The effect of occupational stress and organizational commitment on diagnostic imaging radiographers in rendering quality service

by

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# Preface

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Abstract

The aim:

The main aim of this study is to determine the effect of occupational stress and organizational commitment on diagnostic imaging radiographers in rendering quality service.

Background:

In the past two years radiography staff turnover at the public and private health organizations has increased by 45% and 50%. Increased occupational stress and burnout are some of the main reasons for staff leaving the organization. Limited studies were found on occupational stress amongst diagnostic imaging radiographers and no studies could be found on organizational commitment amongst diagnostic imaging radiographers at the time of conducting the study. The link between organization health services and patient outcomes is rarely tested empirically.

Materials and method:

It was a descriptive correlational study. The sample comprised 123 radiographers who completed a self-administered questionnaire.

Results:

There was a 97% response rate. Organization commitment was moderate towards a tendency of low. Sources of occupational stress, namely workload and role conflict were high, whilst social support and role ambiguity were low. Radiographers relied on problem-solving mechanisms to cope with stress. Therefore the level of occupational stress experienced was generally moderate, but with a slight tendency towards high.
Discussion:

There was a relationship between level and sources of occupational stress. No relationship was found between a low level of organizational commitment and a high level of occupational stress. A relationship was found between sources, levels of occupational stress and organizational commitment. Thus, the level of service delivery is affected by organizational commitment and occupational stress experienced by radiographers.

Conclusion and recommendations:

The overall context within which an organization functions has an effect on radiographers’ quality of working life and this directly impacts on the behaviour of the radiographer during a service encounter. Therefore, from an organizational perspective it is important to create a positive working environment for radiographers and to improve their quality of working life. The overall function of the organization would benefit were management to shift from an authoritative to a participative style. Workload and role conflict could be reduced by having protocols in place to minimize the variation in standard of the quality of work done.
Abstrak

Die doel:

Die hoofdoel van hierdie navorsing is om vas te stel wat die effek van beroepstres en organisatoriese verbintenis op diagnostiese algemene radiograwe is tydens die lewering van kwaliteitsdiens.

Achtergrond:

Gedurende die afgelope twee jaar het die personeelomset onder radiograwe in openbare en privaat gesondheidsinstansies met tussen 45 en 50% toegeneem. ‘n Toename in beroepstres en uitbranding tel onder die belangrikste redes waarom personeel organisasies verlaat. ‘n Beperkte aantal studies is gevind oor beroepstres onder diagnostiese algemene radiograwe. Geen studies oor organisatoriese verbintenis onder diagnostiese algemene radiograwe is tydens die verloop van hierdie navorsing gevind nie. Die skakel tussen organisatoriese gesondheidsdienste en pasiëntuitkomste is selde empiries getoets.

Materiaal en metode:

Hierdie was ’n beskrywende korrelasie studie. Die steekproef het 123 radiografiste wat ‘n selfgeadministreerde vraelys voltooi het behels.

Resultate:

‘n Respons van 97% is behaal. Organisatoriese verbintenis was gemiddeld met ‘n neiging tot laag. Die oorsake van beroepstres, naamlik werksdrukte en rol konflik was hoog, terwyl sosiale ondersteuning en rol dubbelsinnigheid laag was. Radiograwe het hulle op probleemoplossing meganismes verlaat tydens die hantering van stres. Gevolglik was die vlakke van beroepstres wat ondervind is oor die algemeen gemiddeld, maar met ‘n geringe neiging tot hoog.
Bespreking:

Daar is ’n verhouding tussen die vlak en oorsprong van beroepstres. Geen verhouding is gevind tussen ’n lae vlak van organisatoriese verbintenis en ’n hoë vlak van beroepstres nie. Daar is egter wel ’n verhouding gevind tussen oorsprong, vlakke van beroepstres en organisatoriese verbintenis. Gevolglik is die vlak van dienslewering geraak deur die organisatoriese verbintenis en beroepstres wat deur radiografiste ondervind is.

Gevolgtrekkings en aanbevelings:

Die oorkoepelende konteks waarin ’n organisasie funksioneer het ’n uitwerking op die gehalte diens wat deur radiografiste gelewer word. Vanuit ’n organisatoriese perspektief is dit gevolglik belangrik om ’n positiewe werkomgewing vir radiografie te skep en hulle werkslewe dusdoende te verbeter. Die organisasie se algehele funksie sou daarby baat om van ’n outoritêre tot ’n deelnemende styl te verander. Werkslas en rol konflik kan verlaag word deur die opstel van protokolle om variasies in die standard van werk wat gelewer word te verminder.
Abbreviations/acronyms

A - Agree
Ch - Chapter
CE - Continuous Education
CPD - Continuous Professional Development
CQI - Continuous Quality Improvement
DA - Disagree
Dev - Deviation
EAP - Employee Assistance Programme
Fig - Figure
HOD - Head Of Department
KR - Kuder Richardson
N - Never
n - Number of respondents
O - Often
OC - Organizational Commitment
OS - Occupational Stress
p - Page
ρ - Pearson correlation coefficient value
POS - Perceived Organizational Support
QA - Quality Assurance
QWL - Quality of Working Life
r - Pearson r correlation
R - Rarely
S - Sometimes
SA - Strongly agree
SDA - Strongly disagree
Sect. - Section
Std - Standard
V - Variable
WLQ - Work Life Questionnaire