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The impact of perceived organizational support and resilience on pharmacists' engagement in their stressful and competitive workplaces in Saudi Arabia

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ABSTRACT

Background: In recent years, organizations around the globe have begun measuring the engagement level of employees in order to improve productivity and profitability. Employee engagement has the potential to significantly affect employee retention and loyalty.

Objective: To explore pharmacists' perceptions of the organizational support and impact of resilience and perceived organizational support on employee engagement in a stressful and competitive work environment.

Methods: We carried out a cross-sectional survey of 81 pharmacists, who were selected as a random sample in Saudi Arabia. Those pharmacists were assigned in highly competitive jobs within organizations such as pharmaceutical companies, hospitals and pharmaceutical distributors. We used the Utrecht Work Engagement Scale (UWES), the Brief Resilience Scale (BRS), and the Perceived Organizational Support Scale (POS) to collect the data, which then was analyzed using the descriptive and analytical tests and multiple logistic regressions in IBM® SPSS® version 24.0.

Results: Eighty one out of 100 surveys were collected back with responses—the response rate was 81% (n = 81). We obtained moderate levels of perceived organizational support and resilience; means were 4.6 ± 0.8 and 3.2 ± 0.45 , respectively. Demographic variables, resilience, and perceived organizational support predicted were approximately 29.2%, 29.6%, and 36.2%, respectively, of the variance in employee engagement. We also found a significant correlation between the pharmacists' perceptions of organizational support and their engagement ($\beta = 0.31$, $p < 0.05$), but no statistically significant relationship between resilience and employee engagement.

Conclusions: This study showed how pharmacists' perceptions of organizational support are related to their engagement in the workplace, demonstrating a significant relationship between perceived organizational support and employee engagement.

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1. Introduction

Employees in today's uncertain business climate frequently have to adapt to sudden changes, in legislation and government policy as well as in how the organization they work for is structured, in terms of things like being bought out and laying people off (Chen et al., 2015). When businesses react by downsizing and cutting costs to try to stay afloat, it has an effect on how invested their employees feel (Victor and Hoole, 2017), and how far they trust their organizations to survive (Fehr and List, 2004; Reinardy, 2010).

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In the pharmacy sector, it stands to reason that pharmacists themselves are key assets. It is a rewarding career, but one beset by stressful conditions—long hours, heavy workloads—which, aside from damaging pharmacists' own health and making it more difficult for them to function to the best of their abilities, can have a detrimental effect on the quality of the services provided, leading to loss of business beneficiaries' confidence and therefore poor financial performance (Jeannette, 2010; Mott et al., 2004). For instance, when hospital and community pharmacists in Northern Ireland were surveyed, they were found to experience moderate levels of job-related stress. Sources of stress for both groups included being frequently interrupted by phone calls and other people, having too much work to do, and not having sufficient staff to cover what needed to be done (McCann et al., 2009). As another example, a study based on a large sample of community pharmacists in France identified high levels of work-related stress, with more than 30% of participants strongly affected. In this case, the work-related stress was associated with several co-morbidities including anxiety, depression, fatigue and excessive use of medications, notably anxiolytic and hypnotic drugs (Balayssac et al., 2017). These examples are further backed up by Mott et al.'s research, which found that working in a stressful environment has a direct negative bearing on performance, especially for professionals such as pharmacists (Mott et al., 2004).

More and more researchers are focusing on the relationship between employees and their employers—specifically, how far employees believe that their superiors value their input and care about their welfare, referred to as “perceived organizational support” (Eisenberger et al., 1986). The extent to which employees feel appreciated and supported at work affects not only their performance, but also their loyalty and commitment as well as their job satisfaction and general mood (Rhoades and Eisenberger, 2002). Employees perceive organizational support where they are treated fairly, backed up by their superiors, and rewarded for work well done (Rhoades and Eisenberger, 2002). When employees feel valued by their organization, they tend to work harder to help achieve the organization's goals (Eisenberger et al., 1986).

Resilience, in general terms, describes our ability as human beings to “bounce back” when things go wrong. All sorts of things can happen to upset or even traumatize us, to knock us off balance, but those of us who are resilient are able to recover their equilibrium more quickly, to deal positively and healthily with life's inevitable blows (Tugade and Fredrickson, 2004). When applied to the workplace, resilience also describes the positive psychological capacity to recover from stressful experiences. At work, these might relate to both negative experiences, such as conflict with a colleague, or failure to meet a deadline, and positive experiences, such as getting a promotion and having increased responsibility (Kotzé and Nel, 2013; Luthans, 2002). As one of the four pillars of psychological capital (the others being hope, efficacy, and optimism), (Luthans et al., 2016), resilience has been identified as a positive contributor to employee engagement (Joo and Lee, 2017). It also appears to be closely linked to one of the dimensions of employee engagement, namely, how vigorous employees are, whether they can keep smiling while under pressure and maintain a “can-do” attitude no matter the challenges that they face (Schaufeli et al., 2002). Learning to be more resilient is vital when working in a stressful and competitive environment such as a pharmacy.

The reason why organizations globally are now measuring the engagement level of their employees is that it improves productivity and profitability as well as significantly affecting employee retention and loyalty (Mani, 2011). If employees are fully engaged in their work, they are far more likely to commit to their organization's mission statement, vision, and goals. It is about consistently being positive and positively affecting others, boosting teamwork

and morale (Maslach et al., 2001). Not only do engaged employees tend to be more productive and perform better, working harder to achieve both organizational and personal goals, but they also have a positive effect on business beneficiaries' experiences and, thus, revenues (Schaufeli and Bakker, 2004). From a human resources point of view, employees who are highly engaged at work are less likely to take time off sick (absenteeism) or to look for work elsewhere (retention) (Macey and Schneider, 2015). Loyal employees are those committed to contributing towards their organization's success and who believe that working for their current organization is their best option (Iqbal et al., 2015).

Needless to say, when employees are happy to stay with their organization, it saves money on hiring and training new staff, reducing repeated recruitment and related expenditure. Engaged employees also tend to be more proactive, showing initiative and “going the extra mile” in their task-oriented activities. This can make a crucial difference to an organization's failure or success in service industries such as healthcare, where employees who lack commitment and engagement can drag down the quality of service provided, performing poorly or failing to turn up to work at all (Sundaray, 2011).

Several management and human resources literatures discussed the relationship of perceived organizational support, resilience and employee engagement in the workplaces (Mazzetti et al., 2016; Nikhil and Arthi, 2018). These scholars have used the job demands-resources (JD-R) model proposed by Xanthopoulou et al., who classified working conditions into job demands, as the aspects of the job requiring sustained effort and associated with physiological and psychological cost, and job resources, which are the aspects of the job that help in achieving individual work-related goals (Xanthopoulou et al., 2007). Thus, within the JD-R model, perceived organizational support can be considered a job resource and personal resources where resilience mediates the relationship between job resources and employee engagement. Another approach to explain the relationship between perceived organizational support, resilience and employee engagement is by conservation of resources (COR) theory, which posits that job resources, when readily available, can only accumulate and therefore lead to positive outcomes (Hobfoll, 2002). This can be interpreted as the availability of job resources (perceived organizational support) leads to accumulation of personal resources such as resilience, which in turn leads to positive outcomes such as employee engagement (Llorens et al., 2007; Xanthopoulou et al., 2007). If pharmacists have a positive perception of the organizational support that is available to them, they are likely to have a positive perception of their personal resources, too – and when their resilience is enhanced, it increases their engagement in the workplace.

In Saudi Arabia, 29,090 pharmacists, of whom 28.4% are Saudi (SCFHS, 2018), are registered with the Saudi Commission for Health Specialties (SCFHS), which is fewer pharmacists per capita (7.9 per 10,000 population) compared with developed countries (averagely, 9.4 per 10,000 population) (MOH., 2016). Pharmacists in Saudi Arabia mostly practice in hospitals and community pharmacies, academic institutions and pharmaceutical industry organizations as well as for health and drug authorities (Al-Jedai et al., 2016). Saudi businesses privately own the community pharmacies in Saudi Arabia and there are numerous chains. Despite this, however, community pharmacy is not well developed and only a very small number of Saudi pharmacists practice in community pharmacies, with the majority of community pharmacists coming from different countries, mainly those bordering Saudi Arabia including Egypt, Jordan, Syria, and Palestine (Bawazir, 2005). Saudi pharmacists tend to prefer working in settings other than the community pharmacy because they pay higher salaries and offer greater job satisfaction (Al-Jedai et al., 2016; Bawazir, 2005). Most Saudi

pharmacists, in fact, work in hospitals, because hospital pharmacy is considered one of the best and most advanced practices in Saudi Arabia (Alsultan et al., 2012a; Alsultan et al., 2012b). As various reports and studies show, many countries, including Saudi Arabia, agree that a pharmaceutical career is perhaps one of the most stressful and demanding, requiring great levels of skills and almost unlimited patience (Dowling, 2018; Kennedy, 2016). There have so far been a very few studies in Saudi Arabia that delved pharmacists' job-related stress and those that are available tend to focus primarily on exploring job satisfaction rather than stress or look at stress as experienced by all healthcare professionals (Al Mutair et al., 2017; Yasin et al., 2017) rather than pharmacists alone in either community (Bawazir, 2005; Suleiman, 2015; Zahrani et al., 2017) or hospital setting (Benslimane and Khalifa, 2016; Slimane, 2017). Regardless, however, all these studies report controversial levels of job satisfaction; and agreed and addressed a number of work-related stressors in their findings. More specifically, as far as the researchers are aware, no one has before now looked at the link between Saudi pharmacists' resilience and engagement and their perceptions of the organizational support available to them, yet organizational success in such a demanding field seems to depend on all three elements. The objectives of this study were to explore the relationship between perceived organizational support, resilience, and employee engagement among pharmacists who are working in competitive, and therefore stressful, environments; to investigate the effects of pharmacists' demographic factors, perceived organizational support and resilience on employee engagement to establish whether they hold predictive value for employee engagement.

2. Method

Between February and April 2018, we conducted a cross-sectional study by sending out an electronic questionnaire, either directly or through unit and department managers and directors, to a random sample of 100 pharmacists working in Saudi Arabia in different jobs, for different types of organization in different work sectors, that is, governmental organizations (owned and controlled by the Saudi government and subject to the Saudi Ministry of Civil Service salary scheme), private organizations (owned, controlled and financed by private businessmen), and mixed organizations (owned and controlled by the Saudi government, though with employees receiving allowances and benefits similar to those provided by private organizations). In this questionnaire, which was written in English, we asked the pharmacists how they perceive the organizational support available to them and how this affects their resilience and engagement as employees. To make the results more generalizable and keeping in mind that employees in the same organization are subject to the same work policies, procedures, and environment, we surveyed only two pharmacists from each organization. In total, we approached 50 different organizations, including hospital pharmacies, pharmaceutical companies, pharmaceutical distributors, regulatory agencies, and universities. We asked unit and department directors and managers from each organization to provide us with a random list of names and email addresses so that we could contact their pharmacists. We focused on those working in highly competitive fields such as outpatient pharmacy, marketing, and teaching, among other professions. If our request for contact details was not granted, we asked the unit and department directors and managers to forward our questionnaire link to those pharmacists for us. We obtained approval for our study from the Institutional Review Board (IRB) of King Saud University Medical City (KSUMC), IRB number E-18-3286.

Pharmacists were asked to answer the questionnaire anonymously and collected the data using a validated online survey tool

(Google Forms®). Our survey had five sections: the first section focused on pharmacists' demographics including age, gender, marital status, nationality, years of experience, job nature, monthly salary, and length of service with current employer; the second section consisted of questions about the organization's characteristics including the organization's nationality (referring to the organization's jurisdiction of formation), business model, and organization status; and there were another three sections that contained items from three validated measurement scales that looked at both dependent and independent variables on validated Likert measurement scales.

The first scale—the Utrecht Work Engagement Scale Short Questionnaire (UWES-9) measuring employee work engagement (Schaufeli et al., 2016)—scored nine statements on a seven-point Likert scale varying from 1 = never to 7 = every day. The reasons for choosing this scale over others because it is suited to the stressful nature of pharmacists' jobs, with their consequential risks of emotional exhaustion and burnout, and it was successfully adopted in several previous healthcare-related studies (Anel and Karl, 2018; Dumisani and Nicole, 2013; Torabinia et al., 2017). The second scale—the Brief Resilience Scale (BRS-6) measuring resilience as the first independent variable (Smith et al., 2008)—scored six statements on a five-point Likert scale varying from 1 = strongly disagree to 5 = strongly agree. We chose to use this scale because of its suitability for assessing resilience in its original and most basic form and also because it was used in previous study of healthcare professionals (Waddimba et al., 2016). The third scale—the shorter version of the Perceived Organizational Support Scale (POS-8) measuring perceived organizational support as the second independent variable (Eisenberger et al., 1986)—scored eight statements on a seven-point Likert scale varying from 1 = strongly disagree to 7 = strongly agree. The scale measures employees' views regarding the extent to which employers value their contributions and care about their well-being. The reasons for choosing this scale because it can reflect belief held by an employee that the organization values his or her continued membership and is generally concerned about his or her well-being in addition for being used previously in health-related study (Sania et al., 2016).

The interesting thing about using these three scales is that none of them have been used previously in any pharmacy-related studies in Saudi Arabia. We piloted the original version of the survey on 15 pharmacists who would not be taking part in the main study. We tested the measuring instruments for reliability using Cronbach's alpha coefficient, which gave us a score of 0.91, 0.80, and 0.81 for UWES-9, BRS, and POS, respectively, indicating a good overall level of reliability (Tavakol and Dennick, 2011). We coded the responses from the three scales as interval data with numerical properties associated with the quantitative random variables of employee engagement, resilience, and perceived organizational support.

We used descriptive statistics to arrive at the frequencies, percentages, mean, and standard deviation (SD). We reversed all negatively worded items within the scales and then derived summary scores by averaging the responses to the relevant items. We used multiple regressions from the independent variables (resilience and perceived organizational support) to predict the continuous dependent variable (employee engagement). We also ensured that all required assumptions for multiple regression analyses were met before we conducted the analyses and performed two-way analysis of variance (ANOVA) to show what effect the independent variables had on the dependent variable. Further, we used ANOVA to determine whether a predictive relationship of significance existed among the variables. We performed all our statistical analyses with a 0.05 significance level, using IBM® SPSS® Statistics for Windows, version 24.0 (Armonk, NY: IBM Corp, 2016).

3. Results

During the data collection period, we sent out 100 surveys and got 81 responses—a response rate of 81% ($n = 81$). Table 1 shows the study participants' demographic frequencies and percentages, including mean age— 30.7 ± 6.1 years—and mean years' work experience— 8.4 ± 5.6 years. Of the respondents, 53% ($n = 43$) were female, 50% were married, the majority were between 21 and 40 years old (90.2%; $n = 73$), and 21% more worked for a private organization ($n = 48$) than for a public one (Table 1). Breaking down the work details further, 59.3% ($n = 48$) worked in hospitals, about 73% ($n = 59$) of which were owned by the Saudi government, and approximately 45% had been employed by their organization for 1–5 years (Table 1).

Table 1
Sociodemographic characteristics of study participants ($n = 81$).

Variables	Frequency (n)	Percent (%)	Mean (SD)
<i>Gender of respondents:</i>			
Female	43	53.1	
Male	38	46.9	
<i>Age of respondents (years):</i>			
21–30	42	51.9	30.7
31–40	31	38.3	(6.1)
41–50	7	8.6	
51–60	1	1.2	
<i>Nationality:</i>			
Saudi	55	67.9	
Non-Saudi	26	32.1	
<i>Marital status:</i>			
Single	39	48.1	
Married	40	49.4	
Divorced	2	2.5	
<i>Monthly income SAR (US\$):</i>			
Less than 10,000 (2666)	19	23.5	
10000–15000 (2667–4000)	36	44.4	
15001–20000 (4001–5333)	17	21.0	
20001–25000 (5334–6666)	6	7.4	
25001–30000 (6667–8000)	3	3.7	
<i>Types of institution:</i>			
Governmental	31	38.3	
Private	48	59.3	
Mixed	2	2.5	
<i>Work sector:</i>			
Hospital	48	59.3	
Pharmaceutical industry	25	30.9	
*Others	8	9.8	
<i>Institution nationality:</i>			
Saudi	59	72.8	
Non-Saudi	22	27.2	
<i>Years of work experience (years):</i>			
1–5	23	28.4	
6–10	28	34.6	
11–15	19	23.5	8.4 (5.6)
> 15	11	13.6	
<i>Length of service with current employer (years):</i>			
1–5	36	44.4	6.6 (5.3)
6–10	26	32.1	
11–15	12	14.8	
> 15	7	8.6	
<i>Job nature:</i>			
Non managerial	63	77.8	
Managerial	18	22.2	

SAR 3.75 is equal to US \$ 1.

* Others: pharmaceutical distributors, regulatory agencies, and universities.

3.1. Employee engagement

We assessed employee engagement using UWES-9, scoring responses to nine statements on a seven-point Likert scale—see Table 2. There was a very good level of employee engagement—mean score 5.1—and very few respondents disagreed—standard deviation dispersion 0.84.

3.2. Resilience

We assessed resilience using BRS-6, scoring responses to six statements on a five-point Likert scale—see Table 3. There was a moderate level of perceived resilience—mean score 3.2—and respondents disagreed slightly—standard deviation dispersion 0.45.

3.3. Perceived organizational support

We assessed perceived organizational support using POS-8, scoring responses to eight statements on a seven-point Likert scale—see Table 4. There was a moderate level of perceived organizational support—mean score 4.6—and few respondents disagreed—standard deviation dispersion 0.83.

3.4. ANOVA and multiple regressions

In terms of variance in employee engagement, as Table 5 shows, demographic variables (gender, age, length of service, years of work experience, total monthly salary, and marital status) predicted approximately 29.2%, resilience predicted about 29.6%, and perceived organizational support predicted approximately 36.2%. Both the demographic variables ($F = 2.89$, $p = 0.004$) and the perceived organizational support ($F = 7.07$, $p = 0.010$) were statistically significant predictors of employee engagement, while no statistically significant relationship was found between resilience ($F = 0.36$, $p = 0.548$) and employee engagement.

Further, Table 6 shows the regression coefficient of perceived organizational support to be statistically significant ($\beta = 0.31$, $p = 0.010$). In addition, there was a statistically significant relationship between total organizational support and total monthly salary. Also, a significant relationship was observed between resilience and total monthly salary. Finally, there was a statistically significant relationship between perceived organizational support and employee engagement, but no statistically significant relationship between resilience and employee engagement.

4. Discussion

Employees such as pharmacists, who have demanding jobs, need the backing of their superiors in order to thrive in their stressful work environment. Being reassured that they are valued and cared about boosts their self-esteem and protects them from the harmful effects of stress. This is why researchers into organizational behavior are focusing so much lately on how employees perceive the support that is available to them from their organization. Not only does believing that you have the support of your organization reduce workplace stress, but it also helps to combat work-related fatigue, which can lead to depression (Liu et al., 2013). Employees who feel secure in the knowledge that they have the full support of their organization tend to be more loyal and committed and have greater job satisfaction (Rhoades and Eisenberger, 2002). Employees need to feel valued and supported in the workplace, but this is to the benefit of the organization, too, because keeping employees happy at work means that they are less likely to move to other organizations, which reduces the

Table 2
Pharmacists responses on employee engagement (UWES-9) questionnaire.

Number	Statement	Scale to response						
		Never, n (%)	Almost never, n (%)	Rarely, n (%)	Sometimes, n (%)	Often, n (%)	Very often, n (%)	Always, n (%)
1	At my work, I feel bursting with energy	0 (0)	2 (2.5)	1 (1.2)	20 (24.7)	26 (32.1)	22 (27.2)	10 (12.3)
2	When I get up in the morning, I feel like going to work	1 (1.2)	1 (1.2)	7 (8.6)	25 (30.9)	21 (25.9)	19 (23.5)	7 (8.6)
3	At my job, I feel strong and vigorous	0 (0)	0 (0)	2 (2.5)	21 (25.9)	25 (30.9)	23 (28.4)	10 (12.3)
4	I am enthusiastic about my job	0 (0)	0 (0)	1 (1.2)	24 (29.6)	22 (27.2)	23 (28.4)	11 (13.6)
5	My job inspires me	0 (0)	0 (0)	6 (7.4)	20 (24.7)	32 (39.5)	14 (17.3)	9 (11.1)
6	I am proud of the work that I do	0 (0)	0 (0)	6 (7.4)	15 (18.5)	25 (30.9)	16 (19.8)	19 (23.5)
7	I feel happy when I am working intensely	0 (0)	2 (2.5)	6 (7.4)	20 (24.7)	27 (33.3)	17 (21.0)	9 (11.1)
8	I am immersed in my work	0 (0)	0 (0)	2 (2.5)	21 (25.9)	27 (33.3)	22 (27.2)	9 (11.1)
9	I get carried away when I am working	1 (1.2)	2 (2.5)	6 (7.4)	23 (28.4)	25 (30.9)	15 (18.5)	9 (11.1)

Table 3
Pharmacists responses on resilience (BRS-6) questionnaire.

Number	Statement	Scale to response				
		Strongly Disagree, n (%)	Disagree, n (%)	Neutral, n (%)	Agree, n (%)	Strongly Agree, n (%)
1	I tend to bounce back quickly after hard times	0 (0)	7 (8.6)	35 (43.2)	35 (43.2)	4 (4.9)
2	I have a hard time making it through stressful events	3 (3.7)	14 (17.3)	34 (42.0)	30 (37.0)	0 (0)
3	It does not take me long to recover from a stressful event.	2 (2.5)	9 (11.9)	32 (39.5)	33 (40.7)	5 (6.2)
4	It is hard for me to snap back when something bad happens	3 (3.7)	14 (17.3)	30 (37.0)	31 (38.3)	3 (3.7)
5	I usually come through difficult times with little trouble	1 (1.2)	11 (13.6)	41 (50.6)	23 (28.4)	5 (6.2)
6	I tend to take a long time to get over set-backs in my life	3 (3.7)	21 (25.9)	40 (49.5)	15 (18.4)	2 (2.5)

Table 4
Pharmacists responses on perceived organization support (POS-8) questionnaire.

Number	Statement	Scale to response						
		Strongly Disagree, n (%)	Moderately Disagree, n (%)	Slightly Disagree, n (%)	Neutral, n (%)	Slightly Agree, n (%)	Moderately Agree, n (%)	Strongly Agree, n (%)
1	The organization strongly considers my goals and values	1 (1.2)	1 (1.2)	7 (8.6)	33 (40.7)	21 (25.9)	11 (13.6)	7 (8.6)
2	Help is available from the organization when I have a problem	1 (1.2)	1 (1.2)	7 (8.6)	30 (37.0)	24 (29.6)	12 (14.8)	7 (8.6)
3	The organization really cares about my wellbeing	2 (2.5)	2 (2.5)	9 (11.1)	28 (34.6)	19 (23.5)	13 (16.0)	8 (9.9)
4	The organization would forgive an honest mistake on my part	3 (3.7)	2 (2.5)	4 (4.9)	31 (38.3)	23 (28.4)	10 (12.3)	8 (9.9)
5	The organization is willing to help me when I need a special favor	1 (1.2)	4 (4.9)	4 (4.9)	30 (37.0)	27 (33.3)	7 (8.6)	8 (9.9)
6	If given the opportunity, the organization would take advantage of me	2 (2.5)	1 (1.2)	7 (8.6)	28 (34.6)	25 (30.9)	8 (9.9)	10 (12.3)
7	The organization shows very little concern for me	4 (4.9)	4 (4.9)	5 (6.2)	38 (46.9)	18 (22.2)	6 (7.4)	6 (7.4)
8	The organization cares about my opinions	0 (0)	2 (2.5)	7 (8.6)	31 (38.3)	23 (28.4)	11 (13.6)	7 (8.6)

Table 5
Model summary of employee engagement.

Model	F Change	R	R ²	Adjusted R ²	Sig. F change
1	2.889	.541 ^a	0.292	0.191	0.004
2	0.364	.544 ^b	0.296	0.184	0.548
3	7.076	.602 ^c	0.362	0.250	0.010

^a Predictors: (Constant), Experience with current employer, work sector, gender, marital status, corporate business model status, total monthly salary, company nationality, age, years of experience.

^b Predictors: (Constant), experience with current employer, work sector, gender, marital status, corporate business model status, total monthly salary, company nationality, age, years of experience, total resilience.

^c Predictors: (Constant), experience with current employer, work sector, gender, marital status, corporate business model status, total monthly salary, company nationality, age, years of experience, total resilience, total organizational support.

need to recruit and train new staff, thereby saving money. Thus, supporting employees and treating them fairly is not only ethical; it also makes good business sense. Conversely, employees who do

not have their managers' support are more dissatisfied with their work, more prone to conflict with colleagues, and generally have less faith in their organization (Bobbio et al., 2012). It has been

Table 6
Coefficients of employee engagement.

Model	Variables	β	Std. error	Std β	t	Sig.	
1 ^a	Constant	13.001	18.767	–	0.693	0.491	
	Years of experience	–1.743	0.930	–1.302	–1.874	0.065	
	Work sectors	1.901	1.149	0.280	1.654	0.103	
	Institution nationality	–3.500	2.903	–0.209	–1.206	0.232	
	Corporate business model status	–2.742	1.774	–0.195	–1.546	0.127	
	Total monthly salary	3.599	1.103	0.488	3.264	0.002*	
	Pharmacist nationality	3.555	2.052	0.223	1.733	0.088	
	Marital status	–1.270	1.627	–0.093	–0.780	0.438	
	Age	1.360	0.856	1.104	1.590	0.116	
	Gender	–1.886	1.741	–0.126	–1.083	0.283	
	Experience with current employer	–0.031	0.355	–0.022	–0.088	0.930	
	2 ^b	Constant	13.198	18.856	–	0.700	0.486
		Years of experience	–1.912	0.975	–1.428	–1.960	0.054
Work sectors		1.988	1.164	0.293	1.709	0.092	
Institution nationality		–3.823	2.965	–0.228	–1.290	0.202	
Corporate business model status		–2.526	1.818	–0.179	–1.390	0.169	
Total monthly salary		3.597	1.108	0.488	3.247	0.002*	
Pharmacist nationality		3.614	2.063	0.227	1.751	0.084	
Marital status		–1.441	1.659	–0.106	–0.868	0.388	
Age		1.517	0.898	1.231	1.689	0.096	
Gender		–1.968	1.755	–0.132	–1.121	0.266	
Experience with current employer		–0.018	0.357	–0.013	–0.049	0.961	
Total resilience		–0.187	0.310	–0.067	–0.603	0.548	
3 ^c		Constant	8.694	18.156	–	0.479	0.634
	Years of experience	–1.700	0.939	–1.270	–1.811	0.075	
	Work sectors	1.713	1.120	0.253	1.529	0.131	
	Institution nationality	–4.079	2.844	–0.244	–1.435	0.156	
	Corporate business model status	–2.517	1.743	–0.179	–1.444	0.153	
	Total monthly salary	2.645	1.120	0.359	2.361	0.021*	
	Pharmacist nationality	3.004	1.991	0.188	1.508	0.136	
	Marital status	–0.525	1.627	–0.038	–0.322	0.748	
	Age	1.424	0.861	1.155	1.652	0.103	
	Gender	–1.990	1.682	–0.133	–1.183	0.241	
	Experience with current employer	–0.041	0.343	–0.029	–0.119	0.906	
	Total resilience	–0.407	0.308	–0.146	–1.321	0.191	
	Total organizational support	0.349	0.131	0.310	2.660	0.010*	

* means $p < 0.05$; β = regression coefficient; Std. β = standardized regression coefficient; Sig. = significance.

^a Predictors: (Constant), Experience with current employer, work sector, gender, marital status, corporate business model status, total monthly salary, company nationality, age, years of experience.

^b Predictors: (Constant), experience with current employer, work sector, gender, marital status, corporate business model status, total monthly salary, company nationality, age, years of experience, total resilience.

^c Predictors: (Constant), experience with current employer, work sector, gender, marital status, corporate business model status, total monthly salary, company nationality, age, years of experience, total resilience, total organizational support.

found that those in managerial or other high-status roles typically have an incomplete understanding of what constitutes workplace respect; they do not consider it to be important. Particularly relevant is the treatment employees received from their direct supervisors, as, rightly or wrongly, their behavior is thought to reflect the ethics of the organization (Slimane, 2017).

We carried out this study to explore the relationship between perceived organizational support, resilience, and employee engagement among pharmacists working in Saudi Arabia. The mean score for POS was 4.6, indicating that average response was close to “slightly agree,” and thus endorsing a moderate level of perceived organizational support. The sample in our study slightly agreed with the statements on perceived organizational support, indicating the extent to which employees believed that they had the support of their organization and that their employers valued their contribution and cared about their well-being (Deconinck et al., 2015). These results are consistent with those of certain other studies (Gorji et al., 2014; Mathumbu and Dodd, 2013), where respondents reported a moderate level of perceived organizational support, although there are studies that have found employees' perceptions of organizational support to be low. For instance, a study of Italian nurses found a mean score of 2.26 ± 0.78 —lower than Eisenberger et al.'s central point value (Bobbio et al., 2012)—and a study of nurses in Tehran found a mean

score of 2.63 ± 0.79 (Robaee et al., 2018). These differences in results could be owing to variations in research populations, organizations' policies, managers' leadership styles, and measuring instruments used. In terms of employee engagement, our study is in line with others showing a positive relationship with perceived organizational support (Mathumbu and Dodd, 2013), as it predicted approximately 36.2% of the variance in employee engagement and also proved the regression coefficient to be statistically significant ($\beta = 0.31$, $p < 0.05$).

Pharmacists regularly experience stress caused by a number of factors including being overloaded with work while having to maintain service excellence, juggling time constraints and competing demands, managing role conflicts and staffing issues, having to do shift work leading to lack of self-care, and getting embroiled in conflicts with colleagues at all levels, including physicians, peers, and supervisors (Gaither et al., 2008; Mott et al., 2004; Wolfgang et al., 1985). One questionnaire-based survey of pharmacists working in Saudi hospitals reported that clinical pharmacists complained the most about the heaviness of the workload and that a higher percentage of female pharmacists were not satisfied with the hours that they were required to work (Slimane, 2017). All of these can have a devastating effect on pharmacists' physical and psychological well-being, as well as how they see their job and organization—how motivated, committed, and happy in their work

they are—and how they handle their lives outside work, their family relationships. To deal with all of this successfully, pharmacists need to be resilient—a quality that is so important for boosting health and performance that some workplaces are now offering resilience-building programs (Vanhove et al., 2016). In our study, the moderate level of resilience—mean score 3.2—was linked to almost 29.6% of the variance in employee engagement ($F = 0.36$, $p = 0.548$), but no statistically significant relationship was found with employee engagement. One possible explanation for this result could be that the predictive power of resilience for employee engagement could be stronger if it was defined and quantified in conjunction with the other pillars of psychological capital (self-efficacy, optimism, and hope). It is also possible that the relationship between resilience and employee engagement is more complex than what can be explained by a simple prediction model. These results support other studies (Anel and Karl, 2018; Mache et al., 2014), while it has been further shown that building resilience, by increasing employees' self-efficacy (Tusaie and Dyer, 2004), can help employees to cope better with negative situations, obstacles, and uncertainty, making them more likely to be successful. In addition, although resilience did not predict employee engagement for the population under study, this may be different in other populations.

Several researches have focused on employee engagement recently, because it is believed to be vital for improving motivation and productivity (Maslach et al., 2001), as well as performance and efficiency (Harter et al., 2002), and attendance and retention (Schaufeli et al., 2016). Our study found a very good level of engagement—mean score 5.1—which is in line with a similar study of Saudi nurses (Aboshaiqah et al., 2016). If organizations are to succeed, they must have engaged employees, because they are more loyal and more likely to stay with their organizations. In the healthcare sector, having highly engaged employees leads to better-quality and timely patient care as well as improved financial performance (Lowe, 2012), so it can be a predictor of organizational success.

In our study, monthly salary was found to be a significant predictor in all models and thus it can increase pharmacists' engagement in their organizations. This is in line with the findings of local studies which explored pharmacists' job satisfaction and ranked salary as one of the strongest employee motivators regardless of whether the pharmacists work in a hospital (Benslimane and Khalifa, 2016; Slimane, 2017) or a community setting (Suleiman, 2015; Zahrani et al., 2017). Likely, the reason for these significant results between salary, POS, and pharmacists' engagement has much to do with the vital, driving role that money plays in every organization. Pharmacists need money to satisfy their basic human needs; the more money they earn, the better their quality of life is, thus, salary acts as a crucial motivator, driving pharmacists to improve performance, take on more responsibility and prove themselves trustworthy in the workplace. From the organization's perspective, offering sufficiently high salaries enables employers to attract, develop and retain the best employees and instills confidence in the financial health and future stability of the organization. Moreover, raising remuneration regularly is an effective way for managers to show appreciation for their teams, fostering open and clear communication, building trust and allowing outstanding individual efforts to be rewarded, thus reinforcing the motivation for employees to seek opportunities for self-development and improve their workplace performance.

Pharmacists' main priority is providing safe and effective patient care. The profession must recognize that if it fails to care for its pharmacists, they will not be able to provide adequate care for their patients and customers. Regular exposure to trauma or distress, incredibly, is expected within pharmacist workplaces, which leads to heightened rates of mental health problems if

pharmacists are not able to exercise resilience to protect their well-being. One study has suggested that certain types of resilience training, particularly interventions using mindfulness and cognitive behavioral therapy (CBT) techniques, appear to be beneficial in promoting resilience (Joyce et al., 2018). Furthermore, increasing engagement is a multifaceted challenge, but there are a number of common themes. Increased communication, less micromanaging, and greater responsibilities for pharmacists will put healthcare organizations in a far better position to achieve their desired outcomes. Other mechanisms for building a workplace culture of employee engagement include defining the employee's role in fulfilling the organization's purpose, selecting employees with capability and passion, supporting and valuing employees, creating sustainable reward systems, and developing feedback and reinforcement mechanisms (Halm, 2011).

Our research study is limited by its descriptive design and reliance on self-reported data; it is possible that not all of the respondents completed the questionnaire accurately. Other limitations are the small sample size and the cross-sectional design, which gave only a snapshot of the specific time frame used, meaning that any conclusions drawn about cause and effect relationships might have been skewed. Whereas this study used a quantitative survey, any further research must combine quantitative and qualitative data to obtain more reliable and therefore more valuable findings.

5. Conclusions

This study explored the relationship between perceived organizational support, resilience, and employee engagement among pharmacists who are working in competitive, and therefore stressful, environments and we found a significant relationship between perceived organizational support and employee engagement. This suggests that measuring, analyzing, and improving employees' engagement at work can help organizations to foster motivation, productivity, and retention. The level of engagement in the workplace determines whether pharmacists are productive and likely to stay with the organization—instead of quitting and perhaps joining a competitor organization, when working in the private sector. Without cultivating a workplace environment that boosts employee engagement, managers and directors will find that turnover increases and efficiency declines, leading to low levels of loyalty and decreased value. Ultimately, poor employee engagement costs organizations money and is, in the long run, detrimental to organizational success. It is, therefore, vital for top managers to make sure that those in supervisory positions are positive and effective people managers and to set in place workplace policies and practices that focus on employee well-being, health, and work–life balance. Moreover, it is hoped that the results from this study will encourage fruitful discussion between academics and organization leaders that will help to direct future research and practice, with the overall aim of building and boosting perceived organizational support, resilience, and employee engagement in stressful and competitive work environments.

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Declaration of Competing Interest

No competing interest exists.

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References

- Aboshaiqah, A.E., Hamadi, H.Y., Salem, O.A., Zakari, N.M., 2016. The work engagement of nurses in multiple hospital sectors in Saudi Arabia: a comparative study. *J. Nurs. Manag.* 24, 540–548.
- Al-Jedai, A., Qaisi, S., Al-Meman, A., 2016. Pharmacy practice and the health care system in Saudi Arabia. *Can. J. Hosp. Pharm.* 69, 231–237.
- Al Mutair, A., Al Obaidan, F., Al-Muhaini, M., Al Salman, K., Al Mosajen, S., 2017. Cross-sectional study of the overall emotional functioning of health-care providers in Saudi. *Saudi Crit. Care J.* 1, 80.
- Alsultan, M.S., Khurshid, F., Mayet, A.Y., Al-Jedai, A.H., 2012a. Hospital pharmacy practice in Saudi Arabia: dispensing and administration in the Riyadh region. *Saudi Pharm. J.* 20, 307–315.
- Alsultan, M.S., Khurshid, F., Salamah, H.J., Mayet, A.Y., Al-Jedai, A.H., 2012b. Hospital pharmacy practice in Saudi Arabia: prescribing and transcribing in the Riyadh region. *Saudi Pharm. J.* 20, 203–210.
- Anel, M., Karl, H., 2018. The impact of resilience and perceived organisational support on employee engagement in a competitive sales environment. *SA J. Hum. Resour. Manag.* 16, 1–11.
- Balayssac, D., Pereira, B., Virot, J., Lambert, C., Collin, A., Alapini, D., Gagnaire, J.M., Authier, N., Cuny, D., et al., 2017. Work-related stress, associated comorbidities and stress causes in french community pharmacies: a nationwide cross-sectional study. *PeerJ* 5, e3973.
- Bawazir, S.A., 2005. Job satisfaction in Saudi community pharmacists. *J. Pharm. Pract. Res.* 35, 334.
- Benslimane, N., Khalifa, M., 2016. Evaluating pharmacists' motivation and job satisfaction factors in Saudi hospitals. *Stud. Health Technol. Inform.* 226, 201–204.
- Bobbio, A., Bellan, M., Manganelli, A.M., 2012. Empowering leadership, perceived organizational support, trust, and job burnout for nurses: a study in an Italian general hospital. *Health Care Manag. Rev.* 37, 77–87.
- Chen, S., Westman, M., Hobfoll, S.E., 2015. The commerce and crossover of resources: resource conservation in the service of resilience. *Stress Health* 31, 95–105.
- Deconinck, J.B., Deconinck, M.B., Lockwood, F., 2015. Influence of job fit, perceived support, and organizational identification in the sales force: an analysis of antecedents and outcomes. *Arch. Bus. Res.* 3, 51–59.
- Dowling, H., 2018. Managing stress in pharmacy: Creating a healthier working environment in pharmacy by managing workplace stress. Available at: <https://www.Supportforpharmacists.Org.au/images/managing-stress-in-pharmacy-au-2018.Pdf>. (accessed 12-8-2019).
- Dumisani, M., Nicole, D., 2013. Perceived organisational support, work engagement and organisational citizenship behaviour of nurses at victoria hospital. *J. Psychol.* 4, 87–93.
- Eisenberger, R., Huntington, R., Hutchison, S., Sowa, D., 1986. Perceived organizational support. *J. Appl. Psychol.* 71, 500–507.
- Fehr, E., List, J.A., 2004. The hidden costs and returns of incentives—trust and trustworthiness among CEOs. *J. Eur. Econ. Assoc.* 2, 743–771.
- Gaither, C.A., Kahaleh, A.A., Doucette, W.R., Mott, D.A., Pederson, C.A., Schommer, J.C., 2008. A modified model of pharmacists' job stress: the role of organizational, extra-role, and individual factors on work-related outcomes. *Res. Social Adm. Pharm.* 4, 231–243.
- Gorji, H.A., Etemadi, M., Hoseini, F., 2014. Perceived organizational support and job involvement in the Iranian health care system: a case study of emergency room nurses in general hospitals. *J. Educ. Health Promot.* 3, 58.
- Halm, B., 2011. Employee engagement: a prescription for organizational transformation. *Adv. Health Care Manag.* 10, 77–96.
- Harter, J.K., Schmidt, F.L., Hayes, T.L., 2002. Business-unit-level relationship between employee satisfaction, employee engagement, and business outcomes: a meta-analysis. *J. Appl. Psychol.* 87, 268–279.
- Hobfoll, S.E., 2002. Social and psychological resources and adaptation. *Rev. Gen. Psychol.* 6, 307–324.
- Iqbal, A., Tufail, M.S., Lodhi, R.N., 2015. Employee loyalty and organizational commitment in Pakistani organizations. *GJHRM* 3, 1–11.
- Jeannette, Y.W., 2010. Beating behind-the-counter job stress. Available at: <https://www.Pharmacytimes.Com/publications/issue/2010/october2010/Beatingjobstress-1010>, Pharmacy Times. (accessed 7-5-2019).
- Joo, B., Lee, I., 2017. Workplace happiness: Work engagement, career satisfaction, and subjective well-being. *Evid.-Based Hrm.* 5, 206–221.
- Joyce, S., Shand, F., Tighe, J., Laurent, S.J., Bryant, R.A., Harvey, S.B., 2018. Road to resilience: a systematic review and meta-analysis of resilience training programmes and interventions. *BMJ Open* 8, e017858.
- Kennedy, B., 2016. Pharmacists among the most stressed professions. Available at: <https://www.Chemistanddruggist.Co.Uk/news/pharmacists-among-most-stressed-professions>. (accessed 18-8-2019).
- Kotzé, M., Nel, P., 2013. Psychometric properties of the adult resilience indicator. *SA J. Ind. Psychol.* 39
- Liu, L., Hu, S., Wang, L., Sui, G., Ma, L., 2013. Positive resources for combating depressive symptoms among Chinese male correctional officers: perceived organizational support and psychological capital. *BMC Psych.* 13, 89.
- Llorens, S., Schaufeli, W., Bakker, A., Salanova, M., 2007. Does a positive gain spiral of resources, efficacy beliefs and engagement exist? *Comput. Hum. Behav.* 23, 825–841.
- Lowe, G., 2012. How employee engagement matters for hospital performance. *Healthc. Q* 15, 29–39.
- Luthans, F., 2002. The need for and meaning of positive organizational behavior. *J. Organ. Behav.* 23, 695–706.
- Luthans, F., Vogelgesang, G.R., Lester, P.B., 2016. Developing the psychological capital of resiliency. *Hum. Resour. Dev. Rev.* 5, 25–44.
- Macey, W.H., Schneider, B., 2015. The meaning of employee engagement. *Ind. Organ. Psychol.* 1, 3–30.
- Mache, S., Vitzthum, K., Wanke, E., David, A., Klapp, B.F., Danzer, G., 2014. Exploring the impact of resilience, self-efficacy, optimism and organizational resources on work engagement. *Work* 47, 491–500.
- Mani, V., 2011. Analysis of employee engagement and its predictors. *Int. J. Hum. Resour. Stud.* 1, 15–26.
- Maslach, C., Schaufeli, W.B., Leiter, M.P., 2001. Job burnout. *Ann. Rev. Psychol.* 52, 397–422.
- Mathumbu, D., Dodd, N., 2013. Perceived organisational support, work engagement and organisational citizenship behaviour of nurses at victoria hospital. *J. Psychol.* 4, 87–93.
- Mazzetti, G., Guglielmi, D., Chiesa, R., Mariani, M.G., 2016. Happy employees in a resourceful workplace: just a direct relationship? *Career Dev. Int.* 21, 682–696.
- McCann, L., Hughes, C.M., Adair, C.G., Cardwell, C., 2009. Assessing job satisfaction and stress among pharmacists in Northern Ireland. *Pharm. World Sci.* 31, 188–194.
- MOH, 2016. Ministry of health. Health indicators for the year of 1437 h. Available at: <https://www.Moh.Gov.Sa/en/ministry/statistics/indicator/pages/indicator-1437.aspx> (accessed 10-5-2019).
- Mott, D.A., Doucette, W.R., Gaither, C.A., Pedersen, C.A., Schommer, J.C., 2004. Pharmacists' attitudes toward worklife: results from a national survey of pharmacists. *J. Am. Pharm. Assoc.* 44, 326–336.
- Nikhil, S., Arthi, J., 2018. Perceived organisational support and work engagement: mediation of psychological capital - a research agenda. *JSHRM* 7, 8.
- Reinardy, S., 2010. Downsizing effects on personnel: the case of layoff survivors in U.S. *J. Media Bus Stud.* 7, 1–19.
- Rhoades, L., Eisenberger, R., 2002. Perceived organizational support: a review of the literature. *J. Appl. Psychol.* 87, 698–714.
- Robaee, N., Atashzadeh-Shoorideh, F., Ashktorab, T., Baghestani, A., Barkhordari-Sharifabad, M., 2018. Perceived organizational support and moral distress among nurses. *BMC Nurs.* 17, 2.
- Sania, Z.M., Sadaf, Z.K., Namra, N., 2016. The effect of perceived organizational support on doctors' organizational commitment in Pakistan. *LJB* 4, 73–92.
- SCFHS, 2018. Saudi commission for health specialties: 2018-2027. Available at https://www.Scfhs.Org.Sa/media/digitalibrary/documentlibrary/otherpublications/documents/d9%88%d8%a7%d9%82%d8%b9_%d8%a7%d9%84%d9%82%d9%88%d9%89_%d8%a7%d9%84%d8%b9%d8%a7%d9%85%d9%84%d8%a9_%d8%a7%d9%84%d8%b5%d8%ad%d9%8a%d8%a9.Pdf. (accessed 10-5-2019).
- Schaufeli, W.B., Bakker, A.B., 2004. Job demands, job resources, and their relationship with burnout and engagement: a multi-sample study. *J. Organ. Behav.* 25, 293–315.
- Schaufeli, W.B., Bakker, A.B., Salanova, M., 2016. The measurement of work engagement with a short questionnaire. *Educ. Psychol. Meas.* 66, 701–716.
- Schaufeli, W.B., Salanova, M., González-romá, V., Bakker, A.B., 2002. The measurement of engagement and burnout: a two sample confirmatory factor analytic approach. *J. Happiness Stud.* 3, 71–92.
- Slimane, N.S.B., 2017. Motivation and job satisfaction of pharmacists in four hospitals in Saudi Arabia. *J. Health Manag.* 19, 39–72.
- Smith, B.W., Dalen, J., Wiggins, K., Tooley, E., Christopher, P., Bernard, J., 2008. The brief resilience scale: assessing the ability to bounce back. *Int. J. Behav. Med.* 15, 194–200.
- Suleiman, A., 2015. Stress and job satisfaction among pharmacists in Riyadh, Saudi Arabia. *Saudi J. Med. Sci.* 3, 213–219.
- Sundaray, B.K., 2011. Employee engagement: a driver of organizational effectiveness. *EJBM* 3, 53–59.
- Tavakol, M., Dennick, R., 2011. Making sense of cronbach's alpha. *Int. J. Med. Educ.* 2, 53–55.
- Torabinia, M., Mahmoudi, S., Dolatshahi, M., Abyaz, M.R., 2017. Measuring engagement in nurses: The psychometric properties of the Persian version of Utrecht work engagement scale. *Med. J. Islam Repub. Iran* 31, 15.
- Tugade, M.M., Fredrickson, B.L., 2004. Resilient individuals use positive emotions to bounce back from negative emotional experiences. *J. Pers. Soc. Psychol.* 86, 320–333.
- Tusaie, K., Dyer, J., 2004. Resilience: a historical review of the construct. *Holist. Nurs. Pract.* 18, 3–8. quiz 9–10.
- Vanhove, A.J., Herian, M.N., Perez, A.L.U., Harms, P.D., Lester, P.B., 2016. Can resilience be developed at work? a meta-analytic review of resilience-building programme effectiveness. *J. Occup. Organ. Psychol.* 89, 278–307.
- Victor, J., Hoole, C., 2017. The influence of organisational rewards on workplace trust and work engagement. *SA J. Hum. Resour. Manag.* 15
- Waddimba, A.C., Scribani, M., Hasbrouck, M.A., Krupa, N., Jenkins, P., May, J.J., 2016. Resilience among employed physicians and mid-level practitioners in upstate New York. *Health Serv. Res.* 51, 1706–1734.

- Wolfgang, A.P., Kirk, K.W., Shepherd, M.D., 1985. Job stress in pharmacy practice: implications for managers. *Am Pharm NS25*, 46–49.
- Xanthopoulou, D., Bakker, A.B., Demerouti, E., Schaufeli, W.B., 2007. The role of personal resources in the job demands-resources model. *Int. J. Stress Manag.* 14, 121–141.
- Yasin, Y.M., Al-Hamad, A., Bélanger, C.H., Boucher, A., AbuRubeiha, M.A., 2017. Expatriate health professionals in the Saudi Arabia private sector. *Br. J. Health Care Manag.* 23, 176–185.
- Zahrani, F., Ghamdi, M., Ahmad, R., 2017. Job satisfaction among retail pharmacists in eastern region of Saudi Arabia. *J. Pharm. Res. Int.* 19, 1–12.