

## **Impact of Nurses' Personality on Patients' Satisfaction; an Occupational Focus on Spirituality at work as Moderator**

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### **Abstract**

*This study reveals the dyadic relationship between nurse and patient in health care sector of Pakistan. The patients' satisfaction in terms of nurses' treatment was examined for in-depth analysis of dyadic relationship. Nurses' personality traits and spirituality at work towards their patients was examined and data was collected from 166 nurses and their corresponding patients. Findings indicate that nurse' personality traits results in patients' satisfaction. Contrary to the belief that spirituality at work does not moderate the relationship between personality traits and patients' satisfaction. Implications and future research for health care sector was also discussed.*

**Keywords:** Personality Traits, Patients' Satisfaction, Spirituality at Work

The research on personality is as old as human's psychology itself; and researchers continue to deliberate implication of individual's characteristics on predicting behavior (Epstein & O'Brien, 1985). Scholars continue to investigate the antecedents of individuals' behavior through traits perspective for better outcomes at workplace in particular and life in general (Rotter, 1954). The studies by Dudycha (1936) investigated the generality of individuals' behavior across situations. Such investigations fueled the debate about the consistency of personality traits over predicted behaviors by trait theorists (Allport, 1931) or to consider behaviors as situational bound by situationists (Thorndike, 1906). The significance of personality traits on the basis of individual differences was questioned by researchers due to the impact of situation on individuals' behavior. Raja et al., (2004) argued that further research needs to be carried out on personality traits for better prediction of individual behaviors across situations. However, researchers endorsed the unified taxonomy of personality through the utilization of Big Five personality dimensions (John & Srivastava, 1999).

Since 1980s till present several reviews and Meta-analysis conducted by different researchers endorsed the consistency of big five model of personality and its impact on diverse job related outcomes (Judge et al., 2002). McCrae (1987) argued that personality traits manage the tendencies to be extraversion, neuroticism and so on, the way individuals behave requires regulation of their personality traits for attaining satisfaction of own-self and others in diverse situations. The

assessment of personality traits by own-self are more sensitive in jobs relating to customer satisfaction and care (Farrell, Souchon & Furden, 2001). In servicing sector, the way employee manage his/her personality traits depict behaviors which influence feedback mechanisms of customers' satisfaction. Bellou (2009) argued that service delivery is crucial in many sectors but health care sector attains much attention due to critical needs of patients in diverse situations which could lead to improve quality standards of hospital. Therefore, service providing ability of nurses in accordance to their personality traits was emphasized by researchers in health care sector (Bruce, Bowman & and Brown, 1998).

The theory of human caring (Watson, 1979, 1985) provides the basis to examine nurses' caring behavior in harmony to their personality traits for achieving patients' satisfaction across situations. Watson (1985) address caring as a personality driven behavior originated by the provider and ended at certain level of receivers' satisfaction. Ozer and Benet-Martinez (2006) argued that in order to handle behaviors in diverse situations the theoretical underpinning of nurses big five personality traits' influence on patients' satisfaction needs to be investigated. Researcher; (Watson, 2003; Welch, 2010) emphasized on the examination of the relationship between big five personality traits of nurses and patients' satisfaction for appropriate prediction of behaviors in varied situations. Although developed countries examined patients' satisfaction but underdeveloped country like Pakistan hardly consider patients' satisfaction affected by nurses' personality traits.

The association between big five personality traits of nurses and patients' satisfaction is pertinent in health care sector but the influence of situation on personality traits reveals unpredicted behaviors. Therefore, research on contextual variables needs to be explored in making inferences about personality-outcomes relationship at occupational level (Funder, 2001). Tett and Guterman (2000) asserted that factors related to task environment form discrete context, which can influence personality-outcome relationships for desired satisfaction. In attaining patients' satisfaction in health care sector the interactionist's perspective stimulates to embrace spirituality at work (Deldado, 2005). The Job Characteristic Model (JCM) by Hackman and Oldham (1976) signifies the need to inculcate spirituality at work (task context) to motivate individuals to perform better through meaning full features of their job.

Hayden, Barbuto and Goertzen (2008) explained that spirituality at work refers to gain inner experience through behavioral analysis, finding meaning in work and exploring a sense of connectedness with others. Servan-Schreiber (2003) emphasized on the need of spirituality at work for nurses to meet expectations of patients, resulting in patients' satisfaction. In nursing research the identity and reputation of nurses has been keenly focused due to diverse nursing standards, spiritual concerns and service delivery patterns in different health care settings (Emblen &

Halstead, 1993). The socio analytic theory (Hogan, 1983) provides basis for understanding spirituality at work coupled with personality traits. Hogan (1986) stated that individuals work hard in life to convert their identity into desired reputation. Therefore, the identity of nurses supported by patients, motivate them to achieve desired reputation by realizing their job dynamics in terms of inner life, meaningful work and sense of community (McGlone, 1990). This perspective stimulates to inculcate spirituality at work for nurses to achieve satisfaction of patients. Thus, the moderating effect of spirituality at work between personality traits of nurses and patients' satisfaction is examined in health care sector of Pakistan.

In addition to aforesaid it is pertinent to state that in Pakistan the reputation of public sector hospitals has always been questioned at national and international level for attaining patients' satisfaction (Akhter et al., 2000). Despite the presence of certain monitoring bodies in Pakistan why nurse to patient ratio is insufficient, why nurses role is doubtful as it limits at hospital level, why nurses responsibility has not been acknowledged in public sector hospital and why nurses profession is least opted; stimulated the need to investigate nurses personality and spiritual aspects for attaining satisfaction of patients. The controversies regarding nurses' appropriate compensation, grading criteria, uncertain educational roadmap, resources allocation and training limitations etc; which creates collision in accomplishing patients' satisfaction needs to be enquired by acknowledging dyadic relationship between nurses and patients in unique context of Pakistan where limited studies exist on the issue.

### **Literature Review**

#### **Big-Five Personality Traits and Patients' Satisfaction**

The appropriate understanding of the word 'Personality' could be analyzed by experiencing variety of behaviors at workplace due to interaction of distinct individuals (Epstein & O'Brien, 1985). The research on personality dispositions was started in 1920s with the work of Hartshorne, May, and colleagues - to assert a broad trait of personality to predict behaviors but such broad taxonomy of personality serves as a paradox (Hartshorne & May, 1928; Hartshorne, May, & Maller, 1929). Later on researchers argued that consistent behaviors are irrational because of the influence of diverse situations on personality traits (Mischel, 1968). The essence of situational context to foresee behaviors through big five personality traits gain endorsement by researchers to advance the study on personality traits and outcomes (Tett & Guterman, 2000). The concept of interactionists to focus on situations in predicting behaviors against the trait theorists approach to consider individual difference is gaining interest by scholars. Thus, following big five personality traits are encouraged to generate novel outcomes by focusing

more on situational variables to strength or weaken the personality and outcome relationship (Tett & Burnett, 2003)

Rusting and Larsen (1997) explained that extraverts are energetic, sociable, predictable and confident, which supports them to be optimistic in all phases of life. Extraverts took life events as a positive motivation to strive for satisfaction of self and others. Jang, Livesley and Vernon (1996) asserted that nurses with high extraversion gain lessons from negative events and enthusiastic to improve performance at workplace. The satisfaction of patients has been acknowledged by nurses who possess extravert trait. They treat patients with care and uphold the caring behaviors in challenging circumstances (Darby & Daniel, 1999). Extravert nurses develop good interpersonal relationship with patients and depict theory of human caring by achieving patients' satisfaction (Watson, 2008). Thus, nurses with extravert personality trait apply efforts to attain satisfaction of patients and perform better in diverse situations.

**H1:** Extraversion personality dimension is positively associated with patients' satisfaction.

The responsible, gentle, obedient and submissive nature of conscientious individuals guides them to win satisfaction of others (Zyphur et al., 2008). In order to be star performer in every aspect of job conscientious individuals manage their work activities in appropriate manner. According to Block (2001) individuals with accountable point of reference strive to solve problems at work and struggle hard to achieve satisfaction of others around. Nurses who are conscientious are good in treating stressful patients and do not let any worst experience to affect their performance at work. The commitment with work and comply with rules and regulations are uphold by nurses who are conscientious (Lin, Chiu & Hsieh, 2001). Hence, patients' satisfaction could be high when conscientious personality trait is applied by nurses.

**H2:** Conscientiousness personality dimension is positively associated with patients' satisfaction

Neurotic personality trait explains fearfulness, nervousness, helplessness and uneasiness in individuals which eventually results in unhappiness and comfortless life. Such individuals perceive satisfaction as a super factual phenomenon and consider themselves to be misfit in attaining satisfaction of others (Roberts, Wood & Smith, 2005). In stressful, challenging and demanding phases at work neurotic individuals felt is difficult to solve problems and seeks other individuals to fix their problems (Roberts, Caspi & Moffitt, 2003). Neurotic nurses treat patients' opinion as personal attack and get nervous with painful condition of patients. Generally, nurses with high neurotic personality trait are less likely to gain patients' satisfaction (Ehrhart, 2006). Thus, based on above said findings this study proposes the following hypothesis:

**H3:** Neuroticism personality dimension is negatively associated with patients' satisfaction.

The flexible, adaptable, interactive, trustworthy, supportive and empathetic characteristic highlights the agreeable personality trait of an individual (Costa & McCrae, 1988). The caring behavior is accepted by nurses who possess agreeable personality trait and they are eager to achieve satisfaction of patients (Bellou, 2009) Agreeable nurses are curious about mental and physical health and seek to convert ill-being of patients into well-being by meeting satisfaction level of patients (Chien, Chou & Hung, 2008). The sympathetic, tolerant and kind behavior of nurses due to agreeable personality trait helps them to sustain the satisfaction level of patients in diverse situations:

**H4:** Agreeableness personality dimension is positively associated with patients' satisfaction

According to Salgado (1997) an open personality trait explained the innovative, refined, intellectual and superior qualities in individual. Such individuals would like to experience all stages of life and won't be disappointed from failures in life. Their desire to excel is phenomenal and provides motivation to dissatisfied individuals. Nurses who possess the trait of openness to experience are broad minded and creative. They are more inclined to implement alternative ways to serve a patient with quality standards (Needleman et al., 2002). Nurses who are high on openness to experience view stressful patient encounters as opportunity to learn and grow (Lanjananda & Patterson, 2009). They are more active to win patients' satisfaction in challenging situations.

**H5:** Openness to experience personality dimension is positively associated with patients' satisfaction.

### **Moderating Role of Spirituality at Work between Personality Traits and Patients' Satisfaction**

Individual's adjustment in challenging workplace environment signifies the need of spirituality at work (Treloar, 2002). The decline of principals of neighborhood, public groups and extended family gatherings stimulates individual's workplace to be considered as primary source of community and contributes in considering the work as meaningful. Researchers argued that spirituality at work plays a vital role in self-regularization (Cash & Gray, 2000) which eventually provides better satisfaction to self and others. In health care settings spirituality acts as a primary source of better health, as nurses' spirituality at work inculcates satisfaction in their patients (Harrison, 1993). The spiritual belief to be connected with a community enhances meaningful work and provide basis to govern personality traits (Kim et al., 2000). Thus, spirituality at work enhances personality traits and develops feeling of less estrange in diverse challenging health care settings. The nurses' sense of community, inner life satisfaction and meaningfulness in work (Emblen & Halstead, 1993) is inculcated through spirituality at work which is anticipated for providing satisfaction to patients by acknowledging personality traits as under:

The personality trait of being extravert was marked as socially engaged individuals. They enjoy interacting with other individuals, indulge in problem solving processes, broad minded and gain experiences to tackle other individual's traits (Rusting & Larsen, 1997). Blegen, Goode and Reed (1998) stated that extraverts seek to attain satisfaction of others by acknowledging the worth of spirituality at work. The meaningfulness of work by upholding the spiritual aspects of job enable extravert nurses to label and manage patients' level of satisfaction.

**H6:** Spirituality at work moderates the relationship between extraverts and patients' satisfaction

Conscientious individuals aim to achieve against measures and expectations. Their determination, discipline and submissiveness able them to regulate, control and direct spiritual aspects as per changing situations (Block, 2001). Nurses encompassed with conscientious trait pursue planned activities in challenging situation and avoid spontaneous behaviors. The balanced behavior of conscientious nurse has been derived through in-depth assessment of spiritual nature of work which leads them to acquire satisfaction of patients (Robertson & Callinan, 1998). Thus, detached incidents at work have been reviewed by conscientious nurses and help them to gain supplementary satisfaction of patients.

**H7:** Spirituality at work moderates the relationship between conscientiousness and patients' satisfaction

Neurotic individuals tend to feel instability through anger, stress and depression which stimulates the need to acquire spirituality at work (Costa & McCrae, 2006). As per Sleutel (2000) the nurses scoring high in neuroticism feel threatening even in ordinary situations, where as low scoring in neuroticism are less easily distress and react through positively at workplace. According to Judge and Wantabe (1993) the deficient satisfaction in achieving goals of life is correlated with high neuroticism and signifies the need of spiritual undertaking for attaining and experiencing satisfaction. Hence, nurses with neurotic trait experience reciprocal affect of spiritual features of work and find it hard to attain satisfaction of patients.

**H8:** Spirituality at work moderates the relationship between neuroticism and patients' satisfaction

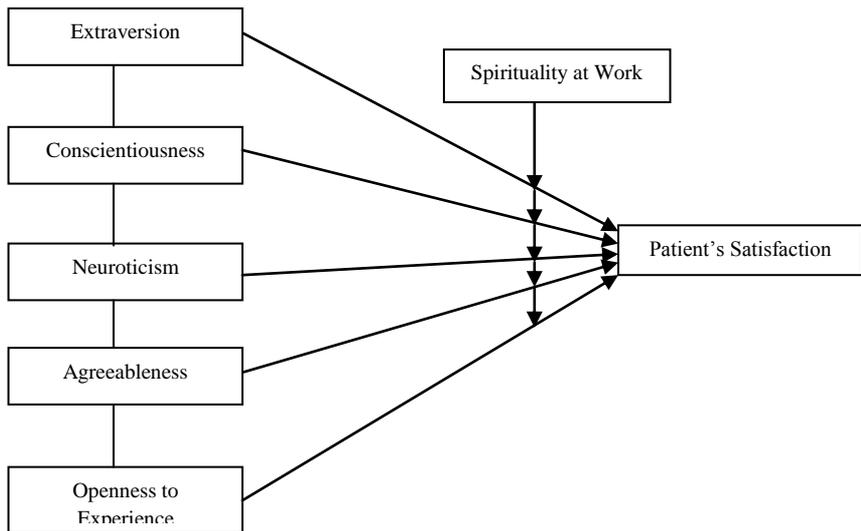
The individual differences and synchronization of emotions for social harmony has been dealt by agreeable individuals. Nurses with agreeable trait can easily get along with patients and able to tolerate stressful patients (Schmit et al., 2007). The generosity, courtesy, trustworthiness and compassion executed by agreeable nurse guides them to maintain spiritual nature of job to achieve patients' satisfaction (Donley, 1991). Thus, nurses with high agreeable personality trait are willing to align themselves with dissimilar patients and recognize the essence of spirituality at work.

**H9:** Spirituality at work moderates the relationship between agreeableness and patients’ satisfaction

The individuals experiencing unusual working styles, unstructured communication and curiosity in affairs of life is highlighted by openness to experience personality trait (McCrae, 1987). Openness to experience trait in nurses helps them to adopt unconventional ways to deal with patients and they tend to explore opportunities in tough situations (Vitello-Cicciu, 2002). The unrestrained nature of nurses with openness to experience trait guides them to explore spirituality at work by experiencing sense of community, inner life satisfaction and meaningfulness. Watson (2006) enlightened that the ability to explore new avenues lead nurses with openness to experience trait to handle different satisfaction levels of patients with dissimilar spiritual reactions.

**H10:** Spirituality at work moderates the relationship between openness to experience and patients’ satisfaction

### **Research Model**



### **Research Methodology**

The quantitative research method was pursued by conducting relational survey to obtain feedback from nurses and their patients through questionnaires (Kerlinger & Lee, 2000).

### **Instruments**

All items in the questionnaire were responded by using five-point Likert response scale, where 1 corresponds to “strongly disagree” and 5 corresponds to “strongly agree.” The reliable and validate questionnaires were adopted and adapted because of worth change in cultural traits between developed countries and

developing country like Pakistan. The personality dimensions of nurses was measured from John and Srivastava, (1999); 44 items which includes subscales: extraversion, agreeableness, openness to experience, neuroticism, and conscientiousness have 8, 9, 10, 8 and 9 items respectively. The spirituality at work was measured using 17 items from Petchsawang and Duchon (2012) and patients' satisfaction was measured using 25 items developed by Hinshaw and Atwood (1982).

### **Population**

The selected population for this study was registered nurses serving in the public sector hospitals of Pakistan and patients being hospitalized due to their dread disease treatment.

### **Sample and Data Collection**

A representative sample of major public sector hospitals i.e; Pakistan Institute of Medical Sciences (PIMS), Islamabad, Benazir Bhutto Hospital, Rawalpindi, Allied Hospital, Faisalabad, Civil Hospital, Karachi, Ayub Teaching Hospital, Abbottabad and Government Hayatabad Medical Complex, Peshawar was selected because it is not possible to study all hospitals due to geographical dispersion and large population. The judgmental sampling was applied on the representative sample so that targeted nurse and subsequent patient were selected. Questionnaires were distributed to 200 nurses and corresponding patients, respectively. The duly completed response was received from 166 nurses and corresponding patients in above said public sector hospitals by pursuing the following steps:

1. Registered nurses (RN) performing duties as a regular employee in the hospital were approached through medical superintendent (MS).
2. The duty roster of RN nurse treating respective patient on regular intervals was considered.
3. Consent of RN nurse was obtained to provide valued feedback on questionnaire.
4. The hospitalized patients who are under treatment of dread disease eg; allergy, cancer, diabetes, asthma, organ transplant etc, was targeted.
5. The patient hospitalized for few days and being treated by deployed nurse as per duty roster was considered.
6. Consent of hospitalized dread disease patient was obtained to seek their valued feedback regarding deployed nurse behavior.

7. The particular nurse treat specific patient for few days was insured through duty schedule of nurse duly endorsed by nursing administration section.
8. The permission from concerned quarters of hospital was obtained before collecting data from nurses and their respective patients.
9. In order to get honest and unbiased information from the respondents, the questionnaires were kept anonymous.

**Findings**

**Table 1. Demographics of nurses:**

Description		Frequency/% age
Qualification	Diploma	91
	BSN Degree	63
	M.Sc Degree	12
	MPhill Degree	00
Age (in years)	18-24	43
	25-31	67
	32-38	33
	39 & above	23
Marital Status	Married	117
	Un-married	49
Gender	Male	23
	Female	143
Organizational Tenure (in years)	1-5	71
	6-10	33
	11-15	39
	16 & above	23
		166

*Demographics of patients:*

Description		Frequency/% age
Qualification	Intermediate	67
	Graduation	59
	Masters	33
	MPhill & above	07
Age (in years)	18-24	23
	25-31	31
	32-38	47
	39 & above	65
Marital Status	Married	144
	Un-married	22
Gender	Male	97
	Female	69
Hospitalized period (in weeks)	1-4	109
	5-8	51

9-12	04
13-16 & above	02
	<b>166</b>

**Table 2.***Correlation analysis and reliabilities of measures (in parentheses)*

	1	2	3	4	5	6	7
Extra	(0.79)						
Cons	0.134**	(0.81)					
Neur	0.330*	0.200**	(0.87)				
Agre	0.233**	0.358*	0.158**	(0.84)			
Open	0.151*	0.590**	0.339*	0.220**	(0.74)		
Pat	0.427**	0.333**	0.415*	0.385*	0.106**	(0.83)	
Satis							
SpWor	0.393**	0.211*	0.391**	0.451*	0.322*	0.105*	(0.77)

*Extra =Extraversion, Cons = Conscientiousness, Neur =Neuroticism, Agre =Agreeableness, Open =Openness to experience, Pat Satis =Patients’ satisfaction, SpWor =Spirituality at work, \*p<.05, \*\*p<.01, n= 166,*

**Table 3.***Regression analysis for outcomes*

Predictors	Patients’ Satisfaction		
	$\beta$	R <sup>2</sup>	$\Delta R^2$
Personality traits			
Step 1			
Control Variables		0.236	
Step 2			
Extra	0.350**		
Cons	0.222**		
Neur	- 0.130*		
Agre	0.421**		
Open	0.227**	0.340	0.104**

*Control Variables: qualification, age, gender, marital status and tenure, n=166, \*p<.05, \*\*p<.01.*

**Table 4.***Moderated regression analysis*

Predictor	Patients’ Satisfaction		
	$\beta$	R <sup>2</sup>	$\Delta R^2$
Personality traits			
Step 1			
Control Variables		0.286	
Step 2			
Extra	0.320**		
Cons	0.199**		
Neur	-0.118*		
Agre	0.321**		
Open	0.187**		
SpWor	0.201**	0.371	0.085**

Step 3

Extra × SpWor	0.320		
Cons × SpWor	0.199		
Neur × SpWor	0.118		
Agre × SpWor	0.321		
Open × SpWor	0.187	0.375	0.004

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*Control Variables: qualification, age, gender, marital status and tenure, n=166, \*p<.05, \*\*p<.01.*

### Discussion

The demographics of nurses' (Table 1) shows that most of them have entry level qualification, middle aged, females, married and spend few years in public sector hospitals. The demographics strengthen the annual assessment reports of Pakistan Nursing Council that due to high intake of females in diploma program of nurses results in becoming registered nurse which leads to secure job in respective hospitals to support family members in challenging economic conditions of Pakistan. The demographics of patients' (Table 1) depicts that they possessed undergraduate education, old aged, males, married and had few weeks hospitalization experience. The United Nations (UN) Human Development Report 2013 endorsed that strength of married male patients with adequate qualification prefer treatment in public sector hospitals of Pakistan due to health issuance coverage and economical charges.

Apart from demographics the Table 2 presents the correlation between variables which is aligned with findings of the studies (Van Leeuwen & Cusveller, 2004), that spirituality acts as a part of personality to attain satisfaction of others. The Table 3 and Table 4 supported the dyadic relationship between nurse and patient by depicting the strong association between personality traits of nurses and patients' satisfaction. Though spirituality at work is anticipated in nurses' profession, this anticipation plays no role in moderating the relationship between personality traits of nurses and patients' satisfaction.

In general good support was found for first five hypotheses to affect patients' satisfaction with personality traits of nurses (e.g. extraversion, conscientiousness, neuroticism, agreeableness and openness to experience). The public sector hospitals in Pakistan are over burden with patients due to uncertain incidents of natural disasters, terrorist attacks, doctor/nurses' strikes and poor health facilities. The increasing number of patients augments nurses'

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challenge to respond each patient with care. However, nurses in Pakistan seem to meet this challenge by inculcating caring behavior through personality traits to convert patients' ill-being into well-being. The findings are aligned with theory of human caring by Watson (1979,1985) which provides the basis to examine the dyadic relationship between nurses and patients due to the execution of caring behavior by nurses towards patients. The findings are also associated with the argument of Wolf, Miller and Devine (2003) that personality traits need to be recognized in spreading caring behavior during diverse situations to achieve satisfaction of others.

Although the patients' satisfaction is affected by spirituality at work of nurses (Donley,1991) but contrary to expectation the moderating role of spirituality at work between personality traits and patients' satisfaction is not supported by this study. It was assumed like other health care sectors of developed countries that nurse in developing country of Pakistan also consider spirituality at work, which can influence personality traits and patients' satisfaction relationship. But the results signify that nurses with awareness of personality traits does not gain patients' satisfaction because of spirituality at work rather there are other reasons which explain the potency of the relationship. One feasible explanation can be made in terms of conservation of resource theory (Hobfoll, 1989), a nurse pursuing his/her profession in attainment of desired resources which eventually drive them to manage personality traits for gaining patients' satisfaction, regardless of applying spiritual aspects of their profession at work.

According to Hobfoll and Freedy (1993), individuals strive to develop, maintain and protect resources. Individuals feel insecure when they lost such resources. This develops a cycle where resources are constantly replenished and utilized. The workplace duties threaten one's resources and extensive experience to such duties will result in assorted behaviors. The strikes of nurses due to insufficient compensation, regularization of appointments, inadequate educational roadmap and harassment at workplace in public sector hospitals of Pakistan indicates resources conservation. The destabilized economic conditions in underdeveloped country stipulate nurses to gain patients' satisfaction; despite considering their commitment level towards hospital rather they support union commitment to get their rights. Most of the nurses during their informal discussion point out that nurses mold their traits of personality to attain patients' satisfaction

due to cynical perception towards health care regulations and depict more commitment towards their unions. This is supported by the studies (e.g. Festinger, 1957; Robinson, 1996) that employees less commitment with the organization can be a cause of more commitment with unions and deviant behaviors. Thus, the meaningfulness of work, feeling of sense of community and inner life satisfaction which generate spirituality at work is not recognized by nurses in health care sector of Pakistan.

### **Recommendations**

The findings of the study contribute significantly in our understanding of reasons to achieve patients' satisfaction, nurses' handling of personality traits and non-recognition of spirituality at work in Pakistan where limited knowledge exists about this phenomenon. Following recommendations may help decision makers in health care sector to manage nurses' workplace behaviors on proactive basis to gain patients' satisfaction:

- i. Fulfill promises by regulating nurses' compensation and appointment to gain their organizational commitment rather union commitment.
- ii. Develop action plans for awareness about nurses' education and significance of profession in demanding situations of Pakistan where instability and terrorism affects health care sector as well.
- iii. Securitize each nurse by developing advanced recruitment and selection procedure to insure in-depth implication of spirituality at work.
- iv. Conduct of annual or bi-annual Human Resources Audit to insure accountability at all quarters of hospitals.
- v. Develop strategies to overcome conflicting interests of hospital administration which lead to the establishment of nurses' unions and strikes.

### **Limitations**

Although these findings help all concerned to understand dyadic relationship between nurse and patient in perspective of personality traits, patients' satisfaction and spirituality at work, there are certain limitations which may be addressed by the future researchers. The data was collected from limited sample; a more diverse sample may lead to comprehensive information on the matter. Moreover, other variables affecting dyadic relationship between nurse and patient may provide broad outcomes for health

care sector of Pakistan. Similarly, role of mediating variables in this dyadic relationship may results in various significant outcomes for future researchers.

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