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*The Mediating Role of Supervisor Support and Career Satisfaction in the Effect of Psychological Resilience on Turnover Intention**

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Abstract

Rapid changes and increasing workload in the healthcare field have made understanding the factors that determine employees' tendency to stay with their organizations more crucial than ever. Psychological resilience and organizational support are seen as critical resources for employees coping with professional pressures. Therefore, this study aims to examine the impact of healthcare professionals' psychological resilience levels on their intention to leave, through the mediating roles of supervisor support and career satisfaction. Data were collected from 437 healthcare professionals working in various healthcare institutions in the Central Anatolia Region using a quantitative research design. Findings indicate that psychological resilience directly and negatively affects intention to leave. Furthermore, supervisor support was found to have a partial mediating role in this relationship. Career satisfaction, while directly effective, did not exhibit a significant mediating effect. These results demonstrate that employees' psychological resources significantly contribute to their tendency to stay with their organizations, and that managerial support mechanisms strengthen this effect. The study offers individual and managerial recommendations for increasing employee commitment in the healthcare sector.

Keywords: psychological resilience, turnover intention, supervisor support, career satisfaction

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Psikolojik Sağlamlığın İşten Ayrılma Niyetine Etkisinde Yönetici Desteğinin ve Kariyer Tatmininin Aracılık Rolü

Öz

Sağlık alanındaki hızlı değişimler ve artan iş yükü, çalışanların örgütte kalma eğilimlerini belirleyen unsurların anlaşılmasını her zamankinden daha önemli hâle getirmiştir. Psikolojik dayanıklılık ve örgütsel destek unsurları, çalışanların mesleki baskılarla başa çıkmasında kritik kaynaklar olarak görülmektedir. Bu çerçevede bu çalışma, sağlık çalışanlarının psikolojik sağlamlık düzeylerinin işten ayrılma niyetleri üzerindeki etkisini, yönetici desteği ve kariyer tatmini değişkenlerinin aracılık rolleri çerçevesinde incelemeyi amaçlamaktadır. Araştırma kapsamında veriler, İç Anadolu Bölgesi'ndeki çeşitli sağlık kurumlarında görev yapan 437 sağlık çalışanından nicel araştırma tasarımıyla toplanmıştır. Bulgular, psikolojik sağlamlığın işten ayrılma niyetini doğrudan ve negatif yönde etkilediğini göstermektedir. Ayrıca yönetici desteğinin bu ilişkide kısmi aracılık rolü bulunduğu görülmüştür. Kariyer tatmini ise doğrudan etkili olmakla birlikte anlamlı bir aracılık etkisi göstermemiştir. Bu sonuçlar, çalışanların psikolojik kaynaklarının örgütte kalma eğilimlerine önemli ölçüde katkıda bulunduğunu ve yönetimsel destek mekanizmalarının bu etkiyi güçlendirdiğini ortaya koymaktadır. Çalışma, sağlık sektöründe çalışan bağlılığını artırmaya yönelik bireysel ve yönetsel düzeyde öneriler sunmaktadır.

Anahtar Kelimeler: psikolojik sağlamlık, işten ayrılma niyeti, yönetici desteği, kariyer tatmini

1. INTRODUCTION

Today, with increasing life expectancy and rising health awareness, the demand for healthcare services is on the rise. This growing demand brings new requirements and challenges to the quality of healthcare services, leading to increased turnover rates due to the increased workload and professional pressures on healthcare workers (Xue et al., 2022, p.2). However, the level of institutional commitment and retention of healthcare workers is critical to the sustainability of healthcare systems. The World Health Organization (2023, p.1-2) emphasizes that healthcare worker mobility has a direct impact on the quality, accessibility, and resilience of healthcare services, noting that if this mobility is not controlled, severe imbalances can arise in healthcare systems.

In OECD countries, workforce mobility among healthcare professionals is considered a significant problem for the sustainability of healthcare systems. The OECD (2024) report indicates that the length of time healthcare professionals, particularly nurses and physicians, remain in the sector is decreasing, while their tendency to leave their jobs is increasing. The findings, particularly in European countries, that annual turnover rates in the healthcare labor market range from 10% to 30% (OECD, 2024, p.40), are noteworthy. In Türkiye, direct and comprehensive annual turnover rates are reported only sparingly; however, numerical data published by the Turkish Medical Association and various media reports indicate a significant increase in the tendency for healthcare professionals to leave public service, particularly in the post-pandemic period. This trend not only increases individual losses but also directly impacts the quality of service in institutions, patient safety, and the overall functioning of the system. As stated in the OECD (2024, p.38) report, retaining the current healthcare workforce is considered a critical strategy to prevent workforce shortages that may arise as the number of people leaving the sector increases, thereby further increasing the workload on remaining employees. Increasing the retention of healthcare professionals plays a central role in improving job quality in the healthcare sector. In this context, identifying the psychological and environmental factors that support the retention of healthcare workers is crucial.

The healthcare sector experiences higher levels of stress compared to other sectors. While external interventions can partially reduce the stress levels of healthcare workers, the prevalence, diversity, and intense pace of healthcare services make it impossible to eliminate this stress. In this context, psychological resilience can help healthcare workers cope more effectively with challenging emotional situations (Şanlı et al., 2024, p.11). Psychological studies emphasize that both individuals and communities possess the capacity to adapt and remain resilient in the face of environmental pressures. Suedfeld (1997) emphasizes the ability of individuals to cope with a wide range of hazards and derive renewed strength from challenging experiences, calling for a more in-depth examination of positive responses to extreme stressors (as cited in Vanderkam and Suedfeld, 2024, p.99). In this context, it was deemed necessary to examine the impact of psychological resilience levels on the turnover intention of healthcare workers in the healthcare sector, a field characterized by intense stress.

Luthans (2002, p.702) emphasizes that psychological resilience has a reactive nature and should be defined as a positive response to stressful or traumatic events. This approach aligns with Hans Selye's statement, "It's not what happens to you, but how you respond to it that matters." In line with this perspective, studies in the literature indicate that individuals with high levels of psychological resilience are moreable to cope effectively with uncertain and stressful environments. For example, Şanlı et al. (2024, p.2) state that psychological resilience plays a crucial role in healthcare professionals' adaptation to the multidimensional stressors they encounter. Within this framework, resilience is considered a critical capacity beyond individual well-being in professional life and a fundamental psychological resource that should be considered, especially in stressful occupations such as the healthcare sector (Luthans, 2002, p.703). However, considering that individual resilience alone may not be sufficient to explain the impact of turnover intentions, it is essential to support this relationship within the organizational context. Especially in stressful work environments, employees' ability to effectively utilize their psychological resources may also be related to the level of support they perceive from their managers and their career satisfaction (Lartey et al., 2014; Allen and Meyer, 2000).

To explain how individual and organizational factors influence healthcare workers' intention to leave, this study is theoretically grounded in the Conservation of Resources Theory (COR). According to COR, individuals tend to protect, maintain, and increase their valuable resources, and stress occurs when these resources are threatened, lost, or cannot be regained (Hobfoll, 1989, p.516). Within this framework, psychological resilience is considered a fundamental personal resource that enables employees to cope with challenges in their work lives, while supervisory support and career satisfaction are considered social and circumstantial resources that help individuals preserve and rebuild their resources. Furthermore, COR Theory proposes that the coexistence of multiple resources creates a resource acquisition cycle, and within this context, organizational support mechanisms can reduce employees' withdrawal behavior by strengthening the impact of individual psychological resources (Hobfoll et al., 2018, p.107-108). Therefore, employees who have both strong internal coping capacity and supportive working conditions may be less likely to experience resource loss, which may contribute to a reduced tendency to leave their job.

Grounded in these considerations, this study aims to investigate how psychological resilience influences turnover intentions among healthcare professionals, while also exploring the mediating effects of supervisor support and career satisfaction. The theoretical basis of the study is based on Hobfoll's (1989) COR Theory. Based on this approach, it is assumed that psychological resilience, as a personal resource, will reduce turnover intentions and that this effect will be strengthened through organizational-level resources (such as managerial support and career satisfaction). The research is structured around the following central questions: *(1) How does psychological resilience affect turnover intentions? (2) Do supervisor support and career satisfaction mediate this effect? Within this framework, the study was conducted with healthcare professionals from different professional groups (doctors, nurses, pharmacists,*

midwives, etc.) working in healthcare institutions in Türkiye. This study aims to make original contributions to the existing literature in two important ways. First, many previous studies have generally focused on specific professional groups, such as nurses (Zhang et al., 2025) or doctor assistants (Xue et al., 2022), while more comprehensive approaches encompassing all healthcare professionals remain limited. However, healthcare services have a multilayered structure consisting of doctors, nurses, and other clinical support personnel such as dentists, pharmacists, and midwives. In this context, this study's combined examination of different healthcare professional groups fills a significant gap in the literature by increasing the generalizability of the findings regarding turnover intention. Secondly, modeling psychological resilience, considered at the individual level, in conjunction with variables such as supervisor support and career satisfaction, assessed at the organizational/environmental level, facilitates an understanding of the multilevel resource interactions influencing turnover intention, which is consistent with the core assumptions of COR Theory. The limited number of studies in the literature that examine such multilevel relationships within the same model (Kim and Fernandez, 2015; Lartey et al., 2014) makes this research unique in the field of workforce management and employee engagement. Therefore, the findings of this study are expected to shed light on the holistic effects of both individual resilience, organizational support structures, and career development opportunities on retention behavior. The upcoming sections provide a comprehensive overview of the conceptual framework, introduce the research model and hypotheses, elaborate on the methodology and findings, and offer recommendations based on the analysis and interpretation of the results.

2. CONCEPTUAL BACKGROUND AND HYPOTHESES

This part focuses on clarifying the conceptual structure of the research and presenting the hypotheses developed in line with it.

2.1. Theoretical Basis of the Study: Conservation of Resources Theory

Conservation of Resources Theory (COR) proposed by Hobfoll (1989), proposes that individuals have a fundamental motivation to acquire, preserve, and increase the resources they possess. Resources are defined as "objects, personal characteristics, conditions, and energies that are valued by an individual or that facilitate the acquisition of other valuable resources" (Hobfoll, 1989, p.517). In this context, many variables in the field of organizational behavior can be considered as factors that support employees' resource acquisition or trigger resource loss. This study examines the relationships among psychological resilience, supervisory support, career satisfaction, and intention to leave considering COR's four fundamental principles.

- *The principle of primacy of loss* suggests that resource loss is psychologically much more impactful and destructive than gain. According to Hobfoll (2018, p.103), even if individuals experience the same level of gain, the impact of losses is more rapid and lasting. Individuals working in fields involving intense workload, emotional labor, role conflict, and uncertainty,

such as healthcare professionals, constantly face the threat of potential resource loss. Therefore, the intention to leave a job is often not a rational decision but a strategy to avoid resource loss. This principle theoretically explains why employees consider leaving an organization in response to adverse conditions.

- *The resource investment principle* emphasizes that individuals must invest their existing resources to prevent resource loss and acquire new ones (Hobfoll, 2001, p.348). In this perspective, psychological resilience is an internal personal resource that employees draw upon to adapt to stressful situations, manage job demands, and limit resource loss. A resilient individual not only protects their existing resources but can also transform them to create new ones when necessary. This theoretically supports the effect of resilience in reducing intention to leave.
- *The gain paradox principle* states that resource gains become particularly significant during periods of loss (Hobfoll et al., 2018, p.103). This principle may explain why organizational resources such as supervisor support and career satisfaction have a stronger psychological impact on employees under stressful conditions. For example, for a healthcare worker experiencing high workload or emotional exhaustion, a supportive supervisor serves as a protective factor that fosters resource gains. This provides theoretical justification for the mediating role of these variables in the study.
- *The desperation principle* states that when resources are depleted, an individual's likelihood of defensive, withdrawn, or even aggressive responses increases (Hobfoll et al., 2018, p.104). For employees experiencing resource deprivation, the intention to leave their job can be considered one of the last defense mechanisms within the scope of this principle. This can manifest as an increased tendency to leave, especially in employees under the influence of long-term stress.

When these four principles are considered together, the research variables are positioned as follows: *Psychological resilience* represents employees' personal resource base. *Managerial support* and *career satisfaction* serve as social and organizational resources that complement this internal resource. *Turnover intention* is conceptualized as a form of negative organizational behavior that emerges because of resource loss. Therefore, the research model examines how personal and organizational resources collectively provide a protective effect against the threat of resource loss.

2.2. The Concept of Psychological Resilience and Associated Hypotheses

Psychological resilience refers to a person's ability to effectively cope with, recover from, and maintain normal functioning despite experiencing adversity, stress, or trauma (Luthans, 2002, p.702). This concept encompasses multidimensional components, including personal stability, the ability to adapt to environmental changes, and the capacity to learn and develop from challenges (Sutardi and Novitasari, 2024, p.126). Although psychological resilience lacks a universally accepted definition, it is generally viewed as a multidimensional construct encompassing both the individual's ability to adapt to stressors and the internal resources that

support this process (Kislyakov and Tsvetkova, 2024, p.668). Nonetheless, psychological resilience is understood as an evolving process that goes beyond individual traits, encompassing the broader support systems found in one's social, environmental, and institutional context (Wang et al., 2024, p.3; Xia et al., 2024, p.9). This dynamism is vital in the healthcare sector, where high stress levels are common.

Healthcare workers face numerous stressors, including constantly changing work conditions, intense workloads, and emotional burnout. In this context, individuals with high psychological resilience appear to be better equipped to maintain their professional functioning despite these stressful conditions and develop resistance to burnout. Chen et al. (2024, p.4) state that psychological resilience contributes to individuals' accumulation of psychological capital in stressful environments, which in turn increases individual resilience to the challenges of work life. On the other hand, low levels of psychological resilience can lead to increased turnover rates, especially among nurses (Kelly et al., 2021). Indeed, the higher turnover rates among nurses working in critical care settings demonstrate that this relationship has both individual and organizational consequences (Zhang et al., 2025, p.6). In this context, psychological resilience plays a decisive role in healthcare workers' ability to cope with the stressors they encounter (Şanlı et al., 2024, p.2). Those possessing strong psychological resilience often demonstrate greater emotional stability, whereas those with lower resilience may struggle to fulfill professional responsibilities and are at a heightened risk of job turnover (Xu et al., 2025, p.1). These individuals can maintain functionality by maintaining a sense of purpose and emotional balance despite external pressures, which prevents adverse outcomes such as burnout and job loss (Khairy et al., 2025, p.5).

In this context, the impact of psychological resilience on turnover intention emerges significantly. Individuals demonstrating strong psychological resilience tend to handle stress more effectively and maintain a sustainable approach to workload management, which in turn lowers their turnover intention the organization (Amin and Akbar, 2013). Therefore, the psychological resilience levels of healthcare workers are predicted to have a negative and significant impact on turnover intention. Accordingly, the study's first hypothesis is proposed in the following manner:

H_1: The psychological resilience levels of healthcare workers negatively and significantly affect their turnover intention.

In the healthcare sector, where working conditions are intense, employees' evaluations of organizational elements are shaped by their psychological makeup. In this context, individuals with high levels of psychological resilience are likely to perceive organizational support elements, such as supervisor support, more positively. While the literature frequently examines the effects of supervisor support on psychological resilience, some studies indicate that this relationship may not be one-way. For instance, Gök (2024) identified a meaningful and positive association between psychological resilience levels of healthcare professionals and the support they receive from their supervisors. This result implies that those with higher psychological

resilience are more likely to recognize and internalize environmental support when facing stressful circumstances. This approach also aligns with the subjective nature of perception. Güvendi and İyigün (2024) examined supervisor support from this perspective, focusing on how these behaviors are perceived by employees rather than on the objective behaviors themselves. In this respect, an individual's psychological state can directly influence how they perceive signals from their environment. Therefore, an employee with high psychological resilience may tend to evaluate similar supervisor behaviors in a more constructive and supportive manner. Similarly, Öztürk and Bozkurt (2023, p.1287) explain that the extent to which employees feel their managers' support influences variables such as job satisfaction, commitment, and performance. The source of these feelings lies not only in the managers' behaviors but also in the employees' perceptions and psychological resilience. More psychologically resilient individuals can interpret complex or ambiguous messages in a positive light, view criticism as opportunities for growth, and maintain a positive attitude in social interactions. Therefore, psychological resilience extends beyond being an internal coping mechanism and functions as a filter that shapes one's perceptions of the environment. Individuals increase their levels of psychological resilience through cognitive reframing. A study by Hart et al. (2012, p.727) found that cognitive reframing enables individuals to reexamine their work environment and make it more effective. In this respect, psychological resilience can also allow the perception of their managers' support to be reframed in a more positive light. Accordingly, the study's second hypothesis is expressed as follows:

H_2: Healthcare workers' psychological resilience levels positively and significantly affect their perceptions of supervisor support.

Career satisfaction, often viewed as a marker of professional success, reflects both objective achievements and subjective perceptions shaped by the interplay between personal traits and environmental factors, and is strongly influenced by one's psychological makeup (Uzonwanne and Nwanzu, 2017, p.10). Consequently, psychological resilience plays a key role in shaping an individual's level of career satisfaction. Individuals with high levels of psychological resilience can more effectively cope with the challenges they encounter in work life, and this can increase their career satisfaction (Kislyakov and Tsvetkova, 2024, p.669). Wang and Gao's (2022) study also emphasizes the capacity of psychologically resilient individuals to overcome internal and external pressures, develop self-efficacy, and adopt an innovative approach. It is stated that these individuals achieve significant career development by overcoming the obstacles they encounter more quickly and effectively. Xue et al. (2022) also highlighted the mental stress caused by intense workloads in clinical nurses and demonstrated that nurses' psychological resilience impacts their career success. Similarly, Xia et al. (2024, p.9) emphasized that those demonstrating strong psychological resilience tend to establish more precise objectives and maintain academic performance more consistently when confronted with intense stress or potential threats. All these findings clearly demonstrate the positive impact of psychological resilience on an individual's career development. Accordingly, the study's third hypothesis is expressed as follows:

H3: Healthcare professionals' psychological resilience levels positively and significantly affect their career satisfaction.

2.3. The Relationship Between Supervisor Support and Turnover Intention

Supervisor support is defined as "the actions taken by immediate managers in directing and encouraging employees' attitudes and behaviors" (Güvendi and İyigün, 2024, p.229). In this context, managers are key actors who bridge the gap between the organization and its employees, ensuring that organizational support is effectively transferred to them. Similar to clinical supervision practices, managerial support in the healthcare sector enables employees to assume professional responsibility, enhance patient safety, and maintain their dedicated professional efforts (Driscoll et al., 2019, p.44). Conversely, when healthcare professionals perceive inadequate support from their supervisors, they are more susceptible to adverse consequences, including burnout, physical exhaustion, and increased turnover intention (Al-Wathinani et al., 2023, p.8). Strong relationships between supervisor support and turnover intention have also been identified in the literature. For example, Ertürk (2014, p.164) emphasized the importance of supervisor support in reducing employee turnover intentions and increasing retention rates. Support serves as a psychological and material resource for employees, influencing their decision to leave their jobs by providing confidence in coping with stress and disappointment (Xu et al., 2022, p.2). Research conducted within the framework of organizational support theory suggests that when employees perceive their values and the problems they encounter as valued by the organization, their likelihood of leaving decreases (Saputra and Syah, 2025). In the healthcare sector, Lartey et al. (2014) demonstrated that supervisor support and effective leadership practices increase experienced nurses' job satisfaction, reduce their turnover intention, and thus strengthen their commitment to the organization. In this regard, numerous empirical findings in the literature (Mete et. al., 2021; Taş and Özkara, 2020; Astuti and Helmi, 2021) confirm that supervisor support has independent and comprehensive effects on reducing turnover intentions. All these findings provide a strong theoretical basis for demonstrating that healthcare professionals' perceived support from their supervisors negatively and significantly impacts their turnover intentions. Accordingly, the study's third hypothesis is expressed as follows:

H4: Healthcare professionals' perceptions of supervisor support negatively and significantly impact their turnover intentions.

2.4. The Relationship Between Career Satisfaction and Turnover Intention

Career satisfaction is commonly understood as an individual's personal evaluation of how well their professional achievements correspond with their own expectations and core values (Conley et al., 2005, p.50). This level of satisfaction is crucial for an individual's professional well-being, and it also has significant relationships with various variables, including job performance, commitment level, and overall life satisfaction. Therefore, the individual and organizational consequences of career satisfaction should be evaluated together.

The literature emphasizes that healthcare professionals' career satisfaction levels shape both their intrinsic motivation and the processes by which they attribute meaning to their work, which plays a decisive role in developing long-term commitment within the institution (Xue et al., 2022, p.4). Within this framework, career satisfaction is considered to have a meaningful impact on turnover intention. Supporting this view, empirical evidence from a study involving research assistants revealed a significant negative correlation between these two variables (Kenek and Sökmen, 2018). This finding indicates that career satisfaction levels can reduce the turnover intention. Studies exploring the relationship between career satisfaction and professional achievement indicate that career success acts as a significant component of resilience in the career progression of nurses, promoting staff retention and ensuring the continuity of high-quality patient care (as cited in Xue et al., 2022, p.4). On the other hand, considering that career planning requirements can be interpreted differently in different cultural contexts and that employees experience varying degrees of satisfaction with their careers, human resources managers should develop strategies to meet these needs (Anafarta and Yılmaz, 2019). This strategic approach is critical for reducing staff turnover and maintaining service quality, particularly in healthcare institutions. Therefore, examining how career satisfaction influences turnover intention presents a valuable line of inquiry with potential implications for both employees and organizations. Accordingly, the study's fifth hypothesis is expressed as follows:

H_5: Healthcare professionals' career satisfaction negatively and significantly affects their turnover intention.

2.5. The Mediating Roles of Supervisor Support and Career Satisfaction

Those with strong psychological resilience tend to respond adaptively when confronted with significant life challenges or traumatic experiences (Luthar and Cicchetti, 2000, p.858). This enables employees to develop resistance to the pressures they encounter in organizational processes. Especially in occupational groups with high stress and emotional intensity, such as healthcare professionals, the impact of these psychological protective factors on turnover intention is significant. However, psychological resilience alone in an organizational context may not be sufficient to explain the tendency to stay at work. Intense workload and relational tensions with patients and their relatives can increase the tendency to leave among healthcare workers (Xue et al., 2022, p.2). This suggests that the impact of individual resources should be evaluated in interaction with environmental factors, such as organizational support and career satisfaction levels. Psychological resilience is commonly understood as encompassing both stable personal characteristics and adaptive processes shaped by contextual factors. As a trait, it encompasses enduring individual characteristics that support coping and defense mechanisms against stressors or traumatic events. In contrast, when viewed as a process, it involves flexible and situation-based responses that evolve in reaction to adverse conditions (Garrido-Muñoz et al., 2024, p.2). Given that the impact of psychological resilience can differ depending on the individual and the specific context, it is reasonable to assume that contextual factors serve a

mediating function. In this regard, examining the intermediary roles of organizational elements such as perceived supervisor support and career satisfaction on the link between resilience and turnover intention is both theoretically meaningful and well-grounded in the literature.

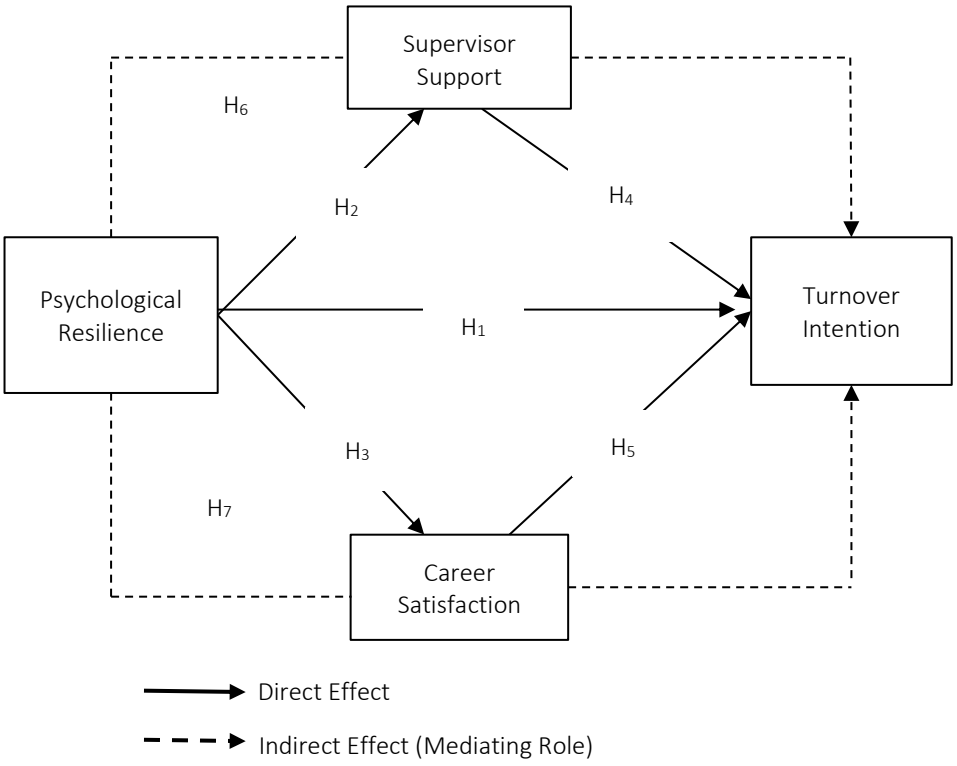
Psychological resilience, as an individual capacity, may not be sufficient on its own in an organizational context, and intense workload and interpersonal conflicts can increase the turnover intention (Xue et al., 2022). At this point, environmental factors such as perceived supervisor support are expected to play a mediating role between an individual's psychological resilience and their motivation to stay at work. Richardson's (2002) resilience process model also supports this approach. According to this model, individual resilience develops in conjunction with internal factors and external supportive systems. In other words, organizational support elements such as supervisor support can influence how an individual's resilience capacity is reflected in workplace behaviors (e.g., staying or leaving). In this context, perceived supervisor support is posited to serve as a mediating factor that mitigates turnover intention among individuals exhibiting high levels of psychological resilience. Within this framework, the remaining hypotheses of the study are outlined as follows:

H_6: Perceived supervisor support acts as a mediator between psychological resilience and turnover intention.

H_7: Career satisfaction acts as a mediator between psychological resilience and turnover intention.

In line with the proposed hypotheses, the study's theoretical model has been designed is depicted in Figure 1.

Figure 1. Research model



3. RESEARCH METHOD

This study aims to investigate whether supervisor support and career satisfaction mediate the relationship between healthcare professionals' psychological resilience and their turnover intentions within the organization. The research is based on the question: *Do the turnover intentions of healthcare professionals change depending on their level of psychological resilience?* This section provides information about the research population, sample, and data collection tools.

3.1. Research Sample and Data Collection Process

This study targets healthcare professionals employed in small-scale provinces located within the Central Anatolia Region as its research population. Compared to larger metropolitan areas, these provinces have more limited socio-economic opportunities, limited healthcare infrastructure, and conditions that make it difficult for specialist physicians to maintain long-term positions. Furthermore, a significant portion of healthcare professionals assigned to these provinces request transfers or leave their positions quickly, resulting in problems with continuity and the quality of healthcare services. Therefore, selecting these provinces for the study contributes to a better understanding of the challenges faced by physician recruitment and retention in smaller provinces of the Central Anatolia Region, which share similar socio-cultural structures.

According to the data reported in the Health Statistics Yearbook 2021, there are a total of 1,413,921 healthcare professionals in Türkiye (Republic of Türkiye Ministry of Health, 2023). The titles of the healthcare professionals included in this data are categorized as doctors, dentists, pharmacists, nurses, midwives, and other healthcare professionals. The study aimed to reach healthcare professionals by considering these titles. The research population consists of healthcare professionals working in the Central Anatolia Region. However, since no direct numerical data exist for this region, approximately 17% of healthcare professionals across Türkiye (proportional to the regional population) were considered (Republic of Turkey Ministry of Internal Interior, 2024), and the population size was estimated at approximately 240,367 people. Considering this population size, the sample size should have been at least 384, according to Sekaran and Bougie (2016, p.264).

A survey form developed by the researcher was used to obtain data from healthcare professionals. Because it was not possible to conduct the study solely at a specific institution, a combination of face-to-face and online survey methods was used to achieve a sufficient sample size and quality, thereby determining the effect size. For this purpose, healthcare professionals were contacted using a physical survey form and an online survey form created via Google Forms. Ethical approval for administering the survey instruments was granted by the Yozgat Bozok University Ethics Committee for Social and Human Sciences on November 23, 2023 (Decision No: 08/12). Data collection was conducted using the convenience sampling method

between January 15, 2024, and July 1, 2024. At the end of this process, 437 healthcare professionals were reached.

3.2. Data Collection Tools

The survey form used in the study consists of five sections. These sections, in turn, include statements regarding the socio-demographic information form, the psychological resilience scale, the turnover intention scale, the supervisor support scale, and the career satisfaction scale. The scales included in the survey are measurement tools validated in previous research. The survey items were assessed using a 5-point Likert-type scale, where responses ranged from *"1 (Strongly Disagree) to 5 (Strongly Agree)"*. Below is a summary of the measurement instruments employed in the study:

Psychological Resilience Scale: The short form of the Connor-Davidson Resilience Scale, initially developed by Connor and Davidson (2003), was utilized to measure the resilience levels of healthcare professionals. The scale's Turkish adaptation was conducted by Kaya and Odacı (2021). The scale consists of 10 items and a single dimension. The scale includes statements such as "I can adapt to changes" and "I am not distracted under stress and can think clearly."

Turnover Intention Scale: To measure participants' turnover intentions, the scale originally developed by Rosin and Korabik (1991) and adapted into Turkish by Elmas (2012) was utilized. The single-dimension scale includes four items: *"If I had a better alternative, I would leave this organization"* and *"If possible, I would consider leaving the organization."*

Supervisor Support Scale: Perceived supervisor support was assessed using the Supervisor Support Scale, a unidimensional instrument consisting of 11 items, originally developed by Giray and Şahin (2012). The scale includes items such as *"My manager defends me against others in the organization when I make an unintentional mistake"* and "*My manager is concerned about my general well-being, such as my health and happiness."*

Career Satisfaction Scale: The Career Satisfaction Scale was developed by Greenhaus et al. (1990) and adapted into Turkish by Avcı and Turunç (2012). The scale consists of five items and a single dimension. The scale includes items reflecting career satisfaction, such as *"I am satisfied with my career achievements"* and *"I am satisfied with the progress I have made in achieving my overall career goals."*

4. RESULTS

This part of the study presents the results derived from the conducted analyses.

4.1. Sociodemographic Structure of the Study Sample

Table 1 displays the socio-demographic characteristics of the healthcare professionals included in the sample.

Table 1. Socio-demographic profile of the participants

Characteristis	Category	Frequency	Percentage
Gender	Female	223	51
	Male	214	49
Marital Status	Married	199	45,5
	Single	238	54,5
Age	18-23	76	17,4
	24-29	128	29,3
	30-35	118	27
	36-41	87	19,9
	42 and abow	28	6,4
Sector	Ministry of Health Hospital	190	43,5
	University Hospital	139	31,8
	Private Hospital	108	24,7
Title	Doctor	36	8,2
	Dentist	26	5,9
	Pharmacist	63	14,4
	Nurse	165	37,8
	Midwife	52	11,9
	Other	95	21,7
Prefessional Experience	Less than 1 year	66	15,1
	1-3 year	140	32
	4-9 year	130	29,7
	10-15 year	62	14,2
	16-21 year	30	6,9
	22 year and abow	9	2,1

Of the participants, 223 were female and 214 were male, 199 were married, and 238 were single. The age distribution of the participants was as follows: 76 people were between the ages of 18 and 23, 128 people were between the ages of 24 and 29, 118 people were between the ages of 30 and 35, 87 people were between the ages of 36 and 41, and 28 people were over the age of 41. In terms of the sectoral distribution of the healthcare institution, 190 people worked at the Ministry of Health Hospital, 139 people worked at a university hospital, and 108 people worked at a private hospital. The participants' titles varied as follows: doctor (36), dentist (26), pharmacist (63), nurse (165), midwife (52), and other titles (95). Of the participants, 66 people have been working in their current institutions for less than 1 year, 140 people for 4-9 years, 130 people for 4-9 years, 62 people for 10-15 years, 30 people for 16-21 years, and nine people for more than 21 years.

4.2. Assessment of Construct Validity and Reliability

To verify the validity and reliability of the instruments used, confirmatory factor analysis (CFA) was performed. Internal consistency of the measurement instruments was evaluated using Cronbach's alpha coefficients and composite reliability (CR) values. For validity, convergent and discriminant approaches were applied. The outcomes of these analyses are presented in Table 2.

Table 2. Validity and realibility findings regarding the scales

Items	Factor Loadings	Cronbach's Alpha	CR	AVE
PR1	0,743	0,893	0,912	0,511
PR2	0,743			
PR3	0,737			
PR4	0,736			
PR5	0,731			
PR6	0,705			
PR7	0,694			
PR8	0,686			
PR9	0,683			
PR10	0,682			
TI1	0,860	0,858	0,904	0,701
TI2	0,845			
TI3	0,837			
TI4	0,806			
SS1	0,817	0,920	0,933	0,559
SS2	0,787			
SS3	0,772			
SS4	0,760			
SS5	0,753			
SS6	0,750			
SS7	0,744			
SS8	0,744			
SS9	0,740			
SS10	0,703			
SS11	0,639			
CS1	0,828	0,848	0,893	0,625
CS2	0,812			
CS3	0,801			
CS4	0,779			
CS5	0,730			

PR: *Psychological Resilience;* ***TI:*** *Turnover Intention;* ***SS:*** *Supervisor Support;* ***CS:*** *Career Satisfaction;* ***CR:*** *Composite Reliability;* ***AVE:*** *Average Variance Explained.*

Table 2 presents the reliability indices of the study scales. Psychological resilience (α = 0.893, CR = 0.912), turnover intention (α = 0.858, CR = 0.904), supervisor support (α = 0.920, CR = 0.933), and career satisfaction (α = 0.848, CR = 0.893) exceeded the 0.70 threshold,

supporting their internal consistency and reliability (Fornell and Larcker, 1981; Sürücü et al., 2023).

Construct validity was assessed by analyzing the average variance extracted (AVE) and composite reliability (CR) values. The results showed that all AVE values exceeded the 0.50 threshold, and CR values were higher than their respective AVE scores, supporting convergent validity (Hair Jr et al., 2009; Sürücü et al., 2023). In assessing discriminant validity, the square root of the AVE for each construct (√AVE) was compared with the correlation coefficients between constructs. As recommended by Fornell and Larcker (1981), the √AVE values exceeded the inter-construct correlations and remained below 0.90, indicating that discriminant validity was achieved (Sürücü et al., 2023). Table 3 summarizes these findings.

Table 3. Correlation analysis results

Variables	Mean	Sd.	1.	2.	3.	4.
1.Psychological Resilience	3,61	0,71	0,715[a]			
2.Turnover Intention	2,47	0,99	-0,260**	0,837[a]		
3.Supervisor Support	3,50	0,78	0,591**	-0,220**	0,748[a]	
4.Career Satisfaction	3,54	0,84	0,682**	-0,276**	0,633**	0,791[a]

***p<0,01; a= The square root of AVE.*

Table 3 presents the descriptive statistics of the research variables, along with the correlation coefficients that indicate the relationships among them. According to the correlation analysis results, there is a positive, significant relationship between psychological resilience and supervisor support ($r = 0.591$; $p < 0.01$) and career satisfaction ($r = 0.682$; $p < 0.01$), while there is a negative, significant relationship between turnover intention ($r = -0.260$; $p < 0.01$). Similarly, there is a significant negative relationship between turnover intention and supervisor support ($r = -0.220$; $p < 0.01$) and career satisfaction ($r = -0.276$; $p < 0.01$). A statistically significant positive correlation was found between supervisor support and career satisfaction ($r = 0.633$, $p < 0.01$).

4.3. Results of the Hypothesis Test

Structural equation analysis was conducted using LISREL 8.7 to test the research hypotheses. In the mediator variable analysis process, the model was tested in a two-stage process based on the assumptions proposed by Baron and Kenny (1986). In the first stage, a three-step approach was followed to compare beta coefficients between variables and examine the mediating roles of psychological resilience and career support.

In the first step, a measurement model was constructed to demonstrate the direct effect of psychological resilience on turnover intention (Model 1). In the second step, a mediation model was developed, integrating the influence of psychological resilience on supervisor support and how, in turn, supervisor support affects turnover intention (Model 2). Similarly, a mediation model was constructed that combined the effect of psychological resilience on career support and the impact of career support on turnover intention (Model 3). In the third step, two

measurement models were constructed, reflecting the research model, with supervisor support and career satisfaction added separately as mediators (Models 4 and 5). In these models, the beta coefficient demonstrating the effect of psychological resilience on turnover intention should be significant and less significant than the effect in Model 1 (Baron and Kenny, 1986). When these conditions are met, supervisor support and career satisfaction are determined to be mediating variables.

Table 4. Analysis results regarding the research model

Model	Hypothesis	Regression Path	β	t	Result
1	H_1	PR→TI	-0,30	-5,45	Acceptance
2	H_2	PR→SS	0,65	10,35	Acceptance
2	H_4	SS→TI	-0,26	-4,66	Acceptance
3	H_3	PR→CS	0,78	12,32	Acceptance
3	H_5	CS→TI	-0,33	-5,70	Acceptance
4	H_6	PR→SS→TI	-0,24	-3,20	Acceptance
5	H_7	PR→CS→TI	-0,13	-1,33	Reject
Model 4 Indirect Effect			-0,169		
Model 5 Indirect Effect			-0,2574		

PR: *Psychological Resilience;* ***TI:*** *Turnover Intention;* ***SS:*** *Supervisor Support;* ***CS:*** *Career Satisfaction*

Table 4 presents evidence that the expectations concerning the path (β) coefficients for identifying the mediation effect were fulfilled in all models except Model 5. The analysis of the first model revealed that psychological resilience had a significant and negative impact on turnover intention ($\beta = -0.30$; $p < 0.00$; $t > 2.56$). The analysis of the second model revealed that psychological resilience positively and significantly predicted supervisory support ($\beta = 0.65$; $p < 0.00$; $t > 2.56$), and supervisory support had a significant and negative effect on turnover intention ($\beta = -0.26$; $p < 0.00$; $t > 2.56$). Similarly, in the third model, psychological resilience was found to have a significant positive effect on career satisfaction ($\beta = 0.78$; $p < 0.00$; $t > 2.56$) and an adverse impact on turnover intention ($\beta = -0.33$; $p < 0.00$; $t > 2.56$). In the fourth model, where supervisor support was included as a mediator variable, the effect of psychological resilience on turnover intention was observed to decrease ($\beta = -0.24$, $p < 0.00$; $t > 2.56$). In Model 5, although the effect of psychological resilience on turnover intention was observed to decrease, the mediating role of career satisfaction could not be confirmed due to the insignificant t-value ($\beta = -0.13$, $p < 0.00$; $t < 2.56$). The second step in the mediator variable analysis process was to compare model fit values. In this context, since the mediating role of career satisfaction could not be verified in the previous stage, the goodness-of-fit values for determining the mediating role of supervisor support alone are given in Table 5.

Table 5. Goodness-of-fit values regarding the mediating role of supervisor support

Model	X^2/sd	p	RMSEA	GFI	SRMR	NFI	CFI
1	4,11	0,000	0,084	0,91	0,051	0,95	0,96
2	3,04	0,000	0,068	0,87	0,051	0,95	0,97
4	3,02	0,000	0,068	0,87	0,046	0,95	0,97

Model Anlamlılığı: $p<0,01$
Model Uyumu: $x^2/sd<5$

When the fit indices were examined, it was found that the research model (Model 4) had excellent and acceptable fit values. Both the CFI (0.97) and NFI (0.95) values are above the 0.90 threshold, indicating a strong fit, while the RMSEA value of 0.068 falls within the acceptable range (Schermelleh-Engel et al., 2003). When the mediation status of supervisor support was evaluated, the goodness-of-fit values in Model 4 were observed to be lower than in Model 1. However, direct and indirect effects were also examined. Accordingly, the direct effect of psychological resilience on turnover intention was β=-0.30, and the indirect effect was β=-0.17 (p=0.00). These results indicate that psychological resilience has a positive and significant effect on turnover intention, and supervisor support has a partial mediating role in this relationship. The findings indicate that hypotheses H_1, H_2, H_3, H_4, H_5, and H_6 of the study were supported. It shows that the H_7 hypothesis is not supported.

5. DISCUSSION

This research evaluated an integrated model to investigate how psychological resilience influences turnover intention among healthcare professionals, with particular focus on the mediating roles of perceived supervisor support and career satisfaction. The results obtained from the structural equation modeling give substantial support to the hypothesized model. The findings revealed that psychological resilience exerted a direct, negative, and statistically significant influence on turnover intention, and also had an indirect impact mediated by supervisor support. The career satisfaction variable, while having a direct effect on turnover intention, was not found to be statistically significant in its mediating role. These results suggest that individual resilience strengthens the tendency to stay, but for this effect to be more effective, the involvement of organizational support factors, particularly supervisor support, is crucial.

The first finding of the study indicates that as healthcare workers' psychological resilience levels increase, their turnover intention decreases. This finding is consistent with the results obtained in studies by Şanlı et al. (2024), Xu et al. (2025), and Khairy et al. (2025). These studies reveal that individuals with high psychological resilience cope more effectively with job stress and have more substantial organizational commitment. Within the framework of COR Theory, resilience represents an individual's personal strength that buffers resource loss. According to Hobfoll's (1989) principle of loss primacy, individuals exhibit behaviors aimed at preventing loss before seeking gain. Therefore, employees with high resilience are expected to view leaving their job not as a means of gaining new resources, but rather as a risk of losing existing resources (status, seniority, income, social relationships). Therefore, this finding supports the idea that psychological resilience is a fundamental personal resource that explains employees' tendency to stay in the organization.

The second finding of the study indicates that employees with high psychological resilience perceive more support from their managers, and manager support functions as an important mechanism that partially explains the relationship between resilience and turnover intention.

This finding is consistent with the COR approach, which argues that employees' individual resources become more effective when combined with organizational social resources. Hobfoll et al.'s (2018) concepts of "resource caravans" and "resource passageways" suggest that personal resources have a stronger impact when combined with organizational or social support structures. The study's findings suggest that, within this framework, the effect of resilience on turnover intention is strengthened, particularly through supervisor support. This finding is consistent with Richardson's (2002) resilience process model. The model suggests that the impact of individual resources becomes more pronounced when considered in conjunction with external support systems. Similarly, the studies of Lartey et al. (2014) and Hart et al. (2012) also suggest that organizational support structures channel individual resilience into workplace behaviors. In this respect, supervisor support can also be considered as a factor that increases the functionality of individual psychological resources.

The third finding of the study is that although psychological resilience increases career satisfaction, career satisfaction does not emerge as a mechanism explaining the relationship between resilience and turnover intention. Şanlı et al. (2024) and Xue et al. (2022) reported that career satisfaction has an indirect effect on turnover in some samples. While this finding may seem unexpected at first glance, it points to an understandable pattern when evaluated from the perspective of COR Theory. According to COR Theory, not all resources are equally functional in every context and at every stress level. Hobfoll et al. (2018) argue that in organizational conditions where the threat of loss is dominant and stress levels rise, primary resources can be a determining factor in employee behavior. In this context, supervisory support serves as a primary resource that directly protects employees and instills trust within the organization, while career satisfaction may function as a secondary resource or a resource that accumulates over time. Therefore, the lack of support for the mediating role of career satisfaction in this study is theoretically based on the principle of resource selectivity.

This research also reveals that healthcare workers who perceive higher levels of support from their managers have significantly lower intentions to leave their jobs. This finding is supported by empirical data obtained by Ertürk (2014), Xu et al. (2022), and Lartey et al. (2014). Lartey et al. (2014) stated that supervisor support strengthens commitment to the organization by increasing job satisfaction, thereby reducing turnover intentions. The lower turnover intentions of healthcare workers who perceive higher levels of support from their managers can be explained by the resource passageways and primacy of loss principles of COR Theory. According to Hobfoll et al. (2018), organizational support creates environmental gateways through which individuals can conserve or replenish their personal resources. In this respect, managerial support serves as a buffer mechanism against job stress and the threat of resource loss. A supportive manager helps employees preserve their existing resources (self-esteem, sense of control, social acceptance) by reducing their perceptions of burnout, uncertainty, and worthlessness. Thus, employees with high perceptions of support are less likely to leave the organization. This is because leaving their job means severing their existing resource network.

Therefore, the finding suggests that organizational support resources, as well as individual resilience, shape employees' resource conservation strategies.

The final finding of the study shows that as healthcare professionals' career satisfaction increases, their intention to leave their job decreases significantly. This result supports the findings of Kenek and Sökmen (2018) and Xue et al. (2022). Employees who are satisfied with their careers are observed to have higher motivation to stay. However, the literature also indicates that this relationship is sensitive to contextual factors and may vary across different cultural or organizational environments (Anafarta and Yılmaz, 2019). Furthermore, this finding reflects the resource gain spiral principle of COR Theory. According to Hobfoll (2001), the existence or strengthening of a resource increases the likelihood of an individual acquiring new resources, thus creating a positive gain cycle. Employees who are satisfied with their careers feel rewarded for their past efforts, that their efforts are meaningful, and that their professional identity is strengthened. This leads to the acquisition of additional resources such as emotional energy, self-efficacy, and organizational belonging. In this process, employees tend to maintain their current job gains rather than leave because they view it as a resource accumulation area. Therefore, the fact that career satisfaction reduces intention to leave may reflect employees' tendency to maintain long-term resource stability.

The study's findings, when considered within the Turkish context, necessitate a more in depth evaluation. This is because intention to leave does not always translate into action. From this perspective, it's crucial to discuss why healthcare workers still choose to leave their jobs, as well as why they persist. When these findings are considered together, it becomes clear that intention to leave healthcare workers is not limited to a psychological or emotional response. In this context, factors such as public security, the possibility of finding alternative employment, the cost of changing specialties, mandatory service practices, family responsibilities, regional employment restrictions, and societal risk perception may hinder the transformation of intention to leave into action. This supports the COR Theory's notion that fear of resource loss surpasses motivation for gain (Hobfoll et al., 2018). In other words, even if employees want to leave their current positions, they may not act on this decision due to potential new losses (income, status, seniority, social circle, etc.). Türkiye's cultural context also reinforces this dynamic. In collectivist cultures, leaving a job is a collective decision-making process evaluated at the household level. The reluctance of individuals working in public healthcare institutions to risk losing secure employment, emerges as an explanatory factor for the gap between intention and behavior.

Consequently, this study departs from the two extreme approaches in the literature, which reduce explanations to individual factors or organizational policies, and proposes a multilayered assessment. While individual resources tend to reduce turnover intentions, the determining factor in translating this effect into behavior is the interaction between organizational support mechanisms and macro-level economic and cultural conditions.

6. LIMITATIONS and RECOMMENDATIONS

It should be noted that this study has several limitations. First, the research data were obtained only from healthcare professionals working in small-sized provinces in the Central Anatolia Region of Türkiye. Türkiye's healthcare system structure exhibits regional differences in terms of institution types, workload levels, and organizational culture. Therefore, this should be considered a significant methodological limitation that limits the generalizability of the findings to all healthcare professionals nationwide. Given that healthcare professionals in metropolitan cities may have different experiences with workload, institution structure, and organizational roles, the findings of this study offer valuable insights into the Turkish context, but caution should be exercised when directly generalizing to all healthcare institutions. Therefore, future research is recommended to retest the model with larger and more diversified samples encompassing different regions of Türkiye, various institution types (private hospitals, university hospitals, city hospitals), and different cultural backgrounds. Furthermore, the data used in the study are based on subjective assessments, and factors such as social desirability bias or respondent bias may limit objectivity. It would be beneficial for future research to produce more holistic and objective results by supporting quantitative data with qualitative methods.

In this study, supervisor support and career satisfaction variables were specifically included in the model as mediating mechanisms to explain the relationships between psychological resilience and intention to leave. The selection of these two variables is important for the theoretical framework of the study because they are consistent with the resource interaction approach of COR Theory and represent critical processes in understanding the organizational behavior of healthcare professionals. Furthermore, it would be beneficial for future research to expand the scope of the model to include other variables that may influence intention to leave, such as organizational justice, job stress, leadership style, and emotional exhaustion. Examining these variables will contribute to a more holistic understanding of the processes of employee resource loss, burnout, and organizational commitment.

The study's results also offer some methodological recommendations for future research designs. Using longitudinal research designs to examine the temporal dynamics of relationships between variables can provide stronger evidence of causality. Mixed research methods, on the other hand, can both deepen the interpretation of quantitative findings and provide more qualitative insights into employees' experiences. Furthermore, using multilevel analysis to understand how organizational factors interact with individual characteristics is considered a significant contribution to the literature.

These research results have practical implications for healthcare institutions. First, considering the role of psychological resilience in supporting employee engagement, it is crucial for organizations to develop employee resilience development programs, stress management training, and work-life balance practices. Second, the relationship managers establish with

employees appears to play a critical role in their intention to leave. Therefore, manager training aimed at developing supportive leadership behaviors is an area of practice that should be strengthened within the organizational culture. Third, the career satisfaction finding demonstrates healthcare professionals' sensitivity to professional advancement, recognition, development opportunities, and fair performance evaluation systems. However, evaluating the research results within the Turkish context highlights an important point: intention to leave may not always translate into action. In Türkiye, factors such as economic conditions, limited opportunities for alternative employment, perceived security associated with public employment, cultural norms of commitment, and the cost of professional mobility may delay employees' decision to leave. Therefore, the intention to leave observed in this study may reflect employees' perceptions of resource loss related to working conditions rather than their desire to leave the organization. In other words, in Türkiye, turnover intention may function as a sign of dissatisfaction with current conditions rather than the likelihood of employees leaving their current job.

In conclusion, this study demonstrates that healthcare workers' tendency to remain in their organizations can be explained by individual (resilience), managerial (support), and professional (career satisfaction) factors, and contributes to healthcare institutions at both theoretical and practical levels. The findings will serve as a guide for managers, human resources departments, and policymakers seeking to strengthen employee engagement.

7. CONCLUSION

This study examined the impact of psychological resilience on intention to leave among healthcare professionals and tested the mediating roles of perceived supervisor support and career satisfaction in this relationship. The findings obtained through structural equation modeling largely supported the proposed model. Psychological resilience demonstrated a direct, negative, and significant effect on intention to leave. It also exerted an indirect effect through supervisor support. While career satisfaction had a direct, significant effect on intention to leave, its mediating role was not statistically confirmed. These results suggest that psychological resilience at the individual level strengthens employees' tendency to stay with their organization, but this effect becomes more pronounced when combined with organizational resources such as supervisor support. Conversely, the direct effect of career satisfaction suggests that employees' levels of job satisfaction are an important variable influencing intention to stay with their organization.

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