



งานที่มีความหมายและการปฏิบัติงานของพยาบาลใน โรงพยาบาลมหาวิทยาลัยการแพทย์สาธารณสุขรัฐประชาชนจีน

Meaningful Work and Job Performance Among Nurses in Medical University Hospitals, The People's Republic of China

ทง	ลิง *	Tong	Ling*
ฐิตินัฐ	อักคะเดชอนันต์ **	Thitinut	Akkadechanunt**
สมใจ	ศิริกมล **	Somjai	Sirakamon**

บทคัดย่อ

งานที่มีความหมายเป็นปัจจัยสำคัญที่มีอิทธิพลต่อการปฏิบัติงานของพยาบาล การศึกษาเชิงพรรณนาหาความสัมพันธ์ครั้งนี้มีวัตถุประสงค์เพื่อระดับของงานที่มีความหมายการปฏิบัติงาน การปฏิบัติ และศึกษาความสัมพันธ์ระหว่างงานที่มีความหมายกับการปฏิบัติงาน และการปฏิบัติงานของพยาบาลที่ทำงานในโรงพยาบาลมหาวิทยาลัยการแพทย์ สาธารณรัฐประชาชนจีน เลือกกลุ่มตัวอย่างจำนวน 389 คนโดยใช้การสุ่มแบบชั้นภูมิจากพยาบาลที่ปฏิบัติงานในโรงพยาบาล มหาวิทยาลัยการแพทย์ 4 แห่ง ในเมืองฮาร์บิน เครื่องมือที่ใช้ในการวิจัยได้แก่ 1) แบบบันทึกข้อมูลส่วนบุคคล 2) เครื่องมือวัดการทำงานและความหมายของงาน (WAMI) ซึ่งพัฒนาโดย Steger et al.(2012) และแปลเป็นภาษาจีนโดยผู้วิจัย และ 3) แบบวัดการปฏิบัติงานฉบับย่อ (SJPS) ซึ่งพัฒนาโดย Greenslade (2008) และแปลเป็นภาษาจีนโดย Lin(2012) ซึ่ง เครื่องมือ WAMI และ SJPS ได้รับการตรวจสอบความตรงและความเที่ยงเรียบร้อยแล้ว วิเคราะห์ ข้อมูลโดยใช้สถิติเชิงพรรณนาและสัมประสิทธิ์สหสัมพันธ์ของเพียร์สัน

ผลการศึกษาพบว่า งานที่มีความหมาย สมรรถภาพของงาน และสมรรถภาพของบริบท ตามการรับรู้ของพยาบาลอยู่ในระดับปานกลาง งานที่มีความหมายมีความสัมพันธ์ทางบวกในระดับปานกลางกับสมรรถภาพของงาน และการปฏิบัติงานอย่างมีนัยสำคัญทางสถิติ

ผลการวิจัยครั้งนี้สามารถใช้เป็นข้อมูลพื้นฐานสำหรับผู้บริหารโรงพยาบาลและผู้บริหารทางการพยาบาลในการจัดทำแผนและกลยุทธ์ในการพัฒนางานให้มีความหมาย เพื่อที่จะเป็นการเพิ่มความสามารถในการปฏิบัติงานของพยาบาล ในโรงพยาบาลมหาวิทยาลัยการแพทย์ สาธารณรัฐประชาชนจีนต่อไป

คำสำคัญ: งานที่มีความหมาย การปฏิบัติงาน พยาบาล

* พยาบาลวิชาชีพ,โรงพยาบาลมหาวิทยาลัยการแพทย์,สาธารณสุขรัฐประชาชนจีน

* Professional Nurse, The Third Affiliated Hospital of Harbin Medical University, The People's Republic of China

** ผู้เขียน,ผู้ช่วยศาสตราจารย์ คณะพยาบาลศาสตร์ มหาวิทยาลัยเชียงใหม่

** Corresponding author, Assistant Professor, Faculty of Nursing, Chiang Mai University,tongling7891@163.com



Abstract

Meaningful work is a significant factor that has an effect on job performance among nurses. The purposes of this descriptive correlational study were to identify the level of meaningful work, task performance, and contextual performance, and to examine the relationship between meaningful work and task performance as well as contextual performance among nurses working in medical university hospitals in The People's Republic of China. Stratified random sampling was used to select 389 nurses working in four medical university hospitals in Harbin. The research instruments included: 1) Demographic Data Form, 2) The Work and Meaning Inventory (WAMI) developed by Steger et al. (2012) and translated into Chinese by the researcher, and 3) Shortened Job Performance Scale (SJPS) developed by Greenslade (2008) and translated into Chinese by Lin (2012). The validity and reliability of both WAMI and SJPS were confirmed. The data were analyzed using descriptive statistics and Pearson's correlation analysis.

The results revealed that: Meaningful work, task performance and contextual performance as perceived by nurses were at a moderate level. There was a statistically significant positive correlation between meaningful work and both task performance and contextual performance at a moderate level.

The results of this study could be used as basic information for nurses and hospital administrators to develop plans and strategies to enhance meaningful work in order to improve job performance among nurses in Medical University Hospitals in The People's Republic of China.

Keyword: Meaningful Work, Job Performance, Nurses

Background and Significance

Healthcare organizations are continuously developed while providing high-quality healthcare, as the ultimate objective of the health care system. In China, 46% of nurses work more than 11 hours per day, and 35% of nurses work more than 6 days a week (Lan, Zhao & Yang, 2007). The standard ratio of nurse to hospital beds were at 1:0.4. However, in the Third Affiliated Hospital of Harbin Medical University, during the day shift, one nurse takes care of 15 patients while one nurse takes care

of 40-50 patients during the night shift (Third Affiliated Hospital of Harbin Medical University, 2011). This high workload has an impact on nurses' job performance and ability to provide quality care to patients. Greenslade and Jimmieson (2007) developed a new model of job performance based on Borman and Motowidlo's (Borman & Motowidlo, 1993) and defined job performance as work behaviors which can be classified into two domains: task performance and contextual performance. Task performance refers to behaviors that directly



contribute to the technical core of the organization, including activities, which are commonly considered as part of the job. Contextual performance is defined as behaviors that sustain the social environment from which the technical core functions. It comprises a number of intentional behaviors that assist in general hospital operations. Various initiatives introduced a model of job performance into the nursing profession. Task performance included three dimensions: social support, information provision, and technical care; contextual performance included three dimensions: interpersonal support, job-task support, and organizational support (Greenslade, 2008).

Lin (2012) studied job performance among 448 nurses in six tertiary hospitals in Yunnan Province, The People's Republic of China. The result showed that the scores of task and contextual performance were at a moderate level. The same result was found by Greenslade and Jimmieson (2007b). Fathimath (2012) studied job performance among 382 nurses in the Tertiary Care Hospital, Maldives. The results showed that the scores of task performance were at a high level, while the scores of contextual performance were at a moderate level. These findings showed that the results of task performance and contextual performance presented inconsistently between different settings and countries. Moreover, there is no study regarding job performance among nurses in university hospitals of Harbin using the SJPS instrument.

Several factors have been found related to job performance including job characteristics (Pu, 2010), job stress (Wang, 2011), job satisfaction

(Nabirye, Brown, Pryor, & Maples, 2011), fatigue (Lin, 2012), years of experience, education level, and emotional intelligence (Lieu, 2013). Meaningful work is one of the most important components predicting job performance (Indradevi, 2012). Meaningful work was seen as an important psychological state that affects work performance (Hackman & Oldham, 1976). Duchon and Plowman (2005) also suggested that organizations can expect higher job performance if managers foster meaningfulness of work. Tuuli and Rowlinson (2009) proved that job performance depends on meaningful work for management-level staff in a company (Tuuli & Rowlinson, 2009).

Steger, Dik, and Duffy (2012) defined meaningful work as the nurses' perception of their work that is significant and positive in meaningfulness with a growth-and purpose-oriented focus, rather than pleasure-oriented. Meaningful work includes three subscales: (1) Positive meaning (PM): the sense that people judge their work to matter and be meaningful or as having significance and purpose. (2) Meaning making (MM) through work: the sense that people view their work as what helps people deepen their understanding of themselves and the world around them, and facilitates their personal growth or work that contributes to a broader sense of meaning in life, (3) greater good (GG), and motivations: The reflection of ideas that work is most meaningful if it has a broader impact on others. The result of a study regarding meaningful work among 370 employees in a large Western university in America found that the overall score of MW was at high level and the score of PM and MM were



at moderate level while the score of GG was at high level. Moreover, the GG subscale received the highest ratings per item followed by the PM and MM subscales. The results also showed that GG is more obvious for measuring meaningful work (Steger, Dik & Duffy, 2012).

Because of the nursing shortage and heavy workload in China, nurses had no time to provide emotional support for the patients because their working hours and energy were spent on routine nursing tasks (Yang, Shao, Yang, Ying, and Dong, 2009). Routine nursing tasks are the largest burdens for nurses, often forcing them to work overtime (Yang et al., 2009). In the Third Affiliated Hospital of Harbin Medical University, the majority of physicians hold a master's degree. Some hold PhDs. However, 50% of nurses hold a nursing diploma, 39% hold a nursing associate degree, and 11% hold a bachelor's degree. Only 3 nurses currently hold a master's degree (Third Affiliated Hospital of Harbin Medical University, 2011). In addition, frequent in-house education programs are not offered for nurses. Some nurses perceived that nursing has less meaning than other professions. When patients come to hospital for care, they ask for assistance from physicians, not nurses. Patients perceive that nurses are only service personnel. Therefore, nurses usually do not receive enough respect from patients and hospital managers. The feeling of inferiority or lack of pride in the work-life of Chinese nurses at Harbin Medical University Hospital may have an impact on their job performance. Hunt (2009) found that nurses find meaning through their work having an impact on people's lives, and being valued and appreciated by others (Hunt, 2009), not from

the work itself.

According to this observed situation in China, it became necessary to conduct this study examining meaningful work and job performance among nurses at Harbin Medical University. The result of this study would provide a better understanding of meaningful work as it relates to job performance. It can also provide basic information and evidence for nursing administrators to organize efficient planning and effective strategies to recover meaningful work in nurses. Consequently, it could be expected that job performance of staff nurses would be improved.

Objectives

This descriptive correlational study aimed at examining meaningful work and job performance, understanding the relationship between meaningful work and task performance, and the relationship between meaningful work contexts among nurses in medical university hospitals, within The People's Republic of China.

Conceptual Framework

The conceptual framework of job performance is based on Greenslade and Jimmieson's model of nurses' job performance (2007). Job performance refers to working behaviors, which can be classified into two domains: task performance and contextual performance. The meaningful work based on the model of meaningful work developed by Steger et al., (2012). Meaningful work includes three dimensions: (1) Positive meaning (PM), (2) Meaning making (MM), and (3) Greater good (GG) motivations (Steger et al., 2012). Meaningful work



is the most important component that has an impact on job performance (Inderadev, 2012). The relationship between meaningful work and job performance was examined in this study.

Methodology

Research Design

This descriptive correlational research was designed to examine meaningful work and job performance and to examine the relationship between meaningful work and task performance as well as contextual performance among nurses in medical university hospitals, in The People's Republic of China.

Population and Sample

The target population of this study included 3,708 nurses who have worked for at least one year in four University Hospitals of Harbin Medical University (HMU), China. The sample was selected from nurses working in the clinical department for at least 1 year. The sample size of this study, calculated by the formula of Yamane (1973), was 361. Considering the possible loss of subjects, 10% of the sample size was added, bringing the total sample size to 397. Proportionate random sampling was used to select subjects from the name list of nurses working in each clinical nursing department of these four hospitals.

Research Instrument

The instrument used for data collection was a questionnaire composed of three parts:

1) The Demographic Data Form was developed by the researcher and consisted of gender, age, marital status, and educational level, number of working years, department/section and employment type.

2) The Work and Meaning Inventory (WAMI) developed by Steger et al., (2012) consisted of 10 items of meaningful work including 4 items of positive meaning, 3 items of meaning-making through work, and 3 items of greater good motivations. Each item was rated using a five-point Likert-type scale ranging from 1: strongly disagree to 5: strongly agree. A higher score indicated a higher perception of meaningful work. The mean score was classified into three levels approved by the developers: low level, moderate level, and high level. This instrument was translated into Chinese, using a back-translation technique and checked for the equivalence of the translation back into English, and compared to the original version by Steger. The internal reliability of WAMI was tested with 30 nurses who had the same criteria for the subjects in the First Affiliated Hospital of Harbin Medical University. The Cronbach's alpha coefficient of WAMI was .83.

3) The Chinese version of the Shortened Job Performance Scale (SJPS), translated by Lin (2012) consisted of 11 items of task performance and 14 items of contextual performance. The questions regarding task performance were answered on 7-point Likert scales ranging from poor (1) to excellent (7). The items regarding contextual performance were answered on 7-point Likert scales ranking from never (1) to often (7). A higher score indicated a higher perception of task and contextual performance. Base on Lin (2012), the mean score of task performance and contextual performance was classified into low level, moderate level, and high level. The internal consistency reliability was tested with 30 nurses who had the same



criteria as the subjects in the First Affiliated Hospital of Harbin Medical University. The Cronbach's alpha coefficient of the task performance and contextual performance were 0.81, 0.81, respectively.

Ethical Consideration

Ethical approval was obtained from the Research Ethics Review Committee, Faculty of Nursing, Chang Mai University, Thailand, and directors of the Nursing Department in China where the data were collected. All participants were informed about the purpose and methods of data collection in this study. They were informed that participation in the study was voluntary and they had right to refuse, stop, or withdraw from the study at any time. A research consent form was sent to subjects to assure the protection of their human rights. A statement was included in a cover letter to guarantee anonymity of individual responses, and confidentiality was maintained throughout the study. Information and results were used only for this study.

Data Collection

After receiving approval from the Research Ethics Review Committee of Faculty of Nursing, Chiang Mai University, the research proposal, a letter for permission to collect data, and the package of instruments were submitted to nursing directors of the four hospitals. After receiving permission, the research coordinators assigned by the hospital's directors distributed and collected the questionnaires and informed consent from the locked box provided in the nursing department of each hospital. Three hundred and ninety (98.24%) questionnaires were returned. Only one was incomplete,

therefore, 389 (97.98%) were used for data analysis.

Data Analysis

Data were analyzed via a statistical software package. Descriptive statistics were used to analyze frequency, percentage, range, mean, and standard deviations of the demographic data, meaningful work, and job performance. Pearson's correlation analysis was used to examine the relationship between meaningful work and task performance as well as the relationship between meaningful work and contextual performance.

Results

Demographic Data of the Participants

The participants consisted of 389 nurses from seven units of four medical university hospitals. The age of the participants ranged from 20 to 52 with average age was 28.83. The majority of the participants (65.30%) were between 20-30 years old, and about half of the participants had never married (52.70%). Approximately 60 percent of the participants held a diploma. The majority of the participants (74.29%) had been working for 2-10 years, and the mean of working experience was 7.73 years ($SD = 6.18$), and almost 70 percent were employees. The majority of the participants (15.94%) worked in the medical department.

Meaningful Work

As shown in Table 1, the participants perceived overall meaningful work and dimension of greater good motivations at a moderate level ($\bar{x} = 35.61$, $SD = 6.73$ and $\bar{x} = 9.83$, $SD = 2.32$ respectively). Positive meaning and meaning-making through work were perceived



by participants at a high level (\bar{x} = 14.40, SD=3.23, = 11.38, SD=1.96 respectively).

Table 1 Means, Standard Deviations, Range and the Level of Overall and Subscales of Meaningful Work as Perceived by the Subjects (n = 389)

Meaningful work	Range	Mean	SD	Level
Overall meaningful work	10.00-50.00	35.61	6.73	Moderate
Positive meaning (PM)	4.00-20.00	14.40	3.23	High
Meaning making (MM) through work	3.00-15.00	11.38	1.96	High
Greater good (GG) motivations	3.00-15.00	9.83	2.32	Moderate

Job Performance

As indicated in Table 2, the participant's perceived overall task performance was at a moderate level (\bar{x} = 48.73, SD = 7.71). Two dimensions of social support and information provision were at moderate levels (\bar{x} = 13.67, SD=7.71 and \bar{x} = 19.95, SD=3.24 respectively) and the dimension of technical care was at a high

level (\bar{x} = 15.12, SD = 2.75). Nurses' perceived overall contextual performance was at a moderate level (\bar{x} = 60.43, SD = 10.25). Three dimensions of contextual performance including interpersonal support, job-task support, and organizational support, were at moderate level \bar{x} = 24.99, SD=3.83, \bar{x} = 14.56, SD=3.96, and \bar{x} = 20.88, SD=4.85 respectively).

Table 2 Means, Standard Deviations, Range and the Level of Task and Contextual Performance as Perceived by the Subjects (n = 389)

Job performance	Range	Mean	SD	Level
Overall task performance	11.00-77.00	48.73	7.71	Moderate
Social support	4.00-28.00	13.67	3.98	Moderate
Information provision	4.00-28.00	19.95	3.24	Moderate
Technical care	3.00-21.00	15.12	2.75	High
Overall contextual performance	14.00-98.00	60.43	10.25	Moderate
Interpersonal support	5.00-35.00	24.99	3.83	Moderate
Job-task support	4.00-28.00	14.56	3.96	Moderate
Organizational support	5.00-35.00	20.88	4.85	Moderate



Relationship between Meaningful Work and Task
Performance as well as Contextual Performance

In Table 3, there was a significant positive

relationship between meaningful work and task
performance as well as contextual performance

($r = .44$ and $r = .49$, respectively).

Table 3 Relationship Between Meaningful Work and Task Performance and Contextual Performance
($n = 389$)

	Meaningful work
Task performance	.44*
Contextual performance	.49*

* $p < .01$

Discussion

1. Meaningful work among nurses in
Medical University Hospitals, The People's
Republic of China.

The results of this study show that nurses
in Harbin Medical University Hospitals perceived
the overall meaningfulness of their work at a
moderate level ($\bar{x} = 35.61$, $SD = 6.73$). This shows
that nurses perceive that work matters for their
own sake and it makes an important, generative
contribution to their quality of life. Under these
circumstances, work is likely experienced as
motivating, satisfying, meaningful, and a rich part
of their experience in life. However, some nurses
cannot perceive meaningfulness in their job
because of a heavy workload, have no further
opportunities to study, and feel a lack of
appreciation from head nurses. Therefore, the
overall score for meaningful work was at
moderate level. The following sections will focus
on discussion about each subscale of meaningful
work in detail.

Positive meaning (PM)

The results of this study show that nurses
in Harbin Medical University Hospitals perceived
PM at high level ($\bar{x} = 14.40$, $SD = 3.23$). The

possible explanation is that, in clinical work,
nurses clearly understand the purpose of their
own work and they can effectively complete
the task. In clinical work, head nurses and nursing
staffs attend a morning meeting. The head nurse
will assign tasks for each nurse. Therefore, every
nurse clearly understands their own responsibility.
Because each nurse has their own responsibility
in their job, they know how to make their job
meaningful. Since nurses in Harbin were offered
a salary high enough to take care of their
families, they feel that their job had satisfying
purposes. Thus, nurses felt meaningfulness in
their career. The mean score of this study was
higher than a previous study conducted by
Steger et al., (2012) ($\bar{x} = 15.12$, $SD = 4.01$) in
America. Chinese nurses are willing to provide
treatment, care, medication guidance, and
comfort to patients in hospital. Therefore, they
feel more meaningfulness in their job than the
nurses in the US.

Meaning making (MM) through work

The results of this study show that nurses
in Harbin Medical University Hospitals perceived
MM at a high level ($\bar{x} = 11.38$, $SD = 1.96$). The
possible explanation is that nurses need to



communicate with their colleagues, doctors, and patients. This process can ensure nurses better understand themselves and others, thus facilitating their personal growth, or work that contributes to a better sense of meaning in life. In their daily routine, nurses can accumulate work experience through communication, finding their own mistakes, and correcting them. Nurses constantly grow in the process and understand more about the world around them. The mean score of this study was higher than a previous study conducted by Steger et al., (2012) (\bar{x} = 10.70, SD = 3.05) in America. The possible explanation is the different nature of work. The nature of a nursing job is different from others. Nurses need to exert more patience and carefulness than other occupations. The nursing profession can be seen as a special service for serving patients. Nurses not only need professional knowledge but also need empathy and communication skills.

Greater good (GG) motivations

The results of this study show that nurses in Harbin Medical University Hospitals perceived GG at a moderate level (\bar{x} = 9.83, SD = 2.32). One possible explanation is nurses usually do not receive enough respect from patients and hospital managers. When patients are admitted, they ask for help from doctors, not nurses. Patients perceived that nurses are only assistants and that the doctor is responsible for treatment, while nurses are responsible for care. Therefore, nurses feel that their work cannot make any difference to the world. Another possible reason for the perceived GG at a moderate level is low education levels among nurses. Hospital managers and patients give more respect to

those who are highly educated. However, nurses who hold a diploma, do not get enough professional attention from hospital leaders. Therefore, nurses do not feel a greater purpose in their job. Because of this heavy burden in their daily work, most of the participants in this study had no chance for further study. For participants holding a diploma, they have the lowest salary level and status in the hospital. Their burden is generally heavy, therefore they have a very negative attitude towards work. For participants holding associate's degrees, although they are able to attain a higher salary than non-degree holding nurses, they are still responsible for the same job as those not holding a diploma. Therefore, the participants holding an associate's degree do not feel a greater purpose in their job. The mean score of this study was lower than previous study conducted by Steger et al., (2012) (\bar{x} = 11.80, SD = 2.85) in America. The possible explanation is due to different educational backgrounds and culture. Equality and respect are favored in America. Every individual, regardless of profession or degrees, receives equal respect. In China, the more educated a person is, the more meaningful their work is perceived by the population.

2. Job performance among nurses in Medical University Hospitals, The People's Republic of China.

The overall task performance as perceived by nurses in Harbin Medical University Hospitals were at a moderate level (\bar{x} = 48.73, SD = 7.71). This shows that nurses provide patients with bad social support and information. In clinical work, nurses are more focused on technical care because most of them feel that administering



medications and treatments is more important work. Providing emotional care is not good for patients and their families at Harbin Medical University Hospitals because most nurses do not give priority to social support in clinical work. However, the majority of nurses value technical care, as this can produce very serious consequences when mistakes occur. Therefore, task performance was at a moderate level at Harbin Medical University Hospitals. The result is consistent with a previous study conducted by Lin (2012) in Kunming, China. The following sections will focus on discussion about each dimension of task performance in detail.

Task performance

Task performance included three dimensions of social support, information support and technical care that concerned the behaviors directly targeting the patients. Social support was at a moderate level (\bar{x} = 13.67, SD = 3.98) as well as information support (\bar{x} = 19.95, SD = 3.24). However, technical care was at a high level (\bar{x} = 15.12, SD = 2.75).

Social support, which refers to activities in terms of providing emotional support to patients and their families, was at a moderate level. It is possible that nursing work in China does not emphasize these activities (Wang, Jin & Meng, 2009). The result found by Yang et al., (2009), supports this. They stated that nurses have no time to provide emotional support for patients because their working hours and energy were spent mainly on nursing routine. Nursing routine is the largest burden for nurses which often forces them work overtime. In turn, it limits nurses in providing patients with emotion support (Gurses, Carayon & Wall, 2009).

Consequently, supporting information was at a moderate level. Nonetheless, medication administration scores were high, since clinical care focuses on those behaviors that are the most urgent and essential for the patients, such as medication administration, intravenous injections, indwelling catheter, and respiratory needs (Lan, Zhao & Yang, 2007). According to Lin (2012), in clinical nursing work, such as medication treatment or patient monitoring, nurses must provide high quality. Thus, technical care was at a high level.

Contextual performance

The overall contextual performance as perceived by nurses in Harbin Medical University Hospitals were at a moderate level (\bar{x} = 60.43, SD = 10.25). Due to heavy work, nurses have no extra time to handle the patient's additional needs (Zhang, 2007). Nurses pay more attention to complete their tasks without help from each other. In clinical work, nurses cannot meet the needs of patients with additional requirements. Three dimensions of contextual performance were all at a moderate level; interpersonal support was 24.99 (SD = 3.83), job-task support was 14.56 (SD = 3.96), and of organizational support was 20.88 (SD = 4.85).

Interpersonal support refers to some interaction behaviors between members of the team. The moderate level in this dimension indicates that nurses could not offer better job performance through team collaboration. This might be because of poor mutual trust existing between nurses and hospitals and the little support nurses received from their supervisors and co-workers (Xiao, 2008). In Chinese hospitals, nurses barely ask for help when they engaging



problems. This results from a lack of mutual trust in the working environment (Wang & Ye, 2004). Thus, interpersonal support was at a moderate level.

Job-task support means some working behaviors beyond job requirements in order to provide patient care. For nurses who have been loaded with heavy work burdens, difficulties or responsibilities, it is difficult for them to offer additional work beyond job requirements (Wang, Zhao & Gao, 2007). In addition, because of a nursing shortage and heavy workload, nurses have no time to provide extra care to patients. Therefore, job-task support was at a moderate level.

The dimension of organizational support focuses on enhancing nurses' abilities and job performance in order to benefit the organization. Nurses in China showed low job satisfaction because they were usually regarded as an under-supported group in the hospitals with less opportunity for them to be promoted and to pursue further study (Qiao & Wang, 2010). Thus, nurses frequently failed to associate their personal interests with organizational interests and failed to attribute good organizational support to their job (Jimmieson & Griffin, 1998). Therefore, organizational support was at moderate level.

3. Relationship between meaningful work and task performance

The results showed a significant positive relationship between meaningful work and task performance ($r = .44, p < .01$). This indicates that the provision of ideal task performance by nurses working in Harbin, China was mainly influenced by how meaningful the work was

perceived by nurses. In other words, if meaningful work was good, task performance would also be good.

When nurses reflect on meaningfulness in their jobs, they realize the purpose of their work more clearly, thus producing positive meaning in such work. The benefits of their work towards patients encourages them to work actively and provides emotional support and information to the patients and their families. However, when nurses have a negative attitude to their job, they will not be able to provide extra care to the patients. They just complete their basic tasks. Thus, they might not be aware of the patients' real needs. In addition, if work can promote growth and help nurses to understand themselves and the world around them, they will be able to provide better care for the patients. The process of growth makes them more patient and careful in their work. Thus, nurses will provide better assistance to the patients with daily activities, treatments, and medication. In clinical work, nurses should not only have professional knowledge and nursing skills but also mindfulness and patience. In this way, nurses can provide patients with a good quality of nursing care.

Therefore, when nurses reflect on meaningfulness in their jobs, they will feel that their jobs became more interesting and that their jobs are valuable. Once nurses find meaning and purpose, the level of meaningful work will become higher, thus task performance will rise as well.

4. Relationship between meaningful work and contextual performance

The result showed a significant positive



relationship between meaningful work and contextual performance ($r = .49, p < .01$). This indicates that the provision of ideal contextual performance by nurses working in Harbin, China was mainly influenced by meaningful work perceived by nurses.

When nurses perceive that their jobs have significance, purpose, and broad impact on others, they will have a positive working attitude, not only for work but also for their nursing colleagues. Therefore, when their colleagues have problems, they will offer to help them, which subsequently improves trust between each other. In clinical work, maintaining a negative working attitude could discourage nurses from providing extra services for patients or spending extra time responding to the needs of patients. However, if nurses can perceive positive meaning in their jobs, they can go beyond job requirements and provide holistic care for patients. In addition, if their jobs facilitate their personal growth, which contributes to a broader sense of meaning in life, they will treat the nursing department like their own home, ensuring that materials and equipment are not wasted.

Therefore, a high level of meaningful work will lead to a high level of contextual performance from within the nursing field.

Conclusions

The results of the study showed that the participants perceived their meaningful work and task performance, as well as contextual performance, at moderate levels. The result also showed a moderately significant positive relationship between meaningful work and task

performance, as well as meaningful work and contextual performance.

Implications

1. The results of the research in terms of meaningful work could provide a new data for nursing managers, by which they may explicitly identify the underlying reason for any moderate levels of meaningful work, which can help them in redesigning nursing work practice. Encouragement and offers of more professional development opportunities for continuing education for nursing staff can improve the level of meaningful work in medical university hospitals.

2. The results of job performance in terms of task and contextual performance could allow hospital managers to acknowledge the performance of both core duties and additional duties. The moderate level of job performance perceived by nurses would provide information to nursing managers to identify problems at work and handle them in an effective way. Nurse administrators may reconsider developing a nurse staffing plan, in order to reduce workload as well as to aid in creating a helpful and harmonious atmosphere to enhance interpersonal relationships among nurses. In addition, nurse administrators should provide sufficient support for their nurses whenever necessary.

Recommendations

The results of this study support some evidence, whereby nursing job performance is influenced by the level of meaningful work among nurses in medical university hospitals in



The People's Republic of China. Based on the findings of the study, the following recommendations for further study include:

1. Future research to replicate this study in university hospitals in other regions of China, and to compare the results of those studies to this research.
2. Job performance among nurses needs

to be studied with other related factors, such as demographic characteristics, and work environment.

Acknowledgment

A sincere appreciation is expressed to Chiang Mai University and also to everyone who helped support this study.

References

- Bonnan, W. C., & Motowidlo, S. J. (1993). Expanding the criterion domain to include elements of contextual performance. In N. Schmitt & W. C. Bonnan (Ed.), *Personnel Selection in Organizations* (pp. 71-99). San Francisco: Lossey-Bass.
- Goodell, T. T., & Coding, H. V. E. (1994). Outcomes of nurses' job satisfaction. *Journal of Nursing Administration*, 24(11), 36-41.
- Greenslade, H. J., & Jimmieson, N. L. (2007). Distinguishing between task and contextual performance for nurses: Development of a job performance scale. *Journal of advanced Nursing*, 58(6), 602-611.
- Greenslade, H. J. (2008). *The Organizational Factors Impacting on Patient Satisfaction: An Examination of Service Climate, Effort, and Performance*. Unpublished Doctoral Dissertation, School of Psychology, The University of Queensland, Australia.
- Hackman, J. R., & Oldham, G. R. (1976). Motivation through the design of work: Test of a theory. *Organizational behavior and human performance*, 16(2), 250-279.
- Hjortdahl, P., & Lxrum, E. (1992). Continuity of care in general practice: Effect on patient satisfaction. *BMJ*, 304, 1278-1290.
- Hunt, R. J. (2009). *Meaningful moments in public health nursing*. Paper presented at the American Public Health Association, Philadelphia, PA.
- Indradevi, D. (2012). The impact of psychological empowerment on job performance and job satisfaction in Indian software companies. *International Journal of Multidisciplinary Management Studies*, 2.
- Lan, M. J., Zhao, R. W., & Yang, Y. (2007). Study for the effects of nurse extended working hours on daily fatigue and job satisfaction [Chinese version]. *Journal of Nurses Training*, 24, 2214-2216.
- Lin, K., (2012). *Fatigue and Job Performance Among Nurses in Tertiary Hospitals, Yunnan Province, The People's Republic of China*. (Unpublished master's thesis). Chiang Mai University, Chiang Mai, Thailand.



- Lieu, P. T. (2013). *Factors related to Job Performance among Nurses in Tertiary General Hospitals, The Northern Region, The Socialist Republic of Vietnam*. (Unpublished master's thesis). Chiang Mai University, Chiang Mai, Thailand.
- Nabirye, R. C., Brown, K. C., Pryor, E. R., & Maples, E. H. (2011). Occupational stress, job satisfaction and job performance among hospital nurses in Kampala, Uganda. *Journal of nursing management*, 19(6), 760-768.
- Peisch, F. R. (2011). A U.S. healthcare executive's recent visit to China. MDP, Inc. 11 Beacon Street, Boston, MA 02108. 1 800 376-5566.
- Pu, Y. X. (2010). *Job characteristics and job performance among professional nurses in the university hospitals of Yunnan Province, People's Republic of China* (Unpublished master's thesis). Chiang Mai University, Chiang Mai, Thailand.
- Steger, M.F., Dik, B.J., & Duffy, R.D. (2012). Measuring meaningful work: The Work as Meaning Inventory (WAMI). *Journal of Career Assessment*, 20, 322-337.
- Third Affiliated Hospital of Harbin Medical University. (2011). Hospital annual report [Chinese version]. Unpublished document, Department of Statistic, the Third Medical University Hospital, the People's Republic of China.
- Tuuli, M.M and Rowlinson, S (2009). Performance Consequences of Psychological Empowerment. *Journal of Construction engineering and Management*, 135(12), 1334-1347.
- Wang, X. X. (2011). *Job stress and job performance among nurses in University Hospitals, People's Republic of China*. (Unpublished master's thesis). Chiang Mai University, Thailand.
- Xiao, X. S. (2008). Research of the Nurse's Social Support [Chinese version]. Unpublished master's thesis, The Graduate School College of Humanities and Social Sciences, Nanjing University of Aeronautics and Astronautics, China.
- Yang, X., Shao, W.L., Yang, Y.P., Ying, B., & Dong. (2009). The present situation of performance appraisal in nursing staff [Chinese version]. *Journal of Nursing Administration*, 19(4), 18-19.
- Zhang, S. H., (2007). Emotional support and quality of nursing care in general hospitals [Chinese version]. *Chinese nursing research*. 2007, 26 (3): 422-135.