

Job satisfaction among physiotherapists living in Aegean Region of Turkey: a questionnaire survey

Meriç ŞENDURAN, Bayram ÜNVER, Fatma ÜNVER KOÇAK, Selnur NARİN

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Research Article

region of Turkey. Methods: Turkish version of Speakman's Job Satisfaction Questionnaire was e-mailed to 164 physiotherapists working in two cities of Aegean Region. The questionnaire consisted of ten statements related to ten different aspects of professional physiotherapy practice and two main parts: agreement and importance. Respondents rated the statements on a seven point Likert type scale. Results: A response rate of 68.9% was achieved. Physiotherapists with less experience had more paperwork. Physiotherapists with Master's degree gave more importance to improvement compared to bachelors. Physiotherapists in private clinics found interest of work more important for satisfaction. No significant difference was found between the groups in terms of total satisfaction scores (p>0.05). Total scores showed significant satisfaction levels in terms of job fulfillment, job interest and opportunities enabling improvement. Satisfaction levels were lower for having enough autonomy and sufficient independence in clinical decision-making, being overworked and physical difficulties. Conclusions: Overall scores showed that Turkish physiotherapists were not satisfied in terms of job autonomy. Having adequate autonomy and independence in clinical decision-making are important predictors of job satisfaction among Turkish physiotherapists.

Purpose: To investigate job satisfaction level of a group of physiotherapists living in Aegean

Key words: Job satisfaction, Turkey, Physical therapist.

M Şenduran

Dokuz Eylül University, School of Physical Therapy and Rehabilitation, Izmir, Turkey PT, MSc

B Ünver

Dokuz Eylül University, School of Physical Therapy and Rehabilitation, Izmir, Turkey PT, PhD, Prof

F Ünver Koçak

Pamukkale University, School of Sports Sciences and Technology, Denizli, Türkiye PhD, PT, Assist Prof

Dokuz Eylül University, School of Physiotherapy and Rehabilitation, İzmir, Türkiye

Address correspondence to:

Meric Senduran, MSc, PT Dokuz Eylül University, School of Physical Therapy and Rehabilitation, İnciraltı, İzmir, Turkey E-mail: meric.senduran@deu.edu.tr

Türkiye'nin Ege Bölgesi'nde yaşayan fizyoterapistlerde meslek memnuniyeti: anket arastırması

Amaç: Türkiye'nin Ege Bölgesi'nde yaşayan bir grup fizyoterapistin meslek memnuniyet düzeyini araştırmaktı. Yöntem: Speakman'ın meslek memnuniyet anketinin Türkçe versiyonu Ege Bölgesi'nin iki şehrinde çalışan 164 fizyoterapiste e-posta yolu ile gönderildi. Anket profesyonel fizyoterapi pratiğine ilişkin 10 farklı Alana ait 10 ifade ve iki ana kısımdan oluşmaktadır: katılma ve önem. Cevaplayıcılar ifadeleri yedili Likert ölçeği üzerinden puanladı. Sonuçlar: Çalışmada % 68.9'luk yanıt oranına ulaşıldı. Yüksek lisans dereceli fizyoterapistlerin lisans derecesi olanlara göre meslek gelişimine daha fazla önem verdiği bulundu. Özel merkezlerde çalışan fizyoterapistler için memnuniyet belirlemede mesleğin ilgi çekiciliği önemli idi. Toplam puanlar mesleki icra, mesleğin ilgi çekiciliği ve gelişime fırsat veren olanaklar açısından yüksek memnuniyet düzeyleri ortaya çıkardı (p<0.05). Yeterli otonomi, klinik karar vermede gerek bağımsızlık düzeyi, aşırı çalışma ve fiziksel zorluklar açısından düşük memnuniyet düzeyleri saptandı. Tartışma: Tüm puanlar Türk fizyoterapistlerin meslek otonomisi konusunda memnun olmadıklarını göstermiştir. Yeterli otonomiye sahip olma ve klinik karar vermede gerek bağımsızlık düzeyi Türk fizyoterapistlerin meslek memnuniyetlerini belirlemede önemlidir.

Anahtar kelimeler: Meslek memnuniyeti, Türkiye, Fizyoterapist.

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Health care professionals are at high risk for burn out and role conflict and their job satisfaction levels are significantly lower than other professions.¹⁻³ However, studies investigating job satisfaction among health care staff are limited to nurses and physicians⁴⁻⁷ while very little that were carried out among physiotherapists (PTs), one of which included a part of Turkish PTs, exist in the literature.8 The authors emphasized importance of PTs among health care staff as Turkish population was getting older and the necessity of rehabilitation services was also growing. They also underlined the lack of professional legislation for PTs that might play an important role for job satisfaction.8 However, the study included PTs working only in government hospitals in one city of Turkey, Ankara and used a questionnaire that was not designed for PTs. Although a legal proper job definition was accepted and professional legislation was enacted on 6th April, 2011, PTs did not have enough autonomy in practice since then that might affect the satisfaction level.

Our hypothesis is that this vital issue may dissatisfy PTs in Turkey despite superior salaries by decreasing motivation that may affect therapy success, patient compliance and patient satisfaction. Therefore, the purpose of our study was to investigate the job satisfaction level in a group of Turkish PTs working in different physiotherapy settings in two close cities in western part of the country before the date of legislation regulations.

METHODS

In order to collect the data, the original English version of Speakman's scale⁹ was forwardly translated into Turkish by one of the authors highly skilled in English and a native linguistic specialist independent from each other. They were translated back into English and compared to the original text by another independent supervisor (Appendix).

Copies of the questionnaires were e-mailed to personal e-mail addresses of PTs working in different settings with a cover letter including an explanation of the objective of the study, the information about the authors and a declaration of no conflict of interest. The PTs were requested to response in a 4-week period. No reminder was done neither by an e-mail or telephone.

Questionnaire

A self administered questionnaire survey was used for data collection. The questionnaire was developed by Speakman et al9 and also used in previous studies.^{10,11} The questionnaire consisted of ten statements related to ten different aspects of professional physiotherapy practice. Half of the statements were worded positively and the others negatively. The respondents were first asked to rate their level of agreement or disagreement with each of the statements on a seven-point-Likert type scale that 1 indicated strongly disagree and 7 indicated strongly agree. After the agreement part, the respondents were also asked to rate their feelings of the importance related to each statement as a factor of their job satisfaction again on a seven-point-Likert type scale such that 1 indicated extremely unimportant and 7 indicated extremely important.

Scoring

Scoring was based on total positive and statements' ratings. For positive statements 7 indicated the highest level of satisfaction and 1 indicated the highest level of dissatisfaction. For the rest negative statements the scores were reversed. As a result, 7 indicated the highest level of dissatisfaction and 1 the highest level of satisfaction. For a complete satisfaction level a respondent should score 7 for each positive statement and 1 for each negative statement. Therefore 40 meant a complete satisfaction as the total score of the whole questionnaire. The maximum possible importance score was 70.

The questionnaire also included the demographic data such as age, gender, years of professional experience, physiotherapy education degree and work place.

Statistical analysis:

The Statistical Package for Social Sciences (SPSS version 15.0 for Windows) was used for data analysis. Demographic features (gender, age, years of professional experience, and

physiotherapy education degree) and mean scores were analyzed with descriptive statistics including frequencies, means and standard deviations.

The possible influence of each of years of professional experience, highest educational attainment and type of work place was analyzed using Kruskal Wallis Test. Bonferroni corrected Mann Whitney U test was used in any case of significant difference. *p* values less than 0.05 were considered as significant.

RESULTS

A total of 113 out of 164 copies of questionnaires were returned, giving the response rate of 68.9%. 12 incomplete questionnaires were excluded from the analysis as all the respondents failed to score the importance scale. Finally, the data of 101 respondents were analyzed.

Participants

Mean age of all 101 respondents was 28.7±4.9 years and mean year of professional experience was 6.5±4.6 years. Table 1 shows the demographic features of the participants including gender, marital status, professional experience, educational degree and work place.

Effect of professional experience

When the respondents were divided into four groups according to their years of professional experience, only one significant difference was found in terms of agreement score for statement 1 (There is too much paperwork) (p=0.031, Kruskal Wallis test). The difference was found between the respondents with ≤2 (2.94±1.43) and 5.1-10 (4.32±1.86) years of professional experience (p=0.012, Bonferroni corrected Mann Whitney U test). As statement 1 had a negative meaning, the respondents whose experiences were less than 2 years were more satisfied than the ones with 5.1-10 years of experience.

Effect of education

There was a significant difference in terms of agreement score for statement 10 (I am learning and improving in my work) when the respondents were divided into three groups according to their educational degree (p=0.001, Kruskal Wallis test). The difference was between the groups with

bachelor's degree (5.12 ± 1.70) and MSc degree (6.18 ± 1.51) (p=0.004, Bonferroni-corrected Mann Whitney U test). As statement 10 had a positive meaning, higher scores meant higher satisfaction. Therefore, the respondents with MSc degree were more satisfied in terms of this statement than the respondents with bachelor's degree.

Effect of work place

Significant differences were found in terms of importance score for statement 8 (My work is interesting) (p=0.007, Kruskal Wallis test) and importance score for statement 10 (I am learning and improving in my work) (p=0.015, Kruskal Wallis test) when the respondents were compared according to work place. The differences of importance scores for statement 8 and statement 10 were found between the groups working in hospitals $(4.14\pm1.68,$ 5.91 ± 1.22 university respectively) and private clinics $(5.50\pm1.72,$ 6.25 ± 1.29 , respectively) (p=0.001, p=0.003,Bonferroni-corrected Mann Whitney U test). The PTs working in private clinics gave more importance to statement 8 and 10 as predictors of their job satisfaction than the PTs working in university hospitals.

Mean agreement and importance scores of each statement for all of 101 respondents are shown in Table 2, while Table 3 shows total agreement and importance scores. All scores were analyzed separately in each group according to year of professional experience, educational degree and work place. There was no statistically significant difference in terms of both agreement and importance scores within each group. Total scores showed significant satisfaction levels among the whole group of PTs in terms of job fulfillment, job interest and opportunities enabling improvement. Satisfaction levels were lower in terms of not having enough autonomy, not having sufficient independence in clinical decisionmaking, being overworked and physical difficulties of the job.

DISCUSSION

Our study which was carried out before the

acceptance of professional legislations for PTs showed lower levels of job satisfaction among Turkish PTs in terms of job autonomy and independency in clinical-decision making. Although differences existed between the PTs with different years of experience, education levels and work areas, these did not reach statistical significance.

The positive aspects concerning agreement with Speakman's scale for PTs in Turkey were focused mostly on statement 8 (My work is interesting) and statement 10 (I am learning and improving in my work). In addition, all the other positive statement scores except 6 (I have sufficient independence in decision-making) were higher than 4 which represented satisfaction. Nigerian and Japanese PTs were also satisfied with interest and advancement of their job in the studies of Oyeyemi and Ogiwara. 10,11 Turkish PTs have not been working independently enough for many years although professional regulations have just been prepared on 6th April, 2011. Therefore, the lower agreement score for statement 6 might be a result of this condition.

The negative aspects of agreement focused mostly on statements 3 (I am not given enough autonomy), 5 (My job is mentally stressful), 7 (My job is too physically demanding) and 9 (I am overworked). Mean scores of these statements were less than 4 showing dissatisfaction. Turkish PTs found their job physically demanding and mentally stressful and therefore felt overworked. Ogiwara and Araki reported similar findings in terms of statements 5 and 7 among Japanese PTs that they thought their job was mentally stressful and too physically demanding.¹¹ Oyeyemi also found similar results and reported that Nigerian PTs both working in Nigeria and U.S. were dissatisfied with the physical and mental burden of their job.¹⁰

When the overall mean importance scores were checked out, we found that statements 2 (My job is challenging in a positive sense), 3 (I am not given enough autonomy), 4 (My job is fulfilling), 6 (I have sufficient independence in decision-making), and 10 (I am learning and improving in my work) had the highest scores in terms of their

specifying job importance for Satisfaction level may be higher if the job is challenging in a positive sense and if the PT perceives his improvement in his work with enough autonomy and sufficient independence in decision-making. Autonomous PT practice was defined according to The Board of Directory of the American Physical Therapy Association as "independent, self-determined professional judgment and action".12 In the study of Ogiwara and Araki, Japanese PTs regarded statements 2, 4, 6 and 10 as predictors of job satisfaction parallel to our results.11

Eker et al. surveyed job satisfaction among 198 Turkish PTs in Ankara and found 45.5% of PTs was satisfied with their job.8 Leadership, interpersonal relationships, advancement and salary were the most important predictors of job satisfaction and the highest dissatisfaction levels were related to salary and advancement in their study. Lack of a statement related to salary was one of the limitations of our study as most investigators reported that salary is an important predictor of job satisfaction among health care professionals.^{13,14} Other studies also showed the importance of salary as a strong determinant of satisfaction among Turkish health care providers and dentists. 15,16 Similarly, Bernhardt and Tang reported that poor remuneration was a factor in determining job satisfaction among PTs who had completed Doctor of Philosophy degree.¹⁷

Although study of Eker et al. was worthwhile as it was the first article that exposed Turkish PTs job satisfaction levels, it failed to discuss the possible effects of education level.⁸ Besides, it only included PTs working in a hospital setting. However, a considerable number of Turkish PTs work in private clinics in Turkey.

In our study PTs with ≤2 years of clinical experience were more satisfied than the PTs with 5.1-10 years of clinical experience in terms of statement 1 (There is too much paperwork). In Turkey, leadership features get more prominent as the PT gets more experienced. A new graduated PT is usually responsible for the clinical placement rather than the management of a health care setting. However, more experienced PTs are

usually responsible for the paperwork of both the patients and the other staff. Not similarly to our findings, PTs in Ogiwara and Araki's study differ from each other according to their years of professional experience in terms of statement 9 (I am overworked) and 10 (I am learning and improving in my work). In our study we did not find any significant differences between PTs with different years of experience. In contrast, Ogiwara and Araki argued that newly qualified clinicians usually had high expectations and therefore high satisfaction levels. In

When we compared the results according to education level, we found that PTs with MSc degree are more satisfied in terms of agreement score for statement 10 (I am learning and improving in my work) than the PTs with bachelor's degree. Although education level may play an important role in determining job satisfaction level, no investigator considered this factor before. Interestingly, we did not find any significant difference in favor of PhD group in any statement. There was also no significant difference in terms of total agreement and importance scores according to educational level. However, total agreement score of PhD group was slightly lower than MSc group and this was slightly lower than bachelor's group. We suppose that as education level rises, theoretical skills get more improved than the clinical skills. It is also more common in Turkey that a PT abandons clinical placement as he continues postgraduate education and work as an academic staff rather than a clinical PT. The only researcher who had investigated the influence of education level on job satisfaction among PTs was Oyeyemi-10 He reported that PTs with Master's degree had higher importance scores than those with a doctoral degree. There was also a non-significant difference between the ones with bachelor's degree and doctoral degree in terms of total importance scores in favor of bachelor's degree.

We found significant differences between the groups divided according to work place in terms of importance scores of statement 8 (My work is interesting) and statement 10 (I am learning and improving in my work). The differences were

between the PTs working in university hospitals and private clinics. This result may be based on the difference of clinical routine in these two work places. A PT is usually responsible for inpatient rehabilitation in hospitals and meets the patients in acute care setting. However, private clinics provide outpatient rehabilitation services. The importance of work interest as a predictor of satisfaction may probably depends on this factor for PTs working in private practice. Although the results did not reach statistical significance after Bonferroni corrections there were also differences between the PTs working in private clinic and working in government hospital in terms of importance score of statement 8 on behalf of private practice group. This situation was also the same for the importance score of statement 10 between the PTs working as academic staff and working in university hospitals in favor of academic staff. It is not surprising that academic staff care much more about the importance of learning and improving their knowledge as they are the part of education system. Oyeyemi also reported that PTs teaching in school settings scored higher especially in agreement part of the questionnaire than the selfemployed PTs and the ones working in hospitals.¹⁰

The most important limitation of our study was relatively small sample size. We could analyze the data of 101 PTs, which was not comparable enough to similar studies such as Ogiwara and Araki's (183 PTs), Eker's (198 PTs) and Oyeyemi's (110 PTs). Second important limitation was the region of the country that we surveyed. We could send the questionnaires only to two close cities in the same region due to the accessibility of communication addresses. Our study should be repeated after the acceptance of professional regulations and should also be expanded to more PTs working and living in other parts of the country in order to generalize the results for all Turkish PTs.

CONCLUSION

In our study in which we analyzed the data of 101 physiotherapists, the two most prominent issues in job satisfaction were autonomy and independency in clinical decision-making. However, professional legislations for PTs in Turkey have been accepted on 6th April, 2011 more attempts are necessary in practice to increase the independency and satisfaction levels of Turkish PTs. Further prospective studies are needed for reliability, validity psychometric properties of the Turkish version of Speakman's scale designed to measure the job satisfaction level of PTs. Our survey should be repeated to compare the results in order to determine the effects of legislation regulations on job satisfaction levels of Turkish PTs.

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Appendix. Turkish version of Speakman's Job Satisfaction Questionnaire.

MESLEK MEMNUNİYET ANKETİ

Yaşınız:	yıl		Cinsiyetiniz:		K	Kadın 🗆		Erkek □			
Medeni durumunuz:	Bekar □	Evli 🗆									
Çalıştığınız kurum	Üniversite □	Üniversite □ Devlet Hst □ Özel □		Diğer □							
Çalışma alanınız	Nöroloji 🗆	Ortopedi Pulmor		ner 🗆 Genel 🗆			Kardiyoloji 🗆			Diğer □	
Meslekte deneyim süreniz:yıl											
Bulunduğunuz konum:	Kadrolu 🗆	Sözleşmeli 🗆	Şefi 🗆 🛮 Baş Fzt 🗆				Öğr. Elemanı □				
Eğitim düzeyiniz:	Lisans:□	Bilim uzm: □	Doktora: □								
Mezuniyet yılınız:											
Lütfen, aşağıdaki soruları dikkatle okuyarak sizin için en uygun gelen rakamı (1=tamamen katılıyorum, 7=hiç katılmıyorum) işaretleyerek puanlandırınız. İkinci aşamada yandaki boş sütuna ilgili sorunun sizin için önemine göre 1 ve 7 arası (1=hiç önemli değil, 7=çok önemli) bir puan veriniz.											
1. aşama											2.aşama
Mesleğimde çok fazla evrak, form vb. doldurma işi var.				1	2	3	4	5	6	7	
Mesleğim bana pozitif bir duyum sağlıyor.				1	2	3	4	5	6	7	
Özerkliğim yeterince verilmiyor (Mesleğimi istediğim şekilde özgürce uygulayamıyorum).			1	1	2	3	4	5	6	7	
Mesleğimi uygulayabiliyorum (Yeteneklerimi kullanabilme olanağı sağlıyor).			lanağı	1	2	3	4	5	6	7	
Mesleğim çok stresli.				1	2	3	4	5	6	7	
Mesleğimle ilgili karar vermede yeteri kadar bağımsızım.				1	2	3	4	5	6	7	
Mesleğim fiziksel olarak çok çaba gerektiriyor.				1	2	3	4	5	6	7	
Mesleğim ilgi çekicidir.				1	2	3	4	5	6	7	
Çok fazla çalışıyorum.				1	2	3	4	5	6	7	
Öğrenmeyi ve mesleğimde gelişmeyi sürdürüyorum.				1	2	3	4	5	6	7	