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The Impact of Managerial Personalities on Managerial Roles – A Study on Hospital Managers*

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Abstract

What is the personality types, which features and how to reflect the personality of individuals in business life, both psychology and organizational behavior science has always been a subject of curiosity. Therefore, the scope of the research is to determine whether there is a relationship between these personality types and their roles in managerial activities for managers and how much personality affects which role. The aim of this study is to investigate the effect of personality types on executive roles in various managerial positions in hospital and to determine whether there is a relationship between personality types and executive roles, and if there is a relationship

* This study is derived from Demet OZANER's doctoral dissertation titled “The Effect of Managerial Personalities on Managerial Roles in Hospital Managers”.

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between which personality type and which executive role. This study is one of the first study in the context of determining the relationship and effect between managerial roles and personalities of managers. This study is observational, cross-sectional and descriptive. The questionnaire was used as the data collection tool and it was applied to the participants in 298 executive positions, public and private health sector. In the study, 15% of personality types had a leadership role; 13% in the role of external representation; 5% to the entrepreneurial role; 6% for follower role, 10% for resource provider role; 12% effect on the role of spokesperson. Responsibility dimension of personality types; leadership, external representation, resource provider iii and spokesman roles; compatibility dimension to the role of the spokesperson; balance size; leadership, resource provider and spokesman role; the dimension of openness to experience, to all executive roles except the spokesperson; extroversion dimension affects leadership, external representation, entrepreneur and follower roles. In line with the findings of the study, it is thought that the effect of personality types on the managerial roles needed may constitute a criterion in the selection of managers and the study will shed light on the new studies to be done on this subject.

Keywords: Personality types, executive roles, executive roles in hospitals

INTRODUCTION

In the 21st century, the acceleration of scientific research, the widespread use of information systems in organizations, and the diversification of the qualifications required for employees and managers have led to significant changes. The personality traits of employees and managers greatly influence the work performed and its outcomes. For businesses to achieve their goals, it is essential that individuals at all levels of management work together in a harmonious and coordinated manner.

The challenges in healthcare services are deepening due to intense competition, differing expectations of service providers and recipients, rapid developments in service types, and the multi-stakeholder nature of the sector. Healthcare professionals need to adapt their existing structures, technological equipment, financial resources, and human resources to the changing environment in a timely manner in order to look to the future with confidence and sustain their existence. To achieve this goal, managers in this sector, which encompasses various professional groups, must organize management processes effectively and define job roles accurately. The success of managers expected to create value in healthcare services should be to facilitate cooperation among all units and establish a well-functioning service network.

Therefore, based on the view that the personality traits of managers are a decisive factor in making effective, accurate, and rational decisions, especially in the healthcare sector where many different professions collaborate, this topic is considered worthy of study. The purpose of this research is to investigate the impact of personality types on managerial roles among individuals in managerial positions within various departments of a hospital, and to determine whether there is a relationship between personality types and managerial roles, and if so, which personality types are associated with which managerial roles.

General Information

The Concept of Manager

A manager can be defined as a person who aims to achieve organizational goals and carries out planning, organizing, directing, coordinating, decision-making, and control functions in line with these objectives (Bachkirov, 2015:863). In businesses, the manager is most prominently involved in the decision-making function. They take on the role of commanding and directing operations while also focusing on maintaining the organizational structure. Supervision and regulation are among the responsibilities they must fulfill (Brickley et al., 2015:54).

Managerial Personality and Desired Traits in Managers

The necessary traits for managers include being objective, making timely decisions, self-confidence, taking initiative, possessing a sense of responsibility, having a strong will, and being able to communicate effectively. Concepts such as leadership and strategic leadership have emerged in modern management. The primary reason for this is the practical differences created by the classical manager's management style compared to that of a leader-manager. While managers exhibit behavior focused on order, obedience, control, compliance, results, presentation, egocentrism, and authority, leaders are creative, guiding, questioning, empowering, quality-focused, understanding, and group-centered. Although the desired managerial personality and traits may appear as described today, they can vary in practice. In some places, seniority is considered important for management, while in others, a nepotistic approach may be adopted, neglecting meritocracy. However, it is often discussed that an effective manager should possess leadership qualities (Ergeneli, 2006). While most literature presents differing narratives, the functions of a manager can be briefly listed as follows (Ergeneli, 2006):

- Providing information
- Persuasion and influence

- Integration
- Directing
- Teaching and training

Mintzberg's Managerial Roles

Henry Mintzberg aimed to define the roles of managers, emphasizing the significance of good project management for organizational success. He identified ten managerial roles, which can be categorized into three main groups: interpersonal roles (representative, leader, liaison), informational roles (monitor, disseminator, spokesperson), and decisional roles (entrepreneur, disturbance handler, resource allocator, negotiator) (Aypay, 2014:15).

Interpersonal Roles: A manager is responsible for engaging in and managing all kinds of interpersonal relationships. They should facilitate the introduction of the right individuals to one another and establish a communication network (Aypay, 2014:7).

Informational Roles: Managers receive a continuous flow of information. It is their duty to utilize and disseminate all information—whether political, tactical, functional, or related to control—effectively.

Decisional Roles: Managers are responsible for solving problems, redesigning systems, resolving conflicts, correcting deficiencies, creating optimal working conditions with other departments, and eliminating errors or misunderstandings.

Regardless of their level, managers must utilize functions such as rewarding, motivating, persuading, negotiating, mediating, strengthening communication, training, and crisis management for their subordinates. Additionally, a manager is someone who develops strategies, creates resources, and controls operations (Altamony and Garaibey, 2017:922). A manager should draw on scientific knowledge for their theoretical foundation, inspiration and talent from art, and practical problem-solving experience from craft.

Hospital Organization and Hospital Manager

The significant advancements in medicine and technology during the 20th century have rapidly increased specialization in medicine and diversified healthcare personnel. This rapid growth and division of labor have heightened the likelihood of various conflicts among personnel trained at different levels and areas.

Hospital organizations are structurally complex and operate as open, dynamic systems. As 24-hour service providers, they produce uninterrupted services due to their urgent and non-

declinable nature. Moreover, patients are not in a position to determine or evaluate the type and quality of the services provided. These factors present additional challenges inherent to the nature of healthcare (Yükçü and Yüksel, 2015). In addition to the challenges mentioned above, particularly hospitals outside the public sector face issues related to income-expenditure and cost control. High technology and expertise increase both personnel costs and the maintenance costs of medical equipment, complicating the affordability of the services provided. All these challenges impose significant responsibilities on the hospital's management mechanism (Uğurluoğlu, 2015:54).

A hospital manager is responsible for managing the effectiveness of employees and ensuring the achievement of goals, much like managers in other sectors. Achieving superior organizational performance is almost always a manager's responsibility. In literature, a hospital manager is defined as "the person who manages the hospital by using the executive authority granted by the board of directors." However, this can vary in private hospitals and may also undergo periodic changes due to laws and decrees in the public sector. While some private entities have a board of directors, others may have a general secretary, general manager, or just a chief physician. In some cases, particularly in smaller hospitals, these individuals may also be the owners of the hospital (Yükçü and Yüksel, 2015). In the public sector, particularly since 2012, the Health Transformation Program has provided administrative and partial financial autonomy to institutions, and the separation of the chief physician's role from hospital administration has led to the emergence of the hospital director position, with an attempt to adopt a professional management approach.

Healthcare is one of the most responsibility-laden areas within the service sector. The hospital manager is tasked with ensuring the efficient operation of the system. Efficient operation requires a patient-centered approach, flexibility, a strong corporate culture, continuous training and development, adherence to ethical standards, and a 360-degree respectful environment. Additionally, given the significant contribution of the workforce to service output, it is essential for managers to be scientific, skilled, and competent (Yılmaz, 2017:96).

Management Roles in Hospital Management

Sperry (2003) categorized the managerial skills of hospital managers into 12 subheadings under 3 main headings. These are presented in Table 1.

Table 1: Basic Managerial Skills That Managers Should Have in Healthcare Institutions

Category	Skill
Operational	- Strengthening commitment and motivation - Maximizing team performance - Delegation of authority to maximize performance - Effective management of stress and time
Relational	- Effective and strategic communication - Managing and negotiating conflicts and difficult people - Coaching for maximum performance and development - Guidance and consultation for maximum performance and development
Analytical	- Strategic thinking and decision making - Dominating the budgeting process - Mastering and controlling financial and human resources - Assessment of company and personal resources

Guo (2003) examined the roles of top hospital managers in six categories. These roles, which are as important for the scale used in this thesis as those of Mintzberg, are listed as follows:

- Leader
- Importance of communication
- Observer
- Crisis/problem solver
- Resource distributor
- Strategist

Pillay (2008) studied hospital management separately for public and private sectors; both were classified in terms of roles, including planning, organizing, leading, controlling, legal-ethical issues, and self-management.

The Concept of Personality

Personality is a concept that emerges from internal factors and includes an individual's learning, interpretation, perception, and thought processes, influenced by biological and environmental factors (Işık, 2018: 142). The quality of interpersonal communication, adaptability to changing conditions, achievements, social status, and happiness are among the variables that have made personality a widely studied topic (McAdams, 2010). Veccohio (1988) viewed personality as a characteristic that distinguishes individuals from one another. Greenberg (1999) defined personality as the unique, stable patterns of behavior, thoughts, and feelings exhibited by individuals. Durna (2005) explained that personality consists of various factors such as physical, mental, and emotional aspects, which can differ significantly. He classified individuals into two

basic personality types: Type A and Type B. According to this classification, Type A individuals are highly competitive, ambitious, impatient, dedicated to their work, and sensitive to time. In contrast, Type B individuals are less confrontational regarding time, more patient, calmly face life's challenges, and have a balanced and relaxed approach. Thus, personality is the way an individual expresses their thoughts, feelings, and behaviors, determining their style of physical and social interaction (Tomrukçu, 2008). Due to the physical, mental, and emotional differences among individuals, they also interpret events differently. This forms the basis of personality (Durna, 2005).

Theories of Personality

While conducting studies related to mental health and attempting to explain its structure, personality has been expressed through various theories, which are six in total:

- Psychoanalytic Approach
- Psychoanalytic-Social (Neo-Freudian) Approach
- Dispositional Trait Approach
- Behavioral/Social Learning Approach
- Humanistic Approach
- Biological Approach

Developed by Paul Costa and Robert McCrae, this theory encompasses all personality traits (Merdan, 2013). McCrae and Costa (2006) proposed that this theory, based on empirical observations, consists of five main dimensions. In terms of the biology of personality, attention should be given to the brain's anatomical structure and the functioning of the nervous system. Goldberg (1992) identified these five fundamental dimensions as:

- Extraversion
- Agreeableness
- Conscientiousness
- Neuroticism (emotional stability)
- Openness to experience

The Five-Factor Personality Model suggests that the characteristic differences among individuals can be classified universally, providing a comprehensive framework for understanding human personality. This model identifies five core dimensions—openness, conscientiousness, extraversion, agreeableness, and neuroticism—that are believed to capture the broad spectrum of

personality traits across different cultures and contexts. Each dimension encompasses specific attributes that contribute to the uniqueness of individuals, such as creativity and curiosity under openness or organization and reliability under conscientiousness. By categorizing these traits systematically, the model not only offers valuable insights into individual behavior but also serves as a foundational tool in various fields, including psychology, management, and human resources. A deeper exploration of these dimensions can reveal their practical implications, particularly in predicting job performance, leadership styles, and interpersonal dynamics.

General Managerial Roles

Generally, in the literature, the roles undertaken by managers are summarized as encompassing a wide range of responsibilities that are crucial for organizational success (Ergeneli, 2006). These roles include, but are not limited to, planning, organizing, leading, and controlling, which collectively form the foundation of effective management practices. Managers are expected to adapt to varying circumstances, balance competing demands, and align their roles with organizational goals. Each of these roles requires distinct skills and competencies, such as strategic thinking, interpersonal communication, and decision-making abilities. Expanding on these roles provides deeper insights into the multifaceted nature of managerial responsibilities and their implications for organizational performance:

- Providing information
- Persuasion and influence
- Unification
- Giving orders
- Teaching/education

Henry Mintzberg, in 1973, aimed to define the roles of managers based on the understanding that effective project management is crucial for an organization's success, and his definitions have gained significant acceptance in the field of business. Within this framework, he identified 10 managerial roles:

- Figurehead
- Leader
- Liaison
- Information seeker and disseminator
- Spokesperson

- Entrepreneur
- Problem solver
- Resource allocator
- Negotiator

Character can be viewed as the foundational structure or skeleton of personality, serving as a framework through which individual differences are manifested and expressed through unique descriptors. These descriptors often reflect deeply ingrained traits that define a person's moral and ethical compass, influencing their behavior and decision-making processes. In the context of management, character traits are particularly significant, as they correspond to certain key attributes that distinguish one manager from another in the eyes of employees. Traits such as honesty, resilience, empathy, and accountability not only shape how managers lead and interact with their teams but also impact the trust and respect they command within the organization. By fostering positive character traits, managers can build stronger relationships with their employees, promote a healthy work environment, and drive organizational success. Exploring the interplay between character traits and managerial effectiveness can provide valuable insights into the dynamics of leadership and employee perceptions (Çam et al., 2023).

Managers are classified based on various attributes: authoritative or democratic, courageous or passive, ambitious or complacent, calm or fiery, compromising or contentious, indicating that these traits are results of the managers' character structure. Such traits are not inherited but are shaped by experiences and various situations encountered throughout life. These traits can always be improved upon and can change within situational contexts (Erkuş and Tabak, 2009: 216).

The concept of personality, therefore, integrates an individual’s past experiences, current circumstances, and aspirations for the future, creating a dynamic and evolving framework that shapes behavior and identity. This temporal dimension highlights the inherent complexity of personality, as it is continuously influenced by historical context, present interactions, and future expectations. Consequently, it can be asserted that personality phenomena are strongly correlated with time, reflecting the ongoing interplay between life events, personal growth, and adaptation. Understanding this relationship allows for a deeper exploration of how personality traits develop and change over time, shedding light on the temporal factors that contribute to individual differences and their broader implications in various domains, such as psychology, education, and

organizational behavior. A manager's ability to resolve issues based on their experiences exemplifies the relationship between personality, time, and management. A manager's behavior significantly influences the design of conditions for the future, as well as the organization. However, the relatively unchangeable nature of personality presents challenges in developing managerial skills and the uncertainty regarding the duration of this development. Therefore, personality structure and the roles a manager embodies should not be considered independently (Tozkoparan, 2013).

Family and education significantly influence personality development. Individuals raised in supportive family environments tend to become just, democratic, and understanding individuals (Tokat and Giderler, 2006: 62). A manager who has grown up in such an environment is likely to be honest, visionary, innovative, and democratic. Work and life are not distinctly separated elements. However, since a manager greatly influences the motivation of those within their sphere of impact, the manager's personality traits are of great importance (Tokat and Giderler, 2006: 66). From the perspective of the Five-Factor Personality Theory, it is expected that a manager possesses a high degree of extraversion, emotional stability, agreeableness, conscientiousness, and openness (Cable and Judge, 2003: 200).

When examining personality types through the lens of the Five-Factor Model, it becomes evident that the elevation of each factor shares similar or overlapping traits with Mintzberg's 10 managerial roles. For instance, an extroverted individual may excel in managerial roles such as leader, information disseminator, representative, and spokesperson. Similarly, a person with high openness might perform well in roles like negotiator and problem solver.

It can be anticipated that all five personality traits have some degree of influence or relevance to the ten managerial roles. In our study, we specifically investigate which personality type affects which managerial role, to what extent, and whether these relationships vary based on factors such as age, gender, and position.

1. RESEARCH METHODOLOGY

The purpose of this research is to investigate the impact of personality types on the managerial roles of administrators working in various positions within hospitals and to determine whether there is a relationship between personality types and managerial roles. This study is one of the few

studies in the literature that aims to reveal the relationship between personality types and managerial roles in healthcare institution managers.

The research employs a quantitative methodology through a survey application. During the planning phase, it was proposed to conduct the study across 18 hospitals on the Asian side of Istanbul, including 3 public university hospitals, 3 foundation university hospitals, 3 accredited private hospitals, 3 non-accredited private hospitals, 3 public training and research hospitals, and 3 public hospitals. Due to administrative constraints and voluntary participation issues in public hospitals, data collection was limited to institutions where permissions were granted and participation was achieved. Data was ultimately collected from 3 accredited private hospitals, 3 non-accredited private hospitals, 3 foundation university hospitals, 3 state hospitals, and 5 training and research hospitals where permissions were granted.

The research focused on senior managers working in both public and private sectors, including:

- Chief Physician/Deputy Chief Physician
- Head Nurse/Deputy Head Nurse
- General Manager/Deputy Manager
- Hospital Manager/Deputy Manager
- Other senior administrative managers (Human Resources Manager, Financial Affairs Manager, Finance Manager, Quality Manager, Corporate Marketing Manager, and their assistants)

These hospital managers were selected as the sample, because they are the key decision-makers who directly influence hospital operations, performance, and organizational outcomes. Additionally, convenience sampling was employed, including all senior managers from the specified hospitals who voluntarily agreed to participate in the survey. A total of 298 individuals who completed the scales thoroughly were analyzed.

1.1. Scales Used

The research utilized three types of survey instruments:

- Questions to collect sociodemographic data
- Five-Factor Personality Inventory
- Managerial Roles Determination Scale

The Five-Factor Personality Inventory Scale is a tool that has been widely used in both national and international studies. The study referenced in this thesis is *"A Research on the Relationship Between Personality Types, Emotional Intelligence, and Job Satisfaction"* conducted by Sudak and Zehir (2013), which ensured the validity and reliability of the scale. In the study, 79 questions prepared on a 5-point Likert scale were used to measure the variables (50 questions for personality types, 16 for emotional intelligence, and 13 for job satisfaction). After the factor analysis, 21 questions were excluded from the scale because they did not distribute properly or loaded onto other factors, reducing the scale's reliability. The remaining 58 questions were distributed across 11 factors. As expected, the personality types scale, consisting of independent variables, was distributed into 5 factors, while the managerial roles scale, consisting of dependent variables, was distributed into 6 factors. In the validity study, the total variance explained by the exploratory factor analysis was 64.690%. In the literature, reliability analyses of the five-factor personality scale consistently yield values above 0.70, which are considered reliable. In this study, the reliability analysis values for the personality types—Extraversion, Agreeableness, Conscientiousness, Emotional Stability, and Openness to Experience—are 0.8457, 0.8188, 0.7974, 0.8719, and 0.7457, respectively.

The Managerial Roles scale underwent a validity and reliability study through a pilot test (pre-test and post-test) conducted by Albayrak (2007). Factor analysis resulted in four factors that explained 65.939% of the total variance. The Cronbach's Alpha values for resource centralization, management centralization, end-user, and management duration were 0.8285, 0.8681, 0.7331, and 0.7054, respectively. In managerial roles, the impact values under Varimax rotation for Leader Role, Liaison Role, Monitor Role, Spokesperson Role, Entrepreneur Role, and Resource Allocator Role across the four criteria are as follows:

- Leadership: 0.1286, 0.2209, 0.0751, -0.0305
- External Representation: 0.1235, 0.0768, 0.2648*, 0.0394
- Spokesperson: 0.2101, 0.3035*, 0.0985, 0.1704
- Follower: 0.3253**, 0.2352, 0.2398*, 0.1254
- Entrepreneurship: 0.1563, -0.0158, 0.0552, -0.0501
- Resource Provider: 0.1151, 0.3125**, 0.2053, -0.0326

(*p<0.05; **p<0.01).The correlation value between management centralization and end-user is r=0.3299, p=0.01. In this study, descriptive factor analysis was also applied to both scales, and the findings are explained in detail in the results section.

1.2. Data Analysis

IBM SPSS 22.0 software was used for data analysis. Normality testing was evaluated based on skewness and kurtosis values between -1 and +1. For difference analyses, an independent samples t-test and one-way analysis of variance (ANOVA) were used, while Pearson correlation was applied for relationship analyses. Linearity in regression was assessed using the Ramsey test, residual normality was checked with the Anderson-Darling test, Durbin-Watson was used for autocorrelation, and the Breusch-Pagan test was utilized for homoskedasticity. The presence of multicollinearity was evaluated using the variance inflation factor (VIF). Linear and multiple linear regression analyses were conducted, and a 95% confidence level was used for interpretations.

2. ANALYSIS

This study aimed to investigate the impact of managerial personality traits on the managerial roles of hospital administrators in Istanbul. Data was collected from senior managers (e.g., Hospital Managers, Chief Physicians, Head Nurses, Human Resources Managers, Finance Managers, etc.) at three accredited private hospitals, three non-accredited private hospitals, three foundation university hospitals, three state hospitals, and five training and research hospitals.

Demographics

- **Hospital Type**: 52% worked in accredited private hospitals, 18.1% in state hospitals, 12.1% in training and research hospitals, 11.1% in non-accredited private hospitals, 5.4% in foundation university hospitals, and 1.3% in public university hospitals.
- **Age**: The average age of hospital administrators was 40. The youngest manager was 22, and the oldest was 69.
- **Marital Status:** 69.5% were married, while 30.5% were single.
- **Gender:** Approximately 67% were female, and about 33% were male.
- **Education:** The majority had a bachelor's degree (37.9%).
- **Work Experience:** The average total work experience was 15.22 years, with an average managerial experience of 7.20 years.

Personality Traits and Managerial Roles by Hospital Ownership

- **Emotional Stability:** Significant differences were found between public and private sector hospital managers ($p<0.05$). Public sector managers had an average score of 3.30±0.646, while private sector managers scored 3.49±0.607.
- **Entrepreneurial Role:** Public sector managers had a higher average score (5.93±0.891) compared to private sector managers (5.66±0.954), indicating significant differences ($p<0.05$).
- **Spokesperson Role:** Public sector managers scored an average of 5.72±0.855, while private sector managers scored 5.94±0.767, also showing significant differences ($p<0.05$).

Marital Status

- No significant differences were found between married and single hospital managers regarding personality traits and managerial roles ($p\geq0.05$).

Gender Differences

- **Leadership Role:** Female managers scored significantly higher in the Leadership Role (6.10±0.675) compared to male managers (5.91±0.946) ($p<0.05$).

Education Level

- No significant differences were found among hospital managers based on their education levels ($p\geq0.05$).

Position Differences

- **Emotional Stability:** There were significant differences in emotional stability based on managerial positions ($p<0.05$). Post Hoc LSD analysis revealed:
    - General Managers and Deputy General Managers had significantly higher emotional stability scores compared to Head Nurses and their assistants.
    - Chief Physicians scored higher in emotional stability than Head Nurses and their assistants.

Age Differences

- **Responsibility:** Significant differences were found among age groups regarding the Responsibility trait ($p<0.05$). Specifically, those aged 22-30 had significantly lower scores compared to both the 31-45 and 46+ age groups.

Total Work Experience

- **Compatibility:** Significant differences were noted in the Compatibility trait based on total work experience ($p<0.05$). Managers with over 21 years of experience had significantly higher scores than those with 2-10 years and 11-20 years of experience.

Managerial Experience

- **Compatibility:** Significant differences were found in the Compatibility trait among managers based on their managerial experience ($p<0.05$). Managers with 0-1 year of experience had lower scores compared to those with 2-10 years and 11-20 years of managerial experience.
- **Openness to Experience:** Significant differences were found regarding the Openness to Experience trait based on managerial experience ($p<0.05$). Managers with 2-10 years of experience scored lower than those with 11-20 years and over 21 years of experience.
- **Extraversion:** Significant differences were observed based on managerial experience ($p<0.05$). Managers with 0-1 year of experience scored lower than those with 2-10 years and 11-20 years of managerial experience.

This comprehensive analysis indicates that personality traits significantly influence managerial roles in hospitals, with variations noted across different demographics and professional experiences.

Findings on the Relationship Between the Managerial Personalities and Managerial Roles of Hospital Administrators (Correlation Analysis)

Regression Analysis on the Impact of Managerial Personalities on Managerial Roles

The impact of managerial personalities on managerial roles of hospital managers was analyzed using separate cross-sectional regression analyses for each managerial role. As a result, six different regression models were constructed to examine the explanatory power of managerial personalities on these roles. In other words, each managerial role was analyzed as a dependent variable, and the validity of the model and the proposed hypotheses were tested using multiple regression analysis.

Table 2: Correlation Analysis of Managerial Personality Dimensions and Managerial Role Dimensions

		Responsibility	Agreeableness	Extraversion	Emotional Stability	Openness to Experience	Leadership	External Representation	Entrepreneurship	Follower	Resource Provider	Spokesperson
Responsibility	r	1	0.543**	0.109	0.379	0.465	0.349**	0.319**	0.228**	0.176**	0.318**	0.320**
	p		0.000	0.061	0.000	0.000	0.000	0.000	0.000	0.003	0.000	0.000
Agreeableness	r		1	0.210**	0.218	0.432	0.225**	0.243**	0.169**	0.098	0.152**	0.301**
	p			0.000	0.000	0.000	0.000	0.000	0.003	0.094	0.009	0.000
Extraversion	r			1	0.096	0.123	0.092	0.072	0.077	0.054	0.125*	0.091
	p				0.097	0.034	0.114	0.215	0.185	0.358	0.033	0.115
Emotional Stability	r				1	0.364	0.245	0.202	0.156	0.137	0.200	0.185
	p					0.000	0.000	0.000	0.007	0.019	0.001	0.001
Openness to Experience	r					1	0.313	0.314	0.204	0.253	0.182	0.261
	p						0.000	0.000	0.000	0.000	0.002	0.000

Pearson korelasyonu

Beyond the results mentioned above, the primary aim of this study is to investigate the extent to which managers' personalities impact managerial roles, and to determine which personality traits influence which managerial role and to what extent. According to the findings, it was observed that personality traits influence managerial roles to varying degrees. The following results were drawn:

- The "Leadership Role" was affected by responsibility, emotional stability, openness to experience, and extraversion, with a total impact of 15%. The most significant factor among these traits was openness to experience, constituting 38.8% of the total effect, while emotional stability had the least impact at 18.8%. Additionally, agreeableness was found to have no statistically significant effect on the leadership role.
- The "External Representation Role" was influenced by responsibility, openness to experience, and extraversion, with a total effect of 13%. Openness to experience made up 44.4% of this effect, whereas responsibility had the least influence at 29.8%. Agreeableness and emotional stability did not have a statistically significant impact on the external representation role.

- The “Entrepreneurial Role” was solely impacted by openness to experience, accounting for 5% of the total effect. Responsibility, emotional stability, agreeableness, and extraversion were found to have no statistically significant impact on this role.
- The “Follower Role” was impacted by openness to experience and extraversion, with a total effect of 6%. Openness to experience was the primary influencing factor in this case. Responsibility, emotional stability, and agreeableness were not found to be statistically significant for this role.
- The “Resource Provider Role” was influenced by responsibility, emotional stability, and openness to experience, with a total effect of 10%. Responsibility had the highest impact at 51%, while openness to experience had the least influence, contributing 21.7%. Neither agreeableness nor extraversion had a statistically significant effect on the resource provider role.
- The “Spokesperson Role” was impacted by responsibility, agreeableness, and openness to experience, with a total effect of 12%. Openness to experience was the dominant factor, constituting 34.6% of the total effect, while responsibility had the least influence at 27%. Emotional stability and extraversion were not statistically significant for this role.

The results indicate that personality traits have the most significant impact on the leadership role among the managerial roles. It is particularly noteworthy that agreeableness did not affect the leadership role, while all other personality traits did.

3. DISCUSSION AND CONCLUSIONS

In our study, the effects of hospital administrators' demographic, professional, and personality traits on managerial roles were examined. The results provide significant insights into the profiles of healthcare managers and how their personality traits shape managerial roles.

Among the administrators participating in the study, 52% worked in accredited private hospitals, 18.1% in state hospitals, 12.1% in training and research hospitals, 11.1% in non-accredited private hospitals, 5.4% in foundation university hospitals, and 1.3% in public university hospitals. The high percentage in accredited private hospitals suggests that accreditation processes might have a more pronounced impact on managers. Kusumawardhani et al. (2021) reported that employees and managers in accredited hospitals demonstrated higher performance indicators. Structural differences between the public and private sectors might influence this distribution.

The average age of administrators was 40 years, indicating that they were at a maturity level and had gained sufficient experience in their field. The youngest manager was 22 years old, while the oldest was 69 years old, highlighting the wide age range of managerial positions. The average total work experience was 15.22 years, with 7.20 years in managerial roles, which suggests that participants generally had adequate experience for their positions. A study conducted among nurses with managerial responsibilities in Iran found that caregiving experience significantly influenced job performance (Pourteimour et al., 2021), supporting the idea that experience plays a crucial role in performance.

Additionally, 67% of participants were women, and 33% were men, indicating a significant increase in the presence of women in managerial roles in healthcare, suggesting that challenges like the "glass ceiling" are diminishing. A study conducted in public hospitals in Egypt revealed that female physicians had higher perceived knowledge of managerial policies and protocols (Mousa et al., 2020). Female managers also scored significantly higher in the leadership role compared to male managers (6.10±0.675 vs. 5.91±0.946, $p<0.05$). This difference might be explained by women's more inclusive and empathetic management styles. When comparing managerial social responsibility levels between women and men in boards of directors, women were found to score higher (Reig-Aleixandre et al., 2023).

The marital status of the participants (69.5% married) was found to have minimal impact on managerial roles. However, the significant difference in responsibility scores across age groups, with older participants scoring higher, suggests that this might be related to experience and age. Considering that younger participants were more likely to be single, marital status could indirectly influence this dynamic. A study conducted among Iranian nurses found that unmarried managers exhibited lower responsibility levels compared to their married counterparts, even after adjusting for all confounding factors, and were more prone to mental health issues (Buckman et al., 2021).

The fact that the majority of administrators held a bachelor's degree (37.9%) indicates that healthcare administrators are generally academically qualified individuals. The lack of a significant relationship between education level and managerial roles suggests that professional experience may be a more decisive factor. Among 204 managers working in a psychiatric hospital, those with postgraduate education were found to have lower satisfaction with their institutions (Daniel & Daniel, 2020). This might be attributed to higher expectations among those with advanced education and the inability of the current work environment to meet these expectations.

Public sector managers had lower emotional stability scores (3.30±0.646) compared to private sector managers (3.49±0.607, $p<0.05$). This difference might be influenced by the bureaucratic limitations public managers face during decision-making processes. However, another study found that public sector employees had higher emotional well-being compared to their counterparts outside the public sector (Lahat & Ofek, 2022). In the context of healthcare, public sector managers might face higher stress levels due to more rigid bureaucratic processes and resource constraints. On the other hand, private sector managers, benefiting from a more flexible and outcome-oriented work environment, might find it easier to maintain emotional stability.

Public sector managers scored higher in the entrepreneurial role (5.93±0.891 vs. 5.66±0.954, $p<0.05$) compared to private sector managers. This could be due to their greater ability to make autonomous decisions. In a comparative study, public managers scored 1.8 points higher in leadership than their private sector counterparts, yielding similar results (Fanelli et al., 2020).

In the spokesperson role, private sector managers outperformed their public sector counterparts (5.94±0.767 vs. 5.72±0.855, $p<0.05$). This difference could be attributed to the private sector managers' more prominent communication skills with external stakeholders. Another study emphasized the necessity of developing digital communication skills among managers (Lee et al., 2024).

Compatibility scores increased with total work experience, with managers having 21+ years of experience scoring higher than those with 2-10 years and 11-20 years of experience ($p<0.05$). A systematic review involving twelve studies on hospital administrators also highlighted the importance of experience (Kakemam et al., 2020). Similarly, this study found significant increases in extraversion and openness to experience levels as managerial experience increased.

Responsibility, emotional stability, openness to experience, and extraversion collectively impacted the leadership role by 15%, with openness to experience being the most significant factor (38.8%) and emotional stability having the least impact (18.8%). A study in Ghana found that openness to experience positively predicted academic knowledge (Britwum et al., 2022). Similarly, openness to experience (44.4%) emerged as the dominant factor in this study. Another study involving 497 nurses identified a positive correlation between conscientious managerial approaches and openness to experience (Alsyouf et al., 2022).

The entrepreneurial role was explained solely by openness to experience (5%), with no significant influence from other personality traits. A study involving 160 organizations in Tehran also found a significant relationship between entrepreneurial roles and openness to experience (Moradi et al., 2021). These findings align with the literature, as entrepreneurial roles require qualities such as generating innovative ideas, taking risks, adapting to change, and leveraging opportunities. Openness to experience enhances individuals' receptiveness to new ideas and experiences, fostering creativity and flexibility, making it a key determinant in undertaking entrepreneurial roles.

Responsibility, emotional stability, and openness to experience impacted the resource provider role by 10%, with responsibility having the greatest effect (51%) and openness to experience the least (21.7%). A study involving 152 managers reported that extraversion, agreeableness, and conscientiousness significantly influenced risk propensity, which negatively affected risk perception. Furthermore, risk propensity fully mediated the relationship between personality traits and risk perception (Wang et al., 2016).

In the spokesperson role, responsibility, agreeableness, and openness to experience collectively impacted the role by 12%, with openness to experience having the strongest influence (34.6%). This role requires skills such as representing the organization, effectively communicating with external stakeholders, and managing the corporate image. Individuals open to experience can successfully perform this role due to their ability to adapt to changing situations and their openness to diverse perspectives. Responsibility and agreeableness are also thought to support the trustworthiness, collaboration, and diplomacy required for this role.

Incorporate personality assessments, such as the Five-Factor Personality Inventory, during the hiring and promotion process for managerial positions. This will help identify candidates with personality traits that align with the specific demands of managerial roles, such as leadership, external representation, and entrepreneurship. Since female managers scored higher in leadership roles, healthcare institutions should implement targeted leadership development programs to harness and further enhance these capabilities. Mentoring and training initiatives can support women in expanding their leadership influence within organizations.

Public sector managers exhibited lower emotional stability compared to their private sector counterparts. Institutions can organize stress management and resilience-building workshops to equip these managers with tools to better handle bureaucratic and resource-related challenges.

Since openness to experience significantly impacts entrepreneurial, leadership, and external representation roles, hospitals should design training programs that promote creative thinking, adaptability, and innovation among managers. Such programs could include exposure to case studies, simulations, and cross-sector collaborations. Given the importance of external communication skills, especially in the private sector, managers in spokesperson roles should receive specialized training in digital communication and public relations. This will help them effectively represent their organizations and adapt to modern communication trends.

The observed similarities between certain leadership roles and different personality types indicate a complex interplay that warrants deeper exploration within the context of existing literature and theories. While the study has successfully identified correlations between personality traits and managerial roles, the underlying reasons for these specific relationships require further investigation. For instance, traits such as openness to experience and extraversion might align with leadership roles due to their inherent connection to adaptability, creativity, and interpersonal skills. However, roles that involve decision-making under pressure or resource allocation may also overlap with traits like conscientiousness and emotional stability, which emphasize organization and resilience. These overlaps suggest that personality traits may not influence roles in isolation but instead interact dynamically, shaped by situational and organizational factors. Future research could delve into these dynamics, integrating frameworks such as Trait Activation Theory or Contingency Leadership Models to better explain why certain traits align more strongly with specific leadership functions. This approach would provide a more nuanced understanding of the relationship between personality and managerial roles (Ayman et al., 1995; Luria et al., 2019).

This study has several limitations that should be acknowledged. First, the research was conducted in a single metropolitan area (Istanbul), limiting the generalizability of the findings to other regions or countries with different healthcare systems. Second, the cross-sectional design of the study does not allow for causal inferences about the relationships between personality traits and managerial roles. Third, while the sample size was adequate, the reliance on self-reported questionnaires may have introduced response bias. Lastly, the exclusion of certain public hospitals due to administrative constraints may have impacted the representativeness of the sample. Future studies should address these limitations by employing longitudinal designs, expanding geographic diversity, and incorporating objective performance metrics.

Despite these limitations, this study provides a valuable foundation for future research by highlighting the importance of personality traits in managerial effectiveness. Future studies should address these limitations by employing longitudinal designs, expanding geographic diversity, and incorporating objective performance metrics. Additionally, exploring the interaction between personality traits and organizational outcomes could offer deeper insights into effective management practices. By focusing on these aspects, future research can contribute to the development of evidence-based strategies that improve leadership selection and training in healthcare settings.

Recommendations for Hospital Administrator Appointments:

- Utilize Personality Assessments: During hospital administrator appointments, tools such as the Five-Factor Personality Inventory should be used to identify candidates with personality traits suited for roles like leadership, entrepreneurship, and compatibility.
- Evaluate Leadership Capacities: Candidate evaluations should emphasize leadership skills, decision-making abilities, and crisis management experience, while ensuring access to training programs to enhance these competencies.
- Balance Experience and Academic Qualifications: Administrator candidates should be assessed by balancing their total work and managerial experience with their academic qualifications, considering the impact of experience on roles such as responsibility and entrepreneurship.
- Support Female Leaders: Given the strong performance of female leaders in leadership roles, policies and opportunities that support women in managerial positions should be implemented.
- Focus on Emotional Resilience: Appointments to public and private sector managerial positions should prioritize emotional stability, with stress management programs designed to strengthen this essential capability.

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