Relationship of professionalism, rewards, market orientation and job satisfaction among medical professionals
The case of Certified Nurse–Midwives

Gerald M. Hampton\textsuperscript{a,}\textsuperscript{*}, Dorothee L. Hampton\textsuperscript{b}

\textsuperscript{a}Marketing Department, New Mexico State University, Box 5280, Las Cruces, NM 88003-8001, USA
\textsuperscript{b}Texas Tech University, USA

Abstract

A model considers the impact of professionalism, market orientation and reward structure on job satisfaction of Certified Nurse–Midwives (CNMs). Structural equation modeling methods are used to examine data collected from these health care providers. The results indicate professionalism and rewards are positively related to job satisfaction. Professionalism and rewards were found to be positively correlated with market orientation. In turn, rewards were found to be strongly and positively related to professionalism. In addition, market orientation was found to be strongly and positively related to job satisfaction.

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Keywords: Market orientation; Professionalism; Job satisfaction; Rewards; Certified Nurse–Midwives

1. Introduction

Effective marketing practice begins with the acceptance of the marketing concept. To create and set in motion marketing activities without adoption of the marketing concept is not considered marketing (Joseph, 1996; Trust-rum, 1989). When the marketing concept is implemented, an organization is said to have a market orientation. A market orientation is defined as either a set of organizational values or continuous processes vital to the creation of goods and services of superior value offered to customers (Kohli and Jaworski, 1990; Narver and Slater, 1990; Ruekert, 1992).

Studies show a market orientation is associated with organizational success. For example, Narver and Slater (1990) found a positive relationship between market orientation and return on assets. Deshpande et al. (1993) demonstrate market-oriented organizations perform better in terms of market share, sales turnover, growth rate and profitability than other organizational types. Ruekert (1992) found market orientation positively related to long-run financial success, employee job satisfaction and trust in management. Raju et al. (1995) established that a market orientation is significantly related to selected performance dimensions in hospitals. Webb et al. (2000) found a positive correlation between market orientation and both customer satisfaction and service quality. Other works illustrate a market orientation is related to on-time delivery, product durability, sales growth, market share, profitability, job satisfaction and customer satisfaction (Liu, 1995; Tansuhaj et al., 1988, 1991; Wright et al., 1997).

With such evidence, one assumes employees accept and embrace the marketing concept. In service organizations, professionals are perceived as a different kind of worker due to the tasks performed and their associated social beliefs and behaviors (Cullen, 1978; Bywaters, 1991; Wallace, 1995). Behaviors and beliefs include a high level of expertise, freedom to manage the task, task commitment, identification with peers, an ethical system and a means to maintain standards (Raelin, 1986).

Professional involvement normally includes associations that enhances commitment, encourages peer support, develops peer assessment and provides protection for their collective reputation. For example, the American Medical Association serves this function for physicians, while the American College of Nurse Midwives serves the identical function for Certified Nurse–Midwives (CNMs). In some settings, professionals have not embraced marketing and a
market orientation since it challenges aspects of professionalism, especially job autonomy and freedom to develop and establish processes for the tasks performed (Dawson, 1994; Morgan and Piercy, 1991; Whittington and Whipp, 1992). Mayer (1997) emphasizes this point when he says that the most important organizational issue today is how can a modern society, deeply dependent on its professional class, assure itself that professional work—law, medicine, architecture, accountancy, engineering, teaching—will be done skillfully in the right quantities for the right reasons at the right price? In other words, how can we be sure professional service firms will be market-oriented, thereby creating the environment many feel essential for delivering customer value and consumer satisfaction?

This study proposes and tests a conceptual framework that considers the impact of professionalism, market orientation and reward structure on job satisfaction for one group of medical professionals, CNMs. It also examines the relationship between rewards and professionalism. Section 2 develops the conceptual framework for this research.

2. Conceptual framework

This section develops the constructs in the conceptual model and the hypothesized relationships examined among a sample of CNMs (see Fig. 1). The model suggests market orientation plays a central role in the service professional’s work environment, and proposes a model that includes rewards, or incentives for enhancing professionalism, professionalism and work satisfaction. Further, it indicates that a market orientation is affected by rewards and professionalism, and that work satisfaction is affected by market orientation, rewards and professionalism. The following is a review of the literature that lends support for these relationships.

2.1. Professionalism and rewards

The literature discusses professions, professionals and professionalism at length, but unfortunately presents no concrete and consistent definition. An overview of the extant research indicates professions share a number of attributes: (1) a body of specific knowledge gained through formal education, (2) a high level of developed skills, (3) some type of entry requirements, (4) a certification or licensing process and (5) a set of behavioral norms and beliefs known as professionalism (Cullen, 1978; Fitzpatrick, 1983; Hall, 1968; Keer and Von Glinow, 1977; Raelin et al., 1985; Wilensky, 1964). These attributes are often categorized as structural and attitudinal. Structural attributes lead to the creation of the professional and include entrance requirements, formal education, mandatory skill development and licensing or certification. On the other hand, professionalism is the attitudinal component, or behavioral dimension, that conditions how individuals think about, believe in and behave toward their occupation or profession, including a sense of calling, job autonomy and commitment to professional associations (Hall, 1968; Keer and Von Glinow, 1977).

The nurse–midwifery literature portrays the CNM as a well educated and trained medical provider. She is an advanced nurse practitioner who is a strong advocate for the mother and her family, who sees birth as a natural process, who is competent because of her education and training, who commands respect from peers, and who has the leadership abilities, values, attitudes and skills to operate effectively and independently in any health care organization.
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