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Life Satisfaction and Personal Values as Mediators of Work Engagement and Turnover Intention among Medical Officers in South-West, Nigeria

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Abstract. Turnover intention among medical officers is a serious problem that could prove costly to healthcare services and the nation. Investigating the factors that could influence it is therefore a worthwhile undertaking. Consequently, this study examined life satisfaction and personal values as mediators of work engagement and turnover intention among medical officers in South-West, Nigeria. A sample of 397 medical officers made up of doctors and nurses was chosen from public hospitals in South-West Nigeria through the stratified random sampling technique. Instruments used for data collection were the Demographic Data Inventory (DDI), Satisfaction with Life Scale (SWLS), Personal Values Scale (PVS), Work Engagement Scale (WES), and Turnover Intention Scale – 6 (TIS-6). Four hypotheses were formulated and tested by means of simple linear regression analysis, Hayes' process model, and Pearson's rat the .05 level of significance. Results revealed a significant influence of work engagement on turnover intention (β = -.295, t = 14.275, p <.05), and significant mediating roles of life satisfaction (coeff. = .24, t = 8.40, p < .05) and personal values (coeff. = .24, t = 8.40, p < .05) in the influence of work engagement on turnover intention. There were significant relationships between life satisfaction and work engagement (r = .347, p < .05), personal values and work engagement (r = .162, p < .05), and life satisfaction and personal values (r = .127, p < .05) but non-significant relationship between personal values and turnover intention (r = .047, p > .05) among medical officers in South-West, Nigeria. It was subsequently recommended, among other things, that government should motivate medical officers in its employ in order to increase their life satisfaction.

Keywords: Life Satisfaction, Personal Values, Work Engagement, Turnover Intention, Medical Officers.

1. Introduction

All over the world, medical officers, specifically, doctors and nurses are the backbone hospital care and the health delivery system. Turnover among this category of people can therefore be detrimental to the provision of health services to patients (Snavely, 2016).Turnover among medical officers in healthcare is rampant and of serious concern. High turnover rate among employees hinders organizational performance due to the fact that employees are the major determinants of organizational performance and survival (Puteh & Arshad, 2015).Turnover intention as used in connection with employees refers to the likelihood of employees leaving their current jobs or organizations (Biswakarma, 2016). Turnover intention paves the way for the actual turnover behaviour in line with the theory of planned behaviour which avers that behaviour intention is a good predictor of actual behaviour (Ajzen, 1991). Turnover has been discovered to have high correlation with turnover behaviour by Herrbach, Mignonac and Gatignon (2004). In

effect, turnover intention is expected to predict turnover behaviour of workers.

There are various effects of high turnover in the healthcare sector which can affect both the employees and patient care. Examples of major costs associated with turnover include expenses of recruiting, selecting, and training of new employees, loss of knowledgeable and skilled manpower, and lower productivity (Maqbali, 2015; Yousaf, Sanders, & Abbas, 2015). Turnover of medical officers could also cause disruption to hospitals' operations, potentially leading to a decrease in patronage and loss of patients (Cascio & Boudreau, 2010). Retaining qualified and skilled medical officers may help hospitals maintain a stable workforce required for the effective healthcare delivery.

Some of the factors responsible for turnover behaviours among health workers in Nigeria include poor remuneration, dilapidating state of health and hospital facilities and poor conditions of Nigeria's health care (Odesola, Ojerinde, Isenyo, Itode, Babalola & Ede, 2019). This is evident in the exodus of many medical doctors and other health workers in the country to United Kingdom, Canada, Saudi Arabia, Kuwait, and other foreign countries in search of greener pastures. Quoting the president of the Nigerian Medical Association (NMA), they averred that 700 doctors leave Nigeria annually and that 60 doctors dump Lagos hospitals every six months. Turnover of qualified nurses also can have negative impact on the healthcare system and the medical profession as a whole. Almalki, Fitzgerald and Clark (2012) opined that nurse turnover can have adverse consequences on the capacity to meet patient needs and provide quality care. The consequences of high turnover of medical officers include instability in the employee group and long-term vacancy, an increased workload of for remaining employees and knowledge drain. Many Nigerian senior government officials and well-to-do individuals also do not help matters. At the slightest health complaint, they travel abroad for medical treatment or checkup. This is a clear indication that the Nigerian health system is deficient.

Perez (2008) identifies two types of turnover: Voluntary and involuntary turnover. He describes voluntary turnover as a situation in which an employee leaves his or her job in the organization by his or her will. Voluntary turnover has also been categorized into functional and dysfunctional turnover. Functional turnover refers to the resignation of poor performing employees, while dysfunctional turnover arises when effective or high performing employees leave the organization (Taylor, 1998). Dysfunctional turnover may be avoidable (for example, when caused by poor compensation or working conditions) or unavoidable (for example, when triggered by serious illness or death). Involuntary turnover can be described as a situation in which the leadership of an establishment forces workers out of the organization.

The need to minimize turnover intention among employees requires an understanding of the factors that could influence it. For example, an employee who is more loyal and committed to his or her organization is less likely to have turnover intention than another employee who does not feel any commitment to the organization. This leads the researcher to examine work engagement as a factor that could influence turnover intention among medical officers. As used in this context, the term "engagement" refers to involvement and commitment to an organization. Workers with high sense of engagement tend to be energetic and committed to their work. In other words, work engagement is connected to energy, commitment and efficiency which are the opposites of the three dimensions of burnout: Exhaustion, cynicism, and reduced accomplishment (Maslach & Leiter, 1997).Work engagement can also be viewed as a distinct concept that is negatively related to burnout. Schaufeli, Salanova, Gonzalez-Roma, and Bakker (2002) define it as a positive, fulfilling, work-related state of mind that is characterized by vigor, dedication, and absorption. Vigor refers to high levels of energy, effort, and mental resilience demonstrated by an employee at work; dedication refers to being strongly involved in one's work and experiencing a sense of significance, enthusiasm, inspiration, pride, and

challenge; while absorption is characterized by being fully concentrated such that time passes quickly and one has difficulties with detaching oneself from work.

Different researchers have identified several factors that could contribute to turnover intention among employees. These include demographic variables such as age, marital status, tenure, wage, position, and working department (Victoria & Olalekan, 2016); gender (Choong, Keh, Tan, & Tan, 2013); organizational justice (Ozturk, Eryesil, &Beduk, 2016); organizational climate (Thatcher, Stepnia, & Boyle, 2003); job stress (Jha, 2009); and job satisfaction (Bashir & Durrani, 2014). However, very few studies have investigated work engagement as an antecedent factor of turnover intention in Nigeria. According to Shuck and Wollard (2010), employees who are high on work engagement trait are those who are physically, cognitively, and emotionally connected with their jobs. Since these employees are more focused on their responsibilities and more emotionally attached to their tasks, they are more likely to have better job performance (Rich, Lepine, & Crawford, 2010; Bakker, Demerouti, & Sanz-Vergel, 2014). Logically, these employees are expected to have low turnover intention. Nevertheless several other variables could interfere in the relationship between work engagement and turnover intention. These may include the extent to which an employee is satisfied with his or her life and the values he or she holds dear.

Life satisfaction is a relative term that encompasses individuals' ability to earn decent living, maximize their potentials, and reach the highest possible positions in their choosing fields leading to attainment of a sense of self-fulfillment and personal accomplishment equivalent to Maslow's self-actualization paradigm. According to Maslow (1970), human needs are divergent and many ranging from the desire for basic necessities of life (physiological needs) through the desire for protection against threats and unsafe work conditions (security or safety needs), the desire to be loved and wanted in groups (affiliation needs), the desire for status, recognition, achievement, and confidence (esteem needs) to the pinnacle of needs which is the realization of one's full potential (self-actualization needs). The relevance of life satisfaction of medical officers to the effectiveness of the health delivery system cannot be over-emphasized because life satisfaction among doctors and nurses is crucial to the realization of the objectives of national health policies around the world. Life satisfaction refers to the extent to which individuals achieve self-fulfillment and feel satisfied about their achievements, standard of living, and accomplishments in life. One of the prominent determinants of life satisfaction is the nature and quality of daily experiences individuals derive at work (Wood & DeMenezes, 2008). Since life satisfaction of medical officers is crucial to the success of the health system, an investigation of the mediating role of this factor in the influence of work engagement on turnover intention among medical officers is very significant.

Personal values are the guiding principles in life and are critical organizational elements that can significantly affect employee and organizational performance. Schwartz's (1992) theory of basic human values is one of the most comprehensive and empirically grounded approaches to human values (Cieciuch, 2017). Personal values are considered to be desirable trans-situational goals, varying in importance and that serve as guiding principles in the life of a person or other social entity (Schwartz, 1994). This theory assumes that basic values form a universal, circular continuum and are organized in accordance with the motivation that they express. Relationships between motivations can be compatible, conflictual, or irrelevant to one another (Schwartz, 1992). Personal values are motivational since they provide direction and emotional intensity to action. This researcher posits that when an employee's personal values are in agreement with organizational values there would be positive work attitudes, greater work engagement, and other favourable organizational outcomes. On the other hand, when there is a clash between personal and organizational values, positive work attitudes, outcomes, and engagement would be less. Academic staff members of universities are

individuals upon whose shoulders higher education learning rests. The personal values of these people are reflected in their work behaviour and can impact on both organizational citizenship and work engagement. According to Arieli and Tenne-Gazit (2017), employees draw on their personal values in making decisions, choosing actions, and justifying their behaviour. The inability to live according to one's personal values in the workplace has been found to be positively related to job burnout (Retowski & Podsiadły, 2016) and negatively related to job satisfaction (Amos & Weathington, 2008). Hence, personal values are integrated into this study as a possible mediator of the influence of work engagement on turnover intention among medical officers in South-West, Nigeria. Besides, limited studies have been carried out on the effects of factors from positive psychology on turnover and turnover intention.

2. Hypotheses

- There is no significant influence of work engagement on turnover intention among medical officers in South-West, Nigeria.
- There is no significant mediating role of life satisfaction in the influence of work engagement on turnover intention among medical officers in South-West, Nigeria.
- There is no significant mediating role of personal values in the influence of work engagement on turnover intention among medical officers in South-West, Nigeria.
- There are no significant bivariate relationships between life satisfaction, personal values, work engagement, and turnover intention among medical officers in South-West, Nigeria.

3. Method

3.1 Design, Population, Sample, and Sampling Technique

Cross-sectional research design was adopted in this study. The study population comprises of 53,630 medical officers made up of 12,530 doctors and 37,570 nurses in public hospitals in South-West, Nigeria. The sample size was determined through the application of the Taro Yamane's formula which led to the selection of 397 medical personnel through stratified random sampling technique from the population divided into six strata according to the geopolitical arrangement of the six States making up South-West, Nigeria. These include Ekiti, Lagos, Ogun, Ondo, Osun, and Oyo States. However, the sample did not include staff from Olabisi Onabanjo University Teaching Hospital Sagamu where re-validation of the instruments was done.

3.2 Instruments

The instruments used for data collection in this investigation included the Demographic Data Inventory (DDI), Satisfaction with Life Scale (SWLS), Personal Values Scale (PVS), Work Engagement Scale (WES), and Turnover Intention Scale – 6 (TIS-6).

3.2.2 Satisfaction with Life Scale (SWLS)

The Satisfaction with Life Scale (SWLS) was developed by Diener, Emmons, Larsen, and Griffin (1985) as a general life success indicator. It consists of five positively worded items rated on a 7-point Likert-type scale with responses ranging from 1 = strongly disagree to 7 = strongly agree. Sample items on the scale are: "I am satisfied with my life" and "If I could live my life over, I would change almost nothing".

Pavot and Diener (1993) established the internal consistency and stability of the scale by reporting a Cronbach's alpha of .87 and a two-month test-retest stability coefficient of .82 for the SWLS. The convergent validity of the scale has been demonstrated by significant expected correlations with positive personality characteristics (Diener et al., 1985) while its discriminant validity has been supported by significant negative correlations with impulsivity and affect intensity (Pavot & Diener, 1993). To ensure that it is reliable in the present study, the instrument was administered on 20 medical personnel of the Olabisi Onabanjo University teaching hospital, Sagamu on two occasions and a coefficient of stability of .76 was observed.

3.2.3 Personal Values Scale (PVS)

The Personal Values Scale (PVS) was developed by Scott (1965) to measure personal values

using 12 sub-scales with four to six items per scale. The sub-scales measure the following: Intellectualism, kindness, social skills, loyalty, academic achievement, physical development, status, honesty, religiousness, self-control, creativity, and independence. The whole instrument is rated on a 3-point Likert-type scale with responses 1 = always dislike, 2 = depends on situation, and 3 = always admire. Sample items on the scale are: "Thinking and acting freely, without social restraints, and encouraging others to do likewise" and "Being able to get people to cooperate with you".

The developer reported reliability coefficients, using Cronbach's alpha, for the Personal Value Scale ranged from .80 to .89. Braithwaite (1979) reported comparable alpha reliability coefficients, ranging from .78 for independence and status to .92 for religiousness. In terms of validity, correlations between scores on the PVS and measures of religiosity and development were reasonably high, ranging from .66 to .81 respectively. Tammara (2013) also found that personal values significantly predicted perceived ethical work behaviour in the expected direction fairly well. In order to ensure the reliability of this instrument in the present study, the instrument was administered on 20 medical personnel of the Olabisi Onabanjo University teaching hospital, Sagamu on two occasions and a coefficient of stability of .83 was observed.

3.2.4 Work Engagement Scale (WES)

The Work Engagement Scale (WES) was developed by Angus and Robert (2017) as a standard measure of the three dimensions of work-engagement which form the sub-scales: Cognitive, emotional, and physical work engagement. The WES is a 5-point Likert-type instrument with 18 items. Responses on the scale range from 1 = strongly disagree to 5 = strongly agree. Sample items on the three sub-scales of the WES are: "I rarely think about time when I am working" (cognitive sub-scale), "I feel very good about the work that I do" (emotional sub-scale), and "I have a great deal of stamina for my work" (physical sub-scale).

Angus and Robert (2017) established the internal consistency reliability of the WES and reported Cronbach's alpha of .82, .79, and .87 for the cognitive work engagement, emotional work engagement, and physical work engagement sub-scales respectively, while the Cronbach's alpha for the scale as a whole was .84. They also demonstrated the construct validity of the WES through convergent and discriminant validation: Self-efficacy was found to have significant positive correlations with cognitive work engagement($r = .32$, $p < .001$), emotional work engagement ($r = .40$, $p < .001$), and physical work engagement ($r = .39$, $p < .001$), while turnover intention had significant negative correlations with emotional work engagement($r = -.29$, $p < .001$) and physical work engagement ($r = -.28$, $p < .001$), and a negative but non-significant correlation with cognitive work engagement ($r = -.14$, $p > .001$).

3.2.5 Turnover Intention Scale – 6 (TIS-6)

The Turnover Intention Scale – 6 (TIS-6) was developed by Michaels and Spector (1982) as a measure of the plan of an employee to leave his or her organization or job. It consists of six items in a 4-point Likert-type format with responses ranging from 1 = never to 4 = always. Sample items on the scale are "How often are you frustrated when not given the opportunity at work to achieve your personal work-related goals?" and "To what extent is your current job satisfying your personal needs?"A high score indicates stronger turnover intention, and the total score of all six items is an index of the respondent's turnover intention. Scores that are less than or equal to 15 indicate low turnover intention while scores that are greater than 15 point to high turnover intention.

The Cronbach's alpha for the TIS-6 was .75 (Wen, Zhang, Wang, & Tang, 2018). The validity of the scale was determined through item scrutiny: Items 1 and 6 were related to the intent to resign from the current job; items 2 and 3 were related to the motivation to search for other jobs; and items 4 and 5 were related to the probability of obtaining a new job (Wen et al., 2018). To ensure that it is reliable in the present study, the instrument was administered on 20 medical personnel of the Olabisi Onabanjo

University teaching hospital, Sagamu on two occasions and a coefficient of stability of .79 was observed.

3.3 Method of Data Analysis

The data collected were analyzed using appropriate statistics. Specifically, the first hypothesis was tested by means of simple linear regression analysis; the second and third hypotheses were analyzed by means of the Hayes' Process software; while the fourth hypothesis was tested using Pearson's correlation. All tests were carried out at the .05 level of significance.

4. Results

Hypothesis One

Ho1: There is no significant influence of work engagement on turnover intention among medical officers in South-West, Nigeria.

Table 1: Coefficients of the Simple Linear Regression Analysis for the Influence of Work Engagement on Turnover Intention

	B	Std Error	β	T	Sig.
(Constant)	2.688	6.583		16.048	.000
Work Engagement	-.093	.027	-.295	14.275	.000

Dependent Variable: Turnover Intention

Table 1 revealed significant results (β = -.295, t = 14.275, p <.05) leading to the rejection of the null hypothesis and the consequent upholding of the alternative hypothesis that there is a significant influence of work engagement on turnover intention among medical officers in South-West, Nigeria. Table 1 further revealed that the regression equation predicting turnover intention (denoted by Y) from work engagement (denoted by X) is as follows:

Y = -.093X + 2.688.

Hypothesis Two

Ho2: There is no significant mediating role of life satisfaction in the influence of work engagement on turnover intention among medical officers inSouth-West, Nigeria.

Table 2: Coefficients of the Regression Analysis for the Mediating Role of Life Satisfaction in the Influence of Work Engagement on Turnover Intention

Model	Coeff.	se	t	p	LLCI	ULCI
Constant	10.40	1.62	6.42	.00	7.21	13.60
Life Satisfaction	.24	.03	8.40	.00	.19	.30
Work Engagement	.26	.07	3.51	.00	.11	.40

Outcome Variable: Turnover Intention

Table 2 revealed significant results (coeff. = .24, t = 8.40, p < .05); the null hypothesis was therefore rejected in favour of the alternative hypothesis leading to the conclusion that there was a significant mediating role of life satisfaction in the influence of work engagement on turnover intention among medical officers inSouth-West, Nigeria.

Hypothesis Three

Ho3: There is no significant mediating role of personal values in the influence of work engagement on turnover intention among medical officers in South-West, Nigeria.

Table 3: Coefficients of the Regression Analysis for the Mediating Role of Personal Values in the Influence of Work Engagement on Turnover Intention

Model	Coeff.	se	t	p	LLCI	ULCI
Constant	8.72	1.58	5.85	.00	6.84	32.06
Personal Values	.18	.04	7.18	.00	.16	.37
Work Engagement	.23	.06	5.24	.00	.11	.42

Outcome Variable: Turnover Intention

Table 3 revealed significant results (coeff. = .24, t = 8.40, $p < .05$); the null hypothesis was therefore rejected in favour of the alternative hypothesis leading to the conclusion that there was a significant mediating role of personal values in the influence of work engagement on turnover intention among medical officers in South-West, Nigeria.

Hypothesis Four

Ho4: There are no significant bivariate relationships between life satisfaction, personal values, work engagement, and turnover intention among medical officers in South-West, Nigeria.

Table 4: Correlation Matrix for the Relationships between Life Satisfaction, Personal Values, Work Engagement, and Turnover Intention

	Life Satisfaction	**Personal Values**	**Work Engagement**	**Turnover Intention**
Life Satisfaction	1.000	.127*	.349*	-.264*
Personal Values		1.000	.162*	.047
Work Engagement			1.000	-.295*
Turnover Intention				1.000

*Correlation is significant at 0.05 level (2-tailed)

Table 3 revealed both significant and non-significant results. The null hypothesis was partly upheld and partly rejected in favour of the alternative hypothesis. Specifically, there were significant positive relationships between life satisfaction and work engagement ($r = .347$, $p < .05$), personal values and work engagement ($r = .162$, $p < .05$), and life satisfaction and personal values ($r = .127$, $p < .05$). There were significant negative relationships between work engagement and turnover intention ($r = -.295$, $p < .05$). Finally, there was a non-significant positive relationship between personal values and turnover intention ($r = .047$, $p > .05$).

4. Conclusion

The need to address the alarming rate at which medical doctors and nurses dump the country for greener pastures abroad has necessitated an investigation of some variables that could be influencing turnover intention among this category of professionals with a view of stemming the tide. Consequently, the researcher examined life satisfaction and personal values as mediators of work engagement and turnover intention among medical officers in South-West, Nigeria. This study revealed a significant influence of work engagement on turnover intention, with work engagement inhibiting turnover intention as well as significant mediating roles of life satisfaction and personal values in the influence of work engagement on turnover intention among the medical officers.

Based on these findings and conclusion, the following recommendations are made:

(i) Government should introduce and implement policies designed to enhance work engagement among medical officers. This should include the establishment of good working conditions,

provision of medical equipment and facilities, increased funding of the health sector, and attractive pay packages for medical officers.

(ii) Government should ensure that medical officers on its payroll are sufficiently motivated in order to increase both their job satisfaction and life satisfaction. This could be achieved through regular payment of entitlements so that they could be able to fulfill their responsibilities.

(iii) Government should organize seminars and workshops on the ethics of the medical and nursing professions and harp on the development of positive human values such as kindness, care, and compassion.

(iv) This study should be replicated in the other five geo-political zones of Nigeria, namely, South-East, South-South, North-West, North-Central, and North-East in order to determine the external validity or generalizability of the findings. This will hopefully help the government to understand the state of turnover intention among medical officers in all parts of the country and adopt a comprehensive national policy to tackle the problem.

References

Ajzen, I. (1991). The Theory of Planned Behaviour. Organizational Behaviour and Human Decision Process, 50(2), 179–211.

Almalki, M. J., Fitzgerald, G., &Clark, M. (2012). The Relationship between Quality of Work Life and Turnover Intention of Primary Health Care Nurses. BHC Health Service, 12, 121.

Angus, C. H. K. & Robert, J. T. (2017). Work Engagement: Evolution of the Concept and A New Inventory. Psychological Thought, 10(2), 262–287.

Bakker, A. B., Demerouti, E., & Sanz-Vergel, A.I. (2014). Burnout and work engagement: The JD–R approach. Annual Review of Organizational Psychology and Organizational Behavior, 1(1), 389–411.

Bashir, A. & Durrani, F. (2014). A Study on Determinants of Turnover intention in Pakistan. *Journal of Public Administration and Governance*, 10, 69 – 82.

Biswakarma, G. (2016). Organizational Career Growth and Employees' Turnover Intentions: Empirical evidence from Nepalese Private Commercial Banks. *Academic Journal of Organizational Behaviour and Human Resource Management*, 3, 10 – 26.

Braithwaite, J. (1979). Inequality, Crime, and Public Policy. London: Routledge & Kegan Paul.

Choong, Y. O., Keh, C. G., Tan, Y. T. & Tan, C. E. (2013). Impacts of Demographic Antecedents toward Turnover Intention amongst Academic Staff in Malaysian Private Universities. *Australian Journal of Basic and Applied Science, 7, 46 – 64.*

Diener, E., Emmons, R. A., Larsen, R. J., & Griffin, S. (1985). Measuring subjective well-being. Journal of Personality Assessment, 16, 173 – 190.

Herrbach, O., Mignonac, K., &Gatignon, A. L. (2004). Exploring the role of perceived external prestige in managers' turnover intentions. *International Journal of Human Resource Management*, 15, 1390 – 1407.

Jha, S. (2009). Determinants of Employee Turnover Intentions: A Review. Management Today, 9, 26 – 33.

Maslow, A. H. (1970). Job Commitment and Personality. 2nd edition, New York: Harper & Row.

Michaels, C. E. & Spector, P. E. (1982). Causes of Employee Turnover: A Test of the Mobley, Griffeth, hand, and Meglion Model. Journal of Applied Psychology, 67(1), 55–59.

Odesola, T., Ojerinde, D., Isenyo, G., Itode, S., Babalola, S., & Ede, R. (2019). Doctors'exodus now more alarming, says NMA. The Punch, 17th September 2019.

Ozturk, M., Eryesil, K., &Beduk, A. (2016). The Effect of Organizational Justice on Organizational Cynicism and Turnover Intention: A Research on the Banking Sector. *International Journal of Academic Research in Business and Social Sciences*, 6, 543 – 551.

Pavot, W. & Diener, E. (1993). Review of Satisfaction with Life Scale. Psychological Assessment, 5, 164 – 172.

Perez, M. (2008). Turnover Intent Diploma Courses. University of Zurich.

Puteh, F. & Arshad, H. (2015).Determinants of Turnover Intention among Employees. *Journal of Administrative Sciences*, 12 (2), 1 – 15.

Rich, B. L., Lepine, J. A., & Crawford, E. R.(2010). Job Engagement: Antecedents and Effects on Job Performance. *Academy of Management Journal*, 53(3), 617–635.

Schaufeli, W. B., Salanova, M., Gonzales-Roma, V. & Bakker, A. B. (2002). The Measurementof Engagement and Burnout: A Two-Sample Confirmatory Factor Analytic Approach. *Journal of Happiness Studies*, 3(1), 71–92.

Scott, W. A. (1965). Values and Organizations: A Study of Fraternities and Sororities. Chicago, IL: Rand McNally.

Shuck, B. & Wollard, K. (2010). Employee Engagement and Human Resource Development: A Seminal Review of the Foundations. Human Resource Development Review, 9 (1), 89–110.

Snavely, T. M. (2016). A Brief Economic Analysis of the Looming Nursing Shortage in the United States. Nursing Economic$, 34(2), 98-100.

Tammara, P. T. (2013). The effect of personal values, organizational values, and person-organization fit on ethical behaviours and organizational commitment outcomes among substance abuse counsellors: A preliminary investigation. Retrieved on 10th October 2019 from https://ir.uiowa.edu/etd/4920.

Taylor, S. (1998). Employee Resourcing. Wiltshire: Cromwell Press.

Thatcher, J. B., Stepnia, L. P., & Boyle, R. J. (2003). Turnover of Information Technology Workers: Examining empirically the influence of attitudes, job characteristics, and external markets. *Journal of Management Information Systems*, 19, 231 - 261.

Victoria, O. A. & Olalekan, U. (2016). Effects of Demographic Factors on Employees' Intention to Leave in Selected Private Universities in South-West. Babcock University Publication Portal.

Wen, T., Zhang, Y., Wang, X., & Tang, G. (2018). Factors Influencing Turnover Intention among Primary Care Doctors: A Cross-Sectional Study in Chongqing, China. Human Resources for Health, 16, 10 – 21.