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Impact of colleague solidarity on job satisfaction in nurses

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Abstract

The quality of nursing care is closely related to colleague solidarity status and the job satisfaction level of nurses. The researchers conducted this study as a descriptive and cross-sectional study to determine the impact of colleague solidarity on job satisfaction in nurses. The researchers conducted the study with the participation of 318 nurses working in a university hospital and volunteering to take part in the study. In the study, the researchers collected data using a 21-question survey. The researchers used percentage calculation, ANOVA test, Kruskal-Wallis's test, Mann-Whitney U test, and t-test for data analysis. In the study, the researchers determined that the nurses had a high level of colleague solidarity and their overall job satisfaction was neutral. In line with the findings, the researchers recommended that in-service training programs that might increase the job satisfaction level of nurses be organized.

Keywords: Nursing, Job satisfaction, colleague solidarity.

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1. Introduction

Nursing and care are two concepts that are closely related [1,2]. In the literature, nursing care is defined as everything done for an individual to develop or maintain his/her abilities, survive, and meet his/her needs at a minimum level [3, 4]. In other words, care is a process that is not only peculiar to nursing. It is a concept that is distinctive for nurses and is usually carried out by them. The main goal in nursing care is to know a sick individual via communication-based on mutual trust, determine his/her needs and enable him/her to meet his/her needs independently. It is of prime importance to maintain the care process in a qualified and effective way both for patients and nurses. The ability of nurses to offer quality care is closely related to having adequate knowledge and skills, integrating the sensual and ethical aspects of care with professional knowledge and skills, constantly developing the self professionally, and giving care in line with professional ethical principles and values [5, 8]. In addition, quality nursing care depends on professional experience, professional attitude, and professional sense of self in nurses, as well as colleague solidarity and a positive workplace environment [7-10].

It is possible to define colleague solidarity as mutual support of professional knowledge and skills between individuals doing the same job, as well as psychological, social, and emotional support between them [3]. Examples of colleague solidarity are guiding in a workplace environment with a kind and helpful approach, helping beginners with orientation, supporting colleagues who have a higher workload, taking on the task of colleagues who are unable to come to work due to health issues, and guiding them in solving and/or coping with professional issues [11]. Colleague solidarity contributes to the development of knowledge and skills in team members, an increase in collaboration, the development of a sense of commitment and belonging for the profession and organization in a positive direction, and an increase in the quality and efficiency of the service provided [12,13]. Additionally, the solidarity of individuals working in an organization increases the satisfaction of employees and those who receive service and it particularly affects job satisfaction in a positive direction [14].

Job satisfaction is also the level of meeting the physical, spiritual, and social needs of employees, as well as their needs related to work and work environment [15]. Job satisfaction is a positive factor enabling the individual to direct toward work and a significant factor in increasing service quality [16,17]. The literature suggests that the job satisfaction of nurses is affected by several individual and organizational factors such as age, gender, marital status, years of employment, uncertainties about professional roles and responsibilities, and relationships with colleagues [18-21].

For nurses to offer a quality healthcare service, they need to have a high level of colleague solidarity and job satisfaction. As long as nurses have solidarity with their colleagues and have a high level of job satisfaction, the quality of nursing care, and patient and employee satisfaction will increase.

1.1. Purpose of the Study

The researchers planned the present study to determine the impact of colleague solidarity on job satisfaction in nurses. The study aimed to the following questions:

- What are the sociodemographic and clinical characteristics of nurses?
- How is the colleague solidarity level of nurses?
- How is the job satisfaction level of nurses?
- Is there a correlation between colleague solidarity and the job satisfaction of nurses?

2. Methods

2.1. Participants

The researchers planned the current study in a descriptive correlational design and conducted it with nurses working in a university hospital in the Central Black Sea Region, which is in the North of Turkey. The study used the improbable sampling method. In the study, the researchers calculated the sample number to represent the target population to be 260 nurses among a total of 800 nurses

working in the hospital where the study was carried out, with a 95% confidence interval and 5% error. Considering data loss, the researchers completed the data collection process when they reached 318 nurses. The study included nurses who were 18 years and above, were female or male, and agreed to take part.

2.2. Data Collection Tools

In the study, the researchers collected the data via a survey form including 21 questions about the sociodemographic and professional characteristics of the nurses by using the Colleague Solidarity in Nurses Scale and the Minnesota Job Satisfaction Questionnaire. The researchers tested the survey form by conducting a pilot study in a group of ten people. The sample did not include the nurses who took part in the pilot study. The researchers informed the nurses within the scope of the study that they were completely free to take or not to take part in the study and the data to be collected from the study was to be used only within the scope of the study. The researchers received verbal informed consent from the nurses.

2.2.1. The Colleague Solidarity in Nurses Scale

Developed by Çetinkaya Uslusoy and Ecevit Alpar [22], the Colleague Solidarity in Nurses Scale (CSNS) was a five-point Likert scale measuring the colleague solidarity level of nurses. The scale had three subscales "emotional solidarity", "academic solidarity" and "negative thoughts about solidarity" and a total of 23 items. The lowest and highest scores obtainable from the scale were 23 and 115, respectively. An increase in the score obtained from the scale indicated an increase in the level of nurses to have solidarity with their colleagues. A study conducted by Çetinkaya Uslusoy and Ecevit Alpar found Cronbach's Alpha reliability coefficient of the scale to be 0.72 [22]. The present study found Cronbach's Alpha reliability coefficient of the scale to be 0.74.

2.2.2. The Minnesota Job Satisfaction Questionnaire

Developed by Weiss et al., the Minnesota Job Satisfaction Questionnaire (MJSQ) was a five-point Likert scale measuring the job satisfaction of individuals [23]. Baycan (1985) conducted the Turkish validity and reliability study of the scale [24]. The MJSQ had three subscales overall satisfaction, internal satisfaction, and external satisfaction, and a total of 20 items. The lowest and highest scores obtainable from the scale were 20 and 100, respectively. A score below 25 points indicated a low level of job satisfaction. A score between 26 and 74 points indicated a normal level of job satisfaction. A score above 75 points indicated a high level of job satisfaction. A study conducted by Baycan found Cronbach's Alpha reliability coefficient of the scale to be 0.77 [24]. The present study found Cronbach's Alpha reliability coefficient of the scale to be 0.88.

2.3. Ethics and Data Collection

The researchers collected the data by conducting face-to-face interviews with the nurses. The researchers informed the participant nurses about the study and then applied the survey form and scales to them. The researchers informed the nurses that they were completely free to take or not to take part in the study, their names would not be written on the survey form and the data to be collected from the study was to be used only within the scope of the study. It took nearly 15 minutes to collect the data.

2.4. Data Analysis

The researchers conducted the statistical analysis of the data related to the participant nurses using the SPSS 21.0 package program in the computer environment. They examined the normality test of the quantitative data via the Kolmogorov-Smirnov test. The researchers used the t-test and ANOVA in the analysis of the normally distributed data. They used the Kruskal Wallis test and Mann-Whitney U test in the non-normal distribution data. The researchers presented the results as frequency,

percentage, median, minimum, and maximum. They examined the correlation between the scales and subscales via Spearman's correlation analysis. They set the significance level at p<0.05.

3. Results

Table I demonstrated the distribution of sociodemographic and professional characteristics of the nurses who took part in the study. Of the nurses, 71.4% were female, 28.6% were male, 61.6% were married, 49.7% had undergraduate education and 91.5% had a nuclear family structure. Of the nurses, 95% worked as a service nurse, 52.8% had been working for one year to ten years, 82.1% had chosen the profession willingly, 70.4% liked the profession and 54.4% were satisfied with the service they worked in (Table I).

THE DISTRIBUTION OF SOCIODEMC	TABLE I IGRAPIİC AND PROFESIONAL CHAF	RACTERISICS OF	THE NURSES
Characteristics		n	%
Age	18-25 years	66	20.8
	26-34 years	103	32.4
	35-42 years	93	29.2
	43years and above	56	17.6
Gender	Female	227	71.4
	Male	91	28.6
Marital status	Married	196	61.6
	Single	122	38.4
Educational status	Vocational school of health	49	15.4
	Associate degree	106	33.3
	Undergraduate education	158	49.7
	Master's degree	4	1.3
	Doctorate	1	.3
Family type	Extended family	27	8.5
	Nuclear family	291	91.5
Number of children	1	61	31.0
	2	94	47.7
	3	36	18.3
	4	6	3.0
Nonthly income status	1400-3000TL	72	22.6
	3100-4000 TL	189	59.4
	4100 and above	57	17.9
Duty in the service	Service nurse	302	95.0
	Chief service nurse	16	5.0
fears of employment in the profession	1-10 years	168	52.8
	11-24 years	114	35.8
	25-35 years	36	11.3
Years of employment in the hospital	1-9 years	214	67.3
	10-19 years	82	25.8
	20-35 years	22	6.9
Years of employment in the service	1-9 years	248	78.0
	10-19 years	63	19.8
	20-35 years	7	2.2
Fotal number of nurses in the service	1-10 nurses	183	57.5
	11-20 nurses	108	34.0
	21-40 nurses	27	8.5
Working status in the hospital	Staffed	289	90.9
G	Contracted	29	9.1
Manner of work	Always day shift	81	25.5

	Shift	230	72.3
	Other	7	2.2
State of choosing the profession willingly	Yes	261	82.1
	No	57	17.9
State of liking the profession	Likes	224	70.4
	Does not like	24	7.5
	Undecided	70	22.0
State of being satisfied with the service	Satisfied	173	54.4
	Partly satisfied	134	42.1
	Not satisfied	11	3.5
State of choosing the department	Yes	190	59.7
willingly	No	128	40.3
Weekly working hours	20-40 hours	87	27.4
	41-72 hours	231	72.6
Number of patients given care	2-100 patients	252	81.8
	101-300 patients	28	9.1
	301 patients and above	28	9.1

Table II demonstrated the mean total Colleague Solidarity in Nurses Scale and subscale scores of the nurses. The mean total Colleague Solidarity in Nurses Scale score of the nurses was 98(47-115). The mean Emotional Solidarity, Academic Solidarity, and Negative Thoughts about Solidarity subscale scores of the nurses were 41(12-45), 38(12-45), and 19(7-25), respectively (Table II).

TABLE II					
THE MEAN COLLEAGUE SOLIDARITY IN NURSES	S SCALE AND SUBSCALE SCORES				
Mean (Min-Max)					
The Colleague Solidarity in Nurses Scale	98(47-115)				
Emotional Solidarity subscale	41(12-45)				
Academic Solidarity subscale	38(12-45)				
Negative Thoughts about Solidarity subscale	19(7-25)				

Table III demonstrated the comparison of sociodemographic and professional characteristics and the mean total Colleague Solidarity in Nurses Scale and Subscale Scores of the nurses in the study. The mean total Colleague Solidarity in Nurses Scale scores varied according to the total number of nurses in the service (p<0.001, χ 2=18.096) and satisfaction with the service (p<0.001, χ 2=20.091) (Table III).

		TABLE III						
COLLI	COLLEAGUE SOLIDARITY IN NURSES SCALE (CSNS) AND SUBSCALE SCORES OF THE NURSES							
Characteristic		The mean total CSNS (Min-Max)	The Mean Emotional Solidarity (Min-Max)	The Mean Academic Solidarity (Min-Max)	The Mean Negative Thoughts about Solidarity (Min-Max)			
Age	18-25 years	98.5 (47 - 113)	41 (12 - 45)	37 (12 - 45)	21 (13 - 25)a			
1.80	26-34 years	98 (71 - 115)	41 (31 - 45)	38 (26 - 45)	19 (8 - 25)ac			
	35-42 years	97 (71 - 115)	41 (25 - 45)	38 (27 - 45)	19 (8 - 25)bc			
	43 years and above	96 (76 - 113)	42 (33 - 45)	39 (28 - 45)	17 (7 - 25)b			
	p-value	p=0.589	p=0.533	p=0.794	p<0.001			
	test value	χ2= 1.922	χ2=2.197	χ2=1.028	χ2=22.662			
Gender	Female	98 (47 - 115)	41 (12 - 45)	38 (14 - 45)	19 (7 - 25)			
	Male	97 (49 - 115)	41 (13 - 45)	37 (12 - 45)	19 (9 - 25)			
	p-value	p=0.502	p=0.862	p=0.227	p=0.905			

Marital status	test value Married	U=9459.50 98 (71 - 115)	U=9931.50 42 (31 - 45)	U=9328.0 39 (26 - 45)	U=10240.50 19 (7 - 25)
	Single	97 (47 - 113)	40 (12 - 45)	37 (12 - 45)	20 (11 - 25)
	p-value	p=0.298	p=0.001	p=0.035	p=0.011
	test value	U=10861.50	U=9110.0	U=10221.0	U=9944.0
Educational status	Vocational school of health	99 (47 - 113)	42 (12 - 45)	38 (12 - 45)	20 (11 - 25)
	Associate degree	97 (71 - 115)	41 (31 - 45)	37 (28 - 45)	19 (8 - 25)
	Undergraduate education	98 (71 - 115)	41 (25 - 45)	39 (26 - 45)	19 (7 - 25)
	Master's degree	96.5 (81 - 106)	40 (33 - 42)	40.5 (35 - 42)	16.5 (11 - 23
	Doctorate	99 (99 - 99)	41 (41 - 41)	43 (43 - 43)	15 (15 - 15)
	p-value	p=0.860	p=0.794	p=0.260	p=0.164
	test value	χ2= 1.310	χ2=1.682	χ2=5.282	χ2=6.517
Duty in the	Service nurse	98 (47 - 115)	41 (12 - 45)	38 (12 - 45)	19 (8 - 25)
service	Chief service nurse	98.5 (80 - 111)	42.5 (31 - 45)	40.5 (30 - 44)	18 (7 - 24)
	p-value	p=0.791	p=0.121	p=0.304	p=0.269
	test value	U=2290.50	U=1845.0	U=2042.0	U=2021.50
Years of	1-10 years	98 (47 - 115)	41 (12 - 45)	37.5 (12 - 45)	20 (8 - 25)a
employment in	11-24 years	97 (71 - 115)	41 (25 - 45)	38 (27 - 45)	19 (8 - 25)b
he profession	25-35 years	95 (81 - 113)	42 (33 - 45)	39 (32 - 45)	17 (7 - 25)b
	p-value	p=0.730	p=0.187	p=0.313	p<0.001
	test value	χ2=0.630	χ2=3.355	χ2=2.325	χ2=16.603
ears of	1-9 years	98 (47 - 115)	41 (12 - 45)	38 (12 - 45)	19 (8 - 25)
employment in	10-19 years	98 (76 - 113)	41 (33 - 45)	38 (28 - 45)	19 (11 - 25)
he hospital	20-35 years	95 (84 - 113)	42 (34 - 45)	39 (32 - 45)	15.5 (7 - 25
	p-value	p=0.880	p=0.143	p=0.494	p=0.059
	test value	χ2=0.255	χ2=3.386	χ2=1.409	χ2=7.895
ears of	1-9 years	98 (47 - 115)	41 (12 - 45)	38 (12 - 45)	19 (8 - 25)a
employment in	10-19 years	98 (78 - 113)	42 (33 - 45)	37 (28 - 45)	19 (11 - 25)
the service	20-35 years	94 (84 - 99)	43 (36 - 45)	37 (32 - 45)	13 (7 - 19)b
	p-value	p=0.290	p=0.174	p=0.697	p=0.009
	test value	χ2=2.474	χ2=3.497	χ2=0.721	χ2=9.332
Total number of	1-10 nurses	99 (47 - 113)a	41 (12 - 45)a	39 (14 - 45)a	20 (7 - 25)a
nurses in the	11-20 nurses	95 (49 - 115)b	40 (13 - 45)b	36 (12 - 45)b	18 (8 - 25)b
service	21-40 nurses	98 (85 - 115)ab	42 (34 - 45)ab	37 (33 - 45)ab	19 (13 - 25)ba
	p-value	p<0.001	p=0.027	p<0.001	p=0.020
	test value	χ2=18.096	χ2=7.201	χ2=18.617	χ2=7.794
Norking status in	Staffed	98 (47 - 115)	41 (12 - 45)	38 (12 - 45)	19 (7 - 25)
the hospital	Contracted	97 (73 - 111)	40 (31 - 45)	35 (26 - 45)	21 (13 - 25)
	p-value	p=.769	p=0.226	p=0.040	p=0.022
	test value	U=3396.0	U=3584.0	U=3212.50	U=3112.50
Manner of work	Always day shift	99 (49 - 115)	41 (13 - 45)	39 (12 - 45)	20 (7 - 25)
	Shift	97 (47 - 115)	41 (12 - 45)	37 (14 - 45)	19 (7 - 25)
	Other	105 (81 - 113)	43 (33 - 45)	40 (35 - 45)	23 (9 - 25)
	p-value	p=0.896	p=0.304	p=0.080	p=0.391
	test value	χ2=4.903	χ2=2.379	χ2=5.059	χ2=1.879
State of choosing	Yes	98 (71 - 115)	41 (25 - 45)	38 (26 - 45)	19 (7 - 25)
the profession	No	95 (47 - 113)	40 (12 - 45)	36 (12 - 44)	20 (9 - 25)
willingly	p-value	p=0.452	p=0.157	p=0.113	p=0.045
	test value	U=6858.50	U=6476.0	U=6418.0	U=6180.0
State of liking the	Likes	98 (71 - 115)	41 (25 - 45)a	38 (26 - 45)	19 (7 - 25)
profession	Does not like	97 (47 - 112)	41 (12 - 45)ab	39 (12 - 45)	19 (13 - 25)
	Undecided	95 (73 - 113)	39 (31 - 45)b	36 (27 - 45)	19 (8 - 25)

	p-value	p=0.066	p=0.008	p=0.086	p=0.812
	test value	χ2=5.422	χ2=9.686	χ2=4.905	χ2=0.418
State of being	Satisfied	99 (78 - 115)a	42 (31 - 45)a	39 (27 - 45)a	20 (7 - 25)a
satisfied with the	Partly satisfied	95 (47 - 113)b	39 (12 - 45)b	37 (14 - 45)b	18 (8 - 25)b
service	Not satisfied	101 (49 - 115)ba	41 (13 - 45)ab	40 (12 - 45)ab	21 (8 - 25)ab
	p-value	p<0.001	p<0.001	p=0.013	p=0.018
	test value	χ2=20.091	χ2=27.372	χ2=8.689	χ2=7.991
State of choosing	Yes	98 (71 - 115)	42 (25 - 45)	38 (27 - 45)	19 (7 - 25)
the department	No	97 (47 - 115)	40 (12 - 45)	37.5 (12 - 45)	19 (7 - 25)
willingly	p-value	p=0.287	p=0.032	p=0.384	p=0.759
	test value	U=10975.50	U=10184.0	U=11401.0	U=119.14
Weekly working	20-40 hours	98 (71 - 115)	41 (31 - 45)	40 (26 - 45)	19 (7 - 25)
hours	41-72 hours	98 (47 - 115)	41 (12 - 45)	37 (12 - 45)	19 (7 - 25)
	p-value	p=0.523	p=0.393	p=0.015	p=0.759
	test value	U=9415.50	U=9303.50	U=8230.50	U=119.14
Number of	2-100 patients	98 (47 - 115)	41 (12 - 45)	39 (12 - 45)	19 (7 - 25)
patients given	101-300 patients	96 (77 - 115)	41.5 (31 - 45)	36 (30 - 45)	19 (8 - 25)
care	301 patients and above	98 (81 - 112)	42 (35 - 45)	36 (29 - 44)	19 (13 - 25)
	p-value	p=0.522	p=0.123	p=0.387	p=0.633
	test value	χ2=59.735	χ2=4.183	χ2=1.899	χ2=0.913

Table IV demonstrated the mean total Minnesota Job Satisfaction Questionnaire and subscale scores of the nurses in the study. The mean total Minnesota Job Satisfaction Questionnaire score of the nurses was 3(1-5) (Table IV).

TABLE IV				
THE MEAN MINNESOTA JOB SATISFACTION QUESTIONNAIRE AND SUBSCALE SCORES				
Mean (Min-Max)				
The Minnesota Job Satisfaction Questionnaire	2/1 5			
Overall Satisfaction subscale	3(1-5)			
Internal Satisfaction subscale 3.7(1-5)				
External Satisfaction subscale	2.75(1-5)			

Table V demonstrated sociodemographic and professional characteristics and the mean total Minnesota Job Satisfaction Questionnaire and subscale scores of the nurses in the study. The mean Minnesota Job Satisfaction Questionnaire score varied according to the nurses' marital status (p=0.015, U=10023.50), duty in the service (p=0.008, U=1468.0), years of employment in the hospital (p<0.001, F=8.403), years of employment in the service (p<0.001, χ 2=19.147), the total number of nurses in the service (p=0.029, F=3.579), working status (p=0.008, t=2.663), state of choosing the profession willingly (p<0.001, t=4.238), state of liking the profession (p<0.001, χ 2=24.641), state of being satisfied with the service (p<0.001, χ 2=31.335) and state of choosing the service willingly (p<0.001, t=3.857).

MINNES	SOTA JOB SATISFACTION	TABLE V QUESTIONNAIRE AND SU	JBSCALE SCORES OF THE	NURSES
Characteristics		The Mean Minnesota Job Satisfaction Questionnaire (Min-Max) Mean ±SD	The Mean Internal Satisfaction (Min- Max) Mean ±SD	The Mean External Satisfaction (Min-Max) Mean ±SD
Age	18-25 years 26-34 years	3 (1.4 – 4.8) 2.9 (1.4 – 4.8)	3.1 (1.3 – 4.6) 3.1 (1.3 – 4.8)	2.7 (1.3 – 4.6) 2.8 (1.3 – 4.8)
	35-42 years	3.1 (1.7 – 4.2)	3.3 (1.8 – 4.4)	2.9 (1.4 – 4.3)

	43 years and above p-value	3.2 (1.8 – 4.6) p=0.50	3.3 (1.8 – 4.4) p=0.058	2.9 (1.6 – 4.8) p=0.060
	test value	χ2= 9.864	χ2=9.076	χ2=7.413
Gender	Female	3 ± 0.6	3.2 (1.3 – 4.6)	2.8 ± 0.7
	Male	3 ± 0.6	3.2 (1.3 – 4.8)	2.8 ± 0.7
	p-value	p=0.757	p=0.632	p=0.999
	test value	t=-0.310	U=9974.50	t=0.002
Marital status	Married	3 (1.4 – 4.8)	3.2 (1.3 – 4.8)	2.9 (1.4 – 4.8)
	Single	2.9 (1.3 – 4.6)	3.1 (1.3 – 4.6)	2.7 (1.3 – 4.8)
	p-value	p=0.015	p=0.018	p=0.047
	test value	U=10023.50	U=10065.50	U=10375.50
Educational status	Vocational school of health	3 ± 0.7	3.2 (1.3 – 4.6)	2.6 (1.3 – 4.8)
	Associate degree	3.1 ± 0.5	3.3 (2.2 – 4.4)	2.9 (1.6 – 4.8)
	Undergraduate education	3 ± 0.6	3.1 (1.3 – 4.8)	2.8 (1.4 – 4.6)
	Master's degree	3 ± 1	3.4 (1.9 – 4.4)	2.9 (1.3 – 3.6)
	Doctorate	3.1 ± 0	3 (3 - 3)	3.3 (3.3 – 3.3)
	p-value	p=0.163	p=0.111	p=0.292
	test value	F=1.642	χ2=7.511	χ2=4.953
Duty in the service	Service nurse	3 (1.3 – 4.8)	3.17(1-5)	2.8 (1.3 – 4.8)
	Chief service nurse	3.4 (2.6 – 4.4)	3.33(3-4)	3.6 (2.1 – 4.4)
	p-value	p=0.008	p=0.103	p=0.001
	test value	U=1468.0	U=1833.0	U=1257.50
Years of	1-10 years	0.6 ± 2.9a	3.1 ± 0.6a	2.8 (1.3 – 4.6)a
employment in the profession	11-24 years	0.5 ± 3.1ab	3.2 ± 0.5ab	2.9 (1.4 – 4.8)ab
	25-35 years	0.6 ± 3.2b	3.3 ± 0.6b	2.8 (1.8 – 4.8)b
	p-value	p=0.09	p=0.011	p=0.031
	test value	F=4.826	F=4.586	χ2=6.938
Years of	1-9 years	0.6 ± 2.9a	3.1 (1.3 – 4.8)a	2.8 (1.3 – 4.8)a
employment in the hospital	10-19 years	0.6 ± 3.1b	3.4 (1.8 – 4.4)b	2.8 (1.4 – 4.3)ab
	20-35 years	0.7 ± 3.4b	3.5 (2.1 – 4.4)b	3.3 (1.8 – 4.8)t
	p-value	p<0.001	p<0.001	p=0.004
	test value	F=8.403	χ2=15.999	χ2=10.865
Years of	1-9 years	3 (1.3 – 4.8)a	3.1 (1.3 – 4.8)a	2.8 (1.3 – 4.6)a
employment in the service	10-19 years	3.3 (1.7 – 4.6)b	3.4 (1.8 – 4.5)b	3.3 (1.4 – 4.8)b
Service	20-35 years	3.6 (3.2 – 4.5)b	3.7 (3.2 – 4.4)b	3.5 (2.8 – 4.5)b
	p-value	p<0.001	p<0.001	p=0.001
	test value	χ2=19.147	χ2=21.042	χ2=13.469
Total number of	1-10 nurses	0.6 ± 3a	3.1 (1.3 – 4.8)a	2.8 (1.3 – 4.8)
nurses in the service	11-20 nurses	0.6 ± 3.1b	3.3 (1.3 – 4.6)b	3 (1.4 – 4.8)
SELVICE	21-40 nurses	0.5 ± 2.9ab	3.1 (1.8 - 4)ab	2.8 (1.4 – 3.5)
	p-value	p=0.029	p=0.006	p=0.266
	test value	F=3.579	χ2=10.203	χ2=2.651
Working status in	Staffed	0.6 ± 3	3.2 (1.3 – 4.8)	2.9 (1.3 – 4.8)
the hospital	Contracted	0.5 ± 2.7	2.9 (2.1 - 4)	2.5 (1.3 – 3.8)
	p-value	p=0.008	p=0.007	p=0.007
	test value	t=2.663	U=2929.0	U=2928.0
Manner of work	Always day shift	3.1 (1.3 – 4.8)	3.2 (1.3 – 4.8)	2.8 (1.3 – 4.6)

	Shift	3 (1.4 – 4.6)	3.2 (1.4 – 4.6)	2.8 (1.3 – 4.8)
	Other	3 (2.8 – 3.8)	3.3 (2.8 – 3.9)	3 (2.3 – 3.6)
	p-value	p=0.469	p=0.519	p=0.658
	test value	χ2=1.516	χ2=1.311	χ2=0.837
State of choosing the profession	Yes	0.6 ± 3.1	3.2 (1.3 – 4.8)	2.9 (1.3 – 4.8)
willingly	No	0.5 ± 2.7	2.8 (1.3 - 4)	2.6 (1.4 – 3.6)
	p-value	p<0.001	p<0.001	p=0.006
	test value	t=4.238	U=4739.50	U=5707.50
State of liking the profession	Likes	3.2 (1.4 – 4.8)a	3.3 (1.3 – 4.8)a	2.9 (1.3 – 4.8)a
profession	Does not like	2.6 (1.3 – 4.1)b	2.7 (1.3 – 4.1)b	2.4 (1.4 – 4.1)k
	undecided	2.9 (1.4 – 3.9)b	3 (1.3 - 4)b	2.8 (1.3 – 4.1)ab
	p-value test value	p<0.001 χ2=24.641	p<0.001 χ2=31.094	p=0.003 χ2=11.864
State of being	Satisfied	3.2 (1.7 – 4.8)a	3.3 (1.8 – 4.8)a	3 (1.5 – 4.8)a
satisfied with the service	Partly satisfied Not satisfied p-value test value	2.9 (1.4 – 4.6)b 2.4 (1.3 – 2.9)c p<0.001 χ2=31.335	3.1 (1.3 – 4.6)b 2.6 (1.3 – 3.2)c p<0.001 x2=24.502	2.6 (1.3 – 4.8)k 1.9 (1.4 – 2.6)c p(0.001 x2=28.969
State of choosing	Yes	0.6 ± 3.1	3.3 (1.3 – 4.8)	2.9 (1.3 – 4.8)
the department willingly	No p-value test value	0.6 ± 2.9 p<0.001 t=3.857	3.1 (1.3 – 4.3) p=0.002 U=9689.50	2.6 (1.3 – 4.1) p<0.001 U=9241.50
Weekly working	20-40 hours	3 (1.4 – 4.4)	3.2 (1.3 – 4.4)	2.8 (1.3 – 4.4)
hours	41-72 hours	3 (1.3 – 4.8)	3.2 (1.3 – 4.8)	2.8 (1.3 – 4.8)
	p-value	p=0.876	p=0.734	p=0.655
	test value	U=9934.50	U=9800.50	U=9722.50
Number of patients given care	2-100 patients	3 (1.3 – 4.8)	3.2 (1.3 – 4.8)	2.8 (1.3 – 4.8)
given care	101-300 patients	3.3 (1.7 – 4.2)	3.4 (1.8 – 4.3)	3.1 (1.4 – 4.3)
	301 patients and above	3.3 (2 – 3.7)	3.4 (2.2 – 3.8)	2.9 (1.6 – 3.5)
	p-value	p=0.054	p=0.060	p=0.065
	test value	χ2=6.761	χ2=5.623	χ2=5.470

Table VI demonstrated the correlation between the Colleague Solidarity in Nurses Scale and the Minnesota Job Satisfaction Questionnaire. The current study found no statistically significant correlation between the mean total Colleague Solidarity in Nurses Scale score and the mean total Minnesota Job Satisfaction Questionnaire score (r=0.076, p>0.05) (Table VI).

TABLE VI
THE CORRELATION BETWEEN THE COLLEAGUE SOLIDARITY IN NURSES SCALE AND THE MINNESOTA JOB
SATISFACTION OUESTIONNAIRE

SATISFACTION QUESTIONNAIRE							
Scales	1	2	3	4	5	6	7
1. The Colleague Solidarity in Nurses	-	0.784**	0.801**	0.635**	0.076	0.119	0.027
Scale							
2. Emotional Solidarity subscale	-	-	0.645**	0.238**	0.074	0.097	0.044
Academic Solidarity subscale	-	-	-	0.201**	0.016	0.056	024
 Negative Thoughts about the 	-	-	-		0.078	0.096	0.059
Solidarity subscale							

5. The Minnesota Job Satisfaction Questionnaire	-	-	-	-	-	0.933**	0.909**
6. Internal Satisfaction subscale	-	-	-	-	-	-	0.710**
7. External Satisfaction subscale	-	-	-	-	-	-	-

Note. Spearmen's correlation coefficient. *p<0.05, **p < 0.001

4. Discussion

The researchers discussed the findings, which they obtained from the present study aiming to determine the impact of colleague solidarity on job satisfaction in nurses working in a university hospital in the Central Black Sea Region which is in the North of Turkey, in line with the relevant literature.

The study found the mean total Colleague Solidarity in Nurses Scale score of the nurses to be 98 (47-115) and the mean Emotional Solidarity, Academic Solidarity, and Negative Thoughts about Solidarity subscale scores of the nurses to be 41(12-45), 38(12-45) and 19(7-25), respectively. The high mean total Colleague Solidarity in Nurses Scale score indicated that the nurses had a high level of colleague solidarity. Examining the literature, a study conducted by Çetinkaya and Alpar [22] found the total Colleague Solidarity in Nurses Scale score to be 96.6. A study conducted by Çetinkaya Uslusoy et al. [14] found the total score to be 94.9. A study conducted by Karasu et al. [25] found the total score to be 94.6. Nurses who are in constant contact and collaboration with most healthcare professionals while giving care, spend the most time with patients and families and are the most important member of the medical team, to offer quality care, simplify their work and overcome occupational difficulties, it is crucial to receive support from their colleagues [26].

The current study found that the mean total Colleague Solidarity in Nurses Scale score varied according to the total number of nurses in the service and satisfaction with the service. The score was higher in the nurses who had one nurse to ten nurses in the service and those who were satisfied with the service. A study conducted by Çetinkaya Uslusoy et al. [9] examining empathic tendency level and colleague solidarity in nurses reported that colleague solidarity scores of the nurses varied according to the years of employment, working position, state of choosing the profession willingly, and satisfaction with the service. A study conducted by Çetinkaya and Alpar [22] seeking to determine colleague solidarity and job satisfaction in nurses, found that colleague solidarity scores of the nurses showed a statistically significant difference according to their age, education, and satisfaction with the working position. A study conducted by Danacı and Koç [3] titled "Impact of Job Satisfaction and Burnout Level on Individualized Care Perception in Nurses" found that nurses who had chosen their profession and service willingly had a higher level of job satisfaction. The most important factor affecting the job satisfaction of nurses is colleague support. Nurses who work in services/organizations with colleague solidarity have a higher level of satisfaction, have increased performance and care quality, have better problem-solving skills, have fewer intra-organizational conflicts, and develop a sense of belonging [25,27].

The current study found that the mean total Minnesota Job Satisfaction Questionnaire score of the nurses varied according to their marital status, duty in the service, years of employment in the hospital, years of employment in service, the total number of nurses in the service, working status, state of choosing the profession willingly, state of liking the profession, satisfaction with the service and state of choosing the service willingly. Job satisfaction was higher in the nurses who were married, were the chief nurse in the service, had been working for 20 to 35 years, were staffed, had chosen their profession willingly, liked their profession, and were satisfied with their service. A study conducted by Tambağ et al. [8] seeking to determine the impact of work environment on job satisfaction. A study conducted by Andrioti et al. [28] found that chief nurses had a higher level of job satisfaction. A study conducted by Aylaz et al. [29] found that nurses who were single and those who had chosen their profession willingly had a higher level of job satisfaction. It is expected for nurses

who like their profession and are satisfied with their service to have a higher level of job satisfaction. In addition, as the years of employment increase, the knowledge and skills of nurses increase, which is thought to affect the job satisfaction of nurses in a positive direction.

5. Conclusion

The current study found the mean total Colleague Solidarity in Nurses Scale score of the nurses to be 98 (47-115). The mean total Colleague Solidarity in Nurses Scale score varied according to specific sociodemographic and professional characteristics of the nurses (p<0.05). The scale score was higher in the nurses who had one nurse to ten nurses in the service and those who were satisfied with the service. The mean total Minnesota Job Satisfaction Questionnaire score was 3 (1-5).

The nurses who were married, were the chief nurse in the service, had been working for 20 to 35 years, nurses who were staffed, had chosen their profession willingly, liked their profession and those who were satisfied with their service had a higher level of job satisfaction. In line with the findings obtained from the study, the researchers recommended that,

- In-service training be planned to support the professional development of nurses and participation be encouraged,
- Scientific and social activities are organized to increase professional solidarity and job satisfaction,
- Interventions such as appreciation, reward, promotion, and positive feedback are made to increase the motivation of nurses.

Conflict of interest

We have no conflicts of interest to disclose.

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