

Communication Dynamics as Correlates to Work Motivation of Medical Employees in a Private and a Public Hospital

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ABSTRACT

The objective of the paper was to determine the extent of communication dynamics which significantly affects workers motivation and to measure and compare job satisfaction and job motivation of government and private hospital employees. The samples of this study were 157 employees, 97 from a government and 60 from a private hospital. The study used the descriptive research design. Results showed that in the terms of communication dynamics in the workplace, the respondents were satisfactorily satisfied with their respective employer. For work motivation indicators, results revealed that both public and private hospitals were motivated moderately on the aspect of salary and fringe benefits. Moreover, work motivation of employees can be predicted with the type of information flow, feedback and appropriate timing practiced in each institution. The study also showed that there was a positive relationship between communication dynamics and work motivation in such a way that increased management communication activities positively affect employee's motivation and vice versa. The respondents' profile, age, length of work experience, employment status and type of hospital affiliation significantly affect the employees' work motivation. Private medical employees were more motivated to work than did their public counterpart.

Keywords - Communication dynamics, Effective feedback, Medical Employees, Type of hospital, work motivation and relationship.

INTRODUCTION

Motivation can be assumed as the reason or the force behind why a person does what he or she does. Sometimes, it is also a means to make the person perform better and more efficiently. Basically there are three assumptions in human motivation established in research. The first one assumes that motivation is inferred from a systematic analysis of how personal, task and environmental characteristics influence behavior and job performance. The next one infers that motivation is not a fixed trait; but rather it refers to a dynamic internal state resulting from the influence of personal and situational factors. This means that motivation may change with changes in personal social or other factors (Wiley, 2007). Finally, motivation affects behavior, rather than performance (Wiley, 2007). Moreover, motivation involves the processes that account for an individual's intensity, direction, and persistence of effort toward attaining a goal." For Fred Luthans, motivating is the management process of influencing behavior based on the knowledge of what make people tick (1998). Motivation is the set of forces that cause persons to behave in certain way (Moorhead & Griffin 2006). In another sense, motivation is the term used to describe those processes, both instinctive and rational, by which people seek to satisfy the basic drives, perceived needs and personal goals, which trigger human behavior.

Effective communication dynamics are used to establish and maintain work motivation and consequently, productive working relationships. The focus is on improving working motivation by improving communications. The importance of using good communication techniques cannot be overstated. It is one of the hallmarks of effective management and work motivation (Wolf, 2006). Communication dynamics involve an interaction between persons or groups who affect each other. It is not unidirectional which indicates that communication between two people or group always flows in both direction, mutual and simultaneous (Donnelon, et al. 2006).

According to Milton (2007), communication has the aspects of content or the outward, literal information of the message and the relationship aspect or the interpretation of the message. An interpretation of communication that focuses only on the context aspect or literal meaning of the message is clearly going

to miss much of the message or even result in concluding exactly the opposite of what the sender intended to convey. An effective communication dynamics emphasizes give-and-take situations between individuals or groups during which the parties involved try to come up with a resolution of their problems that is acceptable to all concerned. Attending, responding, encouraging, focusing, clarifying personalizing and informing are techniques to establish open productive relationships with others as individuals had in groups. These techniques not only encourage a free exchange of ideas and feelings, but also help worker increase self-awareness, encourage personal growth and facilitate problem-solving (MacCoby, 2004).

Since it is no secret nowadays that health care providers exits are tremendously increasing for other countries to seek for greener pasture, conducting this study is the researcher's great privilege. This study provided this researcher first-hand pictures on how her co-employees strived very hard to have a decent job and how the employers worked hard to compensate such need. This way researcher provided both parties better options. This researcher hopes that employers would allow employees to stay in their respective institutions and that the employees would never quit their jobs in exchange for work abroad. It is sad to just watch great, knowledgeable and skilled staff to leave simply because the employer cannot give them fair burses fit for professionals. It is the researcher's compelling reason to conduct the study in order to determine whether communication dynamics affect to a significant extent medical employee's work motivation. Thus, managers can use this study as a benchmark to find strategies to motivate employees. Furthermore, they can use the results of this study as a basis to develop on intervention design to enhance the effectiveness of communication and work.

FRAMEWORK

Maslow (2007) outlined the most influential of content theories. He developed the hierarchy of needs, which suggests that individual needs exist in a hierarchy consisting of physiological needs, security needs, belongingness needs, esteem needs, and self-actualization needs. Physiological needs are the most basic needs for food, water, and other factors necessary for survival. Security needs include needs for safety in one's physical environment, stability, and freedom from emotional distress. Belongingness needs relate to desires for friendship, love, and acceptance within a given community of individuals. Esteem needs are those associated with obtaining the respect of one's self and others. Finally,

self-actualization needs are those corresponding to the achievement one's own potential, the exercising and testing of one's creative capacities, and, in general, to becoming the best person one can possibly be. Unsatisfied needs motivated behavior; thus, lower-level needs such as belongingness, esteem, and self-actualization can be motivational. Once individuals have satisfied one need in the hierarchy, it ceases to motivate their behavior and they are motivated by the need at the next level up the hierarchy.

Applications of the hierarchy of needs to management and the workplace are obvious. Individuals must have their lower level needs met first by, for example, safe working conditions, adequate pay to take care of one's self and one's family, and job security before they will be motivated by increased job responsibilities, status, and challenging work assignments (Daft, 2003). Despite the ease of application of this theory to a work setting, this theory has received little research support and therefore is not very useful in practice.

The Existence, Relatedness and Growth (ERG) theory is an extension of Maslow's hierarchy of needs. Alderfer (2007) suggested that needs could be classified into three categories, rather than five. These three types of needs are existence, relatedness, and growth. Existence needs (include nutritional and material requirements; at work this would include pay and conditions) are similar to Maslow's physiological and safety need categories. Relatedness needs involve interpersonal relationships which are met through relationships with family and friends and at work with colleagues, and are comparable to aspects of Maslow's belongingness and esteem need. Growth needs, which reflect a desire for personal physiological developments, are those related to the attainment of one's potential and are associated with Maslow's esteem and self-actualization needs (Daft, 2007).

Frederick Herzberg developed the motivator-hygiene theory. This theory is closely related to Maslow's hierarchy of needs but related more specifically to how individuals are motivated in the workplace. Based on his research, Herzberg argued that meeting the lower-level needs (hygiene factors) of individuals would not motivate them to exert effort, but would only prevent them from being dissatisfied. Only when higher-level needs (motivators) are met would individuals be motivated.

The implication for managers of the motivator-hygiene theory is that meeting employees lower-levels needs by improving pay, benefits, safety, and other job-contextual factors will prevent employees from becoming actively dissatisfied but will not motivate them to exert additional effort toward better performance. To

motivate workers, according to the theory, managers must focus on changing the intrinsic nature and content of jobs themselves by “enriching” them to increase employee’s autonomy and their opportunities to take on additional responsibility, gain recognition, and develop their skills and careers (Daft, 2007).

OBJECTIVES OF THE STUDY

This study aimed to (1) determine what is the profile of the respondents in terms of the following: age, gender, marital status, length of work experience, employment status, area of assignment, type of hospital affiliated and type of School Graduated, (2) determine the extent of manifestations of the following indicators of communication dynamics in a public and in a private workplace of the following: feedback, Type of information flow, Clarity and simplicity of language, appropriate timing, and the Nature of communication, (3) determine if there’s a significant difference in the communication dynamics between public and private hospitals, (4) identify the extent of the respondents’ work motivations along the following indicators: supervision and leadership, salary and fringe benefits, promotion, awards and recognition, opportunities for growth and advancement, and working relationships, (5) measure if there is a significant relationship between communication dynamics and work motivation of the respondents, (6) find out which of the indicators of communication dynamics are significant correlates to the respondents’ work motivation,(7) measure the intervening effect of the profile of the respondents to the aspect of work motivation, and (8) measure the significant difference on work motivation between a public and a private employee.

METHODOLOGY

The descriptive research design was the research method used in the study. It intends to present facts comparing the nature and status of a situation as it exists at the time of the study (Saunders et al, 2008).

The data were gathered from two tertiary hospitals in Iligan City, one private tertiary and another a public hospital. These are Dr. Uy Hospital, Inc. and the Gregorio T. Lluh Memorial Hospital (GTLMH). Selection of the two hospitals was based on the researcher’s persuasive need to address the need of her base hospital (private hospital). Moreover, the public hospital which is GTLMH is the only public tertiary facility available in the locale.

The respondents of the study were composed of the medical employees of the two selected hospitals in Iligan City. The stratified random sampling was used in order to get a proportional sample size from each research setting. The following table presents the distribution of the proposed respondents:

Table 1. Population of medical employees and sample size

HOSPITALS	Doctors		Registered Nurses		Nursing Aides		Total	
	N	n	N	n	N	n	N	n
GTLMH	15	11	90	68	24	18	129	97
DUHI	4	3	57	48	10	9	71	60
TOTAL	19	14	147	116	34	27	200	157

The questionnaire for communication dynamics survey was patterned from Milbon (2005) and Kolb et al, (2001). For the extent of work motivation survey, it was patterned from MacCoby (2004) and Locke and Lantham (2000) respectively. The data were gathered through a survey schedule which was composed of questions/items which measured the variables indicated. The first part of the research instrument gathered the demographic data of the respondents' which includes their age, gender, marital status, length of work experience, employment status, area of assignment, the type of hospital they are affiliated and the type of school the respondents graduated..

The second part of the research instrument was composed of several items in communication dynamics which is the independent variable. Feedback, type of information flow, clarity and simplicity of language, appropriate timing and nature of communication comprise it. For the third part, it measured the extent of work motivation. Items in this aspect include supervision and leadership, salary and fringe benefit, promotion, awards and recognition, opportunity for growth and advancement and working relationship. The scaling procedures for the assessment were: 4-always; 3-sometimes; 2-rarely; 1-never or not at all while for work motivation scaling were: 4-high; 3-moderately high; 2-moderately low and 1-low.

The research instrument was validated by a group of experts such as: a chief nurse, medical director, statistician and the panel of the proposal defend.

The researcher sought permission and approval to collect data from the head of agency/facility through the chief of the hospital or the administrator. They

were guaranteed that the gathered data will not be against them, will be treated with confidentiality and that the results are primarily intended for this study.

The data was analyzed and presented through appropriate statistical techniques. The respondents profile and extent of work motivation (dependent variables) were presented and analyzed through the frequency counts and percentages. Meanwhile the communication dynamics were reported and analyzed through the weighted mean.

The null hypotheses were tested through the Pearson Correlation Coefficient and Multiple Regression Analysis. The Pearson Correlation Coefficient measured the relationship between the respondents' communication dynamics and extent of work motivation. On the other hand, multiple regressions measured the intervening effects of profile and to the relationship between the respondents' communication dynamics and work motivation.

RESULTS AND DISCUSSION

Objective 1. To determine the profile of the respondents in terms of age, gender, marital status, length of work experience, employment status, area of assignment, and type of hospital affiliated.

Table 2. Frequency and percentage distribution of respondents by profession

Profession	Frequency	Percentage
Medical doctors	14	8.9
Nurses	116	73.9
Nurse aid/midwife	27	17.2
Total	157	100.0

By profession, the respondents can be mapped or described as shown in Table 2. It shows that out of the 157 respondents, 116 of them were nurses, 14 of them were medical doctors and 27 of them were nurse aids or midwives. This distribution is significantly lopsided or not equal ($\chi^2=117.8$, $p=0.000$), which means that, there are more nurses ($n=116$, 74%) in the sample than there are medical doctors ($n=14$, 9%), and nurse aids or midwives ($n=27$, 17%).

Table 3. Frequency and percentage distribution of respondents by age ranges

Age Range	Public	Private	Total	Total Percentage
18-24	18	28	46	29.3
25-31	41	18	59	37.6
32-38	6	6	12	7.6
39-45	19	5	24	15.3
46-52	7	2	9	5.7
53-59	2	2	4	2.5
60-66	1	0	1	0.6
74-80	1	0	1	0.6
Not Indicated	1	0	1	0.6
Total	96	61	157	100.0

The respondents were 31 years old on the average. The youngest respondent was 18 years old and the oldest was 75 years old. The age distribution of the respondents is spread evenly between 18 and 80 years old as shown in Table 3. The table shows that majority of the respondents were spread between 18 years old and 31 years old composing of 67% (n=105) of the total number of respondents falling within the age range.

Table 4. Frequency and percentage distribution of respondents by gender

Gender	Public	Private	Frequency	Total Percentage
Male	33	23	56	35.7
Female	63	37	100	63.7
Not Indicated	1	0	1	0.06
Total	97	60	157	100.00

There were a total of 100 female respondents (63%) and 56 male respondents (36%) sampled in the survey, while one (n=1m 1%) did not indicate his/her gender. This distribution indicates that there are more female respondents over male respondents in the sample (p=0.001). This distribution is shown in Table 4.

Table 5. Frequency and percentage distribution of respondents by marital status

Marital Status	Public	Private	Frequency	Total Percentage
Single	62	34	97	62
Married	32	25	57	36.3
Separated	2	0	2	1.3
Widowed	1	0	1	0.6
Total	97	59	157	100.0

Of the 157 respondents, 97 of them (62%) were single, 57 (36%) were married, 2 (1%) were separated from their spouses, 1 (<1%) whose spouse has already died, and one (<1%) who did not disclose his/her marital status. This distribution is significantly lopsided or uneven ($p=0.000$). This distribution is shown in Table 5. This distribution shows that an increase of single employees is obvious. This group represents the fresh graduates or the newly registered professionals.

Table 6. Frequency distribution of respondents by length of work experience

Yrs. of Experience	Public	Private	Total	Total Percentage
0-6	69	40	99	63.1
7-13	14	5	19	12.1
14-20	13	7	20	12.7
21-27	3	1	4	2.5
28-34	2	0	2	1.3
35-41	1	0	1	0.6
Not Indicated	4	8	12	7.6
Total	96	61	157	100.0

Table 6 shows the distribution of respondents by length of work experience arranged in an interval of 6 years. The average number of years of work experience among respondents is 6.9 ~ 7 years. The distribution of respondents by number of 4% of the working years suggest that most of them are between less than a year to 6 years composing of 63% ($n=99$) of the number of respondents. The distribution also suggests that it is highly skewed to the right so that as the range of years of experience increased, the number of respondents falling within the

range also decreased. Only very few of them were over twenty years in their current work, composing of 4.4% of the number of respondents. This observation is true not only in the general results but also when analysis is broken down to type of hospital they are affiliated in. It should be noted however that the non-response on this item is high (7.6%), and conclusions regarding the distribution of respondents by length of work experience may have to be taken with caution.

Table 7. Frequency and percentage distribution of respondents by employment status

Employment Status	Public	Private	Frequency	Percentage
Volunteer	7	7	14	8.9
Reliever/Casual	30	23	50	31.8
Probationary	20	7	27	17.2
Regular	40	21	61	38.9
Not Indicated	4	1	5	3.2
Total	97	60	157	100.0

Table 7 shows the distribution of respondents by employment status and shows that the distribution is rather lopsided or uneven ($\chi^2=36.053$, $p=0.000$). The distribution suggests that there are more of these respondents who are reliever/casual (32%) and regular employees (39%) and less of volunteers (9%). Volunteers nowadays is highly discouraged since there are some policy formulating bodies that raise complaints to Board of Nursing why there are hospitals who required payments in return of the nurse’s services in their institutions. This is why it was observed in the survey that significantly less number of volunteers was noted.

Table 8. Frequency and percentage distribution of respondents by area of assignment

Area of Assignment	Public	Private	Frequency	Percentage
Ward	45	34	79	49.7
Special Area	45	23	68	43.3
Others	7	4	11	7.0
Total	97	60	157	100.0

Table 8 shows that the distribution of respondents by area of assignment. It shows that the distribution of respondents is unequal among these areas. Majority of the respondents are assigned to the Ward (50%) or the Special Area (43%), and significantly only a few (7%) are assigned to Other Areas. The few employees noted that were assigned to other areas were those medical employees who were registered nurses and midwife who were designated by their employers to other department where number of manpower is lacking. These areas were laundry/linen and Radiology department.

Table 9. Frequency and percentage distribution of respondents by type of hospital affiliated

Type of School	Frequency	Percentage
Public	96	61.1
Private	61	38.9
Total	157	100.0

Table 9 summarily gives a picture of the distribution of the respondents for the study by which conclusions on the research problems will be drawn from. This study was conducted in the hospitals of Iligan City, particularly, Dr. Uy Hospital, a private hospital, and Gregorio T. Lluich Memorial Hospital, a public hospital. There were a total of 157 respondents sampled from the two hospital and 96 respondents (61%) were from the public hospital. This distribution of respondents indicates that there are more respondents sampled from the public hospital since it is a 175-bed capacity institution when compared to 70-bed capacity from the private hospital ($p=0.06$).

Table 10. Frequency and percentage distribution of respondents by typology

School Graduated	Public	Private	Frequency	Percentage
Public	37	35	48	30.6
Private	59	25	108	68.8
Others	1	0	1	0.6
Total	97	60	157	100.0

Table 10 shows distribution of respondents by type of school that these respondents graduated from. It shows that there are more employees who were graduates from private schools or school of nursing ($n=108$, 69%) than the

universities (n=48, 31%) or other school types (<1%). This data supports the fact that there is an increase number of schools of nursing in commission nowadays because of the high demands for nurses in the country and abroad as well.

Objective 2. To identify the extent of manifestations of the following indicators of communication dynamics in terms of feedback, type of information flow, clarity and simplicity of language, appropriate timing and nature of communication?

Table 11. Extent of feedback and its sub-components in the workplace

	N	Mean	Std. Deviation	Interpretation
Update on policies/laws	156	3.40	.564	Sometimes
Promote dialogues	157	3.23	.619	Sometimes
Encourage comments	156	2.90	.768	Sometimes
Motivate suggestions	157	2.96	.762	Sometimes
Performance feedback	156	3.18	.716	Sometimes

Table 11 shows that majority of the respondents perceived the hospital management to have sometimes demonstrated feedback particularly on updating them on policies and laws (3.40), promoting dialogues (3.23), in encouraging them to comment on memos, manuals and circulars (2.90), motivate them to give suggestions on work improvements (2.96) and give them feedback on work performance (3.18).

Feedback is a moderator of goal-setting effects (Locke & Latham, 2002). Active feedback seeking by new employees is related to high performance (Ashford & Black 1996). Ashford et al. (2003) stated that the processing of feedback likely involves monitoring the environment in an automatic preconscious fashion through visual, auditory, and relational cues. Significant changes in the environment or in the preconscious monitored cues themselves may cause a shift to the conscious seeking of feedback, and the conscious evaluation of the costs and benefits of doing so. Having sought feedback and resolving uncertainly associated with the interruption, the person returns to the automatic processing of information.

Table 12. Extent of type of communication/information flow and its sub-components in the workplace

	N	Mean	Std. Deviation	Interpretation
Superior-subordinate relationship	157	3.27	.614	Sometimes
Direction by department head	157	3.34	.685	Sometimes
Upward-downward communication	156	3.12	.681	Sometimes
Conducive for labor relations	157	2.89	.734	Sometimes
Employee-focused information	155	3.14	.669	Sometimes

On the other hand, majority of the respondents believe that the type of information flow is sometimes demonstrated when information which affects superior-subordinate tasks allocation and work expectations are transmitted to them (3.27), when upward to downward communication are adhered strictly (3.12), when only information which impress labor relations among employees transmitted (2.89) and when only information that the employees need to know are transmitted (3.14). Majority of them felt that their direct department head calls their attention whenever the deviate from standard policies and procedures (3.34), and about the same number felt that this is sometimes so. Table 12 shows the extent of information flow distribution in the workplace.

Table 13. Extent of clarity and simplicity of language and its sub-components

	N	Mean	Std. Deviation	Interpretation
Avoids complex ideas	157	3.25	.678	Sometimes
Use simple terms	157	3.39	.585	Sometimes
Use simple sentences	157	3.41	.544	Sometimes
Use direct flow of ideas	157	3.32	.633	Sometimes
Avoids abbreviations/acronyms	157	3.43	.632	Always

Table 13 shows that majority of the respondents see that the hospital management sometimes avoid complex ideas in transmitting message to them (3.25), use simple terms over technical terms (3.39), use simple sentences over complex sentences (3.41), and use direct flow of ideas (3.32). Majority of them felt that the management sometimes avoids abbreviations and acronyms when communicating to them in writing (3.43).

Table 14. Extent of appropriate timing and its sub-components

	N	Mean	Std. Deviation	Interpretation
When management and labor are calm	156	3.22	.675	Sometimes
Not on “unholy hours”	156	3.11	.792	Sometimes
Doesn't disrupt completion of tasks	157	3.32	.702	Sometimes
Disseminated ahead of time	157	3.39	.695	Sometimes
Schedule followed as planned	156	3.33	.634	Sometimes

Table 15. Extent of nature of communication and its sub-components

	N	Mean	Std. Deviation	Interpretation
Through written order	157	3.42	.661	Sometimes
Orders given verbally	157	3.13	.793	Sometimes
Reprimands verbally	149	3.19	.714	Sometimes

Majority of the respondents see that the hospital management sometimes encourages communication process between management and employees when both are calm (3.22), and that it is *sometimes* sensitive in communicating to them during “unholy hours” (3.11). Respondents sometimes see that meetings and conferences are done at certain schedules which do not disrupt tasks completion (3.32) and these are always disseminated effectively ahead of schedule (3.39). Majority of them however see that proper attention, focus, responding and forum are sometimes done as scheduled (3.33). Majority if the respondents see the hospital management *sometimes* communicates through written orders (3.42), and *sometimes* verbally (3.13) to them. They further see that the management *sometimes* reprimands them verbally (3.19). Tables 14 and 15 show this distribution respectively.

Objective 3. To determine if there's a significant difference in the communication dynamics between public and private hospitals.

Table 16. Difference in perception on communication dynamics between respondents from public and private hospitals

Components	Mean		Interpretation
	Public	Private	
Feedback *Standard Deviation	3.09 0.472	3.20 0.531	Not significantly different
Type of Information flow *Standard Deviation	3.13 0.493	3.18 0.458	Not significantly different
Clarity & Simplicity of Language *Standard Deviation	3.27 0.496	3.51 0.440	Very significantly different
Appropriate Timing *Standard Deviation	3.20 0.520	3.40 0.489	Significantly different

There are differences in the respondents' perception towards dynamics of communication between those coming from a public hospital and from a private hospital. Table 16 shows average responses of the respondents from these two types of hospitals on the five subcomponents of communication dynamics. The table shows that there is no difference in the perception of respondents of the public hospital and from the private hospital on the sufficiency of feedback provided by hospital management, on the openness of communication and diversity of methods used in communicating to employees. The table further shows however that the respondents of the private hospital perceived their employer (mean=3.51) to have clearer and simplified way of communicating to them than the respondents of the public hospital (mean=3.27) perceive their employer. Further, respondents from the private hospital also perceive that their employer (mean=3.40) knows the appropriate timing for discussion, meeting and conferences better than did the respondents of public hospital (mean=3.20) perceive their employer.

Objective 4. To identify the extent of the respondents’ work motivations along the following indicators such as supervision, salary and fringe benefits, promotion, awards and recognition, opportunities for growth and advancement and working relationships.

Table 17. Distribution of responses on the extent of work motivation on supervision and leadership

	N	Mean	Std. Deviation	Interpretation
Fairness	157	3.08	.707	Moderately high
Provision of guidance, encouragement & moral support	156	3.15	.670	Moderately high
Consultative supervisory treatment	157	3.15	.718	Moderately high
Opportunities to deepen and broaden knowledge	157	3.11	.670	Moderately high
Provision of equal opportunity for advancement	154	2.97	.762	Moderately high

Table 17 shows that distribution of the responses on all items was lopsided or uneven among the response categories: low, moderately low, moderately high and high. With supervision and leadership as a factor for work motivation, respondents are moderately motivated when there is fairness in the workplace (3.08), when guidance, encouragement and moral support are provided (3.15), when they see that there is consultative supervisory treatment (3.15), when they see opportunities by which they can deepen and broaden their knowledge pertaining to one’s job (3.11), and provision of equal opportunity for advancement (2.97).

Table 18. Distribution of responses on the extent of work motivation on salary and fringe benefits

	N	Mean	Std. Deviation	Interpretation
Adequacy for decent living	155	2.31	.984	Moderately low
Equitable to assigned tasks	154	2.40	.932	Moderately low
Covers personal and family expenditures	156	2.22	.889	Moderately low
Adequate for long-term job	156	2.18	.926	Moderately low

Competitive with other hospitals & based on existing laws	156	2.38	1.019	Moderately low
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Table 18 shows the result for salary and fringe benefit as a factor for work motivation. The responses seem to scatter along low, moderately low and moderately high, and only a few are highly respondents are highly motivated with salary and fringe benefits. Only a few are highly motivated when their salary reflects adequacy for decent living (2.31), when they see that their pay is equitable to the effort they exert on performing assigned tasks (2.40). Majority of the respondents however are motivated moderately low about their salary which covers personal and family expenditures (2.22), that their job is adequate for long-term (2.18) and their salary is competitive with other hospitals and based on existing laws (2.38). There seemed to be ambiguity in the responses on salary and fringe benefits.

Table 19. Distribution of responses on the extent of work motivation on promotion

	N	Mean	Std. Deviation	Interpretation
Scheme based on relevant standards & objective criteria	153	2.80	.891	Moderately high
The most qualified and competent get easily promoted	153	2.76	.901	Moderately high
The merit system is considered in the promotion	153	2.71	.886	Moderately high
Correspondence between promotion and salary increase	152	2.66	.900	Moderately high
The promotion scheme is part of the policy	152	2.82	.904	Moderately high

For promotion as a factor for motivation, the majority of the respondents are motivated moderately high when the promotion scheme is based on relevant standards and objective criteria (2.80), when they see that the most qualified and competent get easily promoted (2.76), when the merit system is considered in the promotion (2.71), when they see that there is corresponding salary increase when they get promoted (2.66), and when they see that the promotion scheme is a part of their policy (2.82). Table 19 shows the distribution.

Table 20. Responses on the extent of work motivation on awards and recognition

	N	Mean	Std. Deviation	Interpretation
Provides recognition scheme	154	2.73	.886	Moderately high
Employees are motivated to perform better	155	2.83	.836	Moderately high
Recognize individual contributions to vision, mission, goals	155	2.92	.829	Moderately high
The merit system considers longevity as a factor	154	2.81	.841	Moderately high
The merit system is comparable to other institutions	154	2.84	.828	Moderately high

Table 20 depicts the distribution on the extent of motivation for awards and recognition as a factor for work motivation. The majority of the respondents are motivated moderately high when they see that the management awards outstanding performance and provides for recognition scheme (2.73), when they are motivated to perform better (2.83), when they see that the management recognizes individual contribution to the vision, mission and goals of their institution (2.92), when they see that longevity or length of service is a factor in the merit system (2.81), and when they see that the merit system implemented is comparable to the other institutions’ merit system (2.84).

Table 21. Distribution of responses on the extent of work motivation on growth and advancement

	N	Mean	Std. Deviation	Interpretation
Granted opportunity and time to pursue advanced studies	155	2.97	.797	Moderately high
Participate in related seminars & trainings for skills enhancement	156	3.08	.714	Moderately high
Opportunity to apply new skills and knowledge to assigned tasks	155	2.99	.777	Moderately high

Employees are involved in the strategies of the development program	153	2.87	.809	Moderately high
Participate in in-house programs & in-service trainings	155	2.91	.750	Moderately high

For opportunities for growth and advancement as a factor for work motivation, respondents are motivated moderately high as well to work when they are granted opportunity and time to pursue advanced studies (2.97), when they are made to participate in related seminars and trainings for skills enhancement (3.08), when they are given opportunity to apply new skills and knowledge to assigned tasks (2.99), when employees are involved in the strategies of the employee development program (2.87) and when they are able to participate in in-house programs and in-service trainings (2.91). The results are depicted in table 21.

Table 22. Distribution of responses on the extent of work motivation on working relationship

	N	Mean	Std. Deviation	Interpretation
Democratic and consultative	155	3.17	.713	Moderately high
Spirit of teamwork and mutual assistance	155	3.06	.661	Moderately high
Physical, social and spiritual wellness in the workplace	154	3.10	.730	Moderately high
Morale boosting within the workplace	155	3.06	.736	Moderately high
Coaching and mentoring with experienced employees	155	3.08	.752	Moderately high

For working relationships as a source of motivation to work, respondents are motivated moderately high when the relationships among employees are done in democracy and they are asked for participation and consultation (3.17), when there is a spirit of teamwork and mutual assistance (3.06), when there is physical, social and spiritual wellness in the workplace (3.10), when efforts are made to boost morale in the workplace (3.06) and they are given opportunity to be coached and mentored by seasoned or experienced employees (3.08). Table 22 is as follows.

Objective 5. To measure If there’s a significant relationship between communication dynamics and work motivation of the respondents.

Table 24. Relationship between extent of work motivation and communication dynamics

Communication Dynamics	Pearson r	p-value	Interpretation
Feedback	0.512	0.000	Very Significant relationship
Type of information flow	0.527	0.000	Very Significant relationship
Clarity and Simplicity of language	0.347	0.000	Very Significant relationship
Appropriate timing	0.498	0.000	Very Significant relationship
Nature of Communication	0.539	0.000	Very Significant relationship

Table 24 shows the relationship between extent of work motivation and factors of communication dynamics. Motivation to work is significantly and positively influenced by feedback ($p < 0.01$), type of information flow ($p < 0.01$), clarity and simplicity of language ($p < 0.01$), appropriate timing ($p < 0.01$) and nature of communication methods ($p < 0.01$). Hospital staff are generally motivated to work when they are updated on policies and laws affecting working relationships between management and employees and when dialogue, open communication and regular feedback is done. They are also motivated to work when information especially affecting tasks allocation and work expectations are communicated, when they are called upon for deviations from policies and procedure. They are also affected positively to work when the management make effort to communicate in simple language they can understand both in written and oral communication. They are also motivated to work when they see that the management is sensitive enough to understand the appropriate time for meetings and conferences, scheduling and other related activities that do not disrupt their work drastically nor has consideration for their physical, psychological and/or professional needs. They are also motivated to work when they see that the management exerts effort to reach to them in communicating in diverse means such as written and verbal in order to communication relevant information and/or order, and that reprimands are done verbally.

Objective 6. To measure the indicators of communication dynamics are significant correlates to the respondents' work motivation.

Table 25. Analysis of variance on stepwise regression of factors of communication dynamics to work motivation

Source of Variation	Sum of Squares	df	Mean Square	F-value
Regression	18.503	3	6.168	
Residual	32.857	153	0.215	28.720
Total	51.361	156		

$$R^2=0.36$$

Communication dynamics is expressed through feedback, type of information/communication flow, clarity and simplicity of language, appropriate timing and nature of communication methods. These factors are found to have significant relationship with employees' work motivation. In order to establish which among these factors indeed affected work motivation, a regression analysis using stepwise method was conducted where work motivation is the dependent variable and the factors of communication dynamics (i.e., feedback, etc.) are the independent variables. The stepwise method uses the rule of entry of 0.50 and the rule of removal of 0.10 from the regression equation. Table 25 shows the final result of this regression analysis.

Table 26. Coefficients Variable

Coefficients	Unstandardized coefficient	t-value	p-value
Constant	0.248	0.882	0.379
Type of Information flow	0.293	2.106	0.008
Feedback	0.277	2.783	0.006
Appropriate timing	0.243	2.619	0.100

Table 26 shows the coefficients of the variables that made it to the regression equation. There are only three variables that made it to the rule of entry and rule of removal and these are: Type of Information flow, Feedback and appropriate timing. This means that work motivation can be predicted using three variables. The variables, open information flow, feedback and appropriate timing explain about $R^2 100\%=26\%$ of the variation in the extent of work motivation among employees of the hospital. There is still 54% in the variation of work motivation

that remains unexplained and by further research; other variables may be able to explain extent of work motivation in the hospital environment.

Objective 7. To measure the intervening effect of the following profile of the respondents in the aspects of age, gender, marital status, length of work experience, employment status, area of assignment, type of hospital affiliated and type of school graduated in relation to work motivation.

Table 27. Analysis of variance by age on work motivation

Source of Variation	Sum of Squares	df	Mean Square	F-value
Regression	2.127	1	2.2127	6.652
Residual	49.233	154	0.320	
Total	51.360	155		

$R^2=0.05$, *significant at $\alpha=0.05$, **significant at $\alpha=0.01$

Table 28. Age coefficient on work motivation

Coefficients	Unstandardized coefficient	t-value	p-value
Constant	2.475	16.781	0.000**
Age	0.012	16.781	0.011*

*significant at $\alpha=0.05$, **significant at $\alpha=0.01$

There are intervening variables that may also explain variation in the regression model. Tables 27 and 28 show the effect of age on work motivation. It shows that age correlates with work motivation positively ($r=0.20$, $p=0.011$), which means as age increases, work motivation also increases. Synonymously, it is expected that highly motivated hospital staff are those who are already advanced in age and those who are less motivated are those who are still young. Age, as a variable, explains about $R^2 100\% = 4\%$ of the variation in the work motivation of the respondents. Thus, age significantly has affected work motivation among hospital staff.

Table 29. Analysis of variance by gender on work motivation

Source of Variation	Sum of Squares	Df	Mean Square	F-value
Regression	0.009	1	0.009	0.027
Residual	51.185	154	0.332	
Total	51.194	155		

$R^2=0.000$

There are 56 male respondents and 100 female respondents. An analysis of variance is constructed in order to determine extent of intervening effect of gender on work motivation. Table 29 shows that gender does not explain work motivation at all ($R^2 100\%=0\%$) and does not have predictive value on work motivation ($F=0.027$, $p=0.870$). Thus, if work motivation cannot be predicted by determining the gender of the respondent, then gender does not have intervening effect on work motivation at all.

It was found in some studies that age and gender are significant factors which affect communication dynamics and work motivation. Younger workers are highly motivated to work with commitment in order to achieve further in their work careers and such motivations are similar to both males and female worker (Brown, 2009; Ensari and Miller, 2007). However, above findings shows the opposite, that is the order the employee is, the higher they are motivated to work. As for gender, there is no intervening effect on work motivation. In a study conducted by Moreute (2008), it was disclosed that married employees' tend to have a higher motivational factor on the economic benefits of work itself because they need a higher income as they have more dependents. However, the study revealed the opposite of it. There are 97 single respondents in the survey and there are 60 respondents who are married or who once have been married (i.e., separated, widowed). Table 30 shows the analysis of variance to show the effect of marital status on work motivation. It shows that gender explain only $R^2 100\%=1\%$ in the variation of work motivation, and therefore 99% is unexplained by marital status as a variable on work motivation. Further, the table shows that marital status does not have predictive value on work motivation ($F=1.773$, $p=0.185$). Thus, if work motivation cannot be predicted by determining the marital status of a hospital staff, then marital status does not have intervening effect on work motivation.

Table 31. Analysis of variance on regression of length of work experience on work motivation

Source of Variation	Sum of Squares	df	Mean Square	F-value
Regression	2.346	1	2.346	7.593
Residual	44.191	143	0.309	
Total	46.537	144		

$R^2=0.05$, *significant at $\alpha=0.05$, **significant at $\alpha=0.01$

Table 32. Length of work experience coefficients on work motivation

Coefficients	Unstandardized coefficient	t-value	p-value
Constant	2.685	42.489	0.000**
Length of work experience	0.017	2.756	0.007*

*significant at $\alpha=0.05$, **significant at $\alpha=0.01$

Tables 31 and 32 show that length of work experience correlates with work motivation positively ($r=0.225$, $p=0.007$), which means the longer they work in the hospital, the higher their motivation for work. Synonymously, it is expected that highly motivated hospital staff are those who have been long in the hospital work. As a variable, length of work experience explains about $R^2 100\%=5\%$ of the variation in the work motivation of the respondents. Thus, length of work significantly affected work motivation among hospital staff.

Table 33. Analysis of variance by employment status on work motivation

Source of Variation	Sum of Squares	df	Mean Square	F-value
Regression	10.995	3	3.665	13.582
Residual	39.936	148	0.270	
Total	50.931	151		

$R^2=0.216$, *significant at $\alpha=0.05$, **significant at $\alpha=0.01$

In the study, there are 14 volunteers, 50 casuals or reliever, 27 probationary employees and 61 regular employees. Table 33 shows that employment status of the respondents does have an effect on their work motivation ($F=13.582$, $p=0.000$). It explains about $R^2 100\%=21.6\%$ of the variation in work motivation. Thus, the employment status of the respondents does have predictive value on work motivation.

Table 34. Analysis of variance by area of assignment on work motivation

Source of Variation	Sum of Squares	df	Mean Square	F-value
Regression	0.161	2	0.081	0.243
Residual	51.199	154	0.332	
Total	51.361	156		

$R^2=0.003$

There are three areas of assignment identified in this study, and these are the Ward, the Special area and other areas. There are 78 respondents assigned in the ward, 68 respondents assigned in the special area, and 11 respondents assigned in other areas. Table 34 shows that area of assignment explains only about $R^2 100\% = 0.3\%$ of the variation in work motivation and that it also does not have predictive value on work motivation ($F=0.243$, $p=0.785$). Thus, area of assignment does not have intervening effect on work motivation.

Table 35. Analysis of variance by type of hospital on work motivation

Source of Variance	Sum of Squares	df	Mean Square	F-value
Regression	2.991	1	2.991	9.586
Residual	48.369	155	0.312	
Total	51.361	156		

$R^2=0.003$

Respondents are affiliated from two types of hospital: public hospital and private hospital. There are 96 respondents coming from the public hospital and there are 61 respondents from the private hospital. Table 35 shows that the type of hospital that the respondents are affiliated explained $R^2 100\% = 5.8\%$ in the variation of their work motivation. Type of hospital has significant effect on work motivation ($F=9.586$, $p=0.002$) and thus it can be used to predict work motivation of hospital staff.

It should however be noted that the type of hospital and employment status are dependent on each other, which means that by taking one variable to explain work motivation, the other variable has already been taken into account. Between the two variables: employment status and type of hospital affiliation, it would be best to take into account type of hospital affiliation as this variable has only two categorical values, which are public hospital and private hospital compared to employment status which has four categorical values, namely, volunteers, casual or reliever, probationary and regular employees.

Thus, summarily, there are only four variables that significantly have an intervening effect on work motivation, and these are age, length of work experience, employment status and type of hospital affiliation.

Objective 8. To measure the significant difference on work motivation between a public and a private employee.

Table 37. Difference in extent of work motivation between respondents of public and private hospitals

Components	Mean		Interpretation
	Public	Private	
Supervision and Leadership	3.07	3.13	Not significantly different
*Standard Deviation	0.569	0.503	
*T-test for Difference in mean	T=-0.742	P=0.459	
Supervision and Fringe Benefits	2.18	2.49	Significantly different
*Standard Deviation	0.935	0.716	
T-test for Difference in mean	T=-2.343	P=0.020	
Promotion	2.55	3.09	Very significantly different
*Standard Deviation	0.820	0.656	
*T-test for Difference in mean	T=-4.258	P=0.000**	
Awards and Recognition	2.75	2.95	Not significantly different
*Standard Deviation	0.706	0.758	
*T-test for Difference in mean	T=-1.689	P=0.093	
Opportunities for Growth & Advancement	2.83	3.17	Very significantly different
*Standard Deviation	0.616	0.654	
*T-test for Difference in mean	T=-3.311	P=0.001**	
Extent of work motivation	2.73	3.01	Very significantly different
*Standard Deviation	0.571	0.539	
*T-test for Difference in mean	T=-3.096	P=0.002**	

Table 37 shows the average extent by which these factors affected work motivation as perceived by the respondents from the public and private hospitals. It shows that respondents from public and private hospitals were motivated about the same extent on some factors. Supervision and leadership ($t=-0.742$, $p=0.459$), awards and recognition provided to them by hospital management ($t=-1.689$, $p=0.093$), working relationships ($t=-1.969$, $p=0.051$) were factors that were perceived by both groups of respondents to have the same effect on their work motivation.

However, these two groups of respondents differ in their perception on how salary and fringe benefits ($t=-2.343$, $p=0.020$), promotion ($t=-4.258$, $p=0.000$), and opportunities for growth and development ($t=-3.311$, $p=0.001$) affected their work motivation. Respondents of the public hospital are less motivated with salary and fringe benefits ($= 2.18$), promotion ($= 2.55$) and opportunities for growth and development ($= 2.83$) than are respondents from the private hospital on salary and fringe benefits ($= 2.49$), promotion ($= 3.09$) and awards and recognition ($= 3.17$). On the overall, respondents of the private hospital ($= 3.10$) were significantly more motivated to work than the respondents of the public hospital (mean=2.73) ($t=-3.096$, $p=0.002$).

CONCLUSIONS

The results showed that both public and private employees perceived their hospital management to sometimes observe communication dynamics. However, between the two hospitals, private employer tends to put into practice communication dynamics better. When the management increases communication dynamics, it positively affects employees work motivation and vice versa. Work motivation can be predicted by means of the type of information flow, Feedback and appropriate timing practiced in each institution.

RECOMMENDATIONS

1. Managers need to focus on the importance of locally assessing conditions and managing incentives to ensure health workers are motivated in their work. They should start leading their team and enforce policies and procedures consistently.
2. Nurse Managers/leaders should be the frontline in enforcing the goods for their subordinates. They must put into practice merit system to

- those deserving employees like giving recognition to their works and accomplishments.
3. In lieu of giving feedback to employees, nurse managers or leaders should put into mind to encourage employees to send written comments or suggestions regarding new memoranda or circulars that will both affect the employer and employees.
 4. Public hospital administrators and nurse managers should take into considerations ways to enhance the motivation of their subordinates. Like for instance in the extent of salary and fringe benefits. They should be heedful and fight for the right of their subordinates in the aspect of enforcing 13th month pay, bonuses, availment of leaves, medical and dental service, and hospitalization and retirement benefits.
 5. Future research should be conducted to further identify extent of work motivation in the hospital environment in relation to communication dynamics exploring other variables not included in the study.

LITERATURE CITED

Alderfer, Clayton P.

1972 Existence, Relatedness, and Growth: Human Needs in Organization Settings. New York: Free Press.

Ambrose, Maureen L.

1990 Old Friends, New Faces: Motivation Research <http://www.uk.sagepub.com/fineman/Reading%20On/Chapter%2004a%20-%20Ambrose%20%and%20Kulik.pdf>.

Armstrong, Michael.

2006 A Handbook of Human Resource Management Practice (10th ed.)

Barrett, Myeong-gu eo Lisa Feldman. The Role of Affective Experience in Work Motivation. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMS1519413>

Bashir, Munira. Motivation for Better Nursing Management. Retrieved November 10, 2011. http://findarticles.com/p/articles/mi_qa4036/is_200509/ai_n15666712/.

Brammer, L.M

2007 The Helping Relationship Process and Skills. New Jersey: Practice Hall
Choudhury, Munmun De et al. Analyzing the Dynamics of
Communication in Online Social Networks. http://research.microsoft.com/enus/um/people/munmund/pubs/bc_springer.pdf.

Comparative Study of Public and Private Sector Hospitals.

2011 Retrieved January 3, 2011-2013. <http://www.human-resources-health.com/content/8/1/27>

Daft, R.L.

2006 Management (6TH Ed.). Thomson Learning.

Dale, Ernest

2008 Management: Theory and Practice. New York: Mc Graw Hill Book Co.

Devadass, Rajeswari. Employees Motivation in Organizations: An Integrative Literature Review. <http://www.ipedr.com/vol10/106-S10089.pdf>.

Gellerman, Saul W.

2007 Motivation and Productivity. New York: AMA Inc.

Gupta K. Sashi & Joshi Rosy

2008 *Human Resource Management*, Ph (20.9 to 20.17)

Hardik Shah & Hiral Shah

2008 Job Satisfaction and Fatigue Study. SCMS-COCHIN Journal date: 19th
dec, 09 and time:3.30am [Online] Available: http://managementhelp.org/person_wll/job_satisfaction

Hardwood, Jake. The Family and Communication Dynamics of Group Salience.

The Journal of Family Communication, 6(3), 181-200. <http://www.u.arizona.edu/~jharwood/pdf/Hardwood%20raman%20and%20hewstone.pdf>

Herzberg, F., Mausner, B. and Snyderman, B. B. The Motivation to Work. New York: John Wiley & Sons.

Herzberg, Mausner, B. Peterson, R.O and Capwell, D. F.

2008 Job Attitudes: Review of Research and Opinion. Pittsburg: Psychological Service of Pittsburg.

Incentives, Motivation and Workplace Performance: Research & Best Practices.

2011 <http://www.loyaltyworks.com/incentive-program-research-articles/ispifullpdf.pdf>. International Journal of Business and Management Vol. 5, No. 11.

Job Satisfaction and motivation of health workers in public and private sectors:

2010 cross-sectional analysis from two Indian states. Published 25 November; Retrieved January 3, 2013. <http://www.human-resources-health.com/conten/8/1/27>

Kosteas, Vasilios, D.

2009 Job Satisfaction and Promotions. *Social science research network* (1-2) Latham, Gary P. Work Motivation Theory and Research at the Dawn of the Twenty-First Century. <http://homr.ubalt.edu./tmitch/6422/Articles%20syllabus/Latham%20%26%20Pinder%20wk%20mot%20an%20rev%2005.pdf>.

Locke, Edwin and G. Lantham

2000 A Theory of Goal Setting and Task Performances. New Jersey: Practice Hall Inc.

Maslow, Abraham H.

2006 Motivation and Personality. New York: Harper & Row.

McClelland, David C.

“Business Drive and National Achievement” Harvard Business Review, 99-112.

MacCoby, M.

2007 Why Work? Motivating the New Workforce. Virginia, USA: Milles River Press Modeling Human Communication Dynamics. <http://multicomp.ict.usc.edu/wordpress/pdfs/Morency-HDC.pdf>.

- Morente, Noemi
2008 "Work Motivation among Nurses in SDA Hospitals." Masteral Thesis, LDCU. Motivation. Retrieved on November 10, 2011. <http://train-srv.manipalu.com/wpress/?p=95457>.
- Pincus, David. Communication Satisfaction, Job Satisfaction, ND Job Performance.
<http://onlinelibrary.wiley.com/doi/10.1111/j.1468-2956.tb00084.x/abstract>
- Pragmatics of Human Communication. New York: W.W. Norton
- Rejender, Krishan. Understanding the Communication Dynamics. From
<http://www.boloji.com/index.cfm?md=Content&sd=Articles&ArticlesID=3242>.
- Renee, Michelle. The Best Ways to Motivate Employees.
<http://www.ask.com/wen?q=nurses+motivation+and+communication+dynamics+research+results&search=&qsrc=0&o=10181&l=dir>
- Seven Rules of Motivation. Retrieved on November 10, 2011. http://www.motivation-tools.com/elements/seven_rules.htm
- Steers, Richard M. Mowday, Richard T., Shapiro, and Debra L. The Future of Work Motivation Theor. –Academy of Management Review. 03637425, Jul2010, Vol.29, Issue 3.
- Steers, Richard M. Mowday, et al. The Future of Work Motivation Theory <http://home.hio.no/~araki/arabase/emne/ricardo05b.pdf>
- Stonerz, James A. Management. New Jersey: Prentise Hall, Inc
- Strand, Ron. Communication Dynamics of Meetings. <http://ezinearticles.com/?Communication-Dynamics-of-Meetings&id=5182085>
- Tappen, Ruth M.
2007 Nursing Leadership and Management. New York: Mc Graw Hill Co.

- Inc. The Best Ways to Motivate Employees. | <http://www.speakstrong.com/resources/how-to/65-new-communication-dynamics-that-transform/173-new-dynamics>.
- Vakorin, Vasily A. Empirical and Theoretical Aspects of Generation and Transfer of Information in a Neuromagnetic Source Network. http://www.frontiers.org/systems_neuroscience/10.3389/fnsys.2011.00096/abstract.
- Velnampy, T.
2007 Job Attitude and Employees Performance of Public Sector Organizations in Jaffna District, Sri Lanka. *GITAM Journal of Management*, Vol. 6, Issue-2, Pg (66-73) Watzlawick, Pet al.
- What is Employee Satisfaction?. (n.d). Retrieved December 16, 2009; 12.34AM [Online] Available: <http://www.wisegeek.com/what-is-employee-satisfaction.htm>
- Willis-Shattuch M, Bidwell P, Thomas S, Wyness L, Blaaw D, Ditlopo P: Motivation and retention of health workers in developing countries: a systematic review. *BMC Health Serv Res* 2008, 4(8): 247.
- Wolf, G.A
2006 Communication: Key Contributor to Effectiveness. *Journal of Nursing Administration*, 16 (9).
- Wright, Bradley E. Public-Sector Work Motivation: A Review of the Current Literature and a Revised Conceptual Model. <http://sangyubr.diles.wordpress.com/2012/public-sectore-work-motivation.pdf>.
- Wuchty, Stefan. Human Communication Dynamics in Digital Footsteps: A Study of the Agreement between Self-Reported Ties and Email Networks. <http://www.plosone.org/article/info:doi/10.1371/journal.pone.0026972>
- Yair Re'em. Motivating Public Sector Employees. http://www.heartieschool.org/fileadmin/imahes/Downloads/working_papers/60.pdf

Zainbooks.

What is the Definition of Nature of Motivation? Retrieved November 10, 2011. <http://mba.zainbooks.com/terms/management/what-is-the-definition-nature-of-motivations.shtml>