

Job Satisfaction of Occupational Therapists in Greece

Ioannis Politis^{1,*}, Ioanna Tzonichaki^{1,*}, George Gifftos²

¹Occupational Therapy Department, Technological Educational Institution (TEI) of Athens, Athens, Greece

²Physical Therapy Department, Technological Educational Institute (TEI) of Central Greece, Lamia, Greece

Abstract Objective. The study examined job satisfaction issues of occupational therapists in Greece. Demographic factors that influence job satisfaction were identified and the relationships between the facets of job satisfaction and the overall job satisfaction of occupational therapists were explored. **Method.** The study design was a survey format using self-administered questionnaires. The questionnaires were completed by sixty occupational therapists. The research instruments used consisted of a demographic questionnaire, the Job Descriptive Index (JDI) and the Job In General (JIG) scales. For the analysis of data descriptive statistics were obtained and Mann-Whitney, Kruskal-Wallis and Spearman correlation rho non-parametric tests were used. **Results.** Occupational therapists showed high levels of overall job satisfaction. They were satisfied with the kind of work, the relationships with their co-workers, and the supervision of the manager. They reported low satisfaction with their salaries and opportunities for promotion. There were also group differences between the employment status of the professionals and their satisfaction with their opportunities for promotion.

Keywords Jobs satisfaction, Occupational therapists, Facets of job satisfaction

1. Introduction

Job satisfaction is a complex and multifaceted concept which can mean different things to different people. Job satisfaction is usually linked with motivation, but the nature of this relationship is not clear. Satisfaction is not the same as motivation. Job satisfaction is more of an attitude, an internal state. It could, for example, be associated with a personal feeling of achievement, either quantitative or qualitative [4].

Job satisfaction has been studied since 1919. Attempts to understand job satisfaction and thus increase it are associated with a desire to increase worker productivity and, ultimately, profitability [17]. Research into job satisfaction in the occupational therapy field has been conducted in many countries, including Australia, the United Kingdom (UK), Europe, Canada and the United States of America (USA), in an effort to improve the recruitment and retention of employees in the health sector [2]. These studies have investigated job satisfaction among occupational therapists from different perspectives: attrition rate, practice setting, extrinsic versus intrinsic factors, gender and work stressors. They have also varied in conceptual framework, methodology, instrumentation and statistical analysis.

In the present study the literature was reviewed, by searching for international sources written in English using the key words 'job satisfaction' and 'occupational therapy'.

For national sources relevant key words were used. Since job satisfaction has an important historical context, both older and more recent references were reviewed.

In a study of 348 American hospital-based registered occupational therapists (OTR) in USA determined that managerial leadership of OT directors greatly influenced their staff's level of job satisfaction. The results showed that staff was more satisfied with occupational therapy as a kind of work and with their co-workers. They were least satisfied with the amount of work they had and their financial rewards. More specifically, it was reported that therapists working in mental health settings were significantly less satisfied with their jobs than therapists involved primarily with other client populations. It was suggested further research on job satisfaction among OTRs working in community mental health programs and large hospital departments (Brollier, 1985a, b).

In a study in Israel, the researchers analyzed the time allocation patterns of 89 occupational therapists in and found that a great deal of time was spent on direct patient care to the neglect of other duties such as supervision and continuing education. They suggested that this imbalance could lead to lessened job satisfaction, greater frustration and burnout. Another finding of the study indicated that mental health occupational therapists reduced their stress levels by spending more time on professional activities in comparison with other occupational therapy specialists [15].

Overall job satisfaction, perceived autonomy and work incentives and disincentives were examined in 249 American occupational therapists. They found that autonomy was positively related to all measures of job satisfaction. Occupational therapists held moderately favorable attitudes

* Corresponding author:

ipolitis@teiath.gr (Ioannis Politis)

itzonichaki@teiath.gr (Ioanna Tzonichaki)

Published online at <http://journal.sapub.org/ijpt>

Copyright © 2015 Scientific & Academic Publishing. All Rights Reserved

about their jobs and perceived autonomy. Achievement, interpersonal relationships with co-workers and nature of work itself was viewed as work incentives. Organizational support for staff training, the opportunity for advancement and working conditions were rated as disincentives [13].

In a second study the author surveyed overall job satisfaction and the specific work incentives and disincentives that were responsible for job satisfaction or dissatisfaction in 489 occupational therapists. Job satisfaction was found to be moderately high for respondents in supervision / management and direct service roles. Direct service staff rated the work itself, achievement and interpersonal relationships with co-workers as work incentives whereas support for training, opportunity for advancement and working conditions were rated as disincentives. In the study was also found that the direct service respondents were more satisfied with the nature of their work and their salaries. No significant differences were found between gender or any other demographic factor and job satisfaction [8].

In the decade of eighties an increased attrition in the profession has been a serious issue for concern for Occupational Therapists. A survey was conducted to examine reasons for attrition in 696 practitioners who had left the profession. The most common reasons identified were dissatisfaction with bureaucracy, lack of pay and promotional opportunities, depression with the chronicity and severity of the client's illnesses, lack of respect by other professionals, role ambiguity, child rearing, and lack of in-service training and continuing education [5].

After the identification of the reasons for attrition the author proposed some possible solutions such as job sharing, mentoring, improvement of record-keeping skills, development of training programs and effective supervision which would address retention and reactivation of the professionals [6].

In the occupational therapy education field 538 American occupational therapy faculties were surveyed with regard to how much they were satisfied with their teaching roles. No significant differences were reported between demographic characteristics and job satisfaction. Faculty was found to be satisfied with teaching in general and specifically with the academic environment, the opportunity to design learning experiences and the lack of constraints in higher education. The higher the educational level of the faculty, the more satisfied they were, and the more they believed that there was opportunity for advancement and that research was exciting. In addition the faculty was satisfied with the intrinsic aspects of teaching, which included designing learning experiences, influencing students and watching students grow intellectually [27].

In Great Britain a study in two-district occupational therapy departments examined levels and sources of work-related stress, and mental and physical ill health, sickness absence and job satisfaction ratings. Sixty members of the occupational therapy department were compared with other health service occupational groups on their 'job

satisfaction' and 'mental and physical ill health' scores and reported sickness absence rates and the groups ranked to show the relative positions of groups on the suggested stress effects variables. The occupational therapy group was ranked sixth in terms of job satisfaction with some other PAMs falling quite a long way behind (for example, physiotherapists 15 out of 17). The news is not quite so good on measures of current health. Occupational therapy staff were found to be third highest on mental ill health and fourth on physical ill health and took more days off through sickness absence than most groups, being equal fifth highest on this indicator of occupational stress [25].

In a qualitative study that comes from Australia Herzberg's model was used as a conceptual framework and the focus group approach as a research method to investigate staff job satisfaction in an Australian Occupational Therapy department. Job satisfaction was found to be linked to work itself including patient contact and relationships with co-workers. Job dissatisfaction was related to aspects of recognition and communication [22].

Another study examined job satisfaction from another point of view. It investigated the level of flow, an intrinsic form of job satisfaction in 90 professionals employed in rehabilitation facilities in New England. The results indicated that flow is experienced from a small amount of professionals and that extrinsic factors had negative influence to the overall job satisfaction of the therapists. It was recommended that a further understanding of flow experience in occupational therapists will improve job satisfaction and retention in the profession [17].

Researchers found that the degree to which work tasks were considered interesting or rewarding was the single most powerful predictor of work satisfaction for both occupational therapists and physiotherapists working in the USA. A random sample of 413 occupational therapists and physiotherapists working in North Carolina were mailed a questionnaire, in which they were asked to rate how strongly they agreed with a number of statements related to sources of job satisfaction. Participants rated the interest and rewards they gained from doing occupational therapy and physiotherapy to be greater sources of job satisfaction than other aspects such as autonomy, salary, relationships with co-workers, supervision and general working conditions [2].

Gender issues are explored in a study in Ontario in Canada. The purpose of this study was to further investigate the issue of job satisfaction in male occupational therapists. This study addressed several factors pertaining to job satisfaction and other work-related issues. The results indicated that less experienced male occupational therapists reported themselves to be less satisfied, more inclined to leave the profession or pursue another profession, but did not feel more isolated than their more experienced counterparts [33].

Another study in Canada examined the relation of staff rotation to occupational therapists job satisfaction. Staff rotation was found to have an effect on job satisfaction and a occupational therapist's career orientation. Given these findings, administrators may want to reconsider the role of

the generalist and specialist in their facilities [32].

A survey in 500 Occupational Therapists managers had as purpose to identify the recruitment and retention strategies used in various practice settings and their perceived level of effectiveness. The findings indicated that OT directors used multiple recruitment and retention strategies. The most important era of staff member recruitment was the work itself, and the most important areas for retention were the work itself, salary and compensation. The authors suggested that recruitment and retention plans should be designed to minimize job dissatisfies and maximize job satisfies [30].

In a qualitative study in Great Britain, the researcher interviewed 16 occupational therapists to examine the effects of NHS reforms to their professional position. All the therapists expressed high level of job satisfaction, which was mostly related to patients contact. Aspects of their job they did not enjoy were about paperwork and collection of statistics. Few opportunities for career advancement was the most important factor that correlated negatively with professional's job satisfaction [24].

A study conducted in London of Great Britain examined the relationship between the leadership styles of occupational therapy managers, as occupational therapy staff and the job satisfaction of occupational therapy staff in the mental health field of the profession perceive it. Demographic factors that influence staff's job satisfaction were identified and the relationships between the facets of job satisfaction and the overall job satisfaction of mental health occupational therapists were explored. The results revealed that mental health Occupational Therapists were more satisfied with the kind of work, and the relationships with their co-workers. They reported low satisfaction with their salaries and opportunities for promotion. Their overall job satisfaction was moderately high. The managerial style of the Occupational Manager did not affect OT staff job satisfaction [23].

Researchers investigated job satisfaction in mental health settings and found high satisfaction in 332 occupational therapists working in Swedish psychiatric settings. The results revealed that the factors influencing job satisfaction were general satisfaction with work, teamwork with other professionals and managerial feedback [14].

A study of male and female occupational therapists in Queensland included a subset of senior occupational therapy clinicians occupational therapy manager/administrators and sole charge occupational therapists. There were no separate results provided for this manager subgroup. The main sources of dissatisfaction for male and female occupational therapists included: lack of opportunities for promotion, limited pay and earning potential, and lack of recognition and respect. The main sources of satisfaction for both males and females were: client contact; client success; and good colleague relationships. In addition, females included teamwork as a source of satisfaction and males included challenging job and respect by others and the public as sources of satisfaction. Sixty per cent of therapists surveyed indicated that they were considering leaving occupational

therapy practice [21].

A qualitative study of urban Australian occupational therapists came up with the result that therapists derived job satisfaction from the sense of achievement felt when providing effective clinical care, and that job dissatisfaction stemmed from the poor profile and status of the profession. The key themes from this study which reflect job satisfaction included: that therapists actually like the work they do, and find their career satisfying; working with clients to make a difference; the diversity of occupational therapy; and autonomy as clinicians. Themes that reflect job dissatisfaction were: occupational therapy as the unknown profession, and related role definition and status; and if only there was more money [12].

A recent study in Australia explores the roles and responsibilities of occupational therapy managers who are clinician-managers or manager-administrators, and sources of their work satisfaction. A case study design involved telephone interviews with 16 occupational therapy managers. Semi- structured interview questions were based on an earlier discussion with a separate group of occupational therapy managers. Interview transcripts were analyzed for emerging themes. The results revealed that there were no clear differences in the roles and responsibilities of the two types of managers (manager- administrators and clinician-managers); however, manager- administrators tended to be responsible for larger numbers of staff. Managers reported that taking a clinical caseload is often at their own discretion. A common challenge for managers is the balancing of priorities as a clinician and a manager. Managing people was a common source of joy and sometimes a source of frustration. Mediating between staff and senior management and the need for budget control and efficiencies was an important aspect of managers' work, as was their autonomy to make decisions [16].

Another study of thirty-eight Australian mental health occupational therapists examines recruitment and retention issues in metropolitan Sydney. Key themes investigated were: overall satisfaction; attractive elements of positions; positive aspects of positions; constraints of positions; factors associated with leaving positions; supervision; professional development; career pathways; and interest in and access to management positions. The results that came up were that the key elements that kept respondents in positions included the nature of the work, being in a supportive team and the opportunity to use occupational therapy skills. Elements that prompted people to consider leaving positions were the desire for new and different types of work, a desire to work closer to home, insufficient time or high workloads, feeling 'bored' or 'stale', organizational change or juggling multiple demands, working in unsupportive or dysfunctional teams and family or other personal factors [29].

A qualitative study in Jordan aimed to explore factors influencing job satisfaction and dissatisfaction among Jordanian occupational therapists. Ninety-three participants were asked to answer in narrative their perception about the factors behind their job satisfaction and dissatisfaction. In

addition, they were asked to express their suggestions, ideas, or solutions for increasing job satisfaction. For job satisfaction questions, four themes emerged: a humanistic profession; professional issues; work benefits; and work environment. Participant's comments at the end of the survey revealed one general theme for improving job satisfaction, 'a call for improvement' [1].

A study in Queensland explored attrition issues for occupational therapists working in mental health who experience burnout, low work engagement or poor job satisfaction, were at risk of poor wellbeing at work and may be more likely to leave their jobs. One hundred and three professionals completed a survey exploring work/life balance, effort invested in work, rewards received from work, wellbeing at work (job satisfaction, burnout and work engagement) and turnover intention. The results indicated that all measures of wellbeing at work were significantly associated with turnover intention. A large proportion (33%) of the variance in turnover intention was predicted by job satisfaction. Perceptions of both work/life balance and effort invested in work, as well as perceived rewards in terms of recognition, prestige and personal satisfaction were significantly associated with work-related wellbeing scores [28].

There is no information regarding job satisfaction in occupational therapy field in Greece. There are only a limited number of studies on job satisfaction concerning medical personnel, educators and nurses [3, 19, 20].

2. Method

The basic aim of the study is to explore job satisfaction issues in Occupational Therapy in Greece and attempts to answer the following research questions:

- Which are the levels of job satisfaction of Occupational Therapists (OT) in Greece?
- Which is the relationship between demographic characteristics and OT job satisfaction?
- What is the relationship between OT's five facets of job satisfaction and their overall job satisfaction?

2.1. Study Design

The present study looked at relationships between facets of job satisfaction and overall job satisfaction in Occupational Therapy. Relationships between demographic characteristics, facets of job satisfaction and overall job satisfaction are also explored. Survey was considered as the most appropriate research strategy for examining the above relationships. It is a research method that is used to examine characteristics of a population. It is mainly used for descriptive purposes but through the use of statistical methods it can provide information about relationships between variables [26]. It has also been used in similar studies mentioned above on job satisfaction in Occupational Therapy literature.

2.2. Selection of Participants

A convenience sample was used for the selection of the subjects. In the present study (60) occupational therapists working in various settings in Greece were participated according to criterion of being qualified professionals.

2.3. Research Instruments

The respondents completed a self-administered questionnaire, which is consisted of three parts: Demographic characteristics, Job Descriptive Index (JDI) and Job In General (JIG) Scales.

2.4. Demographic Characteristics

Data were selected about the following demographic characteristics: age, sex, family status, nationality, education, main job, current employment status, type of clients, working experience, and questions concerning practice, continuing education, work satisfaction and participation in professional associations.

2.5. Job Descriptive Index (JDI) and Job In General (JIG) Scales

In 1969 researchers investigated the dimensionality of job satisfaction and developed Job Descriptive Index (JDI) a research instrument that measures different aspects of work situation. After a preliminary work they identified five main facets of job satisfaction were identified: work itself, pay, opportunities for promotion, supervision, and relations with co-workers [31]. After further testing and examination of JDI the revised form of JDI was developed, which is the research instrument, used for the measurement of job satisfaction in the present study [7].

Although JDI is used for the measurement of the five independent facets of job satisfaction cannot be used for the measurement of the overall job satisfaction by summing across JDI facets. Therefore, a compatible instrument that supplements JDI was developed, called Job In General (JIG) [7], and was also used in the present study for the measurement of the overall job satisfaction.

JDI consists of the following five scales: Work on Present Job, Present Pay, Opportunities for Promotion, Supervision, and Co-workers). JIG consists of one scale with the same format as JDI scales. Each scale contains 18 items except the Pay and Opportunities for Promotion scales, which contain 9 items. Each scale is composed either of adjectives such as "Intelligent" or "Stubborn" or short phrases such as "Around when needed" or "Easy to make enemies". A triadic scoring system is used for the measurement of the responses, which are "Yes", "Uncertain (?)" and "No." It is considered that the response "Uncertain (?)" indicates dissatisfaction rather than satisfaction. Consequently, they are scored **3** for "Yes", **1** for "Uncertain (?)" and **0** for "No." These values are reversed for negatively worded items. A total score is calculated for each of the scales. The "Pay" and "Opportunities for Promotion" scales scores are doubled because they contain half of the

number of the items of the other scales. The overall satisfaction score is obtained by the JIG scale score [7].

The Job Descriptive Index (JDI) is the most widely used measure in job satisfaction research. Studies conducted for the evaluation of JDI and JIG indicate that it is a high quality measuring instrument with many practical strengths which possess good content validity impressive construct validity and adequate reliability [7, 18].

The job satisfaction (JDI, JIG) scales were scored by hand. The scores of the scales and demographic data were entered onto a computer statistical program called Statistical Package for Social Sciences (SPSS) 21. Descriptive measures that included percentages, ranges, means, medians, and standard deviations were calculated and frequency tables and charts were presented. For the analysis of findings comparisons and correlational designs were used.

2.6. Ethical Considerations

The study involved only Occupational Therapy professionals. There were no manipulations or treatment involved. However, the ethics of studying professionals were taken into consideration. Participants were fully informed for the purpose and procedure of the study. They were assured for complete confidentiality and anonymity. All participants signed a consent letter before the completion of the questionnaires.

2.7. Demographic Characteristics

The majority of the respondents were female (68.3%), their age varied between 26 and 50 (90%), had the Greek nationality (96.7%), were married (56.7%), had a basic grade education (80%), worked in the public sector (61.7%), had a regular daily contact 6-15 with clients (66.7%), worked mainly with adults (68.3%) and their working experience was between 1-15 years (73.3%).

2.8. JDI and Job in General (JIG) Scales

The mean scores and standard deviations for the six scales were 38.08 (SD 7.016) for the Work on Present job, 4.05 (SD=4.180) for Present Pay, 5.67 (SD=5.065) for Opportunities for promotion, 36.38 (SD=12.395) for Supervision, 32.68 (SD=15.087) for Co-workers and 40.15 (SD=9.896) for Job in General.

2.9. Levels of Job Satisfaction

The scores of five facets of JDI and JIG scales were recoded in "low", "medium" and "high" categorical groups. The majority of the respondents scored on "high satisfaction" group for the Job In General scale (73.3%), Supervision (56.7%), and Work on Present Job (68.3%). 80% scored on "medium" and "high" for Co-workers and scored on "low" group for Present Pay (81.7%) and Opportunities for Promotion (75%).

2.10. Analysis of findings

The exploration of data showed skewed distributions of

the scores of the JDI scales and Job in General scales. The above findings indicated that there were violations to the rules for the use of parametric tests. When these violations exist the use of nonparametric tests is recommended because they are resistant to skewness and outliers [9]. The non-parametric tests, which were used, were Mann-Whitney U test, Kruskal-Wallis and Spearman rank correlation (ρ).

2.11. Demographic Characteristics and Job Satisfaction

Group differences between the staff demographic characteristics and job satisfaction were explored by using Mann-Whitney test for the grouping demographic variables with two groups and Kruskal-Wallis test for the variables with three or more groups. A significant difference was shown between Opportunities for Promotion and Employment Status ($K=0.049$) at ($p<0, 05$).

2.12. Job Satisfaction Facets and Job in General

Spearman's correlation ρ was used for exploring relationships between the five facets of job satisfaction and overall job satisfaction (Job in General). Significant correlations were found for Supervision ($r=.350$ at $p<0.01$), Co-workers ($r=.386$ at $p<0.01$) and Work on Present Job ($r=.463$ at $p<0.01$) when correlated with overall job satisfaction (Job in General).

3. Discussion

3.1. Levels of Job Satisfaction

The overall job satisfaction of occupational therapists was found to be high a finding which is also supported by other studies [8, 14, 23, 24, 25]. The findings also indicated high job satisfaction with the kind of Work on Present Job, Co-workers and Supervision. High job satisfaction with work and co-workers is reported on previous studies [8, 11, 12, 14, 21, 23]. Additionally, high levels of job satisfaction with work is reported from other studies [2, 30]. The finding suggesting high job satisfaction with the supervisory relationship was not supported by other studies. Occupational Therapists were less satisfied with Pay and Opportunities for Promotion. The findings are supported by past studies [6, 21, 23]. Another possible reason to explain the professional's low satisfaction with salary and opportunities for promotion is that due to economic crisis in Greece, salaries have been reduced and opportunities for promotion are limited in a great extend.

A notable conclusion that derives is that there is a consistency of the majority of the above findings over time. Although the above-mentioned studies were conducted in different countries the findings remained the same. And finally, there were no differences in the findings regarding the above variables between the various settings such as mental health and physical disabilities ones. Furthermore, the finding regarding high overall job satisfaction could be interpreted in two ways. Firstly, it might mean that there are

other variables than the five ones which have been examined in the present study that positively affect Occupational Therapists' overall feeling of job satisfaction. Secondly, the positive aspects of the job such as Work itself and relations with Co-workers exceed the negative ones such as Pay and Opportunities for Promotion and result in an increased overall job satisfaction.

3.2. Demographic Characteristics and Job Satisfaction

There were group differences between Opportunities for Promotion and Employment Status. A possible explanation is that people in higher positions don't feel as frustrated as workers in lower positions who due to economic crisis have limited opportunities to take a promotion.

3.3. Job Satisfaction Facets and Overall Job Satisfaction

It has been mentioned above that researchers tried to identify aspects of work that were important determinants to the overall job satisfaction of Occupational Therapists in order to suggest retention strategies which would decrease the high rate of attrition in the profession [6].

The work itself, relations with co-workers and supervision were found to relate positively to overall job satisfaction. There is no evidence that supports positive correlations between supervision and overall job satisfaction. One reason that makes difficult to draw certain conclusions about the relationship of supervision with job satisfaction is that there are different kinds of organization of practice settings and different kinds of professional hierarchy across the countries. Additionally the supervisor of most of Occupational Therapists in Greece is not an Occupational Therapist. The finding concerning positive correlations between work itself and relations with co-workers and overall job satisfaction is supported by similar studies [12, 23]. It can be concluded that although studies are conducted in a national level, in various practice settings and in different times the findings are the same. Professionals that like their work and have good relations with their colleagues are satisfied with their job even if other working conditions are not perfect.

3.4. Limitations

For the purposes of the present study a convenience sample was used and the informants participated voluntarily. It is assumed that the participants gave honest responses. The extent to which the present findings can be generalized to other occupational therapist populations is still unknown. Due to time constraints the author did not contact non-respondents to explore their job attitudes. As a result the author is unable to compare respondents and non-respondents. For the occupational therapists that decided not to participate in the study can be argued that either they were too busy to complete the questionnaire or they had low commitment and low satisfaction with their work. Finally, methodological constraints concerning the use of nonparametric tests, limited the author's ability to provide certain explanations about the results. It is suggested further

research on job satisfaction among OTs in Greece.

3.5. Recommendations

Unfortunately there is a remarkable lack of information regarding job satisfaction among Occupational Therapists in Greece. Further research can be conducted in Greece using both quantitative and qualitative methodologies in order to explore various aspects of the attitudes and feelings that Occupational Therapy professionals have towards their work.

Research studies can be conducted, based on the findings of this study, through which a wider number of occupational therapists can be included. Future studies might also compare Occupational Therapists job satisfaction with that of other health professionals (physical therapists, nurses, doctors etc.). In addition, a comparison of clinicians' versus academicians' attitudes toward the profession, toward the clinic, and toward teaching would be useful. Finally, qualitative studies could explore in depth the factors that influence OT's job satisfaction and might reveal other facets of job satisfaction that could affect employees in a positive or negative way toward their work.

REFERENCES

- [1] Abu Tariah, H.S., Hamed, R.T., AlHeresh, R. a, Abu-Dahab, S.M.N., and AL-Oraibi, S., 2011, Factors influencing job satisfaction among Jordanian occupational therapists: a qualitative study. *Australian occupational therapy journal*, 58, 405–11.
- [2] Akroyd, D., Wilson, S., Painter, J., and Fiquers, C., 1994, Intrinsic and Extrinsic Predictors of work satisfaction in ambulatory care and hospital settings. *Journal of Allied Health*, 23, 3, 155–164.
- [3] Aleksias, G., Anagnostopoulos, F., and Pilatis, I., 2010, Burn Out and Job Satisfaction of the Medical Personnel of a Public Hospital in Athens. *Social Research Review*, 131, A', 109–136.
- [4] Aziri, B., 2011, Job satisfaction: A literature review. *Management Research and Practice*, 3, 4, 77–86.
- [5] Bailey, D.M., 1990, Reasons for Attrition From Occupational Therapy. *American Journal of Occupational Therapy*, 44, 1, 23–29.
- [6] Bailey, D.M., 1990, Ways to Retain or Reactivate Occupational Therapists. *American Journal of Occupational Therapy*, 44, 1, 31–37.
- [7] Balzer, W., and Smith, P.C. User's Manual Job Descriptive Index (JDI), Job in General Scales. Bowling Green State University, Bowling Green, 1990.
- [8] Bordieri, J.E., 1988, Job Satisfaction of Occupational Therapists: Supervisors and Managers versus Direct Service Staff. *OTJR: Occupation, Participation and Health*, 8, 3, 155–163.
- [9] Bowling, A. *Research Methods in Health: Investigating*

Health and Health Services. Open University Press, Berkshire UK, 2009.

- [10] Brollier, C., 1985, Occupational Therapy Management and Job Performance of Staff. *American Journal of Occupational Therapy*, 39, 10, 649–654.
- [11] Brollier, C., 1985, Managerial Leadership And Staff OTR Job Satisfaction. *Occupational Therapy Journal of Research*, 5, 3, 170–184.
- [12] Burley de Wesley, A. and Clemson, L., 1992, Job Satisfaction Issues: The Focus Group Approach. *Australian occupational therapy journal*, 39, 4, 7–15.
- [13] Davis, G. and Bordieri, J., 1988, Perceived autonomy and job satisfaction in occupational therapists. *American Journal of Occupational Therapy*, 42, 9, 591–595.
- [14] Eklund, M. and Hallberg, I.R., 2000, Factors Influencing Job Satisfaction Among Swedish Occupational Therapists in Psychiatric Care. *Scandinavian Journal of Caring Sciences*, 14, 3, 162–171.
- [15] Florian, V., Sheffer, M., and Sachs, D., 1985, Time Allocation Patterns of Occupational Therapists in Israel: Implications for Job Satisfaction. *American Journal of Occupational Therapy*, 39, 6, 392–396.
- [16] Gamble, J.E., Lincoln, M., and Adamson, B., 2009, A case study of occupational therapy managers in NSW: Roles, responsibilities and work satisfaction. *Australian occupational therapy journal*, 56, 2, 122–31.
- [17] Jacobs, K., 1994, Flow and the Occupational Therapy Practitioner. *American Journal of Occupational Therapy*, 48, 11, 989–996.
- [18] Kinicki, A.J., McKee-Ryan, F.M., Schriesheim, C., Carson, K.P., 2002, Assessing the construct validity of the Job Descriptive Index: A review and meta-analysis. *Journal of Applied Psychology*, 87, 1, 14–32.
- [19] Koustelios, A. and Kousteliou, I., 2001, Job Satisfaction and Burn Out in Education. *Psychology*, 8, 1, 30–39.
- [20] Marneras, C., Theodorakopoulou, G., Albani, E., Gouva, M., Dimopoulou, I., and Kotrotsiou, E., 2010, Job Satisfaction and Anxiety Levels among Nurses working in Renal Units. *Nursing*, 49, 1, 83–90.
- [21] Meade, I., Brown, G.T., and Trevan-Hawke, J., 2005, Female and male occupational therapists: A comparison of their job satisfaction level. *Australian Occupational Therapy Journal*, 52, 2, 136–148.
- [22] Moore, K., Cruickshank, M., and Haas, M., 2006, Job satisfaction in occupational therapy: a qualitative investigation in urban Australia. *Australian Occupational Therapy Journal*, 53, 1, 18–26.
- [23] Politis, I. Managerial Leadership and Staff Job Satisfaction in Mental Health Occupational Therapy. [Unpublished Master Thesis], University of East London, 1997.
- [24] Pringle, E., 1996, Occupational Therapy in the Reformed NHS: the Views of Therapists and Therapy Managers. *British Journal of Occupational Therapy*, 59, 9, 401–406.
- [25] Rees, D.W. and Smith, S.D., 1991, Work Stress in Occupational Therapists Assessed by the Occupational Stress Indicator. *British Journal of Occupational Therapy*, 54, 8, 289–294.
- [26] Robson, C. Real World Research. Wiley, Padstow UK, 2011.
- [27] Rozier, C., Gilkeson, G., and Hamilton, B., 1991, Job satisfaction of occupational therapy faculty. *American Journal of Occupational Therapy*, 45, 2, 160–165.
- [28] Scanlan, J.N., Meredith, P., and Poulsen, A., 2013, Enhancing retention of occupational therapists working in mental health: relationships between wellbeing at work and turnover intention. *Australian occupational therapy journal*, 60, 6, 395–403.
- [29] Scanlan, J.N., Still, M., Stewart, K., and Croaker, J., 2010, Recruitment and retention issues for occupational therapists in mental health: balancing the pull and the push. *Australian occupational therapy journal*, 57, 2, 102–10.
- [30] Smith, P., Schiller, M.R., Grant, Kay, H., and Sachs, L., 1995, Recruitment and Retention Strategies Used by Occupational Therapy Directors in Acute Care, Rehabilitation, and Long-Term-Care Settings. *American Journal of Occupational Therapy*, 49, 5, 412–419.
- [31] Smith, P.C., Kendall, L.M., and Hullin, C.L. The measurement of satisfaction in work and retirement: A strategy for the Study of Attitudes. Rand Mc Nally, Chicago, 1969.
- [32] Taylor, A., Andriuk, M.L., Langlois, P., and Provost, E., 1995, Staff Rotation: Implications for Occupational Therapy. *Canadian Journal of Occupational Therapy*, 62, 4, 208–211.
- [33] Turgeon, J. and Hay, J. A., 1994, Male Occupational Therapists in Ontario: A Survey of Work-Related Issues. *Canadian Journal of Occupational Therapy*, 61, 5, 277–284.