# Job Satisfaction at Workplace: A Case of Doctors in Government Hospital, Kuala Lumpur, Malaysia

Mohd Ramlan, M.A. Rugayah, H Zarul Zafuan, M.D

#### **ABSTRACT**

The purpose of this paper is to describe the results of a study on work satisfaction among doctors at a government hospital. This is a fundamental study using cross-sectional survey of 150 doctors (n=150) at University Malaya Medical Center (UMMC). Data was collected via questionnaires and the returned response was 100%. Although the working hours are long and grueling, the findings showed that 58% are satisfied with their work (M=4.34, SD=0.59) for the following reasons; adequate support from seniors, meaningful tasks, flexible work schedule and good career prospects. The hospital management should adjust their policy by tracking the doctors' wellbeing and maintaining the positive factors in their environment to reduce turnover and attrition rates among doctors.

Keywords: work satisfaction, hospital, stress, organizational behavior, Malaysia

## Introduction

On April 12, 2012 a young doctor was found dead in the hospital's restroom (Blum and Naylor, 2007, p. 141-160). The media reported it as a tragic death due to work stress (Blum and Naylor, 2007, p. 141-160; Loh et. al., 2012; Bedi and Azizan, 2008). In any workplace, job stress is unavoidable. Coping with stress and ensuring satisfaction at work should be a two-way street where workers and the organization's management should reach equilibrium.

Nonetheless, in the world of employment, work satisfaction is crucial to motivate employees in their quest for upward mobility in their choice of career. Satisfaction with their daily duties, tasks and other responsibilities would result in higher productivity and an amicable work environment. In today's society, when almost everyone works for a living, the subject of job satisfaction has gained more importance. Job or work satisfaction is in part, a study on organization behavior. Logically, satisfaction towards work looks into the needs, attitudes and behavior of employees. Many of us vaguely relate job satisfaction to feelings of happiness or contentment in our job or work place, but the exact definition has eluded many, because of the numerous variables involved in work satisfaction. Respondents to the 2011 version of The Conference Board Job Satisfaction Survey indicated higher levels of job satisfaction for the first time since the recession began in 2008, however, while the 47.2 percent satisfaction level recorded in 2011 is a positive sign, it is far below the 61.1 percent satisfaction rate recorded in 1987—the first year the survey was conducted—which remains the high-water mark (Yap, 1989).

In defining and understanding work satisfaction, one must be concerned with the cause or determinants of satisfaction that leads to self-fulfillment of needs and vice versa. Satisfaction at work is a two-way street; the parties involved in running the entity must cooperate towards an environment that is conducive to create a feeling of wellbeing and the motivation to perform well at work. Even something as trivial as the comfort of a workstation, having sufficient stationery and a computer that does not cause hiccups to the workflow are positive motivators toward an employee enjoying his or her job. Of course, other elements influence behavior or attitude in the working place such as an understanding supervisor or accommodating peers.

There is an abundance of literature and research projects on work satisfaction with various scopes. No doubt, the outcome is determining the motivation to work and attaining satisfaction from that job. As such, this study follows along the same lines of other behavioral studies. Psychologists such as Maslow and Herzberg (1959), see motivation as a central factor in job satisfaction, that is, an individual is motivated by the drive to meet certain needs which can bring about a state of satisfaction or fulfillment. In attaining the highest peak of achievement, there is a resultant effect on job behavior such as job performance, productivity, turnover, sabotage or absenteeism (Alderfer, 1977). Such theories have been classified as either content/need theories or mechanical/expectancy theories (Alderfer, 1977).

Depending on the occupation that an individual is embroiled in, work satisfaction is a complex function with a spectrum of variables that makes an employee happy. A person may be satisfied with one or more aspects of his or her job but at the same time may be unhappy with other things related to the job. For example a doctor may be satisfied with his designation but may not be satisfied with the level of his income (Sarasak and Jamaluddin, 1997, p. 257-263). As an example, one cross sectional study was carried out in Negeri Sembilan by the Public Health Institute of Kuala Lumpur, Malaysia. The study was conducted to identify factors associated with job satisfaction of doctors serving in the Ministry of Health and the doctors' intentions to resign (Sarasak and Jamaluddin, 1997, p. 257-263). The response rate for that study was 69.4%. Of those who responded, only 31.3% experienced work satisfaction while the remaining 68.7% is on the opposite end, which is, dissatisfaction with their work. Consequently, the intention to resign was high among the respondents at 32.7% (Sarasak and Jamaluddin, 1997, p. 257-263).

University Malaya Medical Centre (UMMC) is one of the government hospital located in Kuala Lumpur, Malaysia. Justifiably, UMMC has been chosen as the case study for this research project as the units of analysis are the doctors serving a government hospital, the availability of these resources and other pertinent information would aid the progress of the study.

## **Background**

### **Problem Statement**

The study of work or job satisfaction is a popular area of research in organizational behavior. Consequently, this research focuses on this variable. As professionals of good standing and status, doctors are of interest to the society at large, especially if their behavior (on the job) affects the community that they serve (Loh et. al., 2012; Davidson et. al., 2009). It might be of social interest to find out the motivation and job happiness among doctors, a group to whom they often come into direct contact and to a certain level, put dependence on their physical well-being (Seo et. al., 2012, p. 56-73).

To researchers or social scientists, job satisfaction among doctors, considered a higher order of workers, will contribute to the body of knowledge on job satisfaction. It will also prove or disapprove the hypothesis that job satisfaction comes from receiving higher order rewards such as self-actualization (Seo et. al., 2012, p. 56-73; Solberg et. al., 2012, Sharma et. al., 2012, p. 25-34).

To the hospital administration or even the doctors themselves, it will be interesting to know the reason or factors that cause satisfaction or dissatisfaction in the job and in practically, whether public perception of private sector doctors as having a higher status in society affects the doctors in government service. This perception stem primarily from the than their counterparts in government service and hence, in this present modern society, the

amount of income earned by an individual speaks more for him than the job itself (Seo et. al., 2012, p. 56-73).

The high rate of resignation from government service has also prompted this study into job satisfaction among government doctors (Khadijat et. al., 1999). It was reported that a total of 1225 doctors resigned from government services between 1970 and 1978, of these, 126 were specialists (Khadijat et. al., 1999). Between 1983 to 1985, there were a total of 701 resignations compared with an intake of around 12,000 for the three years (Khadijat et. al., 1999). Currently, there are about 300-400 doctors resigning from the government services every year to practice privately which high rates of resignation due to dissatisfaction with government service, which include heavy workload, poor working conditions and low remuneration (Malaysian Medical Association, 2012). The study by the Malaysian Medical Association (MMA) in 1980 showed that there was dissatisfaction among doctors, the reasons being:

- a) no proper financial incentives
- b) dissatisfactory promotion prospects
- c) dissatisfactory working hours
- d) lack of opportunities to work in one's choice of specialization
- e) inadequate training opportunities
- f) aging factors
- g) frequent transfers
- h) poor relation between superior-subordinates
- i) lack of opportunities to participate in administrative decision-making
- j) rural posting

Thus, the objective of this study was to assess the level of job satisfaction among the doctors working at University Malaya Medical Center.

## Significance of Study

Work satisfaction among doctors is an important concern because it is related to several important aspects of care, such as the continuity of care and health care costs (Seo et. al., 2012, p. 56-73). Hence, the study hopes to see if similar factors correlate to happiness at work among the doctors, housemen and medical officers based at a particular government-based hospital specifically, the UMMC.

The significance of this study is apparent in light of the increasing demands on the government-financed health care entity and delivery system. The booming population including an increase in foreigners from neighboring countries resulted in more people needing medical care. Also, the rise in the senior citizen population requires the government to increase the number of doctors' especially general practitioners to cater to the golden age group. The government is the main provider of health care in this country. The doctors being mainly responsible for the delivery of a decent health care service, it will certainly be of value to understand their needs and hope so as to further ensure a well motivated core of medical personnel who will be able to give the highest quality and standard of medical service (Seo et. al., 2012, p. 56-73).

## Literature Review

Job satisfaction among hospital staff is gaining importance as grouses and grievances have been reported by the media because of long hours and incompatible pay scheme and reward system. For this research, the literature review will be based on the factors that can lead to job satisfaction among doctors in government hospitals. To reiterate, the focus of this study on the level of job satisfaction among doctors in a specific public hospital in Kuala Lumpur, Malaysia. Therefore, this section will describe job satisfaction factors such as workload, income, job designation, seniority and service years.

## **Defining Job Satisfaction**

Mumford (1972) calls job satisfaction a "nebulous concept" difficult to explain and to define. Mumford paraphrased Vroom's (1985) definition of job satisfaction as "an individual liking more aspects of his work than he dislikes". Vroom's (1985) actual definition was "the positive orientation of an individual towards the work role in which he is presently occupying". Blum and Naylor's (2007) define job satisfaction as "the result of various attitudes possessed by an employee that related to the job and are concerned with such specific factors as wages, supervision, steadiness of employment, condition of work, advancement opportunities, recognition of ability, fair evaluation of work, social relation on the job, prompt settlement of grievances, fair treatment by employer, and other similar items".

Medicine is essentially a moral practice constituted by intrinsic moral convictions (Solberg et. al., 2012). For the doctors, their responsibilities and commitments to their job are vitally important due to high risk that involved in these sectors. Most doctors especially in government sectors have to face a lot of patients in a specific duty time besides they are stretched by tight time especially during the training in specialist registrar level (Weber, 2012, p. 153-164). This can be seeing as the factors that can affect job satisfaction among the doctors. Besides, that doctors that freshly graduated from the medicine school or university, tend to have lower job satisfaction due to the hurdle that they have to go through to become professional doctors (Sibbald et. al., 2003, p. 326).

Intrinsic is the belonging naturally (Sibbald et. al., 2003, p. 326). It is the sense of interior or inner part of human being. Intrinsic factors are the inner factors which come from human that lead to decrease or increase in the level of job satisfaction. In this case, the workplace will affected the feeling of doing job well. This is the feel that faced by doctors in the government hospital due to lot of patients that they have to attend. They feel that it is important to give good services and care about the patient. Somehow, they find that it is hard to achieve what they want due to time constraints. They need to accomplished their duty on time which make them can't be so friendly with the patients. But, they find that the most factors that lead to job satisfaction is the good care toward the patient and the quality of coworkers (Solberg et. al., 2012).

The doctors also have the pride in their work. This will increase the level of satisfaction when they had successfully accomplished their works. It is a feeling of deep pleasure or satisfaction derived from achievements, qualities or possessions that do one credit. It is the consciousness of one's own dignity (Bedi and Azizan, 2008). The intention to resign also is one of the internal factors that influence job satisfaction. This is the aim or plan, the action or fact of intending. It is a person's especially a man's designs in respect to marriage (Malaysian Medical Association, 2012). This is considered as the factors that make dissatisfaction among doctors in Government Hospital in Malaysia (Sarasak and Jamaluddin, 1997, p. 257-263).

Extrinsic meaning is not essential or not inherent. It is having its origin some distance from the part which it moves (Sibbald et. al., 2003, p. 326). It can be considered as outward or outside. For extrinsic factors, it involved the outside factors such as the money or compensation, time and job designation.

Money or compensation is a medium of exchange in the form coins and banknotes (Sibbald et. al., 2003, p. 326). In the case of satisfaction, the survey by American Society of Radiologic Technologist found that most managers think that the employees will satisfied if they get equal money ISSN 1675-1302

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or compensation or reward. Besides that, most of doctors in Malaysia's Government Hospital are influence by the compensation or money which leads to job satisfaction or not satisfied (Sarasak and Jamaluddin, 1997, p. 257-263). Income is the one of the element that contributes to job satisfaction. Even though, doctors in Japan and Australia not affected by income (Rebeca and Rizacassa, 2012) but in Malaysia it might influence the job satisfaction among the doctors in government hospital. But, as the public servants, the doctor's salary is not affected by the turmoil of Malaysia economic. Yet, their salary is much lower than the doctors that work in the private hospitals and this is the reality that we can't deny it.

Time also play a major role in influencing job satisfaction. This affects much when the workers are given specific tasks which have limited duration of time (Lambrou et. al., 2010, p. 26). They have to accomplish the task but sometime they feel stress and frustrated because they have to work at very fast speed to ensure they can finish the task. This is reason why some managers found that time will influence the job satisfaction (Lambrou et. al., 2010, p. 26).

The designation of job that not suit to the workers will make them frustrated which might be due to different knowledge and skills that they have. Therefore, it will affect the level of job satisfaction among the workers because they need to start at slow speed because of the job that not matches to their expertise. Thus, the job designation becomes a major factors that influencing job satisfaction (Magotra, 1998, p. 4). Job designation is the specific job that the doctors need to do. If the doctor is expert in Pediatric, therefore, the management has to put them in the Pediatric ward. The different nature of job with the skills and knowledge the doctors have also may be the reason that lead to increase or decrease in the level of job satisfaction. The placement of first graduation also important for the younger doctors to ensure they can work more efficient.

Workload is referring to the number of patients that they need to treat (Cardosa, 2012). The reality is the doctors need to face lot of patients when they are on duty. If this matter compares to the private hospitals, their doctors have much time to talk with their patients due to lower number of patients that they have to treat. This may be the reason why the doctors in the government hospitals not really friendly with their patients. The lack of doctors in government hospitals in Malaysia also the contribution to the workload that a doctor needs to face (Malaysia Ministry of Health, 1998). It is important for the government to hired more doctors to give service in the government hospitals

Age also can be the reason that influences the job satisfaction. This element refers to the how many doctors in government hospitals that willing to continue their services after the retirement age. This is the thing that needs to be answered, if they willing to continue services after retirement age, it may be there is job satisfaction during their working time. A number of studies also suggest that the importance of job attributes is age-related (Blum and Naylor, 2007, p. 141-160)]. For example, younger workers attach greater importance to advancement opportunities than older workers as such opportunities decline with age in most organizations (Yap, 1989; Solberg et. al., 2012]. Older workers tend to value jobs with meaningful content (Voltmer et. al., 2011). Historically, employers have fired employees who were over 50 years old and earned high compensation due to their longevity on the job. These employers rationalize the terminations as business necessity (Mumford, 1972, p. 48-57; Hills et. al., 2012, p. 47-76; Khadijah et. al., 1999). Career stage theory is used to explain a possible relation between age and job satisfaction (Yap, 1989). Upper levels of management within a corporation are generally not available to younger employees. Thus, it is the older employee that typically enjoys the increased power and prestige associated with these positions. In addition, it was find that advancing age alone can contribute to job satisfaction by increasing the employee's confidence and prestige within the organization (Blum and Naylor, 2007, p. 141-160). On the other hand, they find that younger workers are more likely to attach greater importance to opportunities for advancement than older workers (Blum and Naylor, 2007, p. 141-160).

Those organizations that deal with self-managed teams show significant advantages as greater personnel flexibility, higher levels in organizational commitment and in job satisfaction [14]. Given that life in work place is influenced by job satisfaction and productivity (Yap, 1989; Lambrou et. al., 2010, p. 26; Khadijah et. al., 1999; Sarasak and Jamaluddin, 1997, p. 257-263), factors that make up the reason of being of companies (Sarasak and Jamaluddin, 1997, p. 257-263) and directly related with the personal skills linked to the continuous improvement processes, the aim of this paper is to identify the degree in which these three aspects are impacted as a result of the workers participation in

ISSN 1675-1302

self-managed teams. A longitudinal field study examined the moderating and mediating effects of self-efficacy on the relationship between training and the adjustment of newcomers during their first year of employment (Magotra, 1998). The results provided some support for the hypothesis that initial self-efficacy moderates the relationship between training and adjustment. Training was more strongly related to post training self-efficacy, ability to cope, job performance, and intention to quit the profession for newcomers with low levels of initial self-efficacy (Magotra, 1998). Some support was also found for the hypothesis that post training self-efficacy mediates the relationship between training and adjustment and job satisfaction; however, evidence of complete mediation was found only for ability to cope (Magotra, 1998). Post training self-efficacy partially mediated the relationships between training and job satisfaction, organizational and professional commitment, and intention to quit the organization and the profession. Research and practical implications of these findings for the training and the socialization of newcomers are discussed (Magotra, 1998)

In this new era, we can see that many people are questioning on the level of effectiveness of the services in the government hospitals. With latest issue about the service of government hospital which involved baby who gets injured on her chest during delivering process; it added more dissatisfaction among the citizen (Malaysia Ministry of Health, 1998). Even though it is the job of the government to ensure good services provided in government hospital, but the questions still arises whether it is the government that actually wrong or the doctors themselves? Government might have provided the doctors with the entire benefits even though we can't compare the benefits that government hospital doctors received and what the private hospitals doctors received. Or it is just the perception of Malaysian toward the services in government hospital? We still can't answer the question because we are actually not conducting a detail research on this matter.

The doctors in government hospital have to face a lot of patients in one day as compare to the private hospital. This situation might influence their level of job satisfaction. They have very tight time with patients which sometimes they don't have enough time to greet the patients nicely. Yet, we are still lucky because we have enough medicine even though there are not enough doctors in government hospitals (Prime Minister Speech, 2012). It can be described as paradise if we compare to other conflicted country such as Palestine which their hospital have to face shortage of medicine and money which need for Malaysia help as given by FELDA which amount to RM 100,000 (Prime Minister Speech, 2012).

The outcome from this research will provide empirical evidence on work satisfaction and motivation of doctors attached to a government hospital. This will shed light to contradict the assumptions of work dissatisfaction such as bullying and overload of housemen and young doctors based at a public medical facility (Loh et. al., 2012). By negating the public's perception of inequality of task distribution, a better alliance and perspective to enrich the facilities could be drawn. With the current economic and political scenarios, the government wants to ensure that the people are given appropriate health care facilities in conjunction with the slogan of "People First, Performance Now." By knowing the internal discord (if any) and the work environment of medical practitioners, a rational and practical national health policy can be implemented. This is perhaps one public sector organization that needs protection in the present climate of reforms and privatization of other ailing sick public agencies. In matters related to the health and medical care of the people, any civilized society with a sense of social justice will not relegate the responsibility to the private sector (Magotra, 1998). In the case of Malaysia, listening to the grievances of the *rakyat* has been of priority to the government in their quest for an inclusive society.

# Methodology

#### Research Design

Research design is a plan and research structure that could help the researcher to answer the question explored in the research. "Research design provides the glue that holds the research project together. A design is used to structure the research, to show how all the major parts of

ISSN 1675-1302

the research project (for example, the sample or groups, measures, treatment or programs, and method of assignment) work together to try to address the central research question (Trochim, 2006). With regards to the facts, research design employed was cross-sectional cum correlation design. The research required specific information from the doctors based at UMMC, thus the use of a questionnaire which ensure standardized gathering of data.

## **Sampling Technique and Sample Size**

One hundred and fifty (150) doctors from University Malaya Medical Center will be the sample size for this research. The sampling technique is cluster sampling. This method is use to determine the doctors that work at University Malaya Medical Center (UMMC). By having cluster sampling, practical and contracted doctors will not be the respondents for the research.

Cluster sampling is being used with convenience sampling method which all elements in the population are considered and each element has a chance of being chosen as a subject of the study (Sekaran and Bougie, 2010). It is exactly what the research is about which is determined by the amount of number of respondents whom represent the University Malaya Medical Centre (UMMC).

## **Data Collection and Analyses**

The primary data for this study came from the completed questionnaires administered to the respondents by the researchers. This questionnaire is divided into six parts which are, part A is on Respondents' Demographic Profiles; Part B focused on the Workload toward the job satisfaction, part C focused on the Personal Growth and Development toward job satisfaction and part D focused on the Money or Compensation toward the job satisfaction. While in Part E it focused on age and the last part focused on job satisfaction. In part B to part F, the respondent requested to indicate on 1 to 5 which is (1= Strongly Disagree, 2= Disagree, 3= Neutral, 4= Agree, 5= Strong ly Agree). For this paper, only research question one is showcased.

Depending on the research questions and hypotheses, parametric and non-parametric analyses were executed accordingly. For the first part of the questionnaire, the demographic variables require descriptive statistics but for the independent and dependent variables that were measured on a scale of one to five, frequency statistics and regression analyses were undertaken. Lastly, it is important to note that a pilot study was conducted to determine the reliability and validity of the instrument where the Cronbach's Alpha Reliability Statistic Test returned a score of 0.72 denoting that the statements in the questionnaire are reliable and valid.

# **Findings**

One hundred and fifty questionnaires were personally administered and returned resulting in a 100% usable data. The first part of the questionnaire was to identify the respondents' profiles. As such, Table 1 showcases the relevant demographic variables. Firstly, the highest number of respondents came from the age bracket of 36-46 years, 54% of them of the male gender and 52.7% have been in service between 11 to 20 years. Next, 42% who responded to the survey were Malays and 18.7% worked in the medical department of UMMC.

Table 1: Profile of Respondents

| Variables  | Description    |    | Frequency | %    |
|------------|----------------|----|-----------|------|
|            | 25-35 years    |    | 64        | 42.7 |
| Age        | 36-46 years    |    | 79        | 52.7 |
|            | 47-57 years    | 6  | 4         |      |
|            | Above 58 years |    | 1         | 0.70 |
| Gender     | Male           |    | 81        | 54   |
| Gender     | Female         | 69 | 46        |      |
|            | 1-10 years     |    | 79        | 52.7 |
| Tenure     | 11-20 years    |    | 66        | 44   |
|            | 21-30 years    |    | 4         | 2.67 |
|            | Above 30 years |    | 1         | 0.67 |
|            | Malay          |    | 63        | 42   |
| Daga       | Chinese        |    | 57        | 38   |
| Race       | Indian         |    | 26        | 17.3 |
|            | Others         |    | 4         | 2.7  |
|            | Anesthesia     |    | 17        | 11.3 |
| Department | Surgery        |    | 15        | 11.5 |
|            | Dentistry      |    | 13        |      |
|            | Emergency      | &  |           | 7.3  |
|            | Trauma         |    | 24        | 16   |
|            | Orthopedic     |    | 16        | 10.7 |
|            | Medical        |    | 28        | 18.7 |
|            | Oncology       |    | 22        | 14.7 |
|            | Gynecology     |    | 17        | 11.3 |

Table 2 shows the level of the job satisfaction among the doctors with an overall mean of 4.29. Satisfaction with their job scored the highest mean at 4.34 followed by adequate support for senior officers at 4.33. Discussion on this finding will be done in the next section.

Table 2: Overall Job Satisfaction Scores

| Variable                          | Frequency |    |   |    | Moon | Std.   |      |
|-----------------------------------|-----------|----|---|----|------|--------|------|
|                                   | SDA       | DA | N | A  | SA   | – Mean | Dev. |
| Adequate support from senior      | 0         | 0  | 6 | 88 | 56   | 4.33   | 0.55 |
| Meaningful<br>work task           | 0         | 1  | 3 | 98 | 52   | 4.25   | 0.53 |
| Feel<br>overwhelme<br>d with task | 0         | 1  | 3 | 99 | 47   | 4.28   | 0.53 |
| Comfortable with schedule         | 0         | 2  | 6 | 95 | 47   | 4.25   | 0.59 |

| Sum of Mean                  |   |   |   |    |    | 4.29 |      |
|------------------------------|---|---|---|----|----|------|------|
| Satisfied with job           | 0 | 2 | 3 | 87 | 57 | 4.34 | 0.59 |
| Confident to succeed at work | 1 | 1 | 2 | 94 | 52 | 4.30 | 0.60 |

Note: SDA-Strongly Disagree, DA-Disagree, N-Neutral, AA-Absolutely Agree, SA-Strongly Agree

As indicated in Table 2, 87 or 58% of the doctors agreed that they were satisfied with their job with an additional 57 or 38% strongly agreeing to the statement (M=4.34, SD=0.59). Added to this, 95 doctors agreed that they are comfortable with their schedule with 47 more strongly agreeing to the same statement. It can be shown by the indication from the respondent that most of them satisfy with their job (M=4.25, SD=0.59). Most of them agreed on the adequate support from senior, meaningful tasks, comfortable schedule and confident to succeed will lead to the job satisfaction.

No matter the work responsibilities and long hours, 144 doctors are satisfied with their jobs at UMMC (M=4.34, SD=0.59).

## **Discussion and Conclusion**

As indicated in the objective of the study, the level of satisfaction toward doctor in University Malaya Medical Center (UMMC) is high. The analysis carried out shows that 96% of the doctors are satisfied with working at University Malaya Medical Center (UMMC). Moreover, the frequency statistics also shows that the doctors meet their expectation and satisfied working in University Malaya Medical Center (UMMC).

So, it can be said that, even though there are some doctors are not satisfied working in University Malay Medical Center (UMMC), the result of the study shows that the gap between group which is satisfied and dissatisfied distinguish a wide range of percentage. As stated in Table 2, 87 respondents indicate that they are satisfied while only two other respondents are dissatisfied. The result is agree with the research study which the doctors who working in University Malaya Medical Center (UMMC) are satisfied with their job. From the result of 150 doctors, it shows that most of the doctors in University Malaya Medical Center (UMMC) are satisfied with their jobs.

Job satisfaction is a complex function based on a number of variables (Malaysia Ministry of Health, 1998; Davidson et. al., 2009, Solberg et. al., 2012)]. A person may be satisfied with one or more aspect of his or her job but at the same time may be unhappy with other things related to the job. For example, a doctor may be happy with his designation but may not be satisfied with the salary received. Job satisfaction and dissatisfaction of a doctor would affect his behavior with his or her coworkers, administration and in particular, the patients (Sarasak and Jamaluddin, 1997, p. 257-263; Sharma et. al., 2012, p. 25-34). It can be said that the quality of medical care and doctor-patient relationship is also dependent on the level of job satisfaction. Literature has shown that the main causes of dissatisfaction and stress were workload and health care reforms [Hills et. al., 2012, p. 47-76; Solberg et. al., 2012; Sharma et. al., 2012, p. 25-34. Also, job satisfaction was found to be positively associated with the patients' satisfaction (Sharma et. al., 2012, p. 25-34). Consequently, the patients' satisfaction is crucial to the hospital's goal of providing quality medical care (Malaysian Ministry of Health, 1998).

Regardless, the government's attentiveness to the issue of overworked and doctors being overly stress at work has garnered equitable attention and sympathy. In his speech (2012), the Prime Minister tabled the following; "To ease the situation, the Government introduced a flexible schedule with an average of 60 working hours per week for housemen. To replace the on-call allowance for housemen, the Government introduced a Special Flexible Working Allowance of RM600 per month,

effective 1 September 2011. For medical officers and specialists, the Government will also increase the overnight on-call allowance between RM30 to RM80". Suffice is to say, doctors at public hospitals are given ample and adequate compensation for their tasks as care-givers.

As a conclusion, work or job satisfaction has traditionally been thought of by most organizations to be the key in determining job performance (Hills et. al., 2012, p. 47-76). By looking at the factors that affected job satisfaction, the level of motivation and satisfaction at the work place can be improved. Job satisfaction factors include age, salary or income, workload and personal growth at the work place. With regards to UMMC, the doctors based there are generally satisfied with the job, the immediate responsibilities and the environment that comes with being a health care practitioner. At the end of the day, the intangible rewards far outweigh the tangible ones.

## **Acknowledgment**

We would like to acknowledge the following individuals for their support in the successful conduct of this research project which was conducted in 2009: The Administrators, specialists, doctors, GPs and housemen based at UMMC; the Dean, Faculty of Administrative Science and Policy Studies, and the staff at the Research Management Institute, Universiti Teknologi MARA (UiTM).

## References

- Alderfer, C. P. (1977). A Critique of Salanchik and Pfeffer's Examination of Need-Satisfaction Theories, *Administrative Science Quarterly*, 1977.
- Bedi, R.S and Azizan, H. (2008). Young docs walk a tightrope, The Star Online, Sunday Dec 7, 2008 (accessed May 7, 2012).
- Blum, M.L. and Naylor, J.C. (2007). Industrial psychology: Its theoretical and social foundation, New York: Row. In T.A. Wright and D.G. Bonnet, *Journal of Management*, 33(2), 141-160, 2007.
- Cardosa, M.S. (2012). *Job demands long hours*, The Star Online-Focus, Thursday, May 3, 2012. (accessed May 7, 2012).
- Davidson, J.D., Lambert, T.W., Goldacre, M.J. and Parkhouse, J. (2009). Factor Influencing Job Satisfaction. Retrieved from:http://www.factor influencing job satisfaction and organizational commitment watson 80(2)113)\_radiologic technology (accessed on 16 March 2009)
- Hills, D., Joyce, C. and Humphreys, J. (2012). Validation of a Job Satisfaction Scale in the Australian Clinical Medical Workforce, *Evaluation and the Health Professions*, 35(1), 47-76, 2012.
- Khadijah, S., Ann, S.F and Margot, K. (1999). Knowledge, Attitude and Preventive Effort of Malaysia Medical Students, *Journal of Adolescence*, 1999. Retrieved from: http://www.sciencedirect.com (accessed on 27 March 2009)
- Lambrou, P., Kontodimopoulos, N. and Niakas, D. (2010). Motivation and job satisfaction among medical and nursing staff in a Cyprus public general hospital, *Human Resources for Health*, 8(1), 26, 2010.
- Loh, F.F., Lim, W.W., Aruna, P. and Ho, S. (2012). *Housemen still being overworked and bullied, sending some into depression*, Retrieved from: The Star Online, Saturday April 14, 2012 (accessed May 7, 2012).

ISSN 1675-1302

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- Magotra, R. (1998). The role of government in medical sector. *Indian Journal of Medical Ethics*, 6(4), October 1998.
- Malaysia Ministry of Health (1998). *Report on Job Resignation from government Service*. Retrieved from, http://www.moh.gov.my on March 24, 2009.
- Malaysian Medical Association (2012). Special privileges to attract doctor working overseas to return home- Does it benefit the country. MMA News, Published: August Issue 2012.
- Maslow, A. H. and Herzberg, L. A. (1959). Practical Assessment, Research and Evaluation. Retrieved from: http://www.PAPeonline.net/getvn (accessed on 24 March 2009)
- Mumford, E. (1972). Job satisfaction: A method and analysis, *Personnel Review*, 1(3), 48-57, 1972.
- PM's Budget Speech (2012). The Star, Published: Friday October 7, 2011, Retrieved May 7, 2012.
- Rebeca, L.R. and Rizacassa, T. (2012). Job Satisfaction 2012 edition. *The Conference Board Job Satisfaction Survey*, December 2012.
- Sarasak, S. and Jamaluddin, R. (1997). Job Satisfaction Among doctors in Negeri Sembilan, *Malaysia Medical Journal*, 52(3), 257-263, 1997.
- Sekaran, U. and Bougie, R. (2010). Research Methods for Business. A Skill Building Approach, 5th Edition, John Wiley and Sons (Asia) Pte.Ltd., 2010.
- Seo, K.H., Lim, S.M., Park, K.S., Key, D.H. and Park, Y.H. (2012). A study on the current state of public health doctors, *Journal of the Korean Medical Association*, 55(1), 56-73, 2012.
- Sharma, A., Lambert, T. W. and Goldacre, M. J. (2012). Why UK-trained doctors leave the UK: cross-sectional survey of doctors in New Zealand. *Journal of the Royal society of Medicine*, 105(1), 25-34, 2012.
- Sibbald, B., Bojke, C., and Gravelle, H. (2003). National Survey of job Satisfaction and retirement Intentions. *British Medical Journal*. 2003, 4(22) (7379), 326 (accessed on 21 February 2009).
- Solberg, I.B., Ro, K.I., Aasland, O., Gude, T., Moum, T., Vaglum, P. and Tyssen, R. (2012). The impact of change in a doctor's job position: A five-year cohort study of job satisfaction among Norwegian doctors, *BMC Health Services Research*, 41, 2012.
- Trochim, W.M.K. (2009). Web Center for Social Research Method, 2006, Retrieved from: http://www.bilkent.edu.tr/peterjl/pyc110/sampling.pdf (accessed on 27 March 2009).
- Voltmer, E., Rosta, J., Siegrist, J. and Aasland, O. G. (2011). Job stress and job satisfaction of physicians in private practice: comparison of German and Norwegian physicians, *International Archives of Occupational and Environmental Health*, 2011.
- Vroom, V. H. (1985). Work and motivation, New York: Wiley, 1964. In Iaffaldano, M.T and Muchinsky, P.M "Job satisfaction: A meta-analysis", *Psychological Bulletin*, 97(2), 251-273, 1985.
- Weber, J. C. (2012). Pleasure in medical practice, *Medicine Health Care and Philosophy*, 15(2), 153-164, 2012, DOI: 10.1007/s11019-011-9338-8.

Yap, L.P. (1989). Thesis on Job Satisfaction Among Government Doctors, University Malaya, 1989.

mramlan2957@salam.edu.my