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Psychological Well-Being and Performance of Dissatisfied Doctors Working in Healthcare and Tele Healthcare Organizations

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ABSTRACT

This study investigates the effect of Psychological Wellbeing on Employee Performance, considering the Job Satisfaction as a mediator between them. Often, doctors have to work for around 80 hours during a week due to which deteriorating performances of doctors have been noticed. This long-duration shift of the doctors often affects their Psychological Wellbeing. As the Psychological Wellbeing and Job Satisfaction were higher order constructs, repeated indicator approach was used in PLS SEM (Structural Equation Modelling) approach to conduct the statistical analysis. The 203 doctors participated in this research as sample using a survey method and they were reached out online as well as physically. The results depict the significant effect of Psychological Wellbeing on Employee Performance and Job Satisfaction was also found as a significant mediator. The results are insightful for the managers, the hospital administrators, and the consultants who work for the satisfaction of the medical practitioners working as employees. Future research can be conducted to examine the difference between the job satisfaction level of medical practitioners of public and private hospitals.

INTRODUCTION

Doctors are often required to work for around 80 hours per week, which causes the Psychological Wellbeing issues that lead to Job dissatisfaction among doctors working in healthcare organizations (Emery et al., 2025; Saadeh & Suifan, 2020; Tarigan et al., 2022). Job dissatisfaction has been increasing among doctors working due to their long-duration shifts in healthcare institutions (Atif et al., 2015; Emery et al., 2025; Edwards et al., 2002). Mental health of doctors is often affected and causes job dissatisfaction when they face several issues at workplace that include long-duration shifts, unsafe environment, delayed or small payments, and job stress (Khalily, 2011). Contrarily, the urban areas provide costly medical services due to the dominance of the private sector hospitals and clinics without any proper check and balance (Shah et al., 2016). Telehealth

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inclusion refers to the ability of the overall health sector to access and use the telecommunication technologies. The services that cater telehealth inclusion include the healthcare services being provided using internet, phone, SMS, WhatsApp, and other ICT media.

Literature suggests that employees' mental health is significantly associated with productivity and many other preferred organizational consequences such as satisfaction of job, its environmental aspects, and organizational commitment (Gallie et al., 2017; Hünefeld et al., 2020; Purcell et al., 2004). Doctors tend to have low level of job satisfaction which is proportional to the level of patient-doctor relationship, and doctor-doctor relationship among peers (Atif et al., 2015; Shah et al., 2016). Age, education, service years, and income are among the various factors that impacted doctor's job satisfaction and their performance (Johari & Omar, 2019; Srivastava et al., 2019).

Literature suggests that Employee Performance is a widely researched construct that has been used in research. Factors affecting the performance of the employees include job insecurity, occupational stress, employee burnout, lack of job commitment and de-motivation are often experienced by the employees (Aziz, 2005). There is a consistent relationship between decreasing employee performance and decreasing job satisfaction (Ho & Kuvaas, 2020). Promoting job satisfaction is good for the economic interest of an organization because satisfied employees can deliver a higher level of productivity and performance (Maida et al., 2017).

Research Gaps & Contribution

It is suggested that every fourth person is facing psychological issues and there is a dearth of resources that can cover these psychological issues (Ivtzan et al., 2013). Hence, there is a need to investigate the effect of Psychological Well-being on employees' Job Performance. This study contributes to the body of literature by investigating the effect of Psychological Wellbeing of doctors on their Job Performance. As the majority of mental health problems are developed in youth (Usman, 2017), psychological wellbeing is a concern at the very first level of organizational ladders (Jimenez-Fonseca et al., 2018). This study investigates the Psychological Wellbeing of young doctors who are working at hospitals. Literature suggests that organizations considering their employee's psychological wellbeing can improve their performance because a happy and satisfied employee works efficiently (Ho & Kuvaas, 2020). Lack of psychological wellbeing causes a great impact on doctors' levels of performance and job satisfaction, particularly on those doctors who are new at the workplace (Aziz, 2005; Ho & Kuvaas, 2020). This study provides empirical evidence related to the job dissatisfaction among doctors.

Research Objectives

In a highly populated country, where research on doctors' organizational performance is at infant stage, it is important to investigate the influence of psychological well-being on doctors' performance in the context of job satisfaction (Ho & Kuvaas, 2020). Since medical practitioners have a tough timing schedule considering their job timings of forty working hours twice a week (Atif et al., 2015), this study selected the sample of doctors who have been performing their duty for such a long duration. This study focuses the doctors working in Pakistan, which is a populated country that lacks in providing appropriate medical facilities to the masses. Literature suggests that there is a 0.98 physician/doctor for every 1000 people in Pakistan due to which doctors can be assumed to work under pressure which may hurt their Psychological Wellbeing that ultimately influence their performance during the job (Atif et al., 2015). Based on these grounds, this study set the following research objectives:

- To identify the effect of Psychological Wellbeing on Employee Performance in the health care sector.
- To identify the mediating effect of Job Satisfaction between Psychological Wellbeing and Employee Performance in the health care sector.

LITERATURE REVIEW

In the healthcare sector, Psychological Wellbeing and Job satisfaction have special implications on Employee Performance. The negative facets of the healthcare sector have pronounced implications on the health and behaviour of medical practitioners (Aziz, 2005). This section discusses the theoretical underpinnings of the research and significance of the variables selected in this study.

Theoretical Underpinnings

Employee performance has been addressed adequately by Social Exchange Theory, which emphasizes that motivating the employees helps the organizations to increase the performance of their employees. When employees are successful in achieving their own goals, they perform better, and eventually, the organization will get benefits from their performance (Francis & Alagas, 2020). Herzberg's Two Factor Theory discusses Job Satisfaction as the key motivational factor for the employees working in organizations (Dartey-Baah & Amoako, 2011). Since Job Satisfaction has also been studied with Psychological Wellbeing (Tak et al., 2017), this study considered this variable in the context of the Employee Performance of the doctors working in hospitals. Psychological Contract Theory in addition to Social Exchange Theory, aligns the psychological needs of the employees with their satisfaction (Hünefeld et al., 2020). As the mental health issues are increasing among the doctors and they are reported to be overburdened, Psychological Wellbeing and Job Satisfaction of the doctors have been considered as the key constructs in this study influencing the Employee Performance.

Employee Performance

Scholars suggest that doctors not happy with their jobs due to which deteriorating performances of doctors have been reported (Edwards et al., 2002). Employee Performance is referred to as the outcome of the employees on their jobs (Tarigan et al., 2022). Traditionally, Employee Performance was measured based on the opinion provided by supervisors related to the performance of their subordinates. Now self-reported measures are used in which employees are asked about their performance at the workplace (Kundu et al., 2019). Employee Performance has also been synonymously discussed as Job Performance and worker's performance. Employee Performance is an old concept in research and has been discussed directly or indirectly with several concepts, such as supervisor's behaviour (Roberts & David, 2020), leadership, spirituality at the workplace, and well-being. Therefore, this study investigates the influence of Psychological Wellbeing and Job Satisfaction on Employee Performance of the doctors.

Psychological Wellbeing & Employee Performance

Despite Wellbeing has been extensively studied, scholars have no consensus on the definition of wellbeing (Dodge et al., 2015). Considering psychological wellbeing as a construct within the workplace, it can be considered for developing meaningful relations with others and can be described as one's personal and psychological development (Loon et al., 2019). Ryff and Singer (2008) suggest that wellbeing is connected to human fulfilment and growth, which impacts the health of a human being. Ryff and Singer (2008) elaborated the six core dimensions of psychological wellbeing that are (i) Self-acceptance, (ii) Environmental mastery, (iii) Positive relation with others, (iv) Autonomy, (v) Purpose in life, and (vi) Personal growth.

Wellbeing has also been explained as a fragment of mental and/or psychological health. Psychological Wellbeing is described as an individual's subjective experience and positive emotions (Johari & Omar, 2019). A workplace, where employees experience positive wellbeing, generates a greater level of individual and organizational productivity, greater creativity, and better occupational outcomes (Aazami et al., 2015). Employees who experience greater levels of stress at the workplace, experience severe health problems that negatively impacts job satisfaction (Srivastava et al., 2019). Employees' attitudes at the workplace have also been associated with their poor mental, emotional, and physical problems (Isgor & Haspolat, 2016).

Job Satisfaction & Employee Performance

Job satisfaction is a measure of how employees feel about their job, meeting their expectations, fulfilling their needs, and wants (Tarigan et al., 2022). Job satisfaction is a significant variable for study in human resources (Crawford et al., 2010; Loon et al., 2019). The organizational outcome is often determined by Job satisfaction, which results in positive organizational behaviour and commitment (Hameli et al., 2024; Ho & Kuvaas, 2020), along with 'subjective well-being' in the workplace. Job satisfaction has an impact on employee's attitudes towards their life in general, and their satisfaction in life (Crawford et al., 2010). Job satisfaction majorly impacts job-based behaviours such as absenteeism, intentions, and decisions to resign/terminate employment and job-based performance. Low job satisfaction can influence health services as it may lead to higher levels of staff burnout, turnover, and absenteeism, which may result in

a reduction in the efficiency of health services being provided (Aziz, 2005; Srivastava et al., 2019). There exists a relationship between job satisfaction and the quality of healthcare being provided as it has been found that job satisfaction of health practitioners is linked to the satisfaction of patients along with the quality of patient care (Johari & Omar, 2019).

Psychological Well-Being and Job Satisfaction

Job satisfaction is negatively related to the general mental health along with depression, anxiety, and social dysfunction guidelines (Aazami et al., 2015; Emery et al., 2025). Wright and Cropanzano (2000) showcased that psychological well-being could be used to predict job performance. Employees' job stress negatively impacts both aspects i.e. psychological well-being along with their job satisfaction both (Isgör & Haspolat, 2016; Loon et al., 2019). "Happy worker theory" suggests that "happy" workers are represented through higher levels of performance shown across the board (Loon et al., 2019; Wright & Cropanzano, 2000). However, 'happiness' is depicted as synonymous with psychological well-being. There is a positive correlation between the two variables i.e. psychological well-being & job satisfaction. A significant effect of psychological well-being has already been established on job satisfaction. It has also been found that nurses who are satisfied with regards to their salary have opportunities to be socially active, and take psychological support tend to have better levels of life and job satisfaction (Ho & Kuvaas, 2020; Isgör & Haspolat, 2016; Loon et al., 2019). This study selected the employees' Psychological Wellbeing as an independent construct to measure its influence on Employee Performance of the doctors.

Conceptual Framework

Fig. 1. Conceptual Framework developed in this Study

Based on the literature review, Psychological Well-Being, Job Satisfaction, and Employee Performance were selected as the key constructs to investigate the performance of doctors. Following are the hypotheses derived for this study:

H_1: There is a significant effect of Psychological Wellbeing on Employee Performance

H_2: There is a mediating effect of Job Satisfaction between Psychological Wellbeing and Employee Performance.

METHODOLOGY

Procedure (Quantitative study)

The study used a convenience non-probability sampling procedure for the selection of respondents because of the non-availability of a sampling frame (Fricker, 2008). The responses were collected using the survey method and doctors were approached to conduct the survey. To gain maximum responses, researchers visited several hospitals, particularly during official work hours to obtain genuine responses.

Sample Size & Population

According to the Pakistan Medical & Dental Council (PMDC), the total number of registered doctors & surgeons, having degrees of MBBS or dentistry, is 210,113 in Pakistan till June 2019 as mentioned on their website, where 186,980 are MBBS & 23,133 are BDS. Doctors in the province of Sindh are 74,058, of which 65,791 are MBBS & 8265 are BDS. Sekaran and Bougie (2016) recommends that a minimum of 30 respondents per variable can be selected as a minimum sample size. Hence, the sample size for conducting this study was selected as 200. Around 210 responses were collected and 203 were retained considering their valid data. It is also recommended that when PLS SEM is used in a study, the sample size of 200 respondents is sufficient. SPSS 21 and PLS SEM 3.0 were used for data coding and statistical analysis in this research.

Scale & Measure

The seven-point Likert Scale was used in the questionnaire, considering 1 = "strongly agree" to 7 = "strongly disagree". All three constructs were adopted from previous studies. Psychological Wellbeing was measured as a higher-order construct comprised of six dimensions, which include personal growth, self-acceptance, positive relations with others, purpose in life. All the dimensions of Psychological Wellbeing had established reliabilities, i.e. Cronbach's Alpha > 0.7. Job Satisfaction was also measured as a higher-order construct comprised of three dimensions, which include intrinsic, extrinsic, and general satisfaction (Martins & Proença, 2012). To measure Job Satisfaction, a 20-items Minnesota Satisfaction Questionnaire (MSQ) was used in this study (Weiss et al., 1967) that possess already established reliability of Cronbach's Alpha > 0.7. Employee Performance was measured using a 4-item construct adopted from Yilmaz (2015), that has already established reliability, i.e. Cronbach's Alpha > 0.7.

RESULTS & FINDINGS

Demographics

There were around 87 medical practitioners who were experienced doctors and 116 doctors were doing their house job (practice after medical education). The majority of the respondents were females, i.e. 151 and 52 were male doctors. The majority of the respondents were 26 years old or above, and 82 doctors were less than 26 years old. The majority of the doctors were earning 30,000 – 50,000 PKR per month.

Descriptive Statistics

Descriptive statistics were conducted to check the univariate normality of data. The results are provided in Table 1.

Table 1

Descriptive Statistics

Construct	Mean	Standard Deviation	Sample Variance	Kurtosis	Skewness
Emp-Per	3.12	1.13	1.27	-0.79	-0.11
Gen-Sat	3.15	1.14	1.29	-0.82	-0.13
Ext-Sat	2.91	1.05	1.11	-0.67	0.01
Int-Sat	3.42	0.73	0.53	-0.71	-0.14
PWB-SA	3.50	0.58	0.34	0.64	-0.29
PWB-EM	3.11	0.80	0.64	-0.52	0.08
PWB-PL	3.50	0.74	0.54	-0.1	-0.25
PWB-PG	3.68	0.64	0.41	1.14	-0.18
PWB-PRO	2.83	1.01	1.03	-0.81	0.14
PWB-AU	3.83	0.79	0.63	1.12	-0.90

Note: Emp-Per = Employee Performance, Gen-Sat= General Satisfaction, Ext-Sat= Extrinsic Satisfaction, Int-Sat= Intrinsic Satisfaction, PWB-SA = Psychological Wellbeing, SA = Self-Acceptance, PL= Purpose in Life, EM = Environmental Mastery, PG= Personal Growth, PRO = Positive Relation with Others, and AU = Autonomy.

Table 1 depicts that all the values of skewness and kurtosis are within the range of ±1. This result shows that data fulfils the conditions of normal distribution.

Reliability & Validity Analysis

Validity and reliability are fundamental and important characteristics to evaluate the constructs. These characteristics eliminate the probability of researcher bias in the research. Reliability depicts the stability and consistency of results whereas validity determines the accuracy of the results.

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Table 2

Reliability and Validity Analysis

Constructs	CR	CA	KMO	AVE	EP	SA	EM	PL	AU	INT	EXT
EP	0.81	0.72	0.81	0.83	0.91						
SA	0.79	0.77	0.60	0.69	0.31	0.83					
EM	0.96	0.96	0.72	0.92	0.45	0.22	0.96				
PL	0.88	0.86	0.64	0.79	0.42	0.31	0.14	0.89			
AU	0.83	0.82	0.64	0.73	0.33	0.32	0.21	0.26	0.86		
INT	0.87	0.87	0.86	0.59	-0.38	-0.28	-0.23	-0.22	-0.36	0.77	
EXT	0.81	0.81	0.78	0.51	-0.26	-0.20	-0.21	-0.22	-0.35	0.73	0.72

Note: CR= Composite Reliability, CA = Cronbach's Alpha, EP= Employee Performance

Composite Reliability (CR) and Cronbach Alpha (CA) Coefficient were analysed for reliability analysis. Table 2 depicts that both tests fulfil the acceptable conditions, i.e. values are greater than 0.7. For convergent validity, Composite Reliability (CR) and Average Variance Extracted (AVE) fulfil the acceptable requirement, i.e. CR > 0.8 and AVE > 0.5. Table 2 also depicts the correlation values, which range between 0.2 and 0.9. Hence, correlation values are significant and no chances of multicollinearity were found. For discriminant validity test, the square root of variance explained (values in bold font) was found greater than each pair of the correlation value. Hence, the conditions of discriminant validity are also fulfilled.

Higher Order Constructs

Higher-Order Construct (HOC) includes several subcomponents which constitute concrete characteristics of this construct and is measured at a higher level of the construct (Wetzels et al., 2009). Repeated indicators approach was used to estimate higher-order constructs of Psychological Wellbeing and Job Satisfaction. All the indicators of first-order constructs were repeated in their respective higher-order constructs. Psychological Wellbeing and Job satisfaction both were tested as higher-order constructs. Psychological wellbeing was validated as higher-order construct based on its sub-constructs of 'Self-acceptance', 'Purpose in Life', 'Environmental Mastery', and 'Autonomy'. The sub-constructs of 'Positive relations' and 'Personal growth' were dropped as their factor loadings were found less than 0.5. Job Satisfaction was also validated as a higher-order construct based on its sub-constructs of 'Extrinsic Satisfaction' and 'Intrinsic Satisfaction'. The sub-construct of 'General Satisfaction' was dropped due to their factor loadings less than 0.5.

Hypotheses Testing

The hypotheses were tested using the bootstrapping test with 5000 subsamples. Mediating effect was analysed using the specific indirect effect from the bootstrapping test, as well as using the four-steps approach for testing mediation. Table 4 depicts the result of hypotheses testing.

Table 3

Hypothesis Testing

	Path Coefficient	T Statistics	P Values	Hypotheses
H1: PSW → EP	0.20	3.03	0.00	Supported
H2a: PSW → JS	-0.18	2.70	0.01	Supported
H2b: JS → EP	0.25	3.69	0.00	Supported
H2c: PSW → JS → EP	-0.04	2.13	0.03	Supported

JS= Job Satisfaction, PSW= Psychological Wellbeing, and EP= Employee Performance

This hypothesis H1 related to the significant effect of Psychological Wellbeing (β= 0.20, t=3.03, p=0) on Employee Performance is failed to reject. For mediation analysis, the effect of Psychological Wellbeing (H2a; β= -0.18, t=2.70, p=0.01) on Job Satisfaction, Job Satisfaction (H2b:β= 0.25, t=3.69, p=0) on Employee Performance, and indirect effect of Psychological Wellbeing (β= -0.04, t=2.13, p=0.03) on Employee Performance were also substantiated, according to guidelines suggested by Baron and Kenny (1986). Figure 4 depicts the structural model.

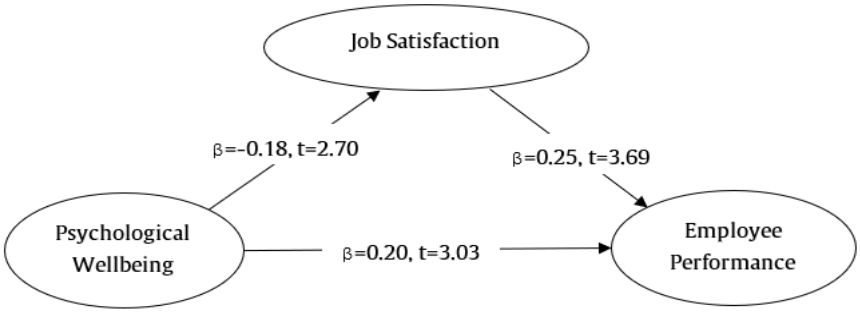

Fig. 2. Structural model used for hypotheses testing

Discussion

The results of this study show that higher-order constructs of Psychological Wellbeing and Job Satisfaction were validated using the repeated indicator approach (Becker et al., 2012). The effect of these constructs was tested using the structural model in Smart PLS. The results show that Psychological Wellbeing positively affects Employee Performance and negatively affects the Job Satisfaction of the doctors working in a populated country like Pakistan. It means that doctors are less satisfied with their job, although their psychological wellbeing remains higher. The career commitment of a doctor can be improved by developing a sense of calling (vocational identity) through promoting personally rewarding experiences in the work environment (Tak et al., 2017). Often doctors are focused on treating more patients, because of their workload they neglect to focus on their diet, physical capabilities, and several other factors (Aiken et al., 2024; Hameli et al., 2024; Srivastava et al., 2019). The results of the study can be productive for the administrators of hospitals to work on the intrinsic motivation strategies of the medical practitioners because the intrinsic motivational factor has emerged as an important dimension in this study.

CONCLUSION

The study reveals that doctors' career commitment improves when their sense of calling is nurtured through meaningful work experiences. Yet, heavy workloads often lead them to neglect their own well-being. Hospital administrators should therefore focus on intrinsic motivation strategies, as this has proven to be a key factor in sustaining doctors' professional dedication and enhancing healthcare outcomes.

Implications for Managers, Hospitals, and Healthcare Practitioners

The result suggests that the Psychological Wellbeing of doctors is negatively influencing their Job Satisfaction. Hence, hospitals should hire administrators (psychologists), who can counsel doctors in terms of their personal, official, and career-related issues. Self-awareness and self-management training sessions can also be conducted by professionals to counsel medical practitioners. Administrators of the hospitals and heads of the departments should consider the workload of the doctors (Edwards et al., 2002; Shah et al., 2016). The results of this study suggest the positive effect of Psychological Wellbeing on doctor's Performance. Therefore, the administration of the hospitals should provide an opportunity to doctors that they can express their requirements related to autonomy and their intrinsic needs.

Contribution of the doctors will lead the hospitals and healthcare institutions to achieve their strategic objectives (Edwards et al., 2002). Hospitals' administration can identify intrinsic motivation factors that can satisfy doctors because these factors directly contribute to their job performance. The more doctors contribute; the more patients will be satisfied with the services of the hospitals that will help the hospitals to achieve their strategic goals in a healthy competitive environment (Aiken et al., 2024).

Implications for Scholars

This study provides empirical evidence related to the significant effect of the Psychological Wellbeing of the doctors on Job Satisfaction. The study is contributing to the body of knowledge theoretically, methodologically, and contextually. Theoretical contribution of this study includes the testing the effect of variables such as Psychological Wellbeing, from Psychological Contract Theory, Employee Performance,

and Job Satisfaction from social exchange theory and Herzberg's two-factor theory (Tak et al., 2017). The constructs used in the study were developed and studied in other cultures. However, this study is validating these variables targeting a less studied sector of health care. Moreover, the other significance of this study is to use PLS SEM approach for validating the higher order constructs and test the hypotheses. The relationships studied in the model contribute to the health care sector, which provides insights to policymakers and the management of health care institutions specifically working a country where patient load is affects the performance of the doctors.

Limitations & Future Research

This study is limited to medical practitioners of an urban city. Doctors practicing their jobs in rural areas may feel more stress because a lack of facilities that can impact their job satisfaction and Performance. Other intrinsic factors can also be investigated in the future with various approaches and tools to assess job satisfaction levels among doctors. The demographic characteristics of the medical practitioners were not focused in context of mediation or moderation testing that may be considered in the future research. Segregating government or private hospitals can also provide a new direction to future studies.

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Institutional Review Board Statement

The study was conducted in accordance with the protocols and approved by the Presidents' Secretariat Research Ethics Committee (or Ethics Committee) of INSTITUTE OF BUSINESS MANAGEMENT (April 16, 2021).

Informed Consent Statement

Informed consent was obtained from all subjects involved in the study.

Data Availability Statement

Data cannot be provided due to the confidentiality restrictions.

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Competing Interests

The authors declared no competing interests.

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