

Job Satisfaction among Al-Kadhimiya Teaching Hospital's Medical Doctors

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Abstract

- Background** Physicians have a crucial role in health service delivery and therefore their job satisfaction may lead to improved quality in patient care and may cut down costs of care by reducing patient stay in the hospital.
- Objectives** To determine the level of job satisfaction among medical doctors who work at Al-Kadhimiya Teaching Hospital in Baghdad, Iraq.
- Methods** Cross sectional study was conducted at Al-Kadhimiya Teaching Hospital. The research questionnaires distribution time was from January 9th 2013- March 30th 2013.
- Results** Three hundred and twenty seven medical doctors participated in this study. Age mean was (35.8±8 years). Only (12.5%) of the participating medical doctors were satisfied with their job.
- Conclusion** The majority of medical doctors were not satisfied with their job at Al Kadhimiya Teaching Hospital.
- Key words** Job satisfaction, Teaching hospital, medical doctors.

Introduction

Job satisfaction and motivation are key organizational elements that ensure quality work, promote personal growth, maintain physical and psychological health, and decrease attrition ^(1,2). One of the primary reasons for evaluating employee satisfaction is to identify problems and try to resolve them before they impact on patient care and treatment ⁽³⁾.

Management needs information on employee job satisfaction in order to make sound decisions, both in preventing and solving employee problems ⁽⁴⁾. Employees who have higher job satisfaction are usually less absent, less likely to leave, more productive, more likely to display organizational commitment, and more likely to be satisfied with their lives ⁽⁵⁾. Hospitals are the key element in any health care system. Job satisfaction can be a powerful determinant

of patient satisfaction, and patient satisfaction in turn is related to compliance with medical regimens, improved patient care and better outcomes ^(6,7). Job satisfaction is important to the future recruitment of new doctors and retention of the existing doctors, in addition to the productivity and quality of the services provided by the doctors, who are an essential and integral component of medical care system ⁽⁸⁾.

Understanding trends in physician career satisfaction and how changes in the practice environments of physicians affect their career satisfaction is important for several reasons. First, physician satisfaction is associated with quality of care, particularly as measured by patient satisfaction. Second, dissatisfied physicians are more likely to leave the profession and discourage others from entering

⁽⁹⁾. Physician satisfaction is a critical topic not only for physicians but also for patients and health care administrators. When physicians are satisfied, they are significantly more likely to stay in a given practice and as a result, plan administrators are saved the financial costs associated with high turnover, as well as the decline in patient satisfaction that often accompanies high turnover ⁽¹⁰⁾.

The objectives of this study were:

1. To determine the level of job satisfaction among medical doctors who work at Al-Kadhimiya teaching hospital in Baghdad, Iraq.
2. To study the association between job satisfaction, the respondents' socio-demographic variables and professional characteristics such as: age, sex, marital status, highest academic or vocational degree, occupational title, total years of service at Al-kadhimiya Teaching Hospital, total years of service since employment, average weekly working hours, average monthly night shifts, monthly salary, doctor's housing evaluation, hospital's food service evaluation, choosing to be a medical doctor again and private practice.
3. To study the association between job satisfaction and different job's related factors such as: promotion, supervision, benefits, contingent rewards, operating procedures, co-workers, work and communication.

Methods

A cross-sectional study was conducted at Al-Kadhimiya Teaching Hospital. All medical doctors who work at Al-Kadhimiya Teaching Hospital at the time of conducting this research and met the inclusion criteria were invited to participate. The inclusion criteria were all medical doctors who were employed at Al-Kadhimiya Teaching Hospital at time of conducting this research with at least three months of professional service at the hospital were included in the study. Specialist doctors who were employees of the Ministry of Higher education and scientific research (Faculty member of Al-Nahrain Medical College) with a part-time work at the Ministry of

Health (at Al-Kadhimiya Teaching Hospital) were not included in this research.

The research questionnaires distribution time was from January 9th 2013- March 30th 2013. A pilot study was conducted on 10 medical doctors who were working at Al-Kadhimiya Teaching Hospital, their feedbacks made the researcher translate fourteen question of the job satisfaction survey to Arabic language either totally or a single word only in addition to its original English language (based on the pilot study; some doctors did not understand a particular word in a certain questions; while others did not understand a whole questions). Those ten medical doctors were not included later in the study. Participation in this research was completely voluntary.

The participants gave their verbal consent to participate after being briefed about the research objectives. The participants were advised to return the completed questionnaire within a month enclosed in a special envelope (size of A4 paper) which was provided by the researcher to each participant in addition to the research questionnaire. A structured self-administered questionnaire was used to collect data from the participants. It consisted of Section A: Socio-demographic and professional characteristics form consisting of 15 questions (10 closed-ended and 5 fill in the blank items) developed by the researcher plus two open ended questions.

Section B: consisted of Job Satisfaction Survey (JSS) developed by Spector (1985) ⁽¹¹⁾, JSS which is a 36 items, nine facet scales to assess employee attitudes about the job and aspects of the job. Each facet is assessed with four items, and a total score is computed from all items. A summated rating scale format is used, with six choices per item ranging from "strongly disagree" to "strongly agree". Items are written in both directions, so about half must be scored reversely. The nine facets are Pay, Promotion, Supervision, Fringe Benefits, Contingent Rewards (performance-based rewards), Operating Procedures (required rules and procedures), Coworkers, Nature of Work, and Communication.

JSS was developed, normed, and validated on human service personnel, making it of specific applicability to human services. The JSS seems to be a reasonable satisfaction scale for human service employees. Reliability data suggest that the total scale and subscale have reasonable internal consistency, and the limited test – retest data indicate good reliability over time ⁽¹¹⁾. Data entry and analysis was done by SPSS software (version 16). Level of significance was set at 0.05. Cronbach's Alpha was computed to ensure internal consistency of the measuring instrument. Inferential methods included Pearson correlation test, independent t test and one way ANOVA test.

Results

A total of 540 questionnaires were distributed. Out of these, 327 medical doctors from Al-Kadhimiya Teaching Hospital participated and successfully returned the completed questionnaire; the response rate was 60.55%. As shown in table 1; the age mean was 35.8 ± 7.9 years. 43.4% of the sample was between 30-39 years old. The mean of total years of service in Al-Kadhimiya Teaching Hospital was 3.56 ± 3.48 years. The mean total years of service since employment were 11.34 ± 7.72 years. The mean of approximate weekly working hours was 54 ± 22 hours. The mean monthly night shifts were 5 ± 4 month.

Table 1. Job related factors of the study population

Variables	Mean \pm SD	Median
Age (years)	35.80 \pm 7.905	34.00
Total years or service in Al-Kadhimiya Teaching Hospital	3.5606 \pm 3.48189	2.0000
Total years of service since employment	11.3416 \pm 7.71984	10.0000
Average Weekly working Hours	53.75 \pm 22.199	50.00
Average monthly night shifts	4.78 \pm 3.949	4.00

As shown in Table 2; 60.2% of the sample was male, 75.2% were married, 2.8% divorced, 20.2% single. 72.2% of them held MBChB degree, 72.2% earn 1-2 million Iraqi Dinar monthly, only 1.5% evaluated their residential housing as average, no one evaluated their residential housing as excellent, 3.4% evaluated their food service as good, no one evaluated it as excellent, 55.7% will choose to be medical doctors again, 59.6% did not have private practice, 53.8% were Permanent resident doctors (medical board or medical diploma trainee), 4.3% were junior resident doctors, 19.9% were permanent resident doctors, 22 % were specialist doctors. The results showed that 3.9% of the sample was dissatisfied, 53.5% of the sample was ambivalent and 12.5% of the sample was satisfied. The average overall job satisfaction score was found to be 116.72 (ambivalent), indicating neutral level of satisfaction among medical doctors at Al-Kadhimiya Teaching Hospital.

It has been found that the lowest average satisfaction factor was pay 10.39 ± 4.03 and the

highest average satisfaction factor was nature of work 16.6 ± 4.45 , which is also the only factor that the respondents were found to be satisfied with. Cronbach's alpha reliability for this study was determined by including all the nine factors of job satisfaction survey questionnaire (Pay, Promotion, Supervision, Benefits, Contingent rewards, Operating procedures, Coworkers, Nature of work, and Communication). Reliability analysis showed that the Cronbach alpha coefficient of the questionnaire was 0.839, which is considered relatively high and internally consistent ⁽¹²⁾.

The results showed (Table 3) a significant positive relationship between overall job satisfaction score and age in years ($r = 0.229$, $P = 0.000$), total years or service in Al-Kadhimiya Teaching Hospital, which was statistically significant ($r = 0.177$, $P = 0.01$) and total years of service since employment, which was statistically significant ($r = 0.215$, $P = 0.000$).

There was a weak, negative correlation (Table 3) between overall job satisfaction score and

average weekly working hours, which was statistically significant ($r = - 0.194, P = 0.000$), average monthly night shifts, which was statistically significant ($r = - 0.136, P = 0.014$).

As shown in table 4, this study found that medical doctors who are males and medical doctors who are females had no statistically significant difference in comparison to the overall mean job satisfaction score ($t (2.14), P = 0.145$). Choosing to be a medical doctor again or not and having private practice or not had statistically significant difference in comparison to the overall job satisfaction score ($t (13.34), P = 0.0003$) and ($t (25.13), P = 0.00001$) respectively. There was a statistically significant difference between groups as determined by one-way ANOVA based on (Table 5). Highest academic or

vocational degree attained ($F (4.145), P = 0.007$), the hospital food service evaluation ($F (4.172), P = 0.003$), occupational title ($F (3.975), P = 0.008$), monthly salary categories ($F (8.161), P = 0.000$), weekly working hours category ($F (4.587), P = 0.000$), Al- Kadhimiya Teaching Hospital total years of service category ($F (4.585), P = 0.001$), total years of service since employment category ($F (2.615), P = 0.012$), participants' age category ($F (3.598), P = 0.004$), and night shifts categories ($F (3.009), P = 0.030$).

There was a no statistically significant difference between groups as determined by one-way ANOVA based on their housing evaluation ($F (1.9), P = 0.110$) and marital status ($F (.812), P = 0.488$).

Table 2. Distribution of the socio demographic characteristics of the study population

Variable	Frequency	%	
Sex	Female	130	39.8
	Male	197	60.2
Marital Status	Divorced	9	2.8
	married	246	75.2
	single	66	20.2
	separated	0	0
	widowed/widower	5	1.5
Highest academic degree	MBChB	236	72.2
	Diploma	28	8.6
	MSc	7	2.1
	PhD	0	0
	Medical board or equivalent	56	17.1
Monthly salary	< 1 million ID	32	9.8
	1-2 million ID	236	72.2
	> 2 million ID	59	18.0
Hospital-Doctor's housing Evaluation	Not using the doctor's housing building	73	22.3
	Poor	82	25.1
	Below average	118	36.1
	Average	49	15.0
	Good	5	1.5
The hospital food service evaluation	Excellent	0	0
	Not using the Hospital's food service	70	21.4
	Poor	78	23.9
	Below average	99	30.3
	Average	69	21.1
Being a medical doctor again	Good	11	3.4
	Excellent	0	0
Non- Ministry of health Private practice *	No	131	40.1
	Yes	182	55.7
Occupational title	No	195	59.6
	Yes	125	38.2
	Junior RD	14	4.3
	Permanent RD	65	19.9
	Permanent RD (Medical board or diploma trainee)	176	53.8
Occupational title	Practitioner doctor	0	0
	Specialist doctor	72	22.0

* = missing values existed, ID = Iraqi Dinars, RD = resident doctor

Table 3. Pearson correlation test of overall job satisfaction score in comparison to various continuous characteristics

	Variables	Pearson Correlation Coefficient	P Value
Overall Job satisfaction score	Age (Years)	0.229	0.000
	Total years or service in Al-Kadhimiya Teaching hospital	0.177	0.001
	Total years of service since employment Average	0.215	0.000
	Weekly working Hours	-0.194	0.000
	Average monthly night shifts	-0.136	0.014

Table 4. Independent t test of overall job satisfaction score in comparison to sex of the participants, Choosing to be a medical doctor again or not and having Private practice or not

	Parameter		No.	Mean±SD	t	df	P value
Overall Job satisfaction score	Sex	Female	130	114.27±24.345	2.14	325	0.145
		Male	179	118.35±24.925			
	Choosing to be a medical doctor again or not	No	131	110.48±25.458	13.34	311	0.0003
		Yes	182	120.58±23.132			
	Private practice	No	195	110.98±25.646	25.13	318	0.00001
		Yes	125	124.69±20.781			

Table 5. ANOVA results between overall job satisfaction score, socio demographic and Professional characteristics

	Variables	No.	df1	df2	F	P Value
Overall Job satisfaction score	Highest academic or vocational degree attained	327	3	323	4.145	0.007
	Hospital-doctor's housing evaluation	327	4	322	1.900	0.110
	The hospital food service evaluation	327	4	322	4.172	0.003
	Occupational title	327	3	323	3.975	0.008
	Monthly salary	327	2	324	8.161	0.000
	Weekly working hours categories	326	5	320	4.587	0.000
	Weekly working hours categories	326	5	320	4.587	0.000
	Al-Kadhimiya Teaching Hospital total years of service category	327	4	322	4.585	0.001
	Total years of service since employment category	327	7	319	2.615	0.012
	Participants' age category	327	5	321	3.598	0.04
	Night shifts category	327	3	323	3.009	0.30
	Marital status	326	3	322	0.812	0.488

Discussion

The response rate was 60.5%. This response rate level could be attributed to their heavy workload, lack of motivation or both. A study from Northern Iraq in 2006 in the cities of Erbil and Kirkuk had shown that 75.8% responded as

always or usually, satisfied with their career as a physician. In this study, only 8.6% of the male doctors were found to be satisfied with their job. This big difference may be attributed to differences in methodology of research (for example only male physicians were included), or

to real difference in the level of job satisfaction. The northern part of Iraq has different health system administration ⁽¹³⁾. A study from Egypt has shown that the satisfaction level among medical doctors was 38.7% ⁽¹⁴⁾. A study from Kuwait (N = 60) has shown that 50% of the participating physicians were generally satisfied with their job ⁽¹⁵⁾. A study from Norway (N = 1174) in 2002 has shown an average of 52.0 on the job satisfaction scale (range 10 to 70) ⁽¹⁶⁾. A study from Pakistan (N = 99) has shown that overall job satisfaction was found to be 61.9% ⁽¹⁷⁾. A study from Japan (N = 698) has shown that 60% of the Japanese doctors were satisfied with their job ⁽¹⁸⁾. A study from India (N = 100) has shown that the proportion of doctors satisfied with their jobs in the teaching tertiary health care center were 69.5% ⁽¹⁹⁾.

This big difference in the satisfaction level among medical doctors from Iraq and medical doctors from the above-mentioned countries could be attributed to the current situation in Iraq in terms of lacking security and political instability. The more years the doctors spend in a hospital the more they accustom themselves to the work environment and the better co-workers relationship they can achieve. More total years of service mean more salary, maybe less working hours and to some extent more autonomy at work. Autonomy means freedom to make decisions without referring to a supervisor; autonomy to medical doctors came with more years of service; for example; a medical board trainee will become a specialist doctor when he/she finished their training period; once they became specialists, they are free to treat their patients without referring to their supervisors. More working hours mean more doctor-patient interaction, more psychologically demanding clinical decisions, more physical demand and may lead to job dissatisfaction in the end.

More night shifts mean more working hours in unsociable time, more days away from home and family, more doctors-patients interactions, more usage of the hospital services like housing and food services, which was not evaluated as

good by many of the doctors; all the aforementioned factors may solely or combined lead to job dissatisfaction. A study from India ⁽²⁰⁾ has revealed that increasing dissatisfaction with the number of night duties per month.

Although the current study has found no statistically significant association between overall Job satisfaction score and sex, doctor's gender and job satisfaction may be related to each genders' "suitable to do" in oriental community such as in Baghdad. For instance, a male doctors may have no or very few limitations on spending overnight shifts at the hospital, while a female doctor may find it a no easy task to do the same job; a night shift in a ward may be easier for a male doctor to stay in the resident room, while it may be a very difficult for a female doctor to do the same due to religious beliefs and traditions of the Iraqi society. A study from Egypt ⁽¹⁴⁾ has found that neither age nor gender was significantly associated with the degree of job satisfaction. Doctors who have private practice have more income, more money at hand can simply lead to better living standards, better living facilities, and that may lead to job satisfaction. Doctors' academic or vocational degrees and their occupational titles are much related, as most doctors who have only Bachelor degree in medicine are most likely not specialists and their work burden are expected to be heavier, which might be a source of their dissatisfaction. Occupational title and job satisfaction can be understood as the higher hierarchy the doctor might reach the more autonomous, the more salary he/she gets, and possibly less night shifts. The researcher believed that salary by itself can't simply lead to satisfaction or dissatisfaction because as the results have shown that pay was the least satisfying factor that medical doctors evaluated. Weekly working hours and job satisfaction is an intricate issue, as there are no time limits for the work of resident doctors and their salary is never increased on a working hour basis, as a matter of fact, it may decrease, if a doctor gets punished. Residents are not treated as government employees; they are treated as

under training personnel on contract basis. Pathman reported that physicians in the oldest age group indicated greater satisfaction than younger physicians⁽²¹⁾. The Norwegian study⁽¹⁶⁾ has found that there was a moderate positive correlation with age (job satisfaction increased with increasing age). A study from India has found no statistically significant association between age of the doctors and job satisfaction⁽²⁰⁾. The relationship between total years of service in Al-Kadhimiya Teaching Hospital and the job satisfaction may be related to better use of the work environment and better co-workers relationship over newly employed. For instance, a newly specialist doctors might not find an office to him or herself which could be a source of their dissatisfaction, while a nearly retired doctor has his/her own office in the hospital for many years ago, and he or she is not ready to leave his office until retirement.

The researcher believed that the real reason behind satisfaction is not years by itself, but the lesser workload, the higher wages, the more preferential treatment by the administration that usually came with more years of service in a particular place of work. More working hours means more doctors-patients interactions at most in a heavy workload environment it may lead to physical and psychological exhaustion, which might be the reason of dissatisfaction. More night shifts simply means more hospital works, more doctor-patient interactions, more decisions at work to be made; All combined can lead to dissatisfaction and may be even confrontation at work. A study from India⁽²⁰⁾ has found that dissatisfaction was significantly greater among doctors who had an average of ≥ 8 night shifts per month (i.e., twice a week).

We can conclude that the majority of medical doctors were not satisfied with their job at Al-Kadhimiya Teaching Hospital.

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