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Surgeons' work engagement: Influencing factors and relations to job and life satisfaction



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ABSTRACT

Background: Work engagement has become a topic of great interest in recent years. However, clinicians' work engagement has rarely been studied and relatively little is known about its predictors and consequences. Therefore the objective of this cross-sectional questionnaire study was to test a model of possible institutional and personal predictors and significant relations to job and life satisfaction.

Methods: 123 clinicians specializing in Surgery Medicine participated in the study. Self-administered questionnaires, including the Copenhagen Psychosocial Questionnaire, the Utrecht Work Engagement Scale, the Brief Resilient Coping Scale and the Questionnaire for Self-efficacy, Optimism and Pessimism, were administered. Bivariate analyses and a stepwise regression analysis were performed.

Results: The whole sample of surgeons rated work engagement with a high mean of M=4.38; SD = .91. Job satisfaction and perceived quality of life have been rated with moderate scores. The results show that job resources have a greater impact on surgeons' work engagement than their job demands. Significant correlations between surgeons' work engagement, their job satisfaction and quality of life were found. Moreover, work engagement mediated the relation between institutional factors and surgeons' job satisfaction.

Conclusion: Our research suggests that strengthening surgeons' work engagement will contribute to a more sustainable workplace, in terms of both individual and hospital performance. Therefore, increasing work engagement among surgeons should be of concern for supervisors and hospital managers. Future research should focus on further predictors that may have an influence on health professionals' work engagement. Another field for future research is to study potential effects of interventions on work engagement.

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Introduction

During the last decade the German healthcare system has changed into a more dynamic and challenging system. 1-3 Due to rising costs of healthcare, an aging population, accelerating progress in the development of medical technology, and greater public awareness for better quality of healthcare, pressures and demands on German clinicians have increased.4-6 The most affected are those ones who are asked to deal with increased demands for efficiency, cost awareness and improved healthcare quality. 7,8 Research studies on Surgery demonstrated that the quality of medical treatment and care are closely related to the ability of clinics to guarantee medical services at the required professional standard. Surgeons play an important role for representing the hospitals' competence. Their behaviors towards patients have significant influences upon patients' satisfaction with care and treatment quality.9-11 Therefore, hospitals need highly competent physicians who are willing to work efficiently towards institutional goals. 12

Due to the current organizational changes in hospitals with increases of job demands and job pressure 13-15 surgeons are forced to enhance or build additional inner strengths in the form of psychological and organizational resources in order to keep able to cope with challenging and potentially distressing job tasks. Without these resources surgeons may develop negative health outcomes (i.e. stress related diseases, burnout).16 However, there are still surgeons who can be characterized by showing work engagement and job satisfaction even if their working situation impresses to be dissatisfying for an outstanding observer. The question is: why remain some surgeons highly motivated and work engaged despite such work conditions and others do not? Motivational concepts such as work engagement have not been studied sufficiently although discussed as important aspects for productivity and job performance. 17,18 In consequence, there is a need to identify positive and motivating predictors for work outcomes such as job performance, especially for the health care services.

The aim of the current study among German surgeons was to examine whether work engagement, as a motivational concept, is associated with surgeons job satisfaction and perceived quality of work life, after adjusting for age, personal and work-related factors. In addition we aim to analyze on which and how surgeons' job demands and resources operate as predictors of their work engagement. The hypothetical model this study is based on is depicted in Fig. 1.

Defining work engagement

Work engagement is defined as a positive, fulfilling, workrelated state of mind that is characterized by vigor, dedication, and absorption. 19,20 Engagement refers to a persistent and pervasive affective-cognitive state that is not focused on any particular object, event, individual, or behavior. Vigor refers to high levels of energy and mental resilience while working. The working person feels high levels of energy and willingness to invest in work. Dedication is defined as feelings of enthusiasm, pride and inspiration about work. Absorption means being so fascinated, fully concentrated and engrossed in work that time passes very quickly and nothing else matters. 17,19,21 Several studies investigated relations between different factors of work engagement.²² All of these studies illustrate that an employee with high work engagement shows better job outcomes: for instance, Halbesleben et al. and Hakanen et al. demonstrated that work engagement increases concentration on job tasks, job performance and institutional commitment.^{23,24} Furthermore, work engagement is related to organizational variables such as job satisfaction and turnover intentions.^{25–28}

During the last decade, awareness on work engagement in the health sector has also grown. Health care professionals' work engagement has become an increasingly important factor and a precondition for high-quality health care performance.^{29,30} For instance, Van Bogaert and colleagues examined relationships between practice environment ratings, workload, work engagement, job outcomes and

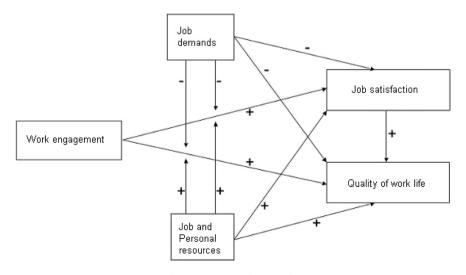


Fig. 1 – Research model.

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