

Person-environment fit, turnover intention and satisfaction with life. The role of seniority

BACKGROUND

Based on the person-environment fit model, we examined how occupational stress and job satisfaction are correlated with an intention to leave the current workplace or profession and life satisfaction in two groups of midwives with low and high experience.

PARTICIPANTS AND PROCEDURE

Data were collected between March and December 2022 using a set of psychological questionnaires. Low-experienced midwives ($n = 152$) and high-experienced midwives ($n = 174$) participated in the study. Multigroup path analysis was used to analyze the data.

RESULTS

Research has shown that midwives of varying levels of seniority experience similar levels of general occupational stress, job satisfaction, intentions to leave their current workplace or profession, and life satisfaction. The study found a negative correlation between occupational stress and job satisfaction and life satisfaction in both groups. The correlation between job satisfaction and the inten-

tion to leave the current workplace or profession was significantly negative only among low-experienced midwives. In high-experienced midwives, the relationship between stress and the intention to leave the current workplace or profession was direct. In the group of low-experienced midwives, links between occupational stress and all outcome variables were completely mediated by job satisfaction.

CONCLUSIONS

Our study demonstrates that degree of person-environment fit accurately predicts the positive and negative consequences of working conditions for behavior both at work and outside of work. The correlations between stress at work, thoughts of leaving work, and the assessment of well-being differ between low- and high-experienced employees.

KEY WORDS

person-environment fit; person-job fit; work-related stress; job satisfaction; turnover intention; life satisfaction; midwives

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AUTHORS' CONTRIBUTIONS – A: Study design · B: Data collection · C: Statistical analysis · D: Data interpretation · E: Manuscript preparation · F: Literature search · G: Funds collection

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BACKGROUND

Stress at work is unavoidable. Therefore, there is an ongoing need to explore the issue of occupational stress in terms of its sources, mechanisms, and consequences. Current data suggest that the occupational group with the “highest concern for stress prevention” in the European Union (EU) is the healthcare profession, and many healthcare providers declare that their work is moderately (26.6%), highly (12.1%), or extremely (6.5%) stressful (Eurofound, 2022a). For healthcare workers, the reported stress intensity at work is significantly higher than that observed in other sectors (e.g., industry, public administration, financial services) and higher than the EU average. For these reasons, the main independent variable in this study is occupational stress in a group of midwives. The justification for studying this group is provided by the specificity of the work of these specialists. Midwives describe themselves as “advocates for women in labor” and point to the need for professionals (particularly physicians) and social recognition of their role in the healthcare system (Hildingson et al., 2023). The problem of motivation to leave was deeply studied among nurses (Bahlman-van Ooijen et al., 2023). Midwives deserve the attention of occupational psychologists because they describe their work as complex and often unpredictable, associated with high stress, mental and physical strain, and involving an excessive workload due to low staffing levels (Geraghty et al., 2019).

The first two dependent variables included in the research model are: an intention to leave the current workplace and an intention to leave the midwifery profession in general. In Poland, one in four midwives continues to work despite reaching the age of 60 and obtaining pension rights (Naczelna Izba Pielęgniarek i Położnych, 2021). In light of these statistics, it seems to us that identifying the reasons behind the intentions to leave the current workplace or profession is critical to ensuring future access to health care. Maternity care is a basic right of every woman, and therefore the results of the current research may be of interest to readers not only in Europe but also around the world. Research on intentions to leave a profession should be of interest to decision-makers as resignations can cause significant disruptions in the provision of services and impose on organizations the costs of staffing, training, and hiring new employees (Pitts et al., 2011). Previous work has indicated that the replacement of medical staff is a key problem requiring intervention (Persson et al., 2022). An additional variable examined in this study is subjective well-being. Our interest in the correlation between occupational stress and well-being stems from data on the healthcare sector. For example, research (Eurofound, 2022a) has pointed to a correlation between working conditions and employee well-being,

indicating that overly demanding work can be a predictor of poor health and physical and emotional exhaustion. To comprehensively examine the relationship between occupational stress and well-being, we focused on two dimensions of subjective well-being, namely job satisfaction and life satisfaction.

The aim of the current research is to examine how occupational stress is correlated with job satisfaction, an intention to leave the current workplace, an intention to leave the profession in general, and satisfaction with life. In addition, we sought to examine whether the correlations between occupational stress, an intention to leave the current workplace or profession, and life satisfaction are mediated by job satisfaction. We also aimed to investigate whether the strength of these correlations differs between low-experienced and high-experienced midwives.

OCCUPATIONAL STRESS VERSUS THE INTENTION TO QUIT AND LIFE SATISFACTION

According to the person-environment fit model, work-related stress is the result of a mismatch between the abilities and skills of an individual and the requirements of the work environment (French et al., 1982). An increase in stress at work is largely due to the perception of work as overwhelming (Cohen et al., 1983) and beyond one’s ability to cope (Hobfoll, 1989). Employees experiencing high levels of stress are characterized by poorer physical and mental health (Jackson & Frame, 2018). Occupational stress may be positively associated with higher rates of heart disease, obesity, and depression due to the negative impacts of stress on the autonomic nervous system (Jarczok et al., 2020). The intention to leave a job can be considered as a negative attitude towards one’s work. According to the theory of planned behavior (Ajzen, 1991), intentions can lead to action. Thus, the intention itself – although ontologically it has only a potential dimension – is a strong predictor of actually leaving a profession (Griffeth et al., 2000). In the current research, an intention to leave was assessed in two dimensions: an intention to leave the current workplace and an intention to leave the midwifery profession in general. In our opinion, the intention to leave the current workplace or profession is likely a way of coping with high levels of stress at work. In other words, we believe that the psychological costs of constantly dealing with stress at work can lead an employee to think about leaving the current workplace or profession. Research to date confirms that occupational stress, through its association with negative emotions, can lead to negative attitudes toward work, including low job satisfaction and an intention to quit (Labrague et al., 2020). Previous research has also shown that general stress at

Arkadiusz M.
Jasiński,
Romuald Derbis,
Jakub Filipkowski

work in midwives is positively correlated with a general intention to leave work (Peter et al., 2021; Piotrowski et al., 2022). The above considerations led to the following hypotheses:

H1a: Occupational stress in midwives is positively correlated with an intention to leave the current workplace.

H1b: Occupational stress in midwives is positively correlated with an intention to leave the profession.

Life satisfaction is the result of evaluating one's life so far and comparing it with the vision of an ideal life (Kjell & Diener, 2021). The subjective assessment of life satisfaction (positive or negative) depends on an individual's characteristics (e.g., temperament and personality traits) and experience (Udayar et al., 2020). The literature emphasizes that, for working adults, an important component of life satisfaction is the domain of professional work (Diener et al., 2013). Previous research indicates that stress at work may be negatively correlated with life satisfaction (Kumar et al., 2021; McDaniel et al., 2021). Based on the results of the literature presented above, the following hypothesis was formulated:

H1c: Occupational stress in midwives is negatively correlated with life satisfaction.

OCCUPATIONAL STRESS AND JOB SATISFACTION

Job satisfaction is understood to be an employee's overall evaluation of their position. The results of the evaluation depend on how much the individual receives of what they expect at work (Drenth et al., 2018). In other words, this assessment is conditioned by opportunities for professional development, the level of remuneration, relationships with colleagues, working conditions, rewards received, and praise for well-performed duties (Spector, 2022). According to the person-environment fit model, occupational stress is positively related to the discrepancy between employees' needs and what is provided at work, which can lead to lower job satisfaction (Kristof-Brown & Guay, 2011). Previous studies have confirmed a negative correlation between job stress and job satisfaction (Geese et al., 2022; Lu et al., 2019). Hence, the following hypothesis was formulated:

H2: Occupational stress in midwives is negatively correlated with job satisfaction.

THE MEDIATING ROLE OF JOB SATISFACTION

According to the theory of planned behavior, intentions are the antecedents of behavior and attitudes are the basis of intentions (Ajzen, 1991). As mentioned above, job satisfaction can be defined as an overall job evaluation. If the surveyed midwives are

satisfied with their work, it is the result of general satisfaction with working conditions, remuneration, job security, employment stability, professional development, and promotion opportunities. Considering the above, it can be assumed that job satisfaction will be negatively correlated with an intention to change the current workplace or to leave the midwife profession altogether. Indeed, previous studies have provided support for a negative correlation between high job satisfaction and the intention to leave (Lee et al., 2020; Scanlan & Still, 2019; Zhang et al., 2019). Based on these theoretical and empirical arguments, we put forward the following hypotheses:

H3a: Job satisfaction in midwives is negatively correlated with an intention to leave the current workplace.

H3b: Job satisfaction in midwives is negatively correlated with an intention to leave the profession.

When examining the correlation between job satisfaction and life satisfaction, we relied on two corresponding proposals to study work-life interactions. We wanted to complete the state of knowledge about the role a person-environment fit in building well-being, so we examined the spillover between job and life satisfaction. Previous studies have shown that the boundaries between work and family life are fluid, and the psychological effects of events at work penetrate the sphere of private life (Mennino et al., 2005). The assumption that the psychological costs of work "spread" into family and non-work life has been confirmed in previous studies on managers (Lawson et al., 2013) and in a general sample of employees (Udayar et al., 2020). From the bottom-up perspective, general life satisfaction results from the assessment of specific spheres of human functioning (e.g., in the family, in marriage, and at work; Steel et al., 2019). Based on this understanding of subjective well-being, job satisfaction is one of the most important domains of overall life satisfaction (Diener et al., 2013). Indeed, previous research suggests that there is a positive correlation between job satisfaction and life satisfaction (Kosec et al., 2022). Therefore, we formulated the following hypothesis:

H3c: Job satisfaction in midwives is positively correlated with life satisfaction.

Excessive demands on employees can lead to negative consequences for both the organization and the employee (Bakker & de Vries, 2021). We believe that the stress experienced by midwives is the result of excessive demands, and the negative consequences of not coping with stress include an intention to leave the current workplace or profession (for the organization) and lower life satisfaction (for the employee). Previous studies have shown positive correlations between stress and an intention to quit (Zhang et al., 2019), and negative correlations between stress, job satisfaction, and life satisfaction (Erdogan et al., 2012; Udayar et al., 2020). However, to date, these variables

Arkadiusz M.
Jasiński,
Romuald Derbis,
Jakub Filipkowski

have not been tested in a single statistical model. Earlier studies also omitted the potentially important moderating role of job satisfaction in the relationships between stress, an intention to quit, and life satisfaction. We suggest that there may be indirect correlations between work stress, the intention to leave, and life satisfaction. It may be, for example, that stress leads to an intention to leave the current workplace or profession and lower life satisfaction by lowering job satisfaction. This proposed mechanism is based on two assumptions: 1) negative work experiences (stress) may reduce the level of job satisfaction, and 2) a lower overall perception of work as being enjoyable, interesting, and satisfying may give rise to an intention to leave the current workplace or profession and reduce overall satisfaction with life. Therefore, we formulated the following hypotheses:

H4a: Job satisfaction in midwives mediates the correlation between occupational stress and an intention to leave the current workplace.

H4b: Job satisfaction in midwives mediates the correlation between occupational stress and an intention to leave the profession.

H4c: Job satisfaction in midwives mediates the correlation between occupational stress and life satisfaction.

IS SENIORITY IMPORTANT FOR THE CORRELATIONS BETWEEN OCCUPATIONAL STRESS, JOB SATISFACTION, AND AN INTENTION TO QUIT?

An extensive review of the research on the consequences of occupational stress has indicated that one of the important gaps in this area is a lack of studies comparing the effects of stress in younger and older adults (Mikneviciute et al., 2022). Warr (2020) suggested that the nature of a job is important in determining the influence of age and seniority on the correlations between occupational stress and its consequences. Medical professions are associated with increased physical and emotional burdens and are so-called high-touch professions. Further research on how age and seniority affect the relationship between occupational stress and its negative consequences is also justified by changing socio-demographic factors and the health and productivity of employees. On the one hand, the workforce is constantly aging (Beier et al., 2022; Toossi, 2012), and on the other, there is a significant shortage of new recruits in the health sector (Eurofound, 2022b). Examining the age-specific determinants of job and life satisfaction and an intention to leave can aid in developing more effective support strategies in the workplace.

In the current study, the sample of midwives was divided into two subgroups with different levels of work experience: low-experienced and high-expe-

rienced midwives. The low-experienced midwives were defined as those with less than five years of work experience. These are midwives who are just entering the profession. Polish midwives acquire professional qualifications after completing a three-year bachelor's program and passing specialist exams. These requirements are typically completed on average at the age of 22-24 years. As the level of education achieved is associated with the amount of remuneration and the possibility of promotion, all midwives currently entering the profession continue their education in a two-year master's program. Midwives with less than five years of work experience are still intensively learning, specializing, and finding their specific roles in the profession and workplace. Low-experienced midwives are also still learning to apply the knowledge acquired during their studies to real-world professional challenges. The argument for the proposed criterion for distinguishing low-experienced midwives (< 5 years of experience) is the theoretical postulate that the period of education and gaining initial professional experience is an important element in shaping professional identity (Johnson et al., 2012). This period is considered to fall between three and five years after graduation.

According to our definitions, high-experienced midwives are those with more than five years of service. At this period in their careers, most have completed a formal university education, have mastered routine work duties, and probably no longer identify themselves as novices. To date, there have been few studies comparing less and highly experienced midwives. However, the available studies confirm that the criterion of five years of service proposed by us is useful for identifying differences between the functioning of midwives at work (Jasiński & Derbis, 2023; Kool et al., 2019, 2020). In the cited studies, an intention to leave and life satisfaction were not examined. In our opinion, the question of whether the strength of the relationship between stress and its negative consequences differs across low- and high-experienced midwives requires further study.

Previous research suggests that less experienced midwives exhibit a greater intention to leave their current workplace than more experienced midwives, with no statistically significant differences in job satisfaction and an intention to leave the profession (Peter et al., 2021). In the current study, we do not necessarily predict significant differences in the levels of the studied variables between the different groups of midwives. However, we are interested in whether the strength of the correlation between the examined variables is stronger in the group of high-experienced midwives. Theoretical suggestions and previous results have prompted us to pose this research question. According to the strength and vulnerability theory, older workers may be more sensitive to adverse environmental conditions due to a decrease

in physiological immunity (Charles & Carstensen, 2010). The negative reaction (intention to leave) to occupational stress in the group of senior midwives may be stronger because the suppression of maladaptive physiological arousal is weaker in older workers (Thayer et al., 2021). It turns out that, in midwives with a higher level of seniority, although they do not differ in the levels of job satisfaction and occupational stress, the strength of the negative correlation between occupational stress and job satisfaction is greater compared to less experienced midwives (Jasiński & Derbis, 2023). Positive correlations were also found between seniority, occupational stress, and a general intention to leave in a surveyed group of employees (Stoll & Gallagher, 2019). On this basis, we proposed the following hypotheses:

H5a: The strength of the correlation between occupational stress and an intention to leave the current workplace is higher in high-experienced midwives than in low-experienced midwives.

H5b: The strength of the correlation between occupational stress and an intention to leave the profession is higher in high-experienced midwives than in low-experienced midwives.

If high-experienced midwives react less effectively to stress at work, then perhaps the negative correlations between occupational stress, job satisfaction, and life satisfaction will be stronger in this group. This assumption is justified by earlier studies. For example, compared to younger workers, older workers cope with stress and work overload less efficiently (Guglielmi et al., 2016). Also, in response to acute stress, older people show lower cognitive flexibility and poorer problem-solving (Crosswell et al., 2021). Another argument for suggesting the stronger negative correlations in highly experienced midwives is the fact that midwives with more seniority experience a greater intensity of emotional tension at work (Wright et al., 2018). Based on the results cited above, we suggest that, compared to low-experienced midwives, high-experienced midwives will be less satisfied with work and life in response to occupational stress. A lower tolerance to stressors and less adaptive reactions to stress, combined with the frustration of not coping with high demands at work, may, in our opinion, be more strongly associated with lower life and work satisfaction in the group of high-experienced midwives. Thus, the following hypotheses were formulated:

H6a: The strength of the negative correlation between occupational stress and job satisfaction is higher in high-experienced midwives than in low-experienced midwives.

H6b: The strength of the negative correlation between occupational stress and life satisfaction is higher in high-experienced midwives than in low-experienced midwives.

PARTICIPANTS AND PROCEDURE

SAMPLE AND PROCEDURES

The study group consisted of 326 midwives employed in the public health service in Poland. All study participants were women. To qualify for inclusion, the participants had to have full-time employment, work at the bedside (administrative positions were excluded), and have a fully completed set of questionnaires. The study was cross-sectional in nature, and the data were collected between March and December 2022. The midwives completed the questionnaires in paper form. The sample was divided into two subgroups: low-experienced midwives ($n = 152$) and high-experienced midwives ($n = 174$). The socio-demographic data from the participants are presented in Table 1. The required sample size needed for the study was calculated using G*Power v. 3.1.9.2 (Faul et al., 2009). With an assumed mean effect size (f^2) of 0.15 and a significance level of less than 0.01, the required sample size was $n = 150$. The final samples comprised 152 and 174 midwives, indicating a reliability sample power of 96.00%. The study design was reviewed and approved by the Research Quality Assessment Committee at the Institute of Psychology of the University of Opole (Decision No. KOJBN 4/2022). After obtaining approval from the university commission, formal written consent from the entities employing or educating midwives was acquired. Some of the data used in this article were collected as part of a larger project that was carried out between January and December 2022. Previously published work using parts of this database addressed a different research problem and included other variables, and the presented results do not duplicate these previous findings.

Person-environment fit among midwives

MEASURES

Occupational stress. We examined occupational stress using the perceived stress at work scale (Cohen et al., 1983) in the Polish adaptation (Chirkowska-Smolak & Grobelny, 2016). This questionnaire consists of ten items and has a one-factor structure. Responses are provided on a 5-point Likert scale (1 – *never*, 5 – *very often*) to questions such as “During the last month, how often have you felt that difficulties at work multiplied to the point where you could not overcome them?”. The range of possible scores was 10-50 points.

Job satisfaction. We measured job satisfaction using the Job Satisfaction Scale (Zalewska, 2003). This tool involves rating five statements subjectively assessing one’s work on a 7-point Likert scale from 1 (*strongly disagree*) to 7 (*strongly agree*). The tool included questions such as “In many ways, my work is close to perfect”. The scores on this questionnaire can range from 7 to 35 points.

Table 1*Participants' demographic characteristics (N = 326)*

| | Low-seniority midwives <i>n</i> = 152 | | High-seniority midwives <i>n</i> = 174 | |
|--------------------------------|--|------------------|---|-------------------|
| Age | <i>M</i> = 23.85 | <i>SD</i> = 1.03 | <i>M</i> = 43.85 | <i>SD</i> = 9.35 |
| Seniority | <i>M</i> = 1.38 | <i>SD</i> = 0.68 | <i>M</i> = 20.62 | <i>SD</i> = 9.73 |
| Working hours per week | <i>M</i> = 39.65 | <i>SD</i> = 8.41 | <i>M</i> = 46.35 | <i>SD</i> = 19.38 |
| Work places, <i>n</i> (%) | | | | |
| One | 136 (89.5) | | 111 (63.8) | |
| Two | 14 (9.2) | | 55 (31.6) | |
| Three | 2 (1.3) | | 8 (4.6) | |
| Ward of working, <i>n</i> (%) | | | | |
| Childbirth | 18 (11.8) | | 32 (18.4) | |
| Gynecology | 11 (7.2) | | 17 (9.8) | |
| Maternity | 4 (2.6) | | 21 (12.1) | |
| Gynecology-maternity | 55 (36.2) | | 46 (26.4) | |
| Neonatal | 18 (11.8) | | 6 (3.4) | |
| Obstetric and neonatal | 3 (2) | | 8 (4.6) | |
| Pregnancy pathology | 4 (2.6) | | 8 (4.6) | |
| Intensive therapy for newborns | 6 (3.9) | | 8 (4.6) | |
| Clinic | 4 (2.6) | | 11 (6.3) | |
| Own private practice | 0 | | 1 (0.6) | |
| No answer | 29 (19.1) | | 16 (9.2) | |
| Education, <i>n</i> (%) | | | | |
| Midwifery high school | 0 | | 12 (6.9) | |
| Bachelor's degree in midwifery | 149 (98.0) | | 150 (86.2) | |
| Master's degree in midwifery | 3 (2.0) | | 12 (6.9) | |
| Marital status, <i>n</i> (%) | | | | |
| Single | 129 (84.8) | | 15 (8.6) | |
| Informal relationship | 8 (5.4) | | 0 | |
| Married | 15 (9.8) | | 148 (85.2) | |
| Divorced | 0 | | 8 (5.0) | |
| Widowed | 0 | | 2 (1.2) | |

Intention to quit. We also measured the intention to leave the current workplace and the intention to leave the midwifery profession in general, using single questions such as "Are you very seriously considering leaving your current workplace?" and "Are you very seriously considering leaving the midwifery profession?". The questions were formulated by first author especially for this study. The midwives answered each question on a 10-point Likert scale

from 1 (*not considering at all*) to 10 (*considering every day*). One-item scales have been used with success in previous research on the intention to quit (Spector et al., 2007).

Satisfaction with life was examined using the Satisfaction with Life Scale (Diener et al., 1985). This questionnaire consists of five statements concerning a general, subjective assessment of one's own life. Responses are given on a 7-point Likert scale (1 –

completely disagree, 7 – *completely agree*) to statements such as “My living conditions are perfect”. The scores on the questionnaire could range from 7 to 35 points. In the current study, we controlled for sex, age, seniority, the number of working hours per week, the number of full-time jobs, ward or place of employment outside the hospital (e.g., clinic, self-employment), education level, and marital status.

STRATEGY OF DATA ANALYSIS

Before the main analyses, we checked the common method bias and measurement invariance. To minimize common method bias, we performed a single-factor Harman test to identify common method error bias (Podsakoff et al., 2003). In addition, collinearity tests were performed. Due to the comparisons of differences between the groups, we performed a measurement invariance analysis, checking both construct invariance and metric invariance. Confirmation of metric invariance allows one to interpret significant differences in the strength of correlations between variables in the compared groups (Putnick & Bornstein, 2016).

The research model was constructed in such a way as to 1) explain the correlations between occupational stress, job satisfaction, an intention to leave the current workplace or profession, and life satisfaction; 2) determine whether the correlations between occupational stress, an intention to leave the current workplace or profession, and life satisfaction are mediated by job satisfaction; and 3) check whether the strength of the correlations between occupational stress, an intention to leave the current workplace or profession, and job satisfaction is greater in high-experienced midwives than in low-experienced midwives. Statistical verification of the hypotheses was carried out based on intergroup path analysis completed using SPSS IBM Amos v. 29. All the theoretically postulated correlations were tested simultaneously in one statistical model. The analytical approach used reduces falsification and increases precision in the interpretation of results (Antonakis et al., 2021). The data were analyzed in several steps. First, we performed a CFA using the maximum likelihood estimation method. As will be seen below, the values of skewness and kurtosis for the variables intention to leave the current job and intention to leave the profession suggest that the distribution of these variables was not normal. However, we used the maximum likelihood estimation method because this method is more robust to non-normality compared to other estimation methods (such as unweighted least squares) in confirmatory factor analysis and structural equation modeling (Xia & Yang, 2019). The recent studies show that the non-normal distribution of latent variables has a more significant effect on

model fit (underestimation of model fit) and a negligible effect on parameter estimates (Jobst et al., 2022). The following goodness of fit indicators were used to assess the goodness of fit of the model: χ^2/df , CFI, IFI, the SRMR, and the RMSEA. In the second step, we calculated the descriptive statistics and correlations between the variables. In the third step, the model was tested using structural equation modeling (SEM) with a multigroup SEM analysis.

RESULTS

PRELIMINARY ANALYSES AND INVARIANCE TEST RESULTS

The model testing the theoretically postulated correlations between the variables in the whole sample showed an adequate fit to the data: $\chi^2/df = 1.75$, CFI = .955, IFI = .956, SRMR = .048, RMSEA = .048. The single-factor test showed that the one-factor alternative model was very poorly fitted: $\chi^2/df = 5.73$, CFI = .445, IFI = .456, SRMR = .223, RMSEA = .121. The VIF collinearity coefficient was not higher than 1.143 (low-experienced midwives) and 1.343 (high-experienced midwives) for each explanatory variable, and the tolerance index was not higher than 0.875 (low-experienced midwives) and 0.745 (high-experienced midwives). The results presented above suggest that common method variance is not a pervasive problem in this study.

The CFA results suggest that, in the group of low-experienced midwives, the measurement model showed an adequate fit to the data: $\chi^2/df = 1.63$, CFI = .918, IFI = .920, SRMR = .070, RMSEA = .065. The match with the group of high-experienced midwives was also adequate: $\chi^2/df = 1.55$, CFI = .946, IFI = .920, SRMR = .060, RMSEA = .056. The multi-group CFA results showed an acceptable fit of the model to the data: $\chi^2 = 399.97$, $df = 252$, $\chi^2/df = 1.59$, CFI = .934, IFI = .935, SRMR = .070, RMSEA = .043. Construct invariance was confirmed. The model fit indices with imposed equality of factor loadings in both groups suggest that it was adequately fitted to the data: $\chi^2 = 440.65$, $df = 269$, $\chi^2/df = 1.64$, CFI = .923, IFI = .935, SRMR = .075, RMSEA = .044. The indices $\Delta\chi^2 = 40.68$, $\Delta df = 17$, $p = .001$, $\Delta CFI = -.011$, $\Delta RMSEA = .001$, and $\Delta SRMR = .005$ confirm the measurement invariance.

DESCRIPTIVE STATISTICS

Tables 2 and 3 show the descriptive statistics for both groups. Student's *t*-test showed that low-experienced midwives did not differ significantly from high-experienced midwives in terms of the examined variables. However, the groups did significantly

Table 2

Means, standard deviations, minimum and maximum scores, skewness, kurtosis and correlation coefficients (Pearson's r) between the study variables for low-seniority midwives ($n = 152$)

| Variable | M | SD | Min | Max | Skew | Kurt | 1 | 2 | 3 | 4 | 5 | 6 |
|---|-------|------|-----|-----|-------|-------|--------|---------|---------|--------|------|-------|
| 1. Job seniority | 1.38 | 0.68 | 1 | 4.9 | 2.67 | 9.86 | – | | | | | |
| 2. Occupational stress | 28.75 | 5.05 | 11 | 39 | -0.33 | 0.18 | .02 | (.81) | | | | |
| 3. Job satisfaction | 21.86 | 4.78 | 9 | 35 | -0.14 | 0.38 | -.03 | -.35*** | (.78) | | | |
| 4. Intention to leave the current workplace | 2.66 | 2.43 | 1 | 10 | 1.75 | 2.19 | .37*** | .18* | -.24** | – | | |
| 5. Intention to leave the profession | 1.90 | 1.54 | 1 | 10 | 2.99 | 11.04 | .13 | .15 | -.25*** | .48*** | – | |
| 6. Satisfaction with life | 21.14 | 4.98 | 11 | 34 | 0.14 | -0.47 | .05 | -.26*** | .50*** | -.08 | -.15 | (.84) |

Note. Skew – skewness; Kurt – kurtosis; * $p < .05$, ** $p < .01$, *** $p < .001$. Cronbach's α coefficients are presented in brackets on the diagonal.

Table 3

Means, standard deviations, minimum and maximum scores, skewness, kurtosis and correlation coefficients (Pearson's r) between the study variables for high-seniority midwives ($n = 174$)

| Variable | M | SD | Min | Max | Skew | Kurt | 1 | 2 | 3 | 4 | 5 | 6 |
|---|-------|------|-----|-----|-------|-------|---------|---------|---------|--------|------|-------|
| 1. Job seniority | 20.62 | 9.73 | 5 | 39 | -0.08 | -1.11 | – | | | | | |
| 2. Occupational stress | 29.29 | 5.02 | 16 | 44 | -0.10 | 0.28 | .12 | (.75) | | | | |
| 3. Job satisfaction | 21.11 | 5.83 | 6 | 34 | -0.21 | -0.34 | -.27*** | -.50*** | (.83) | | | |
| 4. Intention to leave the current workplace | 2.37 | 2.01 | 1 | 10 | 1.69 | 2.35 | -.03 | .27*** | -.26*** | – | | |
| 5. Intention to leave the profession | 1.66 | 1.49 | 1 | 10 | 3.33 | 12.49 | -.03 | .35*** | -.27*** | .31*** | – | |
| 6. Satisfaction with life | 21.47 | 5.05 | 6 | 35 | -0.11 | 0.17 | -.08 | -.29*** | .46*** | -.04 | -.03 | (.85) |

Note. Skew – skewness; Kurt – kurtosis; *** $p < .001$. Cronbach's α coefficients are presented in brackets on the diagonal.

differ in the number of working hours per week: low-experienced, $M = 39.65$, $SD = 8.41$; high-experienced, $M = 46.35$, $SD = 19.38$, $t = -3.94$, $p < .001$, 95% CI $[-10.04; -3.36]$, $d = 0.44$. On average, low-experienced midwives worked fewer jobs than high-experienced midwives: $M = 1.12$, $SD = 0.36$, $M = 1.41$, $SD = 0.57$, $t = -5.32$, $p < .001$, 95% CI $[-.397; -.183]$, $d = 0.60$. The correlation between age and seniority in both groups was $r = .97$ ($p < .001$). These results indicate a close relationship between age and seniority. A one-way analysis of variance showed that, in the group of low-experienced midwives, there were significant differences in the level of occupational stress across work environments: $F(8, 114) = 2.24$, $p = .029$. Tukey's test showed that the average stress level in midwives working in the neonatal ward ($M = 30.61$, $SD = 4.9$) was significantly higher compared to low-experienced midwives working in the clinic ($M = 21.25$, $SD = 9.03$, $p < .028$, Cohen's $d = 1.28$, 95% CI_{of difference} $[0.56; 18.16]$).

HYPOTHESES TESTING

The path analysis showed that, in the group of low-experienced midwives, occupational stress was not significantly positively correlated with an intention to leave the current workplace ($\beta = .12$, $SE = 0.10$, 95% CI $[-.144; .285]$, $p = .195$) or with an intention to leave the profession altogether ($\beta = .06$, $SE = 0.08$, 95% CI $[-.095; .242]$, $p = .464$). In the group of high-experienced midwives, occupational stress was significantly positively correlated with an intention to leave the current workplace ($\beta = .34$, $SE = 0.12$, 95% CI $[.082; .584]$, $p = .002$) and an intention to leave the profession in general ($\beta = .42$, $SE = 0.09$, 95% CI $[.247; .677]$, $p < .001$). Hypotheses H1a-b were, therefore, par-

tially confirmed. The postulated positive correlation between stress and an intention to leave the current workplace or profession was confirmed only in the group of high-experienced midwives. After controlling for job satisfaction, occupational stress was not significantly associated with the level of life satisfaction in either low-experienced ($\beta = -.06$, $SE = 0.09$, 95% CI $[-.250; .136]$, $p = .514$) or high-experienced midwives ($\beta = .11$, $SE = 0.11$, 95% CI $[-.079; .369]$, $p = .308$). Thus, hypothesis H1c was rejected.

The occupational stress-job satisfaction path indicated a negative correlation and was statistically significant in low-experienced ($\beta = -.38$, $SE = 0.11$, 95% CI $[-.547; -.099]$, $p < .001$) and high-experienced midwives ($\beta = -.62$, $SE = 0.07$, 95% CI $[-.760; -.450]$, $p < .001$). Therefore, hypothesis H2 was accepted.

Job satisfaction was significantly negatively correlated with an intention to leave the current workplace ($\beta = -.25$, $SE = 0.11$, 95% CI $[-.513; -.018]$, $p = .011$) and an intention to leave the profession only in the group of low-experienced midwives. In the group of high-experienced midwives, the correlations were non-significant (intention to leave the current workplace: $\beta = -.02$, $SE = 0.12$, 95% CI $[-.294; .229]$, $p = .807$; intention to leave the profession $\beta = .00$, $SE = 0.11$, 95% CI $[-.195; .276]$, $p = .027$). Therefore, hypotheses H3a-b were confirmed only in the group of low-experienced midwives.

Job satisfaction was a significant positive correlate of life satisfaction in both low-experienced ($\beta = .54$, $SE = 0.09$, 95% CI $[.355; .750]$, $p < .001$) and high-experienced midwives ($\beta = .64$, $SE = 0.10$, 95% CI $[.378; .853]$, $p < .001$). These results support hypothesis H3c.

The indirect effects indicate that the relationships between occupational stress and an intention to leave the current workplace, occupational stress and an intention to leave the profession, and occu-

Table 4

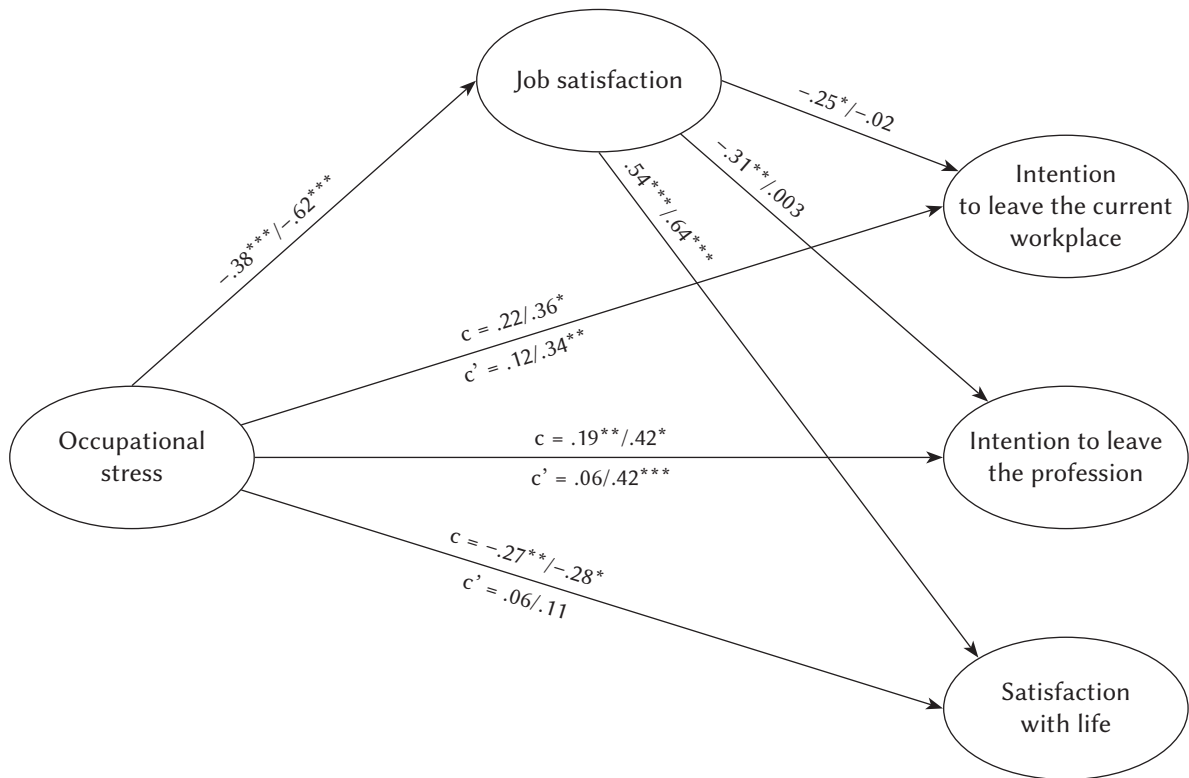
Tests of indirect effects linking occupational stress to intention to leave the current workplace, intention to leave the profession and satisfaction with life via job satisfaction

| Pathway | β | SE | 95% CI | p |
|---------------------------------------|---------|-----|----------------|------|
| Low-seniority midwives ($n = 152$) | | | | |
| OS \rightarrow JS \rightarrow IW | .09 | .05 | [.015; .234] | .020 |
| OS \rightarrow JS \rightarrow IP | .12 | .05 | [.032; .248] | .007 |
| OS \rightarrow JS \rightarrow SWL | -.21 | .07 | [-.363; -.083] | .007 |
| High-seniority midwives ($n = 174$) | | | | |
| OS \rightarrow JS \rightarrow IW | .01 | .07 | [-.158; .187] | .884 |
| OS \rightarrow JS \rightarrow IP | -.002 | .07 | [-.203; .113] | .836 |
| OS \rightarrow JS \rightarrow SWL | -.40 | .09 | [-.661; -.227] | .007 |

Note. OS – occupational stress; JS – job satisfaction; IW – intention to leave the current workplace; IP – intention to leave the profession; SWL – satisfaction with life. Reported coefficients are standardized.

Figure 1

Standardized path coefficients of the final model



Note. Before slash: low-seniority midwives; after slash: high-seniority midwives; c – total effect (X → Y); c' – direct effect (X(M) → Y); *p < .05, **p < .01, ***p < .001.

Arkadiusz M. Jasiński, Romuald Derbis, Jakub Filipkowski

occupational stress and life satisfaction are all completely mediated by job satisfaction in low-experienced midwives. In high-experienced midwives, only the relationship between stress and life satisfaction is mediated by job satisfaction. Based on these data, hypotheses H4a–c were partially confirmed. The detailed results of the analysis of indirect effects are presented in Table 4.

The relationships between occupational stress and an intention to leave the current workplace and an intention to leave the profession were significant only in high-experienced midwives. This gives grounds for accepting hypotheses H5a-b. The negative correlations between occupational stress and job satisfaction, and occupational stress and life satisfaction, were significantly stronger in high-experienced midwives. These results allow us to confirm hypotheses H6a-b. In low-experienced midwives, the developed model explained 15% of the variability in job satisfaction, 10% of the variability in an intention to leave the current workplace, 12% of the variability in an intention to leave the profession, and 32% of the variance in life satisfaction. In high-experienced midwives, our model explained 38% of the variability in job satisfaction, 13% of the variability in an intention to leave the current workplace, 17% of the vari-

ability in an intention to leave the profession, and 34% of the variance in life satisfaction. The detailed results of testing our hypothetical model are shown in Figure 1.

DISCUSSION

The aim of this study was to examine how occupational stress is related to job satisfaction, an intention to leave the current workplace or profession, and life satisfaction. We postulated that the positive correlation between occupational stress and an intention to leave the current workplace or profession, and the negative correlation between occupational stress and life satisfaction would be mediated by job satisfaction. In addition, we checked whether the strength of the correlations between the examined variables differed between low- and high-experienced midwives. The results of the analyses made it possible to achieve the research goals.

According to our results, low-experienced and high-experienced midwives do not differ significantly in terms of occupational stress levels, job satisfaction, intentions to leave the current workplace or profession, and satisfaction with life. These results

are inconsistent with some previous studies, where it was suggested that less experienced midwives have a higher intention to leave the workplace (Peter et al., 2021), while age and seniority were positively correlated with the job and life satisfaction, and negatively correlated with an intention of leaving the job (De Meulenaere et al., 2022; Søbstad et al., 2021; Zhang et al., 2019). However, the current results do correspond with other studies showing no statistically significant differences in the average levels of intention to leave work in a group of nurses with different levels of seniority (Van der Heijden et al., 2019). The average level of intention to leave the current workplace or profession was relatively low in both groups of midwives.

In hypotheses H1a-b, we suggested that occupational stress will be positively correlated with an intention to leave the current workplace and an intention to leave the profession. On an overall level, the current results are consistent with a previous report (Peter et al., 2021), as job stress was significantly positively correlated with an intention to leave the current workplace or the profession altogether. It was found that, when controlling for job satisfaction, occupational stress was a significant positive correlate of an intention to leave the current workplace or profession only in high-experienced midwives. In low-experienced midwives, the correlations between occupational stress and an intention to leave the current place or profession were completely mediated by job satisfaction. A deeper interpretation of these results is provided below in the section explaining indirect effects. Hypothesis H1c assumed that occupational stress would be negatively correlated with life satisfaction. Our results extend previous findings showing that occupational stress may be a predictor of life satisfaction (Kumar et al., 2021). We found that, when controlling for job satisfaction, the negative correlation between work stress and life satisfaction was completely mediated by job satisfaction in both groups. This mechanism is explained below, where we interpret the mediation effects.

The results of testing hypothesis H2 regarding the negative correlation between occupational stress and job satisfaction are consistent with previous findings (i.e., they indicate that occupational stress may significantly reduce job satisfaction; Lu et al., 2019). The current results clarify the nature of the correlation between occupational stress and job satisfaction, as we have shown that stress may more significantly reduce job satisfaction in high-experienced midwives compared to their low-experienced colleagues. These results suggest that seniority may be a more accurate criterion for comparisons between employees than, for example, selected working conditions. Previous studies have shown a very strong negative correlation between work stress and job satisfaction, but the strength of this correlation did not differ between re-

mote and on-site workers (Chudzicka-Czupala et al., 2023).

In hypotheses H3a-b, we suggested that job satisfaction would be negatively correlated with an intention to leave the current workplace or profession. The results of our research further support many arguments (Armitage & Conner, 2001) in favor of the theory of planned behavior, because we found that job satisfaction was significantly negatively correlated with an intention to leave the current workplace or profession. Our results are also consistent with other previous findings, namely that job satisfaction was negatively correlated with an intention to leave (Alsarairh et al., 2014; Li & Yao, 2022). Compared to previous work, we can more precisely indicate that job satisfaction may reduce an intention to leave the current workplace or profession only in low-experienced midwives. The group differences we document are consistent with previous reports, as person-environment fit and job satisfaction (as a correlate of this fit) are more important for younger workers (Kim et al., 2020). The current results may suggest that satisfaction with working conditions is an important factor in determining whether to stay in a given workplace or profession for midwives starting their careers. High-experienced midwives likely consider the decision to leave their current workplace or profession not based on job satisfaction, but on other factors not included in this study. In our opinion, such factors may be the stability of employment and the need to provide for one's own family. Even if a high-experienced midwife enjoys her job, she is less likely to think of leaving her position or profession mainly because of the security the job offers rather than because she enjoys her job. Leaving the current workplace or profession is a change that naturally, due to the need to adapt to new conditions, is a greater challenge for older than younger people.

In hypothesis H3c, we suggested that there exists a positive correlation between job satisfaction and life satisfaction. Indeed, as in previous studies, we found a positive correlation between job satisfaction and life satisfaction (Kosec et al., 2022). We refined our understanding of this correlation because previous data suggested that, when controlling for job stress, overall life satisfaction is a significant positive predictor of job satisfaction, while the correlation between job satisfaction and life satisfaction is not significant (Udayar et al., 2020). Our findings validate the bottom-up thinking about subjective well-being (Diener et al., 2013), as we found that a specific aspect of subjective well-being (job satisfaction) was an important component of overall subjective well-being (life satisfaction). Our results suggest that subjective job satisfaction may more strongly increase overall life satisfaction in high-experienced midwives. We believe that this difference results from the greater role of the professional sphere in shaping the overall

assessment of one's own life in older workers. However, this supposition requires further research.

Hypotheses H4a-b concerned the mediating role of job satisfaction in the correlations between occupational stress and an intention to leave the current workplace or profession. The current results are consistent with previous studies (Nikolaev et al., 2020) and theoretical postulates (Spector, 2022), suggesting an important role for job satisfaction in the correlations between negative work factors (occupational stress) and the negative consequences of job demands for workplaces (leaving the current workplace or profession). These results extend previous findings on the correlation between occupational stress and an intention to leave a group of midwives (Feijen-de Jong et al., 2022). Based on the obtained results, we can conclude that the mechanisms related to an intention to leave the current workplace or profession are different across the compared groups. In low-experienced midwives, when examining job satisfaction, an intention to leave the current workplace and the profession is not a simple consequence of the stress experienced at work. In novice midwives, the motivational process underlying the appearance of the intention to leave proceeds as we predicted. First, in response to not coping with stress at work, the level of job satisfaction decreases, then low job satisfaction may lead to an intention to leave the current workplace or the profession in general. It can be said that, in low-experienced midwives, the motive for leaving the current workplace or profession appears not as a direct reaction to stress, but because stress at work reduces the overall positive evaluation of work. In high-experienced midwives, the mechanism for inducing an intention to leave the current workplace or profession is based on a significant positive correlation between occupational stress and an intention to leave. In other words, experienced midwives consider leaving their current workplace or profession in response to occupational stress, not as a result of stress reducing job satisfaction. In this group, occupational stress is more strongly associated with an intention to leave the profession in general than with an intention to leave the current workplace.

Our conclusions on the nature of the correlations between work stress, job satisfaction, and life satisfaction empirically support the person-environment fit model (Kristof-Brown & Guay, 2011). Our results are similar to previous research which found a correlation between work-related variables (e.g., stress and job satisfaction) and general well-being (Bell et al., 2012). Other research confirmed a negative correlation between occupational stress and life satisfaction, and a positive correlation between job satisfaction and life satisfaction (Lambert et al., 2021). Our results are consistent with these findings and add to the state of research on work-life correlations for two reasons. First, we confirmed a positive spillover between per-

son-job fit and well-being, because job satisfaction can increase life satisfaction. Second, we confirmed a negative spillover between person-job fit and well-being, because occupational stress can reduce life satisfaction. Our results suggest that if midwives experience occupational stress, its negative correlation with life satisfaction is completely mediated by job satisfaction, regardless of the age of the respondents.

In hypotheses H5a-b, we assumed that the strength of the correlation between occupational stress and an intention to leave the current workplace or profession would be stronger in high-experienced midwives compared to low-experienced midwives. Indeed, the results are consistent with our assumptions and with other research results (Jasiński & Derbis, 2023). A stronger correlation between occupational stress and the intention to leave the current workplace or profession among high-experienced midwives may result from the declared worse health of older workers (Hsu, 2018). It may be that older, high-experienced midwives, in response to stress, think more intensively about leaving their current workplace or profession, because with the aging of the cardiovascular system, the activity of the sympathetic nervous system increases, and this autonomic imbalance is perpetuated by the experienced stress (Thayer et al., 2021). It seems to us that the experience of stress is more strongly correlated with the intention to leave the current workplace or profession in high-experienced midwives, because, in the group of older workers, the physiological costs of permanent emotional arousal are higher. Our results are in accordance with other studies indicating a decrease in the effectiveness of employees in responding to occupational stress with age (Charles & Luong, 2013).

The strength of the negative correlation between occupational stress and job satisfaction was significantly greater in high-experienced midwives. Therefore, the results support hypothesis H6a. The fact that in the group of more experienced midwives, stress lowers the level of job satisfaction more strongly may, in our opinion, result from the greater sensitivity of older workers to stress factors. This conclusion is supported by the results of previous studies suggesting that, although older employees make fewer mistakes, they adapt less well to unfavorable working conditions (Warr, 2020). Our results also support previous research showing that, despite the lack of a direct correlation between age/seniority and job satisfaction, the determinants of job satisfaction are different between less and highly experienced employees (Kollmann et al., 2020). We supplement this state of knowledge by pointing out that, although occupational stress may reduce job satisfaction regardless of age, the negative effects of stress on job satisfaction are almost twice as high in high-experienced midwives. In relation to the field of work psychology, we confirm earlier reports of lower biological resis-

tance to stress associated with the aging process (Luo et al., 2020).

In hypothesis H6b, we suggested that the strength of the negative correlation between work stress and life satisfaction would be significantly greater in high-experienced midwives. The obtained results support the hypothesis. There may be several reasons for observing such a correlation. We will focus on two: emotional and cognitive. It may be that more experienced and older midwives experience the negative consequences of work in their private lives more strongly, as they are less able to cope with a chronic work overload (Guglielmi et al., 2016). On the other hand, cognitive flexibility in a stressful situation decreases with age (Crosswell et al., 2021). Workplace stress is less associated with life satisfaction in low-experienced midwives, perhaps because younger workers have more opportunities to change jobs and are less involved affectively (Kooij et al., 2010) and organizationally (Douglas & Roberts, 2020) with work compared to older midwives.

LIMITATIONS

The first limitation is the cross-sectional nature of the project, and the second limitation is the sample size. Over three hundred midwives participated in this study, which limits the generalization of the results. Another limitation is associated with the operationalization of an intention to leave. We only studied the intention, not the actual departure from the current workplace or profession. However, previous research suggests that there is a significant positive correlation between intention and actual behavior (Gieure et al., 2020). The use of single-item scales to study departure intention may also be a limitation. However, a similar approach has produced reliable results in earlier studies on other issues (Labrague et al., 2020).

IMPLICATIONS FOR POLICY AND PRACTICE

Based on our results, we suggest that to reduce the intention to leave the current workplace or profession in senior midwives, prevention of occupational stress is crucial. In high-experienced midwives, the correlation between occupational stress and its negative consequences was stronger than in low-experienced midwives. Reducing the level of occupational stress in older midwives may be particularly important because chronic stressors are a stronger predictor of depressive tendencies in older people (Murayama et al., 2020). On the other hand, we can see that, in low-experienced midwives, the correlations between occupational stress and an intention to leave the current workplace or profession are completely mediated by job satisfaction. Job satisfaction can be understood as

a positive assessment of one's work, resulting from an alignment between working conditions and the needs of the employee (Kim et al., 2020). Therefore, we suggest that it is necessary to pay special attention to improving job satisfaction in employees with less seniority. The current results also give us reasonable grounds to assume that whether an employee likes their job is important in predicting an intention to leave the current workplace or profession in younger employees. Compared to more experienced employees, job satisfaction is more strongly influenced by cash rewards in younger employees (Kollmann et al., 2020). Based on our results and other studies, we suggest expanding flexible working conditions in this midwife group. Previous studies have suggested that flexible working conditions are positively correlated with a positive impact of work on personal life, negatively correlated with time pressures to reconcile work-family responsibilities, and negatively correlated with workload (Sok et al., 2014). An important role in increasing job satisfaction and preventing an intention to leave a job can be played by developing a resource-rich work environment (e.g., social support, trust between employees, and sharing responsibility). Previous research has documented positive correlations between social capital, work engagement, and job satisfaction (Jutengren et al., 2020), suggesting that older and more experienced employees have higher job satisfaction and are less likely to think about retirement if they are engaged in work (Jiang et al., 2022).

CONCLUSIONS

The current study clarifies the correlations between occupational stress, job satisfaction, an intention to leave, and life satisfaction in low- and high-experienced midwives. We found that occupational stress was significantly negatively correlated with the level of job satisfaction in both study groups, but in high-experienced midwives the correlation was stronger. Job satisfaction was a positive correlate of life satisfaction, and this relationship was stronger in more experienced employees. We also found that job satisfaction was negatively correlated with an intention to leave the current workplace and an intention to change professions only in low-experienced midwives. In addition, the results suggest that the consequences of stress are also correlated with the seniority of the respondents. In high-experienced employees, occupational stress was significantly positively associated with an intention to leave the current workplace or an intention to leave the profession. In low-experienced midwives, the correlations between occupational stress, an intention to leave the current workplace, an intention to leave the profession, and life satisfaction were completely mediated by job satisfaction.

DISCLOSURES

This research received no external funding.

The study was approved by the Research Quality Assessment Committee at the Institute of Psychology of the University of Opole (Approval No. KOJBN 4/2022).

The authors declare no conflict of interest.

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