

**THE ROLE OF EMPLOYEE MOTIVATION IN PROMOTING BASIC HEALTH
CARE SERVICES: A CASE STUDY OF DEPARTMENT OF HEALTH, GREATER
TZANEEN SUBDISTRICT, LIMPOPO PROVINCE**

by

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DEDICATION

The research is dedicated to the health professionals in the Republic of South Africa and the entire world. Their continued commitment to the struggle for the responsive health system shall remain an imprint of value that defies deletion among the residents of the globe. I also, posthumously, dedicate the research to my late mother, Malesoto Ramalau Sekgobela, whose demise tested, and indeed evoked resilience and adaptation.

DECLARATION

I, **Mohwagabo Ignatius Sekgobela**, declare that the mini-dissertation on **THE ROLE OF EMPLOYEE MOTIVATION IN PROMOTING BASIC HEALTH SERVICE IN THE DEPARTMENT OF HEALTH, GREATER TZANEEN SUB-DISTRICT, LIMPOPO PROVINCE** hereby submitted to the University of Limpopo, for the degree of Master of Public Administration and Management is my own work and that all the sources that I have used or quoted have been indicated and acknowledged by means of complete references and that this work has not previously been submitted by me for a degree at this or any other University; that it is my work in design and in execution, and that all material contained herein has been duly acknowledged.

Sekgobela M.I (Mr)

Date: 03 October **2022**

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ABSTRACT

The Limpopo Department of Health (LDoH), particularly Greater Tzaneen Sub-district, as an organ of state is mandated to promote basic health care services to community members. In order to realise this obligation, clinics were built in communities with the purpose of improving access to the basic health care services. The development and implementation of 24 hours policy, building of nurses home, security provision and introduction of call system were designed to promote basic health care services during throughout the day. Despite the measures put in place, Greater Tzaneen Sub-district has a problem of rendering 24 hours services. Basically, Greater Tzaneen Primary Health Care is faced with the challenge of not achieving the departmental goals due to the fact that some of the health care facilities are not effective in the provision of health care services. This situation is exacerbated by the low morale of health care professionals due to poor incentives and rewards. In this regard, the study attempts to investigate the role of motivation on employees in the Department of Health, particularly, at Greater Tzaneen Sub-district. The study employed qualitative research method in order to solicit data to answer the study's question for achievement of study objectives. The study found that employees were motivated by performance incentives and rewards especially for the employees who performed 24 hours services in the selected sub-district. The study also found that employees were motivated by the quality of infrastructure development and staff accommodation. The flexible working hours were found to be enhancing the motivation of employees in the Department of Health. The study further suggested strategies to enhance motivation of employees. These strategies include salary increase, performance incentives, and better working environment, suitable infrastructure which include staff accommodation, adequate and necessary working equipment and efficient systems. Additional human resources should be recruited in order to ensure that there is fair workload for all health workers at different health care facilities.

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ABBREVIATIONS

LDoH: Limpopo Department of Health

PSR: Public Service Regulations

STATSSA: Statistics South Africa

MHRM: Master of Human Resource Management

NIMART: Nurse Initiated Management of Anti-Retroviral Therapy

CHAPTER 1 ORIENTATION OF THE STUDY

1.1 INTRODUCTION

Inter alia, organisations are regarded to be well resourced to achieve their goals when they have motivated employees who can willingly perform a job. Motivation can be understood as the cause for employees to show behaviour of willingness and desire (Jones, 2013). Employees who were satisfied and happy may have the attitude of desire to perform a job as opposed to coercion which propagates a mere compliance. In order for organisations to improve their services, they should develop strategies to motivate employees so that they can work wilfully towards the achievement of performance goals (Abubakari & Adam, 2018). The need for organisation to motivate employees can be costly but necessary for them to be willingly retained, committed and contributory to organisational success. It is therefore necessary that employees be treated as important asset for organisation's success.

It is important to note that different employees have different needs for them to be motivated. For this reason, extrinsic motivation is being studied as critical for employees to achieve required levels of performance. In order to achieve this, organisations may consider human elements which asserted motivation and positive treatment of employees as important for organisational performance. It is worth noting that extrinsic motivation which is influenced by rewards and employment benefits is critical for performance improvement in an organisation. This notion is supported by Jones and George (2016) who indicate that employee motivation and satisfaction in the organisation were necessary to improve on employee performance and institutional excellence.

Luthans (2002) as cited in (Mavndizvidza, 2014) indicated that organisations should not underestimate the role of motivation strategies to encourage employees. In this regard, it is necessary that scientific studies be undertaken. This study attempts to investigate the role of motivation on employees who provide basic health care services. The study considered factors such as performance incentive, physical infrastructure, training, supervisor-subordinate relations and conditions of service.

1.2 BACKGROUND OF THE STUDY

The Department of Health, particularly Greater Tzaneen Sub-district, as an organ of state got obligated with the responsibilities to promote basic health care services to community members. In order to realise that objective, clinics were built in communities with the purpose of improving access to the basic health care services. The Department of Health resolved on the development and implementation of 24 hours policy, building of nurses home, provision of security services and introduction of call system to support the promotion of basic health care services during throughout the day.

The Department of Health had facilities in Mopani District, Greater Tzaneen Sub-district that did not provide 24 hours service. In order to render the services, the willingness of employees to perform the task is considered important. Employees perform better when inspired to do so wilfully without coercion. Against this background, strategies had to be developed to motivate employees in order to promote basic health care services. The employee motivation strategies included but not limited to training of health professionals, improving working conditions, payment of performance incentives and benefits, and accommodation of employees.

The study attempts to establish the role that employee motivation plays in promoting basic health care services. Scholars have different views about the topic. According to Herzberg (1959), some believe in financial incentives while others attribute employee motivate to the extent of employee satisfaction arising from performance and achievement of tasks. It should be noted that performance of tasks can be incentivised while its lack can be dealt with through training and consequence management to officials.

1.3 PROBLEM STATEMENT

According to the 2018/19 Annual Report for the Department of Health, Limpopo Province, the number of Primary Health Care facilities opening for 24 hours is recorded. The report indicated that 56 facilities out of 100 facilities in Mopani District accounting for 494 clinics across the province were recorded to be functioning for 24 hours. This situation, affects the overall health coverage of health services to the citizens as statutory obligation for the Department of Health. The vision of Department of Health is highlighted as to provide a long, healthy life to the people of Limpopo Province with the mission that commits it to provide quality health care service that is accessible, comprehensive, integrated, sustainable and affordable.

The departmental Recruitment and Retention Strategy: 2018 outlines measures to be undertaken to motivate employees in order to achieve organisational objectives. Inter alia, measures to motivate the workforce include incentive and reward, provision of habitable accommodation, training and career growth, and supervisor and subordinate relationship. Despite these measures, Greater Tzaneen Sub-district has a problem of rendering 24 hours service. Greater Tzaneen Primary Health Care is faced with the challenge of not achieving this organisational goal as some clinics provide while others fail to provide this service. Only 15 out of 34 clinics provide health care services for 24 hours. This situation is exacerbated by the low morale of health care professionals which could possibly be attributable to poor incentives and rewards. In this regard, the study attempts to investigate the role of employee motivation on employees at Primary Health Care sector at Greater Tzaneen Sub-district.

1.4 MOTIVATION/RATIONALE FOR THE STUDY

The study attempts to examine the role of employee motivation in promoting basic health care services and mechanisms that can be applied to improve the morale of health professionals towards providing quality health care services.

1.5 AIM OF THE STUDY

The aim of this study is to investigate the role of employee motivation in promoting basic health service in the Department of Health, Greater Tzaneen Sub-district, Limpopo Province.

1.6 RESEARCH OBJECTIVES

The objectives of the study serve as a guide to the research, and were summarised as follows:

- To examine the current strategies put in place to promote employee motivation to promote basic health care service
- To identify the challenges faced by the department in the provision of basic health care services,
- To recommend strategies that can be applied to address challenges faced by the Department in the provision of basic health care services, and
- To recommend strategies that can be applied to improve employee morale for the provision of basic health care services

1.7 RESEARCH QUESTIONS

The main research questions for this study were formulated as follows:

1.7.1 Main question

- What is the role of employee motivation in promoting basic health service provision?

1.7.2 Research questions

- What are the different strategies put in place to promote employee motivation?
- What are the challenges faced by the department in the promotion of basic health care services?
- What are the strategies that can be applied by the department to address challenges faced by the department in promoting basic health care services?
- What are the strategies that can be recommended to improve employee motivation to promote basic health care services?

1.8 SIGNIFICANCE OF THE STUDY

The findings of the study may serve to influence and advise policy makers on ways to motivate a workforce in order to enhance the provision of basic health services. Policy makers may consider conclusion and recommendations of the research project to understand the workforce changing behaviour and environmental challenges which may deter organisational performance. The study contributed to the generation of the body of knowledge in the discipline of strategic human resources management where focus was put on the role or necessity of motivation for purpose of organisational performance. The results of the research might serve to stimulate further research in the discipline. The department might implement motivation strategies to enhance its capacity to provide basic health services.

1.9 DEFINITION OF CONCEPTS

For the purpose of the study, it was necessary that the following concepts be defined in order to clarify the context within which they were used in the study:

1.9.1. Motivation: According to Jones & George (2013), motivation is defined as “psychological forces that determine the direction of a person’s behaviour in an organisation’ relating to a person’s level of effort, and persistence in the face of obstacles”.

1.9.2 Organisational performance: Jones & George (2013) defined organisational performance as “the change that takes place when employee’s effort makes products that were necessary to achieve or realise outcomes”.

1.9.3 Reward: Balle (2017) described reward as “a prize, which can either be cash or any token of appreciation, that organizations give to their employees performing good jobs”.

1.9.4 Performance: Ghalem, Okar, Chroqui and El Alami (2016) defined performance as “the goal achievement of an organization rather than of individuals, with the minimum resources consumed to reach the goal”.

1.9.5 Job satisfaction: Job satisfaction can be defined as “an emotion of gratitude that comes out the assessment of the job one performs and the attitude towards it”, (Kumari & Pandey, 2011).

1.10 STUDY AREA

The study was conducted at Greater Tzaneen Primary Health Care whose vision is to provide long and healthy life to the people of Greater Tzaneen. Greater Tzaneen Primary Health Care is the largest sub-district in Mopani District: Department of Health. It was a semi-urban with about 34 clinics and 3 hospitals. According to 2016 Household Survey, Greater Tzaneen had a population of about 416 146 people at the population growth rate of 1, 50%. It is constituted of 125 villages which constitute 80% of the households, two townships namely; Nkowankowa and Lenyenye Townships, and three towns namely; Haenertsburg, Letsitele (predominantly farm area) and Tzaneen (predominantly urban) (Statssa, 2016). Greater Tzaneen is bordered by Greater Letaba to the North, Lepelle-Nkumpi to the South, Ba-Phalaborwa and Maruleng to the East, and Polokwane to the West. The Nkowankowa Township area especially Dan Village has incidents of crime which is one of the factors that warrants that emergency health care services be made available.

Figure 1. 1: Mopani District map



Source: Statistics South Africa (STATSSA, 2016)

1.11 OUTLINE OF THE STUDY

In order to reach the study objectives, the following framework of the research was formulated:

Chapter 1: Outlined the introduction to the research study, problem statement, aim of the study, objectives of the study, research questions, significance of the study, brief review of the literature about the problem under study, study area, population under study, sampling method, sample size, data collection, data analysis and ethical considerations.

Chapter 2: Focused on the discussion of literature on the topic under study and findings of other studies on the topic.

Chapter 3: Focused on the research methodology and strategies. Methods that were used to collect the data were also discussed.

Chapter 4: Focused on how the collected data was analysed in order to find out the results of the study. The results of the study were also included.

Chapter 5: Focused on a discussion of the conclusion of the study and recommendations based on the findings.

1.12 CONCLUSION

In this chapter, the researcher presented the introduction to the study, background of the study, problem statement, motivation/rationale for the study, aim of the study, research objectives, research questions, the significance of the study, definition of key terms, study area, outline of the study; and conclusion. In the next chapter, the focus is on the literature review regarding the role of motivation in the health sector for service delivery improvement.

CHAPTER 2 LITERATURE REVIEW

2.1 INTRODUCTION

A review of relevant theoretical and empirical literature relating to the study aim and objectives is presented in this chapter. The etymology of the concept of motivation had its origin traceable from a Greek word '*motif*' which means *inspire, invigorate, motivate*. The focus includes inspiring employees conduct to have a wilful drive for performance that achieves organisational objectives. Various disciplines contextualised the application of motivation differently yet generated consensus that motivation refers to reasons that cause an employee to participate or be actively involved in a particular action (Bratton & Gold, 2007). In this regard, the discussion of the literature review includes the following aspects:

2.2. CONCEPT OF MOTIVATION

Maduka and Okafor (2014) express that motives determine human behaviour because they are impulses within individuals, need, wants and desire. According to Maduka and Okafor (2014), to motivate is to induce, persuade, stimulate, and even compel an employee to act in a manner which fulfilled the objectives of an organisation. Vindhya and Yallanti (2019) referred to Webster's New Collegiate Dictionary which also defines a *motive* as a desire that causes a person to act.

Cong and Van (2013: 213) explain that there are various explanations of the term motivation, especially by different authorities in the study of allied disciplines, management, and psychology. According to Ryan and Deci (2000: 54), to be motivated means "to be moved to do something". Unmotivated persons feel no inspiration to act and are not energized or activated toward an end (Ryan & Deci, 2000). Mathauer and Imhoff (2006:3) referred to motivation as the willingness to exert and maintain an effort towards organizational goals.

Likewise, Kumar and Kumar (2013) defined motivation as the psychological force that determines the direction of a person's level of effort, as well as a person's persistence in the face of obstacles. Motivation is defined by Pakdel (2013) as that thing which makes energy and leads it to stable behaviour. Equally important, motivation is defined by Srivastava and Bhata (2013) as what activates, directs human behaviour and how this behaviour is maintained to achieve a particular goal.

According to Srivastava and Bhata (2013: 18), motivation is a psychological process that gives behaviour purpose and direction, a predisposition to behave in a manner calculated to achieve specific unmet need, and the desire to achieve respectively. Motivation is described by Pillay, Dawood and Karodia (2015: 2) as the process through which employees are given the enthusiasm to maintain high performance levels through among others rewards, supervision, incentives and work situations. Baskar and Prakash Rajkumar (2014: 1644) cited in Abraham Maslow (1954) defined motivation as the aspects related to cognitive, aesthetic and transcendence which pushes a people towards a progressive change.

According to Baskar and Prakash Rajkumar (2014), motivation refers to the process of enhancing the staff morale to encourage them to willingly do their best in performing allocated tasks. It is further extended that to motivate is to persuade someone to act in a manner which satisfies the organisational objectives (Maduka & Okafor, 2014). Similarly, motivation is defined in Velikova (2017) as the eagerness and persistence which a person shows while executing a task. Motivation is defined as the act or process of providing a purpose that causes someone to necessitate some action (Vindhya & Yallati, 2019). Motivation causes a person to act because of a desire within that particular individual (Vindhya & Yallanti, 2019). Rahbi, Khalid and Khan (2017) elucidate that the role played by team motivation is so crucial in a healthcare organisation.

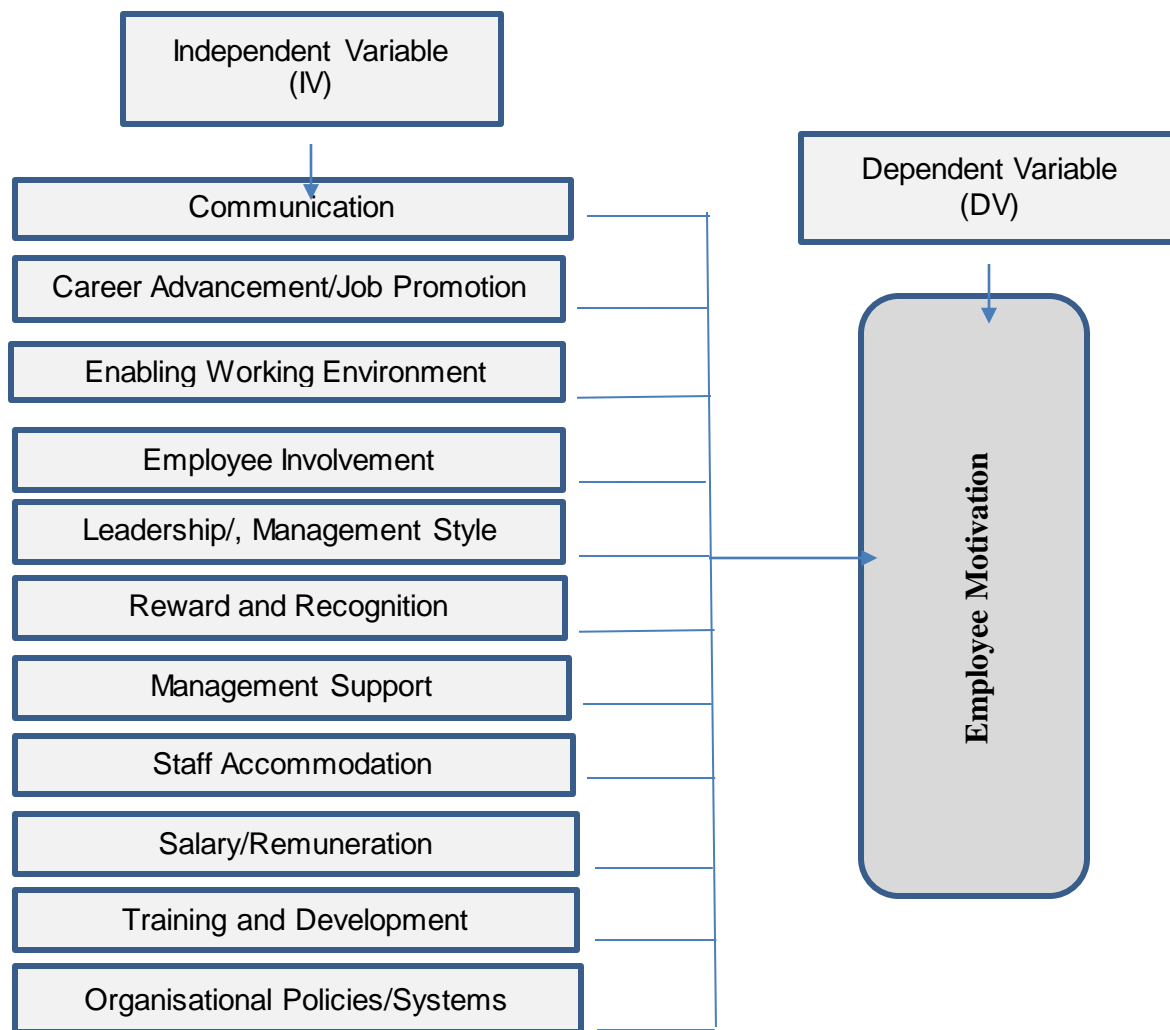
Thus, in the context of the study, motivation is defined as the psychological process that causes wilful exertion of effort to perform a task diligently against challenges. Employee motivation is viewed by Vindhya and Yallanti (2019: 145) as the enthusiasm, energy level, commitment and the amount of creating that an employee brings to the organisation on a daily basis. Furthermore, employee motivation is all about how engaged employees feel in tandem to the organisation's goals and how they are empowered (Vindhya & Yallati, 2019).

2.3. CONCEPTUAL FRAMEWORK

2.3.1. Defining a Conceptual Framework

A conceptual framework is defined in Kivunja (2018: 47) as “the total, logical orientation and associations of anything and everything that forms the underlying thinking, structures, plans, and procedures and implementation of the entire research project”. A conceptual framework for this study is presented below:

Figure 2. 1: Conceptual Framework for the Study



Source: (Researcher' Own Diagram)

The figure above shows independent variables and dependent variable for the study. It can be seen from the figure that Employee Motivation is influenced by various independent variables such as communication, career advancement/promotion, enabling working environment, employee involvement, leadership style/management style, reward and recognition, management support, staff accommodation, salary/remuneration, training and development, organisational policies/systems. This study, therefore, examined the role of employee motivation in promoting basic health care services and mechanisms that can be applied to improve the morale of health professionals in order to provide health care services.

2.4. THEORETICAL FRAMEWORK

Kivunja (2018) stresses that a theoretical framework encompasses the theories that experts have expressed in the field into which a person plans to research. According to Swanson (2013) cited by (Kivunja: 2018) defined the theoretical framework as “structure that can hold or support a theory of a research study”. Thus, this study shows that motivation theories were divided into content theory and process theory. The content theory explained particular factors needed for employees to be motivated while process theory deals with the actual process of motivation or psychological and behavioural processes that lead to employee motivation (Ali *et al*, 2015).

By virtue of Herzberg’s emphasis on job satisfaction and organisational performance as a function of employer’s motivation strategy, the study focused much on content theory. Content theory had some known theories such as Maslow’s hierarchy of needs, McGregor’s theory X and theory Y, Alderfer’s (ERG) modified need hierarchy model and Herzberg’s two factors Theory and McClelland’s achievement theory. Content theory focused much on the provision of need to motivate for a behaviour that led to organisational performance. Arising from that point, the study attempted to establish strategies employers put in place to provide employee needs for purposes of motivation. It is often intended to ensure job enrichment and to unlock human talent at the same time infusing discipline.

According to (Mullins *et al*, 1988) there exists association between job satisfaction and organisational performance. Their study concluded that satisfied employees have the capacity to contribute to the achievement of organisational goals. The study located employee’s efforts at the centre of salary structure and working condition (Mullins, *et al*, 1988).

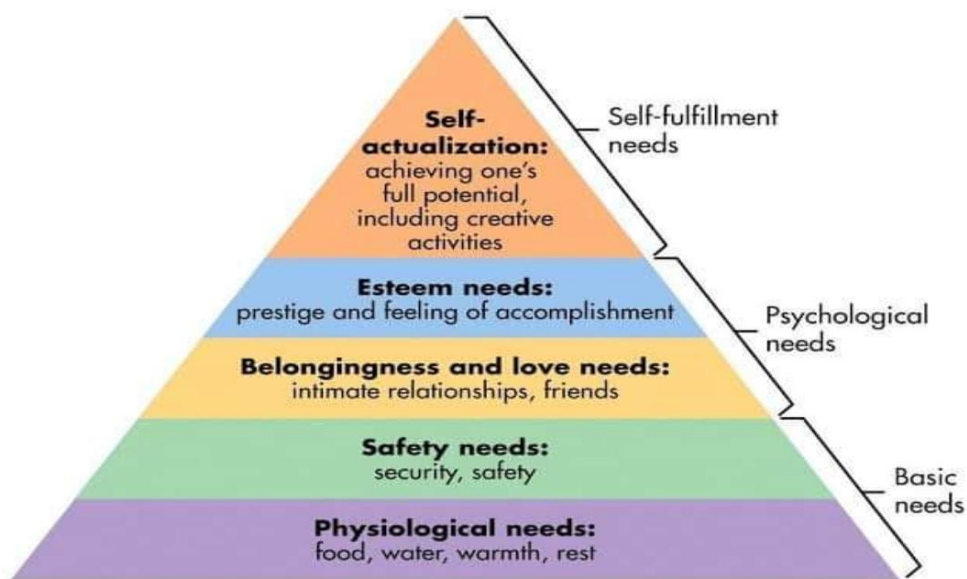
Folan’s findings stated that performance was influenced by an environment, the objectives, and the relevant and recognizable features (Folan, 2007). From the above assertion, it became apparent that an environment should be designed for employees to perform and for organisations to thrive. The theory further showed that even with motivated employees, organisations should consider the environment such as political, economic, technological and legal sphere as some of the important drivers of performance. In the context of that study, it should be interpreted to mean that motivation took the task of creating conducive environment.

Folan's findings went on to present a challenge to management of organisations to develop strategies that made working environment to be worker-friendly. The belief was that working conditions and relationships motivate employees to do organisational work. Policy design, tools of trade, supervisor-supervisee relationship, infrastructural architecture and ergonomic considerations needed deliberate managerial commitment to motivate employees for organisational performance.

2.4.1. Maslow's Need Hierarchy Theory

Maslow's Need Hierarchy Theory presented five needs as motivation factors in which the fulfilment of one need produced a desire for the next need through hierarchic order ranging from the bottom going to the top of the pyramid. Maslow concluded that needs develop from physiological, safety, social, esteem and self-actualisation needs (Jones & George, 2016). Given the nature of the needs arising from Maslow's Need Hierarchy Theory, it showed that people were motivated by various factors.

Figure 2. 2: Maslow's Hierarchy Needs



Source: (McCloud, 2018)

Maslow's Hierarchy of Needs provided for the fulfilment of fundamental human needs as mechanisms that motivate employees to perform tasks. Maslow presented low level needs which were basics until higher level needs as they appeared on the schematic pyramid (Jones & George, 2016)

2.4.2. Alderfer's (ERG) Theory

Clayton P. Alderfer suggested the Theory of motivation in 1972 which was abbreviated as EGR for Existence, Relatedness, and Growth. Alderfer's Theory of motivation was meant to review the work of Abraham Maslow on his Hierarchy of Needs. He argued that needs should be provided simultaneously or concurrently because no need had to wait for the other (Jones & George, 2016). Alderfer's ERG theory concluded that needs should not be exclusively provided as that did not inspire employees. The proposition noted, contrary to Maslow, that employees could be motivated by provision of basic, psychological and self-fulfilment needs at the same time. In his frustration-regression principle, Alderfer (1972) noted that that deterioration of employee performance was caused by growth limits at work which factor tend to degenerate to satisfying associated needs (Eshun & Duah, 2011).

2.4.3. Expectancy Theory

The theory was formulated by Victor H Vroom in 1966 that summarised along three components namely valance, self-efficacy and expectancy. Vroom posited that employees get motivated when their work got recognised as important (valance), when their effort contributes to achievement of organisational success (self-efficacy) and expectation that achievement of organisational goals will be rewarded (expectancy) (Luoma, 2006).

Based on the Vroom theory, employees had to place value to their job, put an effort and achieve goals. In such circumstances, organisations rewarded employees for organisational success because targets could be reached. In that regard, (Luoma, 2006) proceeded to suggest that the theory encouraged the pursuit of realistic targets informed by capabilities such as financial, human resources, technological advancement and reasonable time to perform tasks.

2.4.4. Herzberg's Motivator-Hygiene Theory

Professor Frederick Herzberg conducted a study in the industrial town of Pittsburg which was sponsored by the Buhl Foundation in 1957. At the end, Herzberg proposed the Two Factor Theory in 1959 which was called Motivator – Hygiene theory. Herzberg's Motivator-Hygiene Theory built on Maslow's hierarchy of needs with a departure in that it focused on ways to motivate employees at workplaces. Herzberg's Motivator-Hygiene Theory proposed that

meeting the basic needs which were hygiene factors of employees may not lead to satisfaction but only stop them from being dissatisfied (Aduo-Adjei et al, 2016). They went further to assert firmness in proposing the importance on having satisfied employees as important for motivation. Consequently, it provided that less levels of acceptance would lead to dissatisfaction. Motivation would therefore depend on meeting the highest level of needs. It would be understandable that salary payment may attract employees.

The study took place against the dominant and acceptable view that job satisfaction is a single continuum which represented two opposing ends namely; satisfaction and dissatisfaction (Sanjeev & Surya, 2016). It moved away from the premise that performing a task or doing a job caused satisfaction or dissatisfaction. Herzberg concluded that employee motivation can be achieved through motivator and hygiene factors.

Herzberg's Motivator-Hygiene Theory dealt with motivation with outcomes that could lead to employees being motivated at the highest level and gaining job satisfaction, and outcomes that prevented employees from being satisfied (Jones & George, 2016). Herzberg's Motivator-Hygiene Theory identified motivator and hygiene needs as two critical sets of needs of people. Again, Herzberg went on to explain motivator needs as those that deal with the nature of work and the way a work was challenging employees. In this regard, employers have a duty to create an environment conducive for employees to be motivated. That could be achieved by creating opportunity for employees to grow, autonomy, interesting work and accomplishment (Jones & George, 2016).

Hygiene needs related to the physical and physiological context within which the job was performed. Hygiene needs dealt with salary, relationship with supervisors, job security and good working conditions. Herzberg proposed that hygiene needs influence satisfaction but does not influence high levels of performance. Herzberg proposed for motivator needs to be met in order to obtain satisfaction and motivation (Jones & George, 2016). Herzberg's Motivator-Hygiene Theory proposed that employees were influenced to perform by motivator needs, yet dissatisfied when hygiene needs were not met. The study established whether working environment or material benefits motivate employees to high levels of performance (Aduo-Adjei, *et al.*, 2016).

The Herzberg's two factor theory is built on Maslow's theory of need hierarchy. The hygiene factors fulfil the lower level needs like physiological and safety needs while motivator factors

fulfil higher order needs like belongingness, security and self-actualization needs. Herzberg identified supervision, interpersonal relation, physical working condition, salary, organisational policy and its administration, benefits and job security as the hygiene factors (Sanjeev & Surya, 2016). The motivating factors were also called intrinsic factors as they came from performing the job itself and the hygiene factors were extrinsic factors as they were external and dependent on salaries and benefits by employers to employees for performing a job.

2.4.5. The Purpose of the Theory

The Herzberg's two factor theory asserted that health workers increase their capacity to achieve organisational goals when they were satisfied by a number of factors. These factors were divided into hygiene and motivator factors. Herzberg concluded that the approach by organisations to satisfy employees with hygiene factors such as salary and fringe benefits may lessen dissatisfaction and fail to enhance satisfaction. However, Herzberg (1959) concluded that financial and non-financial factors were important reasons to satisfy employees to achieve organisational goals.

Hygiene factors were about financial rewards that come with the job being done. Motivator factors were about the work itself and working environmental factors surrounding the performance of tasks (Jones & George, 2016). For that reason, the challenging nature of health care service adequately encouraged health professionals to perform. In that regard, the Covid-19 pandemic could adequately motivate health professionals to perform tasks to the best of their ability in order to fight the disease. The two factor theory of Herzberg proposed that employees were motivated by job content related factors on their own which were generally called motivators. It enlisted factors such as achievement, responsibility, advancement, recognition, growth and work itself as motivators linked to job satisfaction (Ghazi *et al.*, 2013).

Herzberg's two factor Theory invited criticism from scholars due to its methodological approach. Employee motivation can achieve greater productivity if organisations can create favourable working conditions, provide up-to-date office facilities and encouraging environment wherein the workforce is comfortable, happy and motivated to perform (Ghazi *et al.*, 2013).

Kacel, Miller & Norris (2005) applied two-factor theory to measure job satisfaction particularly among nurses. Their study on the two-factor theory concluded that many nurses scored high satisfaction rate on intrinsic factors (Motivator) and low satisfaction rate on extrinsic (Hygiene) factors. The study reveals that employers show a desire to improve extrinsic (Hygiene) factors such as salary and fringe benefits to enhance the level of job satisfaction among nurses. Herzberg asserts that the reduction of dissatisfaction may fail to improve job satisfaction. The assertion, interestingly, suggests that employee may reduce dissatisfaction without improving satisfaction. Therefore, the drive to reduce dissatisfaction could be pursued parallel yet intrinsically linked to employee satisfaction initiatives.

According to Farr, cited in Aduo-Adjei (2016) the two-factor theory was criticised and attributed satisfaction to non-financial, intangible factors and dissatisfaction to financial, external factors. The study assumed the normality in the job itself having the capacity to motivate employees to perform while salary and fringe benefits might dissatisfy them.

According to Pakdel (2013), employees' desire to perform could be caused by two parallels namely motivation and need, and motivation and goals. Motivation and need affirmed the importance of creating conducive environment that satisfy employees to perform. Motivation and goals dealt with the interface between the two when employees achieve goals when they were satisfied, (Pakdel, 2013). Accordingly, the level of motivation increased when the value does so as well.

According to motivation and goals principle, the motive behind an action should be linked to results. The proposition got supported by the observation that when employees were motivated, it led to the increase in the number and quality of deliverables produced in an organisation (Abubakari & Adam, 2018). On the contrary, Dobre (2013) indicated that motivated employees may concentrate in achieving their personal goal in an organisation.

Considering the above contending proposition, individual achievement in an organisational performance becomes intrinsically linked. For that reason, the provision of high level needs or tangible factors may achieve individual achievement in the course of realising organisational performance. The argument suggested that motivation can be a costly exercise for employers while organisational goals weigh less important to employees.

According to Pakdel (2013), employees need ability and motivation to willingly perform tasks. The argument proposed that motivation depends on the employees' choice to high level performance and their ability to act. It further proposed that the centrality of employees and desire to achieve goals are highly motivational. The implication of the proposition would lead to management developing training and development programmes that improve employee capability to perform task as the part of the motivation factors. As such Pakdel (2013) argued that the ability to perform a task remained a motivation factor.

Some criticism was pointed by Lodahl (1964) who argued against the causal link between motivation and satisfaction; and thereby calling it shallow. Building on the argument it would mean that organisations may develop motivation strategies with more emphasis on tangible or extrinsic motivation factors without fulfilling the requisite employee needs. The supposition would augment the notion of discarding injection of financial resources to bring about employee satisfaction. It became acceptable that whereas employee motivation may be important for productivity, it cannot be a panacea for satisfaction as staff needs vary. It could not be all employees getting satisfied by financial incentives as some only needed non-financial incentives.

According to Lawler (1970) cited in (Aduo-Adjei et al, 2016) the theory is questionable on its conclusion of satisfaction-performance relationship. The argument that satisfied employees perform better to achieve organisational goals may not be sustained. The argument held ground in that employee motivation may lead to satisfaction. However, the latter may trigger further needs and behaviour which may hamper organisational performance. For that reason, reliance on satisfaction to raise organisational performance lacked substantive and empirical evidence. It suggests that even motivation strategies may fail to satisfy employees as their needs were different. However, Folan's finding on the supervisory capacity became vital to ensure that employee motivation yielded engagement for organisational performance.

2.5. Justification of Herzberg's Motivator – Hygiene Theory to the Study

The choice of the Herzberg's Motivator – Hygiene Theory to the study stemmed from the premise that the theory encapsulates financial rewards to incentivise employees and working environment as central to motivate employees for good performance. At proverbial instance, Herzberg's Motivator – Hygiene Theory attempted to study the seed and type of environment necessary for germination. The theory emphasised the seed germinating for its own sake and

doing so because of the type of soil. The basic health care services needed internal motivator factors to be achieved because of the love to save life. Equally important became the need for employees to be rewarded with external hygiene factors so as to augment employee engagement for organisational performance.

Whereas when motivator and hygiene factors were different, they remained interrelated and interdependent. The study is conducted in the midst of Covid-19 which put basic health care services on the spot light. It makes an interesting study because motivator factors would suggest that health professionals were motivated by desire to fight the disease, while hygiene factors would propose the need for financial reward to motivate employees. The question of whether or not employee satisfaction leads to achievement of goals would be peripheral yet important for further study.

2.6. Application of Motivation Theory

The study applied a funnel approach in that a perspective of the study takes into account the theoretical framework, international, national and local perspective of the phenomenon under investigation on the role of motivation on organisational performance. It is worth noting that management of organisations has a responsibility to prioritise motivation process as a mechanism of anticipating, forecasting and influencing the level of performance as well as employees' actions, Rusu and Avasilcai (2013) as cited in (Aljaf, 2015). The motive behind an action should be linked to results. It is observed that when employees were motivated, it leads to the increase in the number and quality of deliverables produced in an organisation (Abubakari & Adam, 2018).

On the contrary, Dobre, 2013 indicates that motivated employees may concentrate in achieving their personal goal in an organisation. Whereas the argument sounds like opposing the assumption of motivation linking with organisational performance, it can also show the linkage of individual achievement in an organisational performance. Therefore, it can be concluded that motivated employees achieve both individual goals and organisational performance. In this regard, theoretical framework is discussed hereunder as the base of the role of motivation in the organisation.

2.7. EMPIRICAL LITERATURE REVIEW

An empirical literature is commonly known as systematic literature review. It examines the previous studies to answer a particular research question (Davis, 2021). It is further observed that the empirical literature demonstrates different scholars' views about the issue under investigation, particularly in this study on the role of motivation in promoting basic health care services. The discussion includes the following aspects: the importance of employee motivation, types of motivation, and international, national and local perspective on employee motivation.

2.7.1. The importance of Employee Motivation

Baloyi (2011) asserts that health workers need job expiations that are clear, adequate equipment, knowledge and skills that are up to date, constructive finding and caring supervisors. Further, Baloyi (2011) argues that when there is a lack of the factors that support good performance, then workers need motivation. According to Gift and Obinda (2020) generally, a motivated employee tries harder to do an excellent job when compared to an unmotivated employee. What is more, Gift and Obinda (2020) emphasised that when employees are motivated then this will result to corresponding improvement in organizational productivity. Equally important, Cong and Van (2013) argue that knowing what motivate employees is a key to their motivation. The knowledge about what motivates employees will assist with a design of motivational programmes that are based on needs (Cong & Van, 2013).

Govender and Parumasur (2010) stress that is it important to motivate staff as this will ensure that an organisation thrives and succeeds in an environment that is increasingly competitive. Wamunyu (2016) expressed that the availability of staff is highly qualified and motivated, it is a key aspect of health system satisfaction. According to Vindhya and Yallati (2019), a role played by motivation in human's life is very important. Vindhya and Yallati (2019) explained that motivated employees are innovative and go-getters, they take initiatives, are not told what and how to do since they get things done by themselves and are eager to go on extra mile by accepting additional responsibilities.

Furthermore, Vindhya and Yallati (2019) elucidated that employees who are motivated ensure that: an atmosphere within the organisation is positive; there is co-workers happiness and safety; clients' happiness is their apex priority; better results are always achieved by motivated

employees when compared with their counterparts. Njambi (2014) elucidated that knowing the factors which motivate employees, is crucially important since management will know which motivating factors to prioritize in the organisation.

Aduo-Adjei, Emmanuel & Forster (2016) postulate that “motivation is a good thing if managers and administrators appreciate what drives workers to give an effective work performance resources will be channelled to get the maximum output from employees”. Rahbi, *et al.*, (2017) argue that although people in the healthcare system may be experts, achieving their potential will be difficult if they are demotivated. Basically, it is necessary to motivate staff and professionals in the healthcare organisations because they are dealing with high levels of stress (Rahbi, *et al.*, 2017).

2.7.2. Types of motivation

Motivation generally entails two types of motivation namely; extrinsic motivation and intrinsic motivation as discussed below:

2.7.2.1. Extrinsic motivation

According to Ryan and Deci (2000), when a person is doing something that ultimately leads to an outcome that is separable, then this is referred to as extrinsic motivation. Next, Poga (2019) defined extrinsic motivation factors as factors that are external to the environment that influence work environment such as career development and supervision. According to Poga (2019), extrinsic motivation factors influence the employees’ motive especially in their respective work areas. In the same manner, Vindhya and Yallati (2019) postulate that there are some people who are motivated by external factors to get tasks done.

Thus, extrinsic motivation means some individuals should be rewarded and recognised for their motivation levels to be stimulated (Vindhya & Yallati, 2019). Likewise, Jain, Gupta and Bindal (2019) describe extrinsic motivation as a type of motivation wherein people are influenced to perform a task through external desires. More importantly, Njambi (2014) argued that it is important for organisation to practice caution especially when they deal with extrinsic factors since it may be costly to address these factors. Thus, due to intrinsic factors, addressing extrinsic factors may not necessarily lead to employees’ motivation levels that are high (Njambi, 2014).

2.7.2.2. Intrinsic Motivation

There are numerous ways of defining intrinsic motivation (Ryan & Deci, 2000: 57), defined intrinsic motivation as “the doing of an activity for its inherent satisfaction rather than for some separate consequences”. Additionally, Ryan and Deci (2000) point out that when a person is doing something that is inherently enjoyable or interesting, this is referred to as intrinsic motivation. Besides, Poga (2019) explains that intrinsic motivation is the internal motivation of the individual employees about how they are personally challenged by working in various locations. Equally important, Vindhya and Yallati (2019) add that intrinsic motivation is about an individual motivated from within.

Therefore, an individual’s desire to perform well at her workplace is because his/her belief system is in accordance with the results (Vindhya & Yallati, 2019). Correspondingly, Jain, Gupta and Bindal (2019) define intrinsic motivation as a type of motivation in which an individual is being motivated by internal desires.

2.7.3. International perspective

In Australia, health professionals were incentivised through programmes which evolved over a time dating back in 1996 to 2001. Australian government developed interest on improvement of quality and outcomes of health care services. Health professionals, who took care of what is referred to as chronic disease patient in South Africa, were incentivised with what is called pay-for-performance. In 1996, Australia introduced financial incentives for Primary Health Care workers called Better Practice Program. In 1998 the incentive is improved and changed to become Practice Incentives Program (PIP). In 2001, it is upgraded to become what is today called Incentive Payment (Kecmanovic and Hall, 2015). This is the incentive initiative targeting health professionals for rendering a special service of take care of chronic patients. It is for this reason that nurses providing 24 hour services to communities should be incentivised. Whereas health professionals may derive satisfaction in servicing this category of patients, the financial incentives attached to it may further reinforce loyalty and productivity (Dobre, 2013).

In Haiti, government pays health professionals whose performance exceeds their targets. In the context of Haiti, health professionals who achieve performance targets and continue to do so beyond the standards were incentivised for the extra mile performance. In this context, the

granting of financial incentive as part of hygiene factors depends on extraordinary performance where actual performance far surpasses the target (Mandizvidza, 2014). The reward strategy is successful in Nigeria where employees who achieved more than their targets were paid cash bonus in line with Herzberg's hygiene factors target (Mandizvidza, 2014).

2.7.4 National perspective

The Department of Public Service and Administration as the custodian has developed a 2019 Incentive Policy Framework for Public Service which guides on incentives due for various categories of employees. It should be noted that the framework is reviewed annually hence the need to cite the year. Basically, it should be referred to as Incentive Policy Framework which is adapted to each financial and performance cycle. According to this policy framework, performance incentive is categorised into two namely; annual pay progression and once-off performance bonus.

In the context of the study, the performance incentive shall be limited to performance bonus. Whereas National Government has set out the policy, it is interesting to note that provinces apply the incentive using different approaches. The case in point is that of Gauteng Province in South Africa which pays performance incentive on flat rate across the board to all employees, and Limpopo Province which pays performance bonus according to individual performance rating whereby individuals get paid differently. It can be observed that provinces have taken a pragmatism theory because they consider what can work better given their dynamics. It should be noted though that they don't contravene the applicable regulations pertaining to the 2019 Incentive Policy Framework.

2.7.5 Local perspective

Limpopo Province Executive Council developed and adopted Performance Management and Development System Policy circulated for implementation by the Department of Health through Circular 65 of 2018. The policy was built on the reviewed National Policy Framework. Greater Tzaneen Primary Health Care applied the policy to motivate employees by paying performance bonus as an incentive for nurses who rendered 24 hour services at clinics. The management decision to incentivise the health professionals rendering the 24 hour services should be understood and proved to be part of the enhancement strategy for organisational performance. The clinics rendering 24 hour services have begun to have their employees

receiving performance bonus as an incentive. The justification of the decision will be based on the extent it influenced organisational performance whereby a set of objectives were achieved. Notwithstanding the challenges associated to this move, the 24 hour service provision begun to gain traction

2.8 Current Strategies for effective employee motivation

Roberts (2005) shares a view that although managers employ different strategies to enhance employees' motivation, they should bear in mind the fact that different strategies will have motivational impact that is different on different people. Roberts (2005) argues that, to ensure that motivational strategies were effective; there was a need for managers to consider the diversity of the group and uniqueness of the circumstance.

2.8.1. Staff Accommodation

In the study conducted by Aduo-Adjei, Emmanuel and Forster (2016), it was revealed that accommodation is relevant for performance of work by employees. Some participants in the study by Aduo-Adjei, *et al.*, (2016) believed that the issue of change-over would not be there, had the hospital has enough accommodation in its premises.

2.8.2. Career Advancement/Job Promotion

The term *career* means the sequence of work experiences an employee may have over time (Pillay, *et al.*, 2015). Pillay *et al.*, (2015) describe career development as the lifelong process of managing progression in learning and work. According to Pillay *et al.*, (2015), career advancement is based on merit without regard for gender, race, age or ethnicity. Also, a clearly marked path of progression was entailed in career advancement through the organisational ranks (Pillay *et al.*, 2015).

Career Development was defined by Kumar and Kumar (2013) as an opportunity for employees to continually take part in more advancement or diverse activities, for example, training, networking, that result in improving skills, gaining new skills, taking greater responsibilities at work, improving their status and earning higher income. The majority of participants (63%) in the study conducted by Kumar and Kumar (2013) rated opportunities to use their skills and

abilities at work as the most important job satisfaction's contributor to their job satisfaction, where job security has been ranked number one contributing factor to job satisfaction.

2.8.3. Enabling Working Environment

Wamunyu (2016) explained that working conditions includes elements such as working environment, working hours and resources, work instruments, lighting, ventilation, physical comfort and convenience. About working enabling environment, Nurses in the study conducted by Aduo-Adjei, Emmanuel, and Forster (2016) noted that what constituted intrinsic factors other than performance, was the creation of an enabling environment. Most importantly, the impact of workplace environment on health worker performance is great and also on the comprehensiveness and efficiency of health service delivery (Wyss, 2004).

2.8.4. Salary/Remunerations

Tella, *et al.*, (2007) explain that when an employee has a desire to be promoted and earn enhanced pay, this may lead to employee motivation. In the study conducted by Orasa (2014), 11.4% of the Participants considered good salary and allowances as the most important motivational factor. Further, Orasa (2014) expressed that extrinsic factors such as salary are maintenance factors rather than motivational factors. Cong and Van (2013), assert that good salaries would not motivate an employee if colleagues receive high allowances that he/she does not receive. Thus, it is vitally important that managers do not lose sight of disparities of salary allowances especially with regard to staff in the same rank.

Besides that, Mohamedi (2013) elucidated that employee motivation is influenced by salary increment and this enables employees to accomplish with an increased salary, and their lives become much easier. Then, Wamunyu (2016) explains that it is the employer's responsibility to ensure that employees' responsibilities and work have been done excellently, it is also important that effort they have put forth, and demand of their job; are considered and rewarded in a fair manner. Moreover, Wurie, Samai, and Witter (2016) revealed that the health workers saw a decent salary that was paid on time, translated into being able to provide for their families.

2.8.5. Reward and Recognition

Reward is defined by Baskar & Prakash Rajkumar (2014: 1644) as “a formal, impartial, and equitable exchange. A material or financial expression of appreciation that is conditional on results”. Likewise, Brun and Dugas (2002) cited in Baskar and Prakash Rajkumar (2014: 1644) define *recognition* as “constructive, genuine finding based on acknowledging people as sincere, worthy of respect, having needs, and equipped with their own personal expertise”.

Similarly, *recognition* is described as a return due to employees for their effort and dedication at work, and individual results (Baskar & Prakash Rajkumar, 2014). Reiteratively, Baskar and Prakash Rajkumar (2014) express that employee recognition involves an evaluation and acknowledgment of each worker’s unique contribution, as well as his or her professional expertise and experience. Next, Vindhya and Yallati (2019) in their study on employee motivation observed that rewards play a crucial role in the motivation of employees.

Baskar and Prakash Rajkumar (2014) reported that 52% of the participants in their study strongly agreed that motivation is increased by the rewards and recognition. Financial rewards were found by Aduo-Adjei, *at al.*, (2016) to be the best form of extrinsic factors because of their ability to sort out some miscellaneous expenditure such as feeding, and transportation which affect work performance. Orasa (2014) defined performance as the amalgamation of healthcare workers who are available, capable, productive and responsive.

Additionally, motivation can take the form of incentive and reward. Incentive and reward have blurred line to differentiate. Reward can be understood as a prize, cash or any token of appreciation that organizations give to their employees performing good jobs (Balle, 2017), while incentive can be defined as the way in which organisations motivate their employees to perform successfully in future. Whereas reward is given for those who met minimum standards, incentive is for motivating those who have been underperforming yet triggered to desire to do well. In practice, motivation can be defined to be a psychological force that influences one’s effort and the level of persistence against challenges (Jones & George, 2016). In relation to this study, incentive refers to performance bonus (money or cash) aimed at motivating employees rendering 24-hour service. It is further observed that motivation denotes the desire that causes employees to perform persistently in pursuit of a set of objectives.

Incentives have variables namely; remunerative incentives and financial incentives which were applicable in circumstances where employees have got an expectation to receive material reward for having performed in a particular way, moral incentive exists when the willingness to perform a task is regarded as the right thing to do and failure is condemned, and coercive incentive exists when performance of a task is influenced by the expectation of enforced pain or physical harm (Balle, 2017).

Financial incentive is given to motivate nurses to render 24-hour service. Payment of performance bonus as an incentive can motivate employees to help organisations realise their objectives (Meyer, 2012). Jones (2016) observed that motivation and satisfaction in companies are necessary to improve employee performance and institutional excellence. According to Luthans (2002) as cited in (Mavndizvidza, 2014) organisations should not underestimate the role of cash in motivating employees. These scholars have an aggregate convergence that performance is not a natural process instead a force that comes with the desire or willingness because of what one stands to benefit. In this regard, it creates vigour when the motivation factor involves financial incentive.

The study would deal with the notion of money as a motivation factor to improve organisational performance. Key to the study is whether or not organisations not throwing money to the problem will improve organisational performance. As (Dobre, 2013) concluded, it should be considered that motivated employees may achieve individual goals in an organisation. It will be interesting to fathom individual goals outside the purview of organisational goals. This argument creates interesting element of the research study as its response shall equally respond to the causal link between motivation and organisational performance.

2.8.6. Training and Development

Training is defined by Pillay, Dawood and Karodia (2015) as the process of systematic and formal modification of conduct by means of development education, instruction, and planned experience. Most importantly, Tella, *et al.*, (2007) assert that the motivation level and the effectiveness of the workforce influence high productivity even in organisations that are highly automated. These authors argued that an indispensable strategy for employee motivation is employee training. According to Ozkeser (2019) an activity which is vital in all organisations, is training because of its crucial role it plays in determining the organisations effectiveness and efficiency. Also, Wurie, *et al.*, (2016), showed that professional development that is continued

in the form of short courses or on-the-job training was a motivating factor as it was seen to help with their career progression path. The study conducted by Mtimkulu, *et al.*, (2014) found that inadequate skills development contributed to a decreased employee motivation in the institutions under the study.

The majority of Participants (54%) in the study conducted by Kumar & Kumar (2013) reported being satisfied with their organisation's commitment to professional development.

In the study conducted by Orasa (2014), 26.8% of the Participants considered training and development opportunities as the most important motivation factor.

2.8.7. Leadership/Management Style

Rahbi *et al.*, (2017) opine that a leader has to be supported and encouraged by a team because a leader's effectiveness and efficiency relies on a team's motivation. Rahbi *et al.*, (2017: 10) emphasise the importance of motivating a team in an organisation and they argue that team motivation is influenced by major leadership styles which include authentic, servant, transformational and transactional leadership styles. Rahbi, Khalid, and Khan (2017) express that improving outcomes need a shift from the traditional models of leadership to modern leadership models. Rahbi, *et al.*, (2017) stipulate that leadership can never be separated from team motivation and effective leadership is associated with the durable motivation of team members.

The majority of Participants (76%) in the study conducted by Mtimkulu, Naranjee, and Karodia (2014), agreed that leadership kept them motivated by engaging them in activities relating to their work. Mtimkulu, *et al.*, (2014) concluded that employee motivation, performance, and absenteeism are influenced by good quality leadership.

2.8.8. Management Support

In the study conducted by Daneshkohan, Zarei, Mansouri, Maajani, Ghasemi and Rezaeian (2015), it was revealed that supervisors' and managers' support, and good working relations with colleagues, were considered motivating factors for health workers. Aduo-Adjei, Emmanuel and Forster (2016), reported that support from management and other departments

is needed for creating a friendly work environment where staff can easily access information on patients to enable healthcare delivery. These authors, also elucidated that bureaucratic processes should be eliminated in order to provide quality healthcare, which is a priority for healthcare workers.

2.8.9. Employee Involvement

Dahie *et al.*, (2015) conducted a study and concluded that employee motivation had correlation with job involvement. The study found that employees did not only respect cash reward system, but also the extent of their involvement satisfied them to perform tasks. Dombre (2013) went further to propose that employee participation and empowerment increase motivation and loyalty to an institution.

2.8.10. Organisational Policies/ Systems

Orasa (2014) recommended that healthcare policy should be communicated to the healthcare workers. The argument is that once the policy is known, this will ensure that workers are working well and disagreements between management and workers especially with regard to the performance standard, will be minimised (Orasa, 2014).

2.9. Challenges of employee motivation

According to Mtimkulu, Naranjee and Karodia (2014), employees are dissatisfied because their employers expect them to function excellently under conditions that are poor. This section, thus, deals specifically with challenges faced by the health systems in the promotion of health care services. The challenges are as follows:

2.9.1. Inadequate Staff Accommodation

The study conducted by Ojaka, Olango and Jarvis (2014) showed that lack of housing, inadequate payment of support staff, and poor physical state of the health facility contributed to a non-conducive working environment. Wurie, *et al.*, (2016) revealed that there was a lack of suitable accommodation and this was a main deterrent in the retention of health workers in rural postings. In the study conducted by Baloyi (2011), it was found that 24.3% of the

participants said that they did not have accommodation at their hospitals. Additionally, 55.2% indicated that they had some accommodation, while 10.3% said they had adequate accommodation, and 10.3% of the participants said that the accommodation was inconsistent.

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2.9.2. Inadequate Budget/ Financial Constraints

In the study conducted by Mangundu, *et al.*, (2020) participants cited a lack of financial resources as a challenge to the provision of healthcare services. In the study conducted by Oleribe (2019) in Africa, 30% of the participants cited inadequate budgetary allocation to health as a challenge.

2.9.3. Difficult Working Conditions

In the study conducted by Wurie, *et al.*, (2016) revealed that there are poor working conditions, health facilities are under-staffed, and described as unhygienic and these facilities were found to be in the rural settings. Wurie *et al.*, (2016) continued to highlight that the uncleanliness and rural setting of the workplace are aspects that demotivate employees.

2.9.4. Equipment

Participants in the study conducted by Mokoena (2017) indicated that it is discouraging to go to work knowing that there is no equipment. What is more, participants found to be demotivated to go to work (Mokoena, 2017). The lack of equipment for nursing personnel seems to lower the level of employee motivation.

2.9.5. Lack of Management Support

The study conducted by Wurie, *et al.*, (2016) revealed that junior staff members felt neglected and unappreciated by those above them, creating conflict and division in the workplace. The majority of the managers in the study conducted by Omole, Marincowitz and Ogunbanjo (2005) indicated that Community Service Doctors were not given enough administrative, social and crucial support. Additionally, the study by Omole, *et al.*, (2020) found that due to shortage of Senior Doctors, teaching and supervision of Community Service Doctors were not adequate. Mtimkulu, Naranjee and Karodia (2014) argued that interpersonal incompatibilities could cause conflicts and this may lead to tension between employees and also a hostile environment. Furthermore, Mtimkulu, *et al.*, (2014) stress that harmonious situations lead to demotivated employees since they will not cope with such situations. Supervisory support comprises availability for and equipping of subordinates with techniques of solving specific work related cases, (Thi Hoai Thu *et al.*, 2015).

2.9.6. Poor Leadership Style

In the study conducted by Baloyi (2011) in the Capricorn District of the Limpopo Department of Health, poor leadership styles by managers were found to pose a serious challenge in the institutions within Capricorn District. In the study conducted by Oleribe, Momoh, Uzochukwu, Mbofana, Adebisi, Barbera, Williams and Taylor-Robinson (2019) in Africa, it was reported that 8.45% of the participants identified poor leadership and management as a challenge.

2.9.7. Unfair Treatment

Daneshkohan, *et al.*, (2015) found that unfair treatment was the first demotivating factor in their study. Accordingly, Daneshkohan, *et al.*, (2015) suggest that organisations have a duty to improve the way they treat the workforce. Elements of unfair treatment may take the form of punitive approach, intimidation at work and bias on performance evaluation.

2.9.8. Unfair Rewards and incentives

In the study conducted by Daneshkohan, *et al.*, (2015), unfairness of rewards and incentives was perceived to be contributing factor that led to employee demotivation. Mtimkulu, *et al.*, (2014) reported that, 55% of the participants cited poor rewards as a factor which contributed

to negative employee motivation, decreased employee performance, and increased absenteeism.

2.9.9. Shortage of Human Resources

In the study conducted by Baloyi (2011), it was discovered that 50.0% of the participants indicated that there was lack of human resources to implement the policies whereas 50.0% said that there was no human resource challenges that impede the implementation of policies. Furthermore, the study by Baloyi (2011) found that Capricorn District was faced with a serious human resources crisis particularly in the rural area. This challenge was found to be exacerbated by the loss of Senior Nurse Managers in the said District (Baloyi, 2011).

Participants in the study conducted by Mokoena (2017) perceived shortage of staff as an obstacle for the provision of patient care that is of good quality. Also, Mokoena (2017) reported that government's policies which promote non-hiring of new personnel and freezing of posts, aggravated shortage of staff in the public hospitals. Oleribe, Momoh, Uzochukwu, Mbofana, Adebisi, Barbera, Williams and Taylor-Robinson (2019) in the study conducted in Africa, reported that 34.29% of the participants identified inadequate human resources as a challenge.

The study by Mangundu, *et al.*, (2020) found that 60% of Nurses and 44.94% of healthcare users perceived a shortage of Nurses as a challenge. This is supported by the fact that 60% of the Nurses in the study conducted by Mangundu, *et al.*, (2020) indicated that they were experiencing a work overload at the health facilities and this led to long waiting time.

2.9.10. Shortage of Medication

Most participants in the study conducted by Mokoena (2017) identified shortage of medication as a challenge and it was found to make a detrimental effect in the provision of quality patient care. Mangundu, Roets and Janse van Rensburg (2020) reported that Nurses who participated in their study, perceived the shortage of medicines as their greatest challenge for the provision of healthcare in rural areas. Also, Mangundu, *et al.*, (2020) revealed that Participants in their majority (96.66%) indicated that deliveries of medical drugs lacked consistency in both the type and quality.

2.9.11. Unattractive salaries

In the study conducted by Govender and Parumasur (2010), it was found that a significant number of Participants expressed that they were demotivated due to a lack of satisfaction as a result of their unattractive salaries as compared to their counterparts in other organisations.

2.10. CONCLUSION

The empirical literature reviews as discussed above show that there are divergent views on the role of employee motivation for service delivery imperatives. Hence, there is a need for further analysis of the role of employee motivation in the context of public health sector and further articulating strategies for effective employee motivation. The next chapter discusses the research methodology that was applied for data collection in the study.

CHAPTER 3: RESEARCH METHODS AND DESIGN

3.1 INTRODUCTION

The previous chapter dealt with literature review. This chapter discusses research methodology that was applied for data collection in this study. The discussion in this chapter includes the following: research method, research design, population, sampling technique, sampling size, data collection method, data analysis technique and ethical consideration.

3.2 RESEARCH APPROACH

There are two research approaches that are commonly used in social science studies namely, quantitative and qualitative approaches. According to Mweree (2020), quantitative research was defined as a systematic and objective process of applying statistical data from a selected population to generalise the findings of the phenomenon studied. Quantitative research approach involves analysis of numerical data using statistical techniques.

According to Leedy and Omrod (2007), qualitative research was defined as the approach of research that described phenomena based on the point of view of the informants (participants), discovered multiple realities and developed holistic in-depth understanding of the phenomena within a particular context. Under qualitative research approach, the researcher applied exploratory research design as it attempted to get the in-depth understanding of a phenomenon rather than a more objective statistical data, (Saunders & Thornhill, 2016).

According to Creswell and Plano Clark (2018) as cited in (Mweree, 2020:331), mixed method research was defined as “a procedure for collecting, analysing and combining both quantitative and qualitative within a single study or series of studies to understand a research problem more completely”. The researcher selected the qualitative research approach due to the nature of the phenomenon or topic under investigation. Under qualitative research approach, the researcher applied exploratory research design as an attempt to get in-depth understanding of a phenomenon rather than a more objective statistical data (Saunders & Thornhill, 2016).

Research design could be thought of as the order of the plan that showed how the researcher conducted the study (Roller, 2017). Similarly, Asenahabi (2019: 78), noted that research design involves the analysis that researchers do in order to get the results that are required.

Thus, research design is defined in Asenahabi (2019) as an overall plan that connects the conceptual research problems to empirical research that are pertinent and achievable. Qualitative research has different methodologies such as case study, phenomenology, narrative studies, grounded theory and ethnography (Roller, 2017). The researcher applied an interpretivist research paradigm due to the use of qualitative research approach. This choice was caused by the reliance on text for narration of the phenomenon under investigation.

3.3 RESEARCH DESIGN

The research design serves to guide the process by laying out how a study will move from research purposes to the outcomes. According to Abutabenjeh and Jaradat (2018), research design is a set of decisions that are advanced to specifically outline methods and procedures for collecting and analysing data. According to Mouton and Marais (1996) research design is viewed as a blueprint which guides the researcher on how to conduct the study.

In this study exploratory research design was applied to explore the opinions of participants or participants on the role of employee motivation in the context of Department of Health in Limpopo Province. The choice of the selection of this research design is to gain new insight, discover new ideas and increasing knowledge of the phenomenon (Fatorachian & Kazemi, 2020)

3.3.1. Sampling

Sampling is defined by Kumar & Kumar (2013) as a subset of a larger population. Sampling deals with criteria to include and exclude participants in the study (Kumar & Kumar, 2013).

3.3.1.1. Population

Gift and Obinda (2020) define population as the entire subjects that the researcher will get information from. In order to allow for proper elimination and inclusion of participants, the researcher considered participants from the criteria of relevance and expertise. The researcher targeted health professionals working at Greater Tzaneen Primary Health Care. The 15 clinics employed 300 nursing personnel that include 15 Operational Managers and 20 Shopstewards which is the population from which participants in this study were drawn.

3.3.1.2. Sampling technique

Flowing from the notion of Kumar and Kumar (2013) of sampling being a subgroup of a larger population, the researcher developed a criterion of including participants in the study.

The researcher applied non-probability sampling with special choice of purposive sampling for questions related to qualitative approach. The reason for the choice of purposive sampling is to allow for the participants that are relevant to the research objectives and have experience explainable in word. Furthermore, the choice is informed by the qualitative research approach where a phenomenon will be explained using narration.

3.3.1.3. Ethical issues related to sampling

Leedy and Omrod (2014), recommend that participants in the study must be protected against any harm by their supervisor. In order to achieve that, Leedy and Omrod (2014) quipped against the identity of participants. Participants were included and excluded from participation according to the rank of professional nurse, Operational Manager and Shopstewards in clinics. In order to enjoy cooperation and consensual participation, participants gave consent by completing a form.

3.3.1.4. Sample size

Flowing from the assertion by Kumar and Kumar (2013) who concluded on a sample being a subset of a larger population, the researcher included some participants from the pool of professionals attached to facilities. The sample size for the study is 50 participants comprising 35 nursing personnel, 10 Operational Managers and 5 Shopstewards from different clinics were involved in the qualitative research method. The table below shows the sample size:

Table 4.1: Sample size

No	Categories	General Population	Sampled population
1	Operational Manager	300	10
2	Professional Nurse		35
3	Shopstewards		5
Totals		300	50

3.3.2. DATA COLLECTION

Data was collected from Participants and documents as primary and secondary sources. The finding from participants was presented alongside the literature on the similar topic studied.

The researcher applied interview, questionnaire and data analysis.

Silverman (1993) as cited by (Leedy & Omrod, 2014) asserted that interviews yield useful information when questions were related to conscious reasons for actions, facts, motives, feelings and standards for behaviour.

Joseph, Barry, Money and Samoel (2003) as cited in (Shipalana, 2014) defined a questionnaire as a set of prepared questions or measures to which interviewers recorded answers. The documents analysis was applied to study policies and procedures adopted by the department that were related to the research area (Leedy & Omrod: 2014). For that purpose, regulatory framework was informed by analysis of documents.

3.3.2.4 Data Collection Process

The researcher distributed data collection instrument together with a box to Participants. A space was designated in the Manager's office for safekeeping of response box. The box containing questionnaire was collected from clinic facilities. The finding from Participants were coded while completed questionnaire remained kept in a safer place.

3.3.2.5 Ethical considerations related to data collection

Participants enjoyed the choice to participate in a research study, (Leedey & Omro: 2014). The researcher did not allow participants outside the targeted ones. The questionnaire was also explicit on the ranks relevant to the study to allow meaningful contribution by participants with experience in the discipline. Participation in any study should be free from pressure, (Leedey & Omro, 2014). Participants were given consent forms as a way of accepting voluntary participation in the study.

3.3.3 Data Analysis

Kampar (2021) points out that a theme was defined by the Oxford Learner's Dictionary as "the subject or main idea in a talk, piece of writing or work of art". Kampar (2021) stressed that the word *theme* relates to "the degree of occurrence of an expressed idea on a specific subject". Thematic analysis was defined by Kampar (2021) as a procedure applied to analyse data that focuses on identification, description, explanation, substantiation and relations of themes. Thematic analysis is defined in Braun and Clarke (2006) as a technique for identifying, examining and reporting patterns (themes) within data.

It was for that reason that the researcher adopted a thematic analysis in the current study. Qualitative data analysis deals with the way a volume of collected data brings an order, structure and meaning to the phenomenon being studied (Marshall & Crossman, 1990). Data was organised and presented on tables, graphs and charts. It would be coded according to thematic whereas to allow for finding on commonalties to be grouped together for qualitative interpretations. That was done with due consideration of biological data such as age, rank, gender, and experience using semi-structured questions. The researcher used software systems to analyse data. NVIVO software system was selected for qualitative data analysis.

3.4 Internal and External Validity of the Study

According to Leedey and Omro (2014), validity refers to the extent of accuracy on what is being measured. The finding from participants is thematically presented with the particular regard to integrating them with the literature from scholars of the same phenomenon. The researcher also quotes in verbatim some findings from participants to ensure validity of the study.

3.5. Bias

Bias is defined by Attica (2005: 258) as "the deviation from the truth". Furthermore, Attica (2005: 258) further highlights that in scientific terms, bias means "any factor or process that tends to deviate the results or conclusions of a trial systematically away from the truth". In this study, a purpose sampling technique was employed in the selection of participants in order to avoid the selection bias and the study results being impaired.

3.6. Conclusions

This chapter focused on the research methodology, research design, study site, sampling, data collection tool, ethical considerations as well as the conclusion. It dealt with process and mechanism of data collection until validated to rid it from manipulation. The next chapter deals with discussion, presentation and interpretation of findings.

CHAPTER 4 (DISCUSSION /PRESENTATION / INTERPRETATION OF FINDINGS)

4.1 INTRODUCTION

The previous chapter discussed research methodology that was applied in this study. This chapter deals with the discussion, presentation and interpretation of data. The chapter focuses on the introduction, data analysis and results of the study.

4.2 DATA MANAGEMENT AND ANALYSIS

4.2.1 Demographics

The researcher organised data and distributed it according to demographics based on age, gender, experience and rank. The distribution of data is presented in tables and graphic representation.

4.2.1.1 Age distribution

Table 4. 1: Age distribution

Age category	No of participants
25 – 30 years	2
31 – 35 years	3
36 – 45 years	16
46 – 55 years	15
56 years and above	14

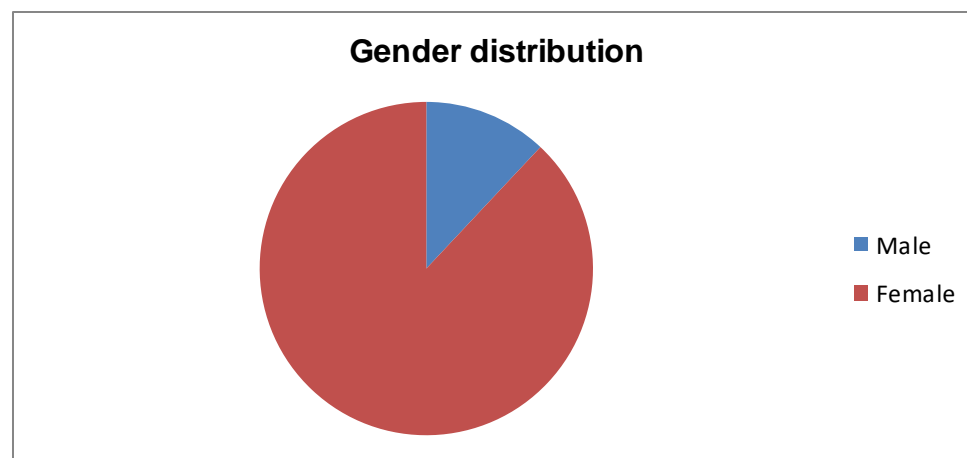
The majority of participants 16 representing 32% were aged 36 – 45 years, followed by 15 participants representing 30% were aged 46 – 55 years, followed by 14 participants representing 28% were aged 56 years and above, followed by 3 participants representing 6% were aged 31 – 35 years and 2 participants representing 4% were aged 25 – 30 years. As it can be seen in table 1 above, 28% of participants were employees aged 55 years and above thereby constituting an employee classification that may retire early on age. The ageing workforce in a department with shortage of staff may render it incapable of promoting basic health care services. There were few youth participants 5 representing 10%. Based on that, there were more participants who enjoy early retirement probability as opposed to 14 participants representing 28% who enjoy a reasonable age of productivity probability.

4.2.2 Gender of Participants

Table 4. 2: Gender of Participants

No	Gender Classification	Participants
1.	Males	6
2.	Females	44
Totals		50

Figure 4. 1: Gender distribution of participants



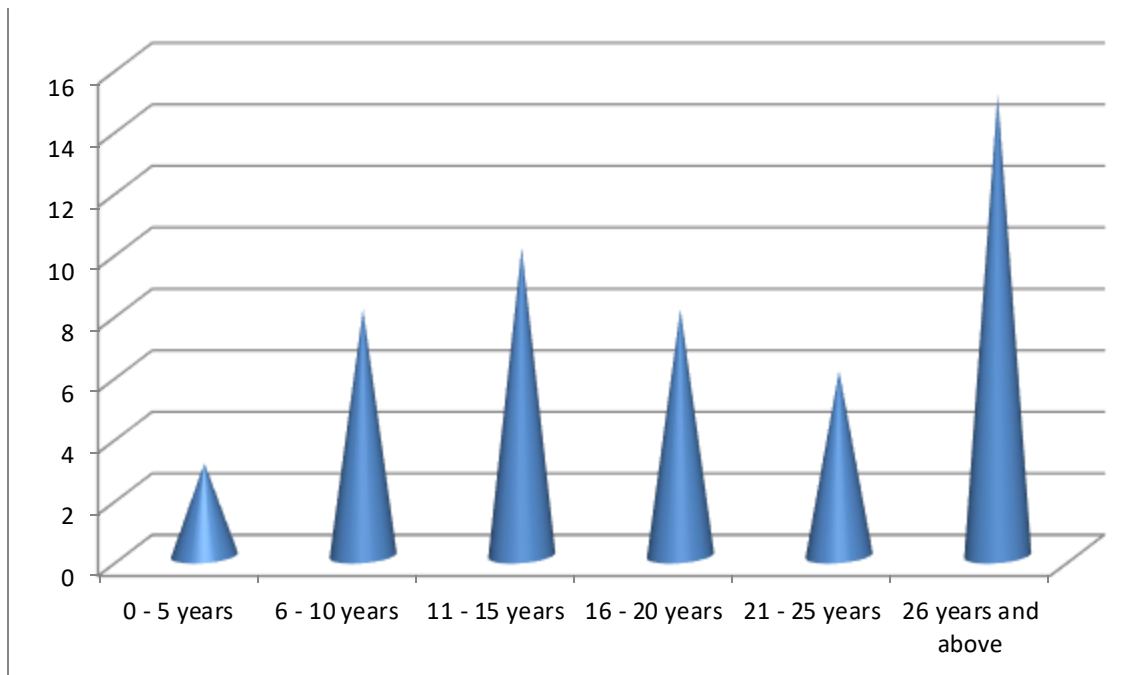
The majority of participants, 44, were females while 4 participants were males. Because of employee motivation being a general phenomenon, the study could neither be drawn into gender-based analysis nor insulation from it. The number of female participants could only be attributable to the general predominance of female population in the nursing profession.

4.2.3 Years of experience

Table 4. 3: Years of experience

Years of experience	No of participants
0 – 5 years	3
6 – 10 years	8
11 – 15 years	10
16 – 20 years	8
21 – 25 years	6
26 years and above	15
Totals	50

Figure 4. 2: Years of experience distribution



The majority of participants, 15, had a working experience of between years while the minority of Participants, 3, had 3 years of working experience. Sequentially, the Participants were followed by 10 Participants with between 11 – 15 years of experience, followed by 8 Participants each for 6 – 10 and 16 – 20 years of experience, followed by 6 Participants with between 21 – 25 years of experience and lastly 3 participants with between 0 – 5 years of experience. The average experience of employees is at 8 years and 3 months. The majority participants with 26 and above years of experience and the average employee experience of 8 years and 3 months of experience created a population capable of providing finding on appreciable experience of service.

4.2.4 Rank of Participants

Table 4.4: Rank of Participants

No	Rank	Participants
1.	Professional Nurses	35
2.	Managers	10
3.	Shop Stewards	5
Totals		50

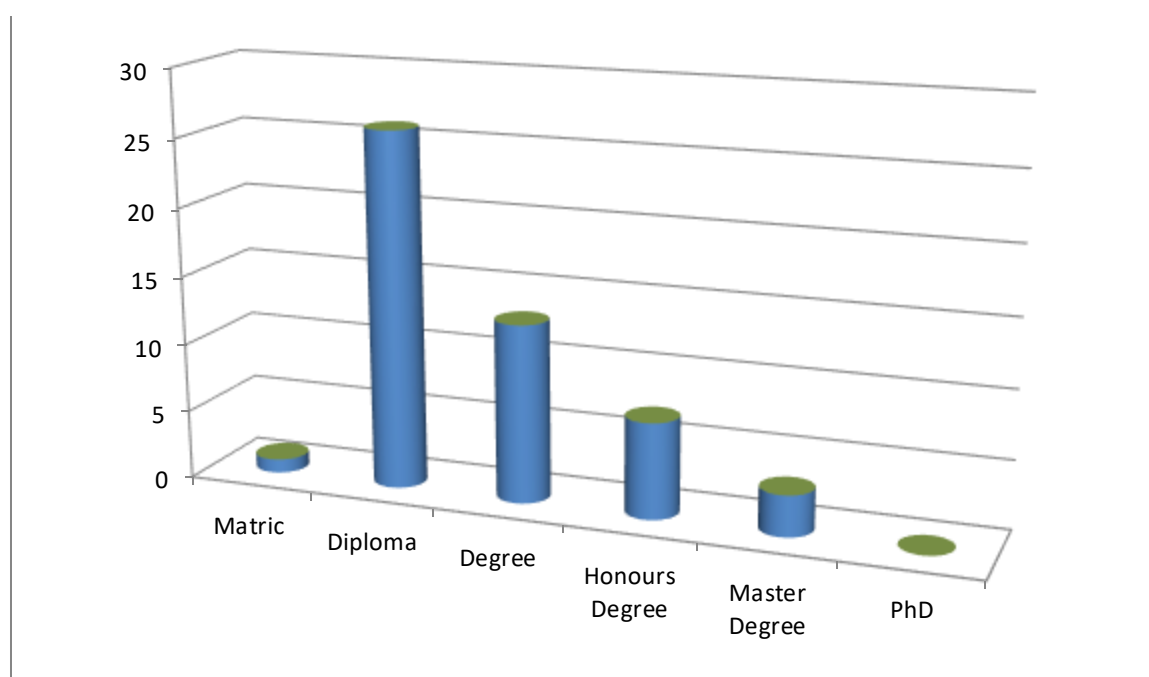
The majority (35) participants constituting 70% were Professional Nurses, followed by Managers (10) constituting 20% and shop Stewards (5) constituting 10%. The balanced classification of employee ranks helps to get feedback from relevant and experienced participants with the phenomenon under investigation.

4.2.5 EDUCATIONAL LEVEL

Table 4. 5: Educational level

Level of education	Participants
Matric	1
Diploma	26
Degree	13
Honours Degree	7
Master Degree	3
PhD	0
Totals	50

Figure 4. 3: Educational level



The majority of participants (26) constituting 52% were had a Diploma qualification, followed by 13 constituting 26% with undergraduate Degree, followed by 7 participants constituting 14% having Honours Degree, 3 participants constituting 6% with Master Degree and lastly 1 participant constituting 2% of participants with a matric certificate. Considering the overall educational level, the participants' educational level is impressive with 20% of them having passed postgraduate level. The interesting 2% participants with matric qualification is a shop steward who did not affect the direct promotion of basic health care services. In overall 98% of participants possessed the requisite knowledge and experience necessary for the promotion of basic health care services.

4.3. QUALITATIVE RESEARCH RESULTS

The presentation of qualitative research results is based on the data collected through semi-structured interviews questionnaires. The results are presented according to theme and subthemes as outlined on Table 4.6 below:

Table 4. 6: Themes and Subthemes

No	Main themes	Subthemes
1	Current strategies put in place to promote employee motivation to promote basic health care service	Strategies for employee motivation
2	Identification of challenges faced by the department in the provision of basic health care services	Challenges on service delivery
3	Strategies to improve Service delivery in the health care sector	<ul style="list-style-type: none">• Strategies for service delivery improvement• Strategies for employee motivation

4.3.1 Strategies for promote employee motivation

4.3.1.1. Description of current strategies put in place to promote employee motivation in the promotion of basic health care services

Participants were requested to describe in their opinion the current strategies put in place to promote employee motivation in the promotion of basic health care services. Majority (48) of participants managed to outline various strategies put in place by the Department of Health to motivate employees, while 2 employees did not have any knowledge on the strategies that are in place. The strategies were identified as performance incentive, infrastructure and staff accommodation, better working conditions, training and development, and relationship between supervisor and supervisee.

The results show that the majority are knowledgeable about the strategies that are in place in the Department of Health. This might be due to the fact that workshops or training with regard to employee motivation strategies were conduct. Although the strategies are in place in the Department of Health, implementation seems to be a challenge.

Participant 8 replied that *the department is providing performance incentive, enabling working condition, management support, and training and development*

Participant 19 replied that *the employer pays salaries, performance incentives, training and development, and employee involvement*

Participant 34 replied that *the department pays performance incentive, training and development, salaries, and management support*

This is consistent with the study by Ganta (2014) who emphasises the importance of implementing the strategies for employee motivation in order to achieve desired results. In this regard, the strength of motivation strategies depends on the implementation as opposed to merely developing them.

4.3.1.2. Strategies motivate employees in the promotion of basic health care services

On this question, 50 participants responded positively as they demonstrated general understanding of the question. The participants showed familiarity and knowledge of what the department offered and that which motivated them. The responses show that employer effort was able to be recognised or acknowledged by employees. The 50 participants indicated the various motivation factors. The finding shows the need for the payment of performance incentives and introduction of special incentives for health professionals providing 24 hour services, training and development, working condition, management support, career advancement, infrastructure development and supply of working equipment

Participant 1: replied that *paying of performance bonus motivates nurses for good results in Ideal Clinic and 24 hour services.*

Participant 2: replied that *to incentivise workers for outstanding performance with bonus make us want to do more for the department.*

Participant 42: replied that *receiving bonus and pay progression increase our effort to perform according to what managers want.*

The finding from participants proposes a performance incentive for health professionals performing 24 hour services and risky health care service like Covid-19 patients. The proposition was supported by the incentive introduced in Australia to motivate employees

taking care of chronic patients. In 1996, Australia introduced financial incentives for Primary Health Care workers called Better Practice Program. In 1998 the incentive is improved and changed to become Practice Incentives Program (PIP). In 2001, it is upgraded to become what is today called Incentive Payment (Kecmanovic & Hall, 2015).

The introduction of an incentive in the mould of Australian Incentive Payment could be a responsive motivation to health professionals engaged in 24 hour services while other clinics considered it as a discretionary service. It could be argued from the point of view of Herzberg that some clinic could join in the provision of basic health care services for 24 hours owing to the financial incentives. The next motivation factor deals with infrastructure and staff accommodation.

After dealing with performance incentive, the study proceeds to quality infrastructure development and staff accommodation. The finding shows that 40 participants are motivated by the quality of infrastructure development and staff accommodation. Considering the population of 50 participants, to have 40 of those participants identifying infrastructure and staff accommodation shows the understanding of employee motivation. To demonstrate the identification of infrastructure and staff accommodation by participants, the following were some of the responses from participants:

Participant 5: replied that *our clinic building provides us with safety and allow our patients to have privacy.*

Participant 8: replied that *enough space in the clinic can improve our work to reduce the patients queue.*

Participant 17: replied that *nurses who perform 24 hours must be allowed to stay with their families at nurses' home.*

The finding shows alignment with the literature view that asserts that the development of suitable infrastructure can be one of the factors that could improve morale (Willis-Shattuck *et al*, 2008). The design and quality of infrastructure have the capacity to attract talented workforce and provide safer work environment. Organisations have a duty to design their infrastructure in a way that can attract people living with disability. Some talented people living with disability may find it difficult to perform tasks where access to infrastructure and related equipment remained difficult. The infrastructural development and staff accommodation could

be linked with the creation of a better working condition that would follow. The safety of employees could not be separated from the better working conditions. As such spacious and well developed infrastructure made the environment conducive for promotion of basic health care services with due regard for the dignity of patients or clients. The next finding relates to better working conditions as a motivation factor.

Flowing from the discussion on infrastructure development and staff accommodation, the study proceeds to deal with better working conditions. The finding shows that 41 of participants cited the better working conditions as critical for employee motivation. The performance of flexible working hours allowed health professionals to enjoy adequate rest before coming back to work. To demonstrate the identification of better working conditions by participants, the following were some of the responses from participants:

Participant 2 replied that *the work pattern must change from On-Call to shift system*

Participant 6 replied that *safety of employees, availability of water to drink, toilets and cleanliness of the surrounding are important*

Participant 46 replied that *management must not intimidate us and make us fearful when we made mistakes. When we make mistakes, they must help us*

The availability or unavailability of water, occupational health and safety measures, and sanitation influenced staff motivation to be retained or turnover. The context of Covid-19 clearly supported the proposition. The finding is supported by literature view. It was for similar reason that rural and urban did not motivate health professionals the same way (Muthuri et al, 2020). The study concluded that poor work environment demotivated health professionals to an extent of health professionals leaving for private sector (sector switch) or migration (brain drainage) to foreign countries.

In that regard, the long working hours resulting from On Call system could not motivate employees. The latter had the capacity to compromise the health and safety of employees as some might suffer from lifestyle diseases or get their health conditions deteriorating. The question of management support to employees at work could contribute to the improvement of working conditions. In order for management to support, there should be a relationship between supervisors and supervisees in order to make effective and precise response to workers'

conditions. The point led to the discussion around supervisor and supervisee relationship. The next discussion deals with training and development of health professionals.

The finding indicates that 46 of the participants viewed training and development of health professionals as the second most prioritised motivation strategy. Training and development appears to be a priority area of interest for the participants. For instance, in order to demonstrate the identification of training and development by participants, the following were some of the responses from participants:

Participant 1: replied that *training and development make us grow in the profession*

Participant 2: replied that *training and development of nurses helps to translate and promote employees.*

Participant 4: replied that *going to nursing school improves knowledge and skills about procedures to care for our patients*

It is established from the finding that participants and the literature review correlates training and development as critical pillars of employee motivation as they laid the basis for appropriate and improved management of diseases. Besides that, training and development laid the foundation for career advancement and promotion to higher posts with higher salary. Staff development improves employee knowledge and skills to perform expected task in a better way (Bennett & Franco, 1999). Accordingly, organisations have a duty to improve organisational effectiveness and efficiency by means of motivating employees with knowledge and skills. In order for employees to be motivated by the job itself, organisations continuously train and develop their workforce to cope with the complex demand for basic health services.

Thi Hoai Thu *et al.*, (2015) extended the required motivation factor to be what was referred to as effective training and development programmes. Their study concluded that it should be effective training and development when the course content linked local conditions for health professionals to apply. As such effective staff training and development should respond to the real conditions as they related to burden of disease. It was concluded that training methods of health professionals should combine elements of improving competencies, motivation and performance (Thi Hoai Thu *et al.*, 2015).

Training and development of employee helped to perform demanding duties and further achieve personal desire to advance in a career (Willis-Shattuck *et al.*, 2008). It is found that the

knowledge and skills acquired bolstered the opportunity to grow in career. The translation in rank of health professionals caused sufficient reason to stir wilful performance. Besides prospects of promotion, it emboldened the confidence of workers to manage different and difficult diseases. In that regard, both an individual employee and organisation enjoy mutual benefit of career advancement and achievement of institutional objectives respectively.

In that context, effective training and development courses should take into account the burden of diseases, methods of training and training needs so as to ensure responsiveness to real problems. The development of staff helps to improve skills necessary to be productive at work. Skilled and knowledgeable employees have the potential to be retained and promoted to higher positions. Continuous professional development, study leave and bursary were vital to improve relevant clinical capacity of health professionals to respond and deal with concrete health care services.

It would be critical for organisations to not only rely on skills audit form for training, instead continue to scrutinise skills needs that would respond to health care service package provided by such facilities. So, clinics that did not provide 24 hour services should not train its health professionals on Advanced Midwifery because the department would not benefit from that skill in the facility. In the banking sector, (Güllü, 2016) examined on the causal relationship between training and development, and employee motivation. The study concluded that training and development programmes motivated employees to accomplish higher performance levels. Therefore, good training and development programmes have the capacity to improve employee motivation (Güllü, 2016). It was therefore critical to sustain the relevance and significance of training and development programmes in enhancing the employees' on-job knowledge and skills necessary for goal attainment.

The discussion of training and development leads to relationship between supervisor and supervisee.

The finding shows that 36 of the participants identified the relationship between supervisor and supervisee as a factor that motivated employees.

Participant 2: replied that *to have a supervisor who identifies our talent and understands our challengers is inspiring.*

Participant 10: replied that *our supervisor respects subordinates without considering their rank. She is available for us personally and professionally.*

Participant 45: replied that *our supervisor listens, support and relates with us without harassment and insults.*

The finding by participants is supported by literature review in that supervisees relied on the experience and guidance of supervisors to impart knowledge about organisational vision and culture. Management should learn to relate with subordinates and appreciate the uniqueness of employees' competencies and experiences. Employee empowerment was an interesting concept in human resources management that had two tasks of unleashing individual capabilities and delegation of powers. Employee empowerment is a process of releasing the potential of employees and allocation of powers to make decision and account (Brown, 2014). Supervisors are obliged to be aware of their role to develop a culture of support supervision that considers challenges faced by employees and fair treatment on matters of training and development, career advancement, level of involvement and performance assessment (Mathauer & Imhoff, 2006).

4.3.2. Challenges faced by the department in the promotion of basic health care services

Participants were asked a question: *"In your opinion, what do you think are the challenges faced by the Department in the promotion of basic health care services? Motivate your answer"*.

Participants, 45, responded positively to this question except for 5 participants who could not respond positively. The total number of 45 out of 50 participants who responded positively to the question demonstrated an understanding of the phenomenon. Participants identified challenges faced by the Department in the promotion of basic health care services as organisational systems, shortage of staff, poor infrastructure development, shortage of budget, lack of training and development. The next discussion deals with organisational systems as of the challenges faced by the department in the promotion of basic health services.

The finding from participants shows that 44 identified organisational systems as barriers to effective promotion of basic health care services.

Participant 10: replied that *departmental policies on 24 hour services and security personnel were conflicting.*

Participant 16: replied that *financial delegations were in the District Office and they delay to buy or just buy equipment we do not want to use. The work pattern or shift system was not good for coverage of services.*

Participant 42: replied that *we are confused about line of reporting and referral system was not proper because at time we report at hospital, again in the District Office.*

Some challenges related to lack of communication system, poor referral systems, poor management of performance management system, patient information system in clinics as challenge in the promotion of basic health care services. The proposition resonated with the one for employee involvement in the development of policies in order to raise matters that compromised workers' rights and working conditions. The consideration of workers' inputs appeared to be handy for productivity. The incongruence among policies could pose instability at work stations as implementation would be compromised. The classic case was that of 24-hour service and Recruitment policies setting a norm on the number of health professionals while the department was not filling vacated posts compromised the promotion of basic health care services. The centralisation of delegation of financial delegations served to delay procurement of goods and services which were central to performance of 24 hour service.

Participants' finding augments the literature review on the centrality of policies and systems in motivating employees. Organizational structure was understood to be the one that remained practical and adaptable to particular environment supporting a system necessary for organisational success (Montana & Charnov, 1993). Organisational structures and processes influenced the level of employee motivation in the health system as they received feedback about their performance from colleagues and supervisors (Bennett & Franco, 1999). Participants viewed performance management system as having feedback and training opportunities after periodic performance assessment. Employees got motivated by positive feedback for excellent performance while they improved performance based on negative feedback as they would be taken through training and development programmes.

The development of policies, procedures and protocols aims at improving services through protection of labour rights and employee motivation. The departmental policies like Recruitment and Retention, Delegation of Responsibility, Overtime Management, Performance Management and Development Systems, Grievance Management, Training of Health Professionals Policies and 24 hours Policies were developed to enhance employee

motivation. In some instances, the development of procedures and protocols on management of certain diseases and medical conditions provide a motivation for employees to manage patients with ease and confident of the possibility for positive feedback and healing. The sense of being motivated by the healing of patients and positive feedback supports the proposition by Herzberg's Motivator – Hygiene theory that some employees get motivated by performing the job itself. In that regard, the task performance and feedback create fulfilment.

The finding from participants shows that non-availability of internet access at clinics made it difficult for clinics to report cases and delayed departmental communication. Internet and communication policy, human resources policies on training and development, performance management, recruitment and retention, leave management and housing played a vital in the motivation of employees. Organisational policies and systems provided a framework that attracted and retained competent employees. Major weakness in technological advancement could inhibit and delay major operations to save lives in primary health care services. Technology could help to seek advices from other advanced and experienced clinicians in hospitals – a potential threat to emergency care services. The next discussion deals with shortage of staff as it relates to departmental challenges in the promotion of basic health care services.

The finding from participants shows that 47 identified shortage of staff as a challenge for the promotion of basic health care services. The shortage of staff appears to be demotivating health professionals because of the practice having limitation of scope. For instance, the following responses reflect the opinions of participants:

Participant 2: replied that *the shortage of staff in clinics is a problem.*

Participant 5: replied that *we cannot be expected to do our problem properly with this severe shortage of staff.*

Participant 8: replied that *all of us, managers, report about shortage of staff but nothing is happening. Nurses perform more tasks than required.*

The finding resonates with literature based on the study conduct by various scholars. The notion of shortage of staff is echoed by the study conducted by (Baloyi, 2011) that discovered that lack of human resources inhibited policy implementation. In the same study the challenge was exacerbated by the loss of Senior Nurse Managers in the said District (Baloyi, 2011). In this

regard, the non-filling of vacant Operational Managers' posts yields similar results of service delivery impediment.

The study conducted by Mokoena (2017) perceived shortage of staff as an obstacle for the provision of patient care that is of good quality. Oleribe, Momoh, Uzochukwu, Mbofana, Adebisi, Barbera, Williams and Taylor-Robinson (2019) in the study conducted in Africa, identified inadequate human resources as a challenge.

The study by Mangundu, *et al.*, (2020) found that 60% of Nurses and 44.94% of healthcare users perceived a shortage of Nurses as a challenge. This is supported by the fact that 60% of the Nurses in the study conducted by Mangundu, *et al.*, (2020) indicated that there were experiencing a work overload at the health facilities and this led to long waiting time. Some factors like increased workload, shortage of staff and staff turnover emerge as interconnected challenges to the promotion of basic health care services. The next discussion deals with poor infrastructure development as a departmental challenge.

Moving on from the discussion on shortage of staff, the study proceeds to discuss about poor infrastructure. The finding shows that 37 participants identified poor infrastructure development in clinics as inhibiting basic health care services. The finding shows a challenging condition of infrastructure development related to the clinic facility and staff accommodation. Infrastructure development and staff accommodation seem to threaten patient and employee safety and these factors are important for the improvement of better working conditions. Some responses were precise on the challenge of infrastructure development and staff accommodation having a negative effect on the promotion of basic health care services. For instance, participants responded to the questions as follows:

Participant 10: replied that *when health centres are built, there must be enough space for many patients and delivery of babies*

Participant 31: replied that *the clinic building must have strong walls that are not easy to crack*

Participant 40: replied that *the clinic has to accommodate disability patients and always renovated on time*

The finding is in agreement with the literature. The finding shows alignment with the literature view that asserts that the development of suitable infrastructure can be one of the factors that

could improve morale (Willis-Shattuck *et al*, 2008). Part of the challenges facing infrastructure development is the lack or insufficient funding to cater for this demand. Economic condition in the country affects government financial capability and appropriation to votes. The next discussion deals with the shortage of budget as a challenge facing the department in the promotion of basic health care services.

Flowing from the discussion on infrastructure development and staff accommodation; the discussion deals with the shortage of budget in the department. The issue of budget allocation deals with the ability to procure and generally resource departmental operational and capital programmes. The finding shows 44 participants indicated shortage of budget as a barrier to promotion of basic health care services. The shortage of budget leads to shortage of staff, high vacancy rate and delay in the procurement of goods and services challenge the department to promote basic health care services. For instance, participants responded as follows:

Participant 11: replied that *in many meetings we are told that government does not have money to recruit new staff and buy equipment.*

Participant 23: replied *that departmental challenges need money to be solved.*

Participant 24: replied that *shortage of budget affects clinics badly while communities put us under pressure.*

The shortage of budget or financial constraint can be challenge related to the shortage of budget, delay in procurement and may lead to other major setbacks in the department such as provision of quality services and patient care. The finding from participants which serves as research findings are supported by literature review. The next departmental challenge deals with the lack of training and development of staff.

Flowing from the shortage of budget, the study identified lack of training and development of staff as another hindrance in the promotion of basic health care services. The finding shows that 47 participants identified lack of training and development as a challenge for the promotion of basic health care services.

Participant 1: replied that *Nursing Colleges are no longer training many nurses.*

Participant 4: replied that *the department trains only few health professionals in a year.*

Participant 6: replied that *the lack of training and development in the department negatively affect the departmental plan to improve health care services.*

The study finding resonates with the literature review. Mangundu, Roets and van Rensberg (2020) stressed the vitality of ensuring that people living in rural areas have access to health workers who are well trained. In that regard, recruitment of personnel without proper training may retard organisational objectives. Management of diseases, improvement of health indicators and job promotion or career advancement are some of the challenging factors as employees lack training and development to improve knowledge and skills for the promotion of basic health care.

4.3.3. Strategies to address challenges faced by the department in the promoting basic health care

Participants were asked this question: *“In your view, what are the strategies that can be applied to address challenges faced by the Department in the promotion of basic health care services?”*

The question asked participants to recommend the strategies that can be applied to address challenges faced by the Department in the promotion of basic health care services. 46 participants responded positively to the question thereby demonstrating the clear understanding of the phenomenon being studied. Only 4 participants did not respond properly to the question. Participants highlighted strategies such as organisational systems, allocation of adequate budget, filling of vacant posts, effective communication system, training and development, procurement of equipment, employee involvement and infrastructure and staff accommodation. The strategies are each elucidated as indicated below:

Participants identified the need to develop progressive organisational systems as a strategy to address challenges faced by the department. The finding indicates that 43 of the participants proposed that organisational systems needed to be improved to encourage workers. For instance, the responses of participants are reported in verbatim as follows:

Participant 13: replied that *the management of clinics must be clearly separated from hospitals because hospitals have their own activities.*

Participant 19: replied that *policies must be reviewed to talk to one another and must be funded.*

Participant 34: replied that *government should improve its policies and system of communication to respond to both workers and patients.*

Participants' finding augments the literature review on the centrality of policies and systems in motivating employees. According to Montana and Charnov (1993), an organizational structure should be practical and adaptable to particular environment supporting a system necessary for organisational success. Accordingly, the reporting line of clinics to hospitals contrary to the District Office needed to be adjusted. The response resonated with the view of employee involvement as that could be addressed through communication and consultation processes.

Organisational structures and processes influenced the level of employee motivation in the health system as they received feedback about their performance from colleagues and supervisors (Bennett & Franco, 1999). Participants viewed performance management system as having finding and training opportunities after periodic performance assessment. Employees got motivated by positive feedback for excellent performance while they improved performance based on negative feedback as they would be taken through training and development programmes.

The study indicated the need to integrate policies in order to harmonise the working environment. The departmental policies like Recruitment and Retention, Delegation of Responsibility, Overtime Management, Performance Management and Development Systems, Grievance Management, Training of Health Professionals Policies and 24 hours Policies were supposed to eliminate conflicts at operational level in order to enhance employee motivation. The sense of being motivated by the healing of patients and positive feedback supports the proposition by Herzberg's Motivator – Hygiene theory that some employees get motivated by performing the job itself. In that regard, the task performance and feedback create fulfilment.

The finding from participants shows that non-availability of internet access at clinics made it difficult for clinics to report cases and delayed departmental communication. Internet and communication policy, human resources policies on training and development, performance management, recruitment and retention, leave management and housing played a vital in the motivation of employees. Organisational policies and systems should be developed with intention of attracting and motivating employees. The next strategy deals with allocation of adequate budget to address departmental challenges.

After discussing the organisational systems, the study deals with an improved budget allocation. Participants, 43, proposed for an improved budget allocation to the Department of

Health in order to promote basic health care services. The finding from participants shows what they said in verbatim:

Participant 5: replied that *the department should allocate budget to fill posts and procure equipment which we want.*

Participant 9: replied that *government must allocate budget for buying of good equipment we want for service delivery.*

Participant 43: replied that *the District must have budget to fix plumbing and water problems in clinics.*

The proposition is found to be supported by literature review which viewed financial resources as hindrance to promotion of basic health care services. According to (Arensman et al., 2012) cited by Nolan et al., (2014) the curtailing of budget expenditure to public health care in Ireland was attributed to economic crisis. The case study goes further to show that some patients committed suicide due to lack of access to health care service. The study opined that curtailing health expenditure could not be sustained as the demand for health care services was on the rise. The lack of adequate funding can negatively affect the procurement of laboratory equipment (Nolan et al., 2014). The issue of organisational system of delegation for the procurement of equipment would be achieved by the availability of budget. There could be substantive reason to delegate powers of procurement when the finances were lacking. The challenges of plumbing and water were matters that related to working conditions. The proposition suggested that budget allocation enhanced organisational capacity to respond to improve the working condition by fixing sewage leakages (plumbing) and water shortage in clinics. The next strategy deals with the filling of vacant posts.

Flowing from the discussion on improved budget allocation follows the filling of vacant posts. The filling of vacant of posts needs funding to be improved. The participants, 45, identified the filling of vacant posts as a mechanism that can resolve some of the challenges faced by the department in the promotion of basic health care services. Communities faced serious burden of diseases that necessitate the operation of health services for 24 hours. In order to be assisted, community members consulted in their numbers and this often leads to long patients' queues and long patient waiting time. The appointment of competent staff in health facilities would assist to render services and relieve workload pressure from nurses. Some of the responses of the participants were as cited below:

Participant 1: replied that *department must appoint people to reduce the workload on health professionals.*

Participant 26: replied that *people who have qualifications, knowledge and experience must be appointed as managers.*

Participant 41: replied that *officials in different ranks from Cleaners until managers must be appointed.*

In order to counter the negative impact of staff turnover, appointment of staff stabilise the promotion of basic health care services. The other interesting point could be related to timeous appointment of staff on vacated posts as that would be based on the saving from attritions. The filling of vacated posts would obviate the eventual workload which increase staff turnover.

Health professionals work according to scope of practice which sets out limits of functions to be performed. As per the alluded above, the high vacancy rate may cause some health professionals to perform tasks above their scope of practice which factor may lead to mismanagement of patients and subsequently litigations. The filling of vacant posts helps to reduce grounds of litigations and disciplinary proceedings that were costly. The response resonates with the improvement of working conditions. The question of cleanliness can be resolved by appointment of cleaners in clinics.

The participants' finding resonates with the issue of having employees acting on higher posts for too long and the lack of career advancement. The filling of posts within the reasonable period allowed for knowledgeable and experienced managers to be appointed. The executive authority enjoyed powers to appoint officials on acting capacity on permanent basis provided they met minimum requirement and had achieved satisfactory performance in the performance cycle. The proposition could close the gap of vacancy rate and career advancement for employees acting on higher posts. The next strategy deals with effective communication and information system.

After dealing with the filling of posts, the study deals with effective communication and information system. This serves to improve sharing of information and improvement of communication with employees. The participants, 38, proposed that the department develop effective communication and information system. For instance, some responses from participants are reflected underneath:

Participant 4: replied that *management must listen because we also want to tell them what we want in order to improve service delivery. We must choose the type of equipment that we know.*

Participant 9: replied that *management must talk to people about new policies and protocols about management of patients.*

Participant 46: replied that *health professionals should have access to departmental emails for quick communication.*

It resonates with the need for management to communicate with and inform all employees beyond union mechanism because not all of them were unionised. The necessity for communication could supplement the idea of employee involvement in decision making while at same time improving management support to subordinates. The ability to communicate with employees assisted in clarifying departmental vision and roles. It was interesting to find that clinics did not enjoy the broadband infrastructure that could make health professionals to have access to the internet for information system.

Whereas support staff had departmental emails, health professionals did not. Interestingly, the department's commitment to that could be measured by the leadership quality and management style. Therefore, the point resonates with the strategies to motivate employees. The next factor deals with training and development.

After dealing with improved information and communication system, the study proceeds to deal with training and development. Participants, 48, identified training and development of staff as motivation factor with overwhelming support. The study cited some of the responses recorded in verbatim below:

Participant 3: replied that *training improved chances of patient care and reduce chances of being sued.*

Participant 7: replied that *people want promotion at work.*

Participant 31: replied that *training of many health professionals developed their skills about many disciplines of care and diseases.*

It is established from the finding from participants and the literature review that training and development are critical pillars of employee motivation as they laid the basis for appropriate and improved management of diseases. Besides that, training and development lay the

foundation for career advancement and promotion to higher posts with higher salary. Staff development improved employee knowledge and skills to perform expected task in a better way (Bennett & Franco, 1999). Accordingly, organisations have a duty to improve organisational effectiveness and efficiency by means of motivating employees with knowledge and skills.

Thi Hoai Thu et al., (2015) extended this required motivation factor to be an effective training and development programmes. Their study concluded that it should be effective training and development when the course content links local conditions for health professionals to apply. As such effective staff training and development should respond to the real conditions as they relate to burden of disease. It is concluded that training methods of health professionals should combine elements of improving competencies, motivation and performance (Thi Hoai Thu et al., 2015).

Training and development of employee helps to perform demanding duties and further achieve personal desire to advance in a career (Willis-Shattuck et al, 2008). It is found that the knowledge and skills acquired bolstered the opportunity to grow in career. The translation in rank of health professionals caused sufficient reason to stir wilful performance. Besides prospects of promotion, it emboldened the confidence of workers to manage different and difficult diseases. In that regard, both an individual employee and organisation enjoy mutual benefit of career advancement and achievement of institutional objectives respectively.

In that context, effective training and development courses should take into account the burden of diseases, methods of training and training needs so as to ensure responsiveness to real problems. The development of staff helps to improve skills necessary to be productive at work. Skilled and knowledgeable employees have the potential to be retained and promoted to higher positions. Continuous professional development, study leave and bursary were vital to improve relevant clinical capacity of health professionals to respond and deal with concrete health care services.

It is critical for organisations to not only rely on skills audit form for training, instead continue to scrutinise skills needs that would respond to health care service package provided by such facilities. So, clinics that do not provide 24 hours services should not train its health professionals on Advanced Midwifery because the department would not benefit from that skill in the facility. In the banking sector Güllü (2016) explored the causal relationship between

training and development, and employee motivation. The study concluded that training and development programmes motivated employees to accomplish higher performance levels.

Therefore, good training and development programmes have the capacity to improve employee motivation, (Güllü, 2016). It was therefore critical to sustain the relevance and significance of training and development programmes in enhancing the employees' on-job knowledge and skills necessary for goal attainment.

It resonated with the appointment of staff and career advancement because junior officials would be promoted while critical posts at production level would be filled with competent workforce. The next strategy deals with the procurement of equipment which culminates from the staff being appointed and trained. The next discussion deals with the procurement of equipment.

After discussing training and development of staff, the discussion delves into the subject of procurement of equipment. The well trained and developed staff needs equipment to demonstrate their skill. In terms of procurement of equipment, 44 of participants proposed for the procurement of equipment that were necessary for health professionals to render services.

Participant 18: replied that *there is need for management to give us the equipment needed and then expect the job to be done.*

Participant 31: replied that *we need BP machines in our facility.*

Participant 47: replied that *we must own our own equipment in our clinics because it takes time to help when we ask from hospitals and other clinics.*

The finding indicates that the supply of working equipment motivated employees. The long queues in clinics together with the unavailability of equipment did not motivate health professionals to promote basic health care services. Health professionals get motivated when they managed patients and administered the necessary procedures with correct equipment like BP machines which were basic equipment. The lending of equipment from other clinics could compromise the durability of items or equipment.

It was interesting that literature review identified working equipment as elementary in employee motivation. Organisations needed to provide necessary working equipment and efficient systems for employees to perform their tasks (Bennett & Franco, 1999). It motivates

employees to have appropriate equipment that were efficient or even advanced to enable them to respond patients' needs. Employees with equipment that were efficient, reliable, appropriate and responding to their task need to derive an inspiration to perform organisational tasks. The point suggests that a nurse with appropriate equipment finds it motivating to carry out tasks.

Linked to management support, it invites organisational management to strategies on budget allocation for procurement of equipment. Willing employees with equipment or working tools may enjoy and perform tasks for improved provision of basic health care services.

The provision of equipment should be about supplying advanced technologies that were efficient and convenient. Although advanced equipment needed to be followed by training on user manual, it was a necessity as it augmented shortage of staff to deal with the burden of diseases. The study found that employees got frustrated with dysfunctional equipment while others were out-dated.

The next discussion deals with employee involvement having the capacity to contribute to addressing departmental challenges in the promotion of basic health care.

In terms of employee involvement, 44 of the participants indicated that their participation in critical decision making remained important in motivating them. For instance, participants show an interest in involvement as reflected by responses by participants:

Participant 6: said that *management should engage when decisions and policies are taken so that we can support what we know. We will also talk to our members to support the initiatives and be clarified during implementation.*

Participant 23: responded that *we do not want an observer status because it is useless. We want to have a say on policy development to protect our rights as workers*

Participant 49: responded that *management must engage workers and unions so that our experiences and choices can be taken serious by top.*

The finding from participants was backed by literature review in confirming the necessity of employee involvement in decision making. The study concluded that employee motivation had correlation with job involvement (Dahie et al, 2015). It was found that employees did not only respect cash reward system, instead the extent of their involvement satisfied them to perform tasks.

The management capacity to engage employees make them feel proud to be heard and therefore put effort in their work (Kumar & Kumar, 2013). According to (Dobre, 2013), the involvement of employees increased their productivity and loyalty which were cornerstones for staff retention and organisational success. The study concluded that employee participation and empowerment improved belongingness and loyalty of service.

The proposition means that employees that are clarified about policy intentions can help to clarify others in the event that there are disputes and misinterpretation. The striking issue is the commitment to clarify to individual union membership and general mass. The proposition resonated with the desire for improved communication system allowing for sharing information. A clarified communication system with union leaders and workers in general would cause management decisions to cascade.

The study goes further to propose that employee participation and empowerment increase motivation and loyalty to an institution. As noted above, the proposition provides that employers should create platforms through which employees participate in decision-making including those outside organised labour. The next strategy deals with infrastructure and staff accommodation.

After dealing with employee involvement, the study highlights the participants' view on infrastructure development and staff accommodation. The finding showed that 42 of participants being motivated by the quality of infrastructure development and staff accommodation. For instance, participants responded on the topic in verbatim below:

Participant 10: replied that *staff accommodation must be fumigated and repaired to lock*

Participant 17: replied that *pharmacy must be designed to allow space and little light to protect medicine against the sun*

Participant 20: replied that *our clinic has doors and windows which are damaged without being fixed.*

The development of suitable infrastructure could be one of the factors that could improve morale (Willis-Shattuck et al, 2008). The design and quality of infrastructure have the capacity to attract talented workforce and provide safer work environment. Organisations have a duty to design their infrastructure in a way that can attract people living with disability. Some

talented people living with disability may find it difficult to perform tasks where access to infrastructure and related equipment remained difficult.

The infrastructural development and staff accommodation could be linked with the creation of a better working condition that would follow. The safety of employees could not be separated from the better working conditions. As such spacious and well developed infrastructure made the environment conducive for promotion of basic health care services with due regard for the dignity of patients or clients.

Health professionals who worked in disadvantaged communities could be comfortable if accommodation was provided (Aduo-Adjei, 2016). In that regard, the provision of 24 hour services could be rendered safely and efficiently. Although infrastructure development and staff accommodation could be expensive, it could be a necessary initiative for employee motivation enhancing the promotion of basic health care services.

It is found that the issue of occupational health and safety for health professionals is inadequately fathomed. The quality infrastructure created safe environment whereby environmental risk factors were eliminated while attracting skilled personnel from various societal strata. Continuous risk assessment of buildings and certification for habitation motivate employees and these are necessary instruments in providing employees with safe environment. In the department, clinic facilities should be spacious and safe to allow clinical procedures that did not compromise the safety and secrecy of patients.

4.3.4. Strategies that motivate employees

The majority, 50, of participants were able to respond positively to the question. The overwhelming understanding of participants shows the extent of employees' knowledge of departmental policies on employee motivation factors. Participants were able to describe strategies which motivate employees such as salary increase, performance incentive, infrastructure development and staff accommodation, training and development, career advancement or job promotion, employee involvement and effective management support

The finding indicates that 44 of participants identified salary increase as a motivation factor. For instance, salary increase is identified by participants as reflected below:

Participant 19: replied that *I plead with the department to honour the agreement of pay increase.*

Participant 24: replied that *government must increase salary.*

Participant 36: replied that *we ask government to put money aside for salary increase and pay before we go on strike.*

The finding was backed by literature review whereby Jones and George (2016) observed that pay increases a factor of motivation. They posited that it could be based on the approach of performance level and cost of living adjustment. Jones and George continued to support the notion of employee stock option where employees buy shares in organisations under particular period and conditions. The next discussion deals with performance incentives.

After discussing the salary and compensation, the discussion deals with performance incentive. Considering the fact, it was interesting that public servants were not paid the 2020 pay increase. The finding was found to be resonating with the challenge of lack of budget for procurement various resources and appointment of staff.

The finding shows that 47 participants supported performance incentive as the most enticing factor that motivated employees. For instance, participants' opinions on the subject matter are reflected as follows:

Participant 1: said that *the payment of performance incentives is very encouraging.*

Participant 3: said that *performance bonus and pay progression make us happy and performing.*

Participant 10: replied that *performance incentive make us treat patients with care.*

The participants confirmed that performance rewards which dealt with incentives such as salaries, bonuses and promotions were vital in the inspiration of employees to perform tasks (Bennett & Franco, 1999). It was found that employees regarded high salaries and fringe benefits instrumental for employee motivation (Akinola & Akinbobola, 2014)

Reward strategy in organisations triggered positive individual contribution to the achievement of organisational goals (Armstrong, 2010). Luoma (2006) concluded on the significance of organisations providing rewards to employees who exceeded the performance outcomes set in health sector. The argument held that performance rewards were linked to hygiene factors as advocated by Herzberg. It suggested that employees have to perform in excess of targets in

order to be paid a performance rewards. Accordingly, the assertion by (Eichler et al., 2001) cited in Luoma (2006), that performance incentive system be paid to employees at all level helped to enhance and sustain good performance. The next strategy deals with better working environment.

After dealing with performance incentive, the study proceeds to bettering the working environment. The strategy of better working environment is identified as a motivation factor. The finding shows that 40 of the participants viewed better working conditions as critical factor driving wilful performance of tasks. For instance, the responses from participants are cited below in verbatim:

Participant 14: replied that *the water quality and cleanliness of the clinic surely has been good for us health professionals.*

Participant 25: replied that *I have enjoyed the safety in this rural community because security guys are strict that no one can come in to do any harm.*

Participant 36: replied that *the rooster that allows for flexibility of working hours and rest.*

The working environment and subsequently the job itself enjoyed positive finding and further supported by scholarly contribution to the field of study. That was in line with Muthuri et al (2020) who concluded that work environment remained important intangible motivation factor among health care workers.

The availability of water, electricity, sanitation and occupational health and safety measures influenced staff motivation to be retained or turnover. The context of Covid-19 clearly supported the proposition. It was for similar reason that rural and urban did not motivate health professionals the same way (Muthuri et al, 2020). The desire to perform 24 hour service and provide risky clinical care to patients suffering from Covid-19 pandemic and improved working conditions could motivate employees.

The poor working environment demotivated health professionals to an extent of health professionals terminating service, leaving for private sector (sector switch) or migration (brain drainage) to foreign countries. Sector switcher occurs when employees move from employment of private to that of public sector or vice versa (do Monte, 2017). The next strategy deals with infrastructure development and staff accommodation.

The finding shows that 46 participants identified infrastructure and staff accommodation. Participants have their responses captured in verbatim below:

Participant 12: replied that *primary health care nurses who come from far must have staff accommodation where we can stay with our families. Rural rental houses are below standard and we are ill-treated*

Participant 38: responded that *it is encouraging to stay in an equipped nurse's home*

Participant 41: responded that *a safe and beautiful clinic with a good yard is awesome for nurses.*

Health professionals were encouraged to, willingly, work in disadvantaged communities if decent accommodation could be provided (Aduo-Adjei, 2016). The nature of settlement in rural areas inhibited health professionals from performing 24 hours from their homes for fear and inefficiency.

It was found that infrastructure was good for occupational health and safety of health professionals. The quality infrastructure created safe environment whereby environmental risk factors were eliminated while attracting skilled personnel from different places. For that reason, continuous risk assessment of buildings and certification for habitation would be important to motivate employees. In the department, clinic facilities should be spacious and safe to allow clinical procedures that did not compromise the employee safety and secrecy of patients. The next study deals with training and development of staff.

Building on the infrastructure development and staff accommodation, the study extends to deal with training and development of staff as a motivation factor. The finding indicates that 46 of the participants view training and development of health professionals as the second most prioritised motivation strategy. The study captures some of the responses by participants in verbatim below:

Participant 1: replied that *training and development make us grow in the profession.*

Participant 2: replied that *training and development of nurses helps to translate and promote employees.*

Participant 4: replied that *going to nursing school improves knowledge and skills about procedures to care for our patients.*

It was established from the finding from participants and the literature review that training and development are critical pillars of employee motivation as they laid the basis for appropriate and improved management of diseases. Besides that, training and development laid the foundation for career advancement and promotion to higher posts with higher salary. Staff development improved employee knowledge and skills to perform expected task in a better way (Bennett & Franco, 1999). Accordingly, organisations had a duty to improve organisational effectiveness and efficiency by means of motivating employees with knowledge and skills.

In order for employees to be motivated by the job itself, organisations continuously train and develop their workforce to cope with the complex demand for basic health services.

Thi Hoai Thu *et al.*, (2015) extended the required motivation factor to be what was referred to as effective training and development programmes. Their study concluded that it should be effective training and development when the course content linked local conditions for health professionals to apply. As such effective staff training and development should respond to the real conditions as they related to burden of disease. It was concluded that training methods of health professionals should combine elements of improving competencies, motivation and performance (Thi Hoai Thu *et al.*, 2015).

Training and development of employee helped to perform demanding duties and further achieve personal desire to advance in a career (Willis-Shattuck *et al.*, 2008). It was found that the knowledge and skills acquired bolstered the opportunity to grow in career. The translation in rank of health professionals caused sufficient reason to stir wilful performance. Besides prospects of promotion, it emboldened the confidence of workers to manage different and difficult diseases. In that regard, both an individual employee and organisation enjoy mutual benefit of career advancement and achievement of institutional objectives respectively.

In that context, effective training and development courses should take into account the burden of diseases, methods of training and training needs so as to ensure responsiveness to real problems. The development of staff helps to improve skills necessary to be productive at work. Skilled and knowledgeable employees have the potential to be retained and promoted to higher positions. Continuous professional development, study leave and bursary were vital to improve

relevant clinical capacity of health professionals to respond and deal with concrete health care services.

It would be critical for organisations to not only rely on skills audit form for training, instead continue to scrutinise skills needs that would respond to health care service package provided by such facilities. So, clinics that did not provide 24 hour services should not train its health professionals on Advanced Midwifery because the department would not benefit from that skill in the facility. In the banking sector, (Güllü, 2016) concluded on the causal relationship between training and development, and employee motivation.

The study concluded that training and development programmes motivated employees to accomplish higher performance levels. Therefore, good training and development programmes have the capacity to improve employee motivation; (Güllü, 2016). It was therefore critical to sustain the relevance and significance of training and development programmes in enhancing the employees' on-job knowledge and skills necessary for goal attainment. The next strategy deals with career advancement or job promotion.

The finding on career advancement revealed that 45 of the participants proposed for career advancement in the department. The prospects and reality of career advancement or job promotion are viewed as vital for stirring workers' efforts for organisational success. The desire to grow to the higher levels of responsibilities and improved income enjoy support from participants as indicated by the verbatim responses cited below:

Participant 9: replied that *people acting on higher posts can get appointed permanently on the posts, workers perform with energy.*

Participant 15: replied that *promotional posts must be filled by people who know the department and their job.*

Participant 22: replied that *committed and skilled people inside the department must grow and manage us, not friends.*

The finding from participants and literature concurred on career advancement or job promotion as drivers of employee motivation. Employees acting on higher posts, and junior workforce willing to be trained and developed had ambitions of growth. According to Sheridan et al., (1997) cited in (Ukandu & Ukpere, 2011) promotions provided employees with financial and

emotional reinforcement for employees and further determined promotion of individuals through performance of tasks. The capacity of employees to perform a task could give them an opportunity for job promotion. Promotional posts would normally increase salary earnings and improved employees' financial capabilities.

Career advancement or job promotion could be perceived as the by-product of effective training and development programmes. Job promotion or career advancement encouraged individuals and organisations to develop human capabilities of their workforce for future application (Akinola & Akinbobola, 2014). Organisations that invested in training and development programmes related to their sectors had prospects of sustaining good organisational culture entrenched in organisational performance. Following on the work of Akinola and Akinbobola (2014), it therefore sufficed to create the linkage between competent workforce and prospects of career growth.

Based on the conclusion of Akinola and Akinbobola (2014), the support for training and development programmes by participants could be attributable to the desire for career growth and thorough provision of basic health care services. Most reasonably, employees got to be motivated when they had the potential to develop and grow in their career. A chance to be promoted may retain employees and cause them to put efforts to perform tasks. Employees with potential growth want to prove their worth and value to employers. Organisations with succession planning turn out to promote productive organisational citizenship which has roots in the loyalty and sustenance of organisational culture of performance.

Employees who did not see their future in an organisation could tend to put less effort. The latter could be helpful in providing opportunity for career advancement to employees appointed to act on higher posts for appointment on permanent basis. Appointment of new entrants on permanent post through open recruitment and transfers while losing experienced employees may create organisational instability. So training and development programmes should be linked with succession planning to avoid developing for other employers.

Management should be deliberate in helping organisations to develop coaching and/or mentorship strategies to enhance sharing of knowledge, and relationships between experienced and junior (non-experienced) employees (Kumar & Kumar, 2013). The availability and proximity of senior health professionals to junior ones, during operations of basic health care services, promoted motivation due to diligent work performance.

The next strategy deals with employee involvement.

Following career advancement, the study proceeds to employee involvement. Employee involvement came out of the finding with 44 participants supporting it. From participants' opinions, it was clear that employee involvement was critical in inspiring higher levels of commitment and effort driven by wilfulness. For instance, participants reflect their responses in verbatim below:

Participant 4: said that *management does not engage us when making decisions like policy and type of equipment to buy. They neither communicate nor listen to employees who do not have unions.*

Participant 18: responded that *head office just developed policies without talking to us.*

Participant 35: responded that *managers did not share their vision with us. They just want to punish without listening to our challenges.*

The finding from participants is backed by literature review in confirming the necessity of employee involvement in decision making. The study concluded that employee motivation had correlation with job involvement (Dahie et al, 2015). It was found that employees did not only respect cash reward system, but also the extent of their involvement satisfied them to perform tasks.

The management capacity to engage employees make them feel proud to be heard and therefore put effort in their work (Kumar & Kumar, 2013). According to (Dobre, 2013), the involvement of employees increased their productivity and loyalty which were cornerstones for staff retention and organisational success. The attitude of engagement among social partners remained a vehicle for finding and buy-in on matters of common interest. The study concluded that employee participation and empowerment improved belongingness and loyalty of service.

The study went further to propose that employee participation and empowerment increase motivation and loyalty to an institution. The proposition provided that employers should create platforms through which employees participate in decision-making including those outside organised labour. The measure enabled employees to influence the strategic direction of an organisation. The next factor deals with effective management support.

Following the study on employee involvement, it now proceeds to effective management support as a motivation factor. The study reveals that 44 participants are motivated by effective management support. For instance, participants made their opinions clear as cited below:

Participant 16 replied that *we can be motivated if managers begin to give support to junior staff in order to excel in their jobs*

Participant 39 replied that *we need managers who mentor employees and provide working tools to perform their tasks*

Participant 44 replied that *to have management that support workers, listen to them and develop them to be better workers*

Organisations with management leadership which had credibility imbued employee commitment to the implementation of a vision (Bennett & Franco, 1999). Participants supported by literature review concurred that supervisees relied on the experience and guidance of managers to impart knowledge about organisational vision and culture. So, the management commitment to subordinates was motivating. As such, managers had a duty to be aware of their role to develop a culture of support supervision that considered challenges faced by employees and fair treatment on matters of training and development, career advancement, level of involvement and performance assessment (Mathauer & Imhoff, 2006).

Management should learn to relate with subordinates and appreciate the uniqueness of employees' competencies and experiences. Employee empowerment was an interesting concept in human resources management that had two tasks of unleashing individual capabilities and delegation of powers. Employee empowerment implies the process of releasing the potential of employees and allocation of powers to make decision and account, (Brown, 2014). Employees empowerment serves to make assessment of individual capabilities before determining the nature of tasks and powers an individual employee can be delegated. It simply means aligning individual competency with human resources management delegations so as to avoid misappropriation and irregularities.

The study found that leaders without credibility found it challenging to imbue employee commitment to the implementation of a vision (Benett & Franco, 1999).

Management availability remained important for the motivation of employees to carry out tasks. Management which avails itself for junior employees would be able to identify

challenges on the spot and also respond to the operational inconveniences experienced and reported by employees. Some employees need psychosocial support that can only be understood by management in close proximity. The question of emotional intelligence and quality of life become pivotal for management to understand employees' circumstances and uniqueness.

Improved management support to employees involves equipping and imparting knowledge and skills to employees. For management to be available when it lacks technical capabilities to resolve problems associated with health conditions of community members. Notwithstanding the necessity to have management at the higher echelon of the organisation, its value can be measured by the impact it has on health professionals at operational level. The next strategy deals with employee compensation and salary increase.

The finding from participants shows that 48 of them identify compensation and salary increase as a motivation factor. For instance hereunder are some of the responses by participants:

Participant 2 that *the department must pay our salaries and annual increases on time*

Participant 3 that *pay and other benefits play an important role in motivating us*

Participant 6 that *we need a good compensation and implementation of salary increase by government to keep us in the department for patients to get good service*

Feraro-Banta and Shaikh (2017) assert that when employees receive higher compensation and benefits, they become happier at their workplace and this leads to employees satisfaction and work environment that is successful. Feraro-Banta and Shaikh (2017) went further to recommend that compensation policies that are transparent must be adequately implemented to leverage compensation.

Following career advancement or job promotion, the study proceeds to deal with employee involvement. The finding from participants shows that 44 of employees view employee involvement as a motivation factor. For instance, the verbatim account of participants' finding is shown below:

Participant 13 replied that *managers should involve us as trade unions when new strategies are developed for understanding and buy-in*

Participant 16 replied that *employers must have mass meeting with employees to discuss policies and plans*

Participant 18 replied that *all of us need to be involved in giving information about our daily experiences and inputs to improve the health centre*

The finding from participants is backed by literature review in confirming the necessity of employee involvement in decision making. According to (Dahie et al, 2015), there is correlation between employee motivation and job involvement. It was found that employees did not only respect cash reward system, instead the extent of their involvement satisfied them to perform tasks.

The management capacity to engage employees make them feel proud to be heard and therefore put effort in their work (Kumar & Kumar, 2013). According to Dobre (2013), the involvement of employees increased their productivity and loyalty which were cornerstones for staff retention and organisational success. The study concluded that employee participation and empowerment improved commitment, belongingness and loyalty of service.

The measure enabled employees to influence the strategic direction of an organisation. The next discussion deals with the supply of working equipment.

Flowing from the discussion around the employee involvement, the study proceeds to discuss the supply of working equipment. The finding from participants shows that majority, 40, identify supply of working equipment as a motivation factor for employees.

Participant 18 replied that *managers should supply with equipment to perform*

Participant 30 replied that *we need to have all essential equipment to service our communities anytime they come*

Participant 32 replied that *having working BP machines and other working material make nurses to want to see patients*

Finding indicates that supply of working equipment motivated employees. The long queues in clinics together with the unavailability of equipment did not motivate health professionals to promote basic health care services. Health professionals get motivated when they manage patients and administer the necessary procedures with correct equipment.

It is interesting that literature review identified working equipment as elementary in employee motivation. Organisations needed to provide necessary working equipment and efficient systems for employees to perform their tasks (Bennett & Franco 1999). It motivates employees to have appropriate equipment that were efficient or even advanced to enable them to respond to patients' needs. Employees with equipment that were efficient, reliable, appropriate and responding to their task needs derive an inspiration to perform organisational tasks. The point suggests that a nurse with appropriate equipment finds it motivating to carry out tasks.

Linked to management support, it invites organisational management to strategise on budget allocation for procurement of equipment. Willing employees with equipment or working tools may enjoy and perform tasks for improved provision of basic health care services.

The provision of equipment should be about supplying advanced technologies that were efficient and convenient. Although advanced equipment needed to be followed by training on user manual, it was a necessity as it augmented shortage of staff to deal with the burden of diseases. The study found that employees got frustrated with dysfunctional equipment while others were out-dated.

Hygiene needs related to the physical and physiological context within which the job was performed. Hygiene needs dealt with salary, relationship with supervisors, job security and good working conditions. Herzberg proposed that hygiene needs influence satisfaction but did not influence high levels of performance. Herzberg proposed for motivator needs to be met in order to obtain satisfaction and motivation (Jones & George, 2016). Herzberg's Motivator-Hygiene Theory proposed that employees were influenced to perform by motivator needs, yet dissatisfied when hygiene needs were not met. The study established whether working environment or material benefits motivate employees to high levels of performance.

4.4 OVERVIEW/ SUMMARY OF RESEARCH FINDINGS

Generally, the findings of the research are as follows:

- The motivation strategies put in place by the department are known by the employees. Participants' ability to describe the departmental motivation strategies shows their knowledge and appreciation of their existence. The payment of performance incentive, training and development of staff, and infrastructure and staff accommodation are some dominant motivational factors known to employees.

- Besides the known motivation factors, participants are able to describe strategies that motivated them. Inter alia, participants describe performance incentive, training and development, better working condition, employee involvement, infrastructure development and staff accommodation, supply of equipment and effective management support as those motivation strategies capable of stirring voluntary effort for organisational success.
- The study deals with the departmental challenges constraining the promotion of basic health care services. Participants' opinions show the department challenges such as organisational systems or policies, financial or budgetary constraints, shortage of staff, infrastructural development, lack of staff training and development, and lack of equipment.
- The study is clearer on the measures needed to improve employee motivation. The study is able to identify payment of performance incentive, training and development of staff, employee involvement, supply of equipment, salary or compensation increase, career advancement or job promotion and effective management support.

4.5 CONCLUSION

The previous chapter focused on the discussion, presentation and interpretation of results of the study. The chapter dealt with the thematic presentation of research findings. The findings were interpreted to measure the gap and relationship between the findings and the existing literature on the similar topic. The next chapter provides the conclusions, remarks and recommendations of the study based on the lessons learnt.

CHAPTER 5

5.1 INTRODUCTION

The previous chapter dealt with presentation, interpretation and conclusion of the research findings. The chapter deals with the research design and methods applied by the researcher in conducting the research. It summarised the findings with due interpretation of what it actually meant in the context of the study. It could be raised upfront that both literature review and actual finding were presented to show concurrence. Areas of limitations were appreciated and presented in summary. The study ends with the recommendations for the department to consider.

5.2 RESEARCH DESIGN AND METHOD

The study applied a qualitative research approach with purposive random sampling as the research design. The nature of the topic and population influenced the choice for qualitative approach because participants had to explain their experience for the researcher to get an in-depth understanding of the phenomenon being studied. The research design and method influenced the choice of data collection by means of questionnaire and document analysis.

The study on the role of employee motivation in the promotion of basic health care services was conducted in the Department of Health, Mopani District in Greater Tzaneen Sub-district. It took place in 10 facilities spread across the 4 local whereas. About 10 managers and 5 shop stewards from the Sub-district participated in the study. The study applied purposive random sampling selecting a population size of about 50 participants. The participants were divided into three levels namely; 10 managers, 35 professional nurses and 5 shop stewards.

5.3 SUMMARY AND INTEPRETATION OF THE RESEARCH FINDINGS

5.3.1 Key findings from literature review

Literature established the need for staff accommodation. Aduo-Adjei, Emmanuel, and Forster (2016) revealed that accommodation was pertinent for employees' performance of allocated tasks. Career advancement or job promotion came out as critical component of motivation strategies. Kumar and Kumar (2013) concluded that opportunities for employees to apply their skills and abilities at work raised levels of job satisfaction thereby improving job.

On the matter of enabling working environment, it was reckoned that the impact of workplace environment on health worker performance was great and enhanced the comprehensiveness and efficiency of health service delivery (Wyss, 2004: 1). On salary and remuneration, Wurie, Samai, and Witter (2016) revealed that the health workers viewed decent salary that was paid on time as having inspired workers as they afforded to provide for their families.

Reward and recognition was dealt with Luthans (2002:145) as cited in (Mavndizvidza, 2014) that organisations should not underestimate the role of cash in motivating employees.

According to Ozkeser (2019: 802) an activity which was vital in all organisations, was training because it determined the organisations effectiveness and efficiency. Orasa (2014) concluded that training and development opportunities were the most important motivation factor amongst Participants.

Daneshkohan, Zarei, Mansouri, Maajani, Ghasemi and Rezaeian (2015) revealed that supervisors' and managers' support, and good working relations with colleagues were reflected as motivating factors for health workers. In support of employee involvement on organisational programmes, it was concluded that employee participation and empowerment increase motivation and loyalty to an institution (Dombre, 2013).

Organisational systems or policies rose to the fore. Orasa (2014) recommended that healthcare workers should be informed and properly communicated to on matters on healthcare policy. That was a proactive measure to motivate and minimise conflicts due to target or standards (Orasa, 2014). It was found that motivation factors could be negatively affected by departmental challenges. Among other departmental challenges were factors such as lack of budget, shortage of staff, poor infrastructure development, poor communication and lack of tools of trade (Ganta, 2014).

5.3.2 Key findings from the participants

The finding indicates that 44 of participants identified salary increase as a motivation factor. The finding from participants showed that 47 of them supported performance incentive as the most enticing factor that motivated employees.

The finding shows that 40 of the participants viewed better working conditions as critical factor driving wilful performance of tasks. The finding shows that 41 of participants identified

infrastructure and staff accommodation. The finding indicates that 46 of the participants viewed training and development of health professionals as the second most prioritised motivation strategy.

Participants, 45, viewed prospects and reality of career advancement or job promotion as vital for stirring workers' efforts for organisational success. Employee involvement came out of the finding with 44 of the participants proposing it. From participants, it was clear that employee involvement was critical in inspiring higher levels of commitment and effort driven by wilfulness.

It is interesting to note that findings from the primary sources were backed by the secondary sources as elucidated on the above findings from the literature review.

5.4 CONCLUSION

Even with the distinctiveness of employees, it can be concluded that motivational factors like training and development, financial incentives, management support and career development were core contributors for wilful performance of tasks (Willis-Shattuck, 2008). They went further to consider other motivation factors like employee recognition and suitable infrastructural development as crucial to motivate health professionals.

It proved that employee motivation can be expensive for organisations in such moments when governments experienced weak economic growth. Either way, both hygiene and motivator factors become hard to fund because creating a condition for productivity without rewarding employees may hinder organisational performance. Therefore, it convinced that management should consider introduction of rewards for innovative employees so as to increase cost effective administrative strategies, (Akinola & Akinbobola, 2014). In that regard, innovativeness of employees would respond to the advancement in technological domain.

In the final analysis, Herzberg theory was well grounded and proved to be a reliable organisational instrument helpful to achieve both individual and organisational goals. It can be concluded that hygiene and motivator factors complemented each other.

5.6 CONTRIBUTION / ACHIEVEMENT OF THE STUDY OBJECTIVES

The study is significant in that, there is now a dynamic understanding of the concept of motivation, factors that influence it, and strategies to enhance employee motivation. Also, challenges faced by employees in the provision of basic healthcare services have been identified, documented and are understood. Additionally, strategies that can be formulated in order to address challenges faced by employees in the provision of basic health services have been identified and documented, and are understood.

The first study objective is to examine the current strategies put in place to promote employee motivation to promote basic health care service. The study was able to achieve this objective in that participants were able to describe a variety of motivation factors. The majority of participants know motivation strategies such as performance incentive, training and development, better working condition, effective management support and supply of equipment. Participants were able to describe motivation strategies that are recognised and appreciated by them as employees.

The second study objective deals with the identification of challenges faced by the department in the provision of basic health care services. The study achieved the objective as participants identified challenges that inhibit promotion of basic health care services. Inter alia, participants identified organisational policies and system, lack of training and development, shortage of staff, shortage of budget, poor infrastructure development and staff accommodation, and lack of equipment. It is at this objective that there is an appreciation of systemic failures which the department has to improve in order to enable its capacity to deliver services – basic health care.

The third study objective is to recommend strategies that can be applied to address challenges faced by the Department in the provision of basic health care services. The study was achieved because not only did participants identify challenges but went further to recommend strategies of organisational capacity to promote basic health care services. Participants recommended strategies around staffing, funding, progressive policies and systems, infrastructure development, and effective training and development of staff.

The fourth objective is to recommend strategies that can be applied to improve employee motivation for the provision of basic health care services. At the heart of the question is the desire shown by participants to highlight some key motivation factors that stir employees'

effort. It is evident from the above objectives that the role of employee motivation on promotion of basic health care service is a positive one. The achievement of organisational goals depends on the effort employees exert. In this regard, it is clear that employee effort is a function of employer investment on enticing its workforce. The study reveals that majority of participants have their finding corroborated by literature on the phenomenon.

5.7 LIMITATIONS OF THE STUDY

This study was conducted in one sub-district, which is Greater Tzaneen and thus, findings from the study can't be generalised for the entire Limpopo Department of Health. The study focused on the role of employee motivation in promoting the basic health service in the province of Limpopo, particularly, in the Public Health Sector. Therefore, it could have been interesting to extend the study to the Private Sector of the Limpopo Province. It is, therefore, recommended that future studies be conducted in other Districts in the Limpopo Department of Health, private sector and all other sectors.

5.8 CONCLUDING REMARKS

Given the complexity of employee motivation strategies as factors arising from without and within employees, government would find it difficult to sustain current strategies with the decline of economic growth rate and appropriation of funds. The departmental challenges would need to be dealt with through intergovernmental relations for purposes of infrastructure development and liaison work on improving the training and development capacity. It could be concluded that motivation strategies were costly in circumstances of both financial and non-financial incentives. The department needs budget to acquire the required working tools that are necessary for the improvement of conditions of services. The point was related to the lack of budget for recruitment of staff. In appreciation of uniqueness of employees, employers have a duty to implement a combination of motivation factors in the department. It remains pivotal to use the process of employee involvement to understand their priorities in order to ensure that management is responsive with its interventions.

5.9 STUDY RECOMMENDATIONS

Based on the study findings, the following recommendations are made:

5.9.1 Recommended strategies for addressing challenges faced by employees in the promotion of basic healthcare services.

- ✓ The LDoH should provide adequate and necessary working equipment and efficient systems which will enable employees to perform their duties / tasks more diligently.
- ✓ The availability of quality equipment of any type and supplies should be improved and continuously monitored.
- ✓ Human resources with the right competencies / skills and experience should be recruited so that the increased workloads for current employees can be decreased.
- ✓ There should be regular promotions within the LDoH and an introduction of fair reward system that will ensure that good performance is rewarded.
- ✓ Both National and Provincial Treasuries should increase budgetary allocations to the LDoH.
- ✓ Training and Development activities should be prioritised and training gaps that are identified should be discussed with the employees and as well as the proposed training interventions.

5.9.2 Recommended strategies for enhancing employees' motivation.

- ✓ There should be adequate management support, efficient and adequate encouragement and appreciation practices in the LDoH.
- ✓ There should be suitable infrastructure development for staff accommodation.
- ✓ Broken equipment should be fixed and new ones be procured, in-service training for the use of new equipment should be prioritised and continuously serviced in order to ensure that employees are comfortably using the equipment.
- ✓ Safe working environment should be ensured and all safety guidelines or protocols should be made available to respective employees.
- ✓ Platforms for employees' involvement should be created and encouraged.
- ✓ Job Rotation should be implemented in order to enhance employee motivation.
- ✓ Fair compensation according to the work that has been performed, should be provided.
- ✓ Financial and non-financial incentives for rewarding hard and smart working employees should be adopted by LDoH.
- ✓ Career path should be prioritised and employees should be aware of career opportunities available to them.

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Appendix C

INTERVIEW GUIDE USED IN THE STUDY

TOPIC: THE ROLE OF EMPLOYEE MOTIVATION IN PROMOTING BASIC HEALTH CARE SERVICE: A CASE STUDY OF DEPARTMENT OF HEALTH, GREATER TZANEEN SUBDISTRICT, LIMPOPO PROVINCE

SECTION A: DEMOGRAPHICS

1. AGE

25 – 30 years	
31 – 35 years	
36 – 45 years	
46 – 55 years	
56 years and above	

2. GENDER

Male	
Female	

3. YEARS OF EXPERIENCE

0 – 5 years	
6 – 10 years	
11 – 15 years	
16 – 20 years	
21 – 25 years	
26 years and above	

4. RANK

Professional Nurse		Manager		Shopsteward	
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5. EDUCATIONAL LEVEL

Matric	
Diploma	
Degree	
Honours Degree	
Master Degree	
PhD	

SECTION B: QUALITATIVE RESEARCH QUESTIONS

RESEARCH OBEJCTIVE 1: TO EXAMINE THE CURRENT STRATEGIES PUT IN PLACE TO PROMOTE EMPLOYEE MOTIVATION IN THE PROMOTION OF BASIC HEALTH CARE SERVICE

- i. In your opinion, describe the current strategies put in place to promote employee motivation in the promotion of basic health care services

- ii. In your opinion, which strategies motivate employees in the promotion of basic health care services?

RESEARCH OBEJCTIVE 2: TO IDENTIFY THE CHALLENGES FACED BY THE DEPARTMENT IN THE PROMOTION OF BASIC HEALTH CARE SERVICES

In your opinion, what do you think are the challenges faced by the Department in the promotion of basic health care services? Motivate your answer

RESEARCH OBEJCTIVE 3: TO RECOMMEND STRATEGIES THAT CAN BE APPLIED TO ADDRESS CHALLENGES FACED BY THE DEPARTMENT IN THE PROMOTION OF BASIC HEALTH CARE SERVICES, AND

In your view, what are the strategies that can be applied to address challenges faced by the Department in the promotion of basic health care services?

