



**THE RELATIONSHIP BETWEEN PERSONALITY
TRAITS OF SUPERVISOR AND SUPERVISEES'
DEVELOPMENT AMONG MEDICAL TRAINEES
MEDIATED BY WORKING ALLIANCE**

BY

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the degree of Master of Human Sciences in Psychology**

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ABSTRACT

Medical supervisors who are assigned to train medical trainees usually focus on the standard operating procedures, the manual logbooks and the syllabus required to be fulfilled. The psychological factors of the medical trainees are usually neglected and underestimated. This research sought to explore the relationship between personality traits of the supervisor and the supervisees' development among medical trainees with working alliance as the mediator. The study uses conceptual framework that combine theoretical framework of Values Effects by Meglino and Ravlin (1998) and Integrated Developmental Model by Stoltenberg and Delworth (1987) which has been revised by Bernard and Goodyear (1998). There are four instruments used in this study, namely; TAJMA Personality Profiles Second Edition which is used to measure medical supervisors' personality traits, Supervisee Questionnaires Level-Revised to measure medical trainee development, Supervisory Working Alliance for Supervisor and Supervisory Working Alliance for Trainees to measure supervisory working alliance. 128 respondents with equal distribution of medical supervisor and medical trainees participated in this study. There are four hospitals involved in this research: Hospital Kajang, Hospital Serdang, Hospital Ampang and Hospital Raja Permaisuri Bainun, Ipoh. The findings indicate that working alliance is the mediator for personality traits of the supervisors and medical trainees' development. It is also revealed leadership, patriotism, achievement, and cross cultural traits are significant to enhance supervisory working alliance and to ensure medical trainees' development. These findings are discussed with respect to the literature on personality traits of the supervisors, medical trainees' development, and supervisory working alliance. This study may help future medical supervisors to adopt traits that may help medical graduates to develop professionally.

ملخص البحث

عادة ما يركز المشرفون الطبيون الذين تم تعيينهم لتدريب المتدربين الطبيين على إجراءات التشغيل القياسية، وكتاب السجل اليدوي والمناهج يتعين الوفاء بها. وأما العوامل النفسية للمتدربين الطبيين فهي في الغالب لا تؤخذ بعين الاعتبار بل تتعرض للتقليل من شأنها. ولذلك، سعت هذه الدراسة إلى استكشاف العلاقة بين السمات الشخصية للمشرف وتطور المشرفين عليهم من ضمن المتدربين الطبيين مع تحالف العمل بوصفه وسيطا. لقد تم استخدام هذه الدراسة الإطار المفاهيمي الذي يجمع بين الإطار النظري لآثار القيم المقدم من قبل **Meglino** و **Ravlin** والنموذج التنموي المتكامل لـ **Stoltenberg** و **Delworth** الذي تم تنقيحه من **Bernard** و **Goodyear**. واستخدمت هذه الدراسة أربع أدوات، وهي: تشخيص الشخصيات **TAJMA** للطبعة الثانية لقياس السمات الشخصية للمشرفين الطبيين، وتعديل مستوى الاستبانات للمشرفين عليهم لقياس تطور المتدربين الطبيين، وتحالفًا العمل الإرشافي؛ أحدهما للمشرف والآخر للمتدربين لقياس تحالف العمل الإرشافي الخاص بهم. وشارك في هذه الدراسة 128 مشاركًا مع توزيع متساو للمشرف الطبي والمتدربين الطبيين. وتم تسجيل هذه الدراسة مع مكتب التسجيل الوطني للأبحاث الطبية، كما تم حصولها على الموافقة من لجنة أخلاقيات الأبحاث الطبية بماليزيا. وشاركت فيها 4 مستشفيات، وهي: مستشفى كاجانج، ومستشفى سيردانج، ومستشفى أمبانج، ومستشفى راجا برمايسوري باينون، إيبوه. استنتجت الدراسة أنّ تحالف العمل يكون وسيطا بين السمات الشخصية للمشرف وتطور المتدربين الطبيين، كما توصلت الدراسة إلى أنّ سمات القيادة، والحسّ الوطني، والإنجاز، والثقافة المشتركة مهمة في تعزيز تحالف العمل الإرشافي وضمن تطور المتدربين الطبيين. وهذه النتائج تم نقاشها اعتمادا على الدراسات السابقة المتعلقة بالسمات الشخصية للمشرف وتطور المتدربين الطبيين وتحالف العمل الإرشافي.

APPROVAL PAGE

I certify that I have supervised and read this study and that in my opinion; it conforms to acceptable standards of scholarly presentation and is fully adequate, in scope and quality, as a dissertation for the degree of Master of Human Sciences in Psychology.

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DECLARATION

I hereby declare that this dissertation is the result of my own investigation, except where otherwise stated. I also declare that it has not been previously or concurrently submitted as a whole for any other degrees at IIUM or other institutions.

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*This thesis is dedicated to my beloved husband, family and honourable lecturers
whom I dear all these time.*

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LIST OF ABBREVIATION

CRC	Clinical Research Center
IDM	Integrated Developmental Model
MMC	Malaysian Medical Council
NIH	National Institute of Health
OCEAN	Openness, Conscientiousness, Extroversion, Agreeableness, Neuroticism
PSD	Public Service Department
TPP-2	TAJMA Personality Profile Second Edition

LIST OF STATUES

Malaysian Medical Act (1971)

CHAPTER ONE

INTRODUCTION

1.1 BACKGROUND OF THE STUDY

Clinical supervision plays a vital role in undergraduate medical education. The term 'clinical supervision' has been defined by Bernard and Goodyear (2014) as:

“An intervention that is provided by a senior member to a junior member of that same profession. This relationship is evaluative, extends over time and has the simultaneous purposes of enhancing the professional functioning of the junior member(s), monitoring the quality of professional services offered to the clients she, he or they see(s), and serving as a gatekeeper of those who are entering the particular profession (p.2)”

Another definition by Powell and Brodsky (2004) states that clinical supervision is a disciplined, tutorial process where principles are enhanced into practical skills with four overlapping foci: administrative, evaluative, clinical and supportive. There are important differences between administrative and clinical supervision. Administrative supervision emphasises the congruence of administrative and procedural aspects of the organisation's work. For example, using the correct format of clerking and the compliance with the agency leave policies. On the other hand, clinical supervision emphasises providing medical trainees with educationally sound experience and teaching them the proper conducts which focus more on serving, diagnosing and giving intervention to patient (Malaysian Medical Act, 1971). Therefore, clinical supervision ideally should be a beneficial experience that can enhance the professional growth and confidence of both supervisor and supervisee (Gallon, Hausotter & Bryan, 2005).

In Malaysia, the undergraduate medical program comprises of five years, with the first two years designated as 'preclinical' and the later three as 'clinical'. The duration of the medical coursework and the period of clinical training (36 months) are determined by the relevant accrediting bodies in Malaysia such as Malaysian Medical Council (MMC) (Lum, 2011). Usually, clinical supervision takes place during the medical trainees' clinical posting at designated government clinics and hospitals. The structure for medical programme in Malaysia is based on the programme in England, which comprises two years of basic sciences followed by three years of clinical clerkships (Lum, 2011).

The senior medical officers or more often, the specialists at the designated clinics or hospitals, will be assigned to train the new medical trainees. With their current workload, this has created additional tasks for the specialists. Many specialists reported that they found it increasingly difficult to cope with the dual tasks of providing care to patients and training the medical trainees (Lum, 2011). Juggling between supervising the medical trainees and managing patients create additional stress on the medical specialists.

Last year, the Deputy Health Director General Datuk Dr. S. Jeyaindran, reported that about 1,000 of the 5,000 medical trainees employed each year do not complete the two-year training (The Star, 30th March 2015). Some of the reasons stated for not completing are the supervisors' personalities, the lack of suitability with the profession as they are pressured by parents and the clash of the perceptions between the ideal and the reality of a doctor's life. Pursuant to this statement, Aimir (2015), a senior medical officer, further adds that another main factor of this phenomenon is the negative supervisory events that take place during the internship. He stated that some medical trainees have been scolded by their field

supervisors during ward rounds in front of the patients and this experience brought humiliation to the trainees. The way supervisors interact with their trainees may be dependent, to a large extent, on the supervisors' personality traits (Cattell, 1965).

Based on the Western perspectives, personality is a pattern of characteristics, thoughts, emotions, and behaviors inculcated with the psychological mechanisms that are hidden or explicit behind those patterns (Funder, 1997). The concept of personality from Islamic perspectives begins with the understanding of human nature. In Islam, men are born with *fitrah* which is pure in natural state (Sheikh Taqiuddin, 2005). It means that men are inclined to do good things and distance themselves from harm. Men have the potential to do what is harmful and unnatural on their freewill. Thus, each behavior conducted by clinical supervisors can affect medical trainees' behaviors and performance. Each behavior acted by clinical supervisors is due to human's inclination that develops as personality traits which can be congruent or against the pure natural state or *fitrah*) (Salleh & Yaacob, 2015). Personality plays an important role in the way people interact with the people around them. Therefore, since the 18th century, many scholars have developed scales and tests that can measure personalities (Edward, 2013).

Prior research has shown that personality characteristics can be accurately assessed using Myers-Briggs Type Indicator (Witt, 2000; Young, 2001), DiSC^R (Morgan, 2000), Multidimensional Personality Questionnaire (George, 1990), Five Factor Model (Barrick, Mount & Judge, 2001) and TAJMA Personality Profile 2nd Edition (TPP2) (Chinyere, Oke & Ninggal, 2015). The TPP2 is among the earliest indigenous psychological profiles developed in Malaysia based on 'Five Factors' personality dimensions as described by McCrae and Costa (2003). It measures 12 basic personality traits: assertiveness, analytical, self-worth, self-confidence,

leadership, resiliency, caring, intellectual, cross-cultural, patriotism, achievement and integrity (Ninggal, 2012).

Many researchers have suggested that supervisors' personality traits play a significant role in helping the trainees' development and growth (e.g.: Edwards, 2013; Marek, Sandifer, Beach, Coward & Protinsky, 1994). Edward 2013; Marek, Sandifer, Beach, Coward & Protinsky (1994) explained an example of a scenario where the trainees express their anxiety about not knowing whether what they do is correct and feeling apprehensive about committing a mistake. Thus, more accurate and appropriate guidanceshould be given by the supervisors to help the trainees gain their balance in understanding the procedures. However, if the supervisors possess the same level of anxious as the trainees, the circle of supervision may directly disrupt. It is also found the supervisors who scored highly in openness, extroversion and self-confidence butexhibit poor judgmental areable to soothe the students with their calming voice and thus reduce the trainees' apprehension. In one of the studies done by Edward (2013), The trainees' professional development is unlikely to happen if the supervisors are rigid, highly judgmental and low in openness. Most of the time, these types of supervisors misconstrue the fear of the students to answer their questions or giving opinions as insulting. As a result, these type of supervisors view the students as incapable (Edwards, 2013). The supervisors' responses to medical trainees' concerns and conflicts during the clinical internship influence the medical trainees' future actions and behaviors, whether to strive harder or consider quitting the course (Bernard and Goodyear, 1998).

Since the development of medical trainees depend on the feedback and reports received from the supervisors during the clinical supervision, it is important tfor the supervisors to possess the ideal personality traits during the medical training. The

appropriate feedback from the supervisors can help the development of the medical trainees. The development of medical trainees has been discussed but very few have verified the tests developed to measure them (Lum, 2013). Past studies have measured supervisee development using the Integrated Developmental Model (IDM) by Stoltenberg and Delworth (1987); Bernard and et al. (1992), which explain the progressive stages of trainees' development. It consists of subtests that help trainees to attain discrete characteristics and skills.

Despite the findings on the influence of supervisors' personalities on trainees' development, Sanchez et al. (2002) found that the impact of adverse supervisory events or negative supervisory events during supervision varied depending on the strength of the supervisors-supervisees working alliance. The stronger the working alliance, the lesser the negative effects of the supervisory events on the medical trainees' development. Through the working alliance, the supervisees are able to reflect upon the events and continue with their internship. In other words, adverse events that take place during the internship can be neutralized when the working alliance is in a good term (Bernard et al., 1998).

Notwithstanding all the discussions and past studies, there are limited empirical studies investigating the influence of supervisor personality traits on medical trainee development in Malaysia. Systematic reviews of the literature on supervision in the 20th century also conclude that there are limited empirical studies on the current clinical supervisory practices (Whalen & Wendel, 2011). Thus, it may be beneficial to conduct a study on clinical supervision that seeks to promote the development of the medical trainees. Thus, this study would like to focus on the relationship between supervisors' personality traits and medical trainees' development when it is mediated by working alliance. The findings of this study may provide information and

awareness about the personality traits needed to assist medical trainees to become experts as suggested by IDM.

1.2 STATEMENT OF THE PROBLEM

Firstly, most of the previous studies regarding the relationship between supervisors' personality traits and trainees' development did not explore clinical supervision for the medical trainees. The lack of empirical studies in clinical supervision leaves medical field with no choice other than to borrow the clinical supervision framework from other disciplines such as nursing, education and social work (Whalen et al., 2011). For example, in a study conducted by Norwati and Wan Mazwati (2013) for medical social workers, though the result yielded significant development of the social workers when led by supervisor who are highly open and flexible, it is not suitable to generalise the result to the medical field. This is due to different work scope, working hours, and tasks. In the medical field, the correct diagnoses and precise treatments are crucial because any decision is related to people's life and death. Therefore, a study on the relationship between the supervisors' personality traits in developing successful medical trainees should be conducted (Todd & O'Connor, 2005).

Secondly, an alarming drop-out rate of one in every five doctors undergoing housemanship per year is a high liability, not only to the students but also to the government. Datuk Dr. S Jeyaindran, Deputy Health Director General of Ministry of Health, Malaysia, mentioned that once a houseman is hired by the Public Services Department (PSD), the termination process becomes complicated and can take up several months to more than a year (The Star, 30th March 2015). In other words, if the medical trainees quit in the middle of their internship, the post can only be legally

vacant after several months to more than a year. Thus, the workload of treating the patients has to be conducted with limited manpower that exist in the clinical settings. This situation, however, can be prevented if the medical trainees are able to survive their clinical placement. Therefore, investigating the traits of medical supervisors that can help to develop medical trainees is crucial.

This research investigates the relationship between supervisors' personality traits on medical graduates' development during their clinical supervision mediated by working alliance. The existence of working alliance is to control any extraneous variable such as poor relationship. The study may indicate which personality traits may help to increase the probability of medical graduates to successfully develop into professional medical officers. Poorly trained medical graduates may harm the patients and the environment. If the trend continues, these under-developed trainees will also be supervisors in the future and will repeat the same mistakes if there are no guidelines on which personality traits should be adopted during the supervision process. Knowing the traits needed in supervisors will be beneficial in structuring the training programme for the doctors in Malaysia.

1.3 PURPOSE OF THE STUDY

According to Bandura (2009), people learn by observing other people's behaviours. From the observer's point of view, one form ideas on how new behaviors are performed, and this coded information serves as a guide for future action. This implies the importance of observations. This is how learning usually takes place. The same concept applies in clinical supervision. There are supervisors who may be difficult to deal with and this may affect the trainees' development. Thus, this research would like

to enlighten medical supervisors on the traits that may help the medical trainees to be good medical practitioners in the future.

Supervisors may not have the intention to impose their values on the trainees, but since knowledge transmission is value-loaded, it makes it challenging for medical supervisor to be being neutral (Lim, 2008). This may affect the production of health care professionals in the future. Therefore, it is important to study the relationship between supervisors' personality traits on medical graduates' development during their clinical internship.

According to Orlands and Edwards (1997), a solid working alliance in supervisory relationship is a foundation for learning. It is consistent with the previous research findings by Holloway (1994), Lanning (1971), and Orlands and Edwards (1997). Greben (1979) equated good supervision with good parenting, emphasising the centrality of the interpersonal relationship while Lanning (1971) reported that the quality of working alliance influences trainees' expectations regarding their ability to forge a strong relationship with their patients. Kennard, Stewart and Gluck (1987) reported that students frequently cite supportive traits of the supervisors as one of the qualities associated with a positive supervisory experience. In other words, the fact that supervisory relationship causes emotional reaction provides a fertile ground for the expression of attachment on feelings and behaviors. Thus, this research aims to study the relationship between supervisor personality traits and medical trainees' development when it is mediated by supervisory working alliance. The result can help the medical supervisor as well as the Ministry of Health to restructure the current clinical supervision and to help increase the number of medical trainees in the clinical training.

1.4 RESEARCH OBJECTIVES

The objectives of the present study are as follows:

1. To examine the relationship between supervisors' personality traits and trainees' development when mediated by working alliance.
2. To identify the personality traits of the supervisors that may help medical trainees to develop from novice to expert stage according to IDM.

1.5 RESEARCH QUESTIONS

Research questions that will guide the present study are as follows:

1. How do supervisors' personality traits and trainees' development relate when mediated by working alliance?
2. Which personality traits of the supervisors may help the medical trainees to develop from novice to expert stage according to IDM?

1.6 THEORETICAL FRAMEWORK

In this research, two theoretical frameworks are used. First is the theoretical framework introduced by Meglino and Ravlin (1998) on Value Effects which is rooted from Social Cognitive Theory (Bandura, 1999). Social Cognitive theory is the view that people learn by watching others. While Value Effect is the study on the effect possessed by individuals that can determine their perception, behavior and decision making which latter can influence the performance and choice of others. It explains how clinical supervisors' personality traits can lead supervisees' future decision making, performance and development. This theory is closely related to Islamic point of view narrated by Abu Huraira; The Prophet said,

“No child is born except on *Al-Fitra* (Islam) and then his parents make him Jewish, Christian or Magian, as an animal produces a perfect young