The profile of Saudi male nursing workforce: A cross-sectional study

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A R T I C L E I N F O

A B S T R A C T

This study aims to determine the profile of the Saudi male nursing workforce that influences tenure in their job and their intentions in staying on the job or leaving their job. This research used the quantitative-comparative approach employing 361 nurses as participants from the three major government hospitals namely, King Faisal Specialist Hospital and Research Center, King Abdulaziz Medical City, and King Fahad Medical Center in Riyadh city, Kingdom of Saudi Arabia. Results showed that nurses in the workforce perceived the lack of promotion opportunities as the main reason for leaving the nursing profession (3.92±.952) and the reason for becoming a nurse wanted to help others cope with illness (4.68). There is a significant difference found in age to reasons (F=11.51; p<001) opinion of becoming a nurse (F=6.73; p<001), highest qualification on their reasons for leaving the nursing profession (F=11.8; p<.001) but not on the opinion of nurses (F=.690; p>.502). Moreover, the years of experience of the nurses were found significant to reasons (F=5.085; p<.002) and opinion (F=4.89; p<.002). Regarding the position held, there found significant differences in reasons for leaving (F=9.05; p<.001) and their opinion about becoming a nurse (F=11.81; p<.001). Concerning marital status there found significant differences in their reasons for leaving the nursing profession (t=5.779; p>.290) and their opinion (t=1.39; p>.573). Meanwhile, the number of dependents found no significant difference in their reasons (t=2.248; p>0.38) and opinion (t=.820; p>.366). Continuous skill development and career progression opportunities for male nurses contribute to job satisfaction and, as a result, it will be the key to gaining greater autonomy for Saudi Arabia's nurses.

1. Introduction

An emphasis in healthcare today is placed on patient safety and quality outcomes, but this is unattainable without the nursing workforce supporting these initiatives. During this time of professional and consumer scrutiny, the effects of a nursing shortage are more glaring. Nurse turnover becomes a challenge in the provision of affordable, and quality healthcare services. Nurse turnover is what aggravates the shortage of nurses felt worldwide. In addition to this, the deficit in trained and expert nurses also has a direct effect on positive patient outcomes (Bae et al., 2010; Magalhães et al., 2013; Takase, 2010).

A handful of studies have realized that the increasing turnover rates regardless of region or state in almost all countries is not only becoming an indicator of the future healthcare crisis in the form of unbalanced manpower vs need (Kovner et al., 2014; Lee et al., 2013; Liu et al., 2012). Despite the importance of nurse turnover as an indicator for healthcare systems, there is no clear operationalization or mutual understanding of the constructs of nurse turnover or turnover intention. A review of studies shows inconsistencies in the measurement of turnover in various studies (Kovner et al., 2014).

Across studies, numerous terms are used to indicate turnover intention, including the intention to quit, intention to leave, and anticipated turnover (Takase, 2010). In this study, the term turnover will refer to the intention to leave the job. Notably, Saudi Arabia is one of the countries with a healthcare system that is burdened by high rates of turnover and turnover intention. The Saudi healthcare system is challenged by the lack of local healthcare professionals. The majority of health personnel are

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expatriates and this leads to a high rate of turnover and disruption in the workforce. One of the major costs for healthcare providers is spending on the qualified medical staff. A large number of doctors, nurses, and paramedical staff in the Kingdom of Saudi Arabia tend to consider career shifts elsewhere, specifically in Western countries as better opportunities and training facilities are evident there. Moreover, the current Saudi regulations for recruitment and Saudization continue to increase the staff cost due to limited available resources.

In 1992, a Royal Decree was issued by the Saudi Arabian government to promote the Saudization policy of the nursing workforce (Alshammari, 2014). This policy arose out of the realization that continued heavy reliance on an expatriate workforce has associated risks and could precipitate a major crisis in the workforce if large numbers of expatriate nurses withdrew from the country. Saudization can be defined as a policy aimed to increase the number of Saudi Arabian nationals in the workforce to gradually replace expatriate nurses with national nurses (Al Hosis et al., 2012). In recent years, the number of Saudi nurses has been progressively increasing with the percentage of local Saudi (relative to expatriate nurses) growing from 9% in 1997 to 27% in 2005 and 37% in 2016 (Almalki et al., 2011). More recently in 2018, there were 70,319 Saudi nurses which comprised around 38% of the total nurses' population (Alsadaan et al., 2021). This means around 60–70% of nurses working in Saudi Arabia are expatriate or foreign (non-Saudi citizenship) and are predominantly Indian, Philippine, and Malaysian.

The nation has made an exceptional advance to extend the number of nearby nurses, but this advance isn't promptly obvious and isn't satisfactory for meeting the genuine needs of the nursing workforce. It has been forecast by 2025 the need for nurses in Saudi Arabia will have doubled. These measurements signify that by 2030 around 100,000 nursing positions will have to be filled. Looking at the broader picture in this manner, it can be concluded that as of date, Saudization has not accomplished its objective (Almutairi and Bahari, 2022).

The population of Saudi Arabia is expected to reach 37 million by 2025. With the rapid increase of the population of Saudi Arabia and the rise of non-communicable diseases, such as obesity and diabetes, along the way, the recruitment, retention, training, and performance of nurses have become widely recognized as an important issue in shaping health care delivery. Currently, Saudi Arabia is experiencing a huge shortage of nurses and is heavily dependent on expatriate nurses, which poses unique challenges. In an international context, there is also a shortage of nursing manpower (Alshammari, 2014). The literature will show that job satisfaction is one of the contributing factors to turnover, which in turn directly affects nursing shortages.

Job satisfaction is an effective factor in individual work life (Yildirim and Çam, 2012; Lien, 2017). People must be satisfied with their jobs to be productive, successful, and happy at work. There are various definitions of job satisfaction. In this study, job satisfaction will generally be defined as "people's feelings about their jobs and the various dimensions of their jobs" (Spector, 1997). Several studies have pointed to job satisfaction as the strongest factor that may lead to undesired results such as alienation indifference to the job, a decreasing sense of attachment to the employing institution, constant complaints about the job, falling productivity, absenteeism, and quitting the job (Dericioğulları et al., 2007; Rashedi et al., 2014).

Job dissatisfaction has also been found to cause nurses to feel disenchantment with their jobs, which results in the loss of skilled personnel (Özer et al., 2021). Additionally, job dissatisfaction is a factor that reduces individual performance and leads to overall employee loss. Factors like satisfaction in the job that directly impact the longevity of tenure of nurses in their workplace have to be investigated in order to determine measures that may abate these, and increase the efficiency retention in their workplaces. Given the heavy demands of today's nursing workspaces, it is important to create a calm, productive, and satisfied working environment for the nurse labor force to increase their sense of attachment to their institutions, reduce employee loss among nurses, increase the quality of nursing care and to improve patient care outcomes (Yildirim and Çam, 2012; Dağ et al., 2019).

To enable nurses to do their jobs more effectively, a more satisfying work-life becomes an indispensable necessity. There are only a limited number of studies that look into factors that influence the longevity of tenure of nurses, and the reasons why nurses chose the profession side by side (Yildirim and Çam, 2012). Because of the scarcity of studies that can be used as a basis for looking at how nurses decide to stay in the job or leave their current workplace, this study aims to further the existing literature by looking at these critical areas in relation to each other. The focus on Saudi Arabia was because the country has one of the highest nurse turnover rates, regarded by the World Health Organization in 2013 as one of the biggest challenges in the kingdom's healthcare system. Based on this shortcoming in the literature, this study is carried out to determine factors that influence the tenure of nurses in their job. This study further aims to come up with a comprehensive study investigating nurses' intentions regarding staying on the job or leaving their job.

2. Material and methods

2.1. Research design

This research used the descriptive-comparative approach. This research approach is characterized by the manipulation of an independent variable to

measure and explain its influence on a dependent variable. This method would allow this study to seek to compare demographic and employment data from the participants of this study.

2.2. Participants/setting

The participants of this study were 361 Saudi male nurses who are currently working in hospitals. These nurses were chosen with the following inclusion criteria (a) those who have been in the area for at least one year (b) can understand and write in English, and (c) participated voluntarily. This study was conducted in the northern region of Saudi Arabia. Specifically, participants were taken from the major government hospitals namely, King Faisal Specialist Hospital and Research Center, King Abdulaziz Medical City, and King Fahad Medical Center.

2.3. Data gathering procedure

Upon the approval of the hospital directors and with clearance from the Institutional Review Board (IRB), the researcher posted information in all the nurse stations of each participating hospital from August 2021 and ended in November 2021. Included in the information is the invitation to all nurses to part take in the study. The head nurses of each unit in the hospital served as the key persons to collect the answered questionnaire from the nurses who are eligible to participate based on the inclusion criteria.

2.4. Instrument

The researcher adapted the questionnaire from (Alboliteeh et al., 2017). It was created to assess Saudi nurses' intentions to leave the profession in the future. The questionnaire has two parts; the first is the demographic profiles of the participants and the second part is the perceived reasons for leaving the nursing profession with 13 items and the perceived reasons for becoming a nurse with 15 items. The participants were given a 5-point rating scale to pick from, with 1 indicating strongly disagree, 2 indicating disagree, 3 indicating unable to determine, 4 agree, and 5 indicating strongly agree.

3. Results and discussion

Table 1 presents the demographic profile of the participants. Table 1 shows that most nurses from the pool of respondents belong to the age range of 31-35 years (37%) followed by 36-40 years old (36.47%). From Table 1, it can also be gleaned that married 77.5% of the respondents are married, mostly having 1-2 dependents (58.5%). Table 2 presents the Perceived reasons for leaving the nursing profession.

Table 1: Demographic profiles (N=361)

Age in years	Frequency	Percentage
21-25	12	3.9
26-30	30	9.6
31-35	115	37.0
36-40	114	36.7
41-45	31	10.0
46-50	2	.6
51- and above	7	2.25
Marital status		
single	59	18.97
Married	241	77.5
Number of dependents		
1-2 dependents	182	58.5
more than 2	129	41.5
Highest nursing qualification		
Certificate	3	1.0
Diploma	107	34.4
Bachelor	156	50
Master	38	12.2
Doctorate	2	.6
Years of experience		
1-5 years of experience	34	10.9
6-10 years	56	18
11-15 years	146	46.9
16-20 years	75	24.1
Position held		
clinical	253	81.4
education	45	14.46
management	13	4.2

From the data that was summarized, it can also be seen that most of the participants/ respondents in this study were nurses who finished with a Bachelor's degree in Nursing, followed by diploma nurses (34.4%), and then by nurses who have accomplished their Master's degree. 46.9% or almost half of the respondents fall under the range of 11-15 years of experience in their job. Most of the respondents accounting for 81.4% held clinical designations.

Table 2: Perceived reasons for leaving the nursing profession

Factors	Mean	Standard deviation
The reason that I would leave is my gender.	3.50	1.324
The reason that I would leave is dealing with the opposite sex.	3.48	1.416
The reason that I would leave is I feel other nurses are not comfortable with me.	3.32	1.301
The reason that I would leave is I feel uncomfortable dealing with the opposite sex.	3.19	1.365
The reason that I would leave is I feel uncomfortable dealing with nurses from the opposite sex.	3.23	1.321
The reason that I would leave is I feel uncomfortable dealing with a patient from the opposite sex.	3.43	1.394
The reason that I would leave is I feel uncomfortable dealing with physicians from the opposite sex.	3.38	1.285
The reason that I would leave is I am moving away.	3.49	1.310
The reason that I would leave is I will become a full-time student.	3.50	1.268
The reason that I would leave is the lack of promotion opportunities.	3.92	.952
The reason that I would leave is I found a better job.	3.39	1.272
The reason that I would leave is I have to work long hours.	4.20	.794
The reason that I would leave is I am having difficulties communicating in English.	3.40	1.565

Nurses in the workforce perceived the lack of promotion opportunities as the main reason for leaving the nursing profession (3.92±.952). Promotion opportunities have been strongly linked to job satisfaction. Job satisfaction is a complex phenomenon that has been studied extensively by scientists and researchers (Bratt et al, 2000). It is also one of the integral factors that were considered to increase nurse retention in this light, employees did not simply see their job as a means to an end but had needs related to the nature of their work. Recent studies have suggested that the high rate of nursing turnover can be due to work overload, workplace changes, complex labor relations, and lack of career opportunities (Gurková et al., 2014).

This result was consistent with a previous study in which work support was one of the most important factors in reducing the intention of nurses to leave (Van der Heijden, 2010). Second, work support was positively associated with career growth. Work support had a significant impact on employees' career exploration, career goals, and career strategy, benefiting the overall nurses' career growth and self-fulfillment. Third, the retention rate was higher when nurses had a higher level of organizational career growth. This result corresponds to Bonenberger et al. (2014) who indicated that effective human resource management practices at the district level positively influenced health worker motivation and job satisfaction, thereby reducing the likelihood of turnover (Bonenberger et al., 2014). In a qualitative study on nurses who left their jobs, the most important reason for them leaving was dissatisfaction with prospects for personal career development and feeling worthless.

From the above, it can be said that motivation in the form of career advancements plays a crucial role in the retention of employees in one organization. Some nurses are motivated to excel and be creative and productive in their jobs while others put just enough effort to do what is expected of them. One recognized work in motivation theory is that of Maslow (1943). Like all others, nurses are motivated by physiologic needs including the need for food, safety, protection, and care. Part of this is knowing that there are chances for them to improve and get better at their craft, in the form of career opportunities and promotions on the job.

Hackmann and Lawler (1971) found out that the more satisfied the employees are with their jobs, the better they performed and the longer they stayed on the job. A variety of research was conducted to identify factors that affect nurses' job satisfaction. Results of these studies indicate that work environment and tangible rewards influence job satisfaction the most (Shuriquie et al., 2007) on the other hand satisfaction and Investment were key predictors in staying in the workplace whereas the availability of other alternatives triggers veering off and leaving. Hemsley-Brown and Foskett (1999). Another key concept, therefore, becomes motivation.

These and many other human needs may serve as the primary motivation for pursuing a more enriching and satisfying career path. A handful of studies will also show how employees put value in knowing that advancement in their career is a concern of the organization that they work for. Collectively, results from these researches show that employees will tend to choose to stay in a particular workplace longer if they see a chance for personal growth through career advancement in the organization (Hemsley-Brown and Foskett, 1999). A second content theory on motivation was developed by Alderfer (1989) who reduced Maslow's (1943) hierarchy of needs from 5 levels to 3 existence, relatedness, and growth. Existence needs are equivalent to physiologic and safety needs. At the lowest level is the need to stay alive and safe, now and in the foreseeable future. When one has satisfied existence needs, one feels safe and physically comfortable. This includes Maslow's (1943) physiological and safety needs. Relatedness needs to belongingness, social and love need where it stated that once one is safe and secure, one considers his social needs and becomes interested in relationships with other people and what they think. In the meta-analysis of 13 studies in Taiwan, ten factors related to the turnover experienced are listed: poor opportunity for promotion, stress at work due to a high workload, lack of continuous training, dissatisfaction with the salary, superior, rigid schedules, administrative policies, recognition, unstable schedule and dissatisfaction with fringe benefits (Rambur et al., 2003). To mitigate the effects of the nursing shortage in Saudi Arabia, an urgent local nursing workforce planning strategy is needed to recruit more national nurses and retain the foreign workforce beyond the present.

Table 3 presents the reasons why the respondents chose to become nurses. On the top of the list were nurses who wanted to help others cope with illness with a mean of 4.68. The least reason on the other hand was their childhood desire ranking as the smallest means with a value of 3.40.

Reasons for becoming a nurse are a subject of interest for researchers, who apply both quantitative and qualitative approaches when studying them. The desire to help or care for others is reported by researchers in many countries as the top reason why nurses choose to be in this caring profession. Dellafiore et al. (2019) further elaborated that although there may be other reasons for becoming a nurse such as the availability of training close to home, pure chance, the recommendation from family and friends, and not being able to get into any other study program, it is the presence of the desire to reach out and lend a helping hand, by caring for others in need that ranks top priority. In contrast to the above findings, studies by Mooney et al. (2008) and Eman et al. (2012) found that the main reason for the choice of nursing as a career was the presence of job security, and the opportunities for career advancement are diverse. The presence of opportunities for career advancement has also been

pointed out in this study as one of the points for consideration when it comes to staying on the job. As shown in Table 3, it has been earmarked as one of

the main reasons for nurses staying longer in their jobs.

Table 3: Perceived reasons for becoming a nurse

Factors	Mean	Standard deviation
I became a nurse because: Being altruistic "Ethar" is part of Islam teachings	4.62	.487
I became a nurse because: I wanted to work in a caring occupation	4.51	.555
I became a nurse because: I wanted to help others cope with illness	4.68	.531
I became a nurse because: It would give my life a sense of meaning	4.50	.501
I became a nurse because: I wanted to help people	4.53	.541
I became a nurse because: I felt that it would provide an opportunity for career advancement	4.49	.568
I became a nurse because: Nursing offered job security	4.23	.491
I became a nurse because: I was always interested in science	4.29	.808
I became a nurse because: Nursing offered job flexibility	3.86	1.114
I became a nurse because: I could earn a good salary	4.00	.799
I became a nurse because: I like working with people	4.14	.479
I became a nurse because: It was a childhood desire	3.40	1.163
I became a nurse because: It was a family expectation	3.72	1.064
I became a nurse because: Of advice from my family	4.25	.545
I became a nurse because: Of advice from a friend	3.45	1.132

Other authors found reasons to pursue nursing, such as personal aspirations as in the enjoyment or love of nursing, and career aspirations like the ability to enter tertiary education. According to a study by Usher et al. (2013), nursing students perceived nursing as providing care, and helping people, and viewed the profession as a humanitarian vocation. However, research outcomes in psychology show that the choice of nursing as a career or profession is related to subsequent job satisfaction and commitment.

Motivations to study nursing are complex and, at least for some, seem to be directly related to their perception of the profession, while for others, external factors are more outside. However, studies conducted by Price et al. (2013) showed that nurses who pursue their careers for reasons other than or in addition to helping others find work experience less stress than those who have not planned for their careers. This leads to less burnout, better personal health, and high professional engagement.

According to those observed outcomes via way of means of Brodie et al. (2004), the ones being served via way of means of people in maximum occupations do now no longer actually care approximately the employees' motivation for selecting that career. However, she is going directly to provide an explanation of why fitness care is different. We count on humans to enter those jobs in fitness care, along with that of the nursing career due to the fact they love the humans that they may be worrying for, and that is their number one motivator.

The researchers also found that nurses who are highly motivated by both the lifestyle the job provides and the ability to interact personally with patients are more satisfied with their employer and less inclined to leave their current job. These findings coincided with the findings from the earlier study (Shkoler and Kimura, 2020), which again pointed out that opportunities to better their status through career advancement are indeed a good motivator to increase tenure in the job.

In agreement with the findings from this study, recent Polish research established that the reasons young people chose nursing as a career are similar to those in other countries, including the desire to help people as being the top reason (Grinberg, 2019). Interest in medical sciences, availability of job opportunities after graduation, the desire to receive higher education, and family tradition, were also listed as a few of the reasons for pursuing a career in nursing. Across studies, there seem to be greater similar findings pointing to the desire to help others as the primary motivation or reason for nurses to choose this particular profession. Motivations for the choice of nursing education are mixed, but pro-community motivations, focused on the good of others, prevail. In addition to this, survey-based research of professionally active nurses in Poland shows that most of the nurses chose their careers mainly out of the wish to help others and to feel useful.

Although previous studies provide important insights into nursing career choice, qualitative analyzes will allow further investigation into the reasons for nursing career choice. Furthermore, an important aspect that justifies the need for an in-depth analysis of the topic is provided by the study of Franek et al. (2012) who studied the interest in the nursing profession among 100 Armenian high school students who showed only a limited interest in the profession; only one-fifth of the participants expressed an interest in this tertiary training and only 1/10 really want to enter the profession. Thus, the study of the subject according to the new generation of nursing has an important meaning in the creation of and new social reality. This current study did not attempt to measure the effectiveness of nurses with different motivations and approaches to care in their work. The authors suggest that these relationships be explored in a future study involving a larger sample of nurses.

Table 4 presents the differences between the demographic profile of nurses and their reasons for

either leaving or staying in the profession. From the results of this study, the following is a summary of

the relevant findings from this Table 4.

Table 4: Differences between the demographic profiles and the reasons and opinions in nursing

Age		Mean	Standard deviation	df	F	P-value
Reasons	21-25	4.41	.000			
	26-30	3.74	.529			
	31-35	4.01	.365	307	11.511	.001*
	36-40	4.26	.473			
	41-45	4.21	.164			
Opinion	21-25	4.17	.000			
	26-30	3.28	.911	307	6.738	.001*
	36-40	4.11	.375			
	41-45	4.36	.483			
Highest qualification						
Reasons	Diploma	4.07	.506	307	11.863	.001*
	Bachelor	4.22	.354			
	Master	3.84	.420			
Opinion	Diploma	3.73	.832			
	Bachelor	3.62	.860	307	.690	.502
	Master	3.57	.958			
Years of experience						
Reasons	1-5 years of experience	4.00	.369			
	6-10 years	3.84	.290	307	5.085	.002*
	11-15 years	4.14	.448			
	16-20 years	4.21	.459			
Opinion	1-5 years of experience	3.20	.666			
	6-10 years	3.54	1.094	307	4.899	.002*
	11-15 years	3.67	.874			
	16-20 years	3.86	.767			
Position held						
Reasons	clinical	4.12	.441		9.053	.001*
	education	3.67	.348	307		
	management	4.39	.173			
Opinion	clinical	4.25	3.66			
	education	4.12	2.76	307	11.814	.001*
	management	4.13	4.38			
Marital status						
Reasons	Single	4.48	.480	309	F(1.126); t(5.779)	.290
	Married	4.06	.407			
Opinion	Single	3.83	.872	309	F(.319); t (1.39)	.573
	Married	3.62	.859			
Dependents						
Reasons	1-2 dependents	4.17	.501	309	F(4.3380); t(2.248)	0.38
	more than 2	4.05	.352			
Opinion	1-2 dependents	3.69	.876	309	F (.818); t(.820)	.366
	more than 2	3.60	.846			

*sig at .05

Foremost it was seen that there is a significant difference found in age to reasons (F=11.51; p<001) showing an age range of 21-25 (4.41±.000) as the most significant result from the post hoc test. Further, age to the opinion of becoming a nurse is also significant (F=6.73; p<001) showing an age range of 41-45 (4.36±.483) as the most significant resulting from post hoc test. With regards to the highest qualification of nurses, a significant difference has been found in their reasons for leaving the nursing profession (F=11.8; p<.001) with the Bachelor qualification as the most significant (4.22±.354), resulting from the post hoc test. Conversely, there is no significant difference in the opinion of nurses (F=.690; p>.502). These findings could be because better career opportunities are readily available for nurses who graduated with their bachelor's degree as compared to those who have not.

In addition, Saudi Arabia's nurse shortage is largely the result of suboptimal nurse flows into the labor market, but also high levels of people leaving the labor market early. The literature suggests that

the suboptimal new generation of nurses is largely due to insufficient training to become nurses (Alluhidan et al., 2020). In addition, anecdotal proof shows a few trainees are misplaced after commencement, as their number one cause for education became to have a look at as opposed to paintings as a nurse. Once trained, many new nurses are not properly supported to go into the exertions market, or to stay in it (Al-Mahmoud et al., 2019).

A pressing hassle in dealing with the career is the approaching lack of degree nurses who have much less education than registered nurses because of adjustments to their registration. The newly brought Nursing Practice Act will re-categorize degree nurses as technicians, stopping them from supplying direct nursing care. The adjustments goal is to make certain that nurses have the ability to offer super care to patients. However, throughout all sectors, 75% of Saudi nurses are degree nurses who have finished a 2- or 3-12 month program (Alluhidan et al., 2020). If those nurses aren't retrained via bridging programs, the deficit of Saudi nurses will sincerely grow, requiring a discount inside the staff

or greater overseas hires. In relation to diploma and bachelor's degree attainment, the availability of various types of subspecialty nurses like those who specialize in areas like wound care, hematology, pain management, palliative care, and home healthcare exist in the Kingdom as stated in the study done by Aljohani (2020). And while it is true that Saudi nurses can obtain professional certification through a diploma or 2-year SCFHS certification courses offered at the training centers of many hospitals, these programs are not officially recognized by a university. Although the number of specialist nurses has increased in recent years, specialization is often used to justify salary increases and sometimes allow nurses to move up the career ladder. This is perhaps the most legitimate reason why as consistently seen from the results above, it can be attested that having a bachelor's degree enables nurses to move with more ease from specialization to specialization.

The years of experience of the nurses were found significant to reasons (F=5.085; p<.002) and opinion (F= 4.89; p<.002) showing 16-20 years (4.21±.459) and 16-20 years (3.86±.767) respectively as the most significant. Regarding the position held, there found significant differences in reasons for leaving (F=9.05; p<.001) with the management (F=4.39±.173) as the most significant. Moreover, the position held by nurses is significant to their opinion of becoming a nurse (F=11.81; p<.001) with the clinical (4.25 ±3.66) as the most significant. In relation to the marital status of the nurses, it has been found that there is no significant difference in their reasons for leaving the nursing profession (t=5.779; p>.290) and their opinion of becoming a nurses (t= 1.39; p>.573). Meanwhile, regarding the number of dependents, it has been found that there are no significant differences in their reasons (t=2.248; p>0.38) and opinions (t= .820; p>.366)

Workplace turnover is damaging to nursing and affected personal results because it ends in dropping capable and certified nurses. However, tendencies of coping techniques call for a clean knowledge of the place of work variables that both inspire nurses to stay hired or lead them to go away from their present-day jobs. The organizational profession boom is the center of the professional improvement principle. The principle emphasizes the significance of the rate of worker profession boom inside their present-day organization. According to Alshmemri et al. (2021), the four dimensions of the organizational profession boom encompass the rate of expert talent acquisition, the rate of professional intention realization, the rate of promotion, and the rate of revenue boom. Organizational profession boom wishes the cooperation of each business enterprise and the worker. Organizations that offer nurses possibilities to improve their profession who then pursue the possibilities can, as a result, see worker-led organizational improvements. Therefore, agencies can also additionally see a boom in loyalty from the nurses with the aid of using presenting them with the possibilities for a professional boom.

This includes the limited development of healthcare workers' skills, remote healthcare workers who do not have access to training opportunities, and inadequate coordination with training institutions that do not provide training to meet local needs. It means facing resource management and development issues. In actual work conditions, there is no skill-based performance evaluation, and the turnover rate of trained personnel is high.

As can be concluded from the reasons for a longer tenure in the job, regardless of marital status, the number of dependents, job satisfaction consequence among nurses, take for example the position they hold suggests that employees will always tend to want more from their employers, be it in the form of monetary compensation, extrinsic rewards, advancement opportunities, or even internal motivation and praise. Relevant to note here is that what has been consistently identified across studies, including this one is that when nurses have satisfied their subsistence needs, they strive to fulfill security needs. When nurses' jobs are secure, they will seek ways of satisfying social needs and if successful will seek the means to the ultimate end of self-actualization in the form of career advancements and job opportunities.

The most important correlation between job satisfaction is employee retention. Employees who are happy with their work tend to continue working. Intuitively, it is easy to relate patient safety and patient satisfaction to staff satisfaction. Happy employees focus on their work responsibilities and improve performance without being distracted by the negative environment.

Overall, the implication of this study is that creating awareness of career growth possibilities within nursing organizations will serve well to increase the longevity of the tenure of nurses and will fuel their desire to remain on the job. For many nurses, continuing to enhance their capabilities and knowing that there are growth opportunities in the organization may lead to greater job satisfaction and longer employment with their particular organization. What this understanding of the top reasons for nurses to stay on the job means is that it offers a glimpse into possible organizational changes that can be instituted to fuel employee nurse motivation. Knowing this gives power to the organization as it will in the long term not only retain committed and qualified nurses, but will also encourage loyalty to the job, and improve patient outcomes, as nurses who are fulfilled and motivated will take pride in doing the best at their job. The focus then of nurses here will go back to the primary reasons why they became nurses in the first place, and that is to help patients cope with their illnesses.

Again, this coincides with what was discussed by Suluhan et al. (2020) in their study of the mixed character of motivations for the choice of nursing as a profession with a clear dominance of pro-community motivations focused on the good of others. What this further implies is that it is possible

to encourage the less-committed students to choose to become nurses by promoting greater reflection on their individual and collective roles as nurses. The benefit of doing this is it chances on increasing the pool of nurses in response to the dwindling numbers of nurses in Saudi.

4. Recommendations

As in any precursor to change and development, the policy recommendations that could be drawn from this study must be based on a clearer understanding of the needs. Although there is a known general shortage of Saudi nurses, a fragmented health sector means it is difficult to get a clear overview of nursing needs across the country, what skills are needed, where, and, more importantly, how those needs will be with ongoing health sector reforms and changing health needs. Perhaps the need for a systematic needs assessment that measures current needs in terms of people and skills should be stressed; as projects on future needs; and estimate the costs to respond to them. In particular, this needs assessment should be done in the context of the development of a national health workforce plan or strategy covering all sectors, a critical need for Saudi Arabia. Saudi Commission for Health Specialties (SCFHS) should work with leadership from multiple professional categories, including nursing, to design and implement a process to reach a consensus on the vision and future plans for health professionals. All major sectors and stakeholders should be involved in this plan, including the Ministry of Education and the Ministry of Finance. There is a clear need to expand the nursing education offered at KSA. Attracting respected nursing schools from developed countries to open branches in Saudi Arabia can help fill capacity gaps while improving the teaching and learning process. In regulating these schools, the Ministry of Education should play a supporting role rather than a punitive role where standards are not met, identifying gaps and helping to close them, as well as guiding schools in the development of the necessary governance structures.

In addition to increasing the number of places, there is a need to help existing students complete their studies. Additionally, internship programs can help introduce students to the experience of patient care and potential employers before graduation, perhaps reducing the percentage of graduates who never working as nurses. The most pressing need to maintain the supply of qualified nurses is to increase the capacity of programs that connect nurses with a nursing degree or an associate degree. This could prevent many of these nurses from dropping out of labor market education without compromising the overall quality of health services provided.

Nursing school capacity expansion should be combined with improving the quality of nursing education, primarily through capacity-based education, increased patient contact, medical simulation, and improved pedagogy and teaching materials. To create a Saudi Arabian nursing skill mix beyond the bachelor's level, you need to create professional, master's, and doctoral qualifications. The needs analysis should be performed to determine the number of nurses needed and the type of nurses. Teacher pipelines need to be created to increase access to clinical settings for training. Existing professional accreditation programs must be formalized, accredited and compliant with international standards. The development of a regulatory framework for advanced nursing and the introduction of wage differentials should be considered. This not only inspires nurses to develop their own skills but also encourages high-performing nurses to stay in the profession. Establishing advanced nursing programs will require setting standards for knowledge, skills, training time, faculty requirements, and clinical site requirements. The continuous improvement of skills as well as the opportunities for career development contribute to job satisfaction and therefore to loyalty; and improving retention will be key to achieving greater autonomy for Saudi Arabia's nurses.

Nursing must be made more competitive than other career and employment options. The flexibility in recruitment will ensure that nurses can be employed where they are most needed and that there is a fair distribution of the workforce across the Kingdom. Ultimately, a robust governance environment will ensure that the quality and safety of patient care are a priority and that the profession at KSA meets the needs of the nation today and into the future. Flexibility in recruitment will ensure that nurses can be deployed where they are needed most and that there is an equitable spread of the workforce across the Kingdom. Lastly, a robust governance environment will ensure that the quality and safety of patient care are prioritized and that the profession in KSA meets the nation's needs, now and in the future.

5. Study strengths and limitations

The sample of this study may not randomly represent the total population of nurses in Saudi Arabia, but the characteristics of the numbers from the sample are quite similar to the general situation of the healthcare practice scenario of the nursing profession across studies. In addition, causes and consequences are based on the subjective views of each of the respondents included in this particular study alone, and may not fully represent the underlying causes of the entirety of nursing. This study is a striking indicator of the importance of nurses' job satisfaction and its determinants of tenure and retention. Nurse retention is an important issue in nursing labor management, as it can impact patient care.

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Compliance with ethical standards

Ethical consideration

The University of Hail's Institutional Review Board granted the authors permission and authorization to perform the study. The respondents were also given informed consent, ensuring that they were fully aware of the situation and willing to participate. The researchers followed the ethical protocol throughout the study. Throughout the research process, the participants' anonymity, confidentiality, privacy, and rights were strictly observed.

Conflict of interest

The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

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