


Factors (gender, age, social status, and income) affecting the satisfaction of pharmacy career in Saudi Arabia

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ABSTRACT

Purpose: To explore if the factors (gender, age, social status and income) affect the job satisfaction of pharmacy career in Saudi Arabia. **Methods:** This is a 4-month cross sectional survey regarding the impact of stress factors on job satisfaction of a pharmacist in Saudi Arabia. The survey questionnaire consisted of 35 questions divided into two parts: first part collected demographic information and the second part consisted on various sections. Section one collected information about stress factors in pharmacy job. Section two collected information about service units of the pharmacy job. Section three collected information about communication and relationship factors of a pharmacy job. Factors affected the Pharmacy practice, stress-related job and communication and relationships sections of pharmacist job satisfactions including gender, age, social status, academic qualifications and income. The questionnaire was prepared in an electronic format and the data were analyzed through the Survey Monkey system. **Results:** A total of 242 participants responded to the questionnaire. Of them, 214 (91.8%) were Saudi and 33 (8.2%) were non-Saudi professionals. Male responders were more than female responders (169 (70.7%) and 70 (29.3%), respectively). The majority of the responders (202 (84.2%)) were in the age group of 20–39 years. Females disagreed management policies more than that of males; males worked on many weekends and on holidays with significant differences when compared with females ($p < 0.05$). Responders in the age group of 30–39 years strongly agreed to perform excessive work than those in the age group of 20–29 years, which was found to be significant ($p < 0.05$). Both males and females wished to continue to work in the pharmacy field, which was not significantly different ($p > 0.05$). There is no significant difference between male and female with all level of salary and type work with payment or the salary resemble of other organizations ($p > 0.05$). **Conclusion:** Different factors were found to negatively and positively affect the job satisfaction of a pharmacist. Gender and age were found to affect job satisfaction significantly. These differences should be considered before interpreting the results of pharmacist job satisfaction. We recommend to improve the job satisfaction of pharmacists in the Kingdom of Saudi Arabia.

Key words: Stress, Factors, Job, Satisfaction, Pharmacy, Saudi Arabia.

INTRODUCTION

Pharmacists' job satisfaction is one of the measurement tools used to follow the implementation of pharmacy strategic plan at General Administration of Pharmaceutical Care, at the MOH, KSA.^{1,2} Job satisfaction can be measured from different aspects of a pharmacist's job, including general pharmacy services, dealing with supervisor and pharmacy staff, communication with all healthcare providers, and stress and job motivation factors.³⁻⁶ All these elements can be measured through a survey questionnaire sent to the pharmacy staff. This is a subjective method, which might affect the answers; for instance; gender, age, social status, salary with benefits and academic qualifications. Previous studies have shown an association between the aforementioned factors and the differences in the answers to the job satisfaction survey.⁷⁻⁹ However, there are few studies that focus on other factors; otherwise, all factors discussed among the studies and without separated individual investigation. To the best of our knowledge, there are only few studies that have been conducted locally or in Gulf and Middle Eastern countries.¹⁰⁻¹² Therefore, in this study, we aimed to explore the factors affecting Pharmacy job satisfaction in Saudi Arabia.

METHODS

This is a 4-month cross-sectional survey related to the effect of stress factors on pharmacist job satisfaction in Saudi Arabia. The survey questionnaire consisted of 35 questions divided into two parts: the first part collects demographic information and the second part contains several sections. Section one has questions about stress factors in a pharmacy job, which includes pharmacy management policies, pharmacy stress factors, pharmacy personal time, salary and benefits and pharmacy motivational factors. Section two has questions about pharmacy services units in a pharmacy job, which includes pharmacy management structure, dispersing and patient education, clinical pharmacy services, pharmacy technology, pharmacy store and overall job satisfaction. Section three has questions about communication and relationship factors of a pharmacy job, which includes pharmacy supervisors, relationship with coworkers, pharmacists' interaction with other healthcare providers, customer interaction and overall job satisfaction. Factors that affect the Factors affected the Pharmacy practice, stress-related job and communication and relationships sections of pharmacist job satisfactions sections of pharmacist job satisfactions include gender, age, social status, academic quali-

fictions and income. In this study, we used the 5-point Likert response scale system to obtain responses; there were close- and open-ended questions. The questionnaire was prepared in an electronic format and the data were analyzed through a Survey Monkey system.

RESULTS

A total of 242 participants responded to the questionnaire. Of them, 214 (91.8%) were Saudi and 33 (8.2%) were non-Saudi professionals. Male responders were more than the female responders (169 (70.7%) and 70 (29.3%), respectively). The majority of them (202 (84.2%)) were in the age group of 20–39 years. The majority of the responders were married when compared with unmarried responders (152 (66.38%) and 75 (32.75%), respectively) (Table 1). Majority of the responders had obtained a B. Pharm (114 (47.7%)), followed by D. Pharm (81 (33.89%)) and D. Pharm (26 (10.88%)). Most of the responders did not have accreditation from the board of pharmaceuticals (171 (93.44%)). The majority of the responders with current position had a designation of pharmacy technician (80 (34.93%)) and staff pharmacist (78 (34.5%)) and worked at outpatient pharmacy (83 (39.7%)) and inpatient pharmacy (73 (34.9%)). Most the responders spent less than a year (72 (30%)), followed by 3–5 years (61 (24.42%)) and 6–10 years (50 (20.83%)) working in their current position. Most of the responders receive 7,000–12,000 SR as monthly salary (138 (58.97%)) (Table 2). Majority of the males were in the age group of 30–39 years, whereas females were in the age group of 20–29 years with statically significant differences ($p < 0.05$). Most of the males were married, whereas most of the females were not with statically significant difference ($p < 0.05$). The majority of the males had obtained D. Pharm, whereas most of the females had obtained B. Pharm with statically significant differences ($p < 0.05$). There were no differences between the board of pharmaceutical specialties ($p > 0.05$). Most the females were working at medical cities more than that of males with significant differences ($p < 0.05$). Most of the males had current position of pharmacy technicians or pharmacy directors, whereas most of the females worked as staff pharmacist with significant differences ($p < 0.05$). Most of the males were working at outpatient pharmacy than that of female with significant differences ($p < 0.05$). There were no differences between male and female responders related to the years of experience in pharmacy practice, clinical pharmacy and pharmacy administration ($p > 0.05$). There were no differences between male and female gender with respect to daily working hours or monthly income or long-term employment goals ($p < 0.05$). Most of the responders were in the age group of 20–29 years who work in the inpatient pharmacy than that of outpatient pharmacy with significant differences ($p < 0.05$). Most of the responders in the age group of 20–29 years had 1–3 years of experience in pharmacy practice that that of responders in the age group of 30–39 years, and most of the responders in the age group of 30–39 years had more experience in pharmacy administration with significant differences. Most of the married responders were males than that of females with significant differences and most of the females were unmarried than that of males with significant differences ($p < 0.05$). Most of the married responders were in age group of 30–39 years and 40–49 years than that of 20–29 years with significant differences ($p < 0.05$). Most of the unmarried responders were staff pharmacists working at inpatient pharmacy with significant differences ($p < 0.5$). In inpatient pharmacy, most of the responders had B. Pharm degree more than D. Pharm with significant differences ($p < 0.5$), whereas in outpatient pharmacy, most of the responders had a D. Pharm more than BPharm degree with significant differences ($p < 0.5$). The responders had a D. Pharmacy more than B. Pharm with significant differences got salary range (7000–9000 SR), whereas B. Pharm holder had more diploma holders with salary (<6000) and (>9000) SR.

DISCUSSION

Gender factor

According to our results, the management policy was disagreed by females more than that of males with respect to working on weekends and on holidays with significant differences ($p < 0.05$). Neutral responses were provided more by males than that of females with respect to working on weekends ($p < 0.05$). This result might be due to females being more satisfied with their schedule than that of males. This finding is contradictory to that reported by previous study.^{7,11} Females strongly agree that their job is challenging than that of males with significant differences. This might be because female pharmacists wish to improve pharmacy services and implement new practice programs, whereas most of the males were technicians and their main focus was toward operation rather than implementing new pharmacy services. Males agreed more than females in changing pharmacy field previously with significant differences ($p < 0.05$), which is related to the higher number of pharmacy technicians wish to change their pharmacy field, but the pharmacist did not wish to change. Without any significant differences, both males and females were continuing to work in the field of pharmacy ($p > 0.05$) because the male with old age they will change their field now. Furthermore, female pharmacy supervisors agreed more than that of male supervisors with significant differences. The supervisors provided feedback about doing the job and had adequate knowledge of their job ($p < 0.05$); this finding is similar

Table 1: Demographic social information.

Nationality	Response Count	Response Percent
Saudi	214	91.85
Non- Saudi	19	8.15
Answered question	233	
Skipped question	9	
Gender	Response Count	Response Percent
Male	169	70.71
Female	70	29.29
Answered question	239	
Skipped question	3	
Age	Response Count	Response Percent
<19	0	0
20-29	87	42.08
30-39	86	42.08
40-49	26	12.92
50-59	6	2.92
>60	0	0
Answered question	240	
Skipped question	2	
Marital status	Response Count	Response Percent
Single	75	32.75
Married	152	66.38
Other (please specify)	2	0.87
Answered question	229	
Skipped question	13	

Table 2: Demographic information regarding responder qualifications.

Academic Qualification (s):	Response Count	Response Percent
Diploma Pharmacy	81	33.89
Bsc. Pharm	114	47.70
M.S	4	1.67
Msc. Clinical Pharmacy	16	6.69
Pharm.D.	26	10.88
Ph.D	2	0.84
MBA	4	1.67
Pharmacy Residency Two years (R2)	2	0.84
Pharmacy Residency one year (R1)	2	0.84
Fellowship	0	0
Other (please specify)	3	1.26
Answered question	239	
Skipped question	3	
Current position	Response Count	Response Percent
Pharmacy Technicians	80	34.93
Lecturer	0	0.00
Intern Pharmacist	3	1.31
Director of Pharmacy	22	9.61
Staff Pharmacist	79	34.50
Supervisor Pharmacist	21	9.17
Clinical Pharmacist	12	5.24
Deputy Director of Pharmacy	4	1.75
Manager	3	1.31
Other (please specify)	5	2.18
Answered question	229	
Skipped question	13	
The practice area	Response Count	Response Percent
Inpatient Pharmacy	73	34.76
Outpatient Pharmacy	83	39.52
Satellite Pharmacy	0	0.00
Narcotics	2	0.95
Extemporaneous Preparation	2	0.95
Clinical Pharmacy	9	4.29
Inventory Control	3	1.43
Drug Information	4	1.90
Emergency pharmacy	2	0.95
Medication safety	2	0.95
Repacking	0	0.00
Pharmacy Education and Training	1	0.48
Other (please specify)	29	13.81
Answered question	210	
Skipped question	32	

Total years in current position	Response Count	Response Percent
<3	72	30.00
3-5	61	25.42
6-10	50	20.83
11-15	25	10.42
> 15	32	13.33
Answered question	240	
Skipped question	2	
Monthly income	Response Count	Response Percent
<6.000	16	6.84
7.000 - 9.000	56	23.93
10.000 - 12.000	82	35.04
14,000 - 16,000	43	18.38
18,000 - 20,000	26	11.11
>25.000	11	4.70
Answered question	234	
Skipped question	8	

to a previous study.⁷ May be because the supervisor was female pharmacist and take care with pharmacy work of the pharmacist, not pharmacy technicians. Male responders more strongly disagreed than that of female responders with significant differences in the supervisor teach the pharmacist proper dealing with the patient ($p<0.05$); this might be because males at outpatient department were working with high workload helped them to properly deal with patients. Females agreed more than males in identifying the unavailable product with significant differences ($p<0.05$); this might be because females working at inpatient department knew more about the demand for some very critical medications, which led to prevention of shortage medications. Females significantly agreed more than males with respect to the salary they received, whereas males were more neutral than female with significant differences ($p<0.05$); this might be because females were younger and new to their job, whereas males were older and more responsible and demanded higher salary than that of females. Females were more satisfied than males with respect to their salary with significant differences ($p<0.05$).

According to our results, females significantly agree more than males that physicians do not cooperate with respect to job-related matter ($p<0.05$). That might be because the female pharmacist more contacting physicians and correction their mistake at inpatient pharmacy while male pharmacy technicians not discussed a lot or stop their mistake. While nurses cooperated more than physicians and nurses were consulted more than the pharmacy technicians. As a result, females disagreed more than males with significant differences with nurses, they were not cooperative related job matter ($p<0.05$). Moreover, females agreed more than males with significant differences with nurses consultation the pharmacy staff while male more neutral than female in pharmacy consultations ($p<0.05$). Females agreed more than males with significant differences with patients' appreciation, while the male more neutral than the female with significant differences in patients' appreciation ($p<0.05$). This is expected because the pharmacist counselled the patients and males did not do so.

Females significantly disagreed more than males with respect to working more or a higher number of prescriptions, job stress associated, which may affected negatively to the quality of work or friend relationship ($p<0.05$). This result is contradictory with that of a previous study.^{7,11} This is because more females worked at inpatient pharmacy with less work-

load than that of females working in the outpatient pharmacy. Moreover, the majority of work was done by pharmacy technicians, whereas pharmacists only double-check or follow-up the pharmacy technician work. Females significantly agreed more than males regarding to take a break during the day, whereas females significantly disagreed more than male with respect to work contribution at a successful organization ($p < 0.05$). The female had a sufficient time for rest while male maybe not had rest and relaxation room. Despite that pharmacists experienced job satisfaction in various factors, some factors did not reach optimal satisfaction such as performance contribution based on the organization's strategic plan.

Age Factor

With respect to age factor pharmacists in the age group of 30–39 years strongly agreed with more significant differences than age 20–29 years in the excessive work and elements of staff inadequate to cover the workload ($p < 0.05$) that's similar to previous study.⁷ Most of the pharmacists in the higher age group had more experience in pharmacy, and most of them had more experience in leadership and in administration. Pharmacists in the age group of 30–39 years faced more administrative problems than those in the age group of 20–29 years with significant differences (< 0.05). The age 30–39 years strongly disagree more than age 20–29 years had more time for continuous education or maintaining professional competency with significant differences ($p < 0.05$). Pharmacists in the higher age group category needed more education and training to update their knowledge and skills. Pharmacists in the age group of 30–39 years experienced more prescription-related problems than those in the age group of 20–29 years with significant differences.

In addition, in age 30–39 years more agree than age 20–29 years that's stress job affected negatively on mental and emotional health while age 20–29 years not agree with that is one and with significant differences ($p < 0.05$). The higher age pharmacy staff had more workload and facing challenges and problems that are affected the emotional health; while the younger age pharmacist had not all previous problems. In an age 30–39 years more strongly disagree than age 20–29 years in providing education for healthcare professionals with significant differences ($p < 0.05$), the older age pharmacist may be provided education sessions to healthcare providers while the new pharmacist did not provide it they need more experience and skills of pharmacy lectures delivery.

Social Factor

Most of the single responders strongly disagree than married with significant differences between f the kind of work with the amount paid or the salary resemble with other organizations or salary satisfaction ($p < 0.05$). It strange that is not married responders need more salary than a married one because they are younger age and need more money to meet all social needs. The married responders more disagree than single with significant differences in term of had a flexible schedule ($p < 0.05$) that's similar to previous study.⁷ Because the married responders need a more flexible schedule to need social needs. The married responders more agreed than single responders with significant differences in job stress affected negatively with mental and emotional health while the single responders not so ($p < 0.05$), while the married responders disagree with job stress affected negatively with friend relationships with significant differences ($p < 0.05$). That is related to both emotionally related problems of job and social life. However, those factors will not affect the friend relationship. The responders may be relaxed with their friends than a job.

Salary and income Factor

There is no significant difference between male and female with all amount of salary and type work with payment or the salary resemble of other organizations ($p > 0.05$). While the high salary of level 14,000–

16,000 SR more satisfied than 10,000–12,000 SR with statically significant difference ($p < 0.05$), that is expected higher salary more satisfied that's similar to previous study.^{12,13}

Academic qualifications

There were no significant differences between the various factors related to academic qualifications and job satisfaction (facing job challenges, changing pharmacy field, or career) ($p > 0.5$); this result agrees with that of a previous study¹³ and is contradictory to another study.¹¹ That is mainly decreases or increases of academic qualifications will affect pharmacy career satisfaction. Moreover, the number of responders with B. Pharm were more than those with D. Pharm. Most of the responders had B. Pharm or D. Pharm. This shows that there are some differences between the B. Pharm or D. Pharm holder in many aspects. First, B. Pharm holders significantly disagreed more than D. Pharm holders with respect to their freedom of work ($p < 0.5$). Moreover, because of the regulations and procedures in the pharmacy field, the pharmacists experienced more restrictions in their job responsibilities than that of pharmacy technicians. The pharmacy diploma holders agreed more than B. Pharm holders with supervisor qualified supervision and can provide pharmacy technician information about doing work more than pharmacists ($p < 0.5$). The pharmacy technician required more medication information than pharmacist. While the B. Pharm holder lesser required for information from their supervisors of the boss had same academic qualifications. B. Pharm holders significantly agreed more than D. Pharm with respect to their salaries; the pharmacist maybe had excessive work than diploma holder, more responsibility and more money required for their performances. In general, our results did not show significant differences with respect to academic qualifications and the salary paid in organizations and more salary satisfaction ($p > 0.5$). The BSc. Pharm holders significantly agreed more than diploma in pharmacy holders related to the non-pharmacist performing the duties of a pharmacist ($p > 0.5$). The pharmacist had more activities and responsibility than diploma holders.

B. Pharm holder significantly disagreed more than diploma in pharmacy holders with respect to patient appreciations and the patients lessen to pharmacist instructions ($p < 0.5$). The pharmacists were more familiar with patient's condition and monitored their drug-related problems than that of pharmacy technicians. The pharmacy diploma holders significantly agreed more than B. Pharm holders with excess work and the high number of prescriptions ($p < 0.5$). This result is expected because of the operation of medication preparations done by pharmacy technicians. B. Pharm holders significantly disagreed more than pharmacy diploma holders with respect to job stress associated with quality of work ($p < 0.5$); this is related to stress, responsibility and administrative issues.

CONCLUSION

Pharmacists job satisfaction was found to be negatively or positively affected by various factors related to their job. Gender and age were the most influential factors, whereas social status affected less. It should be considered all internal and external factors can affected job satisfaction to explore the real picture of findings in the pharmacist job satisfaction analysis.

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None.


CONFLICT OF INTEREST

The authors declare no conflicts of interest.

ABBREVIATIONS

KSA: Kingdom of Saudi Arabia; **MOH:** Ministry of Health; **Bsc:** Pharm, Bachelor of Science in Pharmacy; **Pharm D:** Doctor of Pharmacy.

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