

Staff Satisfaction at a Private Hospital in Mogadishu, Somalia: A Cross-Sectional Survey

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Abstract:

Background: Staff satisfaction is a key determinant of workforce performance, service quality, and staff retention in healthcare settings. In fragile and post-conflict contexts such as Somalia, empirical evidence on staff satisfaction—particularly from private healthcare facilities—remains limited. To assess levels of staff satisfaction across multiple workplace domains and identify relative strengths and areas for improvement among employees at Royal Hospital in Mogadishu, Somalia.

Methods: An analytical cross-sectional survey was conducted among staff at Royal Hospital. All eligible employees were invited to participate (N = 220), and 110 staff completed a structured self-administered questionnaire (response rate = 50.0%). Staff satisfaction was measured using a 24-item instrument covering eight domains and rated on a 5-point Likert scale. Domain scores were calculated as mean item scores. Descriptive statistics summarized participant characteristics and satisfaction outcomes, and internal consistency was assessed using Cronbach's alpha.

Results: Overall staff satisfaction was high, with mean scores clustering toward the upper end of the scale. The highest satisfaction was observed for job role and workload, work environment and teamwork, and overall satisfaction (all mean scores > 4.3). Moderate satisfaction was reported for leadership and communication, recognition, fairness, and learning and career development. Compensation and staff welfare recorded the lowest mean score (3.57), indicating a relative area of concern. The full satisfaction scale demonstrated excellent internal consistency (Cronbach's $\alpha = 0.939$).

Conclusion: Staff at Royal Hospital reported generally high levels of satisfaction, reflecting strong organizational foundations in role clarity, teamwork, and the work environment. However, comparatively lower satisfaction with compensation and welfare highlights priority areas for targeted human resource interventions. Routine staff satisfaction assessments may support evidence-based management strategies to sustain a motivated healthcare workforce in resource-constrained settings.

Keywords: Staff satisfaction; healthcare workforce; hospital management; job satisfaction; Somalia.

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Introduction

Staff satisfaction in hospital settings is a critical determinant of organizational effectiveness, which directly shapes healthcare quality, employee performance, and patient outcomes[1]. Satisfied staff members exhibit higher motivation and engagement, leading to fewer medical errors and improved service delivery, as evidenced by systematic reviews linking low burnout and stress to reduced adverse events[1]. This satisfaction fosters a virtuous cycle in which enhanced employee performance through better adherence to protocols and proactive care translates into superior patient experiences, including higher satisfaction scores tied to effective communication and teamwork[2,3]. The

importance of staff satisfaction extends to healthcare quality by mitigating turnover and absenteeism, which disrupts the continuity of care and inflates costs[4]. Research demonstrates that satisfied nurses and physicians deliver more empathetic and timely interventions, correlating with lower readmission rates and better clinical outcomes in diverse hospital contexts[5]. For employee performance, satisfaction bolsters resilience against stressors such as pandemics, sustaining productivity, and innovation. Studies from public hospitals confirm that moderate satisfaction levels predict sustained service quality despite high workloads[6]. Patient outcomes hinge on this foundation, with path analyses revealing

that staff perceptions of care quality rooted in satisfaction strongly predict patient satisfaction and experience [2]. Job role clarity reduces ambiguity, empowers staff, and curbs errors, while manageable workloads prevent fatigue-induced declines in performance[4]. Transformational leadership and robust teamwork cultivate trust and collaboration, amplifying satisfaction and outcomes[7]. A supportive work environment encompassing architectural design and resources enhances well-being, as quantitative surveys link positive physical and social settings to higher staff morale and patient safety[8]. Prioritizing these factors equips hospitals with optimizing human capital to endure excellence[1]. Healthcare worker satisfaction in low-resource, fragile, or post-conflict contexts, such as Somalia, faces unique challenges, including insecurity, resource scarcity, and high workloads, which exacerbate burnout and undermine retention[9]. In such settings, empirical studies reveal moderate to low satisfaction levels among staff, driven by inadequate pay, poor infrastructure, and limited professional development, as documented in cross-sectional analyses from Mogadishu hospitals, where burnout affects nearly one in four workers[9]. These conditions mirror broader patterns in fragile states, where satisfaction correlates inversely with conflict intensity and positively with organizational support, yet data remain sparse compared with stable environments[10]. Limited empirical evidence exists, specifically from private hospitals in Somalia, with most research focusing on public facilities or patient perspectives rather than staff experiences[11]. For instance, qualitative insights highlight trust in private providers amid public sector gaps, but quantitative studies on staff satisfaction, such as motivation among maternal health workers, are confined to tertiary public sites in Mogadishu, revealing deficits in intrinsic job satisfaction and organizational commitment[11,12]. No institution-level studies from private hospitals, such as those in Borama or Mogadishu, have comprehensively assessed staff views, leaving a void in understanding sector-specific dynamics[13]. This knowledge gap regarding multidimensional staff satisfaction encompassing emotional, intrinsic, and extrinsic factors is particularly acute, hindering tailored interventions[14]. Institution-level evidence is essential for hospital management and human resource policies, enabling strategies such as performance-based incentives and psychosocial support to enhance retention and care quality in Somalia's private sector[15]. Addressing this through targeted research would bridge evidence deficits and foster resilient healthcare systems for post-conflict fragility[9].

Methodology

Study Design and Setting

An analytical cross-sectional survey was conducted among staff members at Royal Hospital, a tertiary healthcare facility in Mogadishu, Somalia, to assess levels of staff satisfaction across multiple workplace domains.

Study Population and Data Collection

The study population comprised all staff employed at Royal Hospital during the study period who were eligible to participate in the survey (N = 220). All eligible staff were invited to take part in the study using a census approach. Data were collected using a structured, self-administered questionnaire distributed during

working hours. A total of 110 staff members completed the questionnaire, yielding a response rate of 50.0%.

The questionnaire was developed by the research team specifically for this study. It was informed by previous literature on staff satisfaction in healthcare settings and tailored to the local hospital context. Before the main data collection, the questionnaire was reviewed for clarity and piloted among a small group of staff. The full questionnaire is provided as Supplementary File

Measurement and Scoring

Staff satisfaction was measured using a structured questionnaire comprising 24 items grouped into eight conceptual domains. All items were rated on a 5-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree). Domain-level satisfaction scores were calculated for each respondent as the mean of the constituent items within each domain, with higher scores indicating higher levels of satisfaction.

Analyses of satisfaction items and domain scores were conducted using complete-case data. Of the 110 respondents, 103 participants had complete satisfaction scale data and were included in item-level and domain-level analyses. The internal consistency of the overall scale and individual domains was assessed using Cronbach's alpha, with values ≥ 0.70 considered indicative of acceptable reliability.

Statistical Analysis

Descriptive statistical methods were used to summarize participant characteristics and staff satisfaction outcomes. Categorical variables were summarized using frequencies and percentages, while continuous variables were described using means and standard deviations or medians and interquartile ranges, as appropriate. All statistical analyses and tables were generated using **SPSS version 17.0**, and graphical visualizations were produced using **R version 4.4.3**.

Ethical approval

Ethical approval for this study was obtained from the Research and Ethics Committee of Royal Hospital, Mogadishu, Somalia. Participation was voluntary, and informed consent was obtained from all participants prior to data collection. Data were collected anonymously to ensure confidentiality, and all the information was used exclusively for research purposes.

Results

A total of 110 staff members from Royal Hospital participated in the study, representing a 50.0% response rate among eligible staff. Respondents were drawn from a broad range of hospital departments, reflecting the multidisciplinary composition of the workforce. The largest proportion of respondents were from the Nursing department (18.4%), followed by Doctors (10.7%), Laboratory staff (9.7%), and Environmental Cleaning staff (9.7%). Other departments, including Administration, Customer Care, Pharmacy, Operating Theatre, Security, and Public Health, contributed smaller proportions of participants. The detailed departmental distribution of respondents is presented in Table 1.

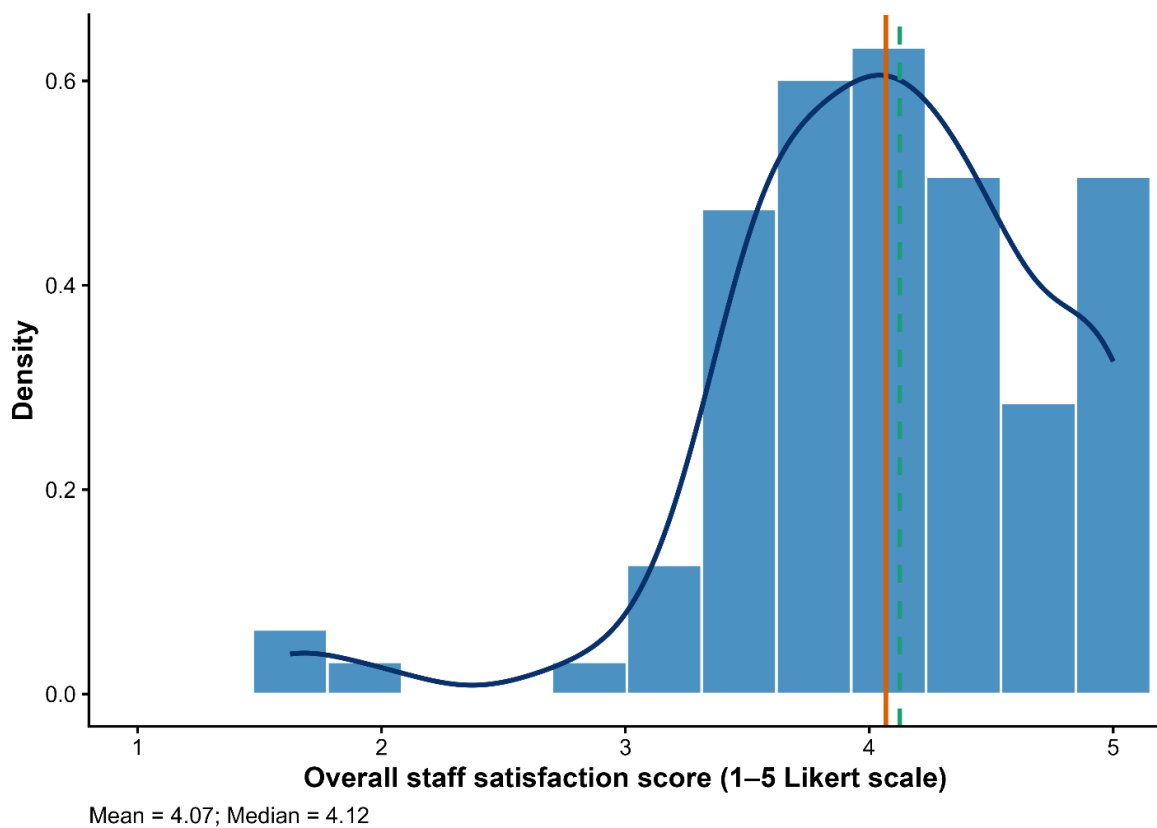
Table 1. Departmental Distribution of Respondents (n = 110)

Department	N	%
Administration	9	8.7
Assistants	3	2.9
Customer Care	8	7.8
Doctors	11	10.7
Environmental Cleaning	10	9.7
Laboratory	10	9.7
Maternity	6	5.8
Nursing	19	18.4
Operating Theatre (OT)	6	5.8
Pharmacy	6	5.8
Public Health	3	2.9
Reception & Cashier	5	4.9
Security	7	6.8
Total	110	100.0

Overall Staff Satisfaction

Overall staff satisfaction was high among respondents. The distribution of overall satisfaction scores demonstrated a strong clustering toward the upper end of the 5-point Likert scale, with a high central tendency and limited dispersion. This pattern indicates generally positive perceptions of working conditions and organizational support among staff at Royal Hospital (Figure 1).

Figure 1: Distribution of Overall Staff Satisfaction Scores



Item-Level Staff Satisfaction

Item-level analyses were conducted among respondents with complete satisfaction data (n = 103). Overall, mean satisfaction scores were high, with most items scoring above 4.0 on the 5-point Likert scale. The highest-rated items reflected clarity of job expectations, workplace respect, and willingness to recommend the hospital as a place of work, each with mean scores exceeding 4.4. In contrast, comparatively lower mean

scores were observed for items related to salary and benefits, work–life balance, and staff welfare services, although median values generally indicated moderate satisfaction rather than dissatisfaction. Detailed item-level statistics are presented in **Table 2**.

Table 2. Descriptive Statistics of Staff Satisfaction Items (n = 110)

Satisfaction Item	n	Mean ± SD	Median (IQR)
I clearly understand my job expectations and duties	103	4.55 ± 0.68	5 (4–5)
I feel respected and comfortable in my workplace	103	4.43 ± 0.90	5 (4–5)
I would recommend Royal Hospital as a good place to work	103	4.42 ± 1.03	5 (4–5)
I am satisfied with my current job role and responsibilities	103	4.41 ± 0.82	5 (4–5)
My job allows me to use my skills and abilities effectively	103	4.41 ± 0.83	5 (4–5)
Overall, I am satisfied working at Royal Hospital	103	4.39 ± 0.98	5 (4–5)
There is good teamwork and cooperation among staff in my department	103	4.30 ± 0.88	4 (4–5)
My working environment is clean, safe, and well-equipped	103	4.28 ± 0.95	4 (4–5)
I feel valued and appreciated by the management team	103	4.19 ± 0.90	4 (4–5)
My workload is reasonable and manageable	103	4.17 ± 0.69	4 (4–5)
I receive recognition for the good work I do	103	4.14 ± 1.00	4 (4–5)
My immediate supervisor supports me in solving work-related problems	103	4.13 ± 1.05	4 (4–5)
Management communicates clearly and keeps staff informed about important decisions	103	4.11 ± 0.91	4 (4–5)
All employees are treated fairly regardless of gender, position, or background	103	4.09 ± 1.05	4 (4–5)
I receive regular feedback from my supervisor about my performance	103	3.97 ± 1.15	4 (4–5)
Performance evaluations are fair and help me improve my work	103	3.97 ± 1.06	4 (4–5)
Health, safety, and wellness programs are adequate and effective	103	3.95 ± 1.00	4 (4–5)
I feel comfortable raising complaints, ideas, or suggestions to HR or management	103	3.93 ± 1.10	4 (3–5)
I have fair opportunities for career growth and promotion	103	3.92 ± 1.14	4 (3–5)
Conflicts and misunderstandings are handled fairly and quickly	103	3.80 ± 1.22	4 (3–5)
The hospital provides me with sufficient training and learning opportunities	103	3.77 ± 1.10	4 (3–5)
The hospital provides good welfare services (meals, uniforms, rest areas)	103	3.55 ± 1.33	4 (3–5)
I have a good balance between my work and personal life	103	3.48 ± 1.37	4 (2–5)
My salary and benefits are fair for the work I do	103	3.29 ± 1.35	3 (2–4)

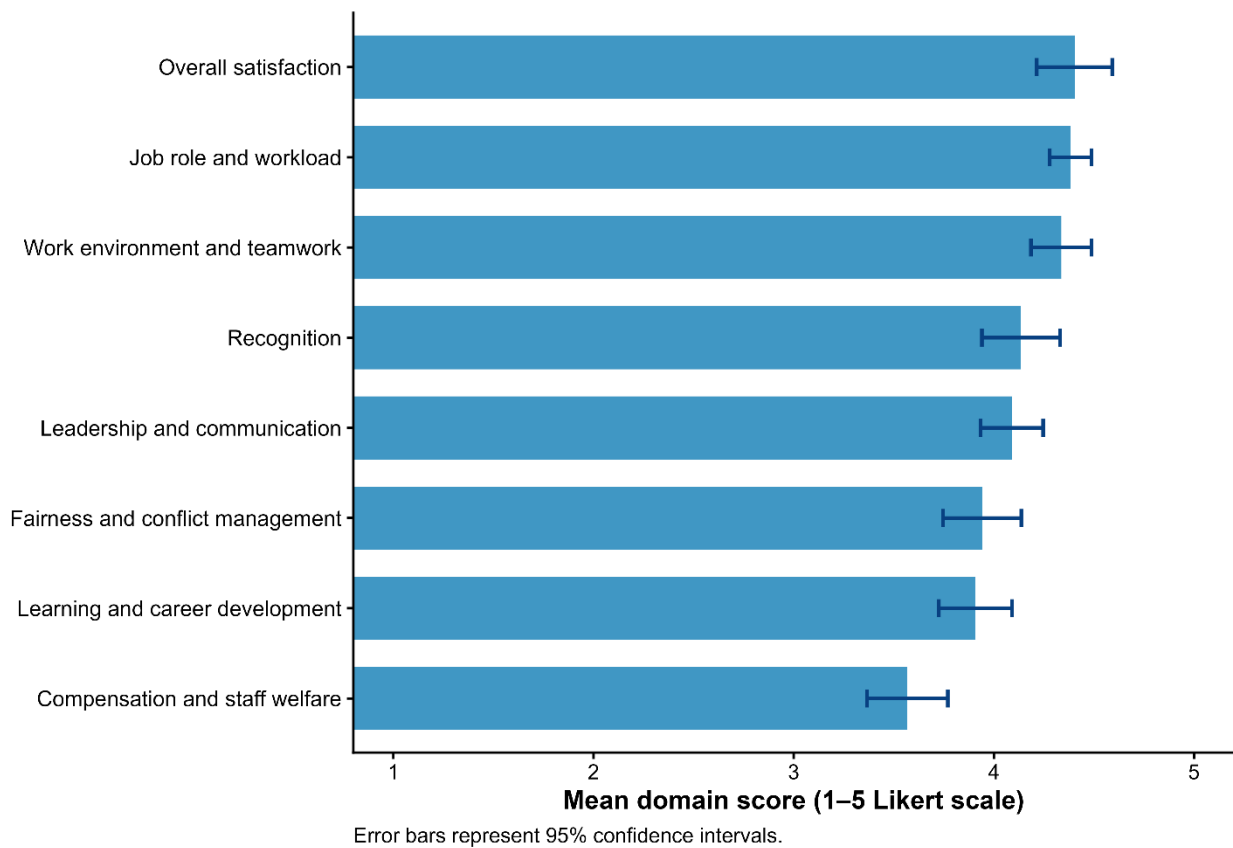
Domain-Level Satisfaction

The highest mean satisfaction scores were observed for overall satisfaction, job role and workload, and work environment and teamwork (all >4.3). Moderate satisfaction was reported for recognition, leadership and communication, fairness and conflict management, and learning and career development, while compensation and staff welfare recorded the lowest mean score (3.57). Domain-level results are shown in Table 3 and Figure 2.

Table 3. Domain-Level Staff Satisfaction Scores (1–5 Likert Scale; n = 110)

Domain	Items	n	Mean ± SD	Min–Max
Overall satisfaction	2	103	4.40 ± 0.97	1.00–5.00
Job role and workload	4	103	4.38 ± 0.53	2.00–5.00
Work environment and teamwork	3	103	4.34 ± 0.77	1.00–5.00
Recognition	1	103	4.14 ± 1.00	1.00–5.00
Leadership and communication	4	103	4.09 ± 0.80	1.00–5.00
Fairness and conflict management	2	103	3.94 ± 1.00	1.00–5.00
Learning and career development	4	103	3.91 ± 0.93	1.00–5.00
Compensation and staff welfare	4	103	3.57 ± 1.04	1.00–5.00

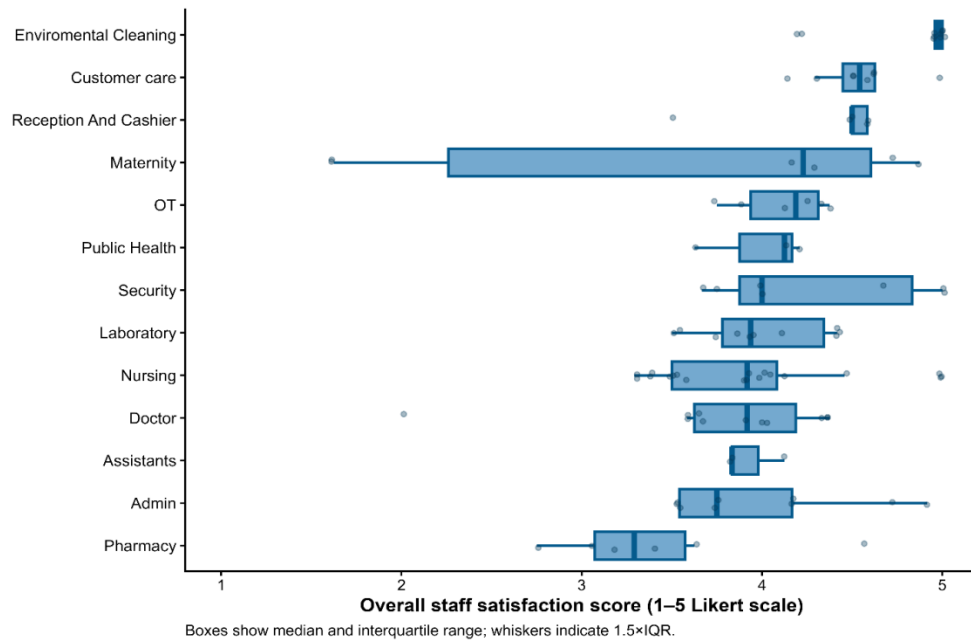
Figure 2: Mean Staff Satisfaction Scores by Domain



Departmental Differences in Satisfaction

Variation in overall satisfaction scores was observed across hospital departments. While most departments demonstrated generally high levels of satisfaction, differences in medians and interquartile ranges suggest heterogeneity in staff experiences across organizational units. Given the relatively small sample sizes within some departments, these findings are presented descriptively and should be interpreted with caution. The distribution of overall satisfaction scores by department is shown in Figure 3.

Figure 3: Overall Staff Satisfaction Scores by Department



Reliability of the Staff Satisfaction Scale

The staff satisfaction scale demonstrated excellent overall internal consistency, with a Cronbach’s alpha of 0.939. Most multi-item domains showed good to excellent reliability, with Cronbach’s alpha values exceeding 0.80. The domains of fairness and conflict management and job role and workload demonstrated acceptable to borderline internal consistency. Reliability was not assessed for the single-item recognition domain. Detailed reliability estimates are presented in Table 4.

Table 4. Reliability of the Staff Satisfaction Scale and Domains

Scale / Domain	Items (k)	Cronbach’s α	Interpretation
Compensation and staff welfare	4	0.829	Good
Fairness and conflict management	2	0.713	Acceptable
Job role and workload	4	0.656	Questionable
Leadership and communication	4	0.819	Good
Learning and career development	4	0.857	Good
Overall satisfaction	2	0.908	Excellent
Recognition	1	—	Single-item domain
Work environment and teamwork	3	0.804	Good
Full scale	24	0.939	Excellent

Discussion

This study assessed staff satisfaction across multiple departments at Royal Hospital, Mogadishu. The study at Royal Hospital, Mogadishu, demonstrates generally high staff satisfaction across multiple domains, despite operating in a fragile, post-conflict health system context. This pattern aligns with evidence that, even in resource-constrained and conflict-affected settings, health workers often report relatively positive views of their core professional roles and relationships when organizational culture, teamwork, and role clarity are supportive[16,17].

Interpretation of main findings

The high satisfaction with job role clarity, workload, teamwork, and the immediate work environment suggests that Royal Hospital has established a relatively coherent organizational structure and collaborative culture that supports day-to-day clinical and nonclinical functions. Similarly, studies from sub-Saharan

Africa and other low- and middle-income countries (LMICs) have found that clear role expectations, supportive colleagues, and a safe, enabling work environment are central drivers of health worker morale and performance. Conversely, only moderate satisfaction with leadership, communication, recognition, fairness, and career development indicates that deeper aspects of organizational governance and human resource management remain areas for improvement, consistent with the broader LMIC literature showing that inadequate supervision, limited feedback, and opaque promotion systems undermine staff engagement and retention[17–19]. The very low satisfaction with compensation, staff welfare, and work–life balance is noteworthy given the broader Somali and post-conflict context, where salary levels, benefits, and social protection for health workers are often constrained by chronic underfunding and fragmented governance arrangements. Similar findings have been reported among nurses and other health professionals in Mogadishu and other fragile settings, where dissatisfaction with pay, benefits, and workload has frequently been highlighted as a key demotivating factor. Variation

in satisfaction across departments is also consistent with evidence that exposure to heavy workloads, shift work, resource scarcity, and differing supervisory styles can produce heterogeneous work experiences within the same institution[20–23].

Comparison with existing literature

The overall high satisfaction with this hospital contrasts with several studies from Somali public hospitals, where staff satisfaction has often been reported as neutral or low, particularly in relation to remuneration, recognition, and opportunities for advancement. However, it aligns with evidence from other LMIC and post-conflict settings showing that, where facility-level management invests in supportive work environments and teamwork, staff may still report relatively positive overall satisfaction despite persistent systemic constraints. Systematic reviews of health workers in fragile and post-conflict settings emphasize that non-financial factors such as professional identity, community attachment, and collegial support can partially offset structural deficits and help retain staff in challenging environments[16,24–26]. At the same time, the pattern of the lowest scores for compensation and welfare mirrors wider African and regional evidence that poor remuneration, limited benefits, and inadequate social protection remain critical sources of dissatisfaction and intention to leave among health workers. Studies examining work–life balance among health professionals in low-resource settings similarly highlight that long hours, shift work, and role overload increase stress and burnout, particularly when staffing levels are inadequate and flexibility in scheduling is limited. These converging findings suggest that the profile observed at Royal Hospital—relatively strong intrinsic and relational aspects of work coexisting with persistent dissatisfaction with financial and welfare conditions—is characteristic of many health facilities in fragile and low-income settings[17,18,20,22,23].

Conclusion

This study provides comprehensive evidence of staff satisfaction across all departments at the Royal Hospital of Mogadishu. The findings demonstrated that overall staff satisfaction is high, indicating a generally positive work experience among hospital employees. Staff reported strong satisfaction with key domains, such as job role clarity, workload management, work environment, teamwork, and overall organizational commitment. These results reflect effective internal systems, clear operational structures, and a supportive workplace culture within hospitals.

The high level of satisfaction related to understanding job expectations and the ability to use professional skills effectively suggests that the Royal Hospital has successfully implemented clear job descriptions and functional role allocation. Additionally, positive perceptions of teamwork and workplace safety indicate a collaborative and enabling environment, which is essential for maintaining quality healthcare service delivery. Moderate satisfaction levels were observed in the domains related to leadership, communication, recognition, learning opportunities, and fairness. While these findings remain positive overall, they suggest areas in which targeted improvements could further enhance staff engagement and motivation. Strengthening communication mechanisms, providing regular feedback, and expanding professional development opportunities could contribute to sustained workforce satisfaction and long-term staff retention. The domains of compensation and staff welfare recorded the

lowest satisfaction scores relative to other areas, highlighting it as a priority area for management attention. Although the staff did not express outright dissatisfaction, the findings indicate the need for strategic interventions to improve welfare services, work–life balance, and perceived fairness of remuneration. Addressing these concerns may play a critical role in reinforcing staff morale and reducing potential turnover risk. Variations in satisfaction across departments further underscore the importance of department-specific assessments and management approaches. Recognizing and responding to the unique needs of different departments can enhance equity, efficiency, and overall organizational performance. In conclusion, this study confirms that royal hospitals benefit from a largely satisfied workforce, which represents a strong foundation for quality patient care and institutional growth. Continued investment in staff welfare, leadership development, and career progression, along with the maintenance of existing strengths, is essential for sustaining high levels of staff satisfaction and advancing the hospital’s mission of delivering high-quality healthcare services.

Recommendations

Based on the findings of this study, several evidence-based and actionable recommendations are proposed to further strengthen staff satisfaction and sustain organizational performance at Royal Hospitals.

➤ Strengthen Compensation and Staff Welfare Policies

Given that compensation and staff welfare recorded the lowest satisfaction scores among all domains, hospital management should prioritize gradual and sustainable improvements in this area. While immediate salary adjustments may be constrained by financial realities, alternative strategies can be implemented, including the enhancement of welfare services, such as staff meals, uniforms, rest areas, and health support programs. Introducing non-monetary incentives, recognition benefits, and flexible scheduling, where feasible, may also help improve perceptions of fairness and work–life balance.

➤ Enhance Work–Life Balance Initiatives

Moderate satisfaction with work–life balance suggests a need for improved workload planning and staff support mechanisms. Management should explore options for equitable shift allocation, adequate staffing coverage, and reasonable duty schedules, particularly in high demand departments. Promoting a culture that values rest, mental well-being, and leave utilization can help reduce burnout and improve long-term staff retention.

➤ Strengthen Leadership Communication and Feedback Systems

Although leadership and communication were rated positively overall, the findings suggest room for improvement. Hospital leadership should strengthen structured communication channels and ensure timely and transparent dissemination of information related to policies, decisions, and organizational changes. Regular supervisory meetings, performance feedback sessions, and staff forums can enhance the trust, engagement, and alignment between management and employees.

➤ Improve Recognition and Motivation Mechanisms

While the staff generally felt valued, formal recognition systems could be further strengthened. Management is encouraged

to institutionalize recognition programs, such as employee-of-the-month awards, departmental acknowledgments, and performance-based commendations. Clear recognition policies can reinforce positive behaviors, improve morale, and motivate staff to maintain high performance standards.

➤ **Expand Learning and Career Development Opportunities**

Moderate satisfaction with training and career growth highlights the need for structured professional development pathways. Royal hospitals should consider developing a comprehensive staff development plan that includes regular training sessions, mentorship programs, internal promotions, and access to continuing education opportunities. Clearly communicating promotion criteria and career pathways can enhance motivation and reduce uncertainty among staff.

➤ **Promote Fairness and Effective Conflict Management**

Although perceptions of fairness were generally positive, strengthening formal grievances and conflict resolution mechanisms can further improve staff confidence. Management should ensure that all staff are aware of complaint procedures and feel safe, raising concerns without fear of retaliation. Timely, transparent, and impartial handling of conflict reinforces trust in institutional governance.

➤ **Implement Department-Specific Improvement Plans**

The observed variations in satisfaction across departments suggest that a one-size-fits-all approach may not be sufficient. Hospital management should conduct department-level reviews to identify unique challenges and to develop targeted interventions. Engaging department heads in designing tailored action plans can improve the local ownership and effectiveness.

➤ **Institutionalize Periodic Staff Satisfaction Assessments**

Given the strong reliability of the satisfaction scale used in this study, it is recommended that Royal Hospital institutionalize regular staff satisfaction surveys. Conducting these assessments annually or biannually will enable the monitoring of trends over time, evaluation of implemented interventions, and data-driven decision-making in human resource management.

➤ **Integrate Findings into Strategic and HR Planning**

The results of this study should be integrated into hospitals' strategic planning, human resource policies, and quality improvement frameworks. Aligning staff satisfaction initiatives with organizational goals will help ensure sustainability and reinforce hospitals' commitment to employee well-being and service excellence.

Declarations

Ethics approval and consent to participate

Ethical approval for this study was obtained from the Research and Ethics Committee of Royal Hospital, Mogadishu, Somalia. The study was conducted in accordance with the ethical principles outlined in the Declaration of Helsinki. Participation was voluntary, and informed consent was obtained from all participants prior to data collection. Data were collected anonymously to ensure

confidentiality, and all information was used exclusively for research purposes.

Consent for publication

Not applicable,

Availability of data and materials

The datasets generated and analyzed during the current study are available from the corresponding author on reasonable request and with permission from the Royal Hospital management.

Competing interests

The authors declare that they have no competing interests.

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Clinical trial

Clinical trial number: not applicable.

Authors' contributions

Conceptualization: I.O. Hussein, M.H. Osman, Methodology: I.O. Hussein, M.H. Osman, A.H. Aden, Formal analysis: I.O. Hussein, A.H. Aden, Investigation (data collection): I.O. Hussein, A.H. Aden, N.I. Ahmed, Data curation: I.O. Hussein, A.H. Aden, Writing – original draft: I.O. Hussein, Writing – review & editing: I.O. Hussein, M.H. Osman, A.H. Aden, N.I. Ahmed, Supervision: M.H. Osman, Project administration: I.O. Hussein, M.H. Osman

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