

The Relationship among Communication Competence, Organizational Commitment and Job Stress in Dental Hygienists

Soon Ryun Lim*

Department of Dental Hygiene, Namseoul university, 91 Daehak-ro Seongwhan-eup Seobuk-gu Cheonan-si
Chungchungnam-do – 31020, Republic of Korea;
dittochun4@hanmail.net

Abstract

Objectives: This study was conducted to understand the relationship between organizational commitments, job stress and communication competence in clinical dental hygienists and to provide measures to improve organizational effectiveness of dental clinics. **Methods/Analysis:** Organizational commitment, job stress and communication competence were investigated by using a self-reported questionnaire in 150 dental hygienists. PASW 18.0 (IBM Co, Armonk, NY, USA) was used for one-way ANOVA, independent t-test and Pearson correlation analysis. **Findings:** Organizational commitment and communication competence were higher in the twenties than in the thirties and the forties. Job stress was higher in the forties than in the twenties. Organizational commitment was the highest in the group with work experience under three years, and job stress was the highest in the group with work experience over seven years. A correlation between organizational commitment and communication competence was positive and a correlation between communication competence and role ambiguity which is one of sub-factors of job stress was negative. **Applications/Improvements:** A significant positive correlation was identified between organizational commitment and communication competence. Thus, education courses are required to improve communication competence of dental hygienists. In addition, further studies are needed to investigate a reason of the effect of work experience and age on communication competence and job stress.

Keywords: Communication Competence, Dental Hygienist, Job Stress, Organizational Commitment

1. Introduction

In the world of dentistry, competition is recently getting stronger due to a mismatch between the supply and demand. Business management is, therefore, increasingly important in order to adapt to a medical setting. Interest in organizational effectiveness is rising to improve competitiveness and productivity of hospital organizations. Organizational effectiveness is the concept of how effective an organization is. It includes psychological and

subjective aspects, such as organizational commitment, job satisfaction, turnover intention and job stress, as well as financial and objective aspects, such as profitability and growth¹. For an efficient organization, psychological factors for members in an organization need to be managed.

Organizational commitment is the individual's attitude to organization. It means strong belief of members in accepting a value or a goal of the organization; spontaneity in making a great effort for the organization; a strong will to stay in the organization; and the degree of

*Author for correspondence

attachment to an organization. Organizational commitment includes a positive attitude to show individual values and motivation for the organization². And it has been known that there is an inverse correlation between organizational commitment and absence rate/turnover rate of employees. In addition, if health care providers developed attachment to and responsibility for their job and the organization, they would do their best for patients.

Dental hygienists who have a key part in oral hygiene and prevention of oral diseases are undergoing a lot of stress due to new knowledge and techniques, increased patients, a heavy workload and an in apparent duty. Patients increasingly want good medical care and, therefore, dental hygienists who directly provide patients with medical care are expected to be under more stress. In addition, job stress is one of important factors affecting quality of life and job satisfaction³. Job satisfaction has a positive effect on hospital organizations and patients. Thus, it is very important to manage stress efficiently⁴.

In the previous studies, communication competence of members in the hospital organization influence on conflict situation in the organization, and the higher communication satisfaction in the organization, the lower job stress and the higher job satisfaction⁵. In dental clinics, human resource management is essential to provide good medical care and improve productivity of dental treatment. In the members in the hospital organizations, diversity in duty is remarkable compared to other organizations. Due to the characteristics of the job, the interdependence of the members is very high and, therefore, communication is important in striving for goal achievement in the organization by performing their role⁶. Communication actions affecting the outcome of organizations are decided by communication competence and a type of communication is a critical factor for job satisfaction⁵. Communication competence means how good the interaction with others is with using means of communication⁷. In other words, communication in the organization is an important factor affecting on job satisfaction, organizational commitment and job stress. Communication competence of the members is an important factor to increase the organization efficiency. Dental hygienists in dental clinics face patients and conduct diseases prevention, oral hygiene education and counseling. Thus, communication competence of dental hygienists is expected to be a great factor affecting on the effectiveness of organization in dental clinics.

A lot of studies on communication have been conducted in hospitals, travel agencies and hotels but

communication competence of dental hygienists has been rarely studied. The effect of communication competence on factors related to organizational effectiveness has not been studied.

Hence, we are to investigate the relationship between communication competence and job stress/organizational commitment in clinical dental hygienists and to provide measures to improve the organizational effectiveness of dental clinics.

2. Methods

2.1 Subjects

The participants in this study were dental hygienists who worked in dental clinics located in Seoul, Gyeonggi-do and Chungcheongnam-do and they were investigated in July 2014. Total 150 questionnaires were distributed and self-reported questionnaires were filled in. 135 questionnaires were collected. There were 15 inappropriate questionnaires and, therefore, total 120 questionnaires were used in the final analysis.

2.2 Study Tool

2.2.1 Communication Competence

The global communication competence scale developed by⁸ was divided by⁹ by dimension after the factor analysis considering the situational context for members. The modified scale had 14 questions including 5 questions of expression/performance, 6 questions of consideration and 3 questions of interaction management. 'Strongly disagree' was worth one point and 'Strongly agree' was worth five points based on the 5-point Likert scale. Cronbach α of the study was 0.82.

2.2.2 Organizational Commitment

The translation of the Organizational Commitment Questionnaire developed by¹⁰ was modified by¹¹. The modified tool was used in the study.

Organizational commitment had 9 questions including 3 questions of attachment, 3 questions of identification and 3 questions of intent to stay. 'Strongly disagree' was worth one point and 'Strongly agree' was worth 5 points based on the 5-point Likert scale. Cronbach α of the study was 0.91.

2.2.3 Job Stress

The tool used by¹² was used in the study. There were total 14 questions including 5 questions of 'role conflict',

5 questions of 'role ambiguity' and 4 questions of 'dissimilarity'. 'Strongly disagree' was worth one point and 'Strongly agree' was worth five points based on the 5-point Likert scale. A higher score means higher stress. Cronbach α of the study was 0.83.

2.3 Statistical Analysis

PASW 18.0 (IBM Co, Armonk, NY, USA) was used in statistical analysis. The demographic characteristics were shown as counts and percentages. In descriptive statistics for major variables, means and standard deviations were calculated. One-way ANOVA and independent t-test were performed to figure out a difference in communication competence, organizational commitment and job stress depending on the demographic characteristics. A correlation between communication competence and organizational commitment/job stress was decided by using Pearson correlation analysis.

3. Results

3.1 Descriptive Statistics for Variables

The descriptive statistics organizational commitment, job stress and communication competence are shown in Table 1.

Table 1. Descriptive statistics for variables.

| Category | Mean | Standard deviation |
|---------------------------------|------|--------------------|
| Total communication competence | 2.34 | .42 |
| Expression performance | 2.55 | .57 |
| Consideration | 2.24 | .45 |
| Interaction management | 2.15 | .50 |
| Total organizational commitment | 2.68 | .67 |
| Job attachment | 2.46 | .75 |
| Job identification | 2.61 | .63 |
| Stay commitment | 2.98 | .87 |
| Total job stress | 3.58 | .44 |
| Role conflict | 3.43 | .65 |
| Role ambiguity | 3.75 | .48 |
| Dissimilarity | 3.54 | .74 |

3.2 A Difference in Organizational Commitment, Job Stress and Communication Competence Depending on the General Characteristics

3.2.1 A Difference in Organizational Commitment, Job Stress and communication Competence Depending Age

One-way ANOVA was performed to figure out a difference in organizational commitment, job stress and communication competence depending on age of the dental hygienists in Table 2.

A difference in the total score of communication competence depending on age was statistically significant ($F = 3.371, p < .05$). In the result of *Scheffe* analysis as post hoc test, total communication competence in the twenties ($M = 2.39, SD = .43$) was higher than in the forties ($M = 2.08, SD = .27$). However, expression performance, consideration and interaction management, which are sub-factors were not significantly different depending on age.

A significant difference was observed in the total score of job involvement ($F = 12.415, p < .001$) and the sub-factors including job attachment ($F = 8.148, p < .001$), job identification ($F = 15.344, p < .001$) and years of service ($F = 7.796, p < .001$) depending on age. In the result of *Scheffe* analysis as post hoc test, the score of job involvement, job attachment, job identification and years of service in the twenties were higher than in the thirties and the forties.

A difference in the total score of job stress ($F = 4.724, p < .05$) and the sub-factors including role ambiguity ($F = 4.310, p < .05$) and dissimilarity ($F = 4.338, p < .05$) depending on age showed statistical significance. The total score of job stress, role ambiguity and dissimilarity score in the forties were higher than in the twenties. However, role conflict depending on age was not different significantly.

3.2.2 A Difference in Communication Competence, Organizational Commitment and Job Stress Depending on the Level of Education

Independent samples *t-test* was performed to investigate a difference in communication competence, organizational commitment and job stress depending on the level of education. The result is presented in Table 3.

Table 2. A difference in communication competence, job involvement and job stress depending on age.

| Variables | Age | | | F | Scheffe |
|---------------------------------|-----------|-----------|-----------|-----------|---------|
| | 20s(n=74) | 30s(n=33) | 40s(n=13) | | |
| | M(SD) | M(SD) | M(SD) | | |
| Total communication competence | 2.39(.43) | 2.32(.40) | 2.08(.27) | 3.371* | a > c |
| Expression performance | 2.58(.59) | 2.62(.54) | 2.20(.36) | 2.937 | |
| Consideration | 2.31(.48) | 2.17(.41) | 2.02(.31) | 2.983 | |
| Interaction management | 2.22(.49) | 2.07(.51) | 1.97(.44) | 2.019 | |
| Total organizational commitment | 2.89(.63) | 2.42(.64) | 2.15(.43) | 12.415*** | a > b,c |
| Job attachment | 2.66(.73) | 2.22(.66) | 1.95(.68) | 8.148*** | a > b,c |
| Job identification | 2.82(.57) | 2.39(.61) | 1.97(.37) | 15.344*** | a > b,c |
| Stay commitment | 3.21(.87) | 2.64(.81) | 2.51(.59) | 7.796*** | a > b,c |
| Total job stress | 3.51(.41) | 3.59(.46) | 3.90(.43) | 4.724* | c > a |
| Role conflict | 3.43(.59) | 3.33(.69) | 3.66(.83) | 1.243 | |
| Role ambiguity | 3.66(.43) | 3.85(.56) | 4.03(.44) | 4.310* | c > a |
| Dissimilarity | 3.42(.76) | 3.61(.67) | 4.04(.56) | 4.338* | c > a |

* $p < .05$, *** $p < .001$.

✂ Scheffe: a: 20s, b: 30s, c: 40s.

Table 3. A difference in communication competence, organizational commitment and job stress depending on the level of education.

| Variables | Level of education | | t |
|--------------------------------|-------------------------|---------------------------------|---------|
| | Junior college graduate | Undergraduate/ College graduate | |
| | M(SD) | M(SD) | |
| Total communication competence | 2.38(.43) | 2.21(.36) | 1.860 |
| Expression performance | 2.62(.59) | 2.32(.46) | 2.711** |
| Consideration | 2.27(.46) | 2.17(.39) | 1.022 |
| Interaction management | 2.18(.49) | 2.10(.53) | .738 |
| Total job involvement | 2.73(.66) | 2.59(.62) | .950 |
| Job attachment | 2.51(.74) | 2.40(.64) | .650 |
| Job identification | 2.64(.62) | 2.60(.58) | .282 |
| Stay commitment | 3.04(.85) | 2.76(.91) | 1.411 |
| Total job stress | 3.60(.45) | 3.48(.44) | 1.213 |
| Role conflict | 3.46(.68) | 3.33(.61) | .815 |
| Role ambiguity | 3.75(.53) | 3.73(.31) | .309 |
| Dissimilarity | 3.59(.69) | 3.34(.91) | 1.231 |

** $p < .01$.

A difference in expression performance in communication competence was statistically significant depending on the level of education ($t = 2.711, p < .01$). In other words, expression performance in the dental hygienists who graduated from a junior college ($M=2.62, SD=.59$) was higher than in those who were undergraduates or college graduates ($M=2.32, SD=.46$). However, there were no significant difference in the total score of communication competence and its other sub-factors, the total score of job involvement and its other sub-factors and the total score of job stress and its other sub-factors depending on the level of education.

3.2.3 A Difference in Organizational Commitment, Job Stress and Communication Competence Depending on Work Experience

One-way ANOVA was performed to investigate a difference in organizational commitment, job stress and communication competence depending on work experience. The result is shown in Table 4.

A difference in interaction management in communication competence depending on work experience was statistically significant ($F = 3.135, p < .05$). However, in Scheffe analysis as post hoc test, difference among the groups was not observed. The total score of communication

competence and sub-factors including expression performance and consideration depending on work experience didn't show significant difference.

The total score of job involvement depending on work experience ($F = 10.417, p < .001$) showed a significant difference. In the result of *Scheffe* analysis, the total score of job involvement in the group with work experience under three years ($M = 2.87, SD = .66$) and the group with work experience of three to seven years ($M = 2.90, SD = .60$) was higher than in the group with work experience over seven years ($M = 2.34, SD = .59$). There was a significant difference in job attachment, one of sub-factors of job involvement, depending on work experience ($F = 6.543, p < .01$). In the result of *Scheffe* analysis, the score of job attachment in the group with work experience under three years ($M = 2.58, SD = .79$) and the group with work experience of three to seven years ($M = 2.72, SD = .64$) was higher than in the group with work experience over seven years ($M = 2.16, SD = .68$). In addition, there was a significant difference in job identification, one of sub-factors of job involvement, depending on work experience ($F = 10.439, p < .001$). In the result of *Scheffe* analysis, the score of job identification in the group whose work experience was less than three years ($M = 2.82, SD = .59$) and the group whose experience was three to seven years

($M = 2.75, SD = .58$) was higher than in the group whose work experience was seven years or longer ($M = 2.29, SD = .59$). In addition, there was a significant difference in years of service, one of sub-factors of job involvement, depending on work experience ($F = 8.239, p < .001$). In the result of *Scheffe* analysis, the score of years of service in the group whose work experience was less than three years ($M = 3.20, SD = .88$) and the group whose experience was three to seven years ($M = 3.23, SD = .87$) was higher than in the group whose work experience was seven years or longer ($M = 2.58, SD = .73$).

A significant difference was found in the total score of job stress depending on work experience ($F = 3.327, p < .05$). In the result of *Scheffe* analysis, the total score of job stress in the group whose work experience was seven years or longer ($M = 3.68, SD = .49$) was higher than in the group whose experience was three to seven years ($M = 3.42, SD = .38$). In addition, there was a significant difference in role ambiguity, one of sub-factors of job stress, depending on work experience ($F = 3.139, p < .05$). In the result of *Scheffe* analysis, the score of role ambiguity in the group whose work experience was seven years or longer ($M = 3.87, SD = .55$) was higher than in the group whose experience was three to seven years ($M = 3.59, SD = .42$). There was a significant difference in dissimilarity, one of

Table 4. A difference in communication competence, job involvement and job stress depending on work experience.

| Variables | Work experience | | | F | Scheffe |
|--------------------------------|-----------------|-----------------|----------------|-----------|---------|
| | 3 years>(n=45) | 3-7 years(n=31) | 7 years≤(n=44) | | |
| | M(SD) | M(SD) | M(SD) | | |
| Total communication competence | 2.38(.43) | 2.42(.41) | 2.24(.40) | 2.197 | |
| Expression performance | 2.54(.57) | 2.64(.57) | 2.50(.56) | .587 | |
| Consideration | 2.33(.48) | 2.29(.46) | 2.11(.40) | 2.843 | |
| Interaction management | 2.19(.50) | 2.29(.45) | 2.02(.50) | 3.136* | |
| Total job involvement | 2.87(.66) | 2.90(.60) | 2.34(.59) | 10.417*** | a,b > c |
| Job attachment | 2.58(.79) | 2.72(.64) | 2.16(.68) | 6.543** | a,b > c |
| Job identification | 2.82(.59) | 2.75(.58) | 2.29(.59) | 10.439*** | a,b > c |
| Stay commitment | 3.20(.88) | 3.23(.87) | 2.58(.73) | 8.239*** | a,b > c |
| Total job stress | 3.58(.40) | 3.42(.38) | 3.68(.49) | 3.327* | c > b |
| Role conflict | 3.45(.64) | 3.36(.55) | 3.45(.73) | .211 | |
| Role ambiguity | 3.75(.43) | 3.59(.42) | 3.87(.55) | 3.139* | c > b |
| Dissimilarity | 3.52(.73) | 3.28(.77) | 3.74(.67) | 3.677* | c > b |

* $p < .05$, ** $p < .01$, *** $p < .001$.

※ Scheffe: a: under 3 years, b: 3-7 years, c: over 7 years.

sub-factors of job stress, depending on work experience ($F = 3.677, p < .05$). In the result of *Scheffe* analysis, the score of dissimilarity in the group whose work experience was seven years or longer ($M = 3.74, SD = .67$) was higher than in the group whose experience was three to seven years ($M = 3.28, SD = .77$). However, there was no significant difference in role conflict, one of sub-factors of job stress, depending on work experience.

3.3 The Relationship between Organizational Commitment and Communication Competence

Pearson correlation analysis was conducted to investigate the relationship organizational commitment and communication competence of dental hygienists. The result is presented in Table 5.

A communication competence was showed significant positive correlation of with the total score of job involvement ($r = .265, p < .01$), job attachment ($r = .305, p < .001$) and job identification ($r = .305, p < .001$). However, a correlation between communication competence and years of service was not found. A significant positive correlation of expression, one of sub-factors of communication competence with the total score of job involvement

($r = .231, p < .05$), job attachment ($r = .269, p < .01$) and job identification ($r = .227, p < .05$) was found. But there was no correlation between expression and stay commitment. A significant positive correlation of consideration was found with the total score of job involvement ($r = .240, p < .01$), job attachment ($r = .229, p < .05$) and job identification ($r = .304, p < .001$). However, a correlation between consideration and stay commitment was not found. A significant positive correlation of interaction management was observed with job attachment ($r = .251, p < .01$) and job identification ($r = .219, p < .05$) but there was no significant correlation with the total score of organizational commitment and stay commitment.

3.4 The Relationship between Communication Competence and Job Stress

Pearson correlation analysis was performed to reveal a relationship between communication competence and job stress of dental hygienists. The result is shown in Table 6.

The total score of communication competence showed a significant negative correlation with the score of job stress ($r = -.204, p < .05$) and role ambiguity ($r = -.469,$

Table 5. The relationship between communication competence and organizational commitment.

| | Total communication competence | Expression performance | Consideration | Interaction management | Total organizational commitment | Job attachment | Job identification | Stay commitment |
|---------------------------------|--------------------------------|------------------------|---------------|------------------------|---------------------------------|----------------|--------------------|-----------------|
| Total communication competence | 1 | | | | | | | |
| Expression performance | .872*** | 1 | | | | | | |
| Consideration | .826*** | .524*** | 1 | | | | | |
| Interaction management | .730*** | .479*** | .492*** | 1 | | | | |
| Total organizational commitment | .265** | .231* | .240** | .161 | 1 | | | |
| Job attachment | .305*** | .269** | .229* | .251** | .903*** | 1 | | |
| Job identification | .305*** | .227* | .304*** | .219* | .868*** | .717*** | 1 | |
| Stay commitment | .128 | .137 | .138 | -.003 | .904*** | .706*** | .662*** | 1 |

* $p < .05$, ** $p < .01$, *** $p < .001$.

$p < .001$). However, there was no correlation with role conflict and dissimilarity outcomes. A significant negative correlation of expression performance, one of sub-factors of communication competence, was found with role ambiguity ($r = -.384, p < .001$) but there was no correlation with the score of job stress, role conflict and dissimilarity outcomes. A significant negative correlation of consideration was observed with the total score of job stress ($r = -.238, p < .01$) and role ambiguity ($r = -.378, p < .001$). However, correlation between communication competence and outcomes of role conflict and dissimilarity was not statistically significant. A significant negative correlation between interaction management and role ambiguity ($r = -.401, p < .001$) was identified but there was not showed a correlation with the total score of job stress, role conflict and dissimilarity outcomes.

4. Conclusion

The members in the organizations interact with others through communication. Communication in the organization is a way to achieve organizations' goal and it is important to form and maintain a relationship. Thus, members with great communication competence would be more satisfied with communication and heighten the sense of unity for the organization. The outcome depends on communication between members and communication actions are decided by individual communication competence. The study¹³ for hospital employees showed

that communication affected organizational commitment and job satisfaction and, therefore, communication competence can affect on effectiveness of organization positively.

In particular, a medical institution is composed of professionals with various types of occupation and interdependence between members is high in the job characteristics. Communication between medical personnel affects medical practice. Smooth communication can lead the best medical service¹⁴. However, communication and communicative competence have been well studied in the nursing field and studies related with communicative competence of dental hygienists and the effect on medical service have been rarely conducted. Hence, the study was conducted to investigate communication competence of dental hygienists and find efficient ways to improve it.

In¹⁵ reported that the mean score of communication competence in hospital nurses was 3.46. However, it was 2.34, which is much lower, in the dental hygienists in this study. Dental hygienists did not have enough experience of an interest in communication education. In addition, perception of importance was low, which suggests that their confidence in communication competence was being shaken. Communication of dental hygienists is generally based on the aspect of marketing to increase a treatment agreement rate during patient counseling and to improve patient's satisfaction with medical care. Communication to achieve the goal of an organization

Table 6. The relationship between communication competence and job stress.

| | Total communication competence | Expression performance | Consideration | Interaction management | Total job stress | Role conflict | Role ambiguity | Dissimilarity |
|--------------------------------|--------------------------------|------------------------|---------------|------------------------|------------------|---------------|----------------|---------------|
| Total communication competence | 1 | | | | | | | |
| Expression performance | .872*** | 1 | | | | | | |
| Consideration | .826*** | .524*** | 1 | | | | | |
| Interaction management | .730*** | .479*** | .492*** | 1 | | | | |
| Total job stress | -.204* | -.133 | -.238** | -.127 | 1 | | | |
| Role conflict | .044 | .071 | -.007 | .036 | .742*** | 1 | | |
| Role ambiguity | -.469*** | -.384*** | -.378*** | -.401*** | .584*** | .099 | 1 | |
| Dissimilarity | -.088 | -.041 | -.178 | .026 | .785*** | .363*** | .286** | 1 |

* $p < .05$, ** $p < .01$, *** $p < .001$.

and maintain the relationship between members has rarely received attention.

Communication competence depending on age was the highest in the twenties. In⁵ reported that communicative competence depending on age and the position, the level of education showed no significant difference. But there was no significant difference depending on work experience. Dental hygienists in their twenty and whose work experience were less than three years have been interested in their job because it has not been long since they graduated and, therefore, they felt a pleasure and showed willing to learn their duty.

Job stress was the highest in the forties. The dental hygienists in their forties were mostly middle managers and responsible for general dentistry services. Thus, their stress might be high due to heavy workload. In addition, they are more likely to become bored and have a difficulty to hold down a job and run a household at the same time. When they managed junior colleagues and had a part in communication between the director of a clinic and employees, they might uncomfortable with communication and, therefore, they would answer that they are not confident in communicative competence.

A correlation between communication competence and job involvement was positively significant. Correlations with all the sub-factors except the total score job involvement and stay commitment were not significant. The group that had active communication in the organization showed positive job involvement compared to the group that had passive communication. The subjects felt more esteemed by smoother communication and a sense of belonging to enhance organizational commitment. Organizational commitment has a close relationship with effectiveness of organization and, therefore, it is required to find measures to increase the level of communication.

A correlation between communication competence and the total score of job stress was not showed. A negative correlation with role ambiguity, one of sub-factors, was found. Considering the previous studies which reported that communication and job stress affected organizational commitment, subsequent studies would be needed to investigate whether communication and job stress can be parameters affecting the relationship between organizational commitment and communication competence although there was no direct correlation with communication and job stress.

Based on the result above, communication education for dental hygienists is needed. A curriculum to improve communication competence should be established for students in universities as well as clinical dental hygienists. It has been known that simulation-based learning methods used in nursing school improved communication competence as well as problem solving skill and critical thinking¹⁶.

I suggest development of communication education programs with problem-based learning in the class of clinical dental hygiene in the Department of Dental Hygiene.

The study targeted the limited number of dental hygienists and, therefore, it cannot represent the entire dental hygienists. However, this study investigated the effect on communication competence of dental hygienists and the organizations to provide the data to establish strategies to improve communication competence in clinical practice.

5. References

1. Kim JH, Oh JS. Relationship between Job Characteristics and Organizational Effectiveness: With the Emphasis on the Employees in the Cadastral Fields, *The Korea Local Administration Review*. 2005; 19(3):51–70.
2. Choi HG, Ahn SH. Influence of Nurse Managers, Authentic Leadership on Nurses' Organizational Commitment and Job Satisfaction: Focused on the Mediating Effects of Empowerment, *Journal of Korean Academy of Nursing*. 2016; 46(1):100–8.
3. Kim YJ, Park SY, Kim JK. Correlations between Quality of Life and Job Stress among Occupational Therapists Working at Rehabilitation Hospital, *Indian Journal of Science and Technology*. 2016 Jul; 9(25):1–7.
4. Jung JO, Song KS. A Study on Job Stress and Job Satisfaction of Dental Hygienists Working in Dental Clinic, *Journal of Dental Hygiene Science*. 2008; 8(4):305–12.
5. Lee AK, Yeo JY, Jung SW, Byun SS. Relation on Communication Competence, Job-Stress and Job-Satisfaction of Clinical Nurse, *Journal of Korea Contents Association*. 2013; 3(12):299–308.
6. Lee GJ. Communication Problems and Solutions at the Health Care Facilities, *Korean Journal Health Communication*. 2006; 1(1):33–45.
7. Papa MJ. Communication Competence and Employee Performance with New Technology: A Case Study, *Southern Communication Journal*. 1989; 55(1):87–101.
8. Hur GH. Construction and Validation of a Global Interpersonal Communication Competence Scale, *Korean*

- Journal of Journalism and Communication Studies. 2003; 47(6):380–426.
9. Chung SJ. Determinant Factors of Job Satisfaction in Organizational Members: Factors with Communication Competence, Self Determination and Social Relation. Mater's Thesis, Hanyang University, 2011.
 10. Mowday TM, Steers RM. The Measurement of Organizational Commitment, Journal of Vocational Behavior. 1979; 14(2):224–47.
 11. Moon SJ, Han SS. A Predictive Model on Turnover Intention of Nurse in Korea, Journal of Korean Academy of Nursing. 2011; 41(5):633–41.
 12. Cheon SD. A study about Influence on Job Stress Factors with Leader-Member Exchange, Job Satisfaction, Organizational Commitment and Turnover Intention. Doctoral Dissertation, Kyunghee University, 2005.
 13. Ahn SY. The Effect of Communication Satisfaction on Hospital Employees' Perceived Organizational Effectiveness, Journal of Academia-Industrial Technology. 2013; 14(10):4935–42.
 14. Lee SK, Hwang KS, Park YD, Beom KC. The Relationship between Factors Influencing Smooth Communication among Dental Workers, Journal of Korean Academy of Oral Health. 2011; 35(1):85–92.
 15. Lee HS, Kim JK. Relation among Communication Competence, Communication Types and Organizational Commitment in Hospital Nurse, The Journal of Korean Administration Academic Society. 2010; 16(4):488–96.
 16. Park JK, Hahn SW. The Relationship between Communication and Nursing Performance in Simulation-Based Team Learning, Indian Journal of Science and Technology. 2015 Oct; 8(26):1–7.