

ORIGINAL RESEARCH ORJİNAL ARAŞTIRMA

DOI: 10.5336/healthsci.2025-111458

Examining the Relationship Between Career Decision Regret, Job Satisfaction, and Burnout Among Dietitians: A Cross-Sectional Study

Diyetisyenlerin Mesleki Karar Pişmanlığı ile Mesleki Doyum ve Tükenmişliği Arasındaki İlişkinin İncelenmesi: Kesitsel Çalışma

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ABSTRACT Objective: The aim of this study was to examine the relationship between professional decision regret, professional satisfaction, and burnout in dietitians. **Material and Methods:** The study included 184 dietitians aged 19-65 years. Data collection tools included the Demographic Structure Questionnaire, Career Decision Regret Scale (CDRS), Minnesota Satisfaction Questionnaire (MSQ), and Maslach Burnout Scale (MBS). Statistical analyses were performed using the SPSS 24 software package. **Results:** The CDRS score of dietitians who graduated from state universities was 36.6±19.8 and the MBS score was 27.4±13.1, while those who graduated from private universities had CDRS of 27.8±18.5 and MBS of 22.9±14.8 ($p<0.05$). The CDRS score of those working in the private sector was higher than those in the state sector. Those who found their income high had statistically higher MSQ scores than other groups. The CDRS score of those who chose the profession willingly was 31.7±19.7, compared to 46.6±14.8 for those who did not. Positive correlations were found between CDRS and MBS, and also with MSQ, while a negative correlation was found between MSQ and MBS ($p<0.05$). **Conclusion:** This study revealed that dietitians working in the private sector reported higher job satisfaction compared to those in the public sector. Furthermore, higher career decision regret was associated with lower job satisfaction and higher professional burnout. Factors such as income level, voluntariness in choosing the profession, workplace institution, and job position significantly influenced these outcomes.

Keywords: Job satisfaction; career choice; burnout; professional; nutritionist

ÖZET Amaç: Bu çalışmanın amacı, diyetisyenlerin mesleki karar pişmanlığı ile mesleki doyum ve tükenmişliği arasındaki ilişkinin incelenmesidir. **Gereç ve Yöntemler:** Çalışmaya 19-65 yaş arasındaki 184 diyetisyen dâhil edilmiştir. Veri toplama aracı olarak Demografik Yapı Anketi, Mesleki Karar Pişmanlığı Ölçeği (MKPÖ), Minnesota İş Doyum Ölçeği (MİDÖ) ve Mesleki Tükenmişlik Ölçeği (MTÖ) kullanılmıştır. Verilerin istatistiksel analizleri SPSS 24 adlı paket program kullanılarak yapılmıştır. **Bulgular:** Devlet üniversitesinden mezun olan diyetisyenlerin MKPÖ puanı 36,6±19,8, MTÖ puanı 27,4±13,1 iken; özel üniversiteden mezun olanların MKPÖ 27,8±18,5 MTÖ puanı 22,9±14,8 olarak saptanmıştır ($p<0,05$). Özel sektörde çalışanların MKPÖ puanı kamu sektöründe çalışanlardan daha yüksek olduğu görülmüştür. Gelirin yüksek bulanların MİDÖ puanı diğer gruplardan istatistiki olarak daha yüksek saptanmıştır. Bölüme isteyerek gelenlerin MKPÖ puanı 31,7±19,7 iken gelmeyenlerin MKPÖ puanı 46,6±14,8 ile daha yüksek bulunmuştur. MKPÖ puanı ile MTÖ puanı arasında pozitif yönlü, MİDÖ puanı arasında negatif yönlü bir ilişki saptanmıştır. Ayrıca MİDÖ ile MTÖ arasında negatif yönlü bir ilişki saptanmıştır ($p<0,05$). **Sonuç:** Bu çalışma, özel sektörde çalışan diyetisyenlerin kamu sektöründe çalışanlara kıyasla daha yüksek iş doyumunu bildirdiğini ortaya koymuştur. Ayrıca, yüksek mesleki karar pişmanlığının düşük iş doyumunu ve yüksek mesleki tükenmişlik ile ilişkili olduğu bulunmuştur. Gelir düzeyi, mesleği gönüllülükle seçme durumu, çalışma kurumu ve iş pozisyonu gibi faktörlerin bu sonuçlar üzerinde önemli etkileri olduğu belirlenmiştir.

Anahtar Kelimeler: İş tatmini; kariyer seçimi; tükenmişlik; mesleki; beslenme uzmanı

A profession is a set of activities undertaken by an individual to earn a living, based on systematic knowledge and skills acquired through education,

with the aim of providing a useful product or service to others.¹ Choosing a profession is one of the most important decisions an individual makes in their life-

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Peer review under responsibility of Türkiye Klinikleri Journal of Health Sciences.

Received: 22 Apr 2025

Accepted: 14 Jun 2025

Available online: 27 Jun 2025

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time. It holds profound significance not only as a means of earning a livelihood but also as a process of self-realization.² The choice of a profession should align with an individual's personality traits, abilities, lifestyle, and the socioeconomic status of their family. This decision is influenced by psychological factors (such as values, abilities, and interests) and social factors (including socioeconomic level, family, and social relationships), which interact and influence each other.³

The profession of a dietitian, in particular, requires a strong sense of understanding and patience. Individuals considering this profession should be fully aware of its advantages and disadvantages. Additionally, they should assess whether the profession aligns with their personal interests to avoid experiencing professional decision regret. When individuals lack sufficient information about professions or when personal research is inadequate, they may end up choosing professions that do not suit their character.⁴ Various factors—personal interest, self-esteem—play a significant role in career selection.⁵

Job satisfaction is the combination of positive and negative emotions an individual experiences related to their work, reflecting the extent to which their needs, expectations, and values are met.⁶ It is acknowledged as an emotional state arising from the pleasure and contentment individuals derive from their job.⁷ Emotions such as job satisfaction, fulfillment, and enthusiasm are critical factors influencing the career decision-making process.⁸ The choice of a profession represents a significant decision, wherein the potential for lifelong regret is considerable. During this process, individuals shape their career paths based on personal aspirations and expectations.⁹ A professional who finds joy and satisfaction in their work is more likely to contribute innovative ideas to the workplace and positively influence their colleagues.¹⁰ Conversely, when expectations and aspirations remain unmet, feelings of regret are often inevitable.¹¹

Burnout is described as a condition that may arise when there is a significant discrepancy between an individual's expectations and the realities they encounter. It can occur due to various factors. Work-

place-related causes include unclear rules, insufficient job knowledge, conflicts or ego clashes between employees, excessive workload, inadequate salaries, the position held, long working hours, the pressure to gain approval from superiors, and the overall psychological atmosphere of the work environment.¹² It is crucial for individuals to develop a career plan that aligns with their interests, personality traits, and values. A failure to align career choices with personal characteristics may lead to professional regret.¹³ The aim of this study is to investigate the relationship between dietitians' satisfaction or regret regarding their career choice and their levels of professional satisfaction and burnout.

Based on these considerations, this study hypothesizes that dietitians who experience greater regret about their career choice are likely to report lower levels of professional satisfaction and higher levels of burnout. Conversely, it is expected that higher professional satisfaction will be associated with lower burnout levels. By exploring these relationships, the study aims to contribute to understanding how career decision regret impacts the well-being and work attitudes of dietitians.

MATERIAL AND METHODS

This descriptive and cross-sectional study was conducted in Ankara, Türkiye, between January 15 and April 15. The study included dietitians aged 19-65 years. Participants included dietitians working in both public and private sectors, specifically in clinical nutrition, community nutrition, and institutional food service settings. Dietitians who had never worked were excluded. The minimum sample size was calculated as 184 participants, with a 5% margin of error and 80% statistical power, using G*Power 3.1. Initially, 192 participants were recruited; however, those with missing anthropometric, demographic, or dietary data were excluded, resulting in a final sample size of 184.

The study was conducted in accordance with the principles of the Declaration of Helsinki, and ethical approval was obtained from the Ankara Yıldırım Beyazıt University Health Sciences Ethics Committee on December 23, 2023, with decision number 09-

423. All participants signed a voluntary consent form prior to participation.

DATA COLLECTION TOOLS

Demographic Structure Questionnaire

This questionnaire collected data on participants' age, gender, educational status, and other demographic characteristics.

Career Decision Regret Scale (CDRS)

The CDRS was developed by Brehaut et al. and later adapted into Turkish by Erdurcan and Kırđök, who confirmed its validity and reliability.^{13,14} The original version is a unidimensional scale composed of 5 items and has demonstrated high internal consistency across different populations, with Cronbach alpha values ranging from 0.81 to 0.92. In this study, the Turkish version of the CDRS was used. This version preserves the original scale's single-factor structure and item content. The internal consistency reliability (Cronbach alpha) was reported as 0.91, and the test-retest reliability as 0.79. Confirmatory factor analysis supported its construct validity, indicating that the Turkish adaptation is psychometrically consistent with the original scale. The scale is scored from 0 ("strongly disagree") to 5 ("completely agree"). Items 1, 3, and 5 are reverse-coded. The total score is multiplied by 5 to obtain the final score. Based on the total score, levels of regret are categorized as follows: 75-100="very regretful about the decision", 50-74="regretful", 25-49="slightly regretful" and 0-24="not regretful at all".¹⁴

Minnesota Satisfaction Questionnaire (MSQ)

The MSQ was developed by Weiss and colleagues in 1967.¹⁵ The Turkish adaptation, including validity and reliability studies, was conducted by Baycan in 1985.¹⁶ Baycan's adaptation maintained the original scale's structure and content, ensuring its applicability within the Turkish context. The validity and reliability of the Turkish version were confirmed, with a reported Cronbach alpha coefficient of 0.93, indicating high internal consistency. This adaptation allows for accurate assessment of job satisfaction among Turkish-speaking populations, aligning with the psychometric properties of the original scale. The scale

comprises 20 items designed to assess aspects such as workplace opportunities, relationships with colleagues, the alignment of individual abilities with job requirements, remuneration, working conditions, and a sense of accomplishment. The Cronbach alpha coefficient was calculated as 0.938. Items are scored on a 5-point Likert scale: 1="Not satisfied at all", 2="Somewhat satisfied", 3="Moderately satisfied", 4="Satisfied" and 5="Very satisfied". The maximum possible score, representing the highest level of job satisfaction, is 100 points.¹⁶

Maslach Burnout Scale (MBS)

The MBS was developed by Maslach and Jackson in 1981 to assess occupational burnout with 22 items in 3 sub-dimensions: Emotional exhaustion, depersonalization, and personal accomplishment. Items are rated on a 7-point Likert scale from 0 ("Never") to 6 ("Every day"), where higher scores in emotional exhaustion and depersonalization indicate higher burnout, while higher personal accomplishment scores indicate lower burnout.¹⁷

The Turkish adaptation by Ergin confirmed the scale's validity and reliability in healthcare professionals, with Cronbach alpha coefficients ranging from 0.65 to 0.83. The Turkish version uses a 5-point Likert scale (1="Never" to 5="Always") but retains the original three-factor structure and psychometric properties. High scores indicate a lower level of burnout, while moderate scores reflect a moderate level of burnout. The maximum possible score, indicating the highest level of burnout, is 78 points.¹⁸

STATISTICAL ANALYSES

Statistical analyses were conducted using IBM SPSS Statistics 24. The Independent Samples t-test was used for comparing 2 groups with normal distribution, while the Mann-Whitney U test was applied for non-normally distributed data. For comparisons among 3 or more groups, one-way analysis of variance was used for normal data and the Kruskal-Wallis H test for non-normal data. Correlation between variables was assessed using Pearson's coefficient for normal distributions and Spearman's coefficient for non-normal distributions. Logistic regression was applied to examine factors influencing severe pain in

women, and regression analysis was performed to explore determinants of job satisfaction.

RESULT

Among the dietitians who participated in the study, 89.7% were female, and 10.3% were male. Of the participants, 46.6% of those with no regret, 76.8% of those with slightly regret, and 75% of those with regretful/very regretful were graduates of state universities. Among individuals who expressed regretful/very regretful, 38.6% were employed in the public sector, while 61.4% worked in the private sector. Additionally, 24.1% of those without regret and 91.1% of those with regretful/very regretful held head dietitian positions. Of the individuals with regretful/very regretful, 59.1% reported finding their income insufficient (Table 1).

Those who started working between 0-12 months had a higher MSQ score than those who started working 13 months or more ($p<0.05$). The CDRS score of dietitians who graduated from private

universities was found to be 27.8 ± 18.5 , while that of those who graduated from state universities was 36.6 ± 19.8 . Additionally, the MBS score of state university graduates was higher than that of private university graduates ($p<0.05$) (Table 2).

The lowest CDRS and MBS scores and the highest MSQ score were found in head dietitians ($p<0.05$). The CDRS score of those who chose to work in the department willingly (31.7 ± 19.7) was higher than that of those who did not (46.6 ± 14.8). Additionally, the MBS score of those who voluntarily chose the department was lower than that of those who did not, while the MSQ score was higher for those who voluntarily chose the department. The CDRS score of dietitians who thought their income was insufficient was 45.2 ± 17.7 , 31 ± 18.1 for those who thought it was partially sufficient, and 20.6 ± 16.6 for those who considered it sufficient. Dietitians who found their income insufficient had a higher MBS score and a lower MSQ score compared to the other groups ($p<0.05$) (Table 2).

TABLE 1: Demographic characteristics of dietitians according to regret status

Career Decision Regret Scale		No regretful n (%)	Slightly regretful n (%)	Regretful/ very regretful n (%)	Total n (%)
Gender	Female	54 (3.1)	74 (90.2)	37 (84.1)	165 (89.7)
	Male	44 (66.9)	88 (99.8)	77 (15.9)	19 (10.3)
Education level	Bachelor's degree	40 (69.0)	65 (79.3)	38 (86.4)	143 (77.7)
	Master's degree/PhD	18 (31.0)	17 (20.7)	6 (13.6)	41 (22.3)
Type of university graduated from	Public	27 (46.6)	63 (76.8)	33 (75.0)	123 (66.8)
	Private	31 (53.4)	19 (23.2)	11 (25.0)	61 (33.2)
City of graduation	Ankara	17 (29.3)	28 (34.1)	21 (47.7)	66 (35.9)
	İstanbul	18 (31.0)	15 (18.3)	3 (6.8)	36 (19.6)
	Others	23 (39.7)	39 (47.6)	20 (45.5)	82 (44.6)
Institution of employment	State	7 (12.1)	19 (23.2)	17 (38.6)	43 (23.4)
	Private	51 (87.9)	63 (76.8)	27 (61.4)	141 (76.6)
Position	Head dietitian	14 (24.1)	14 (17.1)	4 (9.1)	32 (17.4)
	FS dietitian	6 (10.3)	15 (18.3)	13 (29.5)	34 (18.5)
	CPH dietitian	38 (65.5)	53 (64.6)	27 (61.4)	118 (64.1)
Reason for choosing the profession	Interest in the profession	34 (58.6)	33 (40.2)	10 (22.7)	77 (41.8)
	Health sector	14 (24.1)	27 (32.9)	16 (36.4)	57 (31.0)
	Other	10 (17.2)	22 (26.8)	18 (40.9)	50 (27.2)
Was the department chosen willingly	Yes	55 (94.8)	73 (89.0)	31 (70.5)	159 (86.4)
	No	3 (5.2)	9 (11.0)	13 (29.5)	25 (13.6)
Monthly income	Insufficient	5 (8.6)	30 (36.6)	26 (59.1)	61 (33.2)
	Partially sufficient	31 (53.4)	41 (50.0)	16 (36.4)	88 (47.8)
	Sufficient	22 (37.9)	11 (13.4)	2 (4.5)	35 (19.0)

FS: Food Service; CPH: Clinical and Public Health

TABLE 2: Scale score results according to demographic and anthropometric characteristics

		CDRS total score	MSQ total score	MBS total score
		$\bar{X} \pm SD$	$\bar{X} \pm SD$	$\bar{X} \pm SD$
Gender	Female (n=165)	33.2±19.6	3.6±0.9	25.6±13.4
	Male (n=19)	37.6±20.9	3.7±1.01	28.8±16.8
	Total (n=184)	33.7±19.8	3.6±0.9	25.9±13.8
	p value	0.244*	0.644#	0.465*
Time to start work after graduation	≤12 m (n=152)	32.3±18.9	3.7±0.9	24.3±13.3
	>12 m (n=32)	40.3±22.5	3.2±0.7	33.3±13.9
	p value	0.069	0.002#	0.002*
Type of university graduated from	Public (n=123)	36.6±19.8	3.6±0.8	27.4±13.1
	Private (n=61)	27.8±18.5	3.8±1.0	22.9±14.8
	p value	0.004*	0.082#	0.018*
City of graduation	Ankara (n=66)	36.8±20.4	3.6±0.8	27.6±13
	İstanbul (n=36)	26.4±15.3	3.8±0.7	22.6±13
	Other (n=82)	34.4±20.4	3.6±1	25.9±14.6
	p value	0.032**	0.290##	0.175**
Institution of employment	State (n=43)	36.8±20.4	3.6±0.8	27.6±13
	Private (n=141)	26.4±15.3	3.8±0.7	22.6±13
	p value	0.005*	<0.001#	<0.001*
Position	Head dietitian (n=32)	28.4±22.7	3.9±0.8	22.9±13.5
	FS dietitian (n=34)	39.3±15.6	3.2±1.0	32.2±15.1
	CPH dietitian (n=118)	30.5±19.7	3.7±0.9	24.9±13
	p value	0.043*	0.002##	0.022*
Reason for choosing the profession	Interest in the profession (n=77)	27.6±19.7	3.8±0.8	20.9±12.1
	Health sector (n=57)	37.7±20.1	3.5±0.9	29.2±14.1
	Other (n=50)	38.5±17	3.5±0.9	29.8±13.7
	p value	0.001	0.021##	0.001*
Was the department chosen willingly	Yes (n=159)	31.7±19.7	3.7±0.8	24.8±13.3
	No (n=25)	46.6±14.8	3.2±1	32.6±15.3
	p value	<0.001*	0.012#	0.022*
Monthly income	Insufficient (n=61)	45.2±17.7	3.1±0.7	33.0±12.4
	Partially sufficient (n=88)	31±18.1	3.8±0.8	24.4±12.9
	Sufficient (n=35)	20.6±16.6	3.2±0.8	17.4±12.4
	p value	<0.001*	<0.001##	<0.001*

*Mann-Whitney U test; **Kruskal-Wallis test; #Independent Sample t-test; ##One way analysis of variance test; CDRS: Career Decision Regret Scale; MSQ: Minnesota Satisfaction Questionnaire; MBS: Maslach Burnout Scale; SD: Standard deviation; FS: Food Service; CPH: Clinical and Public Health

A statistically strong negative correlation was found between the CDRS score and MSQ score, and a statistically strong positive correlation was found between the CSDR score and MBS score. A statistically strong negative correlation was also found between MSQ and MBS ($p<0.05$) (Table 3).

The results of the linear regression (stepwise) model, in which the Minnesota Job Satisfaction Scale is the dependent variable and is explained by descriptive variables and the Professional Decision Regret Scale, are provided in Table 4. The explanatory variables that were significant in the model were pro-

fessional decision regret ($p<0.001$) and the institution where dietitians work ($p<0.01$), with the model explaining 38.9% of job satisfaction. The test statistic value calculated to determine the model's significance was $F=56.354$ ($p<0.001$), and it was statistically significant. Professional decision regret had a negative effect on job satisfaction, with an effect size of -0.570 units. Job satisfaction decreased in individuals who experienced professional decision regret. The institution where individuals worked positively affected the total scale score of job satisfaction, with an effect size of 0.152 units (Table 4).

TABLE 3: The relationship between CDRS, MSQ, and MBS scores						
	CDRS total score		MSQ total score		MBS total score	
	r value	p value	r value	p value	r value	p value
CDRS total score	-	-				
MSQ total score	-0.600	<0.001				
MBS total score	0.599	<0.001	-0.650	<0.001		

CDRS: Career Decision Regret Scale; MSQ: Minnesota Satisfaction Questionnaire; MBS: Maslach Burnout Scale

TABLE 4: Factors affecting job satisfaction-regression analysis results						
Model	B	SE	β	t value	Sig.	95% CI
Constant	3.939	0.258		15.262	0.001**	[3.430, 4.448]
CDRS total score	-0.025	0.003	-0.570	-9.563	0.001**	[-0.031-0.020]
Institution of employment	0.315	0.124	0.152	2.541	0.012*	[0.070, 0.559]

*p<0.01, **p<0.001; R²: %38.9; F: 56.354; p: 0.000 **Durbin Watson=1.959 Institution of Employment (State=1, Private=2); SE: Standard error; CI: Confidence Interval;
CDRS: Career Decision Regret Scale

DISCUSSION

Individual factors such as age, performance, and job satisfaction play an important role in occupational burnout and job satisfaction.^{19,20} In this study, when examining the occupational burnout levels of those who started working between 0-12 months after graduation, it was observed that their burnout levels were lower compared to those who started later (p<0.05) (Table 2). Another study found that employees with less experience in the profession might have higher burnout levels.¹⁹ Additionally, in this study, the MSQ score of those who started working between 0-12 months after graduation was higher than those who started working 13 months or more (p<0.05) (Table 2). In Aslan's study, it was found that while occupational burnout levels decreased, satisfaction levels increased; however, no significant relationship was observed in Kolodinsky's study.^{20,21} It is believed that individuals who gained early work experience may have developed coping skills for professional responsibilities earlier, which could have reduced the MBS score and increased the MSQ score.

Job satisfaction is influenced by many organizational and environmental factors, such as working conditions, colleagues, management style, and social rights.²² The group working as head dietitians had the

lowest MBS and CDRS scores and the highest MSQ score (Table 2). A study conducted on academic staff found that professors, who have more influence in management positions, had higher MSQ scores than research assistants.²² This suggests that the various responsibilities and experiences associated with management positions, as well as the decision-making power of individuals in these roles, affect their professional experiences. It is believed that having control over decision-making processes as head dietitians plays an effective role in increasing their professional satisfaction levels.

In this study, it was observed that the CDRS and MBS scores of dietitians working in the public sector were higher, while the CDRS score was lower compared to those working in the private sector (p<0.05) (Table 2). Additionally, the institution in which individuals worked positively affected the CDRS score, with an effect of 0.152 units (Table 4). In a study conducted by van den Berg et al., total job satisfaction scores of dietitians working in public hospitals and the food sector were found to be lower than those working in private, higher education, and research settings.²³ In another study of dietitians working in public hospitals in Sudan, it was found that 37.56% of the participants were dissatisfied due to inadequate equipment and working conditions.²⁴ A study con-

ducted on physicians, a different professional group, showed that job satisfaction was higher for physicians working in private hospitals compared to those working in public hospitals.²⁵ This indicates that job satisfaction among dietitians working in the private sector is closely related to factors such as personal and professional development opportunities, flexible working hours, and financial satisfaction. The private sector's broader career development opportunities and performance-based reward systems are factors that enhance job satisfaction.

Financial satisfaction is one of the factors that enhances individuals' sense of achievement and is related to the level of occupational burnout.²⁶ According to the data obtained, it was observed that the CDRS and MBS scores of dietitians who found their income level sufficient were lower than those who found their income level insufficient or partially sufficient. At the same time, dietitians who found their income level adequate had a higher score on the MSQ compared to other dietitians, indicating that income satisfaction may play an important role in occupational satisfaction ($p < 0.05$) (Table 2). A study conducted on dietitians also found that low income levels led to a decrease in job satisfaction.²⁶ In light of these findings, it is suggested that improving the income levels of dietitians to a satisfactory level is important both for reducing professional decision regret and for increasing job satisfaction and professional efficiency.

Regret about career choice decisions may have a negative effect on both professional satisfaction and life satisfaction.^{27,28} In a study, it was observed that there is a link between choosing a profession that is not suitable for the person and low job satisfaction.²⁷ In Cheval et al.'s study, it is emphasized that the high level of professional decision regret experienced by healthcare professionals is associated with low job satisfaction. In the same study, it was found that while a large number of healthcare workers' experience of professional regret is associated with low job satisfaction, a healthcare worker's intense level of professional regret is linked to ending their professional career and thus experiencing professional decision regret.²⁸ In this study, a negative relationship was observed between the CDRS score and the MSQ

score (Table 3). In addition, it was found that professional decision regret negatively affected job satisfaction, with an effect size of -0.570 units (Table 4). This is thought to be due to factors such as decreasing employment opportunities, difficult working conditions, and others. Furthermore, there is limited research on dietitians in the literature regarding this topic, and it is believed that this research will contribute to the existing literature.

The fact that a person does not consciously choose their job during the professional decision-making stage can negatively affect attitudes toward work. Due to these situations, the positive attitude toward the profession may change over time, leading to professional regret and burnout.²⁷ In this study, a positive correlation was found between the CDRS score and the MBS score (Table 3). In a study conducted on resident physicians in the USA, a strong positive correlation was found between professional burnout and professional decision regret.²⁹ Similarly, in a study conducted by Yang et al., it was found that professional burnout was closely related to professional decision regret.³⁰ In another study, it was stated that high levels of occupational burnout could lead to negative work attitudes and, in turn, to occupational decision regret.^{31,32} It is thought that the high CDRS score may be due to factors such as being unable to perform the profession adequately, not fulfilling the profession's definition, working conditions, and heavy workloads.

When considering the relationship between professional job satisfaction and burnout, it is known that burnout has negative effects on employees. Cupit et al. state that job satisfaction derived from professional success leads to more positive professional practices.³³⁻³⁵ One study shows that lower job satisfaction increases burnout, while factors such as development, improvement opportunities, and increased social interaction in the workplace reduce burnout.³⁴ In a study conducted by Dewa et al., it was found that burnout was associated with low job satisfaction.³³ In this study, a negative correlation was found between the MSQ score and the MBS score (Table 3). It is thought that this situation arises because dietetics is considered a relatively new profession, and the difficulties in the working conditions of

dietitians contribute to lower job satisfaction and higher occupational burnout.

This study has several limitations. Its cross-sectional design restricts causal inference, meaning that while associations are identified, the directionality of effects cannot be confirmed. Data were collected at a single time point and based on self-reports, which might introduce recall and social desirability biases, potentially affecting the accuracy of responses. The sample was restricted to dietitians in Türkiye, limiting the generalizability of findings to other cultural or healthcare contexts. Additionally, the sample size, while adequate for detecting moderate effects, may not capture subtler associations, and the possibility of Type I error was increased due to multiple statistical comparisons without adjustments. Future longitudinal and multicenter studies with larger, more diverse samples are needed to confirm these findings and explore underlying mechanisms.

CONCLUSION

A negative relationship was found between career decision regret and professional job satisfaction, and a positive relationship was found between career decision regret and burnout. Additionally, it was determined that those who chose this profession due to their interest may have lower career decision regret and burnout, and higher job satisfaction. The study also found that income level affected career decision regret and job satisfaction. According to the data, dietitians working in the private sector had higher job satisfaction than those working in the public sector.

These findings highlight the importance of supporting dietitians' career decision-making processes and providing adequate financial and professional development opportunities to enhance job satisfaction and reduce burnout. Employers should consider interventions such as career counseling, workload management, and improving working conditions, particularly in the public sector, to retain skilled dietitians and improve their professional well-being. Enhancing income satisfaction and giving professionals greater autonomy may reduce career regret and burnout, thereby potentially improving service quality and patient outcomes.

Source of Finance

The study received support from the TÜBİTAK 2209-A Program for Research Projects of Undergraduate Students.

Conflict of Interest

No conflicts of interest between the authors and / or family members of the scientific and medical committee members or members of the potential conflicts of interest, counseling, expertise, working conditions, share holding and similar situations in any firm.

Authorship Contributions

Idea/Concept: Emine Elibol; **Design:** Emine Elibol; **Control/Supervision:** Emine Elibol; **Data Collection and/or Processing:** Emine Elibol, Zeynep Nağme Pektaş, Aleyna Pekmezci; **Analysis and/or Interpretation:** Emine Elibol, Zeynep Nağme Pektaş, Aleyna Pekmezci; **Literature Review:** Emine Elibol, Zeynep Nağme Pektaş, Aleyna Pekmezci; **Writing the Article:** Emine Elibol, Zeynep Nağme Pektaş, Aleyna Pekmezci; **Critical Review:** Emine Elibol; **References and Fundings:** Zeynep Nağme Pektaş, Aleyna Pekmezci, Emine Elibol; **Materials:** Zeynep Nağme Pektaş, Aleyna Pekmezci, Emine Elibol.

REFERENCES

1. Kuzgun Y. Meslek Rehberliği ve Danışmanlığına Giriş. 8. Baskı. Ankara: Nobel Akademik Yayıncılık; 2022.
2. Eryetiş MV. Meslek seçimi ve mesleki rehberlik [Choosing an occupation and vocational counselling]. Anadolu Bil Meslek Yüksekokulu Dergisi. 2016;(44). <https://dergipark.org.tr/tr/download/article-file/750079>
3. Kuzgun, Y. Meslek Rehberliği Ve Danışmanlığına Giriş. 4. Baskı. Ankara: Nobel Akademik Yayıncılık, 2014.
4. Akça E, Gökaydız Sürücü Ş, Akbaş M, Şenoğlu A. Ebelik öğrencilerinin sosyal zeka düzeyleri ile meslek algıları arasındaki ilişki [Relationship between social intelligence levels and occupational perceptions of midwifery students]. Cukurova Medical Journal. 2019;44(2):621-31. doi: 10.17826/cumj.4593450
5. Pasha A, Siddiqui DA. Factors influencing professional selection choices: evidence from Pakistan. Eur J Bus Manag. 2019;11(36):16-23. doi:10.7176/ejbm/11-36-16
6. Cebotari V. The importance of managing the psychosocial potential of human resources for employee job satisfaction. Ecological Safety and Sustainable Development. 2022;3-4:172-84. doi:10.54481/ecosoen.2022.3-4.20
7. Mushtaq K, Ahmed MA, Warraich SU. A study on job satisfaction, motivation and organizational citizenship behavior. International Journal of Management Sciences and Business Research. 2014;3(11):1-12. https://www.researchgate.net/publication/271850418_A_Study_on_Job_Satisfaction_Motivation_and_Organizational_Citizenship_Behavior_Author's_Details

8. Kadı A, Selçuk G. İlköğretim okul yöneticilerinin öğretmenleri güdüleme davranışları ile öğretmenlerin mesleki ilgi düzeylerinin incelenmesi [Analysis of primary school administrators' motivating behaviours on teachers and teachers' vocational interest levels]. *Manisa Celal Bayar Üniversitesi Sosyal Bilimler Dergisi*. 2012;10(2):23-38. <https://arastirmax.com/en/system/files/dergiler/123831/makaleler/10/2/arastirmax-ilkogretim-okul-yoneticilerinin-ogretmenleri-guduleme-davranislari-ogretmenlerin-mesleki-ilgi-duzeylerinin-incelenmesi.pdf>
9. Yeşilyaprak B. Mesleki rehberlik ve kariyer danışmanlığında paradigma değişimi ve Türkiye açısından sonuçlar: geçmişten geleceğe yönelik bir değerlendirme. *Kuram ve Uygulamada Eğitim Bilimleri*. 2012;12(1):97-118. <https://idealonline.com.tr/IdealOnline/pdfViewer/index.xhtml?uld=1898&iOM=Paper&preview=true&isViewer=true#pagemode=bookmarks>
10. Lu H, Zhao Y, While A. Job satisfaction among hospital nurses: A literature review. *Int J Nurs Stud*. 2019;94:21-31. PMID: 30928718.
11. Doğanülkü HA, Kırdök O. The moderating role of career decision regret in the effect of career adaptability on burnout. *International Journal of Progressive Education*. 2021;17(2):319-30. https://ijpe.inased.org/makale_indir/2082
12. Özcan T. Pendik Bölgesinde Görev Yapan Öğretmenlerin Tükenmişlik Düzeylerinin Bazı Demografik Değişkenler Açısından İncelenmesi [Yüksek Lisans tezi]. İstanbul: Yeditepe Üniversitesi; 2008. <https://tez.yok.gov.tr/UlusalTezMerkezi/TezGoster?key=-Z0vbSUgrhM9fX-oGkRe6QzHF8qyWSPcOU9Y8159JPC88PK937uCW2GGQJJI2k2>
13. Brehaut JC, O'Connor AM, Wood TJ, Hack TF, Siminoff L, Gordon E, et al. Validation of a decision regret scale. *Med Decis Making*. 2003;23(4):281-92. PMID: 12926578.
14. Erdurcan S, Kırdök O. Mesleki karar pişmanlığı ölçeği: adaptasyon, geçerlik ve güvenilirlik çalışması. *Mersin Üniversitesi Eğitim Fakültesi Dergisi*. 2017;13(3):1140-50. <https://dergipark.org.tr/tr/download/article-file/393572>
15. Weiss DJ, Dawis RV, England GW, Lofquist LH. *Manual for the Minnesota Satisfaction Questionnaire*. Minneapolis, MN: University of Minnesota Industrial Relations Center; 1967.
16. Baycan FA. An Analysis Of Several Aspects Of Job Satisfaction Between Different Occupational Groups [Yayımlanmamış Yüksek Lisans Tezi]. İstanbul: Boğaziçi Üniversitesi; 1985.
17. Maslach C. *Burnout: The Cost of Caring*. Englewood Cliffs, NJ: Prentice-Hall; 1982.
18. Ergin C. Doktor ve hemşirelerde tükenmişlik ve Maslach Tükenmişlik Ölçeğinin uyarlanması. Bayraktar R, Dağ İ, editörler. VII. Ulusal Psikoloji Kongresi Bilimsel Çalışmaları. Ankara: Türk Psikologlar Derneği; 1992. p. 143-54.
19. Başol G, Altay M. Eğitim yöneticisi ve öğretmenlerin mesleki tükenmişlik düzeylerinin incelenmesi [Examining occupational burnout levels of educational administrators and teachers]. *Kuram ve Uygulamada Eğitim Yönetimi*. 2009;15(58):191-216. <https://dergipark.org.tr/tr/download/article-file/108262>
20. Aslan H. Çalışanların İş Doyumu Düzeylerine Göre Depresyon, Benlik Algısı Ve Denetim Odağı Algısı Değişkenlerinin İncelenmesi [Yayımlanmamış yüksek lisans tezi]. Ankara: Ankara Üniversitesi; 2006.
21. Kolodinsky P, Draves P, Schroder V, Lindsey C, Zlatev M. Reported levels of satisfaction and frustration by Arizona school counselors: A desire for greater connections with students in a data-driven era. *Professional School Counseling*. 2009;12(3):193-9. <https://www.jstor.org/stable/42732776>
22. Keçeci M, Tetik Küçükkelçi D, Vural Allaham M. Çalışmaya tutkunluk, iş tatmini ve çalışan sesliliği ilişkisi üzerine ampirik bir araştırma [An empirical research on the relationship among work engagement, job satisfaction and employee voice]. *Dumlupınar Üniversitesi Sosyal Bilimler Dergisi*. 2022;(74):75-96. doi: 10.51290/dpusbe.1089621
23. van den Berg L, de Beer SM, Claassen T, Meyer J, Strydom I, van Rooyen C, et al. Job satisfaction and perception of workloads among dietitians and nutritionists registered in South Africa. *South African Journal of Clinical Nutrition*. 2020;24(4):37(1):38-48. <https://www.ajol.info/index.php/sajcn/article/view/268510/253367>
24. Ibrahim NM, Khogali NA, Mahmoud HS, Fatahi H. Job satisfaction of dietitians in government hospitals Khartoum State. *International Journal of Home Science*. 2019;5(1):131-6. <https://www.homesciencejournal.com/archives/2019/vol5issue1/PartC/5-1-26-803.pdf>
25. Ocak S, Kaşmer Şahin T, Gider Ö. Hekimlerin iş tatmin düzeylerinin girişimcilik niyetleri üzerine etkileri: Muğla ilinde bir araştırma [The effects of doctors' job satisfaction on entrepreneurial intention: a research on Muğla province]. *Sosyal ve Beşeri Bilimler Araştırmaları Dergisi*. 2016;17(37):53-69.
26. Chen AH, Jaafar SN, Noor AR. Comparison of job satisfaction among eight health care professions in private (non-government) settings. *Malays J Med Sci*. 2012;19(2):19-26. PMID: 22973134; PMCID: PMC3431743.
27. Köse A. Career decision regret as a predictor: Do teachers and administrators regret due to their career choice? *World Journal of Education*. 2019;9(1):38-55. doi: 10.5430/wje.v9n1p38
28. Cheval B, Cullati S, Mongin D, Schmidt RE, Lauper K, Pihl-Thingvad J, et al. Associations of regrets and coping strategies with job satisfaction and turnover intention: international prospective cohort study of novice healthcare professionals. *Swiss Med Wkly*. 2019;149:w20074. PMID: 31026043.
29. Dyrbye LN, Burke SE, Hardeman RR, Herrin J, Wittlin NM, Yeazel M, et al. Association of Clinical Specialty With Symptoms of Burnout and Career Choice Regret Among US Resident Physicians. *JAMA*. 2018;320(11):1114-30. Retracted and republished in: *JAMA*. 2019;321(12):1220-1. PMID: 30422299; PMCID: PMC6233627.
30. Yang L, Yan L, Zhong X, Long H, Chen F, Jin X. Relationship between job burnout, depressive symptoms, and career choice regret among Chinese postgraduates of stomatology. *Int J Environ Res Public Health*. 2022;19(23):16042. PMID: 36498119; PMCID: PMC9740178.
31. Schonfeld IS, Bianchi R. Burnout and depression: two entities or one? *J Clin Psychol*. 2016;72(1):22-37. PMID: 26451877.
32. Neckelmann D, Mykletun A, Dahl AA. Chronic insomnia as a risk factor for developing anxiety and depression. *Sleep*. 2007;30(7):873-80. PMID: 17682658; PMCID: PMC1978360.
33. Dewa CS, Loong D, Bonato S, Thanh NX, Jacobs P. How does burnout affect physician productivity? a systematic literature review. *BMC Health Serv Res*. 2014;14:325. PMID: 25066375; PMCID: PMC4119057.
34. Mete B, Değer M, Pehlivan E. Doktorlarda mesleki tükenmişlik sendromuna çalışma yaşam kalitesinin etkisi [The relationship between professional burnout syndrome and quality of working life in doctors]. *Anadolu Kliniği Tıp Bilimleri Dergisi*. 2020;25(2):94-101. <https://doi.org/10.21673/anadoluklin.695794>
35. Cupit C, Redman E. Supporting people to implement a reduced carbohydrate diet: a qualitative study in family practice. *BMJ Nutr Prev Health*. 2021;4(1):226-34. PMID: 34308130; PMCID: PMC8258033.