

*Full Length Research Paper*

# Impact of job involvement on employee satisfaction: A study based on medical doctors working at Riphah International University Teaching Hospitals in Pakistan

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**This study examines the relationship between job involvement and employee satisfaction with specific reference to medical doctors working at Teaching Hospitals of Riphah International University, Islamabad-Pakistan. Data was collected from 127 medical doctors. The results indicate that job involvement has a significant impact on medical doctors' satisfaction working at Teaching Hospitals of Riphah International University. Strategies and recommendations are also discussed.**

**Key words:** Job involvement, job satisfaction, hospital physicians, turnover.

## INTRODUCTION

The Hippocratic Oath requires that "physician shall uphold the standards of professionalism, be honest in all professional interaction and strive to report physicians' deficient in character or competence or engaging in fraud or deception, to appropriate entities". Professional work comprises of exercise of knowledge, skills and discretion-ary judgments. These attributes are developed through commitment of professionals to their professions, to their particular sphere of work and the advancement of body of knowledge.

Medical profession is regarded as one of the noblest professions in the world. It is only natural that professional bodies as well as the general public expect the medical practitioners to demonstrate the highest standards of professionalism (Alam and Haque, 2010). They are also expected to adhere to these high standards even in the face of such adversity as unfavorable job environ-ment, poor conditions and low earning levels. In order to sustain the trust of the people, the medical professionals must prove their commitment to competence, integrity, morality and altruism. One of the best ways to strengthen their professionalism is to apply these attributes in their daily practices. However, the major changes in demo-graphic patterns, composition of the employment sector, increasing consumerism coupled with declining moral

standards are increasingly exerting pressure on professionalism (Alam, 2009). The medical profession is no exception. In the current era of information exposure and rapid globalization, no country can place its professionals, be they of any discipline, in quarantine. The medical profession in Pakistan is also being affected by the international trends, both positively and negatively. The level of job satisfaction among doctors, especially young doctors, appears to be declining, as they are often found complaining about their inappropriate working conditions, lack of career development opportunities, inadequate compensation and exhaustive working hours etc. The people, however, generally remain indifferent to these factors and continue to believe that the doctors must show and comply with exemplary standards of professionalism, merely on the basis of their job involve-ment and commitment. The profession is perceived to be a service to the ailing humanity and its members are required to rise above personal interests while performing their duties.

Though a number of studies (Murray et al., 1986; Nadler, 1999; Linzer et al., 2000; Landon et al., 2006; De Voe et al., 2007; Janus et al., 2007; Byrd et al., 2000; Peng et al., 2010, Judith et al., 2009) have been done to measure the extent of and the contributors to job satisfaction among medical practitioners, this study intends to investigate and measure the impact of job involvement on the level of job satisfaction. In order to find the direct impact of job involvement, no other contributors to job satisfaction have been included in the study.

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The study is based on the data collected from the medical doctors serving at the Teaching Hospitals of Riphah International University (RIU), Islamabad, namely Pakistan Railway Hospital (PRH), Rawalpindi, Islamic International Medical Complex (IIMC), Islamabad and Islamic International Dental Complex (IIDC) Islamabad. The sample is a blend of doctors of various disciplines like medicine, surgery and dentistry.

### **Problem statement**

RIU is actively pursuing the policy of improving the healthcare infrastructure and standards of patient care services at its Teaching Hospitals. The quality of the doctors and their professionalism at the job is one of the major contributory factors for achieving the targeted high standards. The professionalism of doctors largely stems from the overall job environment in general and their level of job satisfaction in particular. It is generally believed that job involvement has a positive relationship with job satisfaction. In view of the RIU's mission, to promote and practice Islamic ethics and values in all spheres of its activities, the doctors serving at its teaching hospitals are expected to show greater commitment to the profession and derive satisfaction from dedication to and involvement with their job. However, no scientific study has been done to measure this particular aspect at any of the RIU's teaching hospitals to date.

### **Research question**

Does job involvement impact the level of job satisfaction of the medical doctors serving at the Teaching Hospitals of RIU? If so, what is the extent of this impact and what is the nature of this impact, positive or negative?

### **Scope of the study**

The study would be cross sectional, primary data based. All the doctors, from House Officers to Consultants/ Professors of all the three Teaching Hospitals will be included in the study.

### **Study variables**

The problem statement intends to test the impact of job involvement (independent variable) on job satisfaction (dependent variable). Therefore, the study would be directed towards measuring the causal outcome between these two variables. Job involvement is defined as "the degree of psychological identification an employee has with his/her role in the workplace" (Kannungo, 1982; Robinowitz and Hall, 1977). Job satisfaction is defined as "an employee's satisfaction with the feelings of success

achieved from the job, the enjoyment of performing the duties of the job and the level of autonomy associated with the job (Yilmaz, 2002).

## **LITERATURE REVIEW**

The concept of job involvement was first introduced by Lodahl and Kejiner (1965). They related the job involvement to the psychological identification of an individual with the work or importance of work in the individual's self image. It has a direct correlation with job satisfaction and also influences the work performance, sense of achievement and unexplained absenteeism (Robinowitz and Hall, 1977). However, there is a significant difference in the level and extent of job involvement in different types of work (Tang, 2000).

Job satisfaction is one of the most researched concepts. It is regarded as central to work and organizational psychology. It serves as a mediator for creating relationship between working conditions, on the one hand, and individual/organizational outcome on the other (Dormann and Zapf, 2001).

It is generally believed that doctors are increasingly showing dissatisfaction with their jobs. A cross sectional study carried out in the USA, in 1986 (Medical Outcome Study) and 1997 (Study of Primary Care Performance in Massachusetts), conducted by Murray and colleagues, found a declining trend in the satisfaction level among general internists and family practitioners of Massachusetts (Murray et al., 2001). Though the doctors have achieved noticeable success in terms of career and finances, they often remain over worked and stressed. Consequently, the frustration, anger and restlessness are leading many of them to lose sight of their career goals and personal ambitions. Another study concludes that the workload, unsuitable working hours and lack of incentives are the major contributors to the dissatisfaction of public health care physicians in Riyadh, Saudi Arabia (Kalantan et al., 1999).

A study, based on the data acquired at the Teaching Hospital of Bahawalpur, concluded that "most of the doctors in all ranks and with different qualifications were found not satisfied with their jobs due to lack of proper service structure and low salaries" (Ghazali et al., 2000). There are also other reports of declining career satisfaction due to declining professional autonomy (Toedtm, 2001). A study conducted among Korean physicians also concluded that overall job satisfaction of physicians was extremely low (Lee et al., 2008).

In order to understand the dynamics of job involvement and job satisfaction, the underlying contributing factors need to be looked at before ascertaining the impact of one on the other. Previous studies have found that factors like income, relationships, autonomy, practice environment and the market environment are important domains that influence physician satisfaction (Mello et al., 2004). Hafer and Martin (2006), quoting from other

studies (Freund, 2005; Clinebell and Shadwick, 2005; Van Dyne and Pierce, 2004; Leong et al., 2003), have pointed out that job involvement had been associated with work related attitudes as well as subsequent predictor of work related outcomes such as “intentions to leave an organization, professional commitment and ethical behavior, psychological ownership for ownership and performance, lower role conflict and role ambiguity and an employee’s readiness to change.

Job involvement is the way a person looks at his job as a relationship with the working environment and the job itself. How job involvement generates feelings of alienation of purpose, alienation in the organization or feeling of separation between life and job as perceived by an employee. This creates co-relation between job involvement and work alienation (Rabinowitz and Hall, 1981).

Hellriegel and Slocum (2004) have argued that since satisfaction is a determinant of the work experience, it follows that high levels of job dissatisfaction are indicators of deeper organizational problems. Job dissatisfaction is strongly linked to absenteeism, turnover, and physical and mental health problems (Richardson and Burke 1991; Bhananker et al., 2003; Rosta and Gerber, 2007). It can be safely concluded that job satisfaction has a strong relationship with organizational commitment. The workers who are attracted by the job and organization turn out to be most motivated. This is because their organizational commitment and job involvement is of a very high level. They identify with and care about their jobs.

Dissatisfaction among the medical professional is not a recent phenomenon. Excessive work load, demand on time and bureaucratic working environment had been the traditional irritants leading to low level of job satisfaction among the doctors (Lee et al., 2008). More areas of dissatisfaction have been identified by the recent studies which relate to decreased professional autonomy over clinical decisions and reduced time per patient (Murray et al., 2001). A study, conducted in Asian context, (Peng, 2010), while endorsing the work of Boles et al. (2001) concluded that work interfering with family (WIF) was negatively and significantly associated with work satisfaction. As demand on the time of physicians is normally much higher than the other corporate and routine jobs, they are more likely to be affected by WIF, especially the doctors in Pakistan. Another recent study (Judith et al., 2009), based on national samples from Norway and Germany, compared the job satisfaction levels of doctors in these countries. The study found that the satisfaction level of the hospital doctors of Norway was higher than their counterparts in Germany. The major differences in the job satisfaction levels were attributed to the items “work hours” and “payment”. An earlier longitudinal study (Nylenna et al., 2005), conducted from 1994 to 2002, had also found high level of job satisfaction among Norwegian doctors. These findings challenged the “general impression of unhappy doctors as a general and worldwide phenomenon.

Measuring the level of job satisfaction among the medical professional purely on the basis of job involvement may provide a new dimension to the findings of the previous studies. The job involvement of the medical practitioners, in this study, is being looked at from the point of view of commitment to the profession due to its nobility and service to the humanity rather than due to the factors traditionally identified with this concept.

## **METHODOLOGY**

### **Sample**

The study covered all the doctors from House Officers to Consultants/Professors serving in the three Teaching Hospitals (PRH, IIMC, IIDC) of RIU (faculty members not involved in clinical practice are excluded).

### **Measure**

In order to select the tools for measurement of both the study variables, the scales developed by White and Ruth (1973) (Job Involvement) and Cammann et al. (1979) (Job Satisfaction) were discussed with the administrators and senior doctors (Consultants/Professors) of the three hospitals under study. Keeping in view the working environments of these hospitals and the purpose of the study, the proposed scales were duly approved by them as suitable and adequate for the intended purpose. The instrument, in the form of a questionnaire, used for investigation has, therefore, been adopted as follows:

a) Job involvement was measured by 9 items taken from job involvement scale of White and Ruh (1973). Each item was measured on a five point Linkert scale where value of 1 corresponded to “Strongly Disagree” and value of 5 corresponded to “Strongly Agree”. Mean of the scores obtained on each of the 9 items was calculated to produce a single score for job involvement.

b) Job satisfaction was measured by 19 items taken from Cammann et al. (1979). Each item was measured on five point Linkert scales where value of 1 corresponded to “Strongly Disagree” and value of 5 corresponded to “Strongly Agree”. The scores obtained on each of the 19 items were converted into mean to produce single score for job satisfaction.

The final version of this questionnaire consisted of 28 questions using five point Linkert Scale and six demographic aspects.

### **Procedure**

Data were collected, on site, over a period of 10 days from the pre determined sample. Purpose of the study and the questionnaires were discussed with the administrators of the hospitals. One officer at every hospital, duly briefed about the various aspects of the questionnaire, was nominated to personally distribute and later collect the questionnaires from the respondent. A total of 140 questionnaires were distributed among the doctors at three hospitals of which 127 completed questionnaires were received back. Thus, the respondents represent 90.71% of the selected population which is a fairly high level of response. Non response from a few is mainly attributed to the doctors being on leave during the period of investigation.

**Table 1.** Correlation matrix.

	<b>Job satisfaction</b>
<b>Employee involvement</b>	0.43**

\*\*p ≤ 0.01 , n =127.

**Table 2.** Regressions analysis.

<b>Independent variable</b>	<b>Beta</b>	<b>t-value</b>	<b>P-value</b>
Job involvement	0.43	5.43	0.000

n = 127; R<sup>2</sup> = 0.19; Adjusted R<sup>2</sup> = 0.18; F = 29.48; Significance F = 0 .000; Dependent variable = Job satisfaction.

## RESULTS AND DISCUSSION

The correlation analysis indicate a significant relationship of 0.43\*\* (\*\*p < 0.01) (Table 1). Thus, it supports hypothesis of study that the doctors' job satisfaction at Teaching Hospitals of RIU depends to good extent upon their job involvement. The regression analysis indicate that only 19% variance in the dependent variable is explained by the independent variable (Table 2). This low value indicates that there are other variables which contribute towards job satisfaction of doctors working at Teaching Hospitals of RIU. The Beta value and t value also show a significant value which proves the hypothesis of current study. The results of this study are consistent with results obtained in study conducted by Huselid and Becker (1998).

However, the conclusion drawn by Hellriegel and Slocum (2004), that job dissatisfaction is strongly linked to absenteeism, turn over, and physical and mental health problems, does not seem to hold true in this case study. On an inquiry, the administrators of all the three hospitals under study confirmed to the authors that they do not face any serious problems of absenteeism, turnover or extraordinary complaints about physical and mental health from their doctors. The phenomenon shows that the doctors under study have registered a high level of job commitments whereas their job satisfaction is relatively low. There are, therefore, other factors at play which are inducing the doctors not to indulge in absenteeism, turn over etc., despite their relative dissatisfaction with the job. An earlier study (Richardson and Burke, 1991) has identified that other factors, like to treat patients, to be in demand and to enjoy the status of the medical profession, were fundamental to doctors' satisfaction.

The administrators and doctors at these hospitals were asked to express their opinion about importance of job involvement at their work place. Detailed discussion revealed that the phenomenon can be attributed to the fact that the hospitals under study have been established with a mission to practice ethical values, with focus on a service for community rather than

financial gains. The doctors who join these hospitals mostly come with a mission aligned with organizational objectives. The doctors expressed their desire to be able to work at a place where they could comfortably practice Islamic ethics and values. Their hospitals were providing environments conducive to this objective. Hence, apart from other factors, job involvement is one of the key factors which keep these doctors away from negative practices such as absenteeism and high turn-over etc. If the behavior of the doctors, as explained above, can be termed as "positive emotion, the phenomenon may be further supported by the finding of the study carried out by Judge et al. (2001). It concluded that when the performance is regarded as being broader than the simple task performance, positive emotions lead to higher performance.

The study contributes towards explaining importance of employee involvement in job satisfaction. The findings also suggested that management might be able to increase the level of satisfaction with increasing the interactions with doctors in staff meetings. Doctors could be interviewed to determine their perceptions of management's ability to address these issues. Most of the Pakistani organizations do not realize the importance of job involvement which as per the present study, is one of the key contributing factors towards job satisfaction.

## Conclusion

The primary objective of this research was to study the impact of job involvement on the level of job satisfaction of doctors serving at the Teaching Hospitals of RIU. This study has empirically demonstrated that job involvement has a positive relationship with the level of job satisfaction among the selected sample of doctors. The study has highlighted another interesting aspect that higher level of job involvement is instrumental in eliminating, or at least considerably reducing, the negative outcomes, normally associated with job dissatisfaction like absenteeism, turn over, and physical and mental health

problems (Hellriegel and Slocum, 2004). This finding may be important for a professional manager who may be confronted with such negative outcomes. Turnover, alone, can prove to be a costly affair (Kickbursch et al., 2003), due to its direct and indirect costs, which include loss of performance and expertise, recruitments, training expenses etc. The hospitals, in particular, would be keen to avoid the high turnover, which inter alia results in inexperienced staff, leading to decline in service quality.

However, as the factors influencing the job involvement levels of doctors appear to be different from the other professionals, further studies would be required to assess whether this aspect would also be valid for non-medical professionals as well or not. The hospital manager may consider adopting the policies which may foster higher levels of job involvement. This may also be an effective strategy to increase the level of job involvement among the doctors and, in return, reap the benefits of the higher efficiency and greater patient satisfaction. More investment in conditions that are conducive to increasing the job involvement would achieve higher level of job satisfaction, ultimately leading to increased patient satisfaction and organizational growth.

## LIMITATIONS OF THE STUDY

It is important to note that this study is based on predetermined population comprising of the doctors serving at the three teaching hospitals of RIU. As these hospitals are being managed by the same authority (RIU), the doctors are working under the same policies and, more or less, in the similar working environment. This may limit the generalizability of the findings to other settings and population. Thus, further research should attempt to replicate and extend these findings to different samples in different organizational setting.

## REFERENCES

- Alam GM, Hoque KE (2010) Who gains from “Brain and Body Drain” Business -Developing/developed world or individuals: A comparative study between skilled and semi/unskilled emigrants. *Afr. J. Bus. Manage.*, 4(4): 534-548
- Alam GM (2009). The role of science and technology education at network age population for sustainable development of Bangladesh through human resource advancement. *Sci. Res. Essays*, 4(11): 1260-1270
- Bhananker SM, Culler BF. Resident work hours (2003). *Curr. Opin. Anaesthesiol.*, 16:603-619
- Boles JS, Howard WG, Donofrio HH (2001). An investigation into interrelationship of work-family conflict, family work conflict and work. *J. Manage. Issu.*, 13: 376-390
- Cammann C, Fichman M, Jenkins D (1979). Overall Job Satisfaction. Clinebell S, Shadwick G (2005). The importance of organizational context on employees' attitude: an examination of working in main offices versus branch offices. *J. Leadersh. Organ. Stud.*, 11(2): 89-100.
- Freund A (2005). Commitment and job satisfaction as predictor of turnover intentions among welfare workers. *Adm. Soc. Work*, 29(2): 5-21.
- Daniel MC, Charles KP (2001). Socialization Tactics and Person. *Organ. Fit Personnel Psychol.*, 54(1): 1- 23.
- Hafer JC, Martin TN (2006). Job Involvement or Affective Commitment: A Sensitivity Analysis Study of Apathetic Employee Mobility. Institute of Behavior and Applied Management.
- Hamermesh DS (2001). The Changing Distribution of Job Satisfaction'. *J. Hum. Resour.*, 36(1): 1-30
- Hellriegel D, Slocum J (2007). *Organizational Behavior*, Tenth Edition. South Western, Canada Thomson
- Huselid M, Becker B (1996). Methodological issues in cross-sectional research and panel estimates of the human resource – performance link'. *Ind. Relat.*, 35: 400–422.
- Janus K, Amelung VE, Gaitanides M, Schwartz FW (2007). German physicians “on-strike”- shedding light on roots of physicians dissatisfaction. *Health Pol.*, 82: 357-365
- Judith R, Magne N, Olf GA (2009) Job satisfaction among hospital doctors in Norway and Germany .A comparative study on national sample. *Scand J. Pub. Health*, 37:503-508
- Judge TA, Thoresen CJ, Bono JE, Patten GK (2001). The job satisfaction, job performance relationship: A qualitative and quantitative review. *Psychol. Bull.*, 127(3): 376-407
- White JK, Ruh R (1973) .Effects of Personal Values on the Relationship between Participation and Job Attitudes. *Adm. Sci. Q.*, 18(4): 506-514.
- Kanungo RN (1982) .Measurement of job and work involvement. *J. Appl. Psychol.*, 67(3): 341(9).
- Kickbusch R, Price W, Theis J (2003). Turnover predictors: Causes of employee turnover in sheriff-operated jails. *Crim. Justice Stud.*, 16: 67-76
- Landon BE, Reschovsky JD, Pham H, Blumental D (2006). Leaving Medicine: the consequences of physician dissatisfaction. *Med. Care*, 44(3): 234-242
- Lee HY, Park SE, Park EC, Hahm MI, Cho WH (2008). Job satisfaction and trust in Health Insurance Review Agency among Korean physicians. *Elsevier J. Health Pol.*, 249-257.
- Leong L, Huang SY, Hsu J (2003). An empirical study on professional commitment, organizational commitment and job involvement in Canadian accounting firms. *J. Am. Acad. Bus.*, 2(2): 360-370.
- Linzer M, Konrad TR, Douglas J (2000). Managed care, time pressure, and physician job satisfaction: results from the physician work life study. *J. Gen. Int. Med.* 14: 441-450
- Lodahl TM, Kejner M (1965). The definition and measurement of job involvement'. *J. Appl. Psychol.*, 44, 24-33.
- Murray A, Montgomery JE, Chang H, Rogers WH, Inui T, Safran DG (1986). Doctor Discontent A Comparison of Physician Satisfaction in Different Delivery System Settings, 1986 and 1997. *J. Gen. Int. Med.*, 16(7): 452-459(8).
- Nadler E, Sims S, Tyrance P, Fairchild D, Bernnan T, Bates D (1999) Does a year make a difference? Changes in physician satisfaction and perception in an increasingly capacitated environment. *Am. J. Med.*, 107:38-44
- Nylenna M, Gulbrandsen P, Ford R, Aasland OG (2005). Unhappy doctors? A longitudinal study of life and job satisfaction among Norwegian doctor. *BMC Health Serv. Res.*, 1994- 2002.
- Peng W, John J, lowler K (2010). Work-family conflict, self efficacy, job satisfaction, and gender: Evidence from Asia. *J. Leadersh. Organ. Stud.*, 17(13) 298-308
- Rabinowitz S, Hall DT (1977). Organizational research on job involvement'. *Psychol. Bull.*, 34: 265-288.
- Richardson AM, Burke R (1991). Occupational stress and job satisfaction among physicians: Sex differences. *Soc. Sci. Med.*, 33:1179-1187.
- Rosta J, Gerber A (2007). Excessive working hours and health complaints among hospital physicians: A study based on a national sample of hospital physicians in Germany
- Shearer S, Toedt M (2001). Family physicians observations of their practice. *Well Being Health Care United States*, 50(9): 751-6.
- Tang CT (2000) .The study on “How work value and job characteristics influence the job involvement and intention to quit of the internal auditors in Taiwan. Unpublished master's thesis, National Sun Yat-Sen University, Kaohsiung, Taiwan, ROC.

The Hippocratic Oath (2001). Principals of Medical Ethics – Adopted by AMAJ House of Delegates.

Van Dyne L, Pierce JL (2004). Psychological ownership and feelings of possession: Three field studies predicting employee attitude and organizational citizenship behavior. *J. Organ. Behav.*, 25(4): 439-459.

Yilmaz C (2002). Salesperson performance and job attitudes revisited: an extended model and effects of potential moderators. *Eur. J. Mark.*, 36(11/12): 1389 – 1414.