

Dental Hygienist’s Occupation Satisfaction,
 Professional Occupational Image Recognition,
 Occupation Adaptation Convergent Effect on the Quality of Life

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ABSTRACT

This study was conducted to examine and articulate the convergence relationship among occupational satisfaction, professional occupational image recognition, occupational adjustment, and quality of life of dental hygienists from Daejeon, Daegu, Gyeongbuk. Occupational satisfaction was high in 6-10 years of experience, bachelor’s degree acquisition, hospital, sobriety, and exercise. Professional Occupational Image Recognition was high 6-10 years of experience, bachelor’s degree acquisition and income. Occupational adjustment was high 6-10 years of experience, bachelor’s degree acquisition and income. Quality of life was high 6-10 years of experience, bachelor’s degree acquisition, marriage, hospital, exercise. Occupational satisfaction, professional occupational image recognition, occupational adjustment, quality of life are positively correlated, As a result of regression analysis, Y (quality of life) = .479 + .150 (education) + .176 (dental institution type) + .239 (exercise) + .216 (occupational satisfaction) + .305 (professional occupational image recognition) + .203 (Occupation Adaptation). Overall a systematic way to improve the quality of medical service and quality of life for dental hygienists should be sought.

1. Introduction

It may be said that occupation is an economic activity to sustain life and an important product for self-actualization (Yang, 2010). Occupations in the modern society are rapidly developing and undergoing many changes, and the demand for professional jobs is increasing accordingly. Among these professional occupations, dental hygienists, who are in charge of determining the quality of oral health care services, manage their patients based on a comprehensive concept and perform such a broad range of tasks and perform high-level tasks with high competence (Han et al., 2020).

Occupational satisfaction may be defined as a pleasant and positive emotional conditions which occurs when an individual's occupational experience is evaluated as an attitude toward the job (Do, 2020). As an individual before becoming a professional, when one first lead a humane and happy life, one's quality of life will increase and the quality of life of the patient one is managing can also increase, and hence, the occupational satisfaction and quality of life one feels are very important (Ahn et al., 2019). Hence, occupational satisfaction of a dental hygienist is an important factor because it can significantly affect not only their own satisfaction but also the subjects.

Another factor which helps to improve the quality of medical services is the professional image of the profession. Every job has an image of a suitable job and job. Occupational image refers to an individual's beliefs and perceptions according to the occupation. Furthermore, professional self-image refers to the mental perception of a professional over his or her occupation (Geiger, 1988). That is, the professional image that a professional dental hygienist perceives about the attitudes, thoughts, and values of professional professionalism is the professional image (Hwang, 2003). If a professional image is not firmly established, occupational satisfaction and self-image may decline, resulting in an increase in the turnover rate and a decrease in the ability to provide quality medical services (Geiger, 1988). Conversely, if the professional image is well established, the satisfaction of patients will be increased by improving the quality of medical service, which will in turn form a positive image of the dental hygienist and increase the value of dental hygiene work, thereby improving occupational satisfaction. That is, a positive image of a dental hygienist may be said to be an important factor for work (Kim, 2018).

Occupational adjustment refers to a 'continuous and dynamic process in which an individual attempts to achieve or maintain harmony with the work environment' in the main environment of the workplace (Dawis & Lofquist, 1984). Hence, it may be said that the smooth occupational adjustment is an important factor to increase occupational satisfaction and maintain job continuously. If one is not able to quickly adapt to the role and new information according to one's job after getting a job, one may experience stress as to whether one will continue to maintain one's job or feel a sense of burden due to anxiety, crisis, and fear about the job (Jeon, 2007). As a professional dental hygienist, it was reported that in order to provide oral health services based on their professional knowledge, skills and experience, a positive concept of their occupation should be established, which affects the professional performance (Sung et al., 2021).

When working people are satisfied with their occupation or job, their quality of life improves. Quality of life is defined by the World Health Organization (WHO) as 'the personal awareness of one's place in the context of a culture and value system, such as goals, expectations and interests, with which they live and relate' (Kim, 2003). When the quality of life of dental hygienists is high, there is a positive effect on the management aspects and human resource management of dental medical institutions, and consequently, it will play a role as an important factor in enhancing the competitiveness of dental medical institutions (Kim et al., 2013).

According to the previous studies, many studies including a study on the quality of life of dental hygienists (Kim, 2003; Kim et al., 2013; Yoon, 2018), a study on occupational adjustment according to various occupations (Yang, 2011; Im, 1993), and a study on the image of dental

hygienists (Moon et al., 2015; Kang, 2007; Seo et al., 2010) were conducted, yet the studies on the convergence of occupational satisfaction, professional image recognition, occupational adjustment and quality of life for dental hygienists have been limited.

Hence, in this study, the relationship between occupational satisfaction, professional image recognition, occupational adjustment, quality of life and occupational satisfaction, professional occupation image recognition, and occupation according to general characteristics of dental hygienists currently working in dental hospitals and clinics will be analyzed as to how adjustment affects quality of life. Based on the results of the analysis, it is intended to provide the information necessary for occupational satisfaction, professional image and occupational adjustment improvement measures, and for occupational satisfaction and quality of life improvement for dental hygienists.

2. Research Method

2.1 Research subject

This study was conducted targeting the dental hygienists who are currently working at dental hospitals and clinics in Daejeon, Daegu, and Gyeongsangbuk-do from February 7, 2022 to March 30, 2022. They were explained the purpose of the study and agreed to the questionnaire. Using G*Power 3.1.3, it was calculated that over 200 people were needed at an effect size of 0.2, a significance level of 0.05, and a power of 0.90. Yet the subjects were collected and 262 subjects were finally analyzed considering their lack of understanding and responses.

2.2 Research method

To examine and understand the convergence relationship between the dental hygienists' occupational satisfaction, professional image recognition, occupational adjustment, and the quality of life, the content validity of the survey was verified by 3 dental hygiene professors and a preliminary survey was conducted on 20 dental hygienists. This questionnaire was completed after correcting and supplementing the contents of the questionnaire. The general characteristics consisted of 8 questions - career, educational background, marital status, type of dental institution, income, drinking, smoking, and exercise.

As a tool to measure the occupational satisfaction, the occupational satisfaction scale used by Tsui et al. (Tsui et al., 1992) was used, and was it consisted of 6 items. Professional image refers to the professional values and beliefs about the profession recognized by the dental hygienist, and the measurement tool consisted of 8 questions using the professional image questionnaire used by Seo et al. (Seo et al., 2010). Occupational adjustment is to achieve harmony by changing the environment needs of the workplace and the structure of one's own needs, and it was consisted of 6 questions using Lee (Lee, 2008)'s occupational adjustment questionnaire. The quality of life that one feels satisfaction or happiness in personal life is composed of 10 items based on Park

(Park, 2017)'s research tool. The questionnaire tools used in this study were modified and supplemented according to the purpose of the study. On a Likert 5-point scale, from 1 point of 'Not at all' to 5 points of 'Strongly agree', the higher the score, the higher the occupational satisfaction, professional image recognition, occupational adjustment, and quality of life. As a result of the reliability verification of the questionnaire tool, occupational satisfaction Cronbach's $\alpha = .824$, professional image recognition Cronbach's $\alpha = .915$, occupational adjustment Cronbach's $\alpha = .818$, and quality of life Cronbach's $\alpha = .906$ were found.

2.3 Statistical analysis

The data collected for this study were analyzed using SPSS (Statistical Package for the Social Science) WIN18.0 program. As an analysis technique, the general characteristics of the study subjects were calculated in terms of frequency and percentage. To verify the average difference for each item of occupational satisfaction, job image recognition, occupational adjustment, and quality of life according to general characteristics, t-test, one-way ANOVA, and post-test were conducted by the Scheffe verification. The correlation analysis to verify the correlation between quality of life, occupational satisfaction, professional image recognition, and job adaptability, regression analysis to analyze the effect on general characteristics and occupational satisfaction, professional image recognition, occupational adjustment and quality of life was performed. The statistical significance level for the test was set to 0.05.

3. Research Results

3.1 General characteristics of research subjects

As for the general characteristics of the subjects, it turned that the total subjects were 262 female dental hygienists, 109 (41.6%) with 1-5 years of experience, 84 (32.1%) with 6-10 years of experience, and 69 (26.3%) with more than 10 years of experience. As for their educational background, 154 (58.8%) had a community college degree and 108 (41.2%) had a university degree or higher. As for their marital status, 145 (55.1%) were unmarried, and 195 (75.9%) were at the dental hospital by type of medical institution. As for their income, 127 (48.8%) people had less than 25 million won and 133 (51.2%) people had more than 25 million won. Their drinking status was 163 (62.5%) drinkers. Regarding whether they smoke, 253 (96.9%) respondents answered that they did not smoke. Regarding exercise status, 122 (47.3%) people were exercising Table 1.

Table 1. General Characteristics of the study subjects

Characterization	Division	N	%
Career	1-5 year	109	41.6
	6-10 year	84	32.1
	10 year<	69	26.3
Education	Community college	154	58.8
	University	108	41.2
Marriage	No	145	55.1
	Yes	118	44.9
Types of Medical Institutions	Dental Hospital	195	75.9
	Dental Clinic	62	24.1
Income	<2500	127	48.8
	2500≤	133	51.2
Drinking	Yes	163	62.5
	No	98	37.5
Smoking	Yes	8	3.1
	No	253	96.9
Exercise	Yes	122	47.3
	No	136	52.7

3.2 Occupational satisfaction, professional image recognition, occupational adjustment, and quality of life according to general characteristics

The total average of occupational satisfaction was 3.31, the highest for 6-10 years of work experience ($p < 0.05$), and the educational background was 3.56 or higher from college, higher than 3.15 from junior college ($p < 0.05$). It was as high as 3.58 ($p < 0.05$). In the case of drinking, it was as high as 3.41 ($p < 0.05$). In the case of exercise, it was as high as 3.44 ($p < 0.05$). There was no significant difference between marriage and income. The average professional image was 3.60, and the educational background was higher at 3.83 ($p < 0.05$) than at the university level ($p < 0.05$). Career, marriage, income, drinking and exercise were not significant. The total average of occupational adaptability was 3.48, and those with 6-10 years of experience had the highest score of 3.66 ($p < 0.05$), and the educational background was higher than university with 3.68 ($p < 0.05$). The income of more than 25 million won was 3.56 ($p < 0.05$). There was no significant difference in marriage, and the hospital level was higher than that of the clinic level in dental medical institutions, but there was no significant difference. There was no significant difference in the case of non-drinking, yet there was no significant difference in terms of exercise. The total average of quality of life was 3.31, with the highest 6-10 years of experience ($p < 0.05$), and the educational background was higher than university with 3.56 ($p < 0.05$). As for marriage, unmarried people were 3.40 higher than married ones ($p < 0.05$), and dental hospitals were 3.63 higher ($p < 0.05$). In the case of exercise, the quality of life was 3.47 ($p < 0.05$). Income, drinking and smoking were not significant Table 2.

Table 2. Occupational satisfaction, Professional image recognition, occupational adjustment, and quality of life according to general characteristics

Characterization	Division	Occupational satisfaction		Professional image recognition		Rectal adaptability		Quality of life	
		Mean(S·D)	p	Mean(S·D)	p	Mean(S·D)	p	Mean(S·D)	p
Career	1-5 year	3.35(.65) ^b	0.001**	3.55(.66)	0.287	3.42(.71) ^b	0.007**	3.22(.66) ^b	0.015*
	6-10 year	3.46(.59) ^a		3.69(.66)		3.66(.61) ^a		3.48(.65) ^a	
	10 year<	3.08(.66) ^b		3.56(.64)		3.34(.63) ^b		3.26(.64) ^b	
Education	College	3.15(.64)	0.000***	3.43(.67)	0.000***	3.34(.67)	0.000***	3.13(.62)	0.000***
	University	3.56(.58)		3.83(.57)		3.68(.61)		3.56(.63)	
Marriage	Yes	3.28(.62)	0.418	3.61(.67)	0.754	3.44(.67)	0.329	3.23(.63)	0.036*
	No	3.35(.67)		3.58(.65)		3.52(.67)		3.40(.68)	
Types of Medical Institutions	Dental Hospital	3.58(.51)	0.000***	3.78(.54)	0.013*	3.62(.60)	0.056	3.63(.63)	0.000***
	Dental Clinic	3.23(.65)		3.54(.68)		3.44(.68)		3.19(.60)	
Income	<2500	3.35(.64)	0.524	3.54(.66)	0.122	3.40(.67)	0.048*	3.26(.68)	0.234
	2500 ≤	3.29(.66)		3.66(.65)		3.56(.66)		3.36(.64)	
Drinking	Yes	3.17(.62)	0.004**	3.55(.63)	0.336	3.38(.71)	0.064	3.28(.62)	0.519
	No	3.41(.63)		3.63(.67)		3.54(.64)		3.33(.68)	
Exercise	Yes	3.44(.63)	0.004**	3.59(.61)	0.980	3.53(.67)	0.140	3.47(.62)	0.000***
	No	3.32(.64)		3.59(.70)		3.41(.62)		3.15(.66)	
Total Mean(S·D)		3.31(.65)		3.60(.66)		3.48(.67)		3.31(.66)	

*p < 0.05 ** p < 0.01 ***p < 0.001+++

3.3 Correlation between occupational satisfaction, professional image recognition, occupational adjustment, and quality of life

As a result of the correlation analysis of occupational satisfaction, professional image recognition, occupational adjustment, and quality of life, professional image and occupational satisfaction were positively correlated (p < 0.05), and occupational adjustment and occupational satisfaction, and professional image were positively correlated (p < 0.05), quality of life, occupational satisfaction, professional image recognition, and occupational adjustment also demonstrated a positive correlation (p < 0.05). That is, when occupational satisfaction, professional image recognition, and occupational adjustment were high, the quality of life turned out to be high Table 3.

Table 3. Correlation between occupational satisfaction, Professional image recognition, occupational adjustment, and quality of life

Division	Occupational satisfaction	Professional image recognition	Rectal adaptability
Occupation image recognition	.513***(0.000)	1	
Rectal adaptability	.668***(0.000)	.652***(0.000)	1
Quality of life	.576***(0.000)	.582***(0.000)	.602***(0.000)

*p < 0.05 **p < 0.01 ***p < 0.001

3.4 Effect of general characteristics, occupational satisfaction, professional image recognition, and occupational adjustment on quality of life

To examine and understand the effect of general characteristics, occupational satisfaction, professional image recognition, and occupational adjustment on quality of life, the result of regression analysis was Y (quality of life) = .479 + .150 (educational background) + .176 (by dental institution type) + .239 (exercise) + .216 (occupational satisfaction) + .305 (professional image recognition) + .203 (job adaptability). That is, the results demonstrate that the quality of life is improved when the educational background is higher than university level, hospital level or higher, exercise, occupational satisfaction, professional image recognition, and occupational adjustment are high ($p < 0.05$) Table 4.

Table 4. Effect of general characteristics, occupational satisfaction, Professional image recognition, occupational adjustment, and quality of life

Model	Non-standardized coefficients		Standardized coefficients	t	p
	B	The standard error	Beta		
(Constant)	.479	.173		2.761	0.006
Career (≤ 10 year:0, $10\text{year} < r:1$)	.022	.084	.015	.262	0.794
Education (College:0, University $\leq :1$)	.150	.063	.116	2.396	0.017*
Marriage (Yes:1, No:0)	.095	.070	.074	1.361	0.175
Types of medical institutions (Dental Hospital:1,Dental Clinic:0)	.176	.070	.119	2.523	0.012*
Income ($<2500:0$, $2500 \leq :1$)	.020	.066	.016	.308	0.758
Drinking (No:0, Yes:1)	.012	.057	.009	.206	0.837
Exercise (No:0, Yes:1)	.239	.054	.187	4.385	0.000***
Occupation Satisfaction	.216	.060	.217	3.616	0.000***
Professional image recognition	.305	.054	.318	5.588	0.000***
Rectal adaptability	.203	.062	.216	3.327	0.001**

* $p < 0.05$ ** $p < 0.01$ subordination variable: quality of life F: 32.390 p: 0.000 R: 0.772 R²: 0.597

4. Consideration

Dental hygienists, who are among the important personnel of oral health services, will improve their quality of life if they are satisfied with their jobs or adapt well to their jobs after being employed at dental medical institutions. Furthermore, it is expected that the image perception of the profession as a professional will have a significant impact on the quality of life. Hence, this study was conducted to identify the factors affecting occupational satisfaction, professional image recognition, and occupational adjustment on the quality of life of dental hygienists.

As a result of this study, occupational satisfaction was significant in career, educational background, type of dental institution, drinking alcohol, and exercise ($p < 0.05$). Most of the work experience was 6-10 years, and the number of more than 10 years was somewhat less. Yang et al. (Yang

& Kim, 2013) and Kim (Kim, 2003) reported that occupational satisfaction was higher with longer experience, demonstrating different results from the results of this study. The longer the career, the more adapted to the job, the less the burden on the job and occupational satisfaction will be improved. The higher the educational level, the higher the occupational satisfaction. Mun (Mun, 2014) also demonstrated that occupational satisfaction was high when the educational background was high. That is, it is thought that it is because the bachelor's course provides more opportunities to learn job knowledge and thus increases job confidence. In dental medical institutions, the hospital level was higher than the clinic level. This is the same result as Kim (Kim, 2003). The results of the study by Jeong (Jeong, 2020) demonstrated that occupational satisfaction was high in the case of not drinking alcohol. Meanwhile, Kim et al. (Kim & Park, 2015) reported that the number of people drinking alcohol was higher if they experienced problems while performing their job. That is, it is interpreted as drinking as a way to relieve job stress. In the case of exercise, occupational satisfaction was high. Oh (Oh, 2006) reported that workers who exercise had a positive correlation with occupational satisfaction, and Kim et al. (Kim & Lee, 2013) reported that when they exercised, their job stress was low.

The overall average of professional image recognition was 3.60, which was higher than the professionalism of nurses other than Kwon et al. (Kwon et al., 2010) 3.30. The higher the educational level, the higher the professional image recognition, and the same result as that of Lee et al. (Lee & Han, 2012). As for the professional image of dental hygienists perceived by the general public, the higher the educational level, the higher the professional image (Choi et al., 2020). In dental medical institutions, the hospital level professional image recognition was high. This is the same result as the study of Seo et al. (Seo et al., 2010). Jeon (Jeon, 2007) reported that the job value of companies with 10 or fewer employees was lower than those with 50 or more employees. Occupational value affects the selection of a profession, and indicates the income, respect, social contribution, and ability of the profession. Hence, it is considered that the professional image recognition of hospitals with more than 10 people is higher than that of hospitals with less than 10 people.

The overall average of occupational adjustment was 3.48, which was slightly lower than that of young incumbents aged 20-35 in Yang (Yang, 2011) of 3.68, and demonstrated significance in career, educational background, and income ($p < 0.05$). Experience was the highest for 6-10 years, and the lowest for 1-5 years and more than 10 years. Higher educational attainment demonstrated the same results as Jeon (Jeon, 2007) because of higher occupational adjustment. Higher education is related to job knowledge, and hence, it is presumed that they will be better adapted to the job. If the income is high, occupational adjustment is high, and the result is the same as that of Park (Park, 2017). Yang et al. (Yang & Kim, 2013) reported that occupational satisfaction is high when the income is high. That is, it is determined that occupational satisfaction is high when occupational adjustment is high, and income is considered to be one of the factors affecting occupational adjustment. Hence, there should be a lot of social discussion about the treatment of dental hygienists to improve occupational satisfaction and occupational adjustment.

The overall average quality of life was 3.31, which was the same as that of Kim (Kim, 2003) of 3.30, and demonstrated significance in career, educational background, marriage, dental institution type, and exercise. 6-10 years of experience was the highest, with less than 5 years and less than

10 years being the lowest. It is interpreted that 6-10 years is a state of being acclimatized to the job to some extent. The result is the same as that of Kim et al. (Kim et al., 2013) because of higher education and higher quality of life for married people. In dental medical institutions, the quality of life at the hospital level was much higher than at the clinic level. Kim (Kim, 2003) reported that occupational satisfaction was higher at hospital level than at clinic level, and reported that there was a positive correlation between occupational satisfaction and quality of life. That is, it is interpreted that the quality of life is also high because the hospital level has high occupational satisfaction. If you exercise, your quality of life is higher. The relevant reason is that in a report by Kim et al. (Kim et al., 2008), exercise is a factor that improves the quality of life.

As a result of correlation analysis of occupational satisfaction, professional image recognition, occupational adjustment, and quality of life, quality of life, occupational satisfaction, professional image recognition, and occupational adjustment demonstrated a positive correlation ($p < 0.05$). That is, if the occupational satisfaction, professional image recognition, and occupational adjustment are high, the quality of life is high. In the case of exercise, the quality of life was improved when occupational satisfaction, professional image recognition, and occupational adjustment were high. Lee et al. (Lee & Han, 2012) reported that the higher the occupational satisfaction, the higher the professionalism, and Park (Park, 2009) reported that the higher the occupational satisfaction, the higher the occupational adjustment. Furthermore, Kim (Kim, 2003) reported that occupational satisfaction had an effect on improving the quality of life. That is, it may be seen that occupational satisfaction, professional job image recognition, and occupational adjustment play an important role in improving the quality of life. Based on these research results, it is determined that in order to improve the quality of life of dental hygienists, it is necessary to provide the information and environmental support to improve the image of an individual's job and to prepare various measures to help them adjust to the job by increasing occupational satisfaction.

It may be claimed that this study is meaningful in that it analyzes the relationship between occupational satisfaction, professional image recognition, occupational adjustment, and quality of life for dental hygienists to provide basic data for providing information necessary for improving the quality of work and quality of life for dental hygienists, and it is thought that a study on the differences in professional image recognition and occupational adjustment is necessary for other dental workers working in the same space with a dental hygienist in the future.

The limitations of this study are the variables that affect occupational satisfaction, professional image recognition, occupational adjustment, and quality of life of dental hygienists. It may be said that there are limits. In the future, it is thought that various follow-up studies should be conducted in more depth to reconfirm the validity of this study.

5. Conclusion

Hence, this study has analyzed the convergence correlations with occupational satisfaction, professional image recognition, occupational adjustment, and quality of life targeting 262 dental hygienists at dental hospitals and clinics in Daejeon, Daegu, and Gyeongsangbuk-do. The following significant

conclusions were obtained to provide the information necessary for plans and measures for the improvement of quality of life.

1. Occupational satisfaction according to general characteristics was higher in the case of 6-10 years of experience, in the case of obtaining a bachelor's degree, hospital level or higher institution, not drinking alcohol, and exercising. The overall average of professional image recognition was 3.60, which was higher at hospital level dental institutions.
2. The overall average of occupational adjustment was 3.48, which was higher with 6-10 years of experience, bachelor's degree, and income. The overall average of quality of life was 3.31, and it was higher in the case of 6-10 years of experience, bachelor's degree, marriage, hospital level dental facilities, and exercise.
3. As a result of correlation analysis of occupational satisfaction, professional image recognition, occupational adjustment, and quality of life, occupational satisfaction, professional image recognition, and occupational adjustment demonstrated a positive correlation with quality of life.

As a result of the study, it must be ensured that it will be possible to find various ways to improve the dental hygienists' quality of life by identifying occupational satisfaction, professional image recognition, occupational adjustment, and quality of life improvement factors considering the general characteristics of dental hygienists and developing programs in a more systematic manner.

Conflicts of Interest

The authors declare that they have no conflicts of interest.

References

- Ahn, A. S., & Ha, J. Y. (2019). Nurse's job satisfaction working at the nursing caring integrated service wards. *Asia-pacific Journal of Multimedia Services Convergent with Art, Humanities, and Sociology*, 9(4), 369-378. DOI: 10.21742/AJMAHS.2019.04.36
- Choi, H. Jung., & Park, K. H. (2020). Factors affecting the professional image of dental hygienists. *Journal of Korean Society Dental Hygien*, 20(2), 197-207.
- Dawis, R., & Lofquist, L. (1984). *A Psychological theory of work adjustment*. Minneapolis. University. of Minnesota Press.
- Do, Y. J. (2020). Relationship Between Internal Marketing, Job Satisfaction and Organizational Commitment of Clinical Dental Hygienists. *Journal of Convergence for Information Technology*, 10(12), 1-8.
- Geiger, J W. K. (1988). Self-Image and Job Satisfaction in Varied setting. *Nursing Management*, 19(12), 50-58.
- Han, J. H., Hwang, S. J., Jeong, S. J., An, E. S., Kim, S. M., & Kim, B. R. (2020). Analysis

- of factors related to the job of dental hygienists. Korean Dental Hygienists Association, 1-124.
- Hwang, E. K. (2003). Satisfaction and Evaluation of Dental Hygienist on Their Uniform. Master's dissertation. Dongduk Women's University.
- Im, Y. S. (1993). A Study on the Stress-Coping Pattern of Head Nurse. *Journal of Korean academy of nursing*, 32(4), 63-73.
- Jeon, D. S. (2007). The Effects of Vocational Adjustment for Vocational Value of the Worker. Master's dissertation. Kyonggi University.
- Jeong, Y. J. (2020). The Impacts of Emotional Labor of Medical Institution Workers on Job Satisfaction: Mediating Effect Stress. *Journal of Humanities and Social Sciences* 21, 11(4), 1591-1604.
- Kang, B. W. (2007). A Study on the Image of Dental Hygienists in Dental Patients and Caregivers. *Journal of Korean Society of Dental Hygiene*, 7(2), 197-211.
- Kim, E. H., & Lee, H. Y. (2013). Job Stress and Psychosocial Health according to the Level of Exercise Behavior of Working Women. *Korea Academy of Kinesiology*, 15(3), 49-59.
- Kim, H. J., Jaung, A. H., & Kim, J. H. (2013). Analysis of Influential Factors for the Quality of Life Among Dental Hygienists. *Journal of the Korea Contents Association*, 13(3), 229-239. DOI: 10.5392/JKCA.2013.13.03.229
- Kim, H. R., & Park, S. K. (2015). Employee Drinking and Work Performance. *Journal of the Korea Contents Association*, 15(10), 267-279. DOI: 10.10.5392/JKCA.2015.15.10.267
- Kim, S. A. (2018). Relation between Images of Nurse and Collaboration. Master's dissertation. Chung-Ang University.
- Kim, Y. K. (2003). A Study on the Job Satisfaction and Quality of Life in Dental Hygienists. *Korean Society of Dental Hygiene*, 3(2), 127-141.
- Kim, Y. M., Hyeon, S. H., & Song, H. S. (2008) The relationship among health status, health promoting behavior, depression and quality of Life of health program participants. *Korean Society of Leisure Recreation and Park*, 32(4), 33-46.
- Kwon, K. J., Ko, K. H., Kim, K. W., & Kim, J. A. (2010). The Impact of Nursing Professionalism on the Nursing Performance and Retention Intention among Psychiatric Mental Health Nurses. *Journal of Korean Academy of Nursing Administration*, 16(3), 229-239.
- Lee, K. H. (2008). Job Adjustment and Cultural Adjustment of Korean-Chinese and Han-Chinese Workers in Korea: ERG Theory as a Framework, doctor's thesis, Ewha Womans University.
- Lee, S. J., & Han, G. S. (2012). The ethical propensity, professionalism and ethical job behavior of clinical dental hygienists. *The Korean Academy of Preventive Dentistry and Oral Health*, 36(3), 238-248.
- Moon, S. J., Ku, I. Y., Choi, H. Y., & Ka, K. H. (2015). A Study on Enrollment Satisfaction, Career Directions, and Image of Dental Hygienists for Dental Hygiene Students in Some Regions. *Journal of the Korea Academia -Industrial cooperation Society*, 16(1), 564-574. DOI: 10.5762/KAIS.2015. 16.1.564
- Mun, H. S. (2014). Effect of Social Support for Social Welfare Workers on Job Satisfaction-Focusing on local child care center. *Journal of the Korea Contents Association*, 14(4), 180-188. DOI: 10.10.5392/JKCA.2014.14.04.180

- Oh, J. Y. (2006). The effect of exercise performance on job commitment and job satisfaction of office workers. Master's dissertation. Chosun University.
- Park, H. S. (2017). Vocation choice factors of Game industry start-up incumbents are Vocational adjustment. Master's dissertation, Kyonggi University.
- Park, J. H. (2017). Analysis of factors affecting quality of work life of dental hygienist based on the culture-work-health model. Master's dissertation. Namseoul University.
- Park, Y. J. (2009). The Effects of Vocational Adjustment for Vocational Prestige and Self Image Accordance of the Employee. Master's dissertation, Kyonggi University.
- Seo, J. H., Jin, K. n. & Yun, C. H. (2010). A Study on the Effect of Dental Hygienists' Uniforms on Professional Identity. *The Korean Society of Clothing and Textiles*, 34(8), 1331-1340.
- Sung, J. H., & Choi, G. B. (2021). Factors Influencing job Satisfaction of Clinical Dental Hygienists. *Journal of Convergence for Information Technology*, 11(2), 146-152.
- Tsui, A. S., Egan, T. D., & O'Reilly III, C. A. (1992). Being Different: Relational Demography and Organizational Attachment. *Administrative Science Quarterly*, 37(4), 549-579. DOI: 10.10.2307/2393472
- Yang, I. J. (2011). The Effects of Vocational Adjustment for Openness and Cultural Self of Younger Employees. Master's dissertation, Kyonggi University.
- Yang, Y. S., & Kim, D. H. (2013). Nurses' Professionalism and Job Satisfaction on the Level of Delegation of Nursing Activities in Long-term Care Hospitals. *Journal of Korean Gerontological Nursing*, 15(2), 175-184.
- Yoon, S. U. (2018). Influence that Coaching leadership of Dental Hygienist (Dental practitioners) affects in the Motivational self-concept, Job Satisfaction, Quality of lift. *The Society of Digital Policy & Management*, 16(2), 261-267. DOI: 10.14400/JDC.2018.16.2.261.