



Original Article

The effects of team intimacy, job satisfaction, and resilience on dental hygienists' turnover intentions

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ABSTRACT

Objectives: This study aimed to analyze the relationships among team intimacy, job satisfaction, resilience, and turnover intention among dental hygienists. **Methods:** Data were collected between May 2 and July 30, 2025, from clinical dental hygienists, with a final sample of 190 individuals. **Results:** Factors influencing the turnover intention of dental hygienists were significantly related to subjective health status ('bad' and 'good'), work experience (9–17 years), age (≥ 40 years), and team intimacy, with an explanatory power of 35.5%. **Conclusions:** Dental hygienists should receive ongoing welfare programs and clinical training to develop their skills, strengthen workplace attachment, and enhance job competency. Active internal communication should also be promoted to foster emotional connections, mutual interest, and bonds among co-workers.

Key Words: Dental hygienists, Job satisfaction, Resilience, Team intimacy, Turnover intentions

Introduction

The diversification of dental clinic types and the expansion of medical institutions have led to intensified competition among hospitals. Simultaneously, advancements in the quality of dental healthcare services have resulted in dental hygienists being expected to assume a wide array of responsibilities, including oral health education, preventive care, health insurance processing, patient management, and inventory control [1]. Their roles have expanded beyond traditional oral care to include hospital system management and administrative functions [2,3]. Despite an enrollment capacity of 5,354 students in dental hygiene programs as of 2022 and a registered licensed dental hygienist workforce totaling 103,807, projections suggest a potential shortage of dental hygienists by 2040 [4].

In contrast to the finding that only 48.4% of dental hygienists licensed in 2022 were actively employed in their profession, dentists demonstrated a markedly higher employment rate of 83% [5]. The 2018 Comprehensive Plan for Healthcare Personnel and Mid-to Long-Term Supply and Demand Forecast Study, conducted by the Ministry of Health and Welfare [6], reported a turnover experience rate of 75.6% among dental hygienists, exceeding the overall turnover rate of 63.7% observed among all medical technicians. On average, dental hygienists changed jobs 2.47 times, with primary reasons for turnover identified as low salary, excessive workload, unfavorable working conditions, limited opportunities to utilize personal skills, and challenges related to organizational dynamics. These findings emphasize that occupational burnout significantly influences dental hygienists' intentions to leave their positions [1]. Moreover, research indicates a positive correlation between exposure to workplace violence from colleagues and increased turnover intentions among dental hygienists [7]. Collectively, these results underscore that workplace demands and the quality of the working environment are critical determinants contributing to the elevated turnover intentions within this professional group.

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Resilience is defined as the capacity to effectively regulate stress induced by various circumstances and to respond with adaptability [8,9]. It constitutes a crucial skill for managing significant stressors and overcoming challenges within the development of interpersonal relationships. Empirical research has identified a positive correlation between resilience and increased levels of organizational commitment among dental hygienists, as well as elevated scores in the personality traits of extraversion, agreeableness, and conscientiousness [9,10]. Consequently, the ability to manage stress and navigate difficult situations promotes the effective regulation of negative emotions experienced during professional tasks and interactions with colleagues, thereby enhancing problem-solving capabilities.

Job satisfaction is conceptualized as the positive sense of fulfillment that an individual derives from their cognitive and affective responses to their occupation, encompassing their job experiences and evaluations [10,11]. A dental hygienist is a licensed professional who, upon successful completion of the national examination, performs duties by applying specialized knowledge and practical skills. Previous studies have identified a positive correlation between job satisfaction and job competency [12], with higher levels of empathy being significantly associated with increased job satisfaction [13]. The emotional gratification obtained during job performance can enhance overall work effectiveness, and the ability to understand and empathize with the emotions of others, including patients and colleagues, constitutes a beneficial factor contributing to the job satisfaction of dental hygienists.

Team intimacy within a group represents a fundamental dimension of interpersonal relationships in organizational contexts, reflecting the extent of closeness or cohesion that team members endeavor to cultivate [14,15]. Previous research involving nursing professionals has revealed that team intimacy among nurses is significantly and positively correlated with nursing job performance [15]. Furthermore, studies have reported a significant negative association between team intimacy among newly employed nurses and the incidence of reality shock [16]. Considering that dental hygienists collaborate within a shared workspace during fixed hours, engage in continuous communication regarding their responsibilities, and require a thorough understanding of patients' treatment statuses, the degree of intimacy among workplace colleagues is considered a crucial factor in enhancing work efficiency.

Previous studies investigating turnover intentions among dental hygienists [1,7,17] have largely focused on factors such as role stress, job burnout, professional identity, job satisfaction, intention to remain, and experiences of workplace violence. These studies have primarily examined variables related to the specific roles and responsibilities of dental hygienists. However, there remains a significant gap in the literature regarding the combined effects of team cohesion, job satisfaction, resilience, and turnover intention. Promoting mutual cooperation among staff through enhanced team cohesion, implementing effective stress management strategies, and fostering a positive occupational attitude may help to mitigate turnover intentions within the dental hygiene workforce.

This study aims to investigate the interrelationships among team intimacy, job satisfaction, resilience, and turnover intention among dental hygienists. Furthermore, it seeks to explore the development of workplace relationships and the internal psychological factors critical to the effective performance of dental hygienists' duties. The findings are expected to provide foundational insights to improve the work environment and reduce turnover rates within this professional group.

Methods

1. Participants

This study was approved by the Institutional Review Board of the Daejeon Health University (IRB No. 1041490-20250425-HR-001). Data were collected via convenience sampling of dental hygienists employed at dental clinics and hospitals in the Chungcheong, Jeolla, and Gyeongsang regions between May 2 and July 30, 2025. After providing a comprehensive explanation of the study objectives and obtaining informed consent, participants completed self-administered questionnaires. The required sample size was calculated using G*power version 3.1.9.7, with an effect size of 0.15, a significance level of 0.05, statistical power of 0.95, and nine predictor variables (team intimacy, job satisfaction, resilience, turnover intention, age, work experience, number of job changes, type of

workplace, salary, and subjective health status). This analysis indicated a minimum sample size of 166 participants. Considering an anticipated attrition rate of 10%, the target sample size was set at 190 participants, all of whom were included in the final analysis.

2. Study instruments

The questionnaire consisted of 6 items addressing general characteristics, 12 items evaluating team intimacy, 20 items measuring job satisfaction, 10 items assessing resilience, and 6 items examining turnover intention. Team intimacy was assessed using a modified version of the Two-dimensional Workplace Friendship Scale originally developed by Nielsen et al. [18] and subsequently adapted for nursing professionals by Song and Jeon [16], with negatively worded items reverse-coded. The subdimensions of team intimacy included opportunities for intimacy formation and the expansion of intimacy. Job satisfaction was measured using the scale developed by Weiss et al. [19] and employed by Yoon et al. [20], encompassing subfactors such as achievement, comfort, status, altruism, security, and autonomy. Resilience was evaluated using the instrument developed by Connor and Davidson [21], further modified and supplemented by Kim and Park [22], and later adapted by Jang [23]. Turnover intention was measured through the scale developed by Mobley [24] and applied by Baek and Ji [1]. All items were rated on a 5-point Likert scale, with higher scores indicating greater levels of team intimacy, job satisfaction, resilience, and turnover intention. The reliability of the instruments, as indicated by Cronbach's alpha coefficients, was 0.935 for team intimacy, 0.944 for job satisfaction, 0.925 for resilience, and 0.925 for turnover intention <Table 1>.

3. Statistical analysis

Data analysis was conducted using IBM SPSS program (ver. 27.0; IBM Corp., Armonk, NY, USA), with statistical significance set at 0.05. Variable scores were calculated as arithmetic means. Differences in variables according to general characteristics were evaluated using independent t-tests and analysis of variance (ANOVA), followed by Scheffé's post hoc tests for multiple comparisons. Pearson's correlation analysis was performed to examine the relationships among variables. Additionally, stepwise multiple regression analysis was utilized to identify factors influencing turnover intention among dental hygienists.

Results

1. The mean value of the variable

The mean scores for dental hygienists' turnover intentions, team intimacy, job satisfaction, and resilience were 2.96, 3.54, 3.43, and 3.54, respectively <Table 1>.

Table 1. Degree of the variables

Variables	Item	Min	Max	Mean±SD	Cronbach's α
Turnover intentions	6	1.00	5.00	2.96±1.10	0.925
Team intimacy	12	1.33	5.00	3.54±0.77	0.935
Job satisfaction	20	1.35	5.00	3.43±0.67	0.944
Resilience	10	1.40	5.00	3.54±0.70	0.925

2. Level of scales according to general characteristics

Dental hygienists' turnover intention varied significantly by age ($p<0.001$), career experience ($p<0.001$), salary ($p<0.01$), and subjective health status ($p<0.001$). Higher turnover intention was noted among those aged 24 and younger, 25–30 years, with ≤ 2 or

3–8 years of experience, salary 200–299, and reporting poor health. Team intimacy also differed by age ($p<0.01$), experience ($p<0.05$), salary ($p<0.01$), and health status ($p<0.001$), with higher team intimacy among those aged 40+, with ≥ 18 years' experience, salary 300+, and reporting good health. Job satisfaction varied by workplace type ($p<0.05$), salary ($p<0.05$), and health status ($p<0.001$), being higher in clinic-level facilities, among those salary 300+, and with good health. Resilience was linked only to subjective health status ($p<0.001$), with greater resilience in those reporting good health <Table 2>.

Table 2. Level of scales according to general characteristicsUnit: Mean \pm SD

Characteristics	Division	N	Turnover intentions	Team intimacy	Job satisfaction	Resilience
Age (yr)	≤ 24	43	3.29 \pm 1.07 ^b	3.20 \pm 0.90 ^a	3.28 \pm 0.80	3.38 \pm 0.83
	25-30	54	3.27 \pm 1.04 ^b	3.56 \pm 0.70 ^{ab}	3.41 \pm 0.53	3.56 \pm 0.61
	31-39	59	2.82 \pm 0.97 ^{ab}	3.64 \pm 0.75 ^{ab}	3.44 \pm 0.67	3.59 \pm 0.65
	≥ 40	34	2.31 \pm 0.91 ^a	3.77 \pm 0.62 ^b	3.64 \pm 0.63	3.62 \pm 0.73
	t/F(p^*)		8.336(<0.001)	4.350(<0.01)	1.861(0.138)	1.061(0.367)
Career (yr)	≤ 2	51	3.28 \pm 1.06 ^b	3.27 \pm 0.88 ^a	3.33 \pm 0.77	3.45 \pm 0.82
	3-8	52	3.14 \pm 1.02 ^b	3.63 \pm 0.69 ^{ab}	3.44 \pm 0.54	3.54 \pm 0.57
	9-17	53	2.85 \pm 0.98 ^{ab}	3.58 \pm 0.77 ^{ab}	3.39 \pm 0.68	3.58 \pm 0.66
	≥ 18	34	2.38 \pm 1.02 ^a	3.76 \pm 0.63 ^b	3.63 \pm 0.64	3.61 \pm 0.75
	t/F(p^*)		6.223(<0.001)	3.304(<0.05)	1.469(0.225)	0.406(0.749)
Job change experience	Yes	96	2.86 \pm 1.03	3.47 \pm 0.73	3.45 \pm 0.64	3.56 \pm 0.66
	No	94	3.07 \pm 1.08	3.62 \pm 0.81	3.41 \pm 0.70	3.52 \pm 0.73
	t/F(p^*)		-1.344(0.181)	-1.279(0.203)	0.395(0.693)	0.334(0.739)
Type of work place	Clinic	90	2.84 \pm 1.03	3.54 \pm 0.76	3.54 \pm 0.65	3.59 \pm 0.60
	Hospital	100	3.07 \pm 1.08	3.55 \pm 0.79	3.34 \pm 0.67	3.49 \pm 0.78
	t/F(p^*)		-1.540(0.125)	-0.037(0.970)	2.027(<0.05)	1.063(0.289)
Monthly income (KRW 10,000)	200-249	73	3.12 \pm 1.08 ^b	3.37 \pm 0.83 ^a	3.39 \pm 0.69 ^{ab}	3.50 \pm 0.74
	250-299	68	3.10 \pm 1.06 ^b	3.55 \pm 0.74 ^{ab}	3.33 \pm 0.65 ^a	3.45 \pm 0.69
	≥ 300	49	2.54 \pm 0.93 ^a	3.80 \pm 0.66 ^b	3.64 \pm 0.62 ^b	3.72 \pm 0.63
	t/F(p^*)		5.361(<0.01)	4.675(<0.01)	3.464(<0.05)	2.277(0.105)
Physical health status	Bad	31	3.85 \pm 0.91 ^c	2.84 \pm 0.88 ^a	2.68 \pm 0.67 ^a	2.81 \pm 0.63 ^a
	Normal	108	2.96 \pm 0.94 ^b	3.56 \pm 0.70 ^b	3.46 \pm 0.54 ^b	3.56 \pm 0.62 ^b
	Good	51	2.42 \pm 1.03 ^a	3.94 \pm 0.52 ^c	3.82 \pm 0.53 ^c	3.94 \pm 0.54 ^c
	t/F(p^*)		21.378(<0.001)	24.453(<0.001)	40.657(<0.001)	33.904(<0.001)

*by the t-test for two groups and one-way ANOVA (post-test Scheffe') for three

^{a,b,c}The same character indication shows that there is no statistical significance.

3. Correlation of turnover intentions, team intimacy, job satisfaction, resilience

The turnover intention of dental hygienists to leave their positions negatively correlated with team intimacy ($r=-0.494$), job satisfaction ($r=-0.699$), and resilience ($r=-0.536$). Analysis of independent variables showed significant positive correlations between team intimacy and job satisfaction ($r=0.730$), team intimacy and resilience ($r=0.630$), and job satisfaction and resilience ($r=0.703$) <Table 3>.

Table 3. Correlation of turnover intentions, team intimacy, job satisfaction, resilience

Variables	Turnover intentions	Team intimacy	Job satisfaction	Resilience
Turnover intentions	1.000			
Team intimacy	-0.494 ^{**}	1.000		
Job satisfaction	-0.699 ^{**}	0.730 ^{**}	1.000	
Resilience	-0.536 ^{**}	0.630 ^{**}	0.703 ^{**}	1.000

^{**} $p<0.01$, by Pearson's correlation coefficient

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4. Influencing factors of turnover intentions

This study examined dental hygienists' turnover intention to leave as the dependent variable, with general characteristics, team intimacy, job satisfaction, and resilience as independent variables. General characteristics were converted into dummy variables, and stepwise multiple regression was conducted. The Durbin-Watson statistic was 2.026, indicating no autocorrelation. Tolerance values ranged from 0.763 to 0.910 ($F=21.823$, $p<0.001$), and VIFs ranged from 1.099 to 1.310, all below 10, indicating no multicollinearity. Significant predictors of intention to leave were subjective health status ($\beta=0.208$, $p<0.05$; $\beta=-0.161$, $p<0.05$), 9–17 years of work experience ($\beta=-0.174$, $p<0.05$), age 40 or older ($\beta=-0.266$, $p<0.001$), and team intimacy ($\beta=-0.318$, $p<0.001$). The model explained 35.5% of the variance in intention to leave <Table 4>.

Table 4. Influencing factors of turnover intentions

Variables	B	SE	β	t	p^*	Tolerance	VIF
(constant)	4.757	0.331		14.375	<0.001		
Physical health status (bad)	0.596	0.187	0.208	3.179	<0.05	0.795	1.258
Physical health status (good)	-0.384	0.149	-0.161	-2.574	<0.05	0.870	1.149
Career (9-17)	-0.410	0.146	-0.174	-2.811	<0.05	0.891	1.122
Age (≥ 40)	-0.735	0.169	-0.266	-4.351	<0.001	0.910	1.099
Team intimacy	-0.436	0.092	-0.318	-4.749	<0.001	0.763	1.310

$R^2=0.372$, adjusted $R^2=0.355$, $F=21.823$ ($p<0.001$), Durbin-Watson=2.026

*by stepwise multiple regression analysis at $\alpha=0.05$

Discussion

This study investigated the mechanisms of relationship development among colleagues and identified internal psychological factors essential for dental hygienists' effective job performance. The goal was to provide foundational data to improve the workplace environment and reduce turnover rates in this profession.

The turnover intention among dental hygienists averaged 2.96 points, slightly lower than the 3.10 points reported by Kim [25], whose study focused mainly on hygienists aged 30 or younger. This study's broader age range (20s to 40s) suggests turnover intention varies with age and experience. Newly employed hygienists showed the highest turnover intention, consistent with Han and Jo's finding of 3.35 points among novices [26]. In contrast, more experienced hygienists exhibited lower turnover intentions, possibly because factors influencing job changes—such as salary, work environment, and family status—are less relevant to them. Previous research highlights that a positive work environment promotes retention [3], and stronger tenure commitment reduces turnover intention [17]. Thus, fostering a supportive workplace culture by enhancing belonging, offering fair compensation, and providing professional development is essential. Additionally, improving salary and benefits, which directly linked to job satisfaction and lower turnover among dental hygienists. Therefore, improving these conditions to elevate organizational satisfaction is anticipated to mitigate turnover intentions.

The team intimacy score among dental hygienists was 3.54, closely matching the 3.59 score reported by Lee and Kim [27] for nursing professionals. Studies in nursing populations [15, 27] show that higher team intimacy correlates with increased professional respect [15] and positively influences employees' intentions to stay in their roles [27]. Both dental hygienists and nurses work in structured healthcare settings requiring effective communication. However, dental hygienists mainly practice in clinics and hospitals, while nurses often work in university hospitals. Differences in work schedules, such as fixed hours versus rotating shifts, may also impact outcomes. Although research on team intimacy among dental hygienists is limited, it is believed that team intimacy improves collaboration and adaptation to workplace changes. To enhance team intimacy, regular small-group activities to strengthen

interpersonal relationships and a workplace culture of mutual respect are recommended.

The job satisfaction of dental hygienists averaged 3.43. Kim's study [13] reported 3.31, while Choi and Park's study [12] found a slightly higher score of 3.57, showing minor differences from the current results. Job satisfaction depends on emotional experiences and working conditions like benefits and compensation. Thus, even within the same organization, satisfaction varies based on individual priorities. Additionally, a sense of accomplishment from improving practical skills positively influences job satisfaction. Enhancing clinical seminars and educational support programs can foster dental hygienists' practical skills and improve their overall job satisfaction.

The resilience of dental hygienists averaged 3.54, showing variability compared to previous studies: 3.64 by Na et al. [9], 3.12 by Yoon [10], and 3.62 in a focused on nurses [28]. Resilience arises from a complex interplay of personality traits and social experiences, emphasizing the importance of fostering emotional resilience. Interventions that enhance problem-solving by promoting proactive approaches and cognitive restructuring to positively reinterpret adversity are essential. Thus, psychological training and coaching programs to strengthen dental hygienists' resilience should be systematically implemented.

Job change intentions were higher among individuals aged 24 or younger and those aged 25 to 30, as well as professionals with two years or less, and three to eight years of experience. Increased turnover intentions were also noted among employees earning salaries between 200–249 and 250–299, and those reporting poor subjective health. These findings partially align with previous studies: Park and Cho [17] observed higher turnover intentions among dental hygienists aged 20 to 29; Kim et al. [7] found elevated intentions in individuals aged 25 or younger with one to two years of experience; and Kim [25] linked turnover intentions to salaries below 200. Early-career dental hygienists often face physically and mentally demanding periods requiring skill development, and repeated task difficulties contribute significantly to higher turnover intentions.

Elevated team intimacy was observed among participants aged 40 and above, with 18+ years of experience, salaries of 300 or more, and favorable subjective health. Lee and Gu [29] similarly found higher cohesion in nurses aged 35+ with at least 10 years of experience. However, limited research on team intimacy and demographic factors restricts comprehensive comparison.

Job satisfaction was higher among individuals working in clinic-level facilities, those earning a monthly income of 300 or more, and those reporting positive subjective health. This contrasts with Yoon et al. [20], who found greater satisfaction at non-clinic-level facilities; however, both studies agree that a monthly income of 300+ is linked to higher job satisfaction. While dental hygienists' roles do not differ much by workplace, hospital settings often limit employees to a single department without rotation, possibly lowering satisfaction. Conversely, clinic-level settings offer integrated care and broader responsibilities, which may boost job satisfaction.

Resilience was higher in individuals reporting better subjective health. Previous studies [9, 30] found that dental hygienists show greater resilience with lower work intensity [9], and nurses' resilience increases as occupational stress decreases [30]. These findings suggest that managing workload effectively helps maintain good health, which enhances resilience and adaptive stress coping.

Turnover intention among dental hygienists showed significant negative correlations with team intimacy ($r=-0.494$), job satisfaction ($r=-0.699$), and resilience ($r=-0.536$). These results align with prior studies linking higher job satisfaction and professional commitment to lower turnover intention [17]. Similarly, lower team cohesion and grit in novice nurses [16], and reduced resilience in ward nurses [28], are associated with increased turnover intention. Thus, fostering a positive organizational culture and enhancing job satisfaction can improve emotional stability and reduce turnover intention. Establishing a flexible work environment and developing situational coping skills are key strategies to mitigate turnover intention among dental hygienists.

Factors influencing dental hygienists' intention to leave their positions include subjective health status—'poor' ($\beta=0.208$, $p<0.05$) and 'good' ($\beta=-0.161$, $p<0.05$)—clinical experience of 9–17 years ($\beta=-0.174$, $p<0.05$), age 40 or older ($\beta=-0.266$, $p<0.001$), and team intimacy ($\beta=-0.318$, $p<0.001$), explaining 35.5% of the variance. Positive subjective health likely provides psychological stability, reducing occupational stress and turnover intention. Hygienists with 9–17 years of experience and those aged 40+ may have lower turnover

due to greater adaptability and effective use of clinical skills and coping strategies. Supporting this, Park and Cho [17] found 'good peer relationships' similar to team intimacy here-significantly affect turnover intention. Song and Jeon [16] showed team intimacy mediates the relationship between reality shock and turnover intention in novice nurses, highlighting its importance. Although prior studies [16,17] have examined variables related to team intimacy and turnover, few have directly analyzed team intimacy's impact on turnover intention. Future research should explore subcomponents of team intimacy and emotional relationships to allow comparison with these findings.

This study used random sampling, limiting the generalizability of its findings to all dental hygienists. However, it is the first to examine the relationships among team intimacy, job satisfaction, resilience, and turnover intention in this group. Future research should expand the sample nationwide for a broader perspective and include diverse administrative and psychological variables to better understand turnover intention. Such insights can guide the development of policies to improve job performance and reduce turnover among dental hygienists.

Conclusions

This study aimed to generate foundational data to reduce dental hygienist turnover and produced the following findings.

1. The mean scores for dental hygienists' turnover intentions, team intimacy, job satisfaction, and resilience were 2.96, 3.54, 3.43, and 3.54, respectively.

2. Turnover intention among dental hygienists was significantly linked to age, career length, salary, and subjective health status. Team intimacy was also influenced by these factors. Job satisfaction depended on workplace type, salary, and subjective health, while resilience was related to subjective health status ($p < 0.05$).

3. The intention of dental hygienists to change jobs was negatively correlated with team intimacy ($r = -0.494$), job satisfaction ($r = -0.699$), and resilience ($r = -0.536$). Positive correlations were also found among the independent variables: team intimacy and job satisfaction ($r = 0.730$), team intimacy and resilience ($r = 0.630$), and job satisfaction and resilience ($r = 0.703$).

4. Factors influencing dental hygienists' turnover intention to change jobs showed significant correlations under specific conditions: subjective health status categorized as 'poor' ($\beta = 0.208$, $p < 0.05$) and 'good' ($\beta = -0.161$, $p < 0.05$); work experience of 9 to 17 years ($\beta = -0.174$, $p < 0.05$); age 40 or older ($\beta = -0.266$, $p < 0.001$); and team intimacy ($\beta = -0.318$, $p < 0.001$). The model explained 35.5% of the variance in turnover intention.

Dental hygienists who rated their health as 'poor' were more likely to consider leaving their jobs. Conversely, those with 'good' health, 9 to 17 years of experience, aged 40 or older, and high team cohesion showed lower turnover intentions. Team intimacy had the strongest impact on turnover intention. Thus, promoting internal communication to foster emotional exchange and mutual support is crucial. Additionally, ongoing welfare programs and clinical education that enhance practical skills are essential to strengthen dental hygienists' workplace attachment.

Notes

Author Contributions

Conceptualization: EJ You, HH Min; Data collection: EJ You, HH Min; Formal analysis: EJ You, HH Min; Writing-original draft: EJ You, HH Min; Writing-review&editing: EJ You, HH Min

Conflicts of Interest

The authors declared no conflicts of interest.

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Ethical Statement

This study was approved by the Institutional Review Board (IRB) of Daejeon Health University (IRB No. 1041490-20250425-HR-001).

Data Availability

Data can be obtained from the corresponding author.

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치과위생사의 팀 내 친밀감, 직무만족, 극복력이 이직의도에 미치는 영향

초록

연구목적: 본 연구는 치과위생사의 팀 내 친밀감, 직무만족, 극복력, 이직의도의 연관성을 파악하고, 치과위생사의 원활한 직무수행에 필요한 직장동료와의 관계형성 및 내적 심리요인을 분석하여 근무환경 개선과 치과위생사의 이직률 감소를 위한 방안의 기초자료로 제공하고자 한다. **연구방법:** 충청·전라·경상지역의 치과 병·의원에서 근무하는 치과위생사를 편의추출 하였고, 자료는 2025년 5월 2일부터 7월 30일까지 자기기입식 설문법으로 수집하였다. 최종분석대상자는 190명이고, 자료는 SPSS 27.0 프로그램을 이용하여 산술평균, 독립표본 t-검정, 일원배치 분산분석, 상관분석, 단계적 다중회귀분석으로 분석하였다. **연구결과:** 치과위생사의 이직의도에 미치는 영향 요인은 주관적 건강상태가 '나쁨'일 때($\beta=0.208, p<0.05$)와 '좋음'일 때($\beta=-0.161, p<0.05$), 경력이 '9-17년'일 때($\beta=-0.174, p<0.05$), 연령이 '40세 이상'일 때($\beta=-0.266, p<0.001$), 팀 내 친밀감($\beta=-0.318, p<0.001$)에서 유의한 관련성이 나타났고, 설명력은 35.5%이었다. **결론:** 치과위생사의 이직률을 감소시키기 위해서는 직장동료 간에 서로 관심을 가지고 유대감을 형성할 수 있도록 하며, 치과위생사를 위한 복지와 임상교육을 지속적으로 제공하여 직장에 애착을 갖도록 하는 것이 요구된다.

색인: 치과위생사, 직무만족, 팀 내 친밀감, 극복력, 이직의도