

Occupational Commitment and Subjective Career Success of Nurses in Tertiary Hospitals in Xishuangbanna City, the People's Republic of China*
ความยึดมั่นผูกพันในอาชีพและความสำเร็จในอาชีพเชิงอัตวิสัยของพยาบาลในโรงพยาบาลตติภูมิ
ของเมืองสิบสองป่านา สาธารณรัฐประชาชนจีน*

ฉาว	ผู้**	Chao	Pu**
ฐิติณัฐ	อัคคะเดชอนันต์***	Thitinut	Akkadechanunt***
บุญพิชชา	จิตต์ภักดี****	Bunpitcha	Chitpakdee****

Abstract

Subjective career success has positive effects on organizational productivity and previous research has found that occupational commitment is one of the factors related to the subjective career success of personnel. This descriptive correlational study aimed to explore occupational commitment and subjective career success and to examine the relationship between occupational commitment and the subjective career success of nurses. The participants included 367 nurses, stratified randomly selected from different nursing units of two tertiary hospitals in Xishuangbanna City, Yunnan Province, the People's Republic of China. The research instruments consisted of the Nurse Occupational Commitment Questionnaire (NOCQ) and the Subjective Career Success Inventory (SCSI). The validity of these two instruments was confirmed by the authors using factor analysis. The reliabilities tested by Cronbach's alpha coefficients for the NOCQ and the SCSI were 0.90 and 0.94, respectively. Descriptive statistics and Spearman's rank correlation coefficient were used to analyze data.

The results revealed that:

1. The overall level of occupational commitment as perceived by nurses was high.
2. The overall level of subjective career success as perceived by nurses was moderate.
3. There was a moderate positive correlation between occupational commitment and subjective career success. There were moderate positive correlations between subjective career success and the four dimensions of occupational commitment: affective commitment, normative commitment, economic accumulated cost commitment and emotional accumulated cost commitment.

* Master's thesis, Master of Nursing Science Program (International Program), Faculty of Nursing, Chiang Mai University

** Graduate Student of Nursing Science Program (International Program), Faculty of Nursing, Chiang Mai University

*** Corresponding Author, Assistant Professor, Faculty of Nursing, Chiang Mai University, Chiang Mai, Thailand;
e-mail: thitinut.a@cmu.ac.th

**** Assistant Professor, Faculty of Nursing, Chiang Mai University

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The results of this study provide valuable information for hospital and nurse administrators in raising awareness to enhance nurses' occupational commitment and assist nurses in achieving career success.

Keywords: Occupational commitment, Subjective career success, Nurses, Tertiary hospitals

บทคัดย่อ

ความสำเร็จในอาชีพเชิงอัตวิสัยส่งผลต่อผลิตภาพขององค์กร และการศึกษาก่อนหน้านี้พบว่าความยึดมั่นผูกพันในอาชีพเป็นหนึ่งในปัจจัยที่เกี่ยวข้องกับความสำเร็จในอาชีพเชิงอัตวิสัยของบุคลากร การศึกษาเชิงพรรณนาคหาความสัมพันธ์ครั้งนี้มีวัตถุประสงค์เพื่อศึกษาความยึดมั่นผูกพันในอาชีพและความสำเร็จในอาชีพเชิงอัตวิสัย และตรวจสอบความสัมพันธ์ระหว่างความยึดมั่นผูกพันในอาชีพและความสำเร็จในอาชีพเชิงอัตวิสัย กลุ่มตัวอย่างได้แก่พยาบาล 367 คนที่ทำงานในโรงพยาบาลระดับตติยภูมิ 2 แห่งในเมืองสิบสองปันนา มณฑลยูนนาน ประเทศสาธารณรัฐประชาชนจีน เครื่องมือในการวิจัยประกอบด้วย แบบสอบถามความยึดมั่นผูกพันในอาชีพของพยาบาล (NOCQ) และแบบวัดความสำเร็จในอาชีพเชิงอัตวิสัย (SCSI) ความตรงของเครื่องมือทั้งสองได้ตรวจสอบโดยผู้พัฒนาเครื่องมือด้วยการวิเคราะห์องค์ประกอบ ค่าสัมประสิทธิ์สหสัมพันธ์ของครอนบาร์คของ NOCQ และ SCSI เท่ากับ 0.90 และ 0.94 ตามลำดับ การวิเคราะห์ข้อมูลโดยใช้สถิติเชิงพรรณนาและการวิเคราะห์สหสัมพันธ์ของสเปียร์แมน ผลการศึกษาพบว่า:

1. ความยึดมั่นผูกพันในอาชีพโดยรวมตามการรับรู้ของพยาบาลอยู่ในระดับสูง
2. ความสำเร็จในอาชีพเชิงอัตวิสัยโดยรวมตามการรับรู้ของพยาบาลอยู่ในระดับปานกลาง
3. ความยึดมั่นผูกพันในอาชีพมีความสัมพันธ์กันทางบวกในระดับปานกลางกับความสำเร็จในอาชีพเชิงอัตวิสัย

ความสำเร็จในอาชีพเชิงอัตวิสัยมีความสัมพันธ์ทางบวกในระดับปานกลางกับความยึดมั่นผูกพันในอาชีพ 4 ด้านได้แก่ ความมุ่งมั่นทางอารมณ์ ความมุ่งมั่นเชิงบรรทัดฐาน ความมุ่งมั่นต้นทุนสะสมทางเศรษฐกิจ ความมุ่งมั่นต้นทุนสะสมทางอารมณ์

ผลการศึกษานี้เป็นข้อมูลที่มีประโยชน์แก่ผู้บริหารโรงพยาบาลและผู้บริหารทางการพยาบาลในการสร้างความตระหนักของการเสริมสร้างความยึดมั่นผูกพันในอาชีพของพยาบาลเพื่อที่จะช่วยให้พยาบาลประสบความสำเร็จในอาชีพ

คำสำคัญ: ความยึดมั่นผูกพันในอาชีพ ความสำเร็จในอาชีพเชิงอัตวิสัย พยาบาล โรงพยาบาลตติยภูมิ

* วิทยานิพนธ์หลักสูตรพยาบาลศาสตรมหาบัณฑิต (หลักสูตรนานาชาติ) คณะพยาบาลศาสตร์ มหาวิทยาลัยเชียงใหม่

** นักศึกษาหลักสูตรพยาบาลศาสตรมหาบัณฑิต (หลักสูตรนานาชาติ) คณะพยาบาลศาสตร์ มหาวิทยาลัยเชียงใหม่

*** ผู้เขียนหลัก, ผู้ช่วยศาสตราจารย์ คณะพยาบาลศาสตร์ มหาวิทยาลัยเชียงใหม่ e-mail: thitinut.a@cmu.ac.th

**** ผู้ช่วยศาสตราจารย์ คณะพยาบาลศาสตร์ มหาวิทยาลัยเชียงใหม่

Background and significance

Nurses reported stress, fatigue and difficulties coping, as well as an inability to get a sense of achievement from work, affecting their quality of life as well as career success (Xu, Shang, & Luo, 2010). When an individual employee experiences subjective career success, there will be a self-fulfilling peak which is experienced with a positive and happy state of mind. Employees will be satisfied with their lives and experience subjective well-being. A high level of subjective career success will increase an individual's general confidence, job motivation and goal-striving – all of which, in turn, would positively affect his or her productivity in the future (Abele & Spurk, 2009).

Subjective career success (SCS) refers to an individual's subjective apprehension, perceptual evaluation and affective reaction to their career (Shockley, Ureksoy, Rodopman, Poteat, & Dullaghan, 2016). Shockley et al. (2016) defined subjective career success, and proposed an eight-dimensional framework of subjective career success including 1) authenticity, 2) growth and development, 3) influence, 4) meaningful work, 5) personal life, 6) quality work, 7) recognition, and 8) satisfaction. In the literature review, some studies measured nurses' subjective career success in China, and the results were varied, from low to moderate levels (Hu & Luo, 2016; Han & Wang, 2017). Although several studies have been conducted, the results changed over time and results were inconsistent as nurses face tremendous changes that affect their perceptions of subjective career success.

Therefore, it is necessary to explore their perceptions of subjective career success, especially in the Xishuangbanna region where there has been no research conducted on this topic.

Previous studies indicate that several factors relate to subjective career success including demographic factors and organizational factors. Among these factors, occupational commitment was an organizational factor found to be strongly related to subjective career success in several countries (Srikanth & Israel, 2012; Karavardar, 2014; Ren, Wen, & Chen, 2013; Yang, Zhou, & Yu, 2014). Employees who are committed to their occupations experience more subjective career success than those who are less committed (Poon, 2004). Occupational commitment can favorably lead to desirable outcomes associated with one's career. Individuals with a strong sense of occupational commitment may make significant investments in their careers and are, therefore, willing to put in the extra effort required to attain their career goals, thus ultimately achieving career success (Srikanth & Israel, 2012).

Occupational commitment (OC) refers to employees' identification with their occupation and their active involvement in their occupation, which can guide employees to devote themselves to and engage in the identified occupation for a long time (Pei, 2007). Pei (2007) defined occupational commitment and she proposed a five-dimensional framework of occupational commitment including 1) affective commitment, 2) normative commitment, 3) economic accumulated cost

commitment, 4) emotional accumulated cost commitment, and 5) limited alternatives commitment.

Under the changes and challenges of China's healthcare reform, nurses' subjective career success remains a serious concern in the Xishuangbanna healthcare system. The leaders who are working in the tertiary hospitals in Xishuangbanna urgently need to improve the subjective career success of nurses to motivate them to make more effort to achieve the goals of the organization. Meanwhile, the improvement of nurses' subjective career success will promote the improvement of nurses' career satisfaction and reduce their turnover rate. Additionally, there has been no study on the relationship between occupational commitment and subjective career success among nurses in Xishuangbanna. The results of the study would provide information for occupational commitment and subjective career success, as well as expand knowledge of the relationship between occupational commitment and subjective career success among nurses in tertiary hospitals in Xishuangbanna City, the People's Republic of China.

Objectives

The objectives of this study were to explore occupational commitment and subjective career success, and the relationship between them among nurses in the tertiary hospitals of Xishuangbanna City, the People's Republic of China.

Research questions

1. What is the level of occupational commitment of nurses in tertiary hospitals in Xishuangbanna City, the People's Republic of China?
2. What is the level of subjective career success of nurses in tertiary hospitals in Xishuangbanna City, the People's Republic of China?
3. Is there any relationship between the occupational commitment and the subjective career success of nurses in tertiary hospitals in Xishuangbanna city, the People's Republic of China?

Conceptual framework

The occupational commitment was based on Pei (2007) and includes 5 dimensions: affective commitment, normative commitment, economic accumulated cost commitment, emotional accumulated cost commitment and limited alternatives commitment. Subjective career success was based on Shockley et al. (2016) and includes 8 dimensions: authenticity, growth and development, influence, meaningful work, personal life, quality work, recognition and satisfaction. Individuals with a strong sense of occupational commitment may make significant investments in their careers and are, therefore, willing to commit the extra effort required to attain their career goals, thus ultimately achieving career success (Srikanth & Israel, 2012).

Methodology

Population and sampling

A descriptive correlational design was used to explore the level of nurses' occupational commitment, the levels of nurses' subjective career success and the relationship between occupational commitment and subjective career success among nurses in tertiary hospitals in Xishuangbanna, the People's Republic of China. The population consisted of 1,301 nurses working at the two tertiary hospitals for more than one year. The sample size was 306, calculated using Yamane (1973) formula. When considering the possible loss of participants, 20% of the sample size was added bringing the total number of participants to 367. A stratified random sampling method was used in this study to select participants from the two hospitals.

Research instruments

The research instrument consisted of three parts. Part 1: The demographic data form was developed by the researcher, Part 2: The Chinese version of the Nurse Occupational Commitment Questionnaire (NOCQ) (Pei, 2007) consisted of 24 items on a 5-point Likert scale with 5 dimensions including affective commitment, normative commitment, economic accumulated cost commitment, emotional accumulated cost commitment and limited alternatives commitment, and Part 3: The Subjective Career Success Inventory (SCSI) (Shockley et al., 2016) consisted of 24 items on a 5-point Likert scale with 8 dimensions including authenticity, growth and development, influence, meaningful work, personal life,

quality work, recognition and satisfaction. The SCSI was translated into Chinese using the back-translation process (Brislin, 1980) in this study. The interpretations of the NOCQ and SCSI scores were classified into high, moderate and low levels using the class interval formula " \bar{X} " = (" \bar{X} " max - " \bar{X} " min)/K (Best & Kahn, 2003). A mean score from 1.00 - 2.33 was considered a low level, from 2.34 - 3.67 was a moderate level and from 3.68 - 5.00 was a high level.

The validity of the NOCQ and SCSI was tested by the original authors with confirmatory factor analysis. The researcher used both instrument without any modification. The Cronbach's alpha coefficients of the NOCQ and SCSI, tested with 15 nurses who worked in the People's Hospital of Xishuangbanna Dai Nationality Autonomous Prefecture, were 0.90 and 0.94, respectively.

Ethical considerations

The researchers obtained approval from the Research Ethics Review Committee, Faculty of Nursing, Chiang Mai University (No. 052/2020). The researcher assured the protection of the human rights of the participants by informing the participants that they had the right to refuse, stop or withdraw from this study at any time without any impact on their performance appraisal. Confidentiality and anonymity of each participant were guaranteed by not identifying their name and separating the placement questionnaire and the volunteer research agreement forms. Code numbers were used instead of names. Information provided by the participants was used only for this study and remained confidential.

Data collection

After getting permission from the directors of both hospitals, the researcher met with the nursing directors to explain the objectives and the process of data collection. The researcher distributed the package of questionnaires to all participants who were requested to complete the questionnaires in their available time. The participants were asked to keep the information letter and to return the questionnaires and consent form in separate sealed envelopes to the designated drawer in the doctor's office of each department. After two weeks, 367 (100%) of completed questionnaires were returned to the researcher.

Data analysis

Data were analyzed following the purposes of the study using SPSS. Descriptive statistics were used to analyze the frequency, percentage, mean and standard deviation. Spearman's rank-order correlation was applied to examine the relationship between occupational commitment and subjective career success of nurses in tertiary hospitals in Xishuangbanna City, the People's Republic of China because the results of Kolmogorov-Smirnov's (KS) test showed that the occupational commitment and subjective career success of participants were not normally distributed.

Results

1. The findings showed that most of the participants (58.58%) were between 21 to 30 years of age with an average age of 31.36 years (SD = 6.57), 95.37% were female

and 65.94% were married. Nearly half of the participants held an associate's degree (48.50%) or bachelor's degree (49.59%), 51.77% worked at the People's Hospital of Xishuangbanna Dai Nationality Autonomous Prefecture and 48.23% worked at the First People's Hospital of Jinghong City. The majority of the participants worked in either the medical department (28.07%) or the surgical department (24.80%). Approximately 53.95% of participants were senior nurses and 68.94% had been working as a nurse in the hospital for less than 10 years, with an average of 9.97 years (SD = 7.00). Most of the participants worked on rotating shifts (68.94%) and 64.85% earned > 4000 Renminbi (RMB) per month.

2. The participants perceived the overall occupational commitment and the dimensions of affective commitment, normative commitment and economic accumulated cost commitment at a high level. As for the dimensions of emotional accumulated cost commitment and limited alternatives commitment, these were perceived at moderate levels (Table 1).

Table 1 Mean, standard deviation and level of occupational commitment of the nurses (n = 367)

Occupational Commitment	Mean	SD	Level
Overall	3.71	0.51	High
Affective commitment	4.13	0.69	High
Normative commitment	3.90	0.74	High
Economic accumulated cost commitment	3.72	0.72	High
Emotional accumulated cost commitment	3.50	0.76	Moderate
Limited alternatives commitment	3.07	0.76	Moderate

3. The participants perceived overall subjective career success at a moderate level. Only the dimension of meaningful work was perceived at a high level. The dimensions of authenticity, growth and development, influence, personal life, quality work, recognition and satisfaction were perceived at moderate levels (Table 2).

Table 2 Mean, standard deviation and level of subjective career success of the nurses (n = 367)

Subjective Career Success	Mean	SD	Level
Overall	3.43	0.67	Moderate
Authenticity	3.37	0.85	Moderate
Growth and development	3.55	0.84	Moderate
Influence	3.00	0.82	Moderate
Meaningful work	3.82	0.77	High
Personal life	3.36	0.81	Moderate
Quality work	3.32	0.77	Moderate
Recognition	3.41	0.84	Moderate
Satisfaction	3.58	0.91	Moderate

4. There was a moderate positive correlation between nurse occupational commitment and subjective career success. The dimensions of occupational commitment, affective commitment, normative commitment, economic accumulated cost commitment and emotional accumulated cost commitment were significantly related to subjective career success. However, the dimension of limited alternatives commitment was not correlated to subjective career success (Table 3).

Table 3 Correlations between occupational commitment and subjective career success of the nurses (n = 367)

Occupational Commitment	Subjective Career Success
Overall	0.48**
Affective commitment	0.46**
Normative commitment	0.45**
Economic accumulated cost commitment	0.42**
Emotional accumulated cost commitment	0.35**
Limited alternatives commitment	-0.03

** p < 0.01

Discussion

1. Occupational Commitment as perceived by the nurses

The results of this study indicate that the occupational commitment of nurses was at a high level which might be related to different reasons. Firstly, regarding the participants' income, 64.85% of the participants in this study earned more than 4,000 RMB per month which is enough for the cost of living in Xishuangbanna city. When nurses consider leaving the nursing occupation, they may see a loss of income, so they commit to their occupation. Mathieu & Zajac (1990) suggested that higher incomes increase commitment to the organization by enhancing one's self-esteem. The second reason might be the educational level; as the level of education increases, the level of occupational commitment increases (Nogueras, 2006). Nurses with higher education can often perform better in their work, and they are valued by leaders and satisfied with their job. According to Wang, Tao, Ellenbecker, & Liu (2012), occupational commitment was positively associated with job satisfaction. In this study, most participants held

an associate's degree (48.5%) or a bachelor's degree (49.6%). These high educational levels may explain why they perceived a high level of occupational commitment. The third reason might be marital status; 65.9% of the participants were married. Married nurses who have family constraints need stable work and income which comes from their current occupation (Pei, 2007). These may be reasons why nurses have a high level of occupational commitment.

The results were inconsistent with previous studies by Jiang et al. (2013) in China which used similar instruments and found nurses' occupational commitment was at a moderate level. The reason for inconsistent findings might be because nurses in these three studies were working in larger tertiary hospitals in developed cities and had a higher workload, which was a stressor, compared to small tertiary hospitals in developing cities. According to Pei (2007) findings, there is a significant negative correlation between nurses' occupational commitment and job stressors. This means the higher the stressor, the lower the occupational commitment. Another reason might be due to

the different organizational cultures from one hospital to another.

2. Subjective Career Success as perceived by the nurses

The results of this study indicated that the subjective career success of nurses was at a moderate level. Half of the participants in this study held an associate's degree (48.5%) and approximately half of them held a bachelor's degree (49.6%). The nurses with these two types of educational levels may perceive subjective career success differently. According to Elmas-Atay (2017), education level is positively related to subjective career success. Nurses who are more educated tend to work better and are more valued by leaders. Therefore, they tend to have better career success when compared to nurses with lower education. These may be reasons why nurses have a moderate level of subjective career success.

These results were inconsistent with a previous study in China by Hu & Luo (2016) which found subjective career success to be at a high level. The results were also inconsistent with a previous study by Han and Wang (2017) which found that nurses perceived subjective career success at a low level. However, these two studies used different measurements. A possible reason for this might be due to the differences in the participants, departments and levels of hospitals.

3. The Relationship between Occupational Commitment and Subjective Career Success

This study found a moderate positive correlation between the occupational commitment and subjective career success of

nurses ($r = 0.48, p < 0.01$), indicating that nurses who perceived high occupational commitment perceived high subjective career success.

This result was consistent with the previous studies by Karavardar (2014) in the hazelnut processing industry in Turkey, which found that there was a moderate positive correlation between occupational commitment and subjective career success. The result was also consistent with a previous study by Ren et al. (2013) in enterprises in China, which found that there was a moderate positive correlation between occupational commitment and subjective career success. However, it was inconsistent with a study by Yang et al. (2014), who found that there was a strong positive correlation between occupational commitment and subjective career success among university staff. The explanation for the different relationships was the occupation of the participants. Occupational commitment and subjective career success of nurses in China were not similar to other disciplines in other countries.

According to Poon (2004), people who are committed to their occupation should experience more subjective career success (e.g., have more positive feelings for their career) than those who are less committed. Occupational commitment can lead to desirable outcomes associated with one's career. Individuals with a strong sense of occupational commitment may make significant investments in their careers and are therefore willing to put in the extra effort required to attain their career goals, thus, ultimately achieving career success

(Srikanth & Israel, 2012). In this study, the nurses were willing to stay in their occupation, and they believe nursing is a valuable profession. They identified themselves as nurses, were satisfied with their occupation and felt proud and enthusiastic about working as a nurse. Nurses had strong feelings about their obligation or responsibility to stay in the nursing profession or felt that leaving the profession would result in feelings of guilt. Nurses felt that they had invested too many monetary, educational or emotional resources and personal effort to leave. Nurses felt there were also other attractive and possible alternatives available to them, but considering the risks they needed to take to leave the nursing occupation, they preferred to stay in their current occupation (Pei, 2007). All these factors pushed the nurses to make significant investments in their careers and they were, therefore, willing to commit to the extra effort required to attain their career goals; thus, resulting in achieving career success.

It should be noted the results still showed a moderate correlation between occupational commitment and subjective career success. There might be other factors that influence subjective career success other than occupational commitment, such as, age and experience of the participants (Allen, Lentz, & Day, 2006). In this study, 83.1% of participants were aged between 21 to 36 years with an average age of 31.36 years and had been working as a nurse in the hospital for 1 to 10 years (an average number of 9.97 years, SD = 7.00). The participants with more experience

will perceive higher occupational commitment which may lead to a stronger correlation with subjective career success.

Conclusions and recommendations

1. Based on the moderate level in some dimensions of occupational commitment, hospitals and nurse administrators should develop various strategies to promote life-long commitment

2. Based on the moderate level of subjective career success among nurses, nurse administrators should develop strategies to acknowledge the high quality of nurses' work and recognize nurses' contributions to the organization and society. Also, they should develop a career plan for nurses as well as encourage nurses to develop nursing knowledge and professional skills in order to enhance their sense of accomplishment.

3. Based on the relationship between occupational commitment and subjective career success, nurse administrators should be aware of the importance of affective commitment, normative commitment and economic and emotional accumulated cost commitment which can improve the subjective career success of nurses. Nurses with a strong sense of occupational commitment will make significant investments in their careers and are, therefore, willing to commit the extra effort required to attain their career goals.

Conclusions and implications

1. This study was conducted in only two tertiary hospitals in Xishuangbanna city. Future

research should be conducted in other types of hospitals (secondary and primary hospitals) since there are differences in the organizational structure, policies, resources and management.

2. As various factors were found to be related to subjective career success from the literature review, including perceived organizational support, leadership behavior, and

self-evaluation, future research should include a correlational study on these factors related to subjective career success among nurses.

3. Future research should compare the occupational commitment and subjective career success between permanent and temporary nurses.

References

- Abele, A. E., & Spurk, D. (2009). The longitudinal impact of self-efficacy and career goals on objective and subjective career success. *Journal of Vocational Behavior, 74*(1), 53-62.
- Allen, T. D., Lentz, E., & Day, R. (2006). Career success outcomes associated with mentoring others: A comparison of mentors and non-mentors. *Journal of Career Development, 32*(3), 272-285.
- Best, J. W., & Kahn, J. V. (2003). Descriptive studies: Assessment, evaluation, and research. *Research in Education, 9*(1), 114-158.
- Brislin, R. W. (1980) Translation and content analysis of oral and written material. In H. C. Triandis & J. W. Berry (Eds.), *Handbook of cross-cultural psychology: Methodology*. Boston: Allyn and Bacon.
- Elmas-Atay, S. (2017). Work values fit and subjective career success: The moderating role of work engagement. *International Review of Management and Marketing, 7*(3), 113-120.
- Han, F. P., & Wang, Z. W. (2017). The relationship between the working environment and the sense of career success of nurses in the emergency department. *Chinese Nursing Management, 17*(4), 511-515. (in Chinese)
- Hu, Y. J., & Luo, Y. L. (2016). Reliability and validity of career success scale in infusion nursing specialists. *Journal of Nursing (China), 32*(19), 43-47. (in Chinese)
- Jiang, Y., Zhang, Y. Q., & Wang, L. (2013). Correlations between turnover intention and occupational commitment among emergency nurses. *PLA Journal of Nursing, 30*(8), 28-30.
- Karavardar, G. (2014). Career commitment, subjective career success and career satisfaction in the context of hazelnut processing industry in Giresun/Turkey. *International Journal of Business and Management, 9*(6), 98.
- Mathieu, J. E., & Zajac, D. M. (1990). A review and meta-analysis of the antecedents, correlates, and consequences of organizational commitment. *Psychological Bulletin, 108*(2), 171.
- Nogueras, D. J. (2006). Occupational commitment, education, and experience as a predictor of intent to leave the nursing profession. *Nursing Economics, 24*(2), 86.

- Pei, Y. (2007). *Study on occupational commitment level and influencing factors of turnover of nurses*. Shanghai: Second military medical university. (in Chinese)
- Poon, J. M. (2004). Career commitment and career success: Moderating role of emotion perception. *Career Development International*, 9(4), 374-390.
- Ren, H., Wen, Z. L., & Chen, Q. S. (2013). The influence of psychological capital on the career success of enterprise employees: The mediating effect of occupational commitment. *Journal of Psychological Science*, 36(4), 960-964.
- Shockley, K. M., Ureksoy, H., Rodopman, O. B., Poteat, L. F., & Dullaghan, T. R. (2016). Development of a new scale to measure subjective career success: A mixed methods study. *Journal of Organizational Behavior*, 37(1), 128-153.
- Srikanth, P. B., & Israel, D. (2012). Career commitment & career success: Mediating role of career satisfaction. *Indian Journal of Industrial Relations*, 48, 137-149.
- Wang, L., Tao, H., Ellenbecker, C. H., & Liu, X. (2012). Job satisfaction, occupational commitment and intent to stay among Chinese nurses: A cross-sectional questionnaire survey. *Journal of Advanced Nursing*, 68(3), 539-549.
- Xu, J. J., Shang, L. P., & Luo, Z. L. (2010). Study on impact of self-efficacy group guidance on nurses' career condition. *Nursing Management in China*, 10(5), 30-34.
- Yamane, T. (1973). *Statistics: An introduction analysis*. New York: Harper and Row.
- Yang, S., Zhou, Y., & Yu, G. L. (2014). Research on career calling, career commitment and career success: Taking the "985" college female professors as an example. *Research on Institutional Economics*, 2014, 176-194. (in Chinese)