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# THE MEDIATION OF WORK ENGAGEMENT BETWEEN JOB SATISFACTION AND ORGANIZATIONAL CITIZENSHIP BEHAVIOR: A STUDY OF HEALTHCARE SECTOR

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## **ABSTRACT**

Healthcare professional's trends in the practice of organizational citizenship behavior will have a significant influence on hospital image effectiveness and efficiency. The employee's tendency to show flexibility outside their prescribed Jobs may affect satisfaction level with their jobs and their Work Engagement (WE). The purpose of this study is to assess, among healthcare employees working in Malaysian hospitals, with the mediating effect of employee engagement between Job Satisfaction (JS) and Organizational Citizenship Behavior (OCB). In addition, the direct associations between exogenous latent variables and endogenous latent variable in the analysis are also examined. The questionnaires were distributed to the respondents of healthcare professionals and a 239 useable and completed questionnaires were returned. Hypotheses have been tested by PLS-SEM. Findings have shown that job satisfaction has a positive effect on the employee engagement of healthcare professionals in the workplace and on the organizational citizenship behavior. In the meantime, a significant indicator of organizational citizenship behavior has been verified as employee engagement. In addition, the relationship between job satisfaction and organizational citizenship behavior has been partly mediated by employee engagement. The provision of effective healthcare services and cope with increasing demands by patients is critically important for the hospitals to have health professionals who demonstrate their organizational citizenship behavior. Accordingly, important steps are needed to strengthen the role of job satisfaction and employee engagement between the healthcare employees.

**Keywords**: Work Engagement, Job Satisfaction, Organizational Citizenship Behavior, Healthcare Sector

## INTRODUCTION

The health sector has always contributed significantly to the economic growth of Malaysia. The government of Malaysia is committed of promoting the country as the largest destination for medical tourism worldwide. However, Malaysia is facing strong competition in the field of health care from different countries, like Singapore and Thailand. Furthermore, rather than investing in infrastructure upgrades and facilities, the services provided by healthcare professionals are also important to ensure patient satisfaction (Tsai & Wu, 2010). Every administrator of hospitals should therefore be concerned with Human Resource Management (HRM). The leading healthcare employees in the hospital, such as physicians and nurses, interact with patients. Therefore, in addition to advancing technology in the fields, their attitudes and behaviors are significantly influencing service quality and customer satisfaction (Al-Neyadi, Abdallah & Malik, 2018; Okpala, 2018). The health care professionals' tendencies in organizational citizenship behavior, widely regarded as an extra-role attitude and behavior, can

greatly influence hospital performance, efficiency and image (Sulea et al., 2012). Several studies have shown that the organizational citizenship behavior is closely linked to customer expectations of patient's satisfaction and service quality in hospitals (Prottas & Nummelin, 2018; Zhou, Wan, Liu, Feng & Shang, 2017). Numerous studies have shown that organizational citizenship behaviour has a strong relationship to patient perception about quality of service and patient's loyalty in the field of health care (Bateman & Organ, 1983; Smith, Organ & Near, 1983). Organizational citizenship behavior is distinguished by the discretionary actions of workers that go beyond the requirement for structured duties, offer assistance to employees and organizations, but there is no assurance that employees involved in such voluntary activities will receive any bonuses (Somech & Drach-Zahavy, 2004). Based on Han and Altman (2010); Ueda (2012) there is no agreement on the dimensionality of the organizational citizenship behavior, and cultural differences between Western and non-Western states lead to different views of the organizational citizenship behavior. Some claimed that organizational citizenship behaviors are more likely to be demonstrated by workers in high collectivist countries (e.g., Malaysia) (Ueda, 2012). The organizational citizenship behavior of healthcare professionals is important as patients will be able to carry out activities that are not included in their official work scope promptly and voluntarily. Organizational citizenship behavior activity in the service organizational sector, which is constantly facing workforce shortage, is particularly critical (Chen, Niu, Wang, Yang & Tsaur, 2009). Delays in delivering appropriate care and medical errors by healthcare professionals can lead to irretrievable losses that affect the health and lives of the patients. Therefore, organizational citizenship behavior is associated to a decrease in their intention to leave (Tsai & Wu, 2010) and is critical for healthcare organizations facing high turnover intention. Studies have shown that work engagement and job satisfaction encourage organizational citizenship behavior (Matula & Uon, 2016; Tsai & Wu, 2010). A psychological concept namely, work engagement is a positive psychology which emphasize the creation of capabilities and human strength (Bakker, Schaufeli, Leiter & Taris, 2008). Work engagement is described as "a positive, fulfilling, work-related state of mind that is characterized by vigor, dedication and absorption" (Schaufeli, Salanova, González-Romá & Bakker, 2002). It means that workers who are dedicated to their job are creative, loyal, prideful and fully focused. However, in spite of demanding or stressful condition, they also find their job exciting and interesting (Bakker, Demerouti & Sanz-Vergel, 2014). Therefore, work engagement has a promising role to play in improving the organizational commitment and well-being of its workers, its position as well as its internal success and extra roles behavior (Matula & Uon, 2016; Prottas & Nummelin, 2018).

The overall attitude of satisfaction at work is a reflection of his/her job (Robbins & Judge, 2005). The history of job satisfaction among health specialists, particularly doctors has been given considerable attention (Lu, Barriball, Zhang & While, 2012; Nelson & Cavanagh, 2018). Empirically, career satisfaction was reliably correlated with multiple positive outcomes of the jobs, including the organizational citizenship behaviour in diverse professionals and cultures (Lu et al., 2012). A substantial amount of recent study concerning health workers focused on assessing job satisfaction and work engagement as an outcome predictor of job and personal variables (Lu et al., 2012; Simpson, 2009). The ties between workplace satisfaction, work engagement and organizational citizenship behavior, though, remain uncertain. There have been little studies to date on the mediating impact of WE in between JS and citizenship behaviour. Assumed that health practitioners who are happy with their work can have a more constructive presence which therefore inspire them to participate in more organizational citizenship behaviour. This examination provides fresh perspectives and develops understanding of the actions of citizenship in the health field. However, this report demonstrates the attempts of health care management to improve flexibility and discretionary between hospital professionals. Basically, our research aims in particular to evaluate the immediate impact of job satisfaction on workplace engagement and organizational citizenship behaviour, as well as the relationship between work engagement and the behavior of organizational citizenship. In addition, this study reveals the mediation of the work engagement between job satisfaction and organizational citizenship behaviour.

## LITERATURE REVIEW AND DEVELOPMENT OF HYPOTHESES

Job Satisfaction is a pleasant and pleasing emotional situation resulting from the assessment of an employee's work (Locke, 1983; Jermsittiparsert, Petchchedchoo, Kumsuprom & Panmanee, 2021). The decision to resign, absenteeism and burnout between medical professionals is mainly due to job satisfaction (Lu et al., 2012). The study considers job satisfaction to be the main factor of organizational citizenship behavior (Tsai & Wu, 2010). This association can be explained by a theory of social exchanges which implies, through an exchange of social and emotional value, that both employers and employees comply with the law of reciprocal exchange (Cropanzano & Mitchell, 2005). Furthermore, the study finds that workplace satisfaction is strongly related to individual and organizational citizenship behavior (Hurst, Baranik & Clark, 2017). Medical experts demonstrate their organizational citizenship behaviour by encouraging people with a lack of expertise, by honoring people, by promoting suggestions for change in business and not by moaning about corporate pressure and slight inconvenience. According to the Social Exchange Theory (SET), if workers are happy with their jobs, they can give their employers a benefit in an effective and economical way (Aeknarajindawat & Jermsittiparsert, 2020). Keeping in mind the above-mentioned discussions, the following hypothesis has been developed.

H1: The relationship between JS and OCB is positively and significantly related.

Work engagement is important in enhancing the behaviors of workforce across organizations in the area of organizational citizenship behavior (Christian, Garza & Slaughter, 2011; Dalal, Baysinger, Brummel & LeBreton, 2012; Sangperm, 2017; Oentoro, 2018; Abdul Ghani, Kaliappen & Jermsittiparsert, 2019). A study claimed that the staff engaged were more effective during their work and allowed to carry out activities or duties outside the work description (Christian et al., 2011; Urairak & Chaleoykitti, 2017; Pompuang, Buresuwan, Sarnswang & Lupanachokdee, 2019). Furthermore, the research also showed that work engagement was necessary not only to improve organizational citizenship behaviour but also reduce counter productive work behavior (Sulea et al., 2012; Sangperm, 2018). In addition, the enhancement of organizational citizenship behavior between nurses with the help of work engagement has also been demonstrated from different hospitals in Thailand (Matula & Uon, 2016), which refers at the same time to the previous study by Simpson (2009). In brief, engaged healthcare employees who are enthusiastic and focused about their jobs are predicted to be exceptional. The aforementioned feedback leads to the following conclusion.

H2: The relationship between WE and OCB is positively and significantly related.

Many previous studies have shown that job satisfaction is primarily related to work engagement (Mache, Vitzthum, Klapp & Danzer, 2014; Simbula & Guglielmi, 2013). Moreover, the study explained that job satisfaction is the main attitude towards understanding work engagement, and this association was empirically confirmed in a previous study (Yalabik, Popaitoon, Chowne & Rayton, 2013). In a report involving 123 physicians, Mache, et al., (2014) clearly established a favorable correlation between job satisfaction and work engagement in the healthcare sector. In short, well-satisfied healthcare employees would potentially have a stronger presence at work with full engagement, thereby supporting the following hypothesis.

H3: The relationship between job satisfaction and work engagement is positively and significantly related.

Mutually, sufficient evidence has been widely documented for a successful association between work engagement and organizational citizenship behavior (Matula & Uon, 2016; Simbula & Guglielmi, 2013). In contrary, job satisfaction is defined as an antecedent of work engagement and organizational citizenship behavior by different scholars (Burns, 2016; Hurst et al., 2017; Mache et al., 2014). Previously, work engagement is used as a mediating variable between job resources and behavioural outcomes (i.e., OCB in this case) (Bakker, Demerouti & Verbeke, 2004; Simbula & Guglielmi, 2013; Singh et al., 2016). Yalabik, et al., (2013) examined a longitudinal study on the temporal arrangement of attitudinal variables (for example, job satisfaction and commitment) and work engagement. The scholars summed up that attitudes are the antecedents of work engagement rather than their outcomes. In addition, the results also showed that attitudes at work describe behavioural outcomes, for instance, turnover intention and employee's performance through a mechanism of work engagement which serves as a mediating variable between the said relationships (Yalabik et al., 2013). Employees who are satisfied are emotionally engaged and have an inherent motivation with their jobs, continue to speak positively for his/her organization, support other staff and show extra role-behaviors, thus supporting the following hypothesis:

H4: The Association between job satisfaction and OCB is mediated by work engagement.

#### RESEARCH METHODOLOGY

## Sample of the Study

The research was cross-sectional and quantitative in nature. The participants of the current study include employees working in public and private healthcare departments in Malaysia. We distributed 450 questionnaires to the participants working in these public and private healthcare sector hospitals. All of these questionnaires were distributed during lunch or break time with the permission of healthcare administrators. We used convenience sampling technique to collect the data from participants. Essentially, every participant was told before engaging in the survey about the objective and the significance of the analysis. In accordance with the questionnaire, a cover letter was also attached, and the participants were told of the survey's anonymity, privacy and confidentiality and their presence in the research was voluntary. We received 257 questionnaires from the participants out of which 23 were incomplete and discarded. A total of 234 questionnaires were used for data analysis with a response rate of 52 percent.

#### **Constructs Measurement**

The measurement scale of job satisfaction with five (5) items was developed by Anderson, Coffey & Byerly (2002). Similarly, organizational citizenship behavior scale with three (3) dimensions, *i.e.*, civic virtue with four (4) items, altruism with five (5) items and sportsmanship with four (4) items was developed by Yoon & Suh (2003). Both variables were assessed by utilizing 1-5 Likert type scale ranging from strongly disagree to strongly agree. Lastly, the scale of work engagement with short version (UWES-9) with three (3) dimensions consisting of total nine (9) items. All three dimensions vigor, dedication and absorption contains three (3) items each and the scale was developed by Schaufeli, Bakker, and Salanova (2006). These items were measured on a 6-point Likert type scale ranging from 0= never and 6= always.

#### **RESULTS**

For this reason, the hypotheses were checked by partial least square structural equation modeling (PLS-SEM) technique and smart PLS 3.0 was used for data analysis. Smart PLS is

used to assess total effect, direct effect and indirect effect of structural path coefficients at the same time (Astrachan, Patel & Wanzenried, 2014). SPSS 23.0 is used for entering data, data screening and descriptive statistics.

## **Demographic Profile**

From the 234 respondent's profile, 55.10 percent of the respondents were nurses and 44.90 percent were doctors. Total number of female participants in this survey were 62.3 percent, whereas male participants were 36.7 percent. In this survey, 61.7 percent of the respondents were between 25-30 years which are mostly young. Keeping in view the ethnic groups, chines respondents were 69.5 percent, Malay respondents were 11.2 percent, Indian respondents were 13.8 percent and others were 5.5 percent. Keeping in view the marital status, most of the participants were single 62.0 percent, married were 27.6 percent, separated were 2.1 percent, widowed were 4.9 percent and divorced were 3.4 percent.

## **Assessment of Measurement Model**

In the present study, latent variables internal consistency was evaluated by Composite Reliability (CR). Table 1 demonstrate CR values of job satisfaction, work engagement and organizational citizenship behavior were 0.884, 0.931 and 0.875 which were above the threshold value of 0.70 (Hair Jr, Hult, Ringle & Sarstedt, 2017). In measurement model, convergent validity of the latent variables was evaluated by assessing the values of items loadings and Average Variance Extracted (AVE). The items loadings between 0.40-0.70 could also be retained when values of AVE and CR fulfill the criteria as suggested by Hair, et al., (2017). Therefore, organizational citizenship behavior four items have been removed due to low loadings below 0.40. Thereafter, job satisfaction, work engagement, and organizational citizenship behavior items were retained with loadings from 0.650 to 0.883. In the present study, all variables AVE values were between 0.526 and 0.745 which are above the threshold value of 0.50 as suggested by Hair, et al., (2017). The findings revealed that there is a satisfactory level of convergent validity.

CONSTRUCTS	Table 1 VALIDITY AND R	ELIARILITY		
Constructs	Indicators	Items	CR	AVE
	OCB_1	0.782	0.875	0.602
	OCB_2	0.861		
	OCB_3	0.855		
	OCB_4	0.873		
	OCB_5	0.650		
Organizational_citizenship_behavior	OCB_6	0.851		
	OCB_7	0.685		
	OCB_8	0.734		
	OCB_9	0.876		
	JS_1	0.722	0.884	0.526
	JS_2	0.781		
Job satisfaction	JS_3	0.832		
	JS_4	0.853		
	JS_5	0.823		
	WE_1	0.865	0.931	0.745
	WE_2	0.695		
	WE_3	0.874		
	WE_4	0.883		
Work engagement	WE_5	0.856		
	WE_6	0.843		
	WE_7	0.875		

WE_8	0.832	
WE_9	0.875	

Through the assessment of the (Fornell & Larcker, 1981) and the Heterotrait–Monotrait Criterion (HTMT) (Henseler, Ringle & Sarstedt, 2015), the current study evaluated the discriminant validity of the measurement model. For discriminant validity, the Fornell–Larcker criterion is used as AVE square root values for every latent variable in the present analysis is higher than rest of the correlation values among the variables as shown in Table 2. However, the higher values of HTMT were less than threshold value of 0.85 (Kline, 2015). In this study, additional support was provided by the research findings for the discriminatory validity.

Table 2 ASSESSING FORNELL–LACKER FOR DISCRIMINANT VALIDITY						
Constructs	OCB	JS	WE			
OCB	0.752	-	-			
JS	0.632	0.732	-			
WE	0.721	0.693	0.845			

Table 3 ASSESSING HTMT FOR DISCRIMINANT VALIDITY					
Constructs	JS	OCB	WE		
JS	-	-	-		
OCB	0.692	-	-		
WE	0.795	0.793	-		

## **Assessment of the Structural Model**

The assessment of the structural model begins with the measurement of collinearity. The findings show that no issue is present, provided that all values of VIF were smaller than the recommended threshold value of 3.3 and 5 (Hair Jr et al., 2017). The results show not any constructs have multi-collinearity issue.

Table 4 COLLINEARITY OF THE CONSTRUCTS				
Constructs	Constructs OCB			
JS 2.054				
WE 2.023				

The values of path coefficients were evaluated by the procedure of bootstrapping with 5000 resamples. The findings discussed here contribute positively and significantly between job satisfaction and organizational citizenship behavior ( $\beta$ = 0.243, p<0.05) and work engagement ( $\beta$ = 0.623, p<0.05). In the structural model, the findings of the path coefficient values indicate that work engagement was an important antecedent of organizational citizenship behavior as compared to job satisfaction. The results show that the relationship between work engagement and organizational citizenship behavior was positive and significant ( $\beta$ =0.620, p<0.05). Therefore, hypotheses H1-H3 were positive and significant. The results of the analysis also evaluated the hypothesis H1, hypothesis H2 and hypothesis H3 effect sizes to be 0.030, 1.081 and 0.432. This demonstrate the effect sizes magnitude for the Hypothesis 2 and Hypothesis 3 and both were considered to be large since the measurements of both effect sizes were greater than the recommended value, while the Hypothesis 1 was considered to be small since its value

was higher than 0.02 as suggested by Cohen (1992). The current study demonstrated that work engagement and job satisfaction combined variance on organizational citizenship behavior was 55.5 percent, whereas, the variance explained by job satisfaction on work engagement was 51 percent. The values of R<sup>2</sup> are found to be moderate for the two dependent variables. The values of R<sup>2</sup> 0.70, 0.50 and 0.25 were considered large, moderate and weak for the endogenous latent variables (Hair Jr et al., 2017). The predictive relevance (Q<sup>2</sup>) is measured through the procedure of blindfolding and by setting the omission distance at a value of 7. The values of  $Q^2$  for the dependent latent constructs are above 0, indicating a good predictive relevance of the model as shown in Table 5. In line with the mediation protocol (Preacher & Hayes, 2008), while the primary approach for the mediating variable in the study, through the bootstrapping method, assesses the significance of the direct impact between the variables without a mediator construct in the model. It was found that the direct impact of job satisfaction on organizational citizenship behavior was positive and significant ( $\beta$ = 0.634, p<0.05, t= 20.70) as shown in Table 6. The mediating variable (WE) is then included in the structural path model. The impact of the mediating variable was positive and significant ( $\beta$ = 0.452, p<0.05, t= 10.43). Likewise, by measuring the variance account for (VAF), the mediator magnitude was calculated. The value of variance accounted for was 73.5 (total effect/indirect effect). This suggests that work engagement will describe 73.5 percent of the effect of job satisfaction on organizational citizenship behavior. The value of VAF above 80 percent is considered full mediation on the basis of the rule of thumb, partial mediation if value of VAF is between 20 percent to 80 percent and no mediation if the value of VAF is less than 20 percent (Hair Jr et al., 2017). The maximum mediation is referred to as VAF under 80 percent. Therefore, the association between JS and organizational citizenship behaviour is partially mediated by work engagement, thus supporting the Hypothesis H4.

Table 5 ANALYSIS RESULTS OF STRUCTURAL MODEL							
Relationships $\beta$ value $t$ values $p$ values $R^2$ $F^2$							
Job satisfaction ->OCB	0.243	2.140	0.014	Accepted	0.435	0.030	0.230
Job satisfaction ->WE	0.623	23.757	0.000	Accepted	0.423	1.081	0.371
Work engagement ->Organizational citizenship behaviour	0.620	21.453	0.000	Accepted	0.472	0.432	0.270

	Table 6 INDIRECT EFFECT							
Process	Relationships	β value	Indirect Effect	Total Effect	VAF	t values	p values	Decisions
Direct Effect	Job satisfaction -> Organizational citizenship behaviour	0.634				20.70	0.000	Accepted
Indirect Effect	Job satisfaction -> OCB	0.165						
	Job satisfaction -> Work engagement	0.720	0.452	0.603	0.73.5	10.43	0.000	
	Work engagement -> OCB	0.654						

## **DISCUSSIONS**

The main objective of the research is to evaluate the mediation of work engagement on the relationship between job satisfaction and organizational citizenship behavior of healthcare employees in Malaysian hospitals. This research also measures the direct correlation between job satisfaction and organizational citizenship behavior and the effect of job satisfaction on organizational citizenship behavior and work engagement. As expected, job satisfaction has a significant impact on organizational citizenship behavior. This is in accordance with previous research carried out by Hurst, et al., (2017); Tsai & Wu (2010). This ensures that it is necessary for healthcare workers to function outside their defined structured roles to meet the needs of the employee's job satisfaction (Dalal et al., 2012; Hurst et al., 2017). The direct influence has also been identified between job satisfaction and work engagement and the findings are compatible with previous researches (Brunetto, Teo, Shacklock & Farr-Wharton, 2012; Yalabik et al., 2013). As a consequence, hospital management must focus its efforts appropriately on the issue that concerns all licensed healthcare employees and physicians, thereby enhancing the quality of job satisfaction (Nelson & Cavanagh, 2018) and contributing to the knowledge of engaged staff.

In fact, this study argued that the engagement to research would greatly boost organizational citizenship behavior. Consequently, Sulea, et al., (2012); Dalal, et al., (2012) both agreed with the result. Organizational citizenship behavior activities within the health care community are vital to maintaining public protection and the consistency of the resources provided to the customer, for example by providing support with certain persons with disabilities, heavy workloads or missing persons without concerns or delays. This activity becomes highly relevant as the number of patients and lack of medical personnel are dramatically increased (Umair, Ho, Basha, Ng & Waqas, 2020). The findings show that the association between JS and organizational citizenship behavior is partially mediated by work engagement. In the present study, the proposed model with mediation is compatible with Yalabik, et al., (2013) whose argument on work engagement as mediation amongst attitudinal and behavioural outcomes variables. This finding supported the concept of satisfied healthcare employees tending to show more work engagement. Additionally, they support other people with heavy workloads through their strength, enthusiasm and feeling of pride in their job.

# **Practical Implications**

The research establishes prior knowledge regarding work engagement mediating role in the association between job satisfaction and organizational citizenship behavior. Findings have shown that job satisfaction is efficient for healthcare employees through the work engagement on organizational citizenship behavior. Practically, policy makers and managers need to recognize the origins of job satisfaction between doctors and nurses in order to effectively build work engagement and foster organizational citizenship in the workplace environment. Such findings indicate the crucial position of job satisfaction as a medical professional in affecting work engagement outcomes that ultimately led to job satisfaction in engaging in organizational citizenship behavior. A deterioration of the psychological state and its optimistic behavior would reduce healthcare employees' ability to offer voluntary support, and potentially jeopardize the wellbeing and integrity of the patient and the institution. Moreover, the hospital management must also have a supportive work atmosphere and develop solid human resource policies that encourage cooperation and coordination, loyalty, strong collegial ties, technical preparation and encouragement for new self-growth skills. While the job satisfaction-level is normal for general healthcare sector professionals, it is necessary to remember that nurses are still seen to have less appreciation and respect in comparison with doctors in the work environment (Mishra, 2015), thus management must treat everyone fairly and recognize the commitment of the workers, which would otherwise contribute to the nurses dissatisfaction at the workplace. To sum up, job satisfaction would improve strong human capital between healthcare employees, thereby improving their work engagement and as a result, empowering them with organizational citizenship behavior. Additionally, healthcare professionals who are trusted and have the opportunity to develop themselves more easily have such a constructive attitude to their work and are willing to support other workers willingly.

## CONCLUSION AND DIRECTION FOR FUTURE RESEARCH

Healthcare institutions are labor exhaustive, and organizational citizenship behavior is important for the successful provision of services. Organizational citizenship behavior helps healthcare providers to satisfy the patients' increasing needs and aspirations. The findings of this study found that constructive steps within the healthcare employees ought to be taken to strengthen job satisfaction and work engagement. Job satisfaction is the cornerstone of more committed workers who are more likely to build a collaborative atmosphere that encourages organizational citizenship behavior, such as team co-operation, positive reviews and knowledge exchange (Parveen, Maimani & Kassim, 2017). Organizational citizenship behavior jointly provides additional services like effort, time and expertise that consumers and workers can retain (Organ, 2018). There are many limitations to the analysis. First, this study is crosssectional, so the methodology does not provide a clear causal inference. Cross-sectional results were only able to show the cumulative impact of the predictor variable at a given time point against a single criterion variable (Cavana, Delahaye & Sekeran, 2001). In future studies, longitudinal research can give better results. Secondly, common method bias problem can occur when data is collected from a single source at the same time in this analysis and may include a number of future data collection sources, such as coworkers and managers. Thirdly, the present analysis included only nurses and physicians from hospitals in Malaysia that could restrict data generalization. A larger number of studies in various hospitals may be included in the potential study. The study's response rates for data collection was 52 percent, indicating that most healthcare employees do not have the resources for this survey. Furthermore, because of the convenient sample selection methodology used in the analysis, most of the participants were between 25-30 years old. Future studies can use a quota sampling approach to ensure fair samples of each age group to obtain better data. This study took job satisfaction global measure from the fact that the researchers aim to take into account the general feelings of their employees about their personal work (Spector, 1997). Future studies should be conducted by examining dimensions of job satisfaction towards a higher-order variable of work engagement and organizational citizenship behavior, including their dimensions.

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