

Magnitude of Turnover Intention and Associated Factors Among Nurses Working in Emergency Departments of Governmental Hospitals in Addis Ababa, Ethiopia: A cross sectional institutional based study.

Andualem Wubetie Aniley (✉ andualemwubete@yahoo.com)

Addis Ababa University <https://orcid.org/0000-0003-4237-3967>

Biniyam Taye

Addis Ababa University

Biruk Girma

Addis Ababa University School of Medicine

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Abstract

Background: Turnover intention is a probability of an employee to leave the current institution within a certain period due to various factors. It is the strongest predictor of actual turnover expected to increase as the intention increases. Emergency Department (ED) nurses are especially vulnerable to turnover because of their increased potential for developing burnout and compassion fatigue with the work environment has a great role. The aim of this study was to assess nurses' intention to leave their current health institution and associated factors in emergency departments of selected governmental hospitals in Addis Ababa, Ethiopia.

Methods: Institutional based cross-sectional study was conducted on 102 nurses in three selected governmental hospitals, Addis Ababa from February 19 to March 31, 2018, using a structured pre-tested self-administered questionnaire. Logistic regression model was used and adjusted odds ratio with a 95% confidence interval was calculated to identify associated factors.

Result: A total of 102 respondents were involved with a response rate of 91.1%. Among them, 79 (77.5%) respondents had the intention to leave the current working unit of the emergency department or hospital. Significant predictive factors of nurses' intention to leave their jobs are educational status (adjusted odds ratio (OR) =4.700, 95% confidence interval (CI)=1.033- 50.772; $p<0.048$), monthly income of Less than 3145 Birr (adjusted OR=6.05, 95% CI=1.056-34.641; $p<0.043$) and professional autonomy (adjusted OR=0.191, 95% CI=0.040- 0.908; $p<0.037$).

Conclusion: more than 77% of the respondents has intention to leave their current working place of emergency unit. Educational status; monthly income and autonomy were significantly associated with emergency nurses' turnover intention in three governmental hospitals. Emergency leaders and hospital managers should have made efforts to enhance nurses' decision making for patient care activities and shared decision overwork or unit related activities.

1. Background

Turnover intention is defined as a probability of an employee to leave his or her current institution within a certain time period due to various factors like dissatisfaction on salary, carrier development opportunity, work environment condition, work overload and other personal factors (1,2). In the nursing profession history, turnover of nursing job or professional quitting remains a serious problem associated with the crisis. It resulted in a loss of a trained employee as transfer, termination, or resignation. Turnover intention is an individual's own estimated probability of leaving the organization at some point in the near future permanently (3). It is the best actual turnover predictor as expectation increase with intention increases (4). Turnover intention is due to multiple factors including psychological, cognitive and behavioral components. It is claimed to start with psychological responses to negative aspects of organizations or jobs. The cognitive component is involving the decision to leave from it. Finally the withdrawal behavior is acted to leave from the current job or actions oriented to future opportunities (5).

The magnitude of nursing turnover intention is a rapidly-growing global problem currently affecting the healthcare sector. The studies conducted across the world has shown to be considered high rate ranging from 18% to 68% (6-10). It is a major worldwide problem especially in developing countries, including Ethiopia. In previous studies done in different areas of Ethiopia was ranged from 50%-61% of turnover intention (9,10).

Turnover of employees is a matter of concern for organizations. It has an impact over the organization including loss of knowledge gained by the employee while on the job, understaffing which in turn lead to decreased effectiveness and productivity of the remaining staff. It has also additional costs related to recruitment and selection, training of new employee, personnel process and induction. (11).

Emergency nurses are the key components from the emergency team to understand the criticality and breadth of patient care needs to address most efficiently. Thus, emergency nurse turnover has a significant impact on the organization and emergency department leaders who desire to preserve a seasoned and competent nursing workforce (12). However, they are entering and leaving the emergency department in higher than average numbers, which incurs higher costs for hospitals to replace staff. The cost of replacing a specialized, emergency nurse may be even higher when the additional training, verifications, and education for critical competencies needed to care for high-acuity patients is provided by the hospital. It is estimated that one in five RNs leaves the profession within one year of hire, while up to one-third leave within two years (13).

Studies showed that multiple factors influence the decision of emergency nurses to stay in or leave their workplace. According to the Tourangeau and Cranley model for determinants of Nurse Intention to Remain Employed, four predictor variables were identified: Job satisfaction, nurses' characteristics, workgroup cohesion and collaboration and nurses' organizational commitment. They reported that control over these four main factors had direct effects on nurse intention to remain employed (14). Among these; job satisfaction, job stress, work experience, pay and benefit, long shifts and work-family conflict were identified as variables that could force nurses to leave their workplace(15-18). According to the Price and Mueller causal nurse turnover model, nurse turnover is directly influenced by nurses' organizational commitment and indirectly through their job satisfaction, with job satisfaction being influenced by a variety of organizational, demographic and environmental variables (19).

According to Meyer and Allen's conceptualization model, organizational commitment is directly linked to individual's intention to stay or leave. It has three sub components; affective commitments, normative commitment and continuance commitment which was widely used for researchers to study organizational factors(20,21). In this model, employees are remained in the organization to achieve the values and goals of the organization is affective commitment. Feeling to have an obligation is normative commitment and lose a lot if they left the organization is continuance commitment. Organizational commitment is an important predictive variable to asses intention to leave the organization (22).

Studies evidenced multiple contributing factors of nurses' turnover intention. Lower professional title, working in emergency department and length of time in the workplace were the factors for turnover

intention (23,24). Similar study conducted in Indonesia identified factors as workload, schedule and personal reason were determinants for turnover intention (24).

The ability of hospitals to retain trained and experienced emergency nurses in a cost-prohibitive healthcare environment requires action on behalf of hospital administrators (25)

Emergency Departments (ED) are highly acute patient care environments that are often unpredictable (12). Nurses working in Emergency departments are especially vulnerable to turnover because of their increased potential for developing burnout and compassion fatigue(26). ED nurses with invaluable experience and mentoring capacity may consider leaving the ED for less stressful and physically demanding working conditions. Also, while ED patient volume continues to increase, patient boarding decreases the amount of available treatment spaces (27). This stressful environment is exacerbated by hospitals reducing nursing staff to meet productivity goals, causing some EDs to require mandatory overtime to fill gaps. When nurses must work beyond their shift, at times over 12 hours, patient safety is impacted as fatigue makes nurses more prone to errors(28, 29).

Nursing Turnover is represented as a major problem for both the profession itself and healthcare provision. It has a negative impact on care of patients, quality of care provided, loss of continuity of care, loss of skills and local knowledge, increased length of stay and financial costs of replacement. Turnover may also have deleterious implications for staff left behind, concerning morale and increased workload leading to complicate the hospital's goal of providing quality care for its patients(30). Studies have shown considerable potential cost savings where health service managers implement effective strategies to reduce nurse turnover (31).

Understanding more about the interrelationships between individual factors, organizational factors, environmental factors and job satisfaction with turnover intent can be used by nurse administrators and hospital managers to develop and institute practices designed to increase job satisfaction thus retain nurses (32).

Even if there are limited studies on nurses' turnover intentions in Ethiopia, they focused on general nurses' turnover intention. There are no studies conducted in the study area on nurses' working in emergency departments that need further studies separately which initiated to this study.

Thus, there is a great need to conduct an organized study on nurses' turnover intention among nurses working in ED whose turnover intention is expected higher due to the department's nature, job stress due to over crowdedness and workload. Therefore, this cross-sectional study was aimed to assess the magnitude of turnover intention and associated factors among nurses working in emergency departments of governmental hospitals in Addis Ababa, Ethiopia. It could provide insights for ED leaders and hospital administrators to develop the appropriate retention strategies and programs for attracting nurses to work in the emergency departments.

2. Methods

2.1. Study design and setting.

Institutional based cross-sectional quantitative study was conducted from February 5-March 10, 2018. There are 13 public hospitals functional in Addis Ababa city. The study setting includes three public hospitals: TikurAnbesa, Menilik II and St.Paulos Hospitals. These are tertiary hospitals in the city as well as the country. They are providing Trauma services not only for Addis Ababa dwellers but also for the whole country by receiving referral cases from respective regions and city administrations. Among thirteen hospitals, the investigators purposively selected these three hospitals where a large number of patients visit, referred and admitted. They also provide general emergency services besides known to be tertiary level hospitals in the city as well as in the country. Addis Ababa is the capital city of Ethiopia.

2.2. Sample size and sampling procedure

There are a total of 112 nurses working in the emergency department from the three tertiary level governmental hospitals. Since the source of population was small (n=112), all nurses from those emergency departments of selected public hospitals were taken as the study subjects.

2.3. Data collection instrument

Turnover intention was the dependent variable which was assessed based on the Tourangeau and Cranley developed model that identifies a set of four predictor variables of nurses' intention to remain employed: job satisfaction, nurses' personal characteristics, workgroup cohesion and collaboration and nurses' organizational commitment (13). Data was collected by using a pretested, structured self-administered questionnaire prepared in the English language which is a medium of instruction for higher education in Ethiopia. The questionnaire was adapted from a previously studied literature (2, 13, 15, 16). It was used to assess the organizational factors and job satisfaction which were measured by using five-point Likert scales. The response choices for each item were a 1-5 Likert scale with the choices: 1= strongly disagree, 5=strongly agree. Negative items were reverse coded and the answers to show low to a high level for the questions were negatively worded (1-strongly agree, 5 strongly disagree).

The questionnaires were divided into sub-sections. The first part was used to assess socio demographic characteristics including sex, marital status, age, monthly income, educational status, dependent family, working experience and having children living with. The second section was job satisfaction factors that encompass 23 items subscale. It was measured by a 5-point Likert scale in which 5 denotes very satisfied and 1 denotes very dissatisfied and score above the computed mean was taken as satisfied. The reliability of the scale is 0.88 (13.36). The third section was organizational commitment and its subscale include normative, affective and continuance commitment which was developed and validated by Meyer and Allen (1997). Each subscale was assessed by using three items with a 5-point Likert scale: 1 denoting strongly disagree and 5 denoting strongly agree and the scored above-computed mean of the subscale was taken as high commitment. The reliability of the scale is 0.89 for this study.

Turnover intention of participants was measured by yes or no item obtained from literature reviews (38–41). Four Bsc degree nurses who trained for two days on clarification of data tool, collection technique and quality of data were collected the data.

Pilot study: The pilot study was conducted to test the clarification of the questionnaire on eleven nurses before the actual data collection in the comparable hospital other than the selected. Some modifications were made to the questionnaires according to the participants' recommendations. The pilot study results showed that for job satisfaction measurement scale Cronbach's' α was 0.88 and for organizational commitment was 0.89

2.4. Data collection process

Before the data collection, we made contact with each hospital medical director, nursing managers, and Emergency unit leaders to get permission with a copy of approved ethical clearance letter obtained from Addis Ababa University College of Health science Emergency department Ethical Review Committee to conduct the study and all are accepted our request. Then, each unit of emergency head nurses asked for their cooperation to give the lists of staff nurses in their unit. Nurses who were on vacation, sick leave, employed and had clinical nursing experience less than six months were exclude from the study. Nurses from the emergency department in each hospital who fulfill the inclusion criteria were included in the study. In each hospital, the Emergency unit leader was responsible for supervising the Emergency nurses participated in the study. Three bachelors of Science degree nurses were responsible for participant recruitment and distribution of the questionnaire. Data collectors informed participants verbally about the study and distributed the information sheet and consent form to participants for those who agreed to participate. The self-administered structured questionnaire was distributed to each participant. Those who were not volunteer were permitted not to participate in the study and allowed to leave complete the questionnaire.

2.5. Data analysis

The collected data were cleaned and entered into the computer using EPI data version 3.1 statistical packages and checked for the consistency of data entry. The Statistical Package for Social Sciences (SPSS) version 22.0 used for data analysis. Cronbach α test was applied to assess the reliability of the data tool. Categorical variables were presented as frequencies and percentages and continuous variables computed as mean and standard deviation (SD). A bivariate logistic regression analysis was performed to identify the factors that have association with turnover intention. The statistical significance was at p-value < 0.05 with 95% CI.

3. Results

3.1. Socio-demographic characteristics of nurses working in the emergency unit

Of the total 112 eligible nurses working in emergency department, 102 were volunteered to participate in the study making a response rate of 91.1%. Most of them were males (60, 58.8%). The mean age among the study participants was 27.4 ± 3.8 ranged from 21–45 years. The majority of the respondents were single (77, 75.5%) and most of the participants (84, 82.4%) were a degree holder in nursing. Seventy-six (74.5%) of them had dependent family they provide financial support.

Fifty-one (50%) had less than two years of clinical experience in the nursing profession working in the emergency department. The mean monthly income of participants was 4252.26 (± 794.921 SD) Ethiopian Birr (ETB) [Table: 1].

3.2. Turnover Intention

Out of the 102 nurses, 79 (77.5%) of them had the intention to leave their current Health institution of the emergency department.

3.3. Factors Related to Job Satisfaction.

The results indicated that most of the participants were unsatisfied with all assessment factors related to job satisfaction. One hundred (98%), 97(95.1%) and 94(92.2%) of the participants were unsatisfied with the income level, workload and work environment respectively. (Table 2).

3.4. Factors Related to Organizational Commitment.

The results showed that about 59.8% and 52.9% of nurses had low affective and normative commitment, respectively, while (53.9%) of them had a high continuance commitment (Table 3)

3.5. Associated factors with nurse's Turnover Intention.

Bivariable analysis was performed and taking p -value < 0.05 as a cut-off point for determining significance with 95% CI. Six variables showed a significant association with the outcome variable. These were; monthly income, having dependent family members, educational status, Autonomy, professional opportunity and affective commitment. Socio-demographic characteristics such as age, sex, marital status and experience did not show a significant association with turnover intention.

3.6. Multivariable Binary Logistic Regression Analysis Results.

The three covariates that were significantly associated (p value <0.05) with turnover intention were fitted into the backward stepwise multivariable binary logistic regression; monthly income, educational status and autonomy were significantly associated factors that appeared in the multivariable model after a stepwise selection process. Diploma nurses were 4.7 times more likely to leave than those who were masters [AOR=4.700 (95% CI: 1.033-50.772)] and Nurses who had monthly income less than 3145 Ethiopian Birr were 6.05 times more likely to leave than who had monthly income more than 4725 Ethiopian Birr [AOR=6.05(95% CI: 1.056-34.641)]. Nurses who were not satisfied with autonomy were 0.2 times more likely to leave than nurses who were satisfied [AOR=0.191 (95% CI: 0.040,0.908)]. (Table 5)

4. Discussions

This study was aimed to assess the magnitude and associated factors of turnover intention among nurses working in the emergency department. It provides an initial step in determining and understanding the work-life of nurses working in emergency department sitting. It is an important topic that guides an organization to manage the problem accordingly which might have a negative impact on the ability to meet the patient needs and deliver high standards of care. Our study showed that most 79(77.5%) of studied nurses had the intention to leave their current working health institution of emergency department. The finding of this study is higher than studies done previously. A study conducted in Saudi Arabia on primary health care nurses showed that 40.4% has a turnover intention (33). Similar studies conducted in different countries like Japan 44.3%(34), Republic of Ireland (60%)(6), Lebanon (67.5%) (7), South Africa (51.1%)(35) and Egypt (18.4%)(8) have reported a turnover intention of nurses lower than our study result. It is also higher than the previous studies done in the Ethiopian region: Sidama zone (50%) (9), east Gojam,(59.4%)(10) and North Shoa Zone Amhara Region (61.3%)(42). The possible reasons could be that the study site which is done at the emergency department of selected hospitals where there is high patient flow with the majority of critically ill and injured patients are treated. This could result in workload and stress on nurses. It could be the reason that showed most of the nurses are not satisfied with almost all measurement levels of job satisfaction. But it is lower than the study done in Riyadh, Saudi Arabia (94%) on nurses working in tertiary care hospitals of the same study design. The discrepancy could be the study area of selected hospitals since it was conducted at tertiary care hospitals and advanced care is provided. In this study concerning the socio-demographic characteristics; educational status and monthly income were associated with nurses' intention to leave their current working unit of the emergency department. Diploma nurses were more than four times more likely to have the intention to leave than master nurses. Advanced training, career development and continuous learning activities in emergency nursing may promote job satisfaction, increased retention of nurses and enable the continued provision of high-quality care. This finding is consistent with studies done in Ethiopia in which educational status was significantly associated with turnover intention (36).

Another strong significant predictor of turnover intention in the hospital is monthly income. Nurses whose income less than 3145 Ethiopian birr monthly were six times more likely they have the intention to leave the emergency unit (AOR=6.049,95% CI:(1.056,34.641). Socio-demographic characteristic age and work experience were not associated with nurse's intention to leave the emergency unit. This finding is in line with a similar study done in Sidama zone public health facilities and also the study done in southern Ethiopia (9), no significant difference in turnover intentions by gender was found. In this study, autonomy was significantly associated with nurses' turnover intention. Nurses who were unsatisfied with autonomy were less likely to leave the hospital than satisfied. This finding is consistent with researches done in that job satisfaction explained as a predictor of intent to leave/stay (37)

Nurses as a professional have the authority to make decisions and the freedom to act in accordance with their professional knowledge base. But unsatisfaction of nurses in their autonomy may result a negative impact in the nursing profession in rapidly changing health care environments. The reason for

nurses' autonomy dissatisfaction may be the working department of highly specialized hospitals where there are strict policies and regulations that strict their practice of autonomy.

Organizational commitment was a significant predictive factors of nurse turnover intention. The assessment finding showed that majority of nurses working in emergency had low affective and normative commitment which have a negative significant influence on turnover intentions. Low affective commitment means that nurses have low perception to be part of the hospital organization. They have a low sense of belonging and not happy to be part of nursing team in these hospitals. It is in line with the theories stated (20-22,43).

Effective retention mechanisms in healthcare settings can improve employees' self-esteem and organizational efficiency by advancing the quality of care provision and enhancing nursing workforce. This high rate of turnover intention indicates that all concerned bodies of the organization should work to develop appropriate and efficient strategies to combat this serious issue and enabling the nurses to perform better care for their patients.

The strengths of this study are that; it can be generalizable to the nurses working in emergency department of Addis Ababa city governmental hospitals in Addis Ababa city, Ethiopia. In addition, it is the first study done on nurses working at emergency department which is newly established and given high attention in nationwide which can be used as a baseline for the policy makers and further studies. Furthermore, the possibility of non-response bias is very little as the response rate is high (91.1%). The limitations of the study is that it was a cross-sectional and data was collected using self-administer scales. So, further studies can be carried out with more objective instruments. It is better to conduct longitudinal and interventional studies to assess the definite turnover amongst nurses compared with the present study described on turnover intention.

5. Conclusions

The overall turnover intention among nurses working in emergency department of public Hospitals in Addis Ababa city is high. This is related to multiple factors including monthly income, having dependent family members, educational level, Autonomy, professional opportunity and affective commitment. Generally, this study indicates that the emergency leaders, nursing manager, hospital directors and hospital affairs should work on the major contributing factors towards the intent to leave emergency nurses' turnover. In conclusion, effective measures should be taken to improve emergency nurse accomplishment, professional status and career development to minimize their current turnover intention and to prevent emergency nurses from resigning.

Abbreviations

AA : Addis Ababa

AAU: Addis Ababa University

ED : Emergency Departments

ETB : Ethiopian Birr.

SPSS: Statistical package for social science

TASH: TikurAnbessa Specialized Hospital

Declarations

Ethics approval and consent to participate

Ethical clearance was granted from Addis Ababa University, college of Health Science, Department of Emergency medicine Research Review Ethical Committee approved on 15/10/2018. Permission was obtained from each hospital administrative to conduct the study. All nurses were informed that their participation was voluntary and the procedure used did not pose any potential risk and their identities will be kept strictly confidential. Informed written consent forms were taken from all participants before participation.

Consent for publication

Not applicable

Availability of data and materials

All the data supporting the study findings are within the manuscript. Additional detailed information and raw data are available from the corresponding author on reasonable request.

Competing interests

We have no competing interest

Funding

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Authors' contributions

BT and AW designed the study. BT contributed to data collection, analysis and interpretation. AW analyzed and interpreted the data and wrote the manuscript. BG critically revised the draft manuscript and contributed to its content. All authors read and approved the final manuscript.

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Authors' Information

1. AndualemWubetie—BSC, MSC, Lectures in Addis Ababa University College of health science, Emergency department
2. BiniyamTaye— BSC, MSC, Emergency and critical care nurse in Addis Ababa University Tikur Anbesa Hospital
3. BirukGirma — MD, Assistant professor of emergency medicine in Addis Ababa university college of health science school of medicine.

References

1. Chao MC, Jou RC, Liao CC, et al. Workplace stress, job satisfaction, job performance, and turnover intention of health care workers in Rural Taiwan. *Asia-Pacific , J Public Health* 2015;27(2):1827–36.
2. Bernardo M MG, Raquel R, Ana Isabel S. A study of physicians' intention to quit: The role of burnout commitment and difficult doctor-patient interactions. *Psicothema* 2012;24:263-70.
3. Mohamed NA, Mohamed SA. Impact of Job Demand and Control on Nurses Intention To leave Obstetrics and Gynecology Department. *Life Science Journal*. 2013;10(2):2239.
4. Kaur B M, Pankaj D. Antecedents of Turnover Intentions: A Literature Review. *Global Journal of Management and Business Studies*. 2013;3(10):1219-30.
5. Hayes LJ OB-PL, Duffield C, Shamian J, Buchan J, Hughes F, et al. Nurse turnover: A literature review – An update. *International Journal of Nursing Studies*. 2012;49:887-905.
6. McCarthy G TM, Lehane E. ;. Intention to 'leave' or 'stay' in nursing. *Journal of Nursing Management*. 2007;15:248-55.
7. El-Jardali F DH, Dumit N, Jamal D, Mouro G. A national cross-sectional study on nurses' intent to leave and job satisfaction in Lebanon: implications for policy and practice. *BMC Nursing*. . 2009;;8(3).
8. LIK. MEAED. Managers' Conflict Management Styles and its Effect on Staff Nurses' Turnover Intention at Shebin El Kom Hospitals, Menoufiya Governorate. *World Journal of Medical Sciences*. 2014;;11(1):132-43.
9. Asegid A, Belachew T, Yimam E. Factors influencing job satisfaction and anticipated turnover among nurses in Sidama zone public health facilities, South Ethiopia. *Nursing research and practice*. 2014;2014.
10. Girma Alem Getie ETB, Habtamu Abera Hareri., Assessment of Factors Affecting Turnover Intention Among Nurses
11. S. J. Determinants of Employee Turnover Intentions: A Review. *Management Today*. 2009;9(2):26-33.
12. Tubbert S. "Resiliency in Emergency Department Nurses". Education Doctoral Paper 2014;196.

13. Kerfoot K. Four measures that are key to retaining nurses. *Hospitals and Health Networks*. 2015.
14. Ann E. Tourangeau GC LAC, Era Mae Ferron, Sarah Harvey. Determinants of hospital nurse intention to remain employed: broadening our understanding. *Journal of Advanced Nursing*. 2009;66(1):22-32.
15. Almalki MJ FG, Clark M. The relationship between quality of work life and turnover intention of primary health care nurses in Saudi Arabia. *BMC Health Services Research*. 2012;12:314.
16. J P. Intention to leave the profession: antecedents and role in nurse turnover. *Journal of advanced nursing*. 2008;64(2):157-67.
17. Chen H-C, Chu C-I, Wang Y-H, Lin L-C. Turnover factors revisited: A longitudinal study of Taiwan-based staff nurses. *International Journal of Nursing Studies*. 2008;45:277-85.
18. Mosadeghrad AM, Ferlie E, Rosenberg D. Occupational Stress and Turnover Intention: Implications for Nursing Management. *International Journal of Health Policy and Management*. 2013;1(2):169-76.
19. Sara De Gieter *, Joeri Hofmans, Roland Pepermans. Revisiting the impact of job satisfaction and organizational commitment on nurse turnover intention: An individual differences analysis. *International Journal of Nursing Studies*. 2011;48: 1562–1569.
20. Meyer JP, Allen NJ. A three-component conceptualization of organizational commitment. *Human Resource Management Review*. 1991;1(1):61-89.
21. WeiBo Z, Kaur S, W J. New development of organizational commitment: A critical review (1960–2009). *African Journal of Business Management*. 2010;4(1):012-20.
22. Omar K, Anuar MM, majid AhA, Johari H. Organizational commitment and intention to leave among nurses: the mediating role of moral obligation. *International Journal of Management Science* 2012;19(2):31-46.
23. Hongying Chen, Guohong Li , Mengting Li , Lei Lyu , Tiantian Zhang. A cross-sectional study on nurse turnover intention and influencing factors in Jiangsu Province, China. *International Journal of Nursing Sciences* journal homepage: <http://www.elsevier.com/journals/international-journal-of-nursing-sciences/2352-0132>.
24. Aryo Dewanto, and Viera Wardhani. Nurse turnover and perceived causes and consequences: a preliminary study at private hospitals in Indonesia. *BMC Nursing* , 2018
25. Moon Fai Chan ALL SML, Siu Ming Yeung and Iat Kio Van. Factors influencing Macao nurses' intention to leave current employment. *Journal of Clinical Nursing*. 2008;18:893-901.
26. Flarity K, Gentry, J. E., & Mesnikoff, N. The effectiveness of an educational program on preventing and treating compassion fatigue in emergency nurses *Advanced Emergency Nursing Journal*,. 2013;35(3): 247-58.
27. Wiler JL, Welch, S., Pines, J., Schuur, J., Jouriles, N., & Stone-Griffith, S. Emergency department performance measures updates: Proceedings of the 2014 emergency department benchmarking alliance consensus summit *Academic Emergency Medicine*. 2015;22(5):542-53.
28. Harrington L, & Heidkamp, M. The aging workforce: Challenges for the health care industry workforce. *National Technical Assistance and Research Leadership Center*. 2013.

29. Reese SM. Evidence-based nursing: Ten ways to practice evidence-based staffing and scheduling. *Nursing Management*. 2011;42(10):20-4.
30. Price JL, Mueller, C W, . Professional Turnover: The Case of Nurses. Books. SMaS, editor. New York1981.
31. McCarthy G MPT, Camille Cronin,. National study of turnover in nursing and midwifery. 2002.
32. Williams A. WL, Scott L, Hartley L. A. Job Stress, Job Satisfaction, and Intent to Leave Employment among Maternal-Child Health Nurses (Master's Thesis) Marshall University. 2003.
33. Almalki MJ, FitzGerald G, Clark M. The relationship between quality of work life and turnover intention of primary health care nurses in Saudi Arabia. *BMC health services research*. 2012;12(1):314.
34. Ito H. VES, I. Sederer L., Yamada O., Tachimori H., , . Factors Affecting Psychiatric Nurses' Intention to Leave their Current Job. *Japan Ministry of Health and Welfare, Japan*. 2001;52: 232-234.
35. El Dahshan MEA, Keshk LI. Managers' conflict management styles and its effect on staff nurses' turnover intention at Shebin El Kom Hospitals, Menoufiya Governorate. *World J Med Sci*. 2014;11(1):132-43
36. Firew Ayalew, Adrienne Kols, Young-Mi Kim, Baltimore M, USA, Anne Schuster, Mark R. Emerson, et al. Factors Affecting Turnover Intention among Nurses in Ethiopia. *WORLD HEALTH AND POPULATION*. 2015;16.
37. Engeda EH BA, Alene KA. Ethiopia. *BMC Nursing*. . Intent to stay in the nursing profession and associated factors among nurses working in Amhara Regional State Referral Hospitals.,2014;13(24).
38. Peter Delobelle JLR, Sam Ntuli, Inah Malatsi, Rika Decock, Depoorter AM. . Job satisfaction and turnover intent of primary healthcare nurses in rural South Africa: a questionnaire survey. . *Journal of advanced nursing*. 2010;67(2)::371-83.
39. Girma Alem Getie, Erdaw Tachbele Betre, Habtamu Abera Hareri.Assessment of Factors Affecting Turnover Intention Among Nurses Working at Governmental Health Care Institutions in East Gojjam, Amhara Region,Ethiopia, *American Journal of Nursing Science*, vol. 4 no.3 , pp. 107-112,2015
40. Y. Zhang and X. Feng, "The relationship between job satisfaction, burnout, and turnover intention among physicians from urban state-owned medical institutions in Hubei, China: a cross-sectional study," *BMC Health Services Research*, vol. 11, no. 1, article 235, 2011.
41. M.M. Alam and J. F.Mohammad, "Level of job satisfaction and intent to leave among Malaysian nurses," *Business Intelligence Journal*, vol. 3, no. 1, pp. 123–137, 2010.
42. Aster Ferede , Getiye Dejenu , YihenewMillion, et al.Magnitude of Turnover Intention and Associated Factors among Health Professionals Working in Public Health Institutions of North Shoa Zone, Amhara Region, Ethiopia.*BioMed Research International*, 2018, <https://doi.org/10.1155/2018/3165379>
43. Ria Mardiana, Yusuf Guntur, Siti Haerani and Muhlis Hasan. The influence of affective, continuance and normative commitments on the turnover intentions of nurses at Makassar's private hospitals. Indonesia. *African Journal of Business Management* Vol. 6(38), 2012

Tables

Table 1. Socio-demographic characteristics of nurses working in emergency unit of governmental hospitals of Addis Ababa city, Ethiopia, 2018(N=102).

Variables		Frequency (N=102)	Percent (%)
Sex	Male	42	41.2
	Female	60	58.8
Marital status	Married	25	24.5
	Single	77	75.5
Age	<25 years	17	16.7
	25-30 years	66	64.7
	>30 years	19	18.6
Monthly income	<3145	15	14.7
	3145-3911	18	17.6
	3911-4725	46	45.1
	>4725	23	22.5
Educational status	Diploma	6	5.9
	Bachelor	84	82.4
	Masters	12	11.8
Had dependent family	Yes	76	74.5
	No	26	25.5
Working experience in ED	<2	51	50
	2-4	44	43.1
	5-9	7	6.9
Having children living with	Yes	14	13.7
	No	86	84.3

Table 2: Job satisfaction factors of nurses working in emergency department of governmental hospitals of Addis Ababa city, Ethiopia, 2018(N=102)

Variables	Category	Frequency(n)	Percent (%)
Work place condition	Unsatisfied	85	83.3
	Satisfied	17	16.7
Work load	Unsatisfied	97	95.1
	Satisfied	5	4.9
Nature of work	Unsatisfied	76	74.5
	Satisfied	26	25.5
Work hour	Unsatisfied	83	81.4
	Satisfied	19	18.6
Organizational commitment	Low	87	85.3
	High	15	14.7
Work environment	Unsatisfied	94	92.2
	Satisfied	8	7.8
Salary level	Unsatisfied	100	98
	Satisfied	2	2
Co-worker relation	Low	61	59.8
	High	41	40.2
Payment per time	Unsatisfied	96	94.1
	Satisfied	6	5.9
Work mate leave hospital	Yes	66	64.7
	No	36	35.3
Work mate leave ED	Yes	74	72.5
	No	28	27.5

Table 3: Organizational comitment factors associated with turnover intention among nurses in in three selected governmental hospitals in Addis Ababa, Ethiopia, 2018 (n=102)

Variable	Category	frequency	Percent (%)
Affective commitment	Low	61	59.8
	High	41	40.2
Normative commitment	Low	54	52.9
	High	48	47.1
Continuance commitment	Low	47	46.1
	High	55	53.9

Table 4: Bivariable logistic regression analysis of factors associated with turnover intention of nurses working in emergency department of governmental hospitals of Addis Ababa city, Ethiopia, 2018(N=102)

Variables	Category	Turnover intention(n=102)		COR(95%CI	p-value
		yes	no		
Sex	Male	18(42.9)	24(57.1)	0.857(0.387,1.897)	0.704
	Female	28(16.7)	32(53.3)	1	
Age	<25years	9(52.9)	8(47.1)	3.150(0.780,12.727)	0.107
	25-30 years	32(48.5)	34(51.5)	2.635(0.852,8.154)	0.093
	>30 years	5(26.3)	14(73.7)	1	
Marital status	Unmarried	42(47.7)	46(52.3)	2.283(0.665,7.830)	0.189
	Married	4(28.6)	10(71.4)	1	
Educational status	Diploma	4(66.7)	2(33.3)	10.00(1.939,97.500)	0.048*
	BSC	40(47.6)	44(52.4)	4.545(0.939,22.011)	0.06
	Master	2(16.7)	10(83.3)	1	
Work experience	<2 years	4(66.6)	2(33.3)	8(0.500,127.900)	0.141
	2-4 years	25(92.6)	2(7.4)	4.167(0.434,40.000)	0.216
	5-9 years	16(38.1)	26(61.9)	2.462(0.252,24.020)	0.438
	>10	1(20)	4(80)	1	
Monthly income	<3145	9(60)	6(40)	4.250(1.058,17.070)	0.041*
	3145-3911	8(44.4)	10(55.6)	2.267(0.608,8.447)	0.223
	3912-4727	23(50)	23(50)	2.833(0.947,8.474)	0.062
	>4727	6(26.1)	17(73.9)	1	
Dependent family	Yes	39(51.3)	37(48.7)	2.861(1.078,7.595)	0.035*
	No	7(26.9)	19(73.1)	1	
Work environment	Unsatisfied	43(45.7)	51(54.3)	1.405(0.317,6.221)	0.654
	Satisfied	3(37.5)	5(62.5)	1	
Co-worker relation ship	Low	24(39.3)	37(60.7)	0.560(0.252,1.247)	0.156
	High	22(63.7)	19(46.3)	1	
Autonomy	Unsatisfied	34(39.5)	52(60.5)	0.218(0.065,0.732)	0.014*
	Satisfied	12(75)	4(25)	1	
Professional opportunity	Unsatisfied	19(32.2)	40(57.8)	0.281(0.123,0.642)	0.003*
	Satisfied	27(62.8)	16(37.2)	1	
Scheduling	Unsatisfied	23(42.6)	31(57.4)	0.806(0.369,1,763)	0.590
	Satisfied	23(47.9)	25(52.1)	1	
Affective commitment	Low	33(54.1)	28(45.9)	2.538(1.109,5.812)	0.028*
	High	13(31.7)	28(68.2)	1	
Normative commitment	Low	27(50)	27(50)	1.526(0.695,3.353)	0.292
	High	19(39.6)	29(60.4)	1	
Countenance commitment	Low	21(44.7)	26(55.3)	0.969(0.443,2.120)	0.938
	High	25(45.5)	30(54.5)	1	

*=significant at P≤0.05, COR=crude odd ratio

Table 5: Multivariate logistic regression analysis of factors associated with turnover intention of nurses working in emergency department of governmental hospitals of Addis Ababa city, Ethiopia, 2018(N=102)

Variable	Category	Intention to leave(n=102)		AOR(95% CI)	P-value
		Yes	No		
Age in years	<25	9(52.9)	8(47.1)	0.343(0.042,2.815)	0.319
	25-30	32(48.5)	34(51.5)	0.759(0.164,3.501)	0.723
	>30	5(26.3)	14(73.7)	1	
Marital status	Unmarried	42(47.7)	46(52.3)	6.364(0.969,41.778)	0.054
	Married	4(28.6)	10(71.4)	1	
Educational status	Diploma	4(66.7)	2(73.3)	4.700(1.033,50.772)	0.048*
	BSC	40(90.9)	4(9.1)	5.080(0.585,44.111)	0.141
	MSC	2(16.7)	10(83.3)	1	
Work experience	<2	4(66.7)	2(33.3)	31.498(0.504,1968.88)	0.102
	2-4	25(92.6)	2(7.4)	5.396(0.265,109.725)	0.273
	5-9	16(39.1)	26(61.9)	3.362(0.175,64.689)	0.422
	>10	1(20)	4(80)	1	
Monthly income	<3145	9(60)	6(40)	6.049(1.056,34.641)	0.043*
	3145-3911	8(44.4)	10(55.6)	1.327(0.288,6.114)	0.717
	3912-4725	23(50)	23(50)	1.749(0.436,7.018)	0.430
	>4725	6(26.1)	17(73.9)	1	
Dependent family	Yes	39(51.3)	37(48.7)	2.095(0.575,7.635)	0.262
	No	7(26.9)	19(73.1)	1	
Co-worker relation ship	Low	29(43.9)	37(56.1)	0.753(0.260,2.181)	0.602
	High	22(53.7)	19(46.3)	1	
Autonomy	Unsatisfied	34(39.5)	52(60.5)	0.191(0.040,0.908)	0.037*
	Satisfied	12(75)	4(25)	1	
Professional opportunity	Unsatisfied	19(32.2)	40(67.8)	0.514(0.171,1.541)	0.235
	Satisfied	27(62.8)	16(37.2)	1	
Affective commitment	Low	33(54.1)	28(45.9)	2.322(0.737,7.313)	0.150
	High	13(31.7)	28(68.3)	1	

*=significant at $p \leq 0.05$, AOR=adjusted odd ratio

Figures

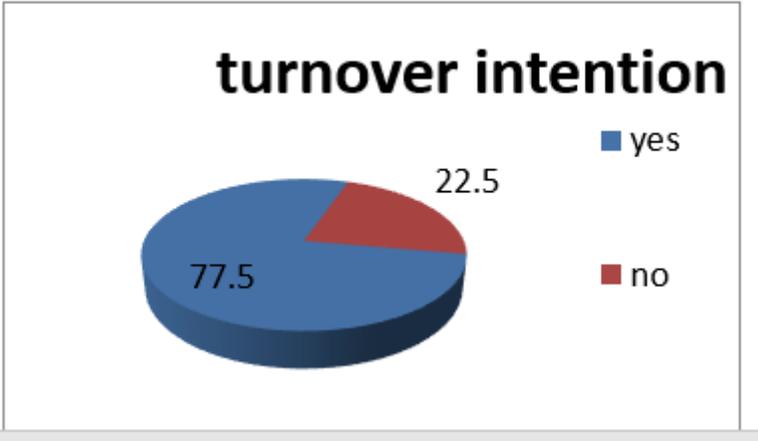


Figure 1

Turnover intention of nurses working in emergency unit at governmental hospitals of Addis Ababa city, Ethiopia, 2018(N=102).