



Comparing Job Satisfaction in Medical and Naturopathic Practice in Laguna, Philippines

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Abstract

Job satisfaction is a critical workforce concern in healthcare because it influences practitioner retention, service quality, and organizational stability. This study compared job satisfaction between medical and naturopathic practitioners in Laguna, Philippines, focusing on satisfaction with the work itself, supervision, and working conditions. Using a descriptive quantitative design, data were gathered from 204 healthcare practitioners composed of 148 medical practitioners and 56 naturopathic practitioners. A modified 10-item Generic Job Satisfaction Scale was used to measure the three dimensions of job satisfaction on a four-point Likert scale. Descriptive statistics summarized respondent profiles and satisfaction levels, while Mann-Whitney U and Kruskal-Wallis tests examined differences across profession, sex, age, educational attainment, and years of service. Results showed that respondents were generally satisfied across all job satisfaction dimensions. Naturopathic practitioners reported higher satisfaction than medical practitioners, and significant differences by profession were found in work itself, supervision, and working conditions. Sex did not significantly differentiate job satisfaction. Age significantly differentiated satisfaction with supervision and working conditions, while educational attainment significantly differentiated all three dimensions. Years of service significantly differentiated satisfaction with work itself and supervision, but not working conditions. The findings suggest that job satisfaction among healthcare practitioners is shaped by professional context and selected demographic factors, particularly profession, education, age, and tenure. Workforce interventions should prioritize supervisory support, role alignment, early-career development, and working-condition improvements, while recognizing the study's limitation as a convenience-sample survey.

Keywords: *job satisfaction; medical practitioners; naturopathic practitioners; healthcare workforce; supervision; working conditions*

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1. Introduction

Job satisfaction remains a central concern in healthcare workforce management because it affects employee retention, work engagement, service quality, and the continuity of care. In healthcare settings, satisfaction is especially important because the work involves sustained interaction with patients, coordination with other practitioners, compliance with institutional procedures, and exposure to physical and emotional demands. When healthcare practitioners experience satisfaction in their work, they are more likely to remain committed to their roles, maintain professional motivation, and contribute to stable service delivery. Conversely, low satisfaction may contribute to absenteeism, turnover intention, reduced morale, and weakened organizational performance.

In the Philippine healthcare context, the issue of job satisfaction has become more urgent because of continuing concerns about healthcare worker migration and workforce retention. The movement of Filipino healthcare professionals abroad has been linked to better compensation, improved working conditions, stronger career

opportunities, and more favorable professional environments. Data on overseas Filipino workers indicate continued labor migration, including among healthcare-related occupations, which has implications for the availability of skilled practitioners in the country (Philippine Statistics Authority, 2023). This situation raises the importance of understanding the factors that shape satisfaction among healthcare workers who remain in local practice. Related workforce analyses likewise emphasize that Philippine health workforce challenges cannot be understood only as shortages in headcount but must also be linked to migration pull, pipeline fragility, maldistribution, and competency-readiness gaps (Atento, Quinto, & Espelita, 2025).

At the same time, the healthcare field has become more diverse with the growing visibility of traditional, complementary, and naturopathic approaches. In the Philippines, the Philippine Institute of Traditional and Alternative Health Care has promoted the development and integration of traditional and alternative healthcare practices into the national health system (Philippine Institute of Traditional and Alternative Health Care, n.d.). This development reflects the increasing public interest in holistic and integrative healthcare options. Naturopathic practice differs from conventional medical practice in several respects, including treatment philosophy, practitioner-patient relationship, degree of autonomy, and work setting. These differences may influence how practitioners experience satisfaction with the work itself, supervision, and working conditions.

Job satisfaction is multidimensional. It is not limited to compensation or general workplace contentment but includes the nature of the work, the quality of supervision, and the conditions under which work is performed. Satisfaction with the work itself is associated with meaningful tasks, skill use, autonomy, and a sense of professional fulfillment. Satisfaction with supervision involves perceived support, fairness, guidance, recognition, and the quality of relationships with supervisors. Satisfaction with working conditions includes the physical and social environment, job security, relationships with colleagues, workload, and compensation-related perceptions. These dimensions are especially relevant in comparing medical and naturopathic practitioners because the two groups may operate under different organizational structures, regulatory expectations, and professional cultures.

Although job satisfaction has been widely studied in healthcare, fewer local studies have directly compared conventional medical practitioners and naturopathic practitioners in the Philippine setting. This comparison is important because both groups contribute to healthcare delivery, yet they may experience different sources of satisfaction and dissatisfaction. Medical practitioners often work in structured and protocol-driven environments, while naturopathic practitioners may experience greater flexibility, closer patient relationships, and different forms of professional autonomy. Understanding these differences can help healthcare organizations, wellness centers, and related institutions develop more targeted strategies for improving retention, supervisory support, role alignment, and workplace conditions.

This study therefore examined job satisfaction among medical and naturopathic practitioners in Laguna, Philippines. It focused on three dimensions of job satisfaction: work itself, supervision, and working conditions. The study also considered whether job satisfaction differed according to profession and selected demographic characteristics, including sex, age, educational attainment, and years of service. The revision follows the study's reported results as the controlling basis for all interpretations and corrections.

This study aimed to compare job satisfaction in medical and naturopathic practice in Laguna, Philippines. Specifically, it sought to: (1) describe the demographic profile of the respondents in terms of profession, age, educational attainment, years of service, and sex; (2) assess the level of job satisfaction of medical and naturopathic practitioners in terms of work itself, supervision, and working conditions; (3) determine whether significant differences exist in job satisfaction when respondents are grouped according to profession, sex, age, educational attainment, and years of service; and (4) propose recommendations for improving job satisfaction among healthcare practitioners based on the study findings.

2. Review of Related Literature

2.1 Job Satisfaction as a Multidimensional Workplace Construct

Job satisfaction is commonly treated as a multidimensional construct that reflects an employee's evaluation of the job, the work environment, supervisory relationships, compensation, recognition, and opportunities for development. In this study, job satisfaction is approached through three dimensions: work itself, supervision, and working conditions. This framing is consistent with Herzberg's Motivation-Hygiene Theory, which distinguishes between factors that create positive satisfaction, such as achievement, recognition, responsibility, and growth, and hygiene factors that prevent dissatisfaction, such as working conditions, supervision, policies, and compensation (Herzberg, 1966). The same logic supports the use of a job satisfaction scale that captures both intrinsic and contextual features of work rather than treating satisfaction as a single general feeling.

The literature also emphasizes that job satisfaction is linked to how employees experience the design and meaning of their work. Work that allows autonomy, task significance, skill use, and feedback tends to support motivation and satisfaction (Parker, 2014; Oldham & Hackman, 2018). Recent work on job crafting similarly argues that employees experience greater satisfaction when they can modify or align their tasks with their interests, abilities, and professional identity (Zhang & Parker, 2019). These perspectives are relevant to healthcare because practitioners often differ in the degree of autonomy, task variety, and professional discretion available to them. For medical and naturopathic practitioners, satisfaction may therefore depend not only on general employment conditions but also on how strongly the daily work aligns with their professional values, expertise, and patient-care philosophy. Evidence from another demanding occupational setting also suggests that job satisfaction is shaped not only by external job conditions but also by psychological resources, as present-positive time attitude and delayed gratification were found to predict job satisfaction among marine technical employees (Wang, 2026).

2.2 Work Itself, Supervision, and Working Conditions

The dimension of work itself refers to the nature of tasks, responsibilities, and professional activities performed by employees. Work that is meaningful, challenging, and aligned with personal competence tends to enhance job satisfaction because it allows employees to experience accomplishment and professional relevance (Sedarmayanti, 2017). In healthcare settings, this is important because practitioners' satisfaction may depend on whether their skills are fully used and whether their work enables direct patient impact.

Supervision is another critical dimension of job satisfaction. Effective supervision provides guidance, support, fairness, recognition, communication, and role clarity. Leadership studies suggest that transformational, ethical, and servant leadership approaches are associated with better employee attitudes because they emphasize support, trust, communication, and empowerment (Eva et al., 2019; Hoch et al., 2018). In public and healthcare organizations, supportive leadership has been linked to higher motivation, stronger performance, and improved job satisfaction (Mikkelsen et al., 2017). Supervision is especially relevant in healthcare because practitioners operate in high-responsibility environments where clinical coordination, workload management, and emotional support can affect both worker satisfaction and service delivery. In the broader health professions context, leadership and institutional support have similarly been framed as central mechanisms for balancing quality expectations, psychosocial well-being, workload pressures, and professional development needs (Bermido et al., 2025).

Working conditions include the physical, organizational, and social environment in which employees perform their duties. Literature on job satisfaction identifies workplace safety, work-life balance, manageable workload, collegial relations, job security, and fair policies as important contributors to satisfaction (Guest, 2017; Bakker & Demerouti, 2017). Flexible work arrangements and supportive organizational cultures have also been associated with more favorable work experiences, particularly when they reduce stress and improve employees' control over work demands (Chen, 2015; Galanti et al., 2021). In healthcare, where work can involve long hours, demanding patient loads, and emotional strain, working conditions become a central determinant of satisfaction and retention.

2.3 Job Satisfaction in Healthcare and Naturopathic Practice

Job satisfaction among healthcare workers is strongly connected with retention, morale, work quality, and professional well-being. Healthcare practitioners face occupational pressures that include workload, administrative demands, patient expectations, emotional labor, professional accountability, and organizational constraints. Studies on healthcare workers show that workload, burnout, workplace support, autonomy, recognition, and professional relationships affect job satisfaction and intention to remain in the profession (Gilles et al., 2014; Dewa et al., 2017; Linzer et al., 2016). Burnout is particularly important because it can reduce job satisfaction and weaken both worker well-being and perceived quality of care (Dewa et al., 2017).

The literature also indicates that satisfaction may differ across healthcare roles and practice environments. Goetz et al. (2020) found differences in job satisfaction between general practitioners and practice staff, with task delegation and responsibility influencing satisfaction. Studies of physicians and other healthcare professionals further suggest that autonomy, work-life balance, supportive management, and role demand are important sources of satisfaction (Shanafelt et al., 2015; Jiang et al., 2021). These issues are directly relevant to the comparison between medical and naturopathic practitioners because the two groups may experience different levels of autonomy, role structure, and institutional control.

Naturopathic practice is often described as more holistic, patient-centered, and autonomy-oriented than conventional medical practice. Literature cited in the original study suggests that naturopathic practitioners may experience satisfaction from strong patient relationships, professional independence, and alignment between work and holistic health values (Wardle et al., 2014; Smith et al., 2017). Integrative and complementary healthcare settings may also allow practitioners to experience greater meaning in their work because patient care is framed around wellness, prevention, lifestyle, and individualized treatment (Harris & Kreitzer, 2014). At the same time, naturopathic practice may face challenges related to recognition, regulatory limits, scope of practice, and institutional acceptance. These tensions make the comparison between medical and naturopathic practitioners important for understanding differentiated sources of job satisfaction. This patient-centered orientation may also be understood in relation to narrative and empathy-based healthcare approaches, where patient experience, trust, communication quality, and interpretive sensitivity are treated as meaningful elements of care quality (Atento, Quinto, Espelita, & San Juan, 2025).

2.4 Demographic Factors and Differences in Job Satisfaction

Job satisfaction may also vary according to demographic and professional characteristics, including age, educational attainment, sex, and years of service. Age has been associated with differences in job expectations and workplace satisfaction. Older employees may report higher satisfaction because they have greater role stability, accumulated experience, stronger workplace relationships, and clearer professional expectations (Zacher & Yang, 2020; Chen et al., 2021). In contrast, younger employees may place greater value on career mobility, feedback, professional growth, and work-life balance, which can affect how they evaluate supervision and working conditions.

Educational attainment may influence satisfaction because education shapes expectations about role alignment, professional recognition, autonomy, and career development. Highly educated workers may experience stronger satisfaction when their skills are used effectively, but may also report dissatisfaction when job tasks do not match their qualifications or when advancement opportunities are limited (Nguyen et al., 2020; Chen et al., 2021). Years of service may operate in a similar way. Early-career employees may need stronger mentorship, clearer supervision, and developmental support, while longer-tenured employees may derive satisfaction from stability, autonomy, recognition, and established professional relationships (Shanafelt et al., 2015; Kalleberg & Marsden, 2019).

Sex differences in job satisfaction have produced mixed findings in the literature. Some studies suggest that women may place greater emphasis on supportive work environments, flexibility, and work-life balance, while men may place greater emphasis on compensation and status-related factors (Yang & Mahoney, 2021). Other studies, however, indicate that sex alone may not significantly explain job satisfaction once workplace conditions, role expectations, organizational support, and professional context are considered (Chen et al., 2021). This makes it

necessary to examine sex alongside other demographic and occupational variables rather than treating it as an isolated determinant.

2.5 Synthesis and Literature Gaps

The reviewed literature shows that job satisfaction is shaped by both intrinsic and contextual factors. The work itself contributes to satisfaction when employees experience meaning, autonomy, skill use, and task relevance (Parker, 2014; Zhang & Parker, 2019). Supervision contributes through support, fairness, recognition, communication, and leadership quality (Mikkelsen et al., 2017; Eva et al., 2019). Working conditions contribute through safety, collegial relations, workload, job security, compensation, and organizational support (Guest, 2017; Bakker & Demerouti, 2017). In healthcare, these dimensions are particularly important because practitioners work under conditions that directly affect patient care, emotional well-being, and retention (Dewa et al., 2017; Goetz et al., 2020).

Despite this literature, there remains limited local evidence comparing job satisfaction between medical and naturopathic practitioners in the Philippine setting. Existing studies discuss healthcare worker satisfaction, physician burnout, workplace support, and naturopathic autonomy, but fewer studies examine how conventional and naturopathic practitioners differ across the specific dimensions of work itself, supervision, and working conditions. The present study addresses this gap by comparing the job satisfaction of medical and naturopathic practitioners in Laguna, Philippines, while also examining whether satisfaction differs according to profession, sex, age, educational attainment, and years of service.

3. Methodology

3.1 Research Design

This study employed a descriptive quantitative research design to compare job satisfaction between medical and naturopathic practitioners in Laguna, Philippines. The design was appropriate because the study aimed to describe the respondents' demographic profile, assess their level of job satisfaction, and determine whether statistically significant differences existed across professional and demographic groupings. The study did not test causal effects; therefore, the findings were interpreted as comparative and descriptive rather than causal.

3.2 Respondents of the Study

The respondents were healthcare practitioners working in Laguna, Philippines. The final sample consisted of 204 respondents, composed of 148 medical practitioners and 56 naturopathic practitioners. Medical practitioners included professionals working in conventional healthcare roles, while naturopathic practitioners included individuals engaged in alternative, holistic, or natural healthcare practice. The final respondent distribution was treated as the controlling basis for the revised article because it is the distribution consistently reflected in the results tables.

The demographic variables considered in the study were profession, age group, educational attainment, years of service, and sex. These variables were used to describe the respondents and to determine whether job satisfaction differed significantly across respondent groups.

3.3 Sampling Technique

The study used non-random convenience sampling. Respondents were selected based on availability, accessibility, and willingness to participate in the study. Although the original thesis text contained inconsistent statements regarding the number of selected medical practitioners, the revised journal version follows the final reported sample of 204 respondents, consisting of 148 medical practitioners and 56 naturopathic practitioners.

3.4 Research Instrument

The study used a modified version of the Generic Job Satisfaction Scale developed by Macdonald and MacIntyre (1997). The original instrument was adapted into a 10-item questionnaire using a four-point Likert scale. The questionnaire measured job satisfaction across three dimensions: work itself, measured through four items; supervision, measured through three items; and working conditions, measured through three items.

Responses were scored using the following scale: 4 for strongly agree, 3 for agree, 2 for disagree, and 1 for strongly disagree. Mean scores were interpreted as follows: 3.50-4.00 as highly satisfied, 2.50-3.49 as satisfied, 1.50-2.49 as dissatisfied, and 1.00-1.49 as highly dissatisfied.

The original paper stated that the modified questionnaire was reviewed by three experts and pilot-tested with 30 respondents. However, the actual reliability coefficient was not reported in the available text. This should be verified before final submission if the pilot-test reliability result is available.

3.5 Data Gathering Procedure

Before data collection, the researchers secured the necessary permission to conduct the study among healthcare practitioners in Laguna. The questionnaire was distributed to qualified respondents who voluntarily agreed to participate. Respondents were informed about the purpose of the study and were assured that their responses would be treated confidentially. Completed questionnaires were collected, checked, encoded, and prepared for statistical analysis.

3.6 Data Analysis

Frequency counts and percentages were used to describe the demographic profile of the respondents. Weighted means were used to determine the respondents' level of job satisfaction in terms of work itself, supervision, and working conditions.

For inferential analysis, the Mann-Whitney U test was used to determine whether job satisfaction differed significantly when respondents were grouped according to profession and sex. The Kruskal-Wallis H test was used to determine whether significant differences existed when respondents were grouped according to age, educational attainment, and years of service. A significance level of 0.05 was used. Results with p-values less than 0.05 were interpreted as statistically significant.

3.7 Ethical Considerations

The study observed informed consent, voluntary participation, confidentiality, and non-maleficence. Respondents were informed that participation was voluntary and that they could withdraw from the study without penalty. Personal information and survey responses were treated confidentially, and the data were used only for research purposes.

4. Results and Discussion

4.1 Profile of Respondents

The study involved 204 healthcare practitioners in Laguna, Philippines, composed of 148 medical practitioners and 56 naturopathic practitioners. Medical practitioners represented 72.5% of the sample, while naturopathic practitioners represented 27.5%. The age profile showed that most respondents belonged to Generation Y or the 25-40 age group, comprising 120 respondents or 58.8% of the sample. Generation X respondents aged 41-56 accounted for 49 respondents or 24.0%, Generation Z respondents aged 24 and below accounted for 22 respondents or 10.8%, and Baby Boomers aged 57 and above accounted for 13 respondents or 6.4%.

In terms of educational attainment, nearly half of the respondents were college graduates, representing 101 respondents or 49.5%. This was followed by respondents with high school education and below at 48 respondents or 23.5%, vocational education at 43 respondents or 21.1%, and postgraduate education at 12 respondents or 5.9%. In

terms of length of service, most respondents had 1-10 years of service, representing 150 respondents or 73.5%. Those with 11-20 years of service accounted for 30 respondents or 14.7%, while those with 21 years and above accounted for 24 respondents or 11.8%. Female respondents slightly outnumbered male respondents, with 113 females or 55.4% and 91 males or 44.6%. These profile results indicate that the sample was largely composed of early-career to mid-career practitioners, with medical practitioners forming the dominant professional group.

4.2 Level of Job Satisfaction Among Medical and Naturopathic Practitioners

The respondents were generally satisfied across the three dimensions of job satisfaction: work itself, supervision, and working conditions. As shown in Table 1, the overall composite mean was 3.01, interpreted as satisfied. This indicates that, as a whole, the respondents evaluated their work experiences positively, although not at the level of high satisfaction.

Naturopathic practitioners consistently reported higher satisfaction than medical practitioners across all three dimensions. The largest difference was observed in work itself, where naturopathic practitioners obtained a mean of 3.49 compared with 3.02 among medical practitioners. This suggests that naturopathic practitioners experienced greater fulfillment from the nature of their work, possibly because their practice may involve greater autonomy, individualized patient interaction, and stronger alignment with holistic care values.

Supervision was also rated higher by naturopathic practitioners, with a mean of 3.33 compared with 3.01 among medical practitioners. Although both groups remained within the satisfied range, the difference suggests that naturopathic practitioners may experience more supportive or less hierarchical supervisory relationships. Working conditions followed the same pattern, with naturopathic practitioners reporting a mean of 3.32 compared with 2.97 among medical practitioners.

Table 1. Summary of Job Satisfaction Levels by Profession

Dimension	Overall	Medical Practitioners	Naturopathic Practitioners
Work itself	3.16 Satisfied	3.02 Satisfied	3.49 Satisfied
Supervision	3.01 Satisfied	3.01 Satisfied	3.33 Satisfied
Working conditions	2.97 Satisfied	2.97 Satisfied	3.32 Satisfied
Composite mean	3.01 Satisfied	3.01 Satisfied	3.33 Satisfied

Note. Scale interpretation: 3.50-4.00 = Highly Satisfied; 2.50-3.49 = Satisfied; 1.50-2.49 = Dissatisfied; 1.00-1.49 = Highly Dissatisfied.

These findings show that both groups were satisfied, but naturopathic practitioners experienced relatively more favorable job satisfaction across all measured areas. The results also correct the earlier inconsistency in the source narrative by following the summary values and inferential results as the controlling basis.

4.3 Differences in Job Satisfaction by Profession and Sex

The Mann-Whitney U test results showed significant differences in job satisfaction when respondents were grouped according to profession. As shown in Table 2, significant differences were found in work itself, supervision, and working conditions, with all p-values below .05. This confirms that profession was a meaningful differentiating factor in the respondents' job satisfaction.

The findings suggest that medical and naturopathic practitioners do not experience their work in the same way. Naturopathic practitioners reported higher satisfaction across the three dimensions, indicating that their professional context may provide stronger satisfaction in terms of work fulfillment, supervisory experience, and perceived

working conditions. This may be associated with the nature of naturopathic work, which may allow closer patient relationships, more flexible practice structures, and greater professional discretion.

By contrast, no significant differences were found when respondents were grouped according to sex. Although the mean ranks or mean satisfaction levels may have differed slightly between male and female respondents, the results did not reach statistical significance. This suggests that, in this sample, sex was not a strong basis for differentiating job satisfaction in terms of work itself, supervision, or working conditions.

Table 2. Differences in Job Satisfaction by Profession and Sex

Grouping Variable	Job Satisfaction Dimension	Test Statistic	p-value	Interpretation
Profession	Work itself	Mann-Whitney U = 1658.00	.000	Significant
Profession	Supervision	Mann-Whitney U = 2127.00	.000	Significant
Profession	Working conditions	Mann-Whitney U = 1923.50	.000	Significant
Sex	Work itself	Mann-Whitney U = 4876.50	.519	Not significant
Sex	Supervision	Mann-Whitney U = 4649.50	.230	Not significant
Sex	Working conditions	Mann-Whitney U = 4572.00	.165	Not significant

Note. Results are significant at $p < .05$.

These results indicate that job satisfaction was differentiated more clearly by professional context than by sex. The professional environment, nature of practice, and organizational structure appear to have greater relevance than sex-based differences in explaining variations in satisfaction among the respondents.

4.4 Differences in Job Satisfaction by Age, Education, and Years of Service

The Kruskal-Wallis test results showed that selected demographic variables were associated with differences in job satisfaction. As shown in Table 3, age significantly differentiated satisfaction with supervision and working conditions, but not satisfaction with work itself. This means that respondents across age groups did not differ significantly in how they evaluated the nature of their work, but they differed in how they evaluated supervisory relationships and workplace conditions. Older respondents, particularly those aged 57 and above, were described in the source results as having higher satisfaction in supervision and working conditions.

Educational attainment significantly differentiated all three dimensions of job satisfaction. This indicates that satisfaction with the nature of work, supervision, and working conditions varied according to the respondents' educational background. The results suggest that educational attainment shaped expectations regarding role alignment, supervisory support, and workplace environment. In the source discussion, college-educated respondents were described as reporting lower satisfaction in key areas, possibly because higher educational attainment may be associated with stronger expectations for meaningful work, professional recognition, autonomy, and advancement.

Years of service significantly differentiated satisfaction with work itself and supervision, but not working conditions. Respondents with 1-10 years of service were described as having lower satisfaction in work itself and supervision compared with those with longer tenure. This suggests that early-career practitioners may require stronger mentoring, clearer supervisory support, and more structured development opportunities. However, working conditions did not significantly differ by years of service, indicating that perceptions of workplace conditions may have been relatively similar across tenure groups.

Table 3. Differences in Job Satisfaction by Age, Educational Attainment, and Years of Service

Grouping Variable	Job Satisfaction Dimension	Kruskal-Wallis H	p-value	Interpretation
Age	Work itself	7.323	.062	Not significant
Age	Supervision	11.318	.010	Significant
Age	Working conditions	14.293	.003	Significant
Educational attainment	Work itself	10.466	.015	Significant
Educational attainment	Supervision	18.049	.000	Significant
Educational attainment	Working conditions	9.791	.020	Significant
Years of service	Work itself	9.062	.011	Significant
Years of service	Supervision	8.696	.013	Significant
Years of service	Working conditions	4.927	.085	Not significant

Note. Results are significant at $p < .05$.

These findings show that job satisfaction was not uniform across all demographic groups. Age, education, and years of service were relevant differentiating factors, although their influence varied by satisfaction dimension. The strongest demographic pattern emerged for education, which significantly differentiated all three dimensions.

4.5 Discussion

The findings show that medical and naturopathic practitioners in Laguna were generally satisfied with their work, supervision, and working conditions. However, the consistently higher satisfaction scores among naturopathic practitioners suggest that professional context matters. The nature of naturopathic practice may provide a more favorable satisfaction profile because it is often associated with autonomy, holistic care, individualized patient interaction, and closer alignment between personal values and professional activity. This supports literature suggesting that meaningful work, autonomy, task relevance, and alignment between work and professional identity contribute to job satisfaction (Parker, 2014; Oldham & Hackman, 2018; Zhang & Parker, 2019).

The significant difference by profession across all three dimensions is the most important finding of the study. It indicates that job satisfaction is not merely an individual attitude but is shaped by the structural and professional conditions under which work is performed. Medical practitioners often work within more hierarchical, protocol-driven, and institutionally regulated environments. These conditions may support consistency and accountability, but they may also limit autonomy and increase administrative burden. Naturopathic practitioners, by contrast, may work in smaller or more flexible settings where direct patient relationships, professional discretion, and holistic care processes are more central. These conditions may explain why naturopathic practitioners reported higher satisfaction with the work itself, supervision, and working conditions.

The absence of significant differences by sex suggests that male and female respondents experienced broadly comparable levels of job satisfaction in this sample. This does not mean that sex-related workplace issues are irrelevant, but it indicates that sex did not statistically differentiate satisfaction across the measured dimensions. This finding aligns with literature suggesting that sex alone may not explain job satisfaction when workplace context, professional expectations, and organizational conditions are taken into account (Chen et al., 2021; Yang & Mahoney, 2021).

Age significantly differentiated satisfaction with supervision and working conditions. Older respondents appeared to report more favorable satisfaction in these areas, which may reflect greater professional stability, accumulated experience, stronger workplace relationships, or more established roles. This finding is consistent with studies suggesting that older employees may experience higher satisfaction because of clearer expectations, better coping strategies, and more stable workplace positions (Zacher & Yang, 2020; Chen et al., 2021). However, age did not significantly differentiate satisfaction with the work itself, suggesting that the meaningfulness of healthcare work may be shared across age groups.

Educational attainment significantly differentiated all three dimensions of job satisfaction. This may indicate that education shapes how practitioners evaluate their work, supervisors, and workplace conditions. More educated respondents may hold stronger expectations regarding professional recognition, autonomy, role alignment, and career growth. When these expectations are not met, satisfaction may be lower despite professional qualification. This is consistent with literature noting that higher educational attainment may improve job satisfaction when skills are fully utilized, but may also produce dissatisfaction when job roles do not match qualifications or career expectations (Nguyen et al., 2020; Chen et al., 2021).

Years of service significantly differentiated satisfaction with work itself and supervision, but not working conditions. The lower satisfaction among respondents with 1-10 years of service suggests that early-career practitioners may still be adjusting to workplace expectations, role demands, and supervisory relationships. This finding points to the importance of mentoring, career development, and structured supervisory support for newer healthcare workers. It also supports literature emphasizing that early-career healthcare professionals often require stronger guidance, developmental pathways, and support systems to sustain job satisfaction and reduce disengagement (Shanafelt et al., 2015; Kalleberg & Marsden, 2019).

Overall, the findings imply that job satisfaction interventions should not be generic. Healthcare organizations and wellness-related institutions should differentiate their workforce strategies according to profession, age, education, and tenure. For medical practitioners, improvements may focus on workload management, supervisory support, recognition, and role enrichment. For naturopathic practitioners, the challenge may be to sustain the favorable aspects of autonomy and holistic practice while strengthening institutional support and professional recognition. For early-career practitioners, mentoring and career progression should be prioritized. For highly educated practitioners, job roles should be aligned more carefully with qualifications and professional expectations.

5. Conclusions, Recommendations, and Implications

5.1 Conclusions

The study examined job satisfaction among medical and naturopathic practitioners in Laguna, Philippines, focusing on work itself, supervision, and working conditions. Based on the profile results, the respondents were predominantly medical practitioners, mostly aged 25-40, largely college-educated, mostly with 1-10 years of service, and slightly more female than male. This profile suggests that the sample was composed mainly of early-career to mid-career healthcare practitioners.

The respondents were generally satisfied across all three dimensions of job satisfaction. Satisfaction with the work itself obtained the highest overall mean, followed by supervision and working conditions. Although all dimensions were interpreted as satisfied, the results showed that naturopathic practitioners reported higher satisfaction than medical practitioners across work itself, supervision, and working conditions. This suggests that naturopathic practice may provide a more favorable satisfaction profile, particularly in relation to work fulfillment, supervisory experience, and perceived workplace conditions.

Profession significantly differentiated job satisfaction across all three dimensions. This indicates that medical and naturopathic practitioners experienced job satisfaction differently, with naturopathic practitioners reporting higher satisfaction. Sex did not significantly differentiate job satisfaction, indicating that male and female respondents had broadly comparable levels of satisfaction in the measured dimensions.

Age significantly differentiated satisfaction with supervision and working conditions, but not with the work itself. Educational attainment significantly differentiated all three dimensions of job satisfaction, suggesting that educational background shaped how respondents evaluated their work, supervision, and workplace conditions. Years of service significantly differentiated satisfaction with work itself and supervision, but not working conditions. These findings indicate that job satisfaction was influenced not only by profession but also by selected demographic and career-related factors, particularly age, education, and tenure.

Overall, the study concludes that job satisfaction among healthcare practitioners in Laguna is generally positive but unevenly distributed across professional and demographic groups. The findings support the need for workforce interventions that are differentiated by professional context, educational background, age group, and career stage.

5.2 Recommendations

Healthcare organizations, clinics, wellness centers, and related institutions should strengthen job satisfaction initiatives by focusing on the specific needs of medical and naturopathic practitioners. Since naturopathic practitioners reported higher satisfaction, healthcare managers may examine aspects of naturopathic practice that can inform broader workforce strategies, such as autonomy, supportive interaction, closer patient engagement, and flexibility in work processes. These elements may be adapted where appropriate in conventional healthcare settings without compromising clinical standards, accountability, or patient safety. These workforce interventions may be strengthened through integrated healthcare analytics, where clinical, operational, and organizational data are used to improve decision quality and align health and business outcomes (Atento, Quinto, Espelita, & Castaneda, 2025).

For medical practitioners, interventions should prioritize work enrichment, supervisory support, workload management, and recognition. Since medical practitioners reported comparatively lower satisfaction across the measured dimensions, administrators should examine whether hierarchical structures, workload pressures, documentation requirements, or limited autonomy affect the quality of their work experience. Regular feedback mechanisms, recognition systems, and participatory problem-solving may help improve morale and engagement.

Supervisory development should be treated as a priority. Since profession, age, education, and years of service showed significant differences in supervision-related satisfaction, supervisors should be trained in constructive feedback, mentoring, communication, emotional support, and fair task management. Early-career practitioners, particularly those with 1-10 years of service, should receive structured mentorship and career guidance because this group showed lower satisfaction in work itself and supervision.

Role alignment should also be strengthened, especially for college-educated and highly qualified practitioners. Since educational attainment significantly differentiated all three dimensions of job satisfaction, healthcare institutions should review whether employees' roles, responsibilities, and advancement pathways match their qualifications and expectations. Assignments that underutilize professional skills may reduce satisfaction, while meaningful role design may improve commitment and retention.

Working conditions should be improved through fair workload distribution, safer and more comfortable facilities, stronger collegial support, and attention to job security and compensation-related concerns. Although working conditions were generally rated as satisfactory, medical practitioners reported lower means than naturopathic practitioners. This suggests the need for continuing review of workplace arrangements, especially in conventional healthcare environments that may involve heavier workloads or more rigid organizational systems.

Future researchers should consider using probability sampling, a larger and more balanced sample, and clearer professional classification of medical and naturopathic respondents. Future studies should also report reliability coefficients for modified instruments and may include qualitative interviews to explain why satisfaction differs between the two professional groups. A mixed-method design would be useful in capturing the lived experience behind the numerical results.

5.3 Implications of the Study

The findings have practical implications for healthcare workforce management. Job satisfaction interventions should not be applied uniformly across all practitioners. Profession, age, educational attainment, and years of service shape how practitioners experience work, supervision, and working conditions. Managers should therefore design differentiated strategies for early-career employees, senior employees, highly educated practitioners, medical practitioners, and naturopathic practitioners.

The study also has institutional implications. Healthcare and wellness institutions in Laguna may use the findings as a basis for improving retention strategies, supervisory systems, role assignment, employee engagement, and workplace support. Since naturopathic practitioners reported higher satisfaction, institutions may also consider how alternative or integrative healthcare environments create meaningful work experiences that conventional healthcare organizations can learn from. In the Philippine healthcare sector, organizational adaptation is also shaped by universal healthcare reforms, digital disruption, regulatory expectations, and changing consumer demands, all of which may indirectly affect workforce requirements and managerial priorities (Atento & Atento, 2025).

The study has methodological implications as well. Modifying an established job satisfaction scale requires careful validation and reliability reporting. Future journal-ready studies should clearly report the reliability coefficient, justify modifications to the scale, and ensure that the sampling description is internally consistent with the results. These improvements would strengthen the credibility and replicability of similar comparative healthcare workforce studies.

Finally, the study contributes to local scholarship by providing evidence on job satisfaction differences between medical and naturopathic practitioners in the Philippine context. It adds to discussions on healthcare workforce retention, professional satisfaction, alternative health practice, and human resource development in healthcare organizations.

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