

# Openness to Experience and Job Satisfaction among Doctors in Telemedicine: Examining the Moderating Role of Moral Disengagement

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**Abstract:** The expansion of telemedicine has transformed healthcare delivery and introduced new professional demands for doctors practicing in digital healthcare environments. Drawing on Self-Determination Theory (SDT), this study examined the relationship between openness to experience and job satisfaction among doctors in telemedicine, with moral disengagement as a moderator. A quantitative cross-sectional design was employed involving 221 doctors practicing in telemedicine, selected using convenience sampling. Job satisfaction was measured using the Job Satisfaction Survey (JSS), openness to experience using the Indonesian Big Five Inventory (BFI), and moral disengagement using a modified Bandura scale. Data were analyzed using Structural Equation Modeling (SEM) with AMOS. The model demonstrated acceptable fit ( $\chi^2=1.425$ ;  $p=.133$ ; RMSEA=.062). The findings showed that openness to experience significantly predicted job satisfaction ( $p=.001$ ), indicating that physicians with greater cognitive flexibility, adaptive learning orientation, and receptiveness toward novelty tended to report higher occupational satisfaction in telemedicine settings. Moral disengagement significantly moderated the relationship between openness to experience and job satisfaction ( $p<.001$ ). This study extends understanding of physician job satisfaction by integrating personality adaptation, moral cognitive processes, and SDT within digital healthcare contexts.

**Keywords:** doctors, job satisfaction, moral disengagement, openness to experience, telemedicine

## I. Introduction

The rapid expansion of telemedicine has significantly transformed healthcare delivery systems worldwide. Following the COVID-19 pandemic, digital healthcare services have become increasingly integrated into routine medical practice, enabling physicians to provide healthcare through virtual consultation, remote monitoring, and technology-mediated communication systems [1], [2]. Beyond improving healthcare accessibility and efficiency, telemedicine has also altered how doctors perform clinical assessment, communication, and decision-making processes within digitally mediated environments.

Compared with conventional face-to-face healthcare settings, physicians practicing telemedicine frequently encounter challenges related to limited physical examination, technological dependency, reduced non-verbal interaction, and uncertainty in remote clinical assessment [3], [4]. These changes may influence physicians' professional experiences and psychological well-being, particularly regarding how they adapt to evolving work demands within digital healthcare systems.

Within healthcare contexts, job satisfaction represents an important psychological outcome because it is associated with employee well-being, organizational commitment, work engagement, retention, and service quality [5], [6]. Among physicians, job satisfaction is especially important due to its relationship with professional sustainability, healthcare performance, and patient care outcomes. Conversely, lower job satisfaction has been associated with burnout, emotional exhaustion, and reduced professional functioning [7].

Previous studies examining physician job satisfaction in telemedicine have primarily emphasized organizational and technological determinants, including workload, technology acceptance, digital readiness, system usability, and operational efficiency [8], [9]. Although these studies provide important understanding regarding structural influences on telemedicine practice, comparatively limited attention has been directed toward individual psychological characteristics that may support physicians' adaptation to digitally mediated healthcare environments.

One psychological characteristic that may be particularly relevant in telemedicine settings is openness to experience. As a dimension of the Big Five personality model, openness to experience reflects curiosity, cognitive flexibility, receptiveness toward novelty, and willingness to engage with new learning experiences [10], [11]. Physicians high in openness may demonstrate stronger adaptability toward technological innovation, evolving healthcare procedures, and uncertain work situations commonly encountered in telemedicine practice.

From a Self-Determination Theory (SDT) perspective, adaptive characteristics such as openness to experience may contribute to job satisfaction by strengthening perceptions of competence and autonomy within professional roles [12], [13]. Physicians who are more willing to explore new systems and adapt to changing work environments may

experience greater confidence and effectiveness in performing telemedicine-related tasks, thereby increasing occupational satisfaction.

In addition to adaptive personality characteristics, telemedicine environments may also involve psychologically demanding professional situations related to diagnostic uncertainty, limited patient interaction, technological constraints, and ethical complexity [3], [4]. Under such conditions, physicians may employ cognitive mechanisms that regulate psychological discomfort associated with challenging professional experiences. One relevant mechanism is moral disengagement, which refers to cognitive processes that allow individuals to reinterpret or psychologically distance themselves from morally difficult situations [14].

Although moral disengagement has frequently been examined in relation to unethical behavior and organizational deviance, limited research has explored its role within digital healthcare contexts, particularly regarding physicians' occupational experiences. In telemedicine practice, moral disengagement may influence how doctors psychologically interpret work-related challenges and how adaptive personality tendencies translate into job satisfaction.

Despite growing scholarly attention toward telemedicine and physician well-being, limited studies have examined the relationship between openness to experience and job satisfaction among doctors practicing telemedicine while simultaneously considering the role of moral disengagement. Therefore, the present study investigates the effect of openness to experience on job satisfaction among doctors in telemedicine and examines the moderating role of moral disengagement within a Self-Determination Theory framework.

## **II. Literature Review**

### **A. Self-Determination Theory and Job Satisfaction**

Self-Determination Theory (SDT) explains that psychological well-being and job satisfaction emerge through the fulfillment of three basic psychological needs: autonomy, competence, and relatedness [12], [13]. Autonomy refers to the experience of self-direction and volitional functioning, competence reflects individuals' perceptions of effectiveness and capability in performing tasks, while relatedness concerns meaningful interpersonal connection and social integration.

Within occupational settings, fulfillment of these psychological needs contributes positively to work motivation, engagement, psychological adjustment, and job satisfaction. Previous organizational studies have consistently demonstrated that employees who perceive greater competence and autonomy in their work roles tend to report higher occupational well-being and stronger job satisfaction [5], [12].

In telemedicine practice, physicians operate within digitally mediated environments characterized by technological dependence, remote communication, evolving work procedures, and uncertainty in clinical interaction. These conditions may influence how doctors experience competence and autonomy in performing professional responsibilities. Therefore, SDT provides an appropriate theoretical framework for understanding psychological factors associated with physicians' job satisfaction in telemedicine settings.

### **B. Openness to Experience and Job Satisfaction**

Openness to experience is one of the core dimensions within the Big Five personality model and reflects curiosity, cognitive flexibility, imagination, receptiveness toward novelty, and willingness to engage with new experiences and learning opportunities [10], [11]. Individuals high in openness generally demonstrate greater adaptability toward change, innovation, and uncertain environments.

These characteristics become particularly relevant within telemedicine contexts, where physicians are required to continuously adapt to technological developments, digitally mediated communication systems, and evolving healthcare procedures. Compared with traditional healthcare environments, telemedicine practice involves greater dependence on digital systems, remote patient interaction, and rapid adjustment to emerging healthcare technologies.

Physicians high in openness to experience may therefore demonstrate stronger readiness to explore new clinical systems, engage in adaptive learning, and manage uncertainty associated with telemedicine practice. Such adaptive tendencies may strengthen physicians' perceptions of competence and autonomy, which are central psychological needs within Self-Determination Theory [13].

Previous studies have reported that adaptive personality characteristics are positively associated with occupational adjustment, innovation acceptance, learning orientation, and job satisfaction, particularly in work environments characterized by rapid change and complexity [7], [15]. In healthcare settings, physicians who possess greater adaptability and cognitive flexibility may experience more positive professional adjustment and stronger occupational satisfaction. Based on this rationale, the following hypothesis is proposed:

H1: Openness to experience positively predicts job satisfaction among doctors in telemedicine.

### **C. Moral Disengagement as a Moderating Variable**

Moral disengagement refers to cognitive mechanisms through which individuals regulate or reinterpret morally challenging situations in ways that reduce psychological discomfort and self-regulatory tension [14]. These mechanisms

may involve cognitive reframing, minimization of consequences, displacement of responsibility, or psychological distancing from ethically difficult situations.

Within healthcare environments, physicians frequently encounter situations involving competing professional demands, uncertainty, emotional pressure, and operational constraints. In telemedicine practice, these challenges may become more complex due to limited physical examination, incomplete clinical information, privacy concerns, and digitally mediated patient interaction [3], [4].

Under such conditions, physicians may employ various psychological coping and cognitive regulation processes in managing professional strain. Moral disengagement may function as a psychological mechanism that influences how doctors interpret stressful or ethically demanding work experiences within digital healthcare settings.

The moderating role of moral disengagement becomes relevant when examined alongside openness to experience. Physicians high in openness generally demonstrate stronger adaptive capacity and flexibility toward changing work environments. However, adaptation to telemedicine may simultaneously expose physicians to professional ambiguity and uncertainty that create psychological tension.

In this context, moral disengagement may influence how adaptive personality characteristics translate into subjective occupational experiences. Physicians who are more capable of cognitively distancing themselves from psychologically demanding professional situations may experience reduced internal strain during adaptation processes, thereby influencing the relationship between openness to experience and job satisfaction.

Although moral disengagement has frequently been associated with unethical behavior and organizational deviance, recent occupational perspectives suggest that moral cognitive processes may also shape how individuals psychologically respond to complex work demands and emotionally demanding professional environments [8]. Accordingly, the following hypothesis is proposed.

H2: Moral disengagement positively moderates the relationship between openness to experience and job satisfaction, such that the positive relationship becomes stronger at higher levels of moral disengagement.

### III. Methode

This study employed a quantitative cross-sectional design to examine the relationship between openness to experience and job satisfaction among doctors in telemedicine, as well as the moderating role of moral disengagement. The study used a survey approach with standardized psychological instruments. The conceptual model positioned openness to experience as the independent variable, job satisfaction as the dependent variable, and moral disengagement as the moderating variable. Participants consisted of doctors practicing in telemedicine services. A convenience sampling technique was employed due to the accessibility and specific characteristics of the target population. The final sample consisted of 221 doctors practicing in telemedicine settings.

Job satisfaction was measured using the Job Satisfaction Survey (JSS) developed by Spector [16]. The scale measures employees' evaluative perceptions regarding occupational experiences and work conditions. Responses were rated using a five-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree). The reliability analysis demonstrated satisfactory internal consistency (Cronbach's  $\alpha = .906$ ), with corrected item-total correlations ranging from .346 to .786.

Openness to experience was measured using the Indonesian adaptation of the Big Five Inventory developed by Ramdhani [11]. The scale assesses curiosity, cognitive flexibility, openness toward novelty, and adaptive learning tendencies. Responses were rated using a five-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree). Reliability analysis demonstrated satisfactory internal consistency (Cronbach's  $\alpha = .837$ ), with corrected item-total correlations ranging from .252 to .717.

Moral disengagement was measured using a modified version of Bandura's Moral Disengagement Scale [14]. The instrument assesses cognitive mechanisms related to psychological distancing and reinterpretation of morally challenging situations. Responses were measured using a five-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree). Reliability testing demonstrated excellent internal consistency (Cronbach's  $\alpha = .953$ ), with corrected item-total correlations ranging from .732 to .880.

Data analysis was conducted using IBM SPSS and AMOS for Windows. Preliminary analyses included descriptive statistics, reliability testing, and Pearson correlation analysis. Construct validity was evaluated using Confirmatory Factor Analysis (CFA). Indicators with standardized factor loadings above .50 were considered acceptable for construct representation. Hypothesis testing was conducted using Structural Equation Modeling (SEM) to examine the direct effect of openness to experience on job satisfaction and the moderating role of moral disengagement. Model evaluation was based on multiple goodness-of-fit indices, including Chi-square, probability value, and RMSEA.

### IV. Result and Discussion

The study involved 221 doctors practicing telemedicine services in Indonesia. Based on gender distribution, 54 participants (24.4%) were male and 167 participants (75.6%) were female. Regarding age, 73 participants (33.0%) were aged 22–30 years, 127 participants (57.5%) were aged 31–40 years, and 20 participants (9.0%) were aged 41–51 years.

Regarding telemedicine experience, 74 participants (33.5%) had less than one year of telemedicine experience, 114 participants (51.6%) had between one and three years of experience, and 33 participants (14.9%) had more than

Table 1: Participants Characteristics

Variable	Category	n	%
Gender	Male	54	24.4
	Female	167	75.6
Age	22–30 years	73	33.0
	31–40 years	127	57.5
	41–51 years	20	9.0
Telemedicine Experience	< 1 year	74	33.5
	1–3 years	114	51.6
	> 3 years	33	14.9

Reliability analysis demonstrated satisfactory psychometric properties across all study instruments. The Job Satisfaction scale demonstrated excellent reliability (Cronbach’s  $\alpha = .906$ ), with corrected item-total correlations ranging from .346 to .786. The Openness to Experience scale demonstrated satisfactory reliability (Cronbach’s  $\alpha = .837$ ), with corrected item-total correlations ranging from .252 to .717. The Moral Disengagement scale demonstrated excellent internal consistency (Cronbach’s  $\alpha = .953$ ), with corrected item-total correlations ranging from .732 to .880.

Construct validity was evaluated using Confirmatory Factor Analysis (CFA). The Openness to Experience scale demonstrated acceptable construct adequacy ( $\chi^2 = 19.509$ ;  $df = 2$ ;  $p = .030$ ). The Job Satisfaction scale demonstrated acceptable construct fit ( $\chi^2 = 11.212$ ;  $df = 4$ ;  $p = .002$ ). The Moral Disengagement scale also demonstrated acceptable construct validity ( $\chi^2 = 156.191$ ;  $df = 35$ ;  $p < .001$ ).

Table 2: Reliability and Measurement Properties

Variable	$\alpha$	Item Discrimination	CFA Result
Job Satisfaction	.906	.346–.786	$\chi^2=11.212$ ; $df=4$ ; $p=.002$
Openness to Experience	.837	.252–.717	$\chi^2=19.509$ ; $df=2$ ; $p=.030$
Moral Disengagement	.953	.732–.880	$\chi^2=156.191$ ; $df=35$ ; $p<.001$

Descriptive analysis indicated that openness to experience and job satisfaction tended to be relatively high among participants, whereas moral disengagement was categorized at a moderate level.

Pearson correlation analysis demonstrated significant positive relationships among the study variables. Openness to experience was positively associated with job satisfaction ( $r = .308$ ,  $p < .001$ ). Moral disengagement also demonstrated a significant positive relationship with job satisfaction ( $r = .337$ ,  $p < .001$ ). In addition, openness to experience showed a positive association with moral disengagement ( $r = .199$ ,  $p = .003$ ).

Table 3: Descriptive Statistics and Correlations

Variable	Mean	SD	1	2	3
1. Job Satisfaction	42	6	—		
2. Openness to Experience	24	5	.308**	—	
3. Moral Disengagement	23	5.4	.337**	.199**	—

Structural Equation Modeling (SEM) analysis demonstrated acceptable model fit. The structural model achieved satisfactory goodness-of-fit indices, including Chi-square = 1.425, probability value = .133, and RMSEA = .062, indicating adequate compatibility between the theoretical model and the observed data.

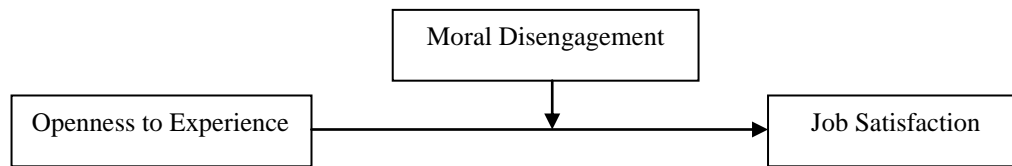
The first hypothesis proposed that openness to experience positively predicts job satisfaction among doctors practicing telemedicine. SEM analysis demonstrated a significant positive effect ( $p = .001$ ). Therefore, Hypothesis 1 was supported.

The second hypothesis proposed that moral disengagement moderates the relationship between openness to experience and job satisfaction. The analysis demonstrated a significant interaction effect ( $p < .001$ ), indicating that moral disengagement influenced the relationship between openness to experience and job satisfaction. Therefore, Hypothesis 2 was supported.

Table 4: Structural Model Results

Hypothesis	Relationship	p-value	Result
H1	Openness to Experience $\rightarrow$ Job Satisfaction	.001	Supported
H2	Moral Disengagement $\times$ Openness $\rightarrow$ Job Satisfaction	.000	Supported

Figure 1: Moderating Effect of Moral Disengagement on the Relationship Between Openness to Experience and Job Satisfaction



The present study examined the relationship between openness to experience and job satisfaction among doctors practicing telemedicine and further investigated the role of moral disengagement within digitally mediated healthcare environments. The findings demonstrated that openness to experience significantly predicted job satisfaction among physicians engaged in telemedicine practice. In addition, moral disengagement significantly influenced the relationship between openness to experience and job satisfaction, suggesting that moral cognitive processes may shape physicians' occupational experiences within technologically mediated healthcare systems.

The positive relationship between openness to experience and job satisfaction indicates that adaptive personality characteristics play an important role in physicians' psychological adjustment to telemedicine practice. Openness to experience reflects cognitive flexibility, intellectual curiosity, receptiveness toward novelty, tolerance for ambiguity, and willingness to engage in continuous learning [10], [11]. These characteristics become increasingly relevant in telemedicine settings because physicians are required to navigate rapidly evolving healthcare technologies, digitally mediated communication systems, remote clinical decision-making, and uncertain patient interaction processes.

Compared with conventional healthcare environments, telemedicine fundamentally alters the structure of physicians' professional experiences. Clinical encounters become increasingly dependent on digital interfaces, technological reliability, and limited non-verbal interaction. Physicians are often required to make clinical judgments with reduced physical examination opportunities and incomplete contextual information. Such conditions may increase cognitive complexity and professional uncertainty during medical decision-making processes. Under these circumstances, physicians possessing higher openness to experience may demonstrate greater psychological adaptability toward changing professional demands and technological transitions.

The present findings are consistent with previous studies suggesting that adaptive personality traits contribute positively to occupational adjustment and job satisfaction, particularly within work environments characterized by innovation, uncertainty, and organizational change [7], [15]. Individuals high in openness generally demonstrate stronger exploratory tendencies, greater willingness to engage with unfamiliar systems, and stronger adaptive learning orientation. In telemedicine practice, these tendencies may facilitate more effective adjustment toward digital healthcare platforms and evolving clinical workflows.

From a Self-Determination Theory (SDT) perspective, the relationship between openness to experience and job satisfaction may be understood through the fulfillment of competence and autonomy needs [12], [13]. Physicians who are more open to new experiences may demonstrate greater confidence in learning emerging healthcare technologies and adapting to digitally mediated clinical procedures. Successful adaptation toward technological complexity may strengthen perceptions of competence, which subsequently enhances occupational satisfaction. Likewise, openness to experience may support autonomy by enabling physicians to feel more capable of managing changing work demands and exercising flexible professional functioning within telemedicine environments.

The findings also align with organizational adaptation literature suggesting that employees possessing greater cognitive flexibility tend to demonstrate stronger resilience during periods of technological transformation and organizational uncertainty. Telemedicine represents not merely a technological tool, but a substantial transformation in how healthcare services are delivered, communicated, and experienced by both physicians and patients. Consequently, physicians' adaptive psychological characteristics may become increasingly important determinants of occupational well-being within digital healthcare systems.

The present study further demonstrated that moral disengagement significantly influenced the relationship between openness to experience and job satisfaction. This finding suggests that moral cognitive processes may shape how physicians psychologically interpret and regulate stressful professional experiences encountered during telemedicine practice.

Telemedicine environments frequently involve conditions characterized by diagnostic uncertainty, limited patient interaction, technological barriers, privacy concerns, and operational constraints associated with remote healthcare delivery [3], [4]. Unlike conventional face-to-face consultation, physicians practicing telemedicine may experience reduced contextual information and diminished direct interpersonal engagement during clinical assessment. These conditions may increase psychological tension related to professional responsibility, clinical confidence, and ethical decision-making.

Within such environments, physicians may employ various forms of cognitive regulation to manage internal discomfort and professional strain. Moral disengagement refers to cognitive mechanisms through which individuals

reinterpret or psychologically distance themselves from morally or emotionally difficult situations in ways that reduce self-regulatory tension [14]. Although moral disengagement has traditionally been associated with unethical conduct and organizational deviance, contemporary occupational perspectives suggest that moral cognitive mechanisms may also function as psychological regulation processes within demanding professional environments.

Importantly, the present findings should not be interpreted as suggesting that moral disengagement is inherently beneficial or ethically desirable. Rather, the findings indicate that cognitive distancing mechanisms may influence how physicians psychologically manage complex and stressful occupational experiences within telemedicine contexts. Physicians who are better able to cognitively regulate internal strain associated with professional ambiguity and uncertainty may experience reduced psychological burden during adaptation processes. Consequently, adaptive personality characteristics such as openness to experience may translate more effectively into positive occupational experiences under certain cognitive conditions.

This interpretation is particularly relevant within digital healthcare systems, where physicians may frequently encounter emotionally ambiguous situations involving technological limitations, patient dissatisfaction, communication barriers, or uncertainty in remote clinical assessment. In such situations, psychological regulation processes may become important mechanisms influencing occupational functioning and emotional adjustment.

The moderation finding also expands existing literature on physician job satisfaction, which has predominantly emphasized structural and organizational determinants such as workload, burnout, compensation, leadership, and technology usability [8], [9]. Although these factors remain highly important, the present findings suggest that physician job satisfaction in telemedicine may also involve deeper psychological adaptation processes associated with personality characteristics and moral cognition.

Furthermore, the findings contribute theoretically by extending the application of Self-Determination Theory within digital healthcare contexts. Previous SDT research has primarily focused on motivational processes, organizational support, and psychological needs fulfillment in conventional work environments. The present study suggests that adaptive personality tendencies and moral cognitive regulation may also influence how competence and autonomy are experienced within technologically mediated professional settings.

Another important implication concerns the psychological consequences of healthcare digitalization. Discussions surrounding telemedicine implementation frequently focus on technological effectiveness, healthcare accessibility, and operational efficiency. However, digital transformation within healthcare also produces significant psychological consequences for physicians, including changing communication dynamics, altered professional identity, increased cognitive demands, and uncertainty in remote clinical interaction. The present findings therefore support the argument that successful telemedicine implementation should not be viewed exclusively as a technological issue, but also as a psychological adaptation process.

Practically, the findings suggest that healthcare organizations and telemedicine providers should consider physicians' psychological adaptation capacities alongside technological infrastructure development. Training programs focusing exclusively on technical competence may be insufficient if physicians simultaneously experience psychological strain related to digital healthcare adaptation. Supporting adaptive learning orientation, professional flexibility, emotional regulation, and reflective coping processes may contribute positively toward physician well-being and sustainable telemedicine practice.

Healthcare institutions may also benefit from developing supportive professional environments that facilitate collaborative learning, reflective discussion, and ethical consultation related to telemedicine challenges. Such approaches may strengthen physicians' competence, reduce psychological strain, and promote healthier adaptation toward digitally mediated healthcare systems.

Several limitations should nevertheless be acknowledged. First, the cross-sectional design limits the ability to establish causal relationships among variables. Future studies employing longitudinal designs may provide stronger understanding regarding how adaptive personality characteristics and moral cognitive processes influence occupational adjustment over time. Second, the use of convenience sampling may limit generalizability across broader physician populations and healthcare systems. Third, the present study relied on self-report psychological measures, which may increase susceptibility to social desirability bias and subjective interpretation.

Future research may therefore benefit from incorporating multi-method approaches, broader institutional samples, and additional contextual variables related to digital healthcare environments. Variables such as burnout, technostress, emotional exhaustion, digital fatigue, organizational support, and ethical climate may further enrich understanding regarding physicians' psychological experiences within telemedicine practice. In addition, future studies may examine whether moral disengagement functions differently across varying levels of professional pressure, organizational culture, or healthcare system demands.

Overall, the present findings demonstrate that physicians' occupational experiences within telemedicine environments cannot be understood solely through technological or organizational perspectives. Adaptive personality characteristics and moral cognitive processes also play meaningful roles in shaping how physicians psychologically adjust to the growing demands of digitally mediated healthcare practice.

## V. Conclusion

This study examined the relationship between openness to experience and job satisfaction among doctors practicing telemedicine and investigated the role of moral disengagement within a Self-Determination Theory (SDT) framework. The findings demonstrated that openness to experience significantly predicted job satisfaction among physicians working in digitally mediated healthcare environments. Physicians characterized by greater cognitive flexibility, curiosity, adaptive learning orientation, and receptiveness toward novelty tended to report higher levels of occupational satisfaction in telemedicine practice.

The findings indicate that adaptive personality characteristics play an important role in supporting physicians' psychological adjustment toward technological transformation within healthcare systems. Telemedicine practice requires continuous adaptation to digital communication systems, remote clinical interaction, technological uncertainty, and evolving healthcare procedures. Under such conditions, physicians possessing stronger openness to experience may demonstrate greater readiness to engage with changing professional demands and digital healthcare innovation, thereby facilitating more positive occupational experiences.

The study further demonstrated that moral disengagement significantly influenced the relationship between openness to experience and job satisfaction. This finding suggests that moral cognitive processes may shape how physicians psychologically interpret and regulate stressful or professionally demanding experiences encountered during telemedicine practice. Within digitally mediated healthcare environments characterized by diagnostic ambiguity, limited patient interaction, technological constraints, and operational pressure, cognitive regulation mechanisms may influence physicians' adaptation processes and occupational well-being.

Theoretically, the present study contributes to the growing literature on physician well-being and telemedicine by extending understanding of job satisfaction beyond organizational and technological determinants alone. By integrating adaptive personality characteristics, moral cognitive processes, and Self-Determination Theory, this study offers a broader psychological perspective for understanding occupational experiences within digital healthcare environments. The findings also support the relevance of SDT in explaining how competence and autonomy-related processes may operate within technologically mediated professional contexts.

Practically, the findings suggest that healthcare organizations and telemedicine providers should not focus exclusively on technological infrastructure and operational efficiency. Supporting physicians' adaptive learning capacity, psychological flexibility, digital readiness, and professional adjustment processes may also be essential for promoting sustainable physician well-being and job satisfaction within telemedicine systems. In addition, healthcare institutions may benefit from developing supportive professional environments that facilitate reflective coping, collaborative learning, and ethical adaptation toward the challenges associated with digital healthcare delivery.

Several limitations should nevertheless be acknowledged. The cross-sectional design limits causal interpretation, while the use of convenience sampling may reduce generalizability across broader physician populations and healthcare systems. Furthermore, the use of self-report measures may increase susceptibility to subjective bias and socially desirable responding. Future studies may therefore benefit from longitudinal approaches, more diverse healthcare samples, and the inclusion of additional psychological and organizational variables related to telemedicine practice, such as burnout, technostress, organizational support, and emotional exhaustion.

Overall, the present study highlights that successful adaptation to telemedicine involves not only technological competence and organizational readiness, but also psychological adaptation processes associated with personality characteristics and moral cognition. As digital healthcare systems continue to expand globally, understanding physicians' psychological experiences may become increasingly important for supporting sustainable healthcare delivery and physician well-being.

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