benefits, Disability insurance)

3

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Name \_\_\_\_\_ Participant Number \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/23

**5. How satisfied are you with the salary?**

a) Very satisfied  
b) Satisfied  
c) Neutral  
d) Dissatisfied  
e) Very dissatisfied

**Why?**

\_\_\_\_\_

\_\_\_\_\_

**6. How satisfied are you with the management team and leadership style?**

a) Very satisfied  
b) Satisfied  
c) Neutral  
d) Dissatisfied  
e) Very dissatisfied

**Why?**

\_\_\_\_\_

\_\_\_\_\_

**7. Are there any other factors that you would like to mention which we haven't asked about?**

(For example cultural difficulties, difficulties living in Saudi Arabia compared to your country, benefits of working in Saudi Arabia compared to your country, working in Riyadh or Qassim etc.....)

**1- No**

**2-Yes, If yes what are they?**

\_\_\_\_\_

\_\_\_\_\_

4

Figure 5

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