



Satisfaction of Physicians Working in a Referral Hospital in Tehran, Iran in 2019

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Received January 10, 2020; Accepted May 24, 2020; Online Published June 11, 2020

Abstract

Background: Physicians' satisfaction is closely related to the effectiveness of health services, including quality of services as well as patient compliance, satisfaction, and outcomes.

Objectives: This study was designed to examine the job satisfaction level of physicians working at a referral hospital in Tehran.

Methods: This research was a descriptive study performed on a population of physicians working at a referral hospital from April to August 2019. The sample size was calculated as 120 subjects. The Physicians' Job Satisfaction Questionnaire (PJSQ), which is a valid questionnaire, was used as the data collection tool. The collected data was entered into SPSS Statistics 20. Mann-Whitney and t tests were used for data analysis.

Results: The frequency of female and male physicians was 50 (38.2%) and 81 (61.8%), respectively. The total mean of Job satisfaction in physicians was 51 ± 7.05 . Overall satisfaction scores were 70.7 ± 15.1 , 51.5 ± 11.1 , 49.8 ± 13.1 , 49.5 ± 11.2 , 44.1 ± 9.3 , and 40.5 ± 11.9 in domains of income satisfaction, physicians' satisfaction with management, relationship between physicians and their colleagues, patients, staff, and physicians' job satisfaction, respectively. 87% of physicians participating in this study were not willing to leave their jobs. The income satisfaction of the female physician group was significantly higher than that of men ($P=0.029$). The income satisfaction of subspecialists was significantly higher than that of specialists ($P=0.022$). The job satisfaction of physicians who were not faculty members was significantly higher than that of physicians who were faculty members ($P=0.034$).

Conclusion: The job satisfaction level of physicians working at a referral hospital in Tehran was moderate. Income satisfaction and job satisfaction were the highest and lowest levels of satisfaction, respectively.

Keywords: Satisfaction, Job, Physicians, Iran

1. Background

Job satisfaction is considered to be a set of compatible or incompatible feelings that employees hold toward their jobs. In fact, it is an emotional state resulting from job evaluation, the emotional reaction to the job, and an individual's attitude toward his/her job.¹

Previous studies have categorized factors that determine job satisfaction into three groups: personal characteristics, comprising age, gender, education level, race, and marital status; occupational characteristics comprising absolute and relative income, working hours, number of responsibilities, and attitude toward the job; and workplace characteristics, comprising number of employees, expertise, control over workplace, and support from colleagues.^{2,3}

New policies that have been enforced in recent years have resulted in increases to physicians' workload, stress,

and responsibilities on the one hand, and decreases in their autonomy and income in some disciplines, even major ones⁴. Physicians' satisfaction in all places and specialties is no longer acceptable. Physicians' job satisfaction levels in a wide range of occupational dimensions have been reported to be between 27% and 96%.⁵⁻⁷

A study in the United States showed that physicians' job satisfaction declined between 1997 and 2001. This study reported that 42.4% of family physicians and 43.3% of specialists had a very high level of job satisfaction in 1997, while about 38.5% of family physicians and 41.4% of specialists showed a very high level of job satisfaction in 2001.⁸ Job satisfaction is a multidimensional concept suggesting that people may be satisfied with some aspects of a job and at the same time dissatisfied with others. Some dimensions of job satisfaction are more important

and can affect overall job satisfaction among specialists to a greater degree. Such dimensions are income, weekly working hours, gender, number of on-call hours, lifestyle, and difficulty of job.⁹

Physicians' satisfaction is closely related to the effectiveness of their services, including the quality of care they provide, patient's compliance to recommended care and treatment, patient satisfaction with received services, and patient's health outcomes.¹⁰ Job satisfaction not only increases the work efficacy of physicians, but also affects their own physical and mental health.^{11,12} Thus, physicians' satisfaction level is important, as it can affect their health as well as the health of patients and decisions of managers and policymakers.

2. Objectives

This study was designed to examine the level of satisfaction of physicians working at a referral hospital in Tehran due to the importance of this issue and the fact that job satisfaction among physicians working at the hospital has not been studied from different dimensions yet.

3. Methods

This research is a descriptive cross-sectional study. The study population consisted of all physicians working at a referral hospital in Tehran, Iran from April to August 2019. Stratified random sampling was conducted on different groups of physicians, and all general practitioners, specialists, and subspecialists, permanent and contractual physicians, physicians who are faculty members, and who are not faculty members, full-time and part-time physicians working at the hospital in Tehran were asked to respond to questions. Inclusion criteria included being 30 to 50 years of age and consenting to participate in the study. Responding to less than 50% of the questions was the exclusion criterion.

The sample size was calculated to be 169 people using Morgan's formula, and it was corrected to 108 people using the limited population formula; 120 people were included by considering a population loss of 10%. The necessary coordination was made with the Vice President for Research and Technology of the hospital to collect data after the research plan was approved by the University Research Council and a code of ethics was obtained. Using the simple random sampling method, a sample of physicians with moderate financial performance who worked at least two days per week at the hospital was selected. The Standard Physicians' Job Satisfaction Questionnaire (PJSQ), whose validity and reliability was previously proven in a study by Alaghehmand et al, was used as a data collection tool.¹³ The explanatory factor analysis of PJSQ showed 4 factors with 53.6% total variance and 0.85 Kaiser-Meyer-Olkin Index. The reliability was determined to be 0.83 using the Cronbach's Alpha method. The PJSQ includes 6 components (relationship with patient, relationship with colleagues, relationship with staff, income satisfaction, satisfaction with management, satisfaction with working

as a physician) and 33 sub-components and is based on a 5-point Likert scale. Questionnaires were distributed and collected (after completion) by a trained researcher who visited the study subjects in person and asked for their approval to collect data. Physicians who did not intend to cooperate were excluded from the study.

Data from the questionnaires was entered into SPSS Statistics 20 software. The percentages of frequency of distribution, mean and standard deviation were used consecutively to perform descriptive statistical tests for qualitative and quantitative variables. Moreover, Mann-Whitney and *t* test were used as inferential statistical tests. The significance level was set at 5% in this study.

4. Results

A total of 131 physicians were studied. The frequency percentage of male physicians was higher than female physicians (61.8%). The descriptive characteristics of patients are shown in Table 1. The highest overall satisfaction score among dimensions of overall job satisfaction equaled 70.7 ± 15.12 and belonged to the overall income satisfaction dimension. The lowest overall satisfaction score among dimensions of overall job satisfaction equaled 40.5 ± 11.99 and belonged to the dimension of overall satisfaction with working as a physician. The overall job satisfaction score was determined to be 51 ± 7.05 in the domain of physician's satisfaction with management (Table 2).

Most of the physicians that took part in this study were reluctant to leave their jobs (87%). The average scores of overall satisfaction for male and female physicians were not significantly different in any dimension except income satisfaction; the income satisfaction of female physicians was significantly higher than that of male physicians ($P=0.029$). Furthermore, the average score for the income satisfaction dimension of subspecialists was significantly higher than that of specialists ($P=0.022$). Average satisfaction score in the dimensions of relationship with patients, relationship with colleagues, relationship with staff, management, satisfaction with working as a physician, and overall satisfaction of both groups had no statistically

Table 1. Descriptive Characteristics of Physicians Participating in the Job Satisfaction Study

		Percent	No.
Gender	50	38.2	Female
	81	61.8	Male
	131	100	Total
Education level	5	3.8	General practitioner
	82	62.6	Specialist
	44	33.6	Subspecialist
	103	100	Total
Faculty member	77	58.8	Yes
	54	41.2	No
	131	100	Total
Full-time physician	60	49.3	Yes
	62	51.7	No
	122	100	Total

Table 2. Comparison of Mean and Standard Deviation of Medical Job Satisfaction Components in the Studied Physicians

	Component	Mean	S.D
Relationship with the patient	The feeling of a good relationship with the patient	28.5	10.2
	Patient's reasonable and fundamental requests	58.0	18.5
	Not considering time constraints as a barrier to having a proper relationship with the patient	55.0	22.0
	Ability to provide optimum healthcare most of the time	60.8	20.8
	Allocating enough time to provide the care that patients need	45.6	17.7
	Overall satisfaction with the domain of relationship with the patient	49.5	11.2
Relationship with colleagues	Getting positive incentive from other physician colleagues	59.7	19.6
	Spending good times with physician colleagues	45.3	17.4
	No work conflict with physician colleagues	47.3	16.4
	Timely support from my colleagues	47.0	17.5
	Overall satisfaction with the domain of relationship with colleagues	49.8	13.1
Relationship with staff	Staff acceptance of my diagnosis during the therapeutic procedure	37.1	9.9
	Proper cooperation of other employees when providing medical services	41.7	13.4
	Reliable compliance of other staff members with clinical standards during the therapeutic procedure	51.8	17.7
	Proper support from other staff members when providing medical services	45.8	13.7
	Overall satisfaction with the domain of relationship with staff	44.1	9.3
Income satisfaction	Fairness of a total reward paid to me	66.8	20.7
	Suitability of proper criteria for merit pay	72.7	20.1
	Proportionality of paid reward with my expertise and experience	71.4	17.1
	Suitability of paid reward compared to other medical specialties	72.0	18.0
	Overall income satisfaction	70.7	15.1
Satisfaction with management	Availability of medical facilities and equipment when needed	48.6	18.9
	Suitability of my room space for visiting the patient	45.0	19.9
	How logical and scientific are decisions of chief physician	58.4	17.8
	Good job performance of senior hospital managers	57.7	17.6
	Good managing skill of chief physician of each department (ward)	49	19.03
	Overall physician's satisfaction with management	51.5	11.1
Satisfaction with working as a physician	Sense of belonging to the workplace and considering myself as a member of this workplace	34.7	15.3
	Overall satisfaction with my job	36.8	12.8
	My promising occupational status	43.7	18.9
	Conformity of working as a physician with my expectations and desires	51.5	20.8
	Choosing to be a physician again if there were other options	35.2	18.5
	Overall satisfaction with working as a physician	40.5	11.9
	Overall job satisfaction	51	7.05

significant difference ($P>0.05$).

The average score of the dimension of medical job satisfaction of physicians who were not faculty members was significantly higher than that of physicians who were faculty members ($P=0.034$). The average scores of satisfaction in the dimensions of relationship with the patient, relationship with colleagues, relationship with staff, income level, management, medical job satisfaction, and overall satisfaction were not significantly statistically different in either group studied ($P>0.05$).

5. Discussion

The present study found that the overall satisfaction level of physicians working in a referral hospital in Tehran was moderate. Physicians' overall job satisfaction was the lowest

level of satisfaction, and physicians' satisfaction in the relationship domain (relationships with staff, patients, and colleagues) was measured as below average. The income satisfaction level was the highest level of satisfaction, and the physicians' satisfaction with management domain was above average. Women show greater overall job satisfaction compared to men, and income satisfaction was significantly higher in the female physicians group than in the group of male physicians. Subspecialists had more overall job satisfaction than specialists.

It is necessary to understand the factors that lead to satisfaction or dissatisfaction, because dissatisfaction can have adverse effects on the quality of care, cost, and outcome of healthcare as well as physicians' health.¹⁴

Overall job satisfaction among the physicians in the

current study was moderate. This finding is similar to findings of other studies. Abdol-Rahman et al conducted a study in Egypt and reported that the satisfaction level of physicians was measured to be below average.¹⁵ Alsaqabi et al conducted a research in Kuwait and reported that job satisfaction among physicians was 50%.¹⁶ Generally, an inadequate number of clinical centers, a high number of patients, and high work pressure have been reported to be the most important factors of physicians' dissatisfaction.

Higher job satisfaction among physicians is found in developed countries, which is inconsistent with the current results and the results of studies mentioned above. Brøndt et al completed an investigation in Denmark and reported high job satisfaction among physicians.¹⁷ Nylenna et al reported a high level of physicians' satisfaction; 52.9% of physicians showed a very high overall satisfaction.¹⁸ Low working hours, older age, and high income were mentioned as the most important factors of high job satisfaction in these studies.

The present study found that female physicians showed higher job satisfaction than male physicians, especially in the domain of income. A study done by Ozyurt et al suggested that no significant difference was observed between men and women in Turkey in terms of job satisfaction.¹⁹ Furthermore, there was no relationship between gender and job satisfaction in a systematic review study on job satisfaction in the United States.²⁰ Female physicians reported higher income satisfaction than male physicians in an investigation conducted by Goetz et al in Germany.²¹

"Sense of belonging to the workplace and considering myself as a member of this work" is the component of medical job satisfaction with the lowest average score. Organizational sense of belonging is one of the important factors of an individual's loyalty to an organization. Research has shown that having a sense of organizational belonging is directly related to optimum job performance, while it has a reverse effect on the tendency to leave work and dissatisfaction.²² Because having a sense of organizational belonging is of great importance, its low level in physicians can significantly affect the quality of their work in the hospital.

The current study found the lowest level of satisfaction to be in the domain of relationship with the patient. Overall job satisfaction of physicians has a direct impact on the patient-physician relationship. Haas et al reported that physicians who had higher professional satisfaction had more satisfied patients. Further research is needed to determine the factors that may mediate the relationship between patients' and physicians' satisfaction.²³

The current study also found that physicians who were faculty members were less dissatisfied compared to physicians who were not faculty members. The numerous responsibilities of physicians who are faculty members and the heavier workload they are expected to accomplish can be considered as reasons for lower job satisfaction among

Research Highlights

What Is Already Known?

New policies that have been enforced in recent years have increased physicians' workloads, stress, and responsibilities. Physicians' satisfaction is closely related to the effectiveness of health services, including the quality of healthcare, patient's compliance with treatment, patient satisfaction, and patient's health outcomes.

What This Study Adds?

The job satisfaction level of physicians working at a referral hospital in Tehran was moderate, and this may affect their job activities. Income satisfaction medical job satisfaction were the highest and lowest levels of satisfaction, respectively. Such low levels of satisfaction can have significant effects on health outcomes.

these physicians compared to physicians who are not faculty members.

The consequences of physicians' dissatisfaction have been little studied, but they can be explained based on previous experiences. Studies have shown that the most important effect of physicians' job satisfaction is on the quality of medical services.²⁴ Physicians' dissatisfaction leads to poor job performance, reduced commitment to perform assigned tasks, increased risk of prescribing high-risk medications, and increased likelihood of quitting follow-up treatment.²⁵ The next consequence of dissatisfaction is job quitting.²⁶ It was reported by Landon et al that dissatisfied physicians were 2 to 3 times more likely to quit their job compared to satisfied physicians.²⁷

6. Conclusion

The job satisfaction level of physicians working at a referral hospital in Tehran was moderate. Income satisfaction and medical job satisfaction were the highest and lowest levels of satisfaction, respectively. Medical job satisfaction was higher among physicians who were not faculty members than physicians who were faculty members. It is suggested that the effect of physicians' job satisfaction on the quality of services provided in the hospital be carefully examined in future studies and strategies be identified to reduce its negative consequences on the quality of medical services.

Authors' Contributions

MSI: The study topic and design suggestion. ED: manuscript writing and critical revisions. MN: data collection, analysis, and interpretation.

Conflict of Interest Disclosures

The authors declare that they have no conflicts of interest.

Ethical Approval

This study was approved by the Institutional Review Board and local Ethics Committee of Baqiyatallah University of

Medical Sciences. The ethical approval code of this study is IR.BMSU.REC.1398.102.

Acknowledgments

The researchers wish to express their appreciation for the guidance and advice given by the Clinical Research Development Unit of Baqiyatallah Hospital.

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