Work motivation and influencing factors among healthcare workers at Le Van Viet Hospital in Ho Chi Minh City

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ABSTRACT

The work motivation of health workers can affect the quality of health services.

Objectives (1) Provide a practical description of work motivation among health workers at Le Van Viet Hospital and (2) Analyze some factors affecting work motivation of health workers at Le Van Viet Hospital.

Method of this study was cross-sectional descriptive, quantitative combined with qualitative. Quantitative data were collected from 182 health workers through questionnaires using a pre-designed toolkit of questions about health workers' work motivation. The study included 03 in-depth interviews, 02 focus group discussions with different hospital leaders, Department of Organization and Personnel, Finance and Accounting and medical staff to find out the influencing factors.

Results: The percentage of health workers who were motivated to work was quite low, at 43.4%. Regarding the rate of being motivated to work in 7 aspects, the aspect of time factor and participation had the highest rate with 80.2%, dedication at 73.6%, commitment to the organization recorded at 55.5% and the lowest was the general motivational aspect at work at 45.1%. In terms of personal factors, The under 40 years old group had a demotivation rate of 1.98 times higher than the group of 40 years old and older. The breadwinner group had a demotivation rate of 1.9 times higher than those who were not ($p<0.05$). Positive factors included management procedure, evaluation tool for task completion, achievement record, rewarding system and roadmap for personal development. The relationship between leaders and

employees was strongly tied with mutual support. Negative factors ranged from lack of hospital beds, fans, medical facilities. Another factor was income and remuneration under employees' expectation. Also, staff training was under budget.

Conclusion: Health workers face significant motivational challenges, particularly among younger and breadwinner groups. Positive influences include effective management and supportive leadership, while negative factors such as inadequate resources and low remuneration hinder motivation.

Key word: Work motivation, healthcare worker.

INTRODUCTION

Work motivation is the process that reflects the intensity, quantity, and level of individual effort in work to achieve the organization's goals (Mutale et al., 2013). Work motivation represents the dynamic process reflecting the intensity, persistence, and direction of individual effort toward achieving organizational objectives. It is essential for managers to continuously explore diverse strategies and policies to effectively motivate their workforce. To make informed decisions, understanding the multifaceted factors influencing healthcare workers' motivation is critical (Nguyen & Pham, 2024; Sa et al., 2024).

Work motivation or encouraging employees to work is one of the important aspects of human resource management, not only in the healthcare system but in any system (WHO, 2014). In addition, healthcare settings, the motivation of workers is directly observable through their workplace behaviors and profoundly influences healthcare system outcomes. Insufficient motivation can degrade the quality of care and contribute to workforce attrition. The performance of healthcare personnel is pivotal to ensuring service quality, efficiency, accessibility, and ultimately patient survival. Consequently, human resource motivation and development remain central priorities in health policy frameworks (Ninh et al., 2024; Thuan & Toai, 2024).

Motivating employees is a cornerstone of human resource management across all sectors, including healthcare. The motivation of healthcare workers is especially crucial for sustaining workforce performance and service delivery (Tri et al., 2023). Recent studies in Vietnam reveal varying levels of work motivation among healthcare staff, with reported rates ranging approximately from 47% to 68%, reflecting differences in working environments and conditions (Nguyen & Pham, 2024; Sa et al., 2024).

In Vietnam, some research highlights that motivation levels differ by professional groups and demographic factors such as gender, income, and achievement (Dung & Nghia, 2023). Moreover, professional qualifications, age, hospital type, and non-financial motivators including working conditions, organizational culture, training opportunities, communication, and leadership are significant predictors of healthcare workers' motivation (Ninh et al., 2024).

With the challenges facing this sector,

including tech-nological advancements, the metamorphosis occurringin the demographic and diversity of the workforce, there-structuring, re-engineering, downsizing, the currentevents facing professionals in the health sector, and theever changing customer needs, understanding the needs ofthe worker becomes more essential than ever to promote aquality health service and to create healthy work environ-ment. Understanding the motivation health workers, Motivation of health workers in Le Van Viet hospital motivating factors for the health professionals, and recog-nizing how the manager and the leaders can successfullymotivate the staff is a question of increasing concern. Therefore, this study has to assess the overall. Therefore, we conducted a study on the topic *"Work Motivation and Some Influencing Factors Among Healthcare Workers at Le Van Viet hospital, Ho Chi Minh City".*

RESEARCH METHODOLOGY

The study used a cross-sectional design, combining quantitative and qualitative methods. The research was conducted at Le Van Viet hospital. The sample size in this study included 182 health workers. Purposive sampling was utilized in selecting participants. Purposive sampling, also known as judgmental or selective sampling, is a non-probability sampling approach in which people are chosen based on specified criteria or characteristics relevant to the research question. According to Bowling (2009), purposive sampling is a sampling technique that involves selecting individuals or cases that are considered to be representative or typical of the population of interest based on the researcher's judgment or selection criteria (Bowling, 2009).

Inclusive criteria Including in the study, participants with - Healthcare workers with a minimum working period of 6 months or more.

Qualitative:

- Representatives of hospital leadership
- Leaders of the Human Resources and Finance departments
- Leaders of clinical departments
- Administrative, clinical, and paraclinical staff
- Agreed to participate in the study

Exclusion criteria: Healthcare workers who are studying, on maternity leave, or absent for more than 3 consecutive months during the study period.

Questionnaire

The demographic profile

Age, sex, marital status, highest educational attainment, duration of work at the hospital, type of contract, Department, number of shifts, Have you participated in COVID-19 prevention activities recently?, If yes, what specific tasks did you perform?, Did you receive financial support for COVID-19 prevention?

Quantitative

To evaluate the work motivation of healthcare workers at the hospital, the variables related to work motivation are constructed based on the theoretical framework of Mbindyo (2009) and Ho Ngoc Thanh (Mbindyo et al., 2009; Thanh, 2016) The tools used in the study refer to the work of Ho Ngoc Thanh (Thanh, 2016).

Qualitative

The content for in-depth interviews and group discussions is referenced from previous studies by Ho Ngoc Thanh (Thanh, 2016), Ho Van Lap (Lap, 2019) and closely follows the influencing factors outlined in the established theoretical framework.

Guidelines for in-depth interviews with hospital leaders, heads of the Human Resources, Finance, and Accounting department, and guidelines for group discussions with administrative staff and clinical staff, using open-ended questions to explore work motivation and some factors affecting the work motivation of employees.

Psychometric properties of the instruments

The researchers conducted a pilot survey on 10 healthcare workers (not part of the official study subjects) before collecting data (to test the tools). The tools were reviewed and adjusted before the official data collection.

Data Analysis

Quantitative

The quantitative data, after being collected, was compiled, cleaned, and entered using excell and analyzed using SPSS 26 software (Aldrich, 2018). Descriptive statistical techniques such as frequency, percentage, and mean were used to describe the work motivation of healthcare workers and general information related to the study subjects.

Qualitative

The interviews were recorded, transcribed, and the results were selected and organized according to the research themes. These results were supplemented with quantitative findings and analyzed to identify factors affecting the work motivation of healthcare workers (Ranney et al., 2015).

Ethics

The study was approved by the Ethics Committee of the University of Public Health according to Decision No. 224/2022/YTCC-HD3 dated June 7, 2022, regarding the approval of ethical issues in biomedical research. The research subjects were explained by the researchers about the purpose and content of the study before conducting surveys, in-depth interviews, and group discussions, and were only carried out with the consent and cooperation of the research subjects.

RESULTS

***Table 1**. Clinical-Demographic Profile of among Healthcare worker (N= 182)*

General information		Frequence (n)	Percentage (%)
Sex	Male	69	37,9
	Female	113	62,1
Age	<40 years old	118	64,8
	> 40 years old	64	35,2

General information		Frequence (n)	Percentage (%)
Marital status	Single	59	32,4
	Married	119	65,4
	Divorce, widowed.	4	2,2
Educational level	Post graduate	67	32,8
	University	83	45,6
	Technical school, College	32	17,6
Work experience	1 - 5 years	89	48,9
	6 - 15 years	52	28,9
	> 15 years	41	22,5
Contract type	Permanent staff	88	48,4
	Contract	94	51,6
Primary income in the family	Yes	119	65,4
	No	64	34,6
Participate in COVID-19 prevention	Yes	160	87,9
	No	22	12,1
What tasks have been undertaken in COVID-19 prevention (n=160)	Treatment	111	68,5
	Vaccination	18	11,1
	Quarantine service	24	14,8
	Other	9	5,6
Received funding support for pandemic prevention	Yes	148	81,3
	No	34	18,7
Average number of shifts: 2.89 ± 3.3 (maximum of 9 shifts/month)			
Median salary: 6,000,000 Vietnamese dong/month; (Q1= 5.000.000; Q3 = 8.000.000)			

The study evaluated 182 healthcare workers currently working at Le Van Viet Hospital in Ho Chi Minh City. Among them, the number of female workers is nearly double that of male workers (62.1%). The majority of healthcare workers are under 40 years old (64.8%), and most are married (65.4%). In terms of educational level, the highest proportion holds a university degree (45.6%), followed by postgraduate degrees (32.8%). The most common duration of work at the hospital is 1-5 years (48.9%), with over

15 years accounting for 22.5%. The proportion of contract and permanent employees is almost equal, at 51.6% and 48.4%, respectively. Most healthcare workers are the main income earners in their families (65.4%). Nearly all healthcare workers at the hospital participated in COVID-19 prevention activities (87.9%), primarily in patient treatment and care (68.5%). However, only 148 out of 160 participants (81.3%) received financial support for COVID-19 prevention. The average number of shifts is 2.89 ± 3.3 shifts per month, with some administrative staff not having to work shifts, while the highest number of shifts for healthcare workers is 9 shifts per month. The median salary recorded in this study for healthcare workers is 6,000,000 VND per month (the lowest is 4 million and the highest is 34 million), with the first and third quartiles being 5,000,000 VND and 8,000,000 VND, respectively.

Qualitative results also show that healthcare workers reported receiving support from agencies and benefactors, such as meals, drinks, and protective gear. "During COVID-19 prevention, we received additional support in the form of meals, drinks, etc., sponsored by benefactors".

Table 2. *The relationship between work motivation and demographic factors of healthcare workers. (N= 182)*

Variables		Lack of motivation	Motivated	OR (95%CI)	p
Sex	Male	42 (60,9)	27 (39,1)	1,33 (0,7-2,4)	0,36
	Female	61 (54,0)	52 (46,0)		
Age	< 40 years old	60 (50,8)	58 (49,2)	1,98 (1,1-3,7)	0,03
	> 40 years old	43 (67,2)	21 (32,8)		
Marital status	Single, Divorced	31 (49,2)	32 (50,8)	0,63 (0,3-1,2)	0,14
	Married	72 (60,5)	47 (39,5)		
Highest education attainment	Secondary, college	20)62,5)	12 (37,5)	1,34 (0,6-2,9)	0,46
	University	83 (55,3)	67 (44,7)		
Work seniority	≤ 5 years	47 (52,8)	42 (47,2)	0,74 (0,4-1,3)	0,31
	> 5 years	56 (60,2)	37 (39,8)		
Type of contract	Permanent staff	55 (62,5)	33 (37,5)	1,59 (0,9-2,9)	0,12
	Contract	48 (51,1)	46 (48,9)		
Primary household income	Yes	74 (62,2)	45 (37,8)	1,9 (1,0 – 3,6)	0,04
	No	29 (46,0)	34 (54,0)		

Variables		Lack of motivation	Motivated	OR (95%CI)	p
Participate in COVID-19	Yes	88 (55,0)	72 (45,0)	0,57 (0,2-1,5)	0,24
	No	15 (68,2)	7 (31,8)		
Number of shifts	> 4 times/month	39 (52,0)	36 (48,0)	0,7 (0,4 – 1,3)	0,29
	< 4 times/month	64 (59,8)	43 (40,2)		
Salary (million/month)	< 10 million	90 (57,0)	68 (43,0)	1,12 (0,5-2,7)	0,79
	≥ 10 million	13 (54,2)	11 (45,8)		

p value ≤ 0.05 significant

The results in Table 2 show a correlation between age, type of contract, and being the main income earner in the family with work motivation (WM) among healthcare workers, with p<0.05. Other factors do not have sufficient evidence to prove a correlation with WM among healthcare workers (p>0.05). Specifically, healthcare workers under 40 years old tend to have lower motivation compared to those 40 years and older, with a ratio of 1.98 times (p<0.05).

Similarly, qualitative results also indicate that healthcare workers aged 40 and below have lower work motivation compared to those over 40. The older group tends to be more stable, adapts better to the work environment, and is more easily satisfied compared to younger healthcare workers. "The younger they are, the more job opportunities they have, they don't prefer stability, and they easily change jobs for reasons such as not feeling suitable, having higher salary offers, or family reasons." "Those who have worked for many years experience less work pressure compared to new employees. They know the job, are familiar with it, and have adapted, so they find the work easier and thus have more motivation. New employees have to learn and work more to gain experience, which can be discouraging."

Healthcare workers who are the main income earners in their families tend to have lower work motivation, with a ratio of 1.9 times compared to those who are not the main income earners (p<0.05).

Qualitative results indicate that family circumstances and economic conditions also affect the level of job satisfaction among healthcare workers. This directly impacts their mood, as they have to worry about calculating every expense in the family, which may result in not feeling happy or enthusiastic when working at the hospital. "Family circumstances, mainly economic, also have an impact. For example, those who live far away, besides supporting their families, also have to pay additional expenses such as rent and monthly living costs. Sometimes the

income is not sufficient, so when the economy is not comfortable, working is not enjoyable or enthusiastic."

DISCUSSION

The quantitative and qualitative study was conducted on 182 healthcare workers currently working at Lê Văn Việt Hospital. The results show that the proportion of healthcare workers with work motivation is quite low, only reaching 43.4%. This rate is lower than other studies on work motivation of healthcare workers worldwide and in Vietnam that we have reviewed, such as the study by Weldegebriel et al. (2016) in Northwest Ethiopia, which was 58.6%, Nguyen Viet Tuan (2018) at 79.9%, Nguyen Trong Hieu (2020) at 76.5%, and Nguyen Van Manh (2019) at 88.7% (Hieu, 2020; Manh, 2020; Tuan, 2019). The differences in research results may be due to variations in location, research time, and the nature and mechanisms of each hospital. The timing of the research is also a factor that we believe affects our low research results. After the COVID-19 pandemic, the consequences for the healthcare sector in general were significant, with each hospital being affected economically and in terms of human resources. According to the study on "Public Sector Salary Conditions for Frontline Healthcare Workers during COVID-19," notably, up to 53% of healthcare workers had daily exposure to COVID-19 and 35.6% were at risk of contracting COVID-19. The study found that more than one-third of healthcare workers reported that their salaries, bonuses, and allowances had been reduced. About 40% of them reported experiencing physical discomfort and health deterioration, and 70% experienced anxiety and depression, leading to a 25% decrease in work motivation among healthcare workers (Ministry of Health electronic information portal, 2021). Our study was conducted after the pandemic had nearly ended, treating COVID-19 as a common flu. According to the aforementioned study, the work motivation of healthcare workers decreased by about 25% compared to before the COVID-19 pandemic, making our research results entirely appropriate. The impact of COVID-19 is predicted to have a strong effect, reducing the work motivation of healthcare workers.

Personal Factors In this study, both qualitative and quantitative results indicate that age, type of contract, and being the main income earner in the family are correlated with work motivation among healthcare workers, with $p<0.05$. Specifically, healthcare workers under 40 years old tend to have lower motivation compared to those 40 years and older, with a ratio of 1.98 times. Some previous studies have also shown that age affects the work motivation of healthcare workers. (Co, 2015; Toode et al., 2015). Healthcare workers under 40 years old are considered a potential workforce for development because they have health and enthusiasm. According to qualitative results, this group often resigns or changes jobs for reasons such as family obligations or moving to private facilities with more attractive pay. Additionally, this group includes newly graduated employees who lack work experience and are often retrained at the

hospital under the guidance of experienced senior staff. Typically, the workload for these employees is very high, and they have to work in various positions within the department to grasp the job and adapt to it. Therefore, some employees may not withstand the pressure in certain departments like Emergency or during the COVID-19 pandemic, which directly negatively impacts their work motivation. Employees over 40 years old are usually familiar with the hospital, have adapted, and prefer job stability. Moreover, their salary and benefits are higher than those of the under-40 group due to their longer tenure. Thus, they understand and accept the current difficulties of the hospital, leading to higher work motivation.

Additionally, we found that healthcare workers who are the main income earners in their families tend to have lower work motivation, with a ratio of 1.9 times compared to those who are not the main income earners ($p<0.05$). This finding is consistent with the results of Sanjeewa's (2018) study conducted in Sri Lanka. (Gg, 2018). Nguyen Hoang Son also indicated that income affects work motivation (Son, 2014). Nguyen Viet Tuan (2018) shows that being the main income earner in the family and average monthly income positively affect work motivation (Tuan, 2018). The current average salary of healthcare workers at the hospital is 6,818,963±4,373,204 VND per month, with the lowest being 4 million VND. With this cost of living in Ho Chi Minh City, it is very difficult to manage expenses for children, family, health, etc. Currently, the main reason for healthcare workers, especially married female workers with young children, to leave their jobs for other hospitals is the difficulty in managing night shifts, which affects their ability to take care of their children. Additionally, the current salary does not meet the living expenses of healthcare workers. For many young healthcare workers, especially doctors, working in a good environment with many learning opportunities from colleagues, patients, and specialized training is a decisive factor in their long-term commitment to the hospital. Being paid a higher salary helps them feel more satisfied with their work, a finding supported by other studies conducted in different locations (Gg, 2018).

CONCLUSION AND RECOMMENDATIONS

Health workers face significant motivational challenges, particularly among younger and breadwinner groups. Positive influences include effective management and supportive leadership, while negative factors such as inadequate resources and low remuneration hinder motivation.

Recommendation: Ensure working conditions and pay attention to creating conditions for health workers under the age of 40, who are the main source of income for the family to increase their income.

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