

Mediating Role of Career Commitment in the Relationship Between Personality Traits and Career Satisfaction Among Medical Doctors: A Correlational Study

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Abstract

Background: Personality comprises measurable traits that influence individuals' behaviors and attitudes. This study aimed to examine whether career commitment mediates the relationship between personality traits and career satisfaction among medical doctors. Despite extensive research on personality, its specific association with career satisfaction in the medical profession remains underexplored.

Methodology: A correlational study design was employed using a survey to collect data from 300 doctors working in government and private hospitals in Islamabad, Pakistan. Data were analyzed using SPSS version 24.

Results: Openness, conscientiousness, extraversion, and agreeableness were positively associated with both career satisfaction and career commitment, whereas neuroticism showed a negative association. Career commitment significantly mediated the relationship between personality traits and career satisfaction. Additionally, monthly income and weekly working hours were identified as significant predictors of career satisfaction.

Conclusion: This study highlights the important role of personality traits in shaping career commitment and satisfaction among medical professionals. It contributes to the existing literature by emphasizing the mediating effect of career commitment and providing insights specific to the medical field.

Keywords: Agreeableness; career commitment; career satisfaction; conscientiousness; extroversion; neuroticism; openness

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Introduction

Personality is often described as a set of measurable traits that a person exhibits (1). Personality traits are the most studied variable in social sciences but its relationship with career satisfaction and career commitment seems to be little in previous studies. Various studies have been conducted in the past to determine the impact of personality traits on career success (2), job performance (3), citizenship behavior within organization (4) and burnout (5). There is scarcity of work done on career satisfaction construct. It is an important construct for research as it deals with the subjective feeling and is based on different factors of work behavior and well-being (6), defined career satisfaction as satisfaction level that is derived from the extrinsic and intrinsic facets of career, and it includes salary, progression, and opportunities for development.

Career commitment has a strong impact upon employees' satisfaction and success within career. According to Cohen (7), in 1950s, the concept of career commitment attained attention in academicians and practitioners. Greenhaus did pioneer work and defined the term "career salience" means how much a person gives importance to his/her work (8). Career satisfaction is considered as one of the significant predictors of career commitment and is associated with positive career outcomes (9,10). Employee satisfaction plays crucial role in the success of an organization and medicine is no exception. As the field of medicine is considered as one of the well reputed professions in Pakistan, tremendous number of resources are necessary in the training of a physician at medical school and subsequently in specialization. Effective career planning largely



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depends on aligning job characteristics with the personality traits of young professionals, and this study aims to assist medical students in making informed career choices (11).

Kisten and Kluyts highlighted that neuroticism negatively predicts job satisfaction, while agreeableness is positively associated with it(12). Nonetheless, a physician's satisfaction directly enhances the quality of their services (13,14) and identified a substantial association among age group, education, income, and job satisfaction of physicians, but found no effect of gender. Arora and Rangnekar examined three determinants of career commitment: career identity, career resilience, and career planning, and discovered that agreeableness positively influenced career planning(15). Openness to experience was a key predictor of career commitment, whereas conscientiousness predicted professional identity (16) and evaluated the influence of personality characteristics, demographic factors and organizational commitment of construction personnel of Turkey, indicating that there was substantial association between personality traits (agreeableness and consciousness) and organizational commitment.

Career satisfaction has a significant influence on employees' productivity (17). Career commitment is a result of career growth, and professional development directly impacts employees' commitment and job satisfaction (18). Son and Kim studied the mediating effect of career commitment in determining correlation among motivation for training and turn over intention and organization-related variables(19). Another study examined career commitment as mediator in determining the influence of self-evaluation upon job satisfaction of male Chinese soldiers. Study findings revealed that core self-evaluation and career commitment are significantly correlated with job satisfaction (20). Karavardar investigated the effect of career commitment on subjective career success in Turkey, using career satisfaction as a mediator (21). While exploring the previous literature on the relationship between big five personality traits, career commitment and career satisfaction, it was found that most studies on career satisfaction have been conducted in Germany, the U.S, Turkey and Kuwait, with limited research in the Pakistani context. Previous literature has highlighted the mediating role of career commitment in predicting job satisfaction (20). Therefore, this study will investigate the relationship between personality traits and career satisfaction by analyzing the mediating effect of career commitment.

Methodology

Study Design:

Convenient non-probability sampling technique was used in this study. A correlational study designed was employed. Sample comprised of medical doctors (N=300), including both male (n=165) and female (n=135) respondents. The sample size was determined using G*Power 3.1 with a medium effect size ($f^2 =$

0.15), alpha level (α) of 0.05, and power ($1-\beta$) of 0.80. The minimum required sample was roughly 150, however a larger sample of 300 was chosen to improve statistical stability.

Participants:

The majority of participants (78%) were aged 31-40. Participants came from various departments. Among these doctors, 62.3% worked exclusively in a hospital, 25.7% were engaged in both hospital duties and private practice, and 12% were involved in teaching.

Inclusion Criteria

Both male and female doctors working in government and private sectors in Islamabad were included in the study, provided they held an FCPS degree.

Data Collection and Statistical Analysis:

Approval was obtained from the hospital administration, and informed consent was secured from all participants. Data were collected via questionnaires distributed to doctors. SPSS version 24 was used to analyze the data. For every study variable, descriptive statistics such as mean, standard deviation, skewness, kurtosis, and Cronbach's alpha coefficients were calculated. To investigate bivariate relationships between variables, Pearson's product-moment correlation coefficients were computed. In order to investigate indirect effects, mediation analyses were carried out using the PROCESS macro for SPSS (Model 4) with 5,000 bootstrap resamples and 95% bias-corrected confidence intervals. The predictive influence of demographic variables (monthly income, weekly working hours, gender, work setting, years in practice, married status, and age) on career satisfaction was investigated using hierarchical multiple regression analysis. For every hypothesis test, $\alpha = 0.05$ was used as the significance level. Skewness and kurtosis values, scatterplots, tolerance and VIF statistics, and residual plots were used to test assumptions of normality, linearity, multicollinearity, and homoscedasticity before inferential analysis. There were no significant infractions found.

Instruments Used:

1. **Big Five Inventory (BFI):** Personality traits were assessed using Big Five Inventory (BFI), developed by John *et al.* (22). It is 44-item self-report questionnaire on a five-point Likert scale. The BFI demonstrated strong internal consistency ($\alpha = .76$ to $.92$) in the present study.
2. **Career Satisfaction Scale (CSS):** Career Satisfaction was measured using Career Satisfaction scale (CSS) by(23) Greenhaus *et al.* . This five-item scale determines parameters of career satisfaction, rated on a five-point scale (1 = strongly agree to 5 = strongly disagree). The CSS showed high reliability coefficient of 0.88.

Career Commitment Scale – Long Form: Career commitment was assessed using Career Commitment Scale – Long Form, developed by Colarelli and Bishop and demonstrated good internal consistency ($\alpha = .819$) (24). It has 17-item and is rated on a seven-point Likert scale (7).

Results

Table 1 presents descriptive statistics for various psychological scales measured among the medical doctors (n=300).

Table 1: Descriptive Statistics of all variables (N=300)

Scales	No of items	M	SD	Skewness	Kurtosis	α
Openness	10	4.0	.59	-.98	2.93	.76
Conscientiousness	9	3.44	1.07	-.34	-1.1	.92
Extroversion	8	3.25	1.05	.10	-1.0	.89
Agreeableness	9	3.77	.88	-.60	-.23	.84
Neuroticism	8	3.56	1.11	-.52	-.82	.91
CSS	5	12	5.28	.71	-0.36	.91
CCSLF	17	89	14.73	-.14	-.36	.82

M = Mean, SD = Standard Deviation, α = Cronbach's alpha for internal consistency

Correlations Matrix

Table 2 demonstrates the Pearson product –correlation coefficient among the variables of current study. There is a weak but statistically significant positive relationship between career satisfaction and career commitment ($r=0.38, p<0.00$). Additionally, a weak positive correlation exists between career satisfaction and extroversion ($r=0.35, p< 0.00$). As shown in Table 2 career satisfaction is positively associated with agreeableness ($r=0.36, p<0.00$) and conscientiousness ($r=0.33, p< 0.00$). Furthermore, there is weak, positive, statistically significant relationship between career commitment and extroversion ($r=0.35, p<0.00$). Career commitment also demonstrated weak positive correlations with agreeableness, ($r=0.30, p<0.00$) and conscientiousness ($r=0.33, p<0.00$). A weak, positive, significant relationship between career commitment and openness was observed ($r=0.21, p<0.00$).

Table 2: Pearson's Product Moment Correlation of Career Satisfaction, Career Commitment and sub- scales of Big Five Inventory (N=300)

	Variables	1	2	3	4	5	6	7
1	Career Satisfaction	1	.38**	.35**	.36**	.33**	-.51**	-.09
2	Career Commitment		1	.35**	.30**	.31**	-.42**	.21**
3	Extroversion			1	.19**	.68**	-.43**	.05
4	Agreeableness				1	.31**	-.32**	.11
5	Conscientiousness					1	-.43**	.11*
6	Neuroticism						1	.08
7	Openness							1

** Correlation is significant at the 0.01 level (2-tailed) * Correlation is significant at the 0.05 level (2-tailed)

Table 3: Mediation analyses (PROCESS Model 4) examining career commitment as a mediator between personality traits and career satisfaction (N=300)

Predictor	Model	β	LL	UL	R ²
Openness	Model 1 (Total)	-0.87	-1.87	0.13	.01
	Model 2 (Direct)	-1.64***	-2.58	-0.71	.18
	Career Commitment	0.15***	0.11	0.19	
Conscientiousness	Model 1 (Total)	1.62***	1.09	2.15	.11
	Model 2 (Direct)	1.16***	0.63	1.69	.20
	Career Commitment	0.11***	0.07	0.15	
Extraversion	Model 1 (Total)	1.76***	1.22	2.29	.12
	Model 2 (Direct)	1.24***	0.69	1.78	.19
	Career Commitment	0.10***	0.07	0.14	
Agreeableness	Model 1 (Total)	2.14***	1.45	2.78	.13
	Model 2 (Direct)	1.59***	0.95	2.23	.21
	Career Commitment	0.11***	0.07	0.15	
Neuroticism	Model 1 (Total)	-2.42***	-2.89	-1.95	.26
	Model 2 (Direct)	-2.02***	-2.51	-1.51	.29
	Career Commitment	0.07***	0.04	0.11	

Model 1 = total effect (c path); Model 2 = direct effect including mediator (c' path) Career Commitment represents the mediator (b path)

LL = lower limit; UL = upper limit; CI = 95% ***p < .001, **p < .01, *p < .05.

Mediation Analysis

PROCESS macro was used to investigate the mediating role of career commitment on the relationship of personality traits and career satisfaction. Model 4 was used to assess five mediated models and the results were summarized in Table 3.

Regarding openness, the total effect on career satisfaction was non- significant ($\beta=-.87, p=.09$) as described in model 1. While model 2 explains that the direct effect of openness on career satisfaction is also significant after controlling the effect of career commitment ($\beta=-1.64, 95\% CI=-$

$2.58, -.71, p<.001$). Furthermore, results indicate that career commitment significantly mediated the relationship of openness and career satisfaction ($\beta = .77, 95\% CI=.28, 1.22, p<.001$) and explained 18% of the variance in the domain of career satisfaction.

For conscientiousness, the total effect on career satisfaction was significant ($\beta=1.62, p<.001$). This relationship remained significant after controlling the effect of career commitment ($\beta=1.16, 95\% CI=.63, 1.69, p<.001$). In addition, it was observed that career commitment significantly mediated

the relationship of conscientiousness and career satisfaction ($\beta = .46$, 95% CI=.23, .70, $p<.001$) and explained 20% of the variance in the domain of career satisfaction. A notable indirect effect of conscientiousness on career satisfaction via career commitment was observed, $\beta=.46$, 95% CI [.23,.70].

Similarly, the total effect of extroversion on career satisfaction remained significant ($\beta=1.76$, $p<.001$). Model 2 explained that the direct effect of extroversion on career satisfaction was also significant after controlling the effect of career commitment ($\beta=1.24$, 95% CI=.69, 1.78). Results also indicate that career commitment significantly mediated the relationship of extroversion and career satisfaction ($\beta = 0.52$, 95% CI=.29, .80) and explained 19% of the variance in the domain of career satisfaction. Career commitment had a substantial indirect effect on career satisfaction, with a value of $\beta = 0.52$ and a 95% confidence interval of [.29,.80].

In case of agreeableness, the results showed a significant total effect on career satisfaction ($\beta=2.14$, $p<.001$). The direct effect remained significant after controlling the effect of career commitment ($\beta=1.59$, 95% CI=.95, 2.23, $p<.001$). Moreover, results indicate that career commitment significantly mediated the relationship of agreeableness and career

satisfaction ($\beta = .55$, 95% CI=.27, .87, $p<.001$) and explained 21% of the variance in the domain of career satisfaction. Agreeableness had a notable indirect effect on career satisfaction through career commitment, $\beta=.55$, 95% CI [.27, .87].

Finally, neuroticism exhibited a significant negative total effect on career satisfaction ($\beta=-2.42$, $p<.001$), which remained significant after accounting for career commitment ($\beta=-2.02$, 95% CI=-2.51, -1.51, $p<.001$). Career commitment significantly mediated the relationship of neuroticism and career satisfaction ($\beta = -.41$, 95% CI=-.65, -.18, $p<.001$) and explained 29% of the variance in the domain of career satisfaction. There was a significant indirect effect of neuroticism on career satisfaction through career commitment, $\beta= -.41$, 95% CI [-.65, -.18].

Role of Demographic Variables in predicting Career Satisfaction

Hierarchical regression analysis was run to study the predictive role of demographic variables upon career satisfaction of medical doctors. This explains that monthly income and weekly working hours are two major predictors of career satisfaction among medical doctors.

Table 4: Summary of Hierarchical Regression Analysis for demographic variables predicting career satisfaction in medical doctors (N=300)

Predictor variable	R	R ²	B	SE B	B	ΔR^2	A
Step 1	.38	.15				.13	.000
Monthly income			-2.6	.58	-.37***		
Weekly working Hours			.04	.01	.14***		
Gender			-.1	.6	-.01		
Work setting			.21	.47	.03		
Years in Practice			-.32	.38	-.1		
Step 2	.39	.16				.14	.000
Monthly income			-2.6	.58	-.36***		
Weekly working hours			.03	.01	.13***		
Gender			-.20	.56	-0.19		
Work setting			.24	.47	.03		
Years in Practice			-1.7	.40	-.03		
Marital status			-.11	.1	-.07		
Age			1.0	.65	-.9		

B = unstandardized coefficient, β = standardized beta coefficient, α = significance level of model, CI = confidence interval *** $p<0.01$, ** $p<0.05$

Discussion

The study found that conscientiousness, extroversion, and agreeableness favorably affect doctor career satisfaction. Extroverts are more likely to hold and be satisfied with jobs having social interaction (25). The relationship between extroversion and performance constructs is consistent with meta-analysis (26). Similarly, individuals possessing agreeableness traits are mostly cooperative and have kind feelings about others and they perform better in their task (27). Being cooperative and empathetic towards patients' aids doctors in building rapport. The positive relationship between conscientiousness and career satisfaction, supported by the correlation matrix is likely due to conscientiousness being linked to responsibility, organization, and discipline. These findings align with Paloş *et al.* who found a significant relationship between job satisfaction and conscientiousness (28).

There was a negative relationship between neuroticism and career satisfaction of doctors. Neuroticism is consistently identified as a strong negative correlate of job satisfaction (11). Employees with high stress levels often struggle to build emotional connection with their organization, leading to lower career satisfaction. Additionally, findings of this study showed insignificant relationship between openness to experience and career satisfaction, consistent with Kappagoda and Kulathunga explanation findings (29).

There was positive relationship between extroversion, agreeableness, conscientiousness traits and career commitment. This is because employees possessing agreeableness traits are pleasantly linked to communication with other people which in turn is directly associated with affective intimacy (30). Such affection can increase employee social identity in the workplace and provide supportive environment. Results had shown the

positive relationship between conscientiousness and career commitment of doctors, this is because an employee who possesses highly responsible, disciplined and careful personality can easily impress the surrounding workforce and a natural bond is created with the organization and its environment that makes the individual emotionally attached to that organization (31).

There was significant negative relationship between neuroticism and career commitment among doctors. It might be due to the fact that if an employee possesses highly neurotic traits, then becomes difficult for him to show high commitment in their career (32). On the other hand, there is direct relationship between openness to experience and career commitment among doctors. Individuals who scored high on openness to experience trait are more likely to embrace various challenge, which in turn can foster their career growth (33). A positive correlation was observed between career satisfaction and career commitment among the doctors. Belief and acceptance of goals and values within organization make them inspired, satisfied and committed towards career (9). Findings of this study are in line with the study of Akram *et al.* (34).

Previous studies have suggested that career commitment acts as significant predictor and mediator in multiple contexts (35). In the current study, career commitment was found to mediate the relationship between the personality traits and career satisfaction of doctors. This suggests that extroverted doctors in the hospital sectors achieve greater career satisfaction due to their higher levels of career commitment. Similarly, career commitment completely mediated the relationship between agreeableness and career satisfaction. Conscientiousness was found to positively and substantially affect career satisfaction through the mediating role of career commitment, demonstrating that doctors with a high sense of responsibility tend to achieve higher career satisfaction through their commitment. Satisfaction and commitment level of doctors had no concern with gender (36). This could be due to the fact that healthcare sector is regarded as a respectable profession for both genders in the society of Pakistan.

Limitations

The cross-sectional and correlational design of this study does not allow for causal inferences, hence the observed mediation effects should be interpreted statistically. The use of convenience sampling and self-report measures reduces generalizability and may create response bias. Despite these limitations, the findings offer preliminary evidence about the relationships between personality traits, career commitment, and job satisfaction in the Pakistani medical context.

Conclusion

This study looked at the relationships between medical professionals' personality qualities, career commitment, and job

happiness. The results show that professional dedication statistically modulates the associations between work satisfaction and a number of personality factors. However, the results should be viewed as indicative of associations rather than causative effects due to the cross-sectional and correlational methodology. Career happiness was also linked to weekly working hours and monthly income, underscoring the importance of contextual factors. Overall, this work highlights the need for long-term research to elucidate the direction and mechanisms of these associations and offers preliminary evidence from the Pakistani medical environment.

Ethical Approval:

The study was approved by the NUST Ethical Review Committee. Ref. No. S3H-NUST 07/2021-01/01 Dated: 01-07-2021

Data Availability: Data supporting the findings are available upon reasonable request.

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Conflict of interest: The authors declare that they have no conflict of interest.

Authors' Contribution:

AK: Initial drafting, data collection, analysis and interpretation of the manuscript.

SK: Conception and design of the study

SHA: Reviewed and edited the manuscript

VK: Formatting and critical review

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