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Explaining Turnover Intention among Physicians in Egyptian Public Hospitals: The Impact of Work–Life Balance and the Mediating Role of Job Satisfaction

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Abstract

Purpose: Even though employee turnover intention is a major problem for businesses worldwide, physicians at Egyptian public hospitals have not received enough attention. As a result, this study examines how work-life balance affects turnover intention while simultaneously examining the role that job satisfaction plays as a mediating factor.

Methodology: An online survey distributed through social media sites was used in a quantitative, cross-sectional approach. 566 physicians working in Egyptian public hospitals made up the study sample. The data was examined using SPSS and AMOS to determine whether the suggested associations were accurate and whether any direct or indirect impacts existed.

Findings: The results indicate that physicians' likelihood of quitting their job is significantly impacted negatively by work-life balance. Work-life balance also improves job satisfaction, which in turn reduces the intention to leave. Furthermore, the association between work-life balance and turnover intention was found to be somewhat mediated by job satisfaction. Therefore, by increasing employee satisfaction, work-life balance reduces turnover intention both directly and indirectly.

Implications: These findings highlight the need for public healthcare organizations to support work-life balance programs since doing so can increase physician satisfaction and reduce their likelihood of quitting.

Future Research: To improve understanding of workforce dynamics in Egypt, future studies may build on current one by including more healthcare professionals and examining more organizational aspects.

Keywords: Work–Life Balance; Job Satisfaction; Turnover Intention; Physicians; Egypt.

Introduction

Employee turnover is a growing problem for organizations operating in highly competitive and resource-constrained environments, particularly in labor-intensive industries like healthcare (Prabhu et al., 2026). In addition to immediately costing money in terms of hiring and training expenses, turnover damages long-term performance, reduces productivity, and makes organizations less stable (Shibru et al., 2022). While involuntary turnover might be beneficial for strategic reasons, voluntary turnover is still more problematic since it indicates that employees are leaving on purpose because they are dissatisfied and their expectations are not being met. Losing experienced professionals worsens institutional knowledge and service quality in fields that demand a high level of expertise (Mengmeng et al., 2025).

Organizational research places a lot of emphasis on turnover intention (TOI) because it is a well-known determinant of real turnover behavior (Adriano et al., 2020). Particularly in high-stress organizations, work-life balance (WLB) has grown in importance as a determinant of TOI (Yu Chenshu et al., 2024). Job satisfaction (JS) has a substantial impact on employee attitudes and behavioral intentions. Prior research has repeatedly shown that employees who have better WLB are more satisfied, which lowers their propensity to quit (Azmi et al., 2021).

These interactions gain traction in the healthcare industry, which is facing rising demand and persistent worker shortages (Scheffler et al., 2021). Doctors, in particular, struggle to maintain a good WLB since they work long hours, see a large number of patients, and perform emotionally stressful activities (Sun et al., 2025). Global catastrophes, like the COVID-19 pandemic, have exacerbated these pressures, leaving healthcare personnel feeling overwhelmed, burned out, and dissatisfied (Diakos et al., 2023). As a result, TOI has arisen as a serious concern with direct implications for the sustainability of the healthcare system.

Research Problem and Research Gap

This difficulty is particularly evident in Egypt's public hospitals, where doctors must cope with numerous structural and operational issues. Even though more Physicians are graduating, the healthcare sector continues to struggle with a shortage of Physicians as more leave and relocate to other nations (ElBeheiry et al., 2025). Poor working conditions, such as long shifts, a large number of patients, and insufficient resources, make it difficult for Physicians to meet WLB. This results in decreased JS and increased TOI (Eisa et al., 2025). The continual loss of skilled doctors has a negative impact on both service quality and system stability (El-Kalamawie et al., 2021).

It is critical to retain skilled, motivated, and satisfied doctors on staff not just to improve care quality, but also to assist Egypt in meeting its national aim of providing equitable access to healthcare to all citizens (Magdy et al., 2023). Given the apparent poor understanding of how WLB effects TOI and the mediating role of JS, the problem statement for this study is as follows: "To what extent does WLB influence the TOI of Egyptian physicians, and how does JS mediate this relationship?"

Despite prior research investigated the relationships between WLB, JS, and TOI in a variety of fields and different nations around the globe. (Upadianti et al., 2025; Suganda et al., 2022; Lebang et al., 2021; Silaban et al., 2021; Adriano et al., 2020; Kerdpitak et al., 2020), not much focus has been directed to their integrated interaction in the Egyptian medical field context, especially in the post-pandemic era. As consequence, a deeper understanding of how WLB influences TOI via JS is required. As such, bridging this empirical gap can assist to increase stability in the organization, lower turnover rates, and, ultimately, enhance the consistency and excellence of care given to patients in Egypt's health care system.

General Objective:

The main goal of this study is to provide a framework that shows and explains how WLB influences the TOI and JS of Egyptian physicians. The role of JS as a mediator in the relationship between WLB and TOI will also be examined in this study.

Specific Objectives:

The specific objectives of the study are:

- To ascertain whether Egyptian doctors view WLB as a crucial component of their TOI.
- To evaluate whether Egyptian doctors view WLB as an important component of their JS.
- To find out if JS is a significant concern for Egyptian doctors in their TOI.
- To ascertain whether Egyptian doctors think JS significantly reduces WLB with their TOI.

Research Questions

As a result, the following research questions are developed:

- How does WLB affect doctors' turnover intention in the Egyptian public hospitals?

- How does WLB affect doctors' JS in the Egyptian public hospitals?
- How does JS affect doctors' turnover intention in the Egyptian public hospitals?
- Does JS mediate the relationship between WLB and doctors' turnover intention in the Egyptian public hospitals?

Literature Review

The study uses well-known theoretical frameworks, particularly Social Exchange Theory (SET) and the Theory of Reasoned Action (TRA), to explain the relationships among the research variables. These concepts serve as guiding lenses, elucidating how individuals assess their professional experiences and translating them into behavioral outcomes (Avanzi et al., 2014).

Background Theory

SET holds that relationships between employees and organizations are based on mutual exchanges, with supporting policies promoting favorable employee responses (Avanzi et al., 2014). TRA, on the other hand, emphasizes that a rational evaluation of attitudes and social expectations serves as the basis for action (Liou et al. 2009).

Study Variables

Dependent Variable: Turnover Intention

As a significant predictor of real employee leave, TOI has developed into a central idea in human resource management research (Wenyan et al., 2024). It represents an employee's mental process of leaving a company when they no longer feel connected to their work and typically occurs before the actual resignation (Bothma et al., 2013). Consequently, it serves as a company early warning system. Increased recruitment expenses, operational interruption, and skill loss are some of the consequences of high turnover. Tacit expertise, which is hard to duplicate in information-intensive companies, is part of this loss. Reducing TOI is now strategically crucial (Shibru et al., 2022).

Because turnover directly affects patient care and safety, it has far-reaching consequences in the healthcare industry (Harun et al., 2020). Physician turnover has increased substantially over the world, with significant increases in countries such as the United States, where it reached about 11% in 2019 alone (Pappas et al., 2022). Resignations have also surged dramatically in the United Kingdom. Between September 2022 and September 2023, around 15,000 to 23,000 doctors left the National Health Service (NHS) ahead of schedule. The annual cost of this mass migration to the UK healthcare system is expected to be between £1.6 and £2.4 billion, with estimates suggesting that this figure might soon rise to £5 billion (British Medical Association Report, 2024).

Egypt confronts comparable issues, with a decreasing number of working physicians. Although thousands of medical graduates graduating yearly, only about 40% of registered doctors are practicing in Egypt. As many registered doctors travel abroad or abandon the medical sector entirely for other careers, Egypt's healthcare system faces a severe threat to its viability (Magdy et al., 2023). High turnover sets off a vicious circle of increased strain, stress, and attrition, eventually harming healthcare systems (Seathu et al., 2024). This emphasizes the need to look at fundamental factors like WLB.

Independent Variable: Work-Life Balance

As employees try to manage conflicting work and personal obligations, WLB has drawn increased attention. It stands for the capacity to strike a balance between work, family, and personal responsibilities in a way that promotes harmony and reduces conflict (Agha et al., 2017). According to Hayman (2005), the concept is commonly characterized in three dimensions: work interference with personal life (WIPL), work and personal life enhancement (WPLE), and personal life interference with work (PLIW). These aspects allow a full comprehension of the process of balance.

Employees experience stress, burnout, and unhappiness when WLB is low, which reduces productivity and eventually makes them intend to resign (Nuradilla et al., 2024). According to SET, companies that support

WLB cultivate employee loyalty and trust. These strategies not simply enhance internal performance but also increase an organization's attractiveness in competitive employment markets.

Obtaining WLB is especially difficult in the healthcare sector because of hectic work schedules and mental constraints (Tawfik et al., 2021). Physicians frequently work a long time and have heavy workloads, which disrupt their personal lives and raise stress levels.

Mediating Variable: Job Satisfaction

Sinval (2020) define JS as positive feelings caused by reflecting on one's job experiences. It is highly subjective given that it is affected by both workplace conditions and individual goals. Higher levels of satisfaction are associated with greater commitment, improved performance, and lower TOI (Azmi et al., 2021). Because JS is critical to the success of companies.

Maintaining JS is especially difficult in the healthcare business due to emotional stress and workload demands (Ji Y et al., 2026). These characteristics contribute to professional burnout and decreased interest. Consequently, JS now serves as a key indicator of labor stability (Al Maqbali et al., 2026; Akelois et al., 2025).

Hypotheses Development

Work-Life Balance and Turnover Intention

Low WLB levels have been shown to increase TOI through stress and a reduction in overall well-being (Yu Chenshu et al., 2024; Suganda et al., 2022). Unbalanced workers are more likely to reconsider their commitment. This relationship is supported by empirical studies from other sectors, such as healthcare, where long workdays dramatically increase TOI (Kerdpitak et al., 2020). In high-stress circumstances, this effect is particularly noticeable. Therefore, this study suggests:

H1: WLB has a significant negative impact on doctors' TOI in public hospitals.

Work-Life Balance and Job Satisfaction

Because balanced employees have greater control and well-being, WLB and JS have a positive relationship. This relationship is developed through supportive organizational strategies. Studies from a variety of industries show that better WLB results in higher levels of satisfaction (Caecilia et al., 2025). The correlation is even stronger in the healthcare industry. Thus, the study suggests:

H2: WLB has a significant positive impact on doctors' JS in public hospitals.

Job Satisfaction and Turnover Intention

Dissatisfied workers are more likely to quit, and JS is a strong predictor of TOI (Hui et al., 2023). This relationship has received constant support in all situations. Because the healthcare business is so complex and demanding, satisfaction among healthcare professionals is critical for retention (Scanlan et al., 2019). Higher levels of satisfaction reduce the likelihood of turnover. Therefore, the study suggests that:

H3: JS has a significant negative relationship with doctors' TOI in public hospitals.

Mediating Role of Job Satisfaction

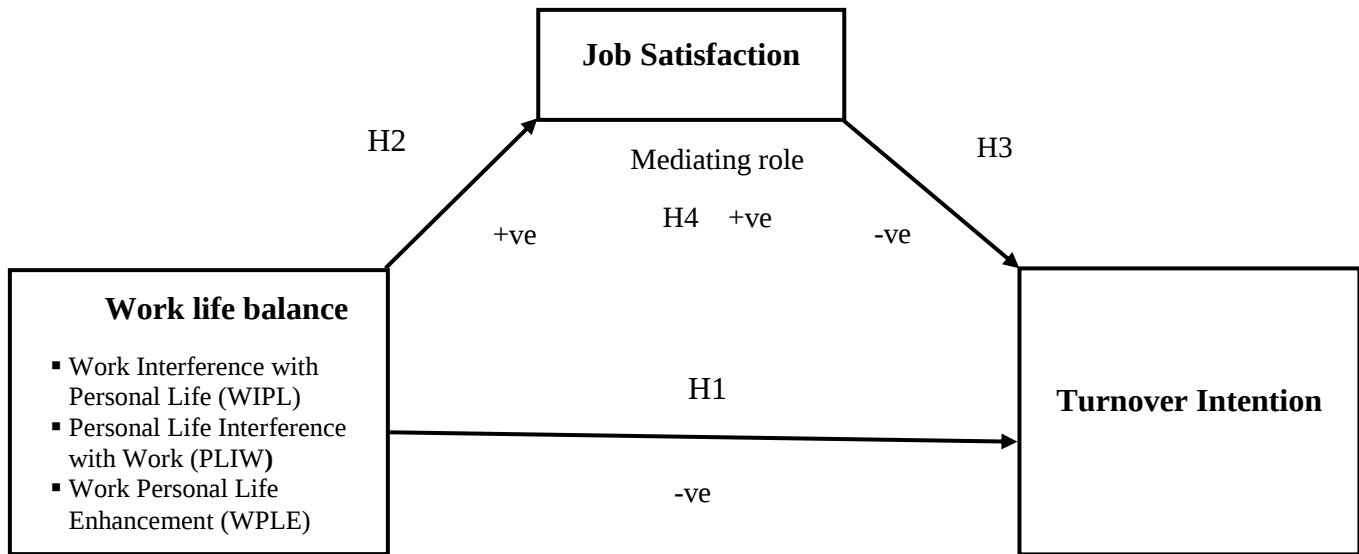
As a psychological bridge, JS mediates the association between WLB and TOI, according to recent research (Akelois et al., 2025; Reni et al., 2024). Balanced workers are typically satisfied, which lowers their propensity to quit. Numerous industries, including healthcare, have verified this mediating function (Upadianti et al., 2025; Cao et al., 2021). It clarifies how external circumstances affect conduct. As a result, the study suggests:

H4: JS significantly mediates the relationship between WLB and doctors' TOI in public hospitals.

Conceptual Framework

The conceptual framework connects WLB, JS, and TOI by converting theoretical concepts into a verifiable model. It employs JS as a mediator, WLB as the independent variable, and TOI as the dependent variable. This framework clearly defines a path for empirical testing. The framework, which combines TRA and SET, makes

clear how individual attitudes and support perceptions relate to the creation of TOI. It connects theory and practice so effectively.



Figur (2-1): Conceptual Framework
Developed by the Researcher

Research Methodology

A well-designed research methodological framework is necessary to comprehend how WLB affects doctors' decisions. Doctors are under a lot of stress at work, which may affect their level of satisfaction and TOI. Thus, to accurately depict these interactions, a comprehensive approach is needed.

Research Design

This study analyses causal links between variables using a positivist paradigm supported by a deductive approach. To assess the suggested theories using quantifiable data, a quantitative methodology was selected (Khan et al., 2023). The results are more dependable and practical in different contexts due to this technique. Physicians working in Egypt's public healthcare system provided the primary data. This ensured that the outcomes were grounded in the actual experiences of the target population. Participants' opinions at a certain point in time were gathered using a cross-sectional survey method.

Data was gathered via an electronic questionnaire distributed via Google Forms. This allowed rapid gathering data and made it simple for busy doctors to complete. In order to reach the target population, the questionnaire was distributed via business networks on platforms like Facebook and WhatsApp. That method of distribution ensured that doctors who belonged to the target community provided the majority of the responses. Consequently, the acquired data's validity and relevance were preserved.

Measuring Tool

To ensure reliable, transparent, and consistent data gathering, the measuring tool was carefully designed. The conceptual definitions of the study variables matched the scales that were selected. Each variable was measured in a way that made sense because of this alignment. Practical considerations were made in addition to conceptual importance. Because doctors have limited available time, the questionnaire was designed to be short and simple to complete. They were less fatigued and more people responded as a result. The likelihood of receiving hurried or sloppy responses is reduced when shorter, validated measures are used (Meade et al., 2012). In order to maintain both accuracy and viability, a balanced approach was used.

31 items total, divided into seven categories, make up the final questionnaire. The majority of the items measured the main aspects of the study using a five-point Likert scale, from "strongly disagree" (1) to "strongly agree" (5). Five more binary choice questions were included to gather crucial sociodemographic data.

It is important to note that WLB was tested in this study using a validated 15-item scale created by Hayman (2005). This scale was based on Fisher-McAuley's (2003) 19-item scale. This scale tries to present a comprehensive picture of balance and conflict by depicting the dynamic interplay between work and personal life. WIPL, PLIW, and WPLE are the three main components. Each dimension represents a different facet of the work-life interaction, and when combined, they create a more complete picture of the concept.

The scale's excellent reliability has been demonstrated by earlier research. Agha (2017), for instance, discovered Cronbach's alpha coefficients of 0.80 for WPLE and 0.90 for WIPL and PLIW, indicating a high degree of internal consistency. Because it guarantees measurement validity and consistency, this tool is perfect for examining doctors' experiences in contemporary study.

The Short Index of Job Satisfaction (SIJS), a short five-item scale based on the classic Brayfield and Rothe (1951) instrument, was used to measure JS. Judge (2008) later shortened the length of the first 18-item scale. Since then, it has grown in popularity because of its short duration, reliability, and cross-cultural applicability, making it ideal for time-pressed professionals. Despite its brevity, the scale has shown reliable results in numerous studies, with Cronbach's alpha values ranging from 0.76 to 0.89 in a variety of work settings (Lai et al., 2025; Sinval et al., 2020). SIJS usually aligns with the study's mediation analysis and is a reliable and effective technique of quantifying JS.

TOI was evaluated using the TIS-6 scale, a six-item version of Roodt's original 14-item Turnover Intention Scale (2004) (Martin and Roodt et al., 2008). Bothma and Roodt (2013) validated this shortened form, which significantly reduces the burden on participants while retaining the original's predictive ability. To guarantee consistency and coherence with the rest of the questionnaire, the original TIS-6 items, which were expressed as questions, were changed to statement form. A committee of five academic experts reviewed the modified items to ensure their accuracy and clarity.

With Cronbach's alpha values of 0.91 (Jacobs & Roodt, 2008), 0.93 (Martin & Roodt, 2008), and 0.80 (Bothma & Roodt, 2013), the scale has shown good reliability in earlier studies, demonstrating its consistency across various professional contexts. It is especially appropriate for the demographic of doctors in this study who are under a lot of stress and time constraints because it can assess TOI accurately while reducing reaction fatigue.

Study Population and Sample

Participants have to be Egyptian and working at public hospitals at the time. This remained consistent with the scope of the study. Because of accessibility issues, a non-probability sampling technique was employed. Snowball sampling and convenience made it easier to effectively reach individuals. Specialized populations can benefit from this strategy (Khan et al., 2023). The sample-to-item ratio approach was used to calculate the sample size. The use of this ratio-based approach offered a logical and theoretically valid foundation for determining the minimal necessary sample size because the current study's questionnaire included 26 measurement items encompassing WLB, JS, and TOI.

According to Hatcher (1994), for exploratory research, a minimum ratio of five participants per item (5:1 ratio) is typically appropriate, which in this case translates to about 130 respondents. To improve statistical robustness and guarantee the stability of factor structures, numerous methodological experts advise a more cautious 10:1 ratio, which corresponds to 260 respondents, or 20:1 ratio, which corresponds to 520 respondents (Worthington et al., 2006; Costello et al., 2005). This study went above and beyond suggested limits. Over the course of four months, data collecting produced 566 valid replies. This gave the analysis a solid empirical foundation. Robust statistical testing was supported.

Data Analysis and Findings

Excel was used to collect data, and SPSS and AMOS were used for analysis. In quantitative research, these instruments are frequently employed. They provide sophisticated statistical analysis.

Evaluation of Validity and Reliability

Expert examination was used to demonstrate face validity. Five academic experts evaluated the questionnaire, evaluating its grammatical accuracy, relevance, and intelligibility.

Evaluation of Reliability

Cronbach's alpha test was used to evaluate the reliability analysis, as shown in table 1:

Table 1: The outcome of the reliability analysis for each variable

Type of variable	Variables	Number of Questions	Cronbach's Alpha	Test Result
Independent Variable	Work Life Balance	15 (1-15)	0.88	High Reliability
	Work Interference with Personal Life (WIPL)	7 (1-7)	0.85	High Reliability
	Personal Life Interference with Work (PLIW)	4 (8-11)	0.81	High Reliability
	Work Personal Life Enhancement (WPLE)	4 (12-15)	0.91	High Reliability
Mediating Variable	Job Satisfaction	5 (1-5)	0.87	High Reliability
Dependent Variable	Turnover Intention	6 (1-6)	0.89	High Reliability

All of the variables had high internal consistency, according to reliability analysis. The measurement tool's robustness was confirmed by Cronbach's alpha values, which ranged from 0.87 to 0.91, exceeding suggested standards.

Demographics Analysis

566 doctors who worked in public hospitals made up the sample. Males made up 23.7% of the respondents, while women made up the majority (76.3%). 39.4% of respondents were between the ages of 25 and 40, and 60.6% of respondents were over 40. In terms of marital status, 23.1% were married and 76.9% were single. This distribution shows the diversity of the study sample. Furthermore, every participant worked in public hospitals and was an Egyptian national. The internal validity and trustworthiness of the empirical findings are strengthened by these features, which guarantee alignment with the study's target population and offer a strong basis for further studies pertaining to WLB, JS, and TOI.

Analysis of Regression

According to the following hypothesis put forward by the current study, Table 2 presents the findings of the simple regression analysis looking at the effect of WLB on physicians' TOI:
H1: WLB has a significant negative impact on doctors' TOI in public hospitals.

Table 2: Simple regression analysis for the impact of WLB on physicians' TOI

Regression Model	F	Sig.	R	R ²	β	Std. Error	t	P Value
Constant	118.98	< 0.001	0.52	0.27	4.01	0.08	54.16	< 0.001

Regression Model	F	Sig.	R	R ²	β	Std. Error	t	P Value
Work-life balance	**				-0.32	0.03	-10.91	< 0.001

The findings demonstrate that WLB significantly lowers TOI. With WLB accounting for 27% of the variance in TOI, the model was statistically significant ($F = 118.98$, $p < 0.001$). A moderately negative association is indicated by the regression coefficient ($\beta = -0.32$). This implies that decreased TOI among doctors is linked to improvements in WLB.

Table 3 displays the findings of the simple regression analysis for the effect of WLB on doctors' JS, as the present study puts forward the following hypothesis:

H2: WLB has a significant positive impact on doctors' JS in public hospitals.

Table 3: Simple regression analysis for the impact of WLB on physicians' JS.

Regression Model	F	Sig.	R	R ²	β	Std. Error	t	P Value
Constant	158.11	< 0.001	0.47	0.22	2.01	0.08	25.31	< 0.001
Work-life balance					0.42	0.03	14.57	< 0.001

Additionally, WLB showed a noteworthy improvement in JS. The model explained 22% of the variance in JS and was significant ($F = 158.11$, $p < 0.001$). Better WLB improves doctors' JS, according to the positive coefficient ($\beta = 0.42$). This emphasizes how crucial supportive work settings are.

The following hypothesis is put out by the current study, and Table 4 presents the findings of the simple regression analysis for the effect of JS on physicians' inclinations to leave:

H3: JS has a significant negative relationship with doctors' TOI in public hospitals.

Table 4: Simple regression analysis for the impact of job satisfaction on physicians' turnover intentions in public hospitals

Regression Model	F	Sig.	R	R ²	β	Std. Error	t	P Value
Constant	250.82	< 0.001	-0.56	0.31	4.69	0.90	51.96	< 0.001
Work-life balance					-0.48	0.03	-15.84	< 0.001

JS has a significant detrimental impact on TOI. With a significant coefficient ($\beta = -0.48$), the model accounted for 31% of the variance ($R^2 = 0.31$). Higher satisfaction levels lower the chance of quitting, according to this data. It strengthens JS's position as a crucial indicator of worker retention.

Analysis of Mediation

The following notion is put forth by the current study:

H4: JS significantly mediates the relationship between WLB and doctors' TOI in public hospitals.

Using bootstrapping and Baron and Kenny's method (1986) for mediation analysis, the following outcomes were obtained to evaluate the abovementioned hypothesis:

Table 5: Results of the Mediation Analysis
(Work-life balance → Job satisfaction → turnover intention)

Step	Path	Regression Relationship	β	t-value	Sig.	Decision
1	Total effect (c)	Work-life balance → turnover intention	-0.32	-10.91	0.000	Significant
2	Path (a)	Work-life balance → Job satisfaction	0.42	14.97	0.000	Significant
3	Path (b)'	Job satisfaction → turnover intention	-0.48	-15.84	0.000	Significant
	Direct effect (c)'	Work-life balance → turnover intention (with mediator)	-0.16*	5.21	0.000	Reduced
4	Indirect Effect	(a x b) → (turnover intention)	-0.20			
	Proportion mediated	0.20/0.32 = 0.63	→ about 63% of the total effect is mediated by Work-life balance			
	—	Mediation Type	—	—	—	Partial Mediation

The outcomes verified that all prerequisites for mediation were met. While JS had a substantial impact on TOI, WLB had a significant impact on both TOI and JS. These connections offered a solid foundation for evaluating the mediating effect. The direct impact of WLB on TOI diminished but remained considerable when JS was added to the model. This suggests that partial mediation is present. As a result, JS mediates the link between WLB and TOI to some extent. This result demonstrates how WLB affects retention outcomes.

All things considered, the results offer solid empirical backing for the suggested conceptual paradigm. Additionally, they provide insightful information about physician TOI in public health settings.

Discussion of Findings

The results verify that WLB significantly reduces TOI. This finding is consistent with earlier research showing that WLB plays a significant role in lowering employee withdrawal behaviors (Yu Chenshu et al., 2024; Suganda et al., 2022; Lebang et al., 2021). Nonetheless, the current study seems to highlight this relationship's strength more. The difficult circumstances in Egyptian public hospitals may be the cause of this greater impact. The significance of striking a balance between professional and personal responsibilities is increased by heavy workloads and long workdays (Hashim et al., 2022).

WLB becomes a crucial factor in determining whether doctors stay or quit under such circumstances. The current data implies otherwise, despite several previous research reporting weak or negligible associations between WLB and TOI (Riley et al., 2006). The findings demonstrate how psychosocial factors have a significant impact on doctors' decisions to leave their jobs, especially in high-stress healthcare settings. These results support SET from a theoretical standpoint. Physicians exhibit greater dedication and lower TOI when they perceive organizational support for juggling work and life (Adriano et al., 2020). This illustrates the reciprocity standard that is essential to SET.

The TRA is also supported by the outcomes. Physicians' assessments of WLB and anticipated results influence their inclinations to remain or depart. More positive behavioral intentions result from positive views of balance. This study also shows that WLB significantly improves JS. This result is in line with studies that highlight the psychological advantages of striking a balance between personal and professional life (Hui et al., 2023; Adriano et al., 2020). The results, however, conflict with research showing weak or negligible correlations (Arunika et al., 2015; Sobia et al., 2011). This disparity implies that behavioral interactions in various institutional settings are significantly shaped by contextual factors.

The significance of WLB seems to be increased by structural pressures in the Egyptian healthcare system. Work at public hospitals is hard, which makes balance a more important factor in determining contentment. This demonstrates how organizational behavior models are sensitive to circumstances. The results also show that JS has a significant detrimental impact on TOI. This outcome is in line with a large body of research

showing that retention of staff is mostly determined by satisfaction (Upadianti et al., 2025; Reni et al., 2024; Silaban et al., 2021).

Significantly, the strength of this correlation emphasizes how important pleasure is in influencing decisions about turnover. According to the present study, JS is one of the most significant indicators of doctors' intentions to remain or depart. Deeper understanding of these connections is provided by the mediation analysis. The findings show that JS partially mediates the link between WLB and TOI, suggesting that WLB has a direct and indirect impact on TOI. This result is in line with earlier research that suggested comparable mediation structures (Reni et al., 2024; Azmi et al., 2021; Nurdin et al., 2020). The partial mediation seen here, however, points to a more complicated dynamic than previously thought.

The findings show that increasing WLB not just directly lowers turnover but additionally raises satisfaction, which in turn lowers TOI. This dual approach enhances the conceptual model of the research's capacity for explanation. The study clearly contributes to the stated research need. It offers an organized analysis of how working circumstances translate into behavioral intentions by combining WLB, JS, and TOI into a single model.

Research Implications

Theoretical Implications

The results validate that work environment impressions create attitudes and, consequently, behavior, supporting SET and TRA by demonstrating that WLB affects TOI through JS (Lebang et al., 2021). Furthermore, confirming these connections in Egyptian public hospitals increases their applicability outside of Western settings. JS's mediating function enhances healthcare organizational theory by illuminating the relationship between workplace conditions and behavioral consequences through internal evaluation.

Practical and Managerial Implications

The findings imply that healthcare organizations ought to prioritize WLB strategically. By implementing flexible procedures, well-being programs, and supporting human resource policies (HR), hospitals can improve employee satisfaction and retention (Gautam et al., 2024; Kerdpitak et al., 2020). These strategies increase worker results and service quality while strengthening engagement and stability, particularly in environments with limited resources (Wenyan et al., 2024; Cherif et al., 2020).

Policy Implications

In order to deal with physician turnover at the healthcare system level, structural conditions and JS must be taken into consideration (Harun et al., 2020). Policymakers should therefore encourage supportive work settings and incorporate well-being measures into workforce planning (Al Maqbali et al., 2026). This integrated strategy can help Egypt's healthcare system grow sustainably.

Managerial and Organizational Recommendations

According to the research, one important tool for enhancing JS and lowering TOI is leadership development. According to Aman-Ullah et al. (2022), training programs that prioritize work-life dialogue and supportive communication might improve doctors' perceptions of organizational support, boost their sense of satisfaction and decrease their tendency to withdraw. Role conflict and emotional tiredness can be further decreased by institutionalizing work-family boundary management techniques. Giving doctors work-life spillover management techniques improves their everyday job experiences and promotes more consistent professional engagement (Tariq et al., 2021).

Workload allocation and performance requirements are made consistent and equitable at the organizational level by incorporating WLB concepts into HR policy. Transparent systems improve satisfaction and deter TOI by reducing uncertainty and annoyance (Wenyan et al., 2024). Even when introduced gradually, flexible schedule options can greatly improve perceived autonomy and lessen work-family conflict. According to

George et al. (2024), this enhancement in managing overload allocation leads to a higher JS and a reduced propensity to depart.

Additionally, early detection of dissatisfaction tendencies is made possible by routinely assessing employee well-being. According to Talukder et al. (2018), firms that actively address feedback foster more trust, which in turn strengthens customer satisfaction and long-term commitment.

Research Limitations

This study has a number of drawbacks that should be noted despite its contributions. First, because data were gathered at a single point in time rather than under changing circumstances, the adoption of a cross-sectional design limits the capacity to demonstrate causal correlations (Khan et al., 2023).

Second, using self-reported data raises the risk of subjective understanding and responses being biased. Despite the use of validated scales, individual and environmental factors may still have an impact on perceptions (Meade et al., 2012).

Third, the study only looked at doctors working in public hospitals, which increases contextual relevance but restricts generalizability to other professional groups or medical sectors. As a result, it is important to interpret the results in the context of their institution. Lastly, whereas TOI is impacted by numerous organizational and psychological aspects, the model only looked at a small number of variables. The absence of variables like company culture, leadership style, and salary suggests a narrowly focused rather than comprehensive analytical perspective.

Future Research Recommendations

Longitudinal designs may be useful in future studies to document shifts in doctors' opinions over time. Deeper understanding of causal linkages and the dynamic character of WLB and TOI might be possible with such methods. A more thorough knowledge of worker behavior might be provided by extending the conceptual model to incorporate other factors including psychological resilience, organizational justice, and leadership support.

Comparative research across industries and geographical areas could improve theoretical and contextual understanding even more. Additionally, methodological variety is advised, especially when using mixed-method or qualitative approaches. These designs can enhance interpretation and supplement quantitative data by offering deeper, experience-based insights into the work settings of physicians.

Conclusion

This study offers a comprehensive understanding of the interactions between WLB, JS, and TOI in public health contexts. The results show that WLB affects TOI both directly and indirectly through JS, underscoring the significance of psychological processes in determining workforce stability. The study provides a sophisticated explanation of how organizational factors affect professional attitudes and behavioral intentions by connecting empirical data with theoretical frameworks.

This contribution goes beyond statistical correlations to offer contextually based understanding of the dynamics of the healthcare workforce. Additionally, the study provides actionable solutions for enhancing physician retention by translating its findings into practical and policy-relevant consequences. Policymakers and healthcare organizations can use these insights to build interventions that address both human-centered and structural aspects of work environments.

In general, by offering a coherent model that explains workforce behavior in difficult institutional situations, the study advances academic knowledge and professional practice. It emphasizes that surroundings that promote balance, contentment, and long-term professional dedication are just as important to sustainable healthcare systems as resources.

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