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Understanding job satisfaction of Dutch employees with disabilities: Socio-ecological influences and the relation to general wellbeing

Master Thesis

by

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Abstract

Background: The current study aimed to investigate factors influencing the job satisfaction of Dutch persons with disabilities. The factors were identified using the Socio-Ecological Model (SEM) that allowed the inclusion of non-work-related factors, thereby contributing to the research gap. Factors on the intrapersonal, interpersonal, organizational and policy level were identified. Additionally, it was examined whether job satisfaction influenced the general wellbeing and whether job satisfaction mediated any direct effects between the SEM factors and general wellbeing.

Method: The existing dataset ‘Partially disabled employees in the Netherlands: dealing with a double role’ (van Wel, Knijn, Abma & Peeters-Bijlsma, 2012) was used to test the hypotheses. The target population ($N = 772$) consisted of ‘WGA’ disability benefit recipients. Hierarchical Multiple Regression Analysis (MRA) tested the predictors of job satisfaction. Moreover, a mediation analysis tested direct and indirect effects.

Results: Results from the MRA showed that desire to work, work ethic, work sphere support, social support, institutional pressure and acceptance for pressure significantly influence job satisfaction. Unexpectedly, the output showed no relation between job satisfaction and wellbeing. Consequently, there was no support for any mediation effects, however, some direct effects between the SEM factors and general wellbeing were identified.

Discussion: The desire to work, social support and institutional pressure related to job satisfaction as was hypothesized. Possible explanations for the remaining unexpected outcomes have been addressed. This study contributed to the research field by testing the robustness of a holistic model. Future researchers are advised to further expand on non-work-related factors, for example by including community factors. In addition, improvements for sampling and operationalization methods have been suggested. Finally, the current study advises policymakers to increase job satisfaction by lowering institutional pressure and enhancing social support and the desire to work.

Keywords: job satisfaction, disability, Socio-Ecological Model, wellbeing, non-work-related factors, support systems

Introduction

The Participation Act that has been introduced in the Netherlands in 2015 has succeeded in lowering barriers for disabled people to enter the labor market (Ministry of Social Affairs and Employment, 2019). The first half of the 125.000 jobs that are aimed to be realized by 2026 has already been created. However, even when employed, disabled people rate their job satisfaction 10% lower than non-disabled people (Sociaal Cultureel Planbureau [SCP], 2016). Job satisfaction is ‘a positive emotional state which results from the appraisal of one’s job experiences’ (Locke, 1969). High job satisfaction is a predictor of positive mental and physical health outcomes (Faragher, Cass & Cooper, 2005), higher general wellbeing (Bowling, Eschleman & Wang, 2010) and leads to job outcomes like lower turnover intentions (Brooks, 2019). For disabled individuals, one important effect of high job satisfaction is an increase in self-esteem and social skills. Disabled individuals experience relatively more health problems and feelings of unhappiness (Foundation Fund Nuts Ohra [FNO], 2017). A high job satisfaction could potentially decrease this populations’ health problems. For instance, an increase in social skills as a result of work can further encourage and facilitate the individuals’ involvement in society. This, in turn, might contribute to higher satisfaction with life.

Although considerable research is available about the job satisfaction of disabled employees in the Netherlands (SCP, 2007, 2016), the way this concept is studied has shortcomings. Existing research namely mainly focuses on work-related predictors for job satisfaction (Konrad, Moore, Doherty & Breward, 2013). However, in order to understand job satisfaction of disabled people a more multifaced approach is needed. For instance, regardless of their job, disabled people require relatively more health care or other types of care to remain a regular, healthy lifestyle. The availability or experience of the quality of these resources can potentially increase or decrease the reasons for people to be satisfied with their job (SCP, 2016). Therefore, the current research proposes a research that, in addition to work-related factors, takes non-work-related factors into consideration to examine job satisfaction of individuals with disabilities.

The Socio-Ecological Model (SEM) (McLeroy, Bibeau, Steckler & Glanz, 1988) is a good candidate as a theoretical model to understand job satisfaction because it accounts for both work-related and non-work-related factors at different levels. The theory argues that people’s behavior and feelings are influenced by five levels of influence: intrapersonal (individual), interpersonal, institutional, community and policy level.

Some researchers have applied the SEM in disability research but did so to address predictors of exclusion (Appleton & Field, 2014) rather than job satisfaction. One study that did adopt the SEM to research job satisfaction of this population did not take account of possible influences from the community and policy levels (Li, Roessler, Rumrill & Adhmed, 2017).

Responding to these aforementioned research gaps, the current research employed the existing dataset derived from the research of van Wel et al. (2012) to further investigate the factors that influence job satisfaction.

Accordingly, the main focus of this research is to propose the SEM as a theoretical framework to determine the predictors that influence job satisfaction of disabled people— while importantly including non-work-related factors in addition to work-related factors on different levels of influence.

Secondly, existing research has shown that lower levels of job satisfaction relate to lower levels of general wellbeing (FNO, 2017; SCP, 2016). However, this effect is again based on a work-related conceptualization of job satisfaction. Adding non-work-related factors can reveal new ways in which job satisfaction indirectly affects the general wellbeing. Accordingly, the current research asked the following research questions:

How do work-related and non-work-related factors on an individual, interpersonal, organizational and policy level influence the job satisfaction of disabled people in the Netherlands?

How are these factors and job satisfaction related to general wellbeing?

The current research adopted the dataset of van Wel et al. (2012) to answer the research questions. Several theoretical and practical contributions were aimed to be made. On a theoretical note, this research aimed to test for the robustness of the SEM to study the job satisfaction of disabled people, allowing a more holistic approach. On a practical note, this research aimed to contribute to current knowledge about how a variety of support systems are involved in the facilitation of job satisfaction. This, in turn, should equip health care workers and policymakers with more tools to tackle this problem more effectively.

Theoretical framework and literature review

Job satisfaction

Job satisfaction is ‘a positive emotional state which results from the appraisal of one’s job experiences’ (Locke, 1969). A great deal of previous research has investigated work-related factors or processes as being predictors of low job satisfaction of disabled people particularly (Konrad et al., 2013). Work-related factors concern circumstances and events in the workplace and how they are experienced by the employee. These factors include job characteristics and work environments that make work more or less satisfying. For instance, a work culture that shows little respect for employee diversity or expresses little effort to support employees with disabilities, lowers job satisfaction (SCP, 2016). The SCP (2016) further showed that participants of their study experienced that their colleagues expressed feelings of underappreciation or mistrust towards them. This marginalization was a reason for their low job satisfaction. In addition, disabled employees were given fewer opportunities to develop, which in turn lowered job satisfaction. Lastly, bullying and intimidation strongly decreased job satisfaction of this population.

Non-work-related factors, on the other hand, reflect experiences and circumstances that happen outside of the work context, but nevertheless can affect job satisfaction (Wang & Jing, 2017). These factors reflect personal characteristics and social and cultural resources. People with disabilities belong to a marginalized group in society that experiences negative prejudices that can complicate their opportunities to participate in society (Campen, Iedema & Wellink, 2006). Moreover, their participation is troubled by their relatively more severe health problems. Thus, the challenge of balancing work and private life while coping with a disability is particularly harmful for the job satisfaction of this population. Non-work-specific resources offered by social networks, health care professionals and cultural standards can facilitate people with disabilities to keep up with that challenge. Further elaboration on these factors is given in the following paragraph.

The Socio-Ecological Model

McLeroy et al. (1988) have developed the SEM to illustrate that human health is shaped by a number of systems and contexts. These are represented in the five levels of influence: the *intrapersonal* (individual), *interpersonal*, *organizational*, *community and policy* level. The SEM assumes that higher levels of influence (in)directly influence lower levels of influence and vice versa. The lowest levels represent the immediate systems that individuals participate in (for example, leisure activities). A higher-level context could influence those systems.

Examples of higher levels factor are the arrangement of cultural activities in a certain neighborhood, cultural norms or policies. Thus, the holistic character of the SEM enables to include all systems individuals participate in (home, leisure, workplace) when analyzing health. Therefore, the current research served a similar possibility to include both work and non-work influencing when analyzing job satisfaction. Specifically, the SEM reveals what factors can be identified that determine the extent to which disabled people are encouraged or discouraged to like their jobs.

The proposed research did extensive literature research to identify important influences on job satisfaction. Consequently, these factors were provided by variables found in the dataset of van Wel et al. (2012). Figure A1 (Appendix A) shows how the factors were classified in the SEM.

Socio-ecological predictors of job satisfaction

Intrapersonal level

Intrapersonal influences on job satisfaction concern personal judgements about health and work. Lysaght, Oullette-Kuntz & Morrison (2009) showed that disabled employees are most motivated to work for intrinsic rewards (e.g. social connectedness and recognition). In addition, a report by the Dutch government (Rijksoverheid, n.y.) demonstrated that salaries of disabled people often lay below minimum wage, which creates pressure to work to be financially independent. This can in fact lower job satisfaction.

Job satisfaction is further harmed by a low capability to work, which is the personal judgement of to what extent individuals feel they can combine their work with their disability. Lindsay & Edwards (2013) showed that the emotional distress caused by the disability decreases the capability to work because it decreases self-esteem.

In addition, a low desire to work lowers job satisfaction. This concerns the wish to have a job. Lindsay & Edwards' study (2013) also demonstrated that participants that preferred other ways than employment to give meaning to life, experienced lower job satisfaction.

Finally, Saunders & Nedelec (2014) showed that a strong work ethic proved to decrease job satisfaction of disabled people. Work ethic is a way of thinking of employment as 'a duty to society'. A strong work ethic can lead to an excessive effort to work hard in order to be considered 'normal', negatively influencing job satisfaction.

Interpersonal level

Job satisfaction is influenced by the experience of the quality of contact and support provided by their social networks at work and outside of work.

Social support is the first non-work-related predictor. It concerns support given by informal social networks. Lindsay & Edwards (2013) showed that friends, family & neighbors can decrease the burden of life responsibilities (e.g. household) for individuals with disabilities, leaving them with fewer worries that could impair their work performance. Pérez, Alcover & Chambel (2015) even showed that this non-work-related predictor influenced work-related predictors. Family support namely increased the work-related self-esteem of participants in their study.

Social support at work is expressed by a (un)supportive work sphere. Hall's (2009) qualitative meta-analysis prevailed that disabled people experience higher job satisfaction when having supportive interactions at work. This refers to being treated the same as other colleagues, being involved in team activities, feeling comfortable to ask for help and receiving regular feedback (Akkerman, Kef & Meininger, 2017).

Organizational level

On the organizational level, re-integration bureaus play a role in how work is experienced by people with disabilities. Re-integration bureaus offer health- and career-related advice that helps to obtain or retain a job that is adjusted to health limitations. Van Wel et al. (2012) showed that disabled people are generally provided with unclear information about the availability of re-integration programs. Moreover, re-integration bureaus often fail to offer personalized advice, leading to a placement in a undesirable job. These mismatches can decrease job satisfaction.

The second non-work-related predictor is *professional support*. Professional support concerns care provided by professionals that help ensure a good quality of life for people with disabilities (i.e. general practitioner, psychiatrist). A national report (SCP, 2018) showed that the quality of professional support has shortcomings. Disabled people underuse these services because they find the procedure to apply too complicated or are in doubt whether they qualify. Such dissonances can cause a delay in necessary care providence, so that health problems keep imposing barriers for job satisfaction.

Moreover, up to now, little attention has been paid to community and policy influences on job satisfaction. Appleton & Field (2014) did include all socio-ecological levels in the experience of exclusion of disabled people, but no research has done so for job satisfaction. The

research by Li and colleagues (2017) was one of the few studies to research job satisfaction of disabled people with an ecological model, but importantly, they did not take community and policy influences into account.

Community level

On the community level, the third non-work-related factor is stigmatization. This is the expression of negative stereotypes of people with disabilities in society. According to Appleton & Field (2014), stigmatization is noticeable by the lack of integrative practices of organizations that can improve community health for this specific group, thereby removing barriers for positive job experiences. A research performed by Kromhout, Kornalijnslijper & de Klerk (2018) has shown that disabled people find that the ways of care provision and communication methods between different operators in the care system are not well aligned. Such low-quality collaborations provide minimum assistance, if not extra concerns and barriers for positive job experiences. Unfortunately, the current research did not examine the community level because the adopted dataset does not contain these factors.

Policy level

Laws or policies can impose actions or judgements on individuals that can harm their job satisfaction. Firstly, institutional pressure is exercised by the ‘Uitvoeringsinstituut Werknemersverzekeringen’ (UWV, n.y.), which is the national employee insurance agency responsible for providing disability benefits. The ‘WGA’ disability benefit was introduced in the Netherlands in 2005. The WGA, ‘Werkhervatting Gedeeltelijk Arbeidsongeschikten’ (‘return to work scheme of the partially disabled’) meant the move from a passive benefit to a pro-active benefit. Previously, regardless of the severity of the disability, individuals who received this benefit were denied their right to work. When the WGA was introduced, this was no longer neglected because of a distinction between disability levels. Four disability levels were established: ‘35-45% disabled’, ‘45-55% disabled’, ‘55-65% disabled’ and ‘65-80% disabled’.

All WGA recipients were obliged to seek paid employment for their remaining ‘work capacity’. The rest of their income was compensated with disability benefits. Thus, the disability benefit was higher for the higher disability group (van Wel et al., 2012). Van Campen & Cardol (2009) showed that this ‘label’ pressures disabled people to find employment. Especially people in lower disability levels experience relatively more pressure since they are entitled to fewer benefits. The result might be that he or she settles for a less satisfying job.

Another factor in the policy level is acceptance of pressure which refers to the extra pressure put on disabled people when they feel the UWV has misjudged their disability classification, thus their remaining work capacity (van Wel et al., 2012). It is imaginable that when people do not agree with these criteria, for example when they are labeled fit to work but feel they are not, this expresses itself in a lower job satisfaction.

Job satisfaction and wellbeing

The previous section has shed light into what factors and processes can bring a better understanding of job satisfaction of disabled people especially. Another field of research that requires better understanding is ‘wellbeing’: people’s capacity to live healthy, creative and fulfilling lives (Diener et al, 2017). Wellbeing is proven to be relatively lower for disabled people and even proven to be an outcome of their lower job satisfaction (SCP, 2016) as a result of bullying and the other previously mentioned incidents at work. Although this is insightful, such expositions are unsatisfactory because they fail to include similar factors *outside* of the work sphere that could influence how job satisfaction impacts wellbeing. Murphy & Kram (2010) found that whereas social support from family members or friends impacted job satisfaction and wellbeing equally, support from a job coach had more impact on job satisfaction than on wellbeing.

Consequently, there is reason to believe that the SEM predictors have a unique influence of general wellbeing *in addition* to their impact on job satisfaction (Diener et al, 2017). In fact, it is possible that changes in wellbeing caused by the SEM factors are due to their influence on job satisfaction. Therefore, non-work-related influences should not be overlooked. For example, an increase in wellbeing could be caused by occasional help from a psychiatrist. These conversations have helped the person cope with work-related stress, which in turn increased his or her job satisfaction. As such, job satisfaction could (partly) be the explaining mechanism.

Current proposed research

As suggested by the literature review, explaining job satisfaction is a complex task since that job satisfaction is largely dependent on the support systems that exist for disabled people to optimize their health and involvement in society. These systems help decrease the barriers for disabled employees to enjoy their work. Nonetheless, up to date many studies in existing literature have overlooked the influence of non-work-related influences on job satisfaction. Moreover, existing research did not address the restrictive or enabling influence of policy on job satisfaction. In addition, considerable research showed that job satisfaction positively

influences overall wellbeing but has failed to include non-work-related factors in their analysis as well. In an attempt to fill these research gaps, the current research adopted the SEM to predict job satisfaction. Accordingly, the current research examined the following two research questions:

How do work-related and non-work-related factors on an individual, interpersonal, organizational and policy level influence the job satisfaction of disabled people in the Netherlands?

How are these factors and job satisfaction related to general wellbeing?

Hypotheses

The current research used the previously mentioned dataset of van Wel et al. (2012) to investigate the research questions. The variables offered by this dataset have been identified on four levels of the SEM. Based on the literature review, thirteen hypotheses were included in the research model (see Figure A2, Appendix A). Critical to note is that the current research did not include an analysis of community factors since the dataset does not include this information.

Intrapersonal level

H1: Financial motivation negatively predicts job satisfaction.

H2: Desire to work positively predicts job satisfaction.

H3: Capability to work positively predicts job satisfaction.

H4: Work ethic negatively predicts job satisfaction.

Interpersonal level

H5: Social support positively predicts job satisfaction.

H6: Work sphere support positively predicts job satisfaction.

Organizational level

H7: Re-integration support positively predicts job satisfaction.

H8: Professional support positively predicts job satisfaction.

Policy level

H9: Institutional pressure negatively predicts job satisfaction.

H10: Acceptance of pressure positively predicts job satisfaction.

Complementing the main research question, the current research also proposed to study the effect of the predictors on the general wellbeing and whether this indeed is partly due to changes these predictors causes in job satisfaction. Consequently, a partial mediation was expected (see Appendix A, Figure A3 for a model view).

H11: Job satisfaction positively predicts job satisfaction.

H12: The SEM predictors have a direct effect on general wellbeing.

H13: The relationship between the predictors and general wellbeing can be explained through a partial mediation effect of job satisfaction.

Methods

In order to answer the research questions, a secondary quantitative data analysis of the existing survey data of van Wel, Knijn, Abma & Peeters-Bijlsma (2012) was conducted. Dijkgraaf, van Wel and Knijn commissioned the project ‘Partially disabled employees in the Netherlands: dealing with a double role’ as a contribution to the nationwide re-integration improvement research that started in 2008. The goal of the research was to examine the factors that elicited the labor market participation of disabled employees.

Participants

The participants of the study by van Wel et al. (2012) belonged to the aforementioned WGA population in the Netherlands. The WGA is a ‘return to work’ benefit for people who are unfit to work due to illness or disability for two years or longer but are potentially able to work in the future (UWV, n.y.). To clarify, at the time of the research being conducted, part of the participants received disability benefits and gained income by paid employment, and part was unemployed, as visualized in Table A1, Appendix A. The unemployed participants based their answers on their previous job situation.

A nonrandom sample of 3980 participants has been derived from the total of 11,110 WGA recipients. Furthermore, the authors of the original dataset included 336 extra participants for whom WGA benefits had stopped during 2006-2008. Participants were recruited by the use of UWV registers. The questionnaires were sent to participants by e-mail and post by the UWV. This resulted in 819 filled in questionnaires, of which 772 surveys were suitable for the current

study. The mean age of the participants was 50 ($SD = .692$), and the sample consisted of 54% men. The response rate and descriptive statistics can be found in Table A2 and A3 (see Appendix A).

Data collection instruments

The ‘Partially disabled employees in the Netherlands...’ questionnaire contained variables about health, wellbeing, labor perspectives and the experience of accessibility and the quality of support. The items that were adopted for the current research are described in the next paragraph.

Independent variables

The independent variables in this research were the predictors (on the intrapersonal, interpersonal, organization, and policy level) of job satisfaction. Mean scores of the scale scores have been computed to analyze the relationship with job satisfaction. Note that all five-point Likert scales refer to the following answer options: (1) completely disagree (2) partly disagree (3) neutral (4) partly agree (5) completely agree, unless indicated otherwise.

Intrapersonal

Financial motivation. Financial motivation was a three-item scale ($\alpha = .70$) that measured the motivation to work because of financial concerns. An example statement is ‘I want to work in order to not count every penny’. Answer options were based on a five-point Likert scale. A high score reflected high financial motivation.

Desire to work. Desire to work was a four-item scale ($\alpha = .74$) with a five-point Likert scale. An example statement was ‘I want a job, because I want to keep pursuing personal growth’. A high score reflected a high desire to work.

Capability to work. The capability to work scale consisted of seven items ($\alpha = .73$) with a five-point Likert scale and captured the personal judgement about the capability to work with a disability. An example statement was ‘I am convinced that I am fit to work’. A high score reflected a high capability to work. Three items were reverse coded, for example ‘I barely see any chance to combine work with my illness’. The seventh item assessed the extent to which the disability hindered working, coded as 1 = strongly hindered, 2 = slightly hindered and 3 = not hindered.

Work ethics. The strength of traditional work ethics was assessed with a seven-item scale ($\alpha = .76$) with a five-point Likert scale. An example statement was ‘It is humiliating to receive money without having to work for it’. A high score reflected a strong work ethic.

Interpersonal

Social support. Social support was a five-item scale ($\alpha = .82$) with a five-point Likert scale. An example statement was ‘In times of need, I can always approach someone in my social surroundings to ask for help’. A high score reflected high social support. The scores of the item ‘I don’t often have company’ were reversed.

Supportive work sphere. Supportive work sphere was a two-item scale ($\alpha = .77$) measuring support given by colleagues and supervisors. Choice options were measured on a five-point Likert scale from (1) very unsatisfied to (5) very satisfied. A high score reflected a supportive work sphere.

Organizational

Professional support. Professional support was a nine-item scale ($\alpha = .65$) that addressed the experience of support from nine different professionals (‘With regards to your job and your illness, how satisfied are you about the contact with or help from following persons...’). Specifically, these are the general practitioner, physical therapist, medical specialist, psychologist, social worker, physician, insurance advisor UWV, physician UWV and the supervisor of the re-integration organization. Originally, this was a six-point scale with answer options ranging from (1) very unsatisfied to (5) very satisfied and (6) non-applicable. This was changed to a five-point scale because the values of category six were recoded into missing values. Because few participants had answered all nine items ($N= 46$), a mean score was computed only for participants that answered a minimum of six items.

Re-integration support. This six-item scale ($\alpha = .82$) referred to knowledge about available support by re-integration bureaus. Answer options were based on a five-point Likert Scale. An example statement was ‘I can count on enough support when I feel frustrated about combining work with my health’. Scores on the other five items were reversed, for example ‘I feel like I have to do everything on my own and receive insufficient guidance to work’. A high score reflected high re-integration support.

Policy

Institutional pressure. Institutional pressure was the level of disability as determined by the UWV. Answer options were ‘35-45%’, ‘45-55%’, ‘55-65%’, ‘65-80%’. Classification in the lower levels represented a higher capacity to work. These values were transformed to ordinal scores (1 to 4) so that lower levels represented a higher institutional pressure.

Acceptance of pressure. Acceptance of pressure meant the participants’ agreement with the level of disability as determined by the UWV. Choice options were ‘No, (partial) incorrect judgement’ = 1 and ‘Yes, correct judgement’ = 2. The second group reflected a higher acceptance of pressure.

Outcome variables

Job satisfaction

Job satisfaction was assessed with eight items ($\alpha = .83$) on a five-point Likert Scale. One example statement was ‘My job challenged me’. A high score reflected a high job satisfaction. Scores of three items were reversed, one of which was ‘I found my work very exhausting’. One more item investigated the overall satisfaction with work, with answer options ranging from (1) very unsatisfied to (5) very satisfied.

Wellbeing

The wellbeing scale consisted of fifteen items that were derived from four subscales of wellbeing. These were ‘wellbeing’ (‘I generally feel happy’), societal discrimination (‘I do not count in society: I am put aside’), self-esteem (‘I sometimes feel useless’) and self-sufficiency (‘I can take good care of myself’) on a five-point Likert scale. The Cronbach’s alpha reliabilities for these subscales were .88, .81, .84 and .78, and .90 for the total scale. The mean score was calculating by dividing the total score (a sum of scores of subscales) by four. A higher score represented a higher wellbeing. Note that all scores on items belonging to ‘wellbeing’ and ‘self-sufficiency’ were reverse-coded.

Control variables

Existing literature points to inherent differences in job satisfaction caused by demographic factors like sex, age, ethnicity and educational level (Hauret & Williams, 2017). Hence, these variables were included as control variables.

Data analysis approaches

Statistical analyses have been performed using SPSS software (version 26). In order to test Hypotheses 1 to 10, two hierarchical multiple regression analyses (MRA) have been conducted. First, due to different types of Likert scales, the scores for the scale variables were converted to standardized scores. Then, an initial regression assessed whether the assumptions of the MRA were met. After, the regressions were conducted block by block, each block representing a set of SEM-level-specific predictors. In Block 1, background demographic characteristics were introduced as control variables. Block 2 represented the intrapersonal predictors, Block 3 the interpersonal predictors, Block 4 the organizational predictors, and lastly Block 5 the policy predictors. The first regression included all predictors except for 'professional support'. This was because professional support was only available for part of the sample ($N = 551$). Subsequently, the same regression was conducted for a second time, whereby professional support was introduced in Block 4.

Consequently, The Baron & Kenny (1986) mediation method consisting of four steps will answer the hypotheses regarding the relationships between the SEM-predictors, job satisfaction (mediator) and the general wellbeing (outcome variable). Figure A3 (Appendix A) represents the mediation model. Firstly, a regression will be conducted to establish any direct effects between the independent variables and the outcome variables (path c , Hypothesis 12). Secondly, relationships between the independent variables and the mediator job satisfaction have been obtained by the Multiple Regression Analyses (H1 t/m 10). Thirdly, it has been checked whether the mediator affects the outcome variable, controlling for all control variables and predictors (path b , Hypothesis 11). Fourth, if all these conditions have been met, it will be checked whether the direct effects are partly or fully mediated by job satisfaction (path c' , Hypothesis 13). Note that the testing of the indirect effect is required for all independent variables separately.

Results

Quality of the data

An initial regression has been conducted and confirmed that the assumptions of multicollinearity, linearity, homoscedasticity and a normal distribution of the standardized residuals were met. Appendix B contains elaborate reflection on these assumptions.

Descriptive statistics

Before conducting the regression analysis, a preliminary analysis was conducted. Mean scores, standard deviations and correlations between all variables are reported in Table A3, Appendix A.

Main analysis

Hierarchical Multiple Regression Analysis (MRA) using the Enter Method was conducted to investigate what variables predict job satisfaction, controlling for age, educational level, sex and ethnicity. Missing cases were excluded pairwise.

The current research aimed to reach insight into how predictors on different levels of the SEM relate to job satisfaction. Table A4 (Appendix A) shows the summary statistics of the MRA. All five models significantly predicted the outcome variable job satisfaction. Model 3 reached the threshold of a best model fit, since R square was no longer significant for Model 4. However, Model 5 significantly predicted job satisfaction, $F(13, 646) = 13,821, p < .001$ and included all the predictors that were hypothesized to influence job satisfaction. Therefore, the results of Model 5 were elaborated. SPSS output of Model 5 showed nine significant predictors for job satisfaction. Two control variables significantly related to job satisfaction, namely sex ($B = .166, p = .031$) and age ($B = .010, p = .021$). Among the intrapersonal level of the SEM, desire to work ($B = .102, p < .001$) and work ethic ($B = .120, p = .012$) were significant predictors. Both the interpersonal predictors were significant, being work sphere support ($B = -.324, p < .001$) and social support ($B = .099, p = .015$). On the policy level of the SEM, acceptance of pressure ($B = -.126, p = .003$) and institutional pressure ($B = .083, p = .009$) were found to be significant predictors of job satisfaction.

Additional analysis

An additional analysis has been conducted for the sub-part of the sample that received professional support ($N = 511$). The same hierarchical multiple regression as for the main analysis was used. Correlation coefficients of professional support are presented in Table A3 (Appendix A). The results of the regression were congruent to the results of the main analysis up until Model 3. In Model 4 the additional predictor ‘professional support’ was included, and this model explained a significant amount of variance in job satisfaction, $F(12, 419) = 8,439$, $p < .001$. Model 4 explained 19,5 % of the total variance in job satisfaction, 2% more than model 3, but indicates a non-significant $\Delta R^2 = .002$, $\Delta F(2, 419) = .625$, $p = .536$. Similar to the main analysis, despite R-change is no longer significant from Model 4, Model 5 represents all hypothesized predictors and is overall significant, $F(14, 417) = 7.951$, $p < .001$. Two significant predictors on the interpersonal level were found, namely work sphere support ($B = -.299$, $p < .001$) and social support ($B = 0.145$, $p = .008$). The one significant predictor on the policy level was the acceptance of pressure, ($B = -.143$, $p = .008$). Importantly, professional support turned out not to be a significant predictor ($B = 0.79$, $p = .126$).

Mediation analysis

The Baron & Kenny (1986) mediation method was used to test for the (in)direct effects between the SEM predictors (independent variables), job satisfaction (mediator) and the general wellbeing (outcome variable). Figure A3 in Appendix A shows the mediation model. Table A3 shows the descriptive and correlational statistics of general wellbeing. The first step was to test for direct effects (path c). Regression output showed that six predictors significantly influenced general wellbeing. These were the intrapersonal level predictors financial motivation ($B = -.095$, $p < .001$), the capability to work ($B = .320$, $p < .001$) and work ethic ($B = -.108$, $p = .003$). The interpersonal level predictor social support was a significant predictor as well ($B = .390$, $p < .001$). The organizational level predictor reintegration support was significant ($B = .149$, $p < .001$), as well as the policy level predictor acceptance for pressure ($B = .050$, $p = .016$). Again, a separate regression was conducted for the part of the sample that had relations with professional support. Professional support was not significantly related to general wellbeing ($B = .054$, $p = .281$). The second step was to research any significant predictors for the mediator (path a). These results were reported in the previous section and in Table A4 (Appendix A). The third step was to find a significant relationship between job satisfaction and the general wellbeing, controlling for all predictors

and control variables (path *b*). Path *b* was in fact nonsignificant, $B = .036$, $p = .211$, which eliminated all potential mediation effects and therefore, indirect effects have not been further examined (path *c'*).

Discussion

Findings and explanations

This present study was an investigation of different factors contributing to the job satisfaction of people with disabilities, specifically the population of 'WGA' beneficiaries. Importantly, using the SEM, both work-related and non-work-related predictors of job satisfaction were identified. The existing dataset of van Wel et al. (2012) was used for hypothesis-testing.

The first four hypotheses related to intrapersonal predictors of job satisfaction. Firstly, it was hypothesized that high financial motivation would negatively influence job satisfaction. The findings indicated a nonsignificant negative relationship; thus Hypothesis 1 was not supported. The finding that desire to work is significantly positively related to job satisfaction supported Hypothesis 2. Results further revealed a nonsignificant positive relationship between the capability to work and job satisfaction, hence no evidence for Hypothesis 3 was found. Surprisingly, job satisfaction was positively affected by an increase in work ethics, contrary to the negative association that was expected. Thus, the findings did not support Hypothesis 4.

Hypotheses 5 and 6 related to interpersonal predictors of job satisfaction. Hypothesis 5 was not supported, since a negative relation between work sphere support and job satisfaction was found. The finding that social support was significantly positively related to job satisfaction served as evidence for Hypothesis 6.

Hypotheses 7 and 8 referred to organizational level predictors. Contrary to Hypothesis 7, results indicated a nonsignificant positive relationship between re-integration support and job satisfaction. An additional analysis was conducted to examine whether professional support was positively associated with job satisfaction (Hypothesis 8). The nonsignificant positive finding did not support Hypothesis 8.

Policy level factors were tested by Hypothesis 9 and 10. Compared to the lowest disability classifications, higher disability classifications experienced significantly higher job satisfaction. That was in line with Hypothesis 9, which stated that lower classifications experience a higher institutional pressure to work, which would explain why their job satisfaction is relatively low. Furthermore, findings showed that an acceptance of the

institutional pressure to work is in fact related to a lower job satisfaction instead of a higher job satisfaction, which contradicts Hypothesis 10.

Summarizing these findings, the MRA indicated that intrapersonal, interpersonal and policy levels indeed are significant predictors of job satisfaction. On the intrapersonal level, the current study's findings underlined the importance of a high desire to work to be satisfied with one's job, as argued by Lindsay & Edwards (2013). Furthermore, unexpectedly, the finding revealed that a strong work ethic positively influences job satisfaction. This was in line with Al-Nashash, Panigrahi & Darun (2018), whose research showed that strong work ethics, i.e. the belief that working is a duty to society, empowers and motivates employees to increase, instead of decreases, their job satisfaction. On the interpersonal level, findings implied that work sphere support potentially decreases job satisfaction. That contradicts the study of Hall (2009) who stressed that especially support given by supervisors is essential for job satisfaction. This concerns providing any required adjustments in the workplace or tasks that the employee needs to work successfully. The nonsignificant finding was possibly due to the absence of objective measures of workplace adjustments in the current study's operationalization of work sphere support. As expected, social support is indeed positively related to job satisfaction. On the policy level, institutional pressure was found to negatively influence job satisfaction, as supported by literature (Campen & Cardol, 2009).

Several predictors turned out to be nonsignificant predictors of job satisfaction. An explanation for the finding that a high financial motivation did not decrease job satisfaction is that *in addition* to social connectedness (intrinsic rewards), disabled people *also* are motivated by financial (extrinsic) rewards, since a salary legitimizes the person's worth (Lysaght et al., 2009). The capability to work did not influence job satisfaction.

As was the case for work sphere support, this finding could also be explained by the absence of objective factors (e. g. specific workplace arrangements) in the operationalization.

A possible explanation for the contradictory finding about work ethic was offered by Al-Nashash et al. (2018), whose research showed that strong work ethics, i.e. the belief that working is a duty to society, empowers and motivates employees to increase their performance levels and job satisfaction. Next, re-integration support was unrelated to job satisfaction. A possible explanation is that re-integration support is more centered on the job-search itself than actual job satisfaction. Hence, this predictor possibly relates more to participants' job opportunities (van Wel et al., 2012).

The nonsignificant role of professional support could be attributed to inconsistencies found in the operationalization method, as discussed in the next section. An alternative

explanation is that professional support only indirectly influences job satisfaction by improving health. Work-related factors, on the other hand, more directly influence job satisfaction. In addition, professional support is unlikely to cause any changes in personal work circumstances.

Lastly, acceptance of pressure, contrary to theoretical expectations, did not influence job satisfaction. Existing literature does not confirm this finding (van Wel et al., 2012). A possible explanation is that a large part of the population of people with disabilities fulfills low-skilled or low-wage occupations that are inherently less challenging or fulfilling. Future research could delve deeper into this by including ‘occupational prestige’ or other job characteristics in their analysis. Occupational prestige is known as a relative social class position based on their occupation (Brooks, 2019).

Hypothesis 11, 12 and 13 were defined to test for partial mediation effects between the SEM predictors, job satisfaction and general wellbeing. Since a significant relationship between the mediator (job satisfaction) and the outcome variable (general wellbeing) was not found, there was no evidence to suggest a mediation effect. The current study is one of few studies that did not prove a positive relationship between job satisfaction and general wellbeing like several meta-analyses did (Bowling et al., 2010). Even so, the findings were supported by Campen & Cardol’s (2006) study that showed that 40% of Dutch people with physical disabilities reported high satisfaction with life despite being unemployed. The authors rightly concluded that work is only one of many life domains that influences wellbeing. Possibly, job satisfaction of people with disabilities relates to other forms of wellbeing than specifically societal discrimination, self-esteem or self-sufficiency.

Although mediation analysis was eliminated, the current study still got an insight into direct effects from the predictors on wellbeing. Findings partly supported the hypothesis, since four predictors for wellbeing were found. These were capability work, work ethic, social support and acceptance for pressure. The capability to work and social support were positively related to general wellbeing and high work ethic was associated with lower general wellbeing. Groups that accepted their given institutional pressure to work reported a higher wellbeing.

Strengths and limitations

The current study presented itself with several strengths and limitations. Firstly, by using an ecological model, this study proved that the non-work-related context is indeed important to consider when researching job satisfaction of people with disabilities.

Specifically, friends, family members or acquaintances fulfill an important role in increasing job satisfaction by their involvement in a good quality of life and high self-esteem of the person in question (Pérez et al., 2015). Another evident contribution brought by this study is the inclusion of policy factors. With that, the amount of SEM levels addressed in previous research has been exceeded. The current study showed that job satisfaction is negatively affected by institutional pressure that results from the WGA disability classification. Hence, seemingly supportive disability policies can actually create unintended negative effects. A third particular strength was the use of a nationwide population-based dataset that provided a sufficient sample size and statistical power to generalize the findings to the population.

However, the generalizability of the results was limited by a possible sample bias resulting from the non-probability sampling method that was used. Furthermore, the use of a cross-sectional survey design decreased the chances of establishing causal relationships between the variables. Therefore, this study's findings should be interpreted with caution. In addition, self-reports were used for the surveys, which increased the risk of socially desirable answers. Considering the benefit provider UWV was a collaborating partner of the original research, participants potentially filled in to agree with their disability status, while in reality, they did not.

Moreover, this study failed to find evidence for the influence of the non-work-related factor professional support for job satisfaction. One limitation that has contributed to that, was the operationalization of the predictor professional support. As explained in the methods section the mean score was calculated for participants that had a minimum of six answers. This implied that each participants' score on professional support was composed of a different set of caregivers, thereby lowering the internal validity. Moreover, it is unfortunate that the current study did not distinguish different disability types. It did distinguish 'severity' of the disability by including disability levels, but no differences in the nature of the disability were explored (e. g. mentally or physically). Consequently, possible differences in needs regarding specific types of professional support remain unclear. Furthermore, the study did not control for personality traits (for example, neuroticism) that might cause one person to more satisfied with work than another (Zhai, Willis, O'Shea, Zhai & Yang, 2013). Community factors were also missing in the current research. Hence, possibly influential non-work-related factors were overlooked. Finally, the four subscales that formed the wellbeing scale did not address mental health aspects, though literature suggests these fulfill an indispensable role (Faragher et al., 2005).

Directions for future research

Based on these limitations, the present study has discovered several directions for future research. Primarily, future researchers are advised to use a random sampling procedure and a longitudinal research design that allows to examine causal effects. Next, future researchers are advised to further distinguish between disability types and to take community factors and personality traits into consideration. Further research might also use a single approach to professional support. Moreover, the job satisfaction – wellbeing relationship can be revised by including a subscale that addresses mental health. A study that includes wellbeing as a predictor for job satisfaction would also consider more non-work-related influences. These suggestions contribute to the current study's goal to research more non-work-related influences on job satisfaction.

Lastly, the logic of an ecological model is based on mutual influences between lower and higher-order factors. Instead of solely *classifying* different levels, future researchers can learn more about the *interrelatedness* of the predictors and how this impacts job satisfaction.

Implications

The study findings suggest several courses of action for policymakers. Firstly, interventions can be designed that enhance the desire to work, for example by the use of financial incentives and a more active promotion of inclusive work environments. In addition, in order to increase job satisfaction, it is important to spend attention to a reduction of institutional pressure that is put on disabled employees by the UWV. Thirdly, the establishment and encouragement of social support for this population should be prioritized.

Conclusion

In conclusion, this study has brought a better understanding of the job satisfaction of this population by testing a more holistic model using the SEM as a theoretical framework. However, there is room for further progress in determining the importance of non-work-related influences. Finally, it was suggested to revise certain research design and sampling methods.

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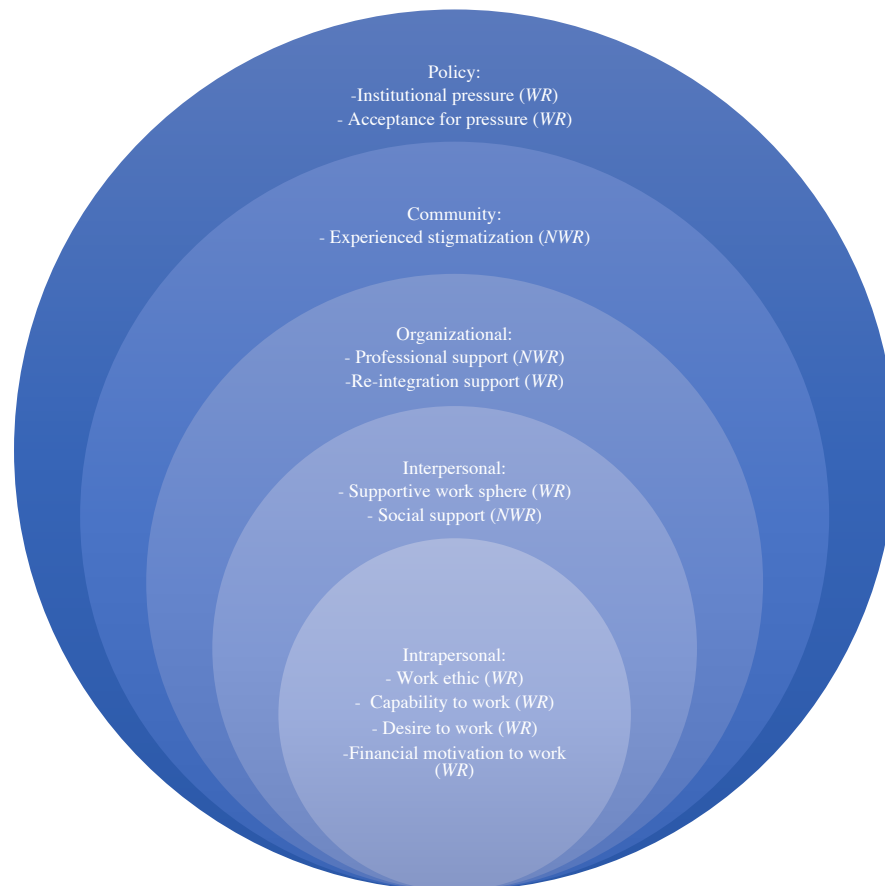
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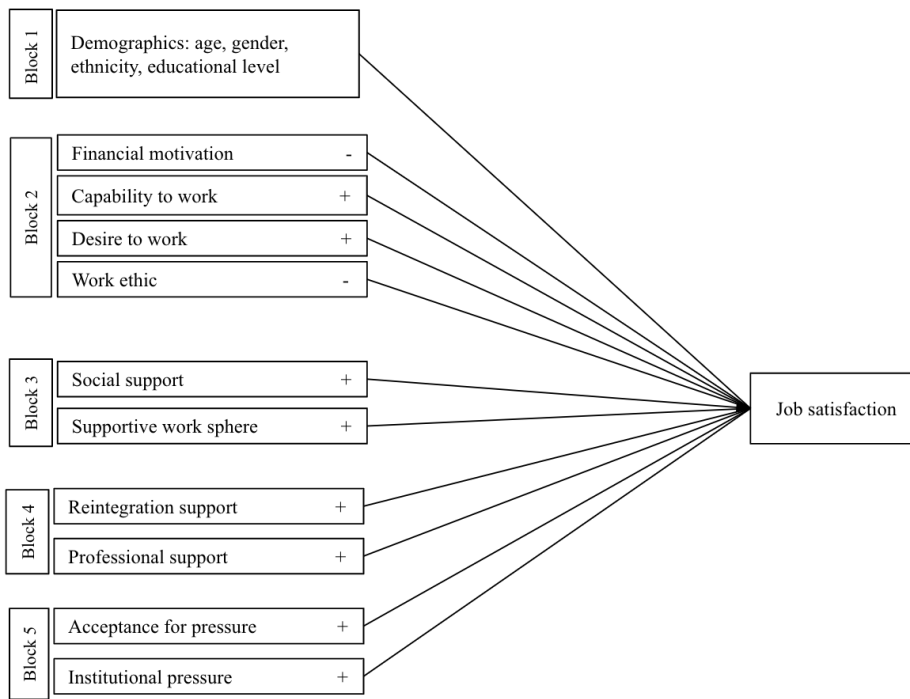
Appendix A

Figure A1

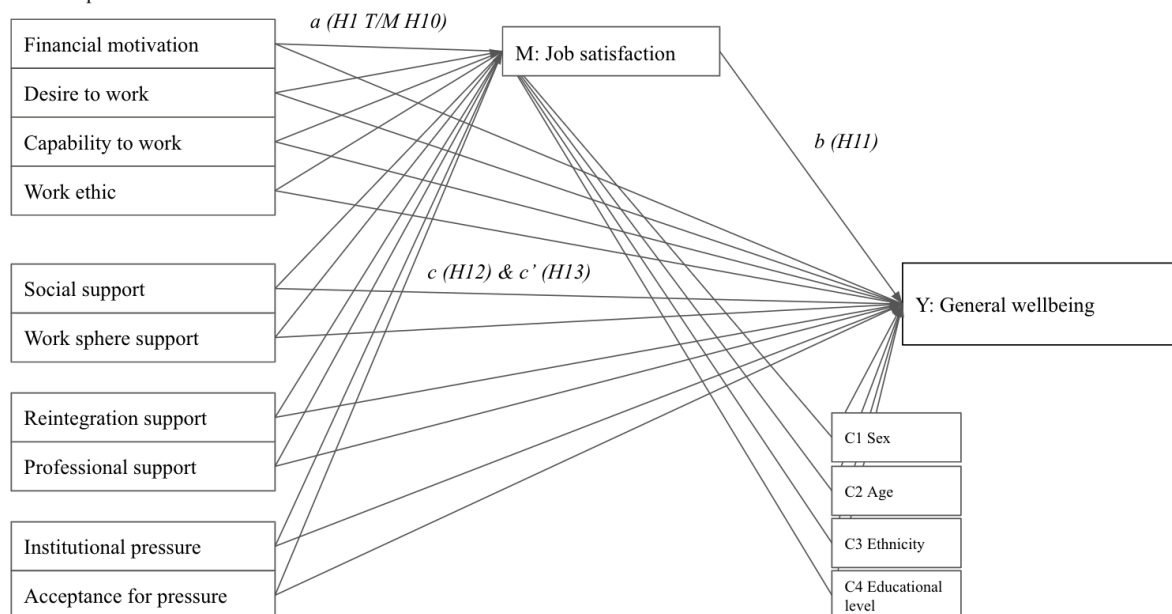
Visualization of the SEM to predict job satisfaction



Note. WR = Work-related predictor, NWR = Non-work-related predictor.

Figure A2*Visualization of the regression model***Figure A3***Visualization of the mediation model*

X: independent variables



Note. All arrows from X to M reflect individual a paths and all arrows from X to Y variables reflect individual c paths.

Table A1*Sample distribution based on labor situation*

Participants	In paid employment	Not employed	Work hours per week: 0-16	17-24	>25	Employed, not working
%	66,5%	33,5%	20%	33%	13%	66%
	Working full earning capacity	Partly working earning capacity	Not employed, possibly will work earning capacity in the future			
%	43%	29%	28%			

Table A2*Response rate*

Population	Total population	% participated	% response rate
WGA recipients	11110	3,58*	18,9%

Note. From ‘‘Partially disabled employees in the Netherlands, a double role’’ by van Wel, F., Knijn, G.C.M., Abma, R., Peeters-Bijlsma, M. (2012). *European Journal for Social Security*, 14(2): 86-110. <https://doi.org/10.1177/138826271201400202>

Table A3*Mean, standard deviations and correlations*

Variables	M	SD	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.	
1. Job satisfaction	3.85	.68	1.000	.036	.092	-.084*	-.036	-.051**	.166**	.170**	.128**	-.373**	.237**	.185**	.028	.046	.241**	.218**	
2. Sex			.036	1.000	-.275**	-.014	.244**	-.069*	-.043	.013	-.208**	-.017	.100	.020	-.006	-.068*	.076*	.038	
Male	54.2%																		
Female	45.8%																		
3. Age	49.95	8.692	.092	-.275**	1.000	-.077*	-.151**	-.156**	-.138**	-.038	.052	-.030	.052	.052	.005	.023	.108**	.131**	
4. Ethnicity			-.084*	-.014	-.077*	1.000	.006	.041	.065*	-.056	.142**	.055	-.100**	-.124**	-.012	.003	.073	-.132**	
Dutch	90.2%																		
Immigrant	9.2%																		
5. Educational level			-.036	.244**	-.151**	.006	1.000	-.019	-.074*	.058	-.197**	-.038	.011	.140**	.024	.040	.072	-.056	
Lower/Elementary	4.2%																		
LBO/VBO	15.7%																		
MAVO/MBO	8.5%																		
MBO	26.4%																		
HAVO/VWO	7.6%																		
HBO	28.5%																		
University	9.0%																		
6. Financial motivation to work	3.55	.76	-.051	-.069*	-.156**	.041	-.019	1.000	.417**	.075*	.324**	.117**	-.156**	-.338**	-.087**	-.053	-.236**	-.165**	
7. Desire to work	3.37	.71	.166**	-.043	-.138**	.065*	-.074*	.417**	1.000	.373**	.600**	-.067*	.007	-.058	.075*	-.051**	.069	-.012	
8. Capability to work	3.27	.64	.170**	.013	-.038	-.056	.058	.075*	.373**	1.000	.024	-.218**	.262**	.361**	.301**	-.124**	.512**	.251**	
9. Work ethic	2.92	.65	.128**	-.208**	.052	.142**	-.197**	.324**	.600**	.024	1.000	-.003	-.106**	-.205**	.025	-.017	-.158**	-.049	
10. Work sphere support	2.75	.71	-.373**	-.017	-.030	.055	-.038	.117**	-.067*	-.218**	-.003	1.000	-.320**	-.319**	-.222**	.059	-.331**	-.285**	
11. Social support	3.76	.71	.237**	.100**	.052	-.100**	.011	-.156**	.007	.262**	-.106**	-.320**	1.000	.447**	.143**	-.021	.620**	.380**	
12. Reintegration support	3.24	.77	.185**	.020	.052	-.124**	.140**	-.338**	-.058	.361**	-.205**	-.319**	.447**	1.000	.281**	.036	.552**	.336**	
13. Acceptance for pressure			.028	-.006	.005	-.012	.024	-.087**	.075*	.301**	.025	-.222**	.143**	.281**	1.000	.091	.287**	.343**	
(Partially) incorrect	28.8%																		
Correct	71.2%																		
14. Institutional pressure			.046	-.068*	.023	.003	.040	-.053	-.051	-.124**	-.017	.059	-.021	.036	.091	1.000	.002	.095*	
35-40%	31.2%																		
45-55%	31.5%																		
55-64%	15.0%																		
65-80%	22.4%																		
15. General wellbeing	3.45	.68	.241**	.076*	.108**	.073	.072	-.236**	.069	.512**	-.158**	-.331**	.620**	.552**	.287**	.002	1.000	.364**	
16. Professional support	3.87	.62	.218**	.038	.131**	-.132**	-.056	-.165**	-.012	.251**	-.049	-.285**	.380**	.336**	.343**	.095*	.364**	1.0000	

Note. N= 772, N =511 for professional support. * p < .05, ** p < .01

Table A4*Multiple regression model coefficients*

Variable	Model 1			Model 2			Model 3			Model 4			Model 5		
	B	SE B	β	B	Se B	β	B	Se B	β	B	Se B	β	B	Se B	β
Constant	-.520	.275		-.594*	.273		-.490	.256		-.483	.256		-.348	.280	
Sex	.144	.083	.072	.173*	.082	.086	.144	.077	.072	.150	.077	.075	.166*	.077	.083
Age	.011*	.005	.100	.012*	.005	.103	.010*	.004	.089	.010*	.004	.089	.010*	.004	.087
Ethnicity	-.260	.134	-	-.299*	.131	-.087	-.228	.123	-.066	-.221	.124	-.064	-.215	.123	-.062
Educational level	-.022	.023	-	-.011	.023	-.019	-.015	.021	-.027	-.018	.022	-.031	-.021	.021	-.037
Financial motivation			.075	-.124**	.042	-.124	-.060	.040	-.060	-.050	.042	-.050	-.052	.042	-.052
Desire to work			.038	.126*	.056	.126	.112*	.052	.112	.112*	.052	.112	.102*	.052	.120
Capability to work				.128**	.042	.128	.033	.041	.033	.024	.043	.024	.066	.044	.066
Work ethic				.111*	.042	.111	.105*	.048	.105	.108*	.048	.108	.120*	.048	.120
Work sphere support							-.308**	.038	-.308	-.304**	.038	-.304	-.324**	.038	-.324
Social support							.113**	.039	.113	.102*	.041	.102	.099*	.040	.099
Reintegration support										.035	.045	.035	.046	.045	.046
Acceptance of pressure													-.126**	.042	-.114
Institutional pressure													.083**	.032	.094
R ²	.019			.084			.200			.200			.218		
F	3.253			7.451			16.196			14.770			13.821		
F for change in R ²	3.253*			11.441**			46.965**			.612			7.077**		

Note. N= 772, * p < .05, ** p < .01

Appendix B

Quality of the data

An initial regression has been conducted to check the assumptions of multicollinearity, linearity, homoscedasticity and a normal distribution of the standardized residuals.

Multicollinearity was assessed by controlling the Variance Inflation Factor (VIF) of all variables entered in the model. These values were all below 5.0 and therefore, the assumption was met. Linearity was checked by the examination of scatter plots. No non-linearity has been observed; therefore, the assumption of linearity was met. The assumption of homoscedasticity was assessed by a scatter plot of the standardized residuals against the predicted standardized residuals. The variance was evenly spread and therefore, the assumption was met. The normal distribution of the residuals has been examined by a Probability Plot and a histogram of the standardized residual and was met. Finally, casewise diagnostics of the regression results showed an indication of possible outliers or influential scores. No problematic values were found as for Malahanobis or Cook's distance, but the range of standardized residuals was 3.650, indicating the presence of outliers. The leverage value of 0.023 was within the critical range of 0.010 to 0.084, which indicated that the outliers were not extreme or influential for the results. To be sure, the cases with standardized residuals higher than 3 have been excluded from the analysis.