

Chapter-Five

Analysis of Relationship between Personality Type, Multiple Intelligences and Workplace Happiness

5.1 Introduction

The study of individual differences examines how people are alike and how they are different in their thinking, feeling, and behavior. The two most popular individual differences that psychologists study are general intelligence and personality characteristics. General intelligence and personality are also classified as traits, or lasting dispositions to act in similar ways across situations and have been allied to several organizational and individual outcomes, such as job performance, job satisfaction, career success, leadership, career perspective, and acquirement of job-related knowledge .(www.wilderdom.com)

In recent years to assess the measurement in the domain of individual differences necessitates the incorporation of multiple areas (Kazdin.A.E.). Researchers tend to focus on only one set of constructs at a time when studying individual differences across domains, such as interest, personality, intelligence or values; they have also realized that a more powerful understanding of how individuals adjust to their environments will materialize when multiple areas are assessed simultaneously. This chapter measures personality type by the Myers Briggs Type Indicator and eight domains of multiple intelligences of Howard Gardener's model that are a component of this rising issue of individual differences. In this chapter, the relationship between personality types, multiple intelligences and workplace happiness have also been explained.

5.2 Primary Objective

The primary objectives of this chapter are-- 1. To study the relationship between Personality Type (MBTI), Multiple Intelligences (MI) and Workplace Happiness and 2.To identify the Personality Type and Multiple Intelligences of very happy and very unhappy doctors.

5.2.1 Sub- Objectives

- (i) To identify personality profile of doctors who are working in medical college
- (ii) To study the relation between personality type and workplace happiness
- (iii) To identify multiple intelligence profiles of doctors who are working in medical college
- (iv) To study the relation between multiple intelligences and workplace happiness and
- (v) To identify the personality type and multiple intelligence profiles of very happy and very unhappy doctors.

5.3 Research Hypothesis

H03: There is no difference in the combination of personality types and intelligence factors between doctors who are very happy in their profession and doctors who are very unhappy in their profession

5.3.1 Sub Hypotheses

The following statistical hypotheses (sub) have been considered for analysis in this chapter.

5.3.2 Related to MBTI and Workplace Happiness

1. There is no significant relationship between workplace happiness and personality type.

5.3.3 Related to MI and Happiness

1. There is no significant level of Multiple Intelligences of medical doctors.
2. The Personal variables are not the good predictor of multiple intelligences.
3. There is no relationship between multiple intelligences and workplace happiness of medical doctors of North Bengal.

5.4 Findings Related to the Relationship between Personality Type (MBTI) and Workplace Happiness

This section deals with the analysis and interpretations related to the objectives and hypothesis of the relationship between MBTI and Workplace Happiness.

5.4.1. MBTI Profiles of Doctors

Table -5.1 Comparison of Each Individual Letter in the Four Dimensions

Extroversion 57%	Sensing 53%	Thinking 38%	Judging 41%
Introversion 43%	Intuition 47%	Feeling 62%	Perceiving 59%

Source: Compiled from survey data

Table-5.1 shows the percentage distribution of personality traits of all 102, medical doctors. The doctors have predominant traits of extraversion (E), sensing (S), feeling (F) and perceptive (P). Most doctors have a preference for Extraversion(57%) rather than Introversion(43%), Sensing perception(53%) rather than Intuitive perception(47%), Feeling judgment(62%) rather than Thinking judgment (38%) and a Perceiving orientation(59%) rather than Judging orientation(41%). The thinking is the weakest trait of the doctors only 38% demonstrated such a style. As a group doctors display E-S-F-P traits.

Table -5.2 Myers-Briggs Preferences of Medical Doctors

Sensing Type		Intuitive Types		
Thinking	Feeling	Feeling	Thinking	
ISTJ %=3	ISFJ %=3.5	INFJ %=2.5	INTJ %=2.5	JUDGING INTROVERTS
ISTP %=3.5	ISFP %=9	INFP %=16	INTP %=3.0	PERCEIVING INTROVERTS
ESTP %=3.0	ESFP %=9	ENFP %=10	ENTP %=6	PERCEIVING EXTROVERTS
ESTJ %=15	ESFJ %=7	ENFJ %=5.0	ENTJ %=2.0	JUDGING EXTROVERTS

Source: Compiled from survey data

Table-5.2 shows the percentage distribution of Myers-Briggs preferences of medical doctors. As it is apparent from the table-5.2 sixteen percent of North Bengal

medical college's doctors have INFP type .This type has the maximum representation in the study followed by ESTJ type at fifteen percent. Ten percent doctors have ENFP type of personality, and both ESFP and ISFP represent nine percent in the survey .If we carefully noticed the personality type distribution of doctors, we get that NFP (26/102) is having a dominant preference over SFP (18/102). The personality type INFJ, INTJ, and ENTJ have minimum representation at 2.5% and 2% in the survey.

The survey sheets reveal that eighty- four percent respondents are male and sixteen percent are female. In this study, principal personality type of female is ENFP (3/16) followed by INFP (2/16).There are no female doctors with ENTJ, ESTP, ESFJ, ISTP and ISTJ type (table-5.2) in this research. Female doctors exhibited (in the survey sheets) E-N-F-P traits. In case of female doctors thinking is the weakest trait. Only twenty- five percent female doctors exhibited such style. Fifty percent of the female doctors are introverted, and fifty- six percent are intuitive and seventy- five are both feller and perceiver.

5.4.2. Relation between MBTI and Workplace Happiness

Table 5.3 shows ESFP type represents maximum (2%) number of very happy doctors, but INFP (16%) personality type has the highest representation. Only 9% faculty doctors have ESFP type personality. No ENTJ, ESTP and ISTP personality type of doctors are either very happy or very unhappy. ISFJ, ESFJ and ENFP personality types have same (1%) percent in both groups. No ENTP, ENFJ, INTP, and ISFP types of respondents are very happy but 1% each of this type is very unhappy. In this survey, it is found that no ESTJ, ESFP, INTJ, INFP, ISTP and ISTJ personality types of doctors are very unhappy. ENFP (7), INFP (7), ESTJ (5), ESFP (4), ISFP (4), ENTP (3) and ESFJ (3) types of doctors are moderately happy and they lack enthusiasm. ISFJ, ESFJ, and ENFP types are both in very happy and very unhappy group.

Table-5.3 Personality and Happiness (frequency distribution)

Type/Happy	Very unhappy	Unhappy	Moderately happy	Happy	Very happy	Total
ENTP	1	1	1	3	0	6
ENTJ	0	0	2	0	0	2
ENFP	1	0	1	7	1	10
ENFJ	1	0	2	2	0	5
ESTP	0	0	1	2	0	3
ESTJ	0	2	7	5	1	15
ESFJ	1	2	0	3	1	7
ESFP	0	0	3	4	2	9
INTP	1	0	1	1	0	3
INTJ	0	1	1	0	1	3
INTP	1	0	2	0	0	3
INFP	0	2	6	6	2	16
ISTP	0	1	1	2	0	4
ISTJ	0	0	1	1	1	3
ISFP	1	0	4	4	0	9
ISFJ	1	1	0	1	1	4
Total	08	10	33	41	10	102

Source: Compiled from survey data

Inference: Analysis of data in this study failed to show relationship between MBTI personality types of medical doctors and their happiness at work. The hypothesis that personality types have no significant influence on workplace happiness is accepted. There are no differences in type preference between doctors who were very happy or very unhappy at work.

5.4.3 Discussion

In the survey INFP type has the maximum representation at 16% followed by personality type ESTJ at 15%, in this study INFJ, INTJ and ENTJ are a less preferred types of personality of doctors, which were not astounding given in small sample. These personalities carry important qualities such as originality, interest in discovering causes, ability to solve problems in more concrete fashion and to think about problem critically (mbti.org).

As a group doctors display E-S-F-P traits. It could be reasoned that 'feeling' is required to realize patient's problems, which is why doctors are naturally high in it. Extraversion is necessary to interact and communicate with the patients and other parties, while 'sensing' helps to collect factual information rather than relying on intuition. Finally, being perceptive helps them to keep their opinion open for new information (mbti.org).

Female doctors exhibited E-N-F-P traits; this finding of the study match with the result of other research, that female is feelers, intuitive and perceivers. According to Myers and McCaulley's (1985) manual, a guide to the development and use of the MBTI in decision- making process most of the females generally have a preference for feeling function . First and foremost, feeling types will select for harmony within the group in the process of making decisions process. Females frequently supposed to have a loving quest for the sense that appreciates a human character with affection (Berens, Cooper, Linda, & Martin, 2002).From the table 5.1 and 5.2; it is obvious that there are individual differences in personality characteristic of North Bengal medical college doctors.

We have found that ESFP type stands for maximum (2%) number of very happy doctors, but INFP (16%) personality type had the highest representation in the survey. A number of researchers recommended that the type which has least found in the occupation generally be inclined to be less satisfied and has high tendency to leave the job than the type which are more frequent or who fit job and judge to be good (Hammer in Leonie Tickel,2009). This report is not fully accurate for this survey; ESFP type represents the maximum number of very happy doctor's compare to INFP. There is no ESFP type of doctors in the very unhappy category. Only nine percent doctors have ESFP type personality. This type is concerned with business and

medicine (Myers, 1962). In this study, E-S-F-P showed participants' group traits. This type of people is sociable, responsive, and uncomplaining. ESFP personality type likes working with groups to make things happen. In their work bring common sense and practical approach and make work enjoyable. This type of people are also dynamic and spontaneous, adjust quickly to new people and environments. Gain the best knowledge by trying a new expertise with other people (mbti.org).

The hypothesis that there is no significant relationship between personality type and workplace happiness of doctors is accepted. It can be inferred that there are no differences in type preference between doctors who are very happy or very unhappy at work; nor is it possible to forecast happiness from MBTI preference scores.

5.5. Findings Related to the Relationship between MI and Workplace Happiness

This section deals with the analysis and interpretations related to the objectives and hypotheses of the relationship between MI and workplace Happiness.

5.5.1. MI Profiles of Doctors

Table 5.4 Level of MI and Interpretation

Class interval of the score	32-40	24-31	16-23	8-15	0-7
Interpretation of the score	Highly Advance	Advance	Moderately Advance	Slightly Advance	Unadvance

Source: Compiled from survey data

Howard Gardner measures of MI scale uses a 40 point scoring scale. The maximum one respondent can score is 40 and the minimum possible score is 0. Score 32-40 is considered as highly advanced and 0-7 as unadvanced level. A score between seventeen and twenty- three is leveled as moderately advance (table-5.4).

The results of the Pearson correlation test presented in table-5.5 shows that there are positive and significant inter-correlations among the eight multiple intelligence abilities. The strengths of the correlations are between $r = .15$ and $r = .55$. This means that the eight multiple intelligence abilities are inter-correlated.

Table 5.5 Pearson correlation among Multiple Intelligence Abilities

Pearson correlation	1	2	3	4	5	6	7	8
1. Verballinguistic	1							
2. Logicalmathematical	.402**	1						
3. Visual-spatial	.491**	.308**	1					
4 Bodily kinesthetic	.332**	.152	.463**	1				
5. Musicalrhythmic	.309**	.314**	.541**	.329**	1			
6. Interpersonal	.253**	.351**	.231*	.367**	.287**	1		
7. Intrapersonal	.287**	.483**	.209*	.266**	.222*	.486**	1	
8. Naturalistic	.426**	.242	.558**	.536	.310**	.241*	.352**	1

Source: Compiled from survey data

Sub-hypothesis one: There is no significant level of Multiple Intelligences of Medical Doctors

Table5.6 Advancement levels of the doctors’ multiple intelligence domains

Multiple intelligence domain	Highly advanced		Advanced		Moderately advanced		Slightly advanced		Unadvanced	
	F	%	F	%	f	%	f	%	F	%
Verbal	2	1.97	37	36.27	47	46.07	16	15.69	Nil	Nil
Logical	22	21.57	47	46.07	24	23.53	9	8.83	Nil	Nil
Spatial	4	3.92	38	37.25	48	47.06	11	10.77	1	1
Kinesthetic	4	3.92	32	31.37	43	42.15	18	17.66	5	4.9
Musical	11	10.78	28	27.45	36	35.29	22	21.58	5	4.9
Interpersonal	12	11.76	41	40.19	41	40.19	7	6.86	1	1
Intrapersonal	5	4.9	40	39.21	46	45.09	10	9.80	1	1
Naturalistic	5	4.9	24	23.5	47	46.07	23	22.57	3	2.96

Source: Compiled from survey data

Table 5.6 shows the distribution of multiple intelligence profiles of doctors according to advanced levels. For comprehensive analysis frequency and percentage are calculated for the advanced levels of each multiple intelligence factors. As is clear from the table, there are doctors with all levels from unadvanced to highly advance in spatial-visual, kinesthetic-bodily, musical-rhythmical, interpersonal, intrapersonal and naturalistic intelligence domains. In the remaining intelligence domains, on the other hand, medical professionals have at least slightly advanced level and higher levels. The doctors with highly advanced levels do not have significant numbers in any intelligence domains. In the survey mathematical-logical has highest numbers following interpersonal intelligence domain.

Table 5.7 Descriptive Statistics of Multiple Intelligence Domains of the Medical Doctors

Multiple intelligences	Mean	Sd	Level
Logical/Mathematical	26.15	6.673	Advance
Interpersonal	24.68	6.392	Advance
Intrapersonal	22.37	5.617	Moderately Advance
Visual/Spatial	22.04	6.617	Moderately Advance
Bodily/kinesthetic	21.23	8.09	Moderately Advance
Verbal/ linguistic	20.96	5.615	Moderately Advance
Musical/rhythmical	20.60	6.306	Moderately Advance
Naturalistic	20.35	6.987	Moderately Advance

Source: Compiled from survey data

The obtained mean scores (table 5.7) of multiple intelligence domains suggested that doctors have advanced levels in logical- mathematical and interpersonal intelligence domains and moderate advancement levels in verbal-linguistic, visual- spatial, musical-rhythmical, bodily- kinesthetic and intrapersonal intelligence domains. None of the multiple intelligences are at highly advanced level and unadvanced level.

Table -5.8 Summary of One Sample T Test

Dimension of the Independent Variable	t	P value
Interpersonal Intelligence	7.389	.000
Mathematical Intelligence	2.943	.004
Intrapersonal Intelligence	3.846	.001
Spatial Intelligence	2.867	.005

Source: Compiled from survey data

As depicts in the table – 5.8 four intelligences are significant because significance values are lower than 0.05. It could be concluded that few intelligences such as Interpersonal, Mathematical and Logical, Intrapersonal and Spatial Intelligence are significantly high as they have a higher t -values. Since the outcome explains a significant level of intelligence, the sub- hypothesis one could be rejected and alternative hypothesis should be selected. It is concluded that there is a significant level of MI among doctors.

Table 5.9 Summary of Regression Coefficient

Multiple intelligences	Beta	P value
Verbal/ linguistic	.555	.000
Logical/Mathematical	.241	.000
Visual/Spatial	.579	.000
Bodily/kinesthetic	.446	.000
Musical/rhythmical	.577	.000
Interpersonal	.530	.000
Intrapersonal	.626	.000
Naturalistic	.647	.000

Source: Compiled from survey data

The linear regression analysis presented in Table 5.9 indicates that estimates of naturalistic, intrapersonal and Visual/Spatial are the best predictors of estimates of intelligence. In this sample, doctors have moderately advanced level of the two main predictors - naturalistic and intrapersonal intelligence.

Interference: Thus it is concluded that among the doctors there is a significant level of multiple intelligence domains. The three Howard Gardener’s MI domains - naturalistic, Intrapersonal and Visual/Spatial are the best predictors of estimates of doctor’s intelligence.

5.5.2. Relation between demographic Variables and MI

Sub-hypothesis two: Personal variables are not the good predictor of multiple intelligences

Results of independent t- test in table-5.10 show that p values for all the intelligence types are greater than .05 and .01. This means that there is no significant difference between male and female self-perceived MI.

One way ANOVA test is used to examine whether there is any significant relationship between gender, age, and multiple intelligences. The outcomes of the test reveal that the p values for all eight intelligences are greater than .05 and .01. Which

means that there is no significant difference between male and female doctors and junior and senior doctor's self-perceived multiple intelligences.

Table-5.10 Summary of Independent t- test & ANOVAs

Multiple intelligences	Gender		Age	
	T	value	F	P value
Verbal/ linguistic	-2.18	.829	1.952	.126
Logical/Mathematical	.853	.396	1.465	.229
Visual/Spatial	-1.029	.316	.222	.881
Bodily/kinesthetic	1.155	.259	1.961	.125
Musical/rhythmical	-.824	.420	1.879	.138
Interpersonal	.865	.398	1.266	.290
Intrapersonal	-.354	.727	.516	.672
Naturalistic	.847	.407	.625	.601

Source: Compiled from survey data

Interference: The results of t- test and one- way ANOVA reveals that p - values are greater than .001 and .05. So we could accept the sub- hypothesis two and it could be concluded that there is no significant relationship between personal variables - gender , age, and multiple intelligence.

5.5.3. Relation between Workplace Happiness and MI

Sub-hypothesis 3: There is no relationship between multiple intelligences and workplace happiness of medical doctors of North Bengal.

Table-5.11 reveals that doctors with highly advance in logical-mathematical, bodily -kinesthetic and interpersonal intelligence domains are at all levels of happiness .No doctors with verbal -linguistic, visual-spatial, musical-rhythmic and naturalistic intelligence domains are in the very unhappy group. Doctors with visual and intrapersonal intelligence domains are also not in the very happy group.

Table 5.11 Doctors' Multiple Intelligence Domains and Happiness According to Highly Advance Level

Level	MI domains	Verbal linguistic	Logical-Mathematical	Visual-spatial	Musical-rhythmical	Bodily-kinesthetic	Interpersonal	Intrapersonal	Naturalistic
Highly Advanced	VH	1	2	nil	1	1	1	nil	1
	H	1	11	1	2	7	6	3	1
	MH	nil	3	1	nil	2	1	nil	1
	UH	nil	3	nil	nil	1	1	nil	2
	VUH	nil	3	nil	nil	1	2	2	nil

Source: Compiled from survey data; Key: VH = Very high happiness, H=Happiness, MH = Moderately happy, UH = Unhappy, VUH = Very unhappy

Table-5.12 Parsons' Correlation between Workplace Happiness and Multiple Intelligences

Multiple Intelligence domains	Verbal - Linguistic	Logical-Mathematical	Visual-Spatial	Musical - Rhythmical	Bodily-Kinesthetic	Interpersonal	Intrapersonal	Naturalistic
Happiness								
Pearson correlation SING.(2-tailed)	-.111 .915	-.038 .702	.132 .186	.108 .4281	.071 .448	.108 .281	-.192 .94	.053 .597

Source: Compiled from survey data

Pearson's Correlation has been used in order to assess the nature of the relationship between Multiple Intelligences and workplace happiness. The Pearson's Correlation values (table 5.12) are greater than 0.5 indicate that there is no association between multiple intelligences and workplace happiness and also statistically not significant at 5% significance level. No relation has been found between the variables and it could be inferred that multiple intelligences do not determine workplace happiness level of doctors.

As the significance value is greater than 0.05 we conclude that there is no significant association exists between the multiple intelligence domains and workplace happiness. It can be said that sub- hypothesis three should be accepted while alternative hypothesis should be rejected.

Interference: Pearson Correlation results are not statistically significant. This means that there is no relationship between multiple intelligences and workplace happiness of medical professional.

5.5.4 Discussion

The outcomes of Pearson correlation test demonstrated that there is a significant correlation among the eight multiple intelligence domains of medical doctors. Out of 28, there are no correlations above $r = .60$. This result is consistent with the view of Gardner (1983) that there are weak inter correlations among multiple intelligence domains (Kemal Ozgen et.al, 2010). Dr.R.Senathiraja's study (2013) also supports this view of Gardener. It revealed that the multiple intelligences abilities of the medical doctors are working reciprocally.

The result of one sample t- test showed that doctors owned multiple intelligences such as interpersonal, mathematical/logical, intrapersonal and spatial intelligence. This result also supports the view of Gardener that human beings possess multiple intelligences, not a single intelligence. Multiple intelligence abilities are needed for giving better healthcare service and quick diagnosis of diseases. The finding is partially consistent with the finding of Maryam Ansari et.al (2014) that interpersonal, naturalistic and mathematical/logical intelligence were at a significantly high level among medical students.

Gardner (1983) states that human capacities, abilities, preferences and the use of these capacities, abilities, will vary within any work environment. Advance level in interpersonal domain helps medical professionals to interact with patients. Their sensitivity to others needs, empathetic and sympathetic characters are very helpful in success in this profession. Medical doctors need knowledge both practical and theoretical which is embedded in human beings. Doctors with mathematical-logical intelligence domain are scientific thinkers; they deal with logical-thinking and problem-solving. Doctors having an advanced level of logical-mathematical

intelligence have developed the skills of analyzing, inducing, deducing, estimating, predicting, organizing, sequencing, questioning, and experimenting (Kemal Ozgen et.al.;2010).

The linear regression analysis indicated that naturalistic, intrapersonal and spatial intelligence are the best predictors of multiple intelligences among the medical doctors. This finding also not fully supports the findings of Maryam Ansari et.al (2014); who reported that naturalistic, logical/ mathematical and interpersonal intelligences were the best predictors of estimates of overall multiple intelligences of medical students. A probable clarification for the variation in this result is that their study was carried out on medical students, and looked for the verbal and logical intelligence required for the learning process. Naturalistic intelligence is the predictor of the medical profession but in this sample doctors' do not have an advanced level of intelligence in this domain. To be successful in this profession doctors need to develop and nurture their naturalistic intelligence.

The results of the relationship between multiple intelligences and personal variables indicated that there is a positive but insignificant relation exists between gender, age, and multiple intelligences. Maryam Ansari et.al. (2014) also observed that there was no significant difference between multiple intelligences of male and female medical students. But contradicted the result of many studies (Chua Yan Piaw and ZuraidahMohd Don, 2014 and GulapShahzada et.al.2011) that the females possessed greater verbal-linguistic ability than the males, while the males possessed greater logical-mathematical ability than their counterparts and increasing age was indirectly associated with decreasing visual-spatial ability .The possible reason for the differences in this results was that this study and Maryam Ansari et.al. (2014) study was related to medical professionals i.e. doctors and medical students. Who looks after the patient's health and they must be aware of their own health. So with increasing age, doctors' spatial ability is not decreasing significantly. In our country generally bright and intelligence, individual opt for this profession and irrespective of the gender they inculcate and nurture their abilities.

The study results clearly indicate individual differences among the doctors in multiple intelligence domains. In the light of this fact, doctors should be provided with opportunities to discover not only their dominant intelligence domains but also

their potentials and abilities in their non-dominant intelligence domains. In the study, no relation has been found between multiple intelligence domains and workplace happiness.

5.6. Findings Related to the Relationship between MBTI, MI and Workplace Happiness

Research Hypothesis three: There is no difference in the combination of personality types and intelligence factors between doctors who are very happy in their profession and doctors who are very unhappy in their profession.

Table-5.13 Personality Type and MI of Very Unhappy and Very Happy Doctors

Very Unhappy	MI	Very happy	MI
ENTP	Interpersonal	ESTJ	Interpersonal
ENFP	Logical/Mathematical	ENFP	Interpersonal
ENFJ	Verbal/linguistic	ESFP	Body/Kinesthetic And Logical/Mathematical
ESFJ	Rhythmic	ESFJ	Logical/Mathematical
INTP	Logical/Mathematical	INTJ	Logical/Mathematical
INFJ	Logical/Mathematical	INFP	Interpersonal and Logical/Mathematical
ISFP	Verbal/linguistic	ISTJ	Rhythmic
ISFJ	Logical/Mathematical	ISFJ	Verbal/linguistic

Sources: Compiled from survey data

In table -5.13 we see that at both the level of happiness the combination of personality type and MI of doctors differ. This means that the research hypothesis three is rejected. There is a difference in the combination of personality types and intelligence factors between doctors who are very happy in their profession and doctors who are very unhappy in their profession. ISFJ, ENFP, ESFJ are Common personality types in both very happy and very unhappy doctors. The common personality types in both very happy and very unhappy doctors have different multiple intelligence factors. ISFJ with verbal-linguistic intelligence, ESFJ with

logical/mathematical and ENFP with interpersonal intelligence are happy but ISFJ with logical/mathematical, ESFJ with rhythmic and ENFP with logical/Mathematical intelligence are unhappy. This indicates that personality type alone could not predict workplace happiness. Factors of MI also have an influence on workplace happiness.

None of the doctors both in the very happy and very unhappy sections exhibit spatial and intrapersonal intelligence factors. Also, none of the very happy doctors exhibit naturalistic intelligence (which is portrayed as being a precursor to having intelligence for medicine, environment, and natural sciences); so there may be a difference between a good/efficient doctor and a doctor happy with his position in life.

Interference : Results reveal that there is the difference in the combination of personality types and intelligence factors between doctors who are very happy in their profession and doctors who are very unhappy in their profession. Thus it can be said that the combination of personality type and multiple intelligence factors affect workplace happiness at work of the medical doctors.

5.6.1. Discussion

In analyzing the relationship between MBTI, MI and Workplace Happiness we find that there is the difference in the combination of personality types and intelligence factors between doctors who are very happy in their profession and doctors who are very unhappy in their profession. Thus it can be said that the combination of personality type and multiple intelligence factors affect happiness at work of the medical doctors. This indicates that personality type alone could not predict workplace happiness. Factors of MI also have an influence on happiness.

5.7. Conclusion

The research hypothesis that there is no difference in the combination of personality types and intelligence factors between doctors who are very happy in their profession and doctors who are very unhappy in their profession is not tenable. The demographic variables (Gender and age) are not significant in determining MI.

Myers and Briggs Type indicators and Gardeners' MI could not predict workplace happiness of medical doctors. The combination of personality type and multiple intelligence factors have an effect on happiness at work of the medical doctors.