Information Management and Business Review (ISSN 2220-3796)
Vol. 18, No. 4, pp. 90-104, 2026

Job Satisfaction and Perceived Organizational Support on Employees' Psychological Wellbeing: A Study of a Private Healthcare Company in Malaysia

Nurdiyana Shahirah Razali[1], *Norashikin Hussein[2]
[1]JLG Services Sdn Bhd, Johor Bahru, Johor, Malaysia
[2]Faculty of Business and Management, Universiti Teknologi MARA (UiTM), Selangor, Malaysia
Email: nurdiyana.razali88@gmail.com, *shikin6320@uitm.edu.my
Corresponding Author: Dr Norashikin Hussein

Abstract: Private healthcare organizations are expected to take more initiative in understanding their employees' psychological well-being. This is to ensure employees' strong performance, which directly translates into high-quality patient care. This study aims to determine the relationship between job satisfaction (extrinsic satisfaction and intrinsic satisfaction) and psychological well-being; secondly is to identify the relationship between perceived organizational support and psychological well-being. Data were collected from 231 employees at a private healthcare organization located in Klang Valley, Malaysia. The findings revealed that perceived organizational support was found to be the most important factor that influences employees' psychological well-being, followed by intrinsic satisfaction and extrinsic satisfaction. This study is significant to human resource practitioners and the management of private healthcare organizations in understanding the importance of perceived organizational support and job satisfaction as imperative drivers that influence employees' psychological well-being.

Keywords: *Psychological well-being, job satisfaction, perceived organizational support, private healthcare employees, Malaysia*

1. Introduction and Background

The healthcare industry has been rapidly growing due to increased demand for its services and products. Recent data from the Malaysia Healthcare Travel Council (MHTC) has shown that the number of medical travellers to Malaysia has increased since the post-pandemic era, reaching 1.84 million travellers in 2025, and this number is expected to continue to grow (Malaysia Healthcare Travel Council, 2026). This positive trend has made Malaysia a strong candidate to compete with other countries in becoming one of the best healthcare service providers.

In view of this, private healthcare employees are expected to work more intensely to provide a higher quality of service to be successful. Healthcare professionals, including doctors, nurses, midwives, pharmacists, and other healthcare personnel, play an essential role in delivering safe and high-quality healthcare services. Their contribution extends beyond clinical treatment, as their work can directly influence patients' comfort, recovery, and overall satisfaction with healthcare services (Chiremba et al., 2019). However, working in a hospital environment can be particularly demanding. Healthcare employees often work long hours and shifts while managing heavy workloads, complex patient needs, and rapidly changing working conditions. Ongoing changes in the healthcare sector have reshaped how both medical and non-medical employees perform their roles and interact with colleagues and patients. These changes may place additional demands on employees who are already working in highly challenging environments. Portoghese et al. (2014) reported that healthcare professionals are frequently exposed to time pressure, uncertainty in patient treatment, limited social support, heavy workloads, and emotional strain associated with caring for patients who are suffering or dying. Continuous exposure to such working conditions can affect employees' physical and psychological well-being. Consequently, healthcare employees may be particularly vulnerable to work-related stress, burnout, depression, and anxiety (Fiabane et al., 2013). On top of that, increased workload and dissatisfied healthcare employees show a negative impact on patients' satisfaction, quality of patient care, and loyalty to a hospital (Hall et al., 2016).

The consequences of these demanding working conditions are not limited to employees themselves. When healthcare employees experience excessive workloads and dissatisfaction at work, the quality of healthcare delivery may be affected. Previous research has shown that poor employee well-being and burnout can have negative implications for patient satisfaction, quality of care, and patients' overall experience with healthcare

services (Hall et al., 2016). Therefore, understanding the factors that contribute to a more supportive and satisfying job and work environment for healthcare employees is important not only for employee well-being but also for maintaining the quality and effectiveness of healthcare services.

Psychological well-being (PWB) is increasingly recognised as an important aspect of healthcare work, particularly in maintaining a satisfied and committed workforce and supporting employee retention (Chiremba et al., 2019). Given the demanding nature of healthcare settings, employees' psychological well-being is important not only for their personal functioning but also for their ability to perform their roles effectively. Chancellor et al. (2018) similarly emphasised that promoting well-being in the workplace can bring meaningful benefits to both employees and organizations. Previous studies have also linked psychological well-being to several work- and individual-related factors, including wellness (Liu et al., 2013), resilience (Sagone & De Caroli, 2014), stress (Clemente et al., 2016), and leadership behaviour (Damien, 2019).

Within the healthcare context, employee satisfaction and well-being are particularly important because their consequences may extend to patient care. Deng et al. (2018) highlighted that doctors' satisfaction can influence their own well-being as well as patient well-being, quality of care, and developments within the medical profession. Similar concerns have been reported among nurses, where job dissatisfaction has been associated with higher turnover, lower morale, and poorer well-being (Ronald et al., 2013). These findings suggest that healthcare organizations need to pay greater attention to the organisational conditions that can protect and enhance employees' psychological well-being.

One such condition is perceived organisational support (POS). When employees believe that their organisation values their contribution and is concerned about their well-being, they may feel better supported in managing stressful situations and carrying out their responsibilities effectively (Eisenberger et al., 2001). Support from immediate supervisors may be equally important, particularly in healthcare environments where employees regularly face demanding and emotionally challenging situations. Vera et al. (2016), for example, found that supervisor support can help reduce work-related stress and contribute to a healthier workplace for nurses. Taken together, these findings highlight the potential importance of organisational and supervisory support in promoting the psychological well-being of healthcare employees.

However, limited studies have been identified to examine these two predictor variables (job satisfaction and perceived organizational support) simultaneously towards psychological well-being (PWB) in the context of private healthcare organizations in Malaysia. The deficiency of studies on PWB and its relationship with other variables in the context of healthcare organizations may be the cause of the lack of understanding regarding PWB. This is supported by Wright and Cropanzano (2000), who argue that psychological well-being is a complicated concept that covers the overall individual psychological function and mental health. In fact, this research gap necessitates a more granular investigation into how these motivational orientations and organizational inputs independently and collectively shape the psychological health of the modern workforce. Thus, the focus of this study is to determine: (1) the relationship between job satisfaction (extrinsic satisfaction and intrinsic satisfaction) and psychological well-being; (2) the relationship between perceived organizational support and psychological well-being.

2. Literature Review

Psychological Well-Being. Psychological well-being has a variety of definitions in various fields (Gao & McLellan, 2018). Su, Tay and Diener (2014) described psychological well-being as an integrated model of well-being that includes "life satisfaction, positive emotion, supportive and enriching relationships, interest and engagement in daily activities, meaning and purpose in life, sense of mastery and accomplishment, feelings of autonomy, and optimism". On the other hand, Duan et al. (2016) stated that psychological well-being emphasizes "human flourishing and functioning, going beyond the traditional hedonia-versus-eudaimonia framework". Psychological well-being has been conceptualized as a multidimensional construct that is formed by the regulation of emotions, personal and social identity, personality characteristics, and life experience (Luthans et al., 2019).

Although there are differences in opinions and concepts among many researchers, psychological well-being has been agreed to be a form of multi-dimensional concept (Ryff et al., 2015). Hence, Ryff (1989) examination led to the construction of a theoretical model that included six dimensions of well-being, namely autonomy, environmental mastery, personal growth, positive relations with others, purpose in life, and self-acceptance. Subsequent studies confirmed the six (6) dimensions of well-being (Ryff & Keyes, 1995). The definition of each dimension of PWB is displayed in Table 1.

Table 1: Dimensions of PWB (Ryff, 1989)

Dimension of PWB	
Autonomy	Someone who is self-determining and independent; able to resist social pressures to think and act in certain ways; regulate behavior from within; and evaluate self by personal standards
Purpose in Life	Someone who has goals in life and a sense of directedness; feels there is meaning to present and past life; holds beliefs that give life purpose; and has aims and objectives for living.
Positive Relations with Others	Someone who has warm, satisfying, trusting relationships with others; is concerned about the welfare of others; is capable of strong empathy, affection, and intimacy; and understands the give and take of human relationships
Personal Growth	Someone who has a feeling of continued development; sees self as growing and expanding; is open to new experiences; has a sense of realizing his or her potential; sees improvement in self and behavior over time; and is changing in ways that reflect more self-knowledge and effectiveness.
Environmental Mastery	Someone who has a sense of mastery and competence in managing the environment; controls a complex array of external activities; makes effective use of surrounding opportunities; and can choose or create contexts suitable to personal needs and values
Self-Acceptance	Someone who possesses a positive attitude toward the self; acknowledges and accepts multiple aspects of self, including good and bad qualities; and feels positive about past life.

Job Satisfaction and Psychological Well-Being. Throughout decades, job satisfaction has been defined in the literature in many ways and has been explained countless times by countless scholars and researchers (Slemp et al., 2014). Generally, job satisfaction can be understood as "the extent to which people like or dislike their jobs" (Spector, 1997). Others describe job satisfaction as "an emotional state that comes from a self-assessment of an employee's job" (Hosseinabadi & Etemadinezhad, 2018). Job satisfaction has been identified as one of the drivers for employee well-being (O'Driscoll, 2010). In fact, job satisfaction is often related to one's life contentment as it affects the person's social, physical, and mental health. Faragher et. al (2005) demonstrated that the level of job satisfaction has an essential impact on the health of the workforce. Thus, it is a crucial element to evaluate the individual's satisfaction with his or her job that eventually influences personal and organizational development. Self-Determination Theory (SDT) serves as an integrative framework for these constructs, positing that when work environments satisfy basic psychological needs for autonomy, competence, and relatedness, employees transition from extrinsic compliance toward more sustainable intrinsic fulfilment (Sireno et.al., 2020).

Job satisfaction can be understood as a positive state due to intrinsic or extrinsic variables regarding an individual's job (Edwards & Cable, 2009). Spector (1997) defines intrinsic job satisfaction as how people feel about the nature of their job tasks. Most business leaders use intrinsic satisfaction to identify various layers of work outcomes to increase organizational productivity (Nawi et al., 2016). Examples of intrinsic job satisfaction factors include interaction among colleagues, positive relationships, and a feeling of purpose (Arnett & Polkinghorne, 2010). Literatures highlight the direct link between intrinsic job satisfaction and employees' psychological well-being. Specifically, when tasks are intrinsically rewarding, work is experienced as meaningful rather than taxing, which actively fosters positive affect and psychological capital. In their systematic review of workplace well-being, Nunes et al. (2023) demonstrated that autonomous motivation is a robust predictor of flourishing mental health and functions as a critical buffer against occupational stressors. Furthermore, doing work that satisfies our inner desires changes how we view workplace hurdles. Instead of

seeing challenges as threats, we begin to look at them as opportunities to learn and grow. Expanding on this, Martela (2025) explains that the active, hands-on agency sparked by intrinsic motivation gives employees a real sense of vitality. This directly translates into lower anxiety and much higher job satisfaction. Ultimately, when people work out of genuine enjoyment and personal value rather than just to comply with external pressures, they maintain a healthier, more resilient mindset that keeps their overall well-being thriving. Additionally, Durkin et al. (2016) found that how nurses perceived themselves had implications for their sense of accomplishment and general well-being. Meanwhile, Burke et. al. (2012) highlighted that intrinsic factors such as enjoyment of work have significantly led to higher psychological well-being at the workplace. Finally, Ryan and Deci (2000) found that recognition at the workplace is effective in determining one's psychological well-being. Therefore, it is hypothesized that:

H1: There is a relationship between intrinsic job satisfaction and psychological well-being

H1a: There is a positive relationship between intrinsic job satisfaction and autonomy.
H1b: There is a positive relationship between intrinsic job satisfaction and self-acceptance.
H1c: There is a positive relationship between intrinsic job satisfaction and positive relations with others.
H1d: There is a positive relationship between intrinsic job satisfaction and environmental mastery.
H1e: There is a positive relationship between intrinsic job satisfaction and purpose in life.
H1f: There is a positive relationship between intrinsic job satisfaction and personal growth.

Extrinsic satisfaction, on the other hand, is referred to as satisfaction that comes from external benefits provided by the organization to its employees, including competitive pay and flexible schedules (Randolph & Johnson, 2005). Recent literature suggests that appropriately designed extrinsic job satisfaction can positively influence employees' psychological well-being, provided that employees perceive this as fair, supportive, and reflective of employees' contributions. For example, fair compensation, career advancement opportunities, and meaningful recognition reduce financial stress, strengthen employees' perceived organizational support, and enhance their confidence in achieving career goals. As a result, employees are more likely to experience positive emotions, greater job satisfaction, and improved psychological functioning (Olafsen, 2024). A few studies that examine human resource (HR) practices through the lens of SDT demonstrate that supportive HR practices can lead to positive outcomes. For example, fair reward systems, career development opportunities, and recognition programmes can enhance employees' basic psychological need satisfaction and autonomous forms of motivation. This subsequently leads to improved work engagement, organizational commitment, and employee well-being (Laguerre & Barnes-Farrell, 2025). These findings indicate that extrinsic job satisfaction is most beneficial when employees perceive it as developmental rather than controlling. Thus, it is hypothesized that:

H2: There is a positive relationship between extrinsic job satisfaction and psychological well-being.

H2a: There is a positive relationship between extrinsic job satisfaction and autonomy.
H2b: There is a positive relationship between extrinsic job satisfaction and self-acceptance.
H2c: There is a positive relationship between extrinsic job satisfaction and positive relations with others.
H2d: There is a positive relationship between extrinsic job satisfaction and environmental mastery.
H2e: There is a positive relationship between extrinsic job satisfaction and purpose in life.
H2f: There is a positive relationship between extrinsic job satisfaction and personal growth.

Perceived Organizational Support and Psychological Well-Being. Perceived organizational support (POS) is defined as the generalized opinions of employees that their organization values their contribution and cares about their well-being (Eisenberger et al., 1986; Kurtessis et al., 2017). In other words, organizational support functions as an essential resource in meeting employees' psychological and emotional needs (such as approval, esteem, affiliation, and emotional support) within the work environment. When these needs are satisfied, individuals experience heightened positive affect, reduced emotional strain, and an enhanced self-identity tied to their work role.

Previous literature has demonstrated how a supportive workplace environment acts as an important factor for mental health. For example, when a company offers flexible frameworks, structural assistance, and relevant validation, it fundamentally changes how employees process stress. Darmawan (2022) highlighted that a highly supportive organizational environment directly lowers occupational anxiety and gives a major boost to overall life satisfaction. Knowing that management support is accessible creates a deep sense of security, which further leads to satisfying human needs for esteem and belonging. This kind of support doesn't just minimize the

negatives; it actively builds psychological strength**.** Deniz and Kocabaş (2024) studied professionals dealing with intense workplace pressures and found that high levels of organizational support directly predicted greater self-acceptance, autonomy, and environmental mastery. When you know your management stands firmly behind you, your psychological vulnerability drops, making you far more resilient when the organization's goals shift or uncertainties arise.

Additionally, perceived organizational support is an important driver for both organizational performance outcomes and individual well-being" (Kurtessis et al., 2017). Similarly, Payne et al. (2018) also addressed how perceived organizational support is associated with well-being. This has been supported by Wright et. al. (2012) that perceived organizational support (POS) is considered a highly functional organizational resource that contributes positive effects on individuals' mental health and positive work outcomes. Moreover, perceptions of support can foster employees' positive emotions, and it is strongly associated with their level of psychological well-being (Ryff & Singer, 1998). Therefore, it is hypothesised that:

H3: There is a positive relationship between perceived organizational support and psychological well-being.

H3a: There is a positive relationship between perceived organizational support and autonomy.

H3b: There is a positive relationship between perceived organizational support and self-acceptance.

H3c: There is a positive relationship between perceived organizational support and positive relations with others.

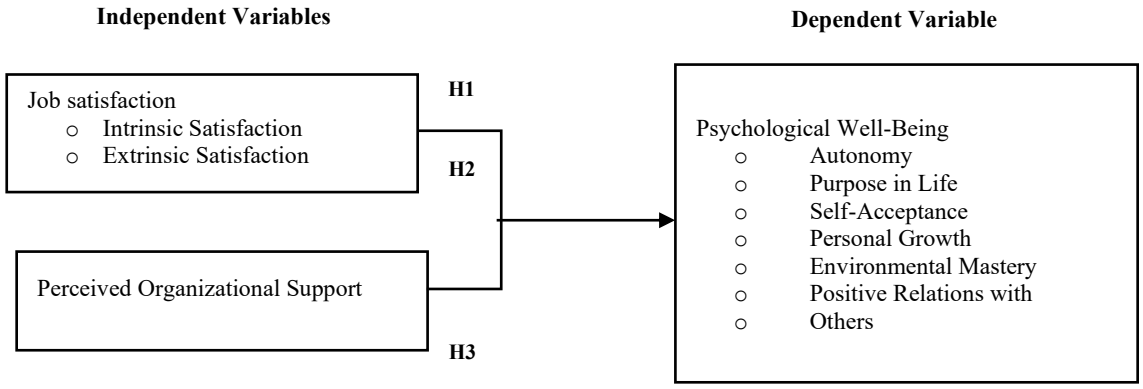
H3d: There is a positive relationship between perceived organizational support and environmental mastery.

H3e: There is a positive relationship between perceived organizational support and purpose in life.

H3f: There is a positive relationship between perceived organizational support and personal growth.

Figure 1: Research Framework

The proposed research framework is as displayed in Figure 1



3. Research Methodology

This study utilized a quantitative research design. A cross-sectional study was chosen because the objective of the study was to determine the relationship between job satisfaction and perceived organizational support, and psychological well-being. The study utilized purposive sampling involving full-time medical and non-medical healthcare employees from a private healthcare organization in Klang Valley, Malaysia. In this study, purposive sampling provides the operational flexibility needed in targeting available and eligible employees across shifts without disrupting patient care or administrative healthcare workflows. The selection of the respondents from both medical and non-medical employees was done to provide a holistic view of the organization's healthcare employees' psychological well-being. The non-medical employees selected in this study included employees from administration, operations, human resources, finance, customer service, information technology, public relations, and sales and marketing. Meanwhile, for medical employees, the sample selected included physicians, therapists, nurses, medical assistants, pharmacists, radiographers, dietitians, physiotherapists, and ambulatory support.

To measure psychological well-being, the study adopted a shorter version of the instrument from Van Direndonck (2004), which consisted of 39 items covering six dimensions of the variable. Job satisfaction, on the other hand, was measured using 13 items developed by Weiss et al. (1967). Each of the dimensions, namely intrinsic and extrinsic job satisfaction, consisted of seven and six items, respectively. For perceived organizational support, the study adopted a short version of 8 items from the Survey of Perceived Organizational Support (SPOS) developed by Eisenberger et al. (1986). This study used a 5-point Likert scale ranging from 1 = "strongly disagree" to 5 = "strongly agree" for psychological well-being. On the other hand, the job satisfaction scale ranged from 1 = "very dissatisfied" to 5 = "very satisfied". For PSOS, the study utilized a 5-point Likert scale ranging from 1 = "strongly disagree" to 5 = "strongly agree". A pre-test was conducted to ensure the validity of the instruments used. Before data collection, the instruments were validated by an academic and two healthcare human resource practitioners. Pilot study was also conducted to 40 respondents that yield a result of acceptable reliability values of 0.7 for all variables. Statistical analyses such as descriptive analysis, reliability analysis, and multiple regression analysis were used in the study to achieve the objectives of the study. All data collected were analyzed using IBM Statistical Package for the Social Sciences (SPSS) version 26.

4. Results

Demographic Profile of the Respondents. Data were collected from 231 respondents, yielding a response rate of 77 per cent. The respondents of this study consisted of 68.8 percent female respondents and 31.2 percent male respondents. Most of the respondents (45 %) were in the range of 20 – 29 years old. Most respondents' ethnic group was Malay (85.3 percent), and more than half of them were married (55.4 percent). Almost half of the respondents graduated with a Diploma (45.5 percent). Out of the 231 respondents, 57.6 percent were medical employees, and the remaining respondents were non-medical (42.4%). Besides that, almost half of the surveyed respondents (46.8%) worked within the range of 46 – 50 hours weekly. It was also reported that more than half of the respondents (57.1%) have a tenure between 1 – 5 years at the current healthcare organization. The monthly income range for most of the respondents was between RM2,000 and RM4,000 (41.1%).

Normality Test. According to Coakes and Steed (2009), the assumption of normality is a prerequisite for many inferential statistical techniques, and Coakes and Ong (2011) stated that "normal distribution is acceptable when the skewness and kurtosis values are in the range of +/-3". Based on Table 2, the data were determined to be normally distributed, since the values of skewness and kurtosis were in the range of +/-3 for each variable, as displayed in Table 2.

Table 2: Normality Test

Variables	Skewness	Kurtosis
Job Satisfaction		
Intrinsic Satisfaction	-.14	.63
Extrinsic Satisfaction	-.05	-.13
Perceived Organizational Support	-1.22	1.37
Psychological Well-Being		
Autonomy	-.82	.73
Self-Acceptance	-.70	.82
Positive Relations with Others	-.44	.31
Environmental Mastery	-.19	.21
Purpose in Life	-.03	-.11
Personal Growth	-.46	-.22

Factor Analysis. Factor analysis aims to explain the patterns of correlation within a set of observed values by identifying the variables and factors that influence those values (Huyen, 2015). Confirmatory Factor Analysis (CFA) was used in this study, as the instrument used was adopted from previous research. Based on the analysis conducted, it can be concluded that all three variables; psychological well-being, job satisfaction and perceived organizational support are significant based on the values of the Bartlett test of Sphericity and Kaiser-Meyer—Olkin were also adequate.

Job satisfaction was measured based on two dimensions, namely intrinsic and extrinsic job satisfaction. 13 items consisted of seven items for intrinsic satisfaction, and six items of extrinsic satisfaction were analyzed. After conducting the CFA for job satisfaction, six items were eliminated, and subsequently only three items of intrinsic satisfaction and four items of extrinsic satisfaction were retained. KMO value of .80 was found in the analysis, and the Bartlett Test of Sphericity was found to be significant at $p < .00$. The factor analysis for job satisfaction shows the total variance at 66.03 percent; thus, it was appropriate for further analysis. The first factor consists of four items to measure extrinsic satisfaction. The items of the first factor with an eigenvalue of 3.34 shared factor loadings ranging from .76 to .83, which explained 47.72 percent of the total variance in the data. The second factor consists of 3 items relating to intrinsic satisfaction. The items of the second factor, have an eigenvalue of 1.28 and shared factor loadings ranging from .55 to .86, which explained 18.31 percent of the total variance in the data (Refer to Table 3).

Table 3: Factor Analysis of Job Satisfaction

Variables	F1	F2
Extrinsic Satisfaction		
My pay and the amount of work that I do	.83	
The chances for advancement at my job	.82	
The way policies are put into practice	.76	
The praise I get for doing a good job	.76	
Intrinsic Satisfaction		
The chance to do something that makes use of my abilities		.86
The chance to do things for other people		.85
The feeling of accomplishment I get from the job		.55
Total Variance	66.03%	
KMO Measures of Sampling Adequacy	.80	
Bartlett's Test of Sphericity	5556.18	
Sig.	.00	

The next CFA was conducted for perceived organizational support (POS) as displayed in Table 4. Originally, the number of items for POS was eight items. The result shows that only one component was extracted; hence, the solution cannot be rotated, and the number of items remained unchanged. Table 3 shows the result for perceived organizational support. Based on a KMO value of .92, which is greater than .5, it is suitable to be conducted. It also shows that the Bartlett Test of Sphericity is significant at $p = .00$. The factor analysis for perceived organizational support shows an eigenvalue of 5.06, which explains 63.19 percent of the total variance in the data. Hence, it is appropriate for further analysis.

Table 4: Factor Analysis of Perceived Organizational Support

Variables	F1
The organization would notice if I did the best job possible.	.85
The organization really cares about my well-being	.83
The organization shows huge concern for me.	.83
The organization takes pride in my accomplishments at work.	.80
The organization cares about my general satisfaction at work	.78
The organization appreciates any extra effort from me.	.78
The organization would not ignore any complaint from me.	.75
The organization values my contribution to its well-being.	.74
Total Variance	63.19%

KMO Measures of Sampling Adequacy	.92
Bartlett's Test of Sphericity	1097.99
Sig.	.00

Psychological well-being originally consisted of 39 items with dimensions of autonomy (eight items), self-acceptance (six items), positive relations with others (six items), environmental mastery (six items), purpose in life (six items), and personal growth (seven items). However, nine items were eliminated, and subsequently only 30 items were left in total. Table 5 shows the finalized result for psychological well-being. Based on the KMO value of .94 (*p>.05*) which can be interpreted as adequate to predict each factor. It also shows that the Bartlett Test of Sphericity is significant at p = .00. The factor analysis for psychological well-being shows the total variance at 66.51 percent; therefore, it is appropriate for further analysis. Based on the CFA, the first factor consisted of seven items relating to purpose in life. The items of the first factor with the eigenvalue of 12.94 shared factor loadings ranged from .62 to .72, which explained 43.12 percent of the total variance in the data. The second factor consists of seven items relating to personal growth. The items of the second factor, with an eigenvalue of 1.94, shared factor loadings ranging from .52 to .81, which explained 6.47 percent of the total variance in the data. The third factor consisted of six items relating to autonomy. The items of the first factor, with an eigenvalue of 1.67, had shared factor loadings ranging from .57 to .76, which explained 5.55 percent of the total variance in the data. The fourth factor consisted of five items relating to positive relations with others. The items of the fourth factor have an eigenvalue of 1.40 and shared factor loadings ranging from .66 to .76, which explained 6.47 percent of the total variance in the data. The fifth factor consists of three items relating to self-acceptance. The items have an eigenvalue of 1 shared factor loadings ranged from .64 to .70, which explained 3.66 percent of the total variance in the data. The sixth factor consists of two items relating to environmental mastery. The items of the sixth factor had an eigenvalue of .92 and shared factor loadings ranging from .70 to .76, which explained 3.06 percent of the total variance in the data.

Table 5: Factor Analysis of Psychological Well-being

Variables	F1	F2	F3	F4	F5	F6
FACTOR 1: Purpose in Life						
I have a good sense of what it is I'm trying to accomplish in life.	.72					
I have a sense of direction and purpose in life.	.71					
I feel good when I think of what I've done in the past and what I hope to do in the future.	.68					
I enjoy making plans for the future and working to make them a reality.	.65					
I have been able to build a home and a lifestyle for myself that is much to my liking.	.65					
I am an active person in carrying out the plans I set for myself	.64					
My aim in life has been more satisfying than frustrating to me.	.62					
FACTOR 2: Personal Growth						
When I think about it, I have really improved much as a person over the years.		.81				
I have the sense that I have developed a lot as a person over time.		.71				
I want to try new ways of doing things—my life is fine the way it is.		.69				
I think it is important to have new experiences that challenge how you think about yourself and the world.		.66				
I never gave up trying to make big improvements or changes in my life a long time ago.		.61				
For me, life has been a continuous process of learning, changing, and growth.		.60				
In general, I feel that I continue to learn more about myself as time goes by.		.52				

FACTOR 3: Autonomy				
I am not easily influenced by people with strong opinions.	.76			
I have confidence in my opinions, even if they are contrary to the consensus.	.72			
I'm not worried about what other people think of me.	.67			
I am not afraid to voice my opinion, even when they are in opposition to the opinions of most people.	.66			
I am not concerned about how other people evaluate the choices I have made in my life.	.66			
I judge myself by what I think is important, not by the values of what others think is important.	.57			
FACTOR 4: Positive Relations with Others				
I have people who will listen when I need to talk.		.76		
I have experienced many warm and trusting relationships with others.		.72		
I rarely feel lonely because I have many close friends with whom I share my concerns.		.67		
I feel like I get a lot out of my friends.		.67		
I know that I can trust my friends, and they know they can trust me.		.66		
FACTOR 5: Self-Acceptance				
In many ways, I feel happy about my achievements in life.			.70	
For the most part, I am proud of who I am and the life I lead.			.68	
I like most aspects of my personality.			.64	
FACTOR 6: Environmental Mastery				
Given the opportunity, I would not change anything about me.				.76
In general, I feel I oversee the situation in which I live.				.70
Total Variance	66.51%			
KMO Measures of Sampling Adequacy	.94			
Bartlett's Test of Sphericity	4167.46			
Sig.	.00			

Reliability and Descriptive Analysis. Table 6 shows the reliability values and descriptive analysis of all variables used in the study. All variables were found to be reliable, with acceptable reliability values ranging from 0.66 to 0.92, and exceeded Nunnally's (1978) minimum requirement of 0.60. Specifically, the mean scores for all variables used in the study ranged from 3.33 to 4.19. Meanwhile, the standard deviation of the variables ranged from .53 to .72.

Table 6: Reliability and Descriptive Analysis

Variables	No. of Item	Cronbach Alpha	Mean	Standard Deviation
Job Satisfaction				
Intrinsic Satisfaction	6	0.82	3.30	.69
Extrinsic Satisfaction	7	0.71	3.87	.55
Perceived Organizational Support	8	0.92	3.83	.62
Psychological Well-Being				
Autonomy	6	0.88	3.77	.59
Self-Acceptance	7	0.89	4.19	.53
Positive Relations with Others	8	0.88	3.74	.66
Environmental Mastery	6	0.87	3.81	.65
Purpose in Life	6	0.85	3.77	.70
Personal Growth	6	0.66	3.75	.72

Multiple Regression Analysis. Multiple regression analysis was conducted to test the relationship between the independent and dependent variables (Sekaran, 2006). Table 7 summarizes the results of multiple regression analysis. Based on the findings, intrinsic job satisfaction was found to have a positive, significant relationship with five dimensions of psychological well-being, namely purpose in life, personal growth, autonomy, positive relations with others and self-acceptance. In other words, intrinsic satisfaction contributes to purpose in life ($\beta = .24$, $p < .05$), personal growth ($\beta = .41$, $p < .05$), autonomy ($\beta = .22$, $p < .05$), positive relations with others ($\beta = .17$, $p < .05$), and self-acceptance ($\beta = .18$, $p < .05$). No relationship was reported with environmental mastery. Thus, all hypotheses were supported except for H1d.

Extrinsic job satisfaction was found to have a positive significant relationship with only three dimensions, namely purpose in life, positive relations with others, and self-acceptance. In other words, extrinsic satisfaction contributes to purpose in life ($\beta = .31$, $p < .05$), positive relations with others ($\beta = .16$, $p < .05$), and self-acceptance ($\beta = .26$, $p < .05$). It was also found that extrinsic satisfaction has no relationship with three dimensions, namely personal growth, autonomy, and environmental mastery. Thus, only H2b, H2c, H2e were supported.

Additionally, it was found that there was a positive relationship between POS and all six dimensions of psychological well-being. Specifically, POS was found to have a positive, significant relationship with purpose in life ($\beta = .28$, $p < .05$), personal growth ($\beta = .33$, $p < .05$), autonomy ($\beta = .44$, $p < .05$), positive relations with others ($\beta = .25$, $p < .05$), self-acceptance ($\beta = .20$, $p < .05$), and environmental mastery ($\beta = .45$, $p < .05$). Therefore, all hypotheses were supported.

Table 7: Multiple Regression Analysis

	Dependent Variable (Psychological Well-Being) (β)					
	Purpose in Life	Personal Growth	Autonomy	Positive Relations with Others	Self-Acceptance	Environmental mastery
Independent Variables						
Intrinsic Job Satisfaction	.24**	.41**	.22**	.17*	.18**	.02
Extrinsic Job Satisfaction	.31**	-.09	.10	.16*	.26**	-.03
Perceived Organizational Support	.28**	.33**	.44**	.25**	.20**	.45**
F Value	52.78	35.43	46.86	19.09	24.58	18.91
R^2	.41	.32	.38	.20	.25	.20
Adjusted R^2	.40	.31	.37	.19	.24	.19

5. Discussion and Conclusion

The findings revealed that intrinsic satisfaction was related to five dimensions of psychological well-being, namely purpose in life, personal growth, autonomy, positive relations with others, and self-acceptance. This result indicated that intrinsic satisfaction had a more positive impact on employees' overall psychological well-being at work compared to extrinsic satisfaction. Five reasons can be used to explain this. Firstly, purpose in life is someone who has goals in life and a sense of directness. From a healthcare industry perspective, we can conclude that most employees in private healthcare value their meaningful work, which is deemed to have an impact on society. This is consistent with the previous study conducted by Ryff and Keyes (1995) that "highly anxious individuals who believe that there is meaning to life are considerably more likely to be satisfied with their jobs. Secondly, personal growth refers to someone consistently developing and becoming aware of their development, rather than choosing to be in a fixed state. This can be interpreted as the circle of colleagues, supervisors, and the work itself being more important factors that will have a direct and major influence on how far one will go to seek to expand their level of personal growth. Thirdly, Katz and Kahn (1978) supported that "increasing autonomy in a job creates intrinsic motivation due to the perception that one can control one's job performance". Thus, it is suggested that, from the healthcare perspective, organizational culture reflected through establishing their own scope of duties among nurses, for example, would have more impact on the

individual employee. This can be done by granting the nurses greater autonomy in making decisions, which is part of their work culture in the company. Intrinsic satisfaction was also found to have a significant positive relationship with positive relations with others. This can be explained by the fact that stronger intrinsic satisfaction has better friendship relations (Kasser & Ryan, 1996), and they tend to cooperate and display prosocial behaviour (Sheldon & McGregor, 2000). Besides that, intrinsic satisfaction was also found to be significantly related to self-acceptance. Seifert (2005) argued that when employees experience more satisfaction in their jobs, they have come to a point in their lives where they have accepted themselves despite their weaknesses. Overall, the findings were supported by a previous study conducted by Nunes et. al. (2023) and Martela (2025).

In view of this, the findings of the study suggested that private healthcare organizations should establish recognition programs that motivate employees at work and are able to increase their psychological well-being. Besides that, private healthcare organizations should establish effective career planning for employees by providing opportunities for upskilling, continuous learning, and eventually leading to better promotional outcomes. This can also be materialized through various educational program assistance and attending various skill-set training programs. These programs will encourage the employees to accomplish personal goals and subsequently motivate them to provide high-quality care to patients. In addition, activities such as team-building or integrating employees' families at the workplace should be put in place to establish better relationships and networking among employees. With a great teamwork culture and abundance of trust, employees tend to be more open, and this helps to boost the process of self-acceptance in the long run. Intrinsic job satisfaction was found to have no significant relationship with environmental mastery. This suggests that satisfaction derived from the job itself may not necessarily enhance healthcare employees' ability to manage the demands and challenges of their work environment. Instead, environmental mastery may depend more on situational and organisational factors, such as workload, autonomy, available resources, and workplace support. This is consistent with the findings of the study by Madhuchandra and Srimathi (2016).

The study also demonstrated that extrinsic satisfaction has a positive relationship with some of the dimensions of psychological well-being. Specifically, extrinsic satisfaction was found to be related to only three dimensions of psychological well-being (purpose in life, positive relations with others, and self-acceptance). This is supported by three justifications. Firstly, Brdar et al. (2009) indicated that people who pursued a pleasant life (purpose in life) placed more value on extrinsic aspirations, like money, fame, and an appealing image. Secondly, when the employee is satisfied with extrinsic factors such as pay, allowance, and a flexible schedule, this fundamentally leads to greater teamwork, and medical employees such as nurses will maintain good relations with their patients. Thirdly, employees have a high degree of self-acceptance because they feel good about themselves for being well-compensated and working in an established private healthcare organization. In view of this, it is suggested that private healthcare organizations establish competitive pay practices that match the employees' performance and skill set. The management at private healthcare organizations may consider enhancing company policies related to salary progression and promotions to assure the employees' job security. However, no relationship was found between extrinsic satisfaction and the other three dimensions, which were personal growth, autonomy, and environmental mastery. The result of the recently concluded study agreed with Niemiec (2009) that people with strong extrinsic satisfaction have more difficulty fulfilling their needs for autonomy. This is because most employees feel that they have the autonomy to do what they are supposed to do, and they experience an abundance of self-confidence in their roles. Besides that, the extrinsic factors would have no bearing on their desire to raise the bar in their career and will continue to display work motivation to focus on their personal growth. In the case of the hospital as the workplace environment, employees who have high environmental mastery can also be seen as perceiving themselves to be competent enough to face the challenges in treating patients regardless of the extrinsic circumstances that they are facing. This finding was also similar to studies conducted by Olafsen (2024) and Laguerre and Barnes-Farrell (2025).

Additionally, the study revealed that perceived organizational support was found to have a positive relationship with all six dimensions of psychological well-being. The findings are consistent with Darmawan (2022) and Deniz and Kocabaş (2024). Specifically, Jain et al. (2013) found that POS reduces occupational stress and consequently leaves a positive impact on the psychological well-being of employees. In the nursing context, "with organizational support, nurses can succeed in continuing their professional development" (Bradley et al.,

2005). In fact, Hinno et al. (2009) noted that "there is rising indication that when registered nurses perceive more support, they are likely to be happier with their job and plan to stay with their present hospital". Therefore, it is suggested that private healthcare organizations proactively manage any negative sentiment between employees and organizations or between members before it grows bigger, as this may jeopardize employees' well-being if measures to address it are not taken as soon as possible. This is because, when employee have a supportive workplace environment, it will increase their productivity (Arogundade et. al., 2015). Moreover, this may also protect our medical employees from the "harmful effects of stress by enhancing their self-esteem and communicating that the organization cared for their well-being" (George et al., 1993).

Two suggestions for future study. Firstly, future studies should be expanded to the public healthcare sector for new insights and perspectives, especially during the post-pandemic era. As public healthcare is a more affordable alternative for the community and subsidized by the Malaysian government, it is usually overcrowded with a high number of patients. The difference in the work environment may provide significant discovery on the level of psychological well-being among healthcare employees. As a result, the management of healthcare organizations and human resource professionals can benefit from the findings of the study in initiating transformation of their current talent management practices in producing a happier and more productive workforce in the future.

Secondly, future studies should utilize a longitudinal research design. This counters the disadvantages of cross-sectional design. A longitudinal design involves the collection of data over a long period of time. It would help researchers to learn more about the cause-and-effect relationship and subsequently allow for better results and perspectives. Finally, as this study was limited to the direct relationship of the variables, future researchers could seek to expand the pool of potential explanatory variables and additional moderating or mediating variables to enable researchers to better understand the dynamic framework between job satisfaction, perceived organizational support, and psychological well-being.

Conclusion

To conclude, for private healthcare leaders, this study serves as a vital reminder that employee well-being doesn't consist only of luxury HR perks through extrinsic job satisfaction. While competitive pay and decent workspace tools keep both medical and administrative staff from leaving, it is the human elements through intrinsic job satisfaction such as autonomy, sense of purpose, and the belief that management supports them when things get out of control keep them from burning out. By moving away from only 'superficial' wellness initiatives and actively building a culture where frontline medical employees' exhaustion is met with structural relief and administrative employees' behind-the-scenes effort is genuinely valued, the healthcare management team can transform their workplace from a highly stressful environment into a resilient, thriving community where taking care of the employees is understood as the most important step to taking care of the patients.

References

Abbott, R. A., Ploubidis, G. B., Huppert, F. A., Kuh, D., Wadsworth, M. E., & Croudace, T. J. (2006). Psychometric evaluation and predictive validity of Ryff's psychological well-being items in a UK birth cohort sample of women. *Health and Quality of Life Outcomes*, 4(1), 76.

Arnett, Sally E. and Polkinghorne, Frederick W. (2010). Job Dissatisfaction: A Factor in Maintaining a Highly-Qualified Family and Consumer Sciences Teacher Workforce," Online Journal for Workforce Education and Development, 4 (4), Article 2.

Arogundade, T. O., Arogundade, B. A., & Adebajo, O. (2015). The influence of perceived organizational support on job stress among selected public and private sector employees in Lagos State, Nigeria. *Advances in Research,* 541-547.

Bradley, E., Campbell, P., & Nolan, P. (2005). Nurse prescribers: who are they and how do they perceive their role? *Journal Of Advanced Nursing,* 51(5), 439-448.

Brdar, I., Rijavec, M., & Miljković, D. (2009). Life goals and well-being: Are extrinsic aspirations always detrimental to well-being? *Psihologijske teme,* 18(2), 317-334.

Burke, R. J., Moodie, S., Dolan, S. L., & Fiksenbaum, L. (2012). Job demands, social support, work satisfaction, and psychological well-being among nurses in Spain. *ESADE Business School Research Paper* (233).

Chancellor, J., Margolis, S., & Lyubomirsky, S. (2018). The propagation of everyday prosociality in the workplace. *The Journal of Positive Psychology,* 13(3), 271-283.

Chiremba, S., & Kumaidi, P. H. D. (2019). Discriminant Factors To Psychological Wellbeing Of Nursing Staff At Dr. Moewardi Regional General Hospital (Doctoral dissertation, Universitas Muhammadiyah Surakarta).

Chiremba, S., Wardani, I. K., & Wardani, Y. K. (2019). *Discriminant factors to psychological well-being of nursing staff at Dr. Moewardi Regional General Hospital* (Master's thesis, Universitas Muhammadiyah Surakarta). Universitas Muhammadiyah Surakarta Digital Library. ums.ac.id

Clemente, M., Hezomi, H., Allahverdipour, H., Jafarabadi, M. A., & Safaian, A. (2016). Stress and psychological well-being: An explanatory study of Iranian female adolescents. *Journal of Child and Adolescent Behavior.*

Coakes, S. J., & Ong, C. (2011). SPSS version 18.0 for Windows (version 18.0). Australia: John Wiley & Sons.

Coakes, S. J., & Steed, L. (2009). SPSS: Analysis without anguish using SPSS version 14.0 for Windows. John Wiley & Sons, Inc.

Damien, C. E. (2019). Firefighters' Perception of Leadership Behaviors on Their Psychological Well-being: A Case Study.

Darmawan, D. (2022). The relationship between work-life balance and perceived organizational support to employees' psychological well-being in modern work environments. *Journal of Social Science Studies*, *2*(1), 73–80.

Deng, S., Yang, N., Li, S., Wang, W., Yan, H., & Li, H. (2018). Doctors' job satisfaction and its relationships with doctor-patient relationship and work-family conflict in China: a structural equation modelling. INQUIRY: The Journal of Health Care Organization, Provision, and Financing, 55, 0046958018790831.

Deniz, S., & Kocabaş, İ. (2024). Understanding the relationship between perceived organizational support and psychological well-being: Perspectives of Turkish faculty members. *Higher Learning Research Communications*, *14*(1), 51–67.

Duan, W., Guan, Y., & Gan, F. (2016). Brief inventory of thriving: A comprehensive measurement of wellbeing. Chinese Sociological Dialogue, 1(1), 15-31.

Durkin, M., Beaumont, E., Martin, C. J. H., & Carson, J. (2016). A pilot study exploring the relationship between self-compassion, self-judgement, self-kindness, compassion, professional quality of life and wellbeing among UK community nurses. *Nurse Education Today*, 46, 109-114.

Edwards, J. R., & Cable, D. M. (2009). The value of value congruence. *Journal of Applied Psychology*, 94(3), 654.

Eisenberger, R., Armeli, S., Rexwinkel, B., Lynch, P. D., & Rhoades, L. (2001). Reciprocation of perceived organizational support. *Journal of Applied Psychology*, 86(1), 42.

Eisenberger, R., Huntington, R., Hutchison, S., & Sowa, D. (1986). Perceived organizational support. *Journal of Applied Psychology*, 71(3), 500.

Faragher, E. B., Cass. M., Cooper, C. L. (2005). The relationship between job satisfaction and health, 105-112.

Fiabane, E., Giorgi, I., Sguazzin, C., & Argentero, P. (2013). Work engagement and occupational stress in nurses and other healthcare workers: the role of organisational and personal factors. *Journal Of Clinical Nursing*, 22(17-18), 2614-2624.

Gao, J., & McLellan, R. (2018). Using Ryff's scales of psychological well-being in adolescents in mainland China. *BMC Psychology,* 6(1), 1-8.

George, J. M., Reed, T. F., Ballard, K. A., Colin, J., & Fielding, J. (1993). Contact with AIDS patients as a source of work-related distress: Effects of organizational and social support. *Academy of Management Journal*, 36(1), 157-171.

Hall LH, Johnson J, Watt I, Tsipa A, O'Connor DB (2016) Healthcare Staff Wellbeing, Burnout, and Patient Safety: A Systematic Review. PLoS ONE 11(7): e0159015. https://doi.org/10.1371/journal.pone.0159015

Hinno, S., Partanen, P., Vehviläinen-Julkunen, K. A. T. R. I., & Aaviksoo, A. (2009). Nurses' perceptions of the organizational attributes of their practice environment in acute care hospitals. *Journal Of Nursing Management*, 17(8), 965-974.

Hosseinabadi, M. B., & Etemadinezhad, S. (2018). Evaluating the relationship between job stress and job satisfaction among female hospital nurses in Babol: An application of structural equation modelling. *Health Promotion Perspectives,* 8(2), 102.

Jain, A. K., Giga, S. I., & Cooper, C. L. (2013). Perceived organizational support as a moderator in the relationship between organisational stressors and organizational citizenship behaviors. *International Journal of Organizational Analysis.*

Kasser, T., & Ryan, R. M. (1996). Further examining the American dream: Differential correlates of intrinsic and extrinsic goals. *Personality And Social Psychology Bulletin,* 22(3), 280-287.

Katz, D., & Kahn, R. L. (1978). The social psychology of organizations (Vol. 2, p. 528). New York: Wiley.

Kurtessis, J. N., Eisenberger, R., Ford, M. T., Buffardi, L. C., Stewart, K. A., & Adis, C. S. (2017). Perceived organizational support: A meta-analytic evaluation of organizational support theory. *Journal Of Management*, 43(6), 1854-1884.

Laguerre, R. A., & Barnes-Farrell, J. L. (2025). Bringing self-determination theory to the forefront: Examining how human resource practices motivate employees of all ages to succeed. *Journal of Business and Psychology*, *40*(1), 1–37.

Liu, H., Harris, K. M., Weinberger, S., Serxner, S., Mattke, S., & Exum, E. (2013). Effect of an employer-sponsored health and wellness program on medical cost and utilization. *Population Health Management,* 16(1), 1-6.

Luthans, K. W., Luthans, B. C., & Chaffin, T. D. (2019). Refining Grit in Performance: The Mediational Role of Psychological Capital. *Journal of Academic Management Education,* 43(1), 35-61.

Madhuchandra, M. K., & Srimathi, N. L. (2016). Psychological Well-being among Doctors and Nurses: A Comparative Study. *The International Journal of Indian Psychology,* 3(4), 203-210.

Martela, F. (2025). Well-being as having, loving, doing, and being: An integrative organizing framework for employee well-being anchoring self-determination theory. *Human Relations*, *78*(1), 45–68.

Nawi, N. C., Ismail, M., Ibrahim, M. A. H., Raston, N. A., Zamzamin, Z. Z., & Jaini, A. (2016). Job Satisfaction among academic and non-academic staff in public universities in Malaysia: A review. *International Journal of Business and Management,* 11(9), 148-153.

Niemiec, C. P., Ryan, R. M., & Deci, E. L. (2009). The path taken: Consequences of attaining intrinsic and extrinsic aspirations in post-college life. *Journal Of Research In Personality*, 43(3), 291-306.

Nunally, J. C., & Bernstein, I. H. (1978). Psychometric theory.

Nunes, P. M., Proença, T., & Todaro, M. E. C. (2023). A systematic review on well-being and ill-being in working contexts: Contributions of self-determination theory. *Personnel Review*, *53*(2), 375–393.

O'Driscoll, M. P., Brough, P., Timms, C., & Sawang, S. (2010). Engagement with information and communication technology and psychological well-being. In New developments in theoretical and conceptual approaches to job stress. Emerald Group Publishing Limited.

Payne, J., Cluff, L., Lang, J., Matson-Koffman, D., & Morgan-Lopez, A. (2018). Elements of a workplace culture of health, perceived organizational support for health, and lifestyle risk. *American Journal of Health Promotion,* 32(7), 1555-1567.

Portoghese I, et al., Burnout and Workload Among Health Care Workers: The Moderating Role of Job Control,
Safety and Health at Work (2014), http://dx.doi.org/10.1016/j.shaw.2014.05.004

Purohit, B., & Bandyopadhyay, T. (2014). Beyond job security and money: driving factors of motivation for government doctors in India. *Human Resources For Health,* 12(1), 1-13.

Ronald, J. B., Simon, L. D., & Lisa, F. (2013). Part-time versus full-time work: An empirical evidence-based case of nurses in Spain. Evidence-based HRM: A global forum for empirical scholarship, Vol. 2 (2).

Burke, J., Spence, J.T., and Robbins, A. S. (2012). Driven to Work and Enjoyment of Work: Effects on Managers' Outcomes." *Journal of Management*, 38 (5), 1655–1675.

Randolph, D. S. & Johnson, S.P. (2005). Predicting the effects of extrinsic and intrinsic job satisfaction factors on recruitment and retention of rehabilitation professionals. Journal of Healthcare Management, 50(1),

Ryff, C. D. (1989). Happiness is everything, or is it? Explorations on the meaning of psychological well-being. *Journal Of Personality And Social Psychology*, 57(6), 1069.

Ryff, C. D., & Keyes, C. L. M. (1995). The structure of psychological well-being revisited. *Journal of Personality and Social Psychology,* 69(4), 719

Ryff, C. D., & Singer, B. (1998). The role of purpose in life and personal growth in positive human health. Lawrence Erlbaum Associates Publishers.

Ryff, C. D., Radler, B. T., & Friedman, E. M. (2015). Persistent psychological well-being predicts improved self-rated health over 9–10 years: Longitudinal evidence from MIDUS. *Health Psychology Open*, 2(2), 2055102915601582.

Sagone, E., & De Caroli, M. E. (2014). Relationships between psychological well-being and resilience in middle and late adolescents. *Procedia-Social and Behavioral Sciences,* 141, 881-887.

Seifert, U. (2005). Entropy production along a stochastic trajectory and an integral fluctuation theorem. *Physical Review Letters*, 95(4), 040602.

Sekaran, U. (2006). *Research methods for business: A skill-building approach* (4th ed.). John Wiley & Sons.

Sheldon, K. M., & McGregor, H. A. (2000). Extrinsic value orientation and "the tragedy of the commons". *Journal Of Personality*, 68(2), 383-411.

Sireno, S., Papa, F., Nocito, M., & Meneghini, I. (2020). Basic psychological needs' antecedents and outcomes: A contexts analysis from a Self-Determination Theory perspective. *Journal of Clinical & Developmental Psychology*, 2(3).

Slemp, G. R., & Vella-Brodrick, D. A. (2014). Optimising employee mental health: The relationship between intrinsic need satisfaction, job crafting, and employee well-being. *Journal of Happiness Studies,* 15(4), 957-977.

Spector, P. E. (1997). Job satisfaction: Application, assessment, causes, and consequences (Vol. 3). Sage Publications.

Su, R., Tay, L., & Diener, E. (2014). The development and validation of the Comprehensive Inventory of Thriving (CIT) and the Brief Inventory of Thriving (BIT). *Applied Psychology: Health and Well-Being*, 6(3), 251-279.

Van Dierendonck, D. (2004). The construct validity of Ryff's Scales of Psychological Well-being and its extension with spiritual well-being. *Personality And Individual Differences*, 36(3), 629-643.

Vera, M., Martínez, I. M., Lorente, L., & Chambel, M. J. (2016). The role of co-worker and supervisor support in the relationship between job autonomy and work engagement among Portuguese nurses: A multilevel study. *Social Indicators Research,* 126(3), 1143-1156.

Weiss, D. J., Dawis, R. V., & England, G. W. (1967). Manual for the Minnesota satisfaction questionnaire. Minnesota studies in vocational rehabilitation.

Wright, P. J., Kim, P. Y., Wilk, J. E., & Thomas, J. L. (2012). The effects of mental health symptoms and organizational climate on intent to leave the military among combat veterans. *Military Medicine,* 177(7), 773-779.

Wright, T. A., & Cropanzano, R. (2000). Psychological well-being and job satisfaction as predictors of job performance. *Journal Of Occupational Health Psychology*, 5(1), 84.

https://malaysiahealthcare.org/