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# Nursing Staff Perception regarding Career Plateau and its Relation to their Work Engagement

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## Abstract

**Background:** Career plateau is a crucial determining factor that impacts both the organization and the nursing staff, which led to poor work outcomes as a decline in work engagement. **Aim of this study**: To assess nursing staff' perception regarding career plateau and its relation to their work engagement. **Design**: A descriptive correlational research design was utilized. **Setting**: The study was carried out in all inpatient units at medical and surgical buildings at Benha University Hospitals. **Subjects**: Consisted of the head nurses group (60) and simple random sample of staff nurses (295). **Tools of data collection**: Two tools were used for data collection; Career plateau questionnaire and Utrecht Work Engagement scale (UWES). **Results**: The highest percent (80%, 69.1%) of head nurses and staff nurses respectively had low perception level regarding career plateau. Also, the majority (90.2%, 80%) of staff nurses and head nurses respectively had high level of work engagement. **Conclusion:** There was a highly statistical significant negative correlation between total perception level of career plateau and total work engagement level among studied nursing staff. **Recommendations:** Providing nursing staff with education programs about their job description and road map for career advancement. Maintaining a supportive work environment for nursing staff by supplying all the resources necessary for their work and by using job enrichment to enhance their work engagement.

Key words: Career plateau, Nursing staff, Work engagement.

## 1. Introduction

Any healthcare organization's nursing staff is regarded as its foundation since they provide energy and aid in achieving goals. Depending on their training and the needs of the hospital, nursing staff may be in charge of a wide range of tasks and responsibilities. Nursing staff expect their careers to advance gradually until they reach a point where their skill development stops or they are unable to move up the organizational hierarchy due to the development of unstable organizational structures, an unstable economy, and downsizing policy. As more nurses work in the same capacity for extended periods of time, they are more likely to experience a career plateau [1].

A career plateau is the sense of frustration and psychological impairment that nursing personnel frequently feels when their professional advancement comes to a temporary or permanent halt where there is little to no chance of moving up the formal hierarchy vertically. Additionally, it is a stage in a career where both upward and horizontal movement are constrained. The nursing staff feels that they are being prevented from being in the same posture for an extended period of time, which makes them uncomfortable and anxious [2].

Job routine, a lack of enthusiasm and a protracted period of waiting for a promotion opportunity are contributing factors to career plateau when the nursing staff's behavior, activities and output diverge from the hospital's progressive goals. In an effort to reach their objectives in a certain circumstance, the plateaued nursing staff evaluates the cost of quitting and chance of finding better options. Nursing staff become more frustrated and depressed as they try to lower their levels of productivity and creativity, experience high levels of job dissatisfaction, and decline their levels of work engagement when hospital administration fails to find alternative solutions to manage the hospital's plateauing [3].

There are several different types of career plateau including; structural (hierarchical) plateau, where nursing staff perceive little opportunity for further upward movement, content (job content) plateau, which is related to the absence of new, difficult, and varied tasks without opportunities for improvement [4]. The additional type of career plateau is inclusive (centralized) plateau which describes the degree to which nursing staff are on the inside of an organization. This occurs when they have fewer rights, their desire for control cannot be fulfilled and they may feel that the organization is not paying enough attention to them or is not supporting them which upsets the balance of reciprocity. The feelings people have as a result of a job content plateau and hierarchical plateau are described by another classification of career plateau called psychological plateau which affect nursing staff work engagement [5].

Work engagement is a state of active, energetic involvement in a work role in which nursing staff proactively express their thoughts and feelings. Once nursing staff feel engaged, they are best able and most willing to invest high effort in their work activities, leading to increased performance that result in higher levels of nursing staff well-being, increased proactivity and higher productivity. Because highly engaged nursing staff devote all of their physical, mental and emotional energies to their work duties, it has a substantial impact on how well they do their jobs [6].

Work engagement is an ongoing, upbeat, and fulfilling mental state, an affective-motivational state of wellbeing at work and it is characterized by vigor, dedication and absorption. Work-related vigor is an example of vitality. The willingness to commit and put in the time necessary for one's task, as well as the capacity to recover quickly and persevere under pressure. Passion, inspiration, and challenge that are related to one's work are characteristics of dedication. Absorption is defined by the passing of time quickly and a desire to step away from one's job. It requires full focus and being intensely absorbed in one's task [7].

The degree to which nursing staff members are engaged at work is thought to be influenced by a variety of factors, including career plateau. Career plateau's potential negative effects may also have an impact on how successful nursing staff members are, especially if they need to advance their careers. Some nursing personnel experience a hierarchical plateau at work due to a lack of promotion options, and this has been linked to a decline in work engagement [8].

There are many international studies about career plateau and work engagement that illustrated that identifying predictors of career plateau and successful dealing with these factor can reduce negative effect of career plateau on different work related attitudes and improve satisfaction and recommended to develop realistic road map for career advancement to inspire stay in the organization and enhance engagement [9,10].

## 2. Significance of the study:

Promotions and moving up the organizational ladder are viewed as success indicators by nursing staff but due to some factors for all organizations such as flattening hierarchies and disorganized career management in organization that lead to career plateau. Nursing staff who experience career plateau lose their motivation when they continue to work in the same job over an extended period of time, which may result in organizational withdrawing from involvement, lowering nursing staff' productivity, lacking of career satisfaction and job commitment, decreasing the level of work engagement, and decreasing level of creativity and all of this have negative impact on all the entire of the organization [11].

From the investigator point of view through contact with nursing staff in different clinical setting during practical training of students, it was noted that nursing staff don't have sufficient self-efficacy at work due to cessation of promotion resulting in occurrence of career plateau at work that increase turnover intention and decrease work engagement. So, this study was conducted to assess nursing staff perception regarding career plateau and its relation to their work engagement.

### Aim of the study:

This study aims to assess nursing staff' perception regarding career plateau and its relation to their work engagement.

### **Research Questions:**

- 1- What are the levels of nursing staff perception toward career plateau?
- 2- What are the work engagement levels among nursing staff?
- 3- Is there a relation between career plateau and work engagement among nursing staff?

### **5. Subjects and Method:**

The subjects and method of the current study were designed under the following main four designs:

- 1. Technical Design
- 2. Administrative Design
- 3. Operational Design

4. Statistical Design

# 1- Technical design

#### Research design:

A descriptive correlational research design was used to achieve the aim of the present study.

#### **Research setting:**

The present study was carried out in all inpatient units at medical and surgical buildings at Benha University Hospital.

# Research subjects:

The subject of the study was composed of two groups: the first group is the head nurses group which include all the available head nurses (60) and the second group is a simple random sample of staff nurses (295) working in the study setting with at least three year of experience.

# Tools of data collection:

The data was collected by using two tools:

## Tool I: Career Plateau Questionnaire:

It was developed by the investigator after reviewing related literature [12, 13, 14] to assess nursing staff' perception toward career plateau. It consisted of two parts:-

- **Part (1):** It included personal characteristics of nursing staff as (age, gender, marital status, educational qualification, years of experience, current occupational position and work department).
- **Part (2):** It contained 31 items divided into four dimensions; job content plateau (12 items), hierarchical plateau (8 items), inclusive plateau (6 items) and psychological plateau (5items).

### Scoring system:

Responses from the nursing staff were given on a three-point Likert scale rating as the following: (3) for agree, (2) for neutral and (1) for disagree. The score was reversed for negative items. The reverse items were 2,4,5,6,8,11,12,13,15,16,17,18,21,22,23,24,25,2 6. Scores for each dimension were added together and translated to percent scores as follows:

- Low level of perception  $\rightarrow$  <60% of total perception score (31-55).
- Moderate level of perception → 60-75 % of total perception score (56-69).
- High level of perception  $\rightarrow >75$  % of total perception score (70-93).

## Tool (II): Utrecht Work Engagement scale (UWES):

It was developed by [15] and used by the investigator to assess the levels of work engagement among nursing staff. It includes 17 items divided into three dimensions; vigor (6 items), dedication (5 items) and absorption (6 items).

#### Scoring system:

The nursing staff responses were rated by using a three points Likert Scale as the following: (3) Agree, (2) Neutral and (1) Disagree. Finally the scores of each dimension summed up and converted to percent scores.

- Low level of perception  $\rightarrow <60\%$  of total perception score (17-30).
- Moderate level of perception → 60-75 % of total perception score (31-38).
- High level of perception  $\rightarrow >75$  % of total perception score (39-51).

### 2- Administrative Design

The Director of Benha University Hospital received a formal letter from the Dean of the Nursing Faculty, asking for their cooperation and permission to undertake the study. The investigator met with the head nurse of each department to establish an appropriate time to get the information from her team and ensure that work was not impeded.

# Ethical consideration:

The informed oral permission was obtained from each participant after discussing the study's purpose, potential advantages, methods for filling out data collection tools, and anticipated results in order to preserve the respondents' rights before the study was conducted. The respondents' freedom to withdraw the research at any moment was guaranteed. The assignment of a code number to the questionnaire sheets secured the confidentiality of the data collected. Subjects were made aware that the tools' contents would only be used for research purposes

# **3- Operational Design**

# **Preparatory phase:**

• From the beginning of February 2022 until April 2022, this phase began. It included the following:

- Reviewing the national and international relevant literature using journals, periodicals, textbooks, internet and theoretical knowledge of the various aspects concerning the topic of the study for adapting the tools and translating the tools into Arabic language.

#### Face and content validity:

- The tools of data collection were assessed by jury group composed of seven experts in nursing administration; three professors from Faculty of Nursing, Tanta University, two professors from Faculty of Nursing, Menofia University and two assistant professor from Faculty of Nursing, Benha University. It took one month (May 2022)

- Based on the opinions of the jury experts in which modifications and rephrasing of some items were done. The validity of tools aimed to assess its clarity relevance and accuracy.

#### **Reliability of tools:**

The reliability was assessed using cronbach's Alpha coefficient test, which showed that the tools had moderate to high reliability and contained reasonably homogeneous items. The internal consistency of career plateau questionnaire was 0.831 and work engagement scale was 0.757.

#### **Pilot study:**

To ensure the clarity and applicability of data gathering tools, a pilot study was carried out in June 2022 on 29 staff nurses and 6 head nurses which represented 10% of the total study subjects, participated in the study. It has also helped with time estimation for tools filling. It took 20 to 30 minutes on average. The

pilot study sample was included in the study since no adjustments were required.

### Field Work

- After securing necessary permissions, data collection period extended three months from July 2022 to September 2022.
- The investigator met with nursing staff and explained the purpose and the scope of the study and the method of filling questionnaire after receiving approval from the head nurse of each unit and taking into account the workload in each unit, this was done either individually or through group meetings of the nursing staff during the morning shift.
- The investigator distributed the data collection tool with some directions about how to fill it.
- The data were gathered three days per week from 10 Am to 1.30 Pm in the presence of the investigator to clarify any ambiguity.
- The average number of nursing staff who filled data collection sheets per week was ranged between 25- 30.
- The time required to fill the questionnaire ranging from 20-30 minutes.

# 4- Statistical design:

The collected data were revised, coded, tabulated and verified prior to computerized entry. The Statistical Package for Social Sciences (SPSS version 25.0) was used. Descriptive statistics were applied in the form of mean and standard deviation for quantitative variables and frequency and percentages for qualitative variables. Qualitative categorical variables were compared using chi-square test. Pearson correlation coefficient was calculated between variables. Statistical significance was considered at p-value p<0.05, and considered highly statistically significance at p-value p<0.001.

# 3. Results:

**Table (1)**: Illustrates that approximately two fifths (39.5%) of the studied nursing staff were aged ranged from 25 to less than 30 years old with mean  $\Box$ S.D (31.66  $\Box \Box$ 7.77 ). Regarding to gender and marital status the majority (92.7%, 89.9%) of the studied nursing staff were female and married, respectively. In relation to their educational qualifications, more than half (58.0%) of them had associated degree in nursing. According to their years of experience at work, more than one third (36.3%) of the studied nursing staff had 5 to less than 10 years of experience with mean  $\Box$ S.D (11.35 $\Box \Box$ 8.59 ). As well as, current occupational position the most (83.1%) of the studied nursing staff were staff nurses. In addition, more than half (53.5%) of them were working at medical building.

**Figure (1):** Shows that less than three quarters of studied nursing staff had low perception level regarding career plateau, while the lowest percentages (5.3%) of them had high perception level.

**Table (2):** Reveals that the highest mean percent (54.5%) with mean  $\Box$ S.D  $(19.61\pm2.68)$  of head nurses' perception regarding career plateau was related to job content plateau, while the highest mean percent (54.4%) with mean  $\Box$ S.D  $(13.05\pm2.73)$  of staff nurses' perception regarding career plateau was related to hierarchical plateau. On the other hand, the lowest

mean percent (44.1%) with mean  $\Box \Box S.D$  (7.93±1.91) of head nurses' perception regarding career plateau was related to inclusive plateau, while the lowest mean percent (48.0%) with mean  $\Box S.D$  (7.20±2.64) of staff nurses' perception regarding career plateau was related to psychological plateau.

**Figure (2):** Reveals that the majority (88.5%) of studied nursing staff had high level of work engagement, while the lowest percentages (3.1%) of them had low level.

**Table (3):** Demonstrates that the highest mean percent (95.2%, 92.7%) with mean  $\Box$ S.D (14.28±1.18,

13.90 $\pm$ 2.01) of staff nurses and head nurses work engagement respectively was related to dedication dimension, while the lowest mean percent (80.6%, 78.9%) with mean  $\Box \Box S.D$  (14.53 $\pm$ 2.12, 14.21 $\pm$ 2.45) of head nurses and staff nurses work engagement respectively was related to absorption dimension.

**Table (4):** Shows that there was a highly statistical significant negative correlation between total perception level of career plateau and total level of work engagement among studied nursing staff.

Table (1) Frequency distribution of nursing staff regarding personal characteristics (n=355).

Personal characteris	Nursing staff (n=355)			
		N.	%	
			Age	
	< 25	47	13.2	
	25- < 30	140	39.5	
	30- < 35	74	20.8	
	$\geq$ 35	94	26.5	
31.66		Mean □SD		
			Gender	
	Male	26	7.3	
	Female	329	92.7	
		Ν	Iarital statu	
	Married	319	89.9	
	Unmarried	36	10.1	
Educational qualification level				
-	Diploma Degree in Nursing	82	23.1	
	Associated Degree in Nursing	206	58.0	
	Bachelor Degree of Nursing	61	17.2	
	Others	6	1.7	
	Years of	nursing experi	ence at worl	
	< 5	76	21.4	
	5- < 10	129	36.3	
	10- < 15	47	13.2	
	≥15	103	29.1	
	<b>Mean</b>	SD		
<b>Current occupational position</b>				
	Head Nurses	60	16.9	
	Staff nurses	295	83.1	
		Work	department	
	Medical	190	53.5	
	Surgical	165	46.5	

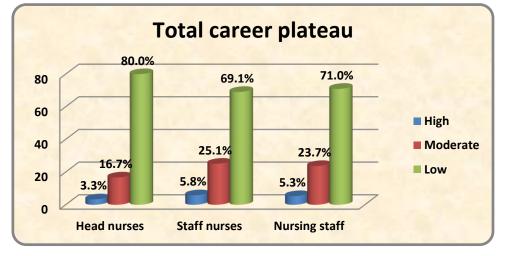


Fig. (1) Total levels of nursing staff perception regarding career plateau.

### Madeha.S.Elsayed, Aya.G.Hasanin and Amira.M.Abd-Elmonem

Career plateau	Maximum	Head nurses		Staff nu	rses	t-test	P value
dimensions	score	Mean ± SD	Mean%	Mean ± SD	Mean%		
Job content plateau	36	19.61±2.68	54.5%	19.07±2.07	52.9%	1.044	0.301
Hierarchical plateau	24	$12.66 \pm 2.82$	52.8%	13.05±2.73	54.4%	1.443	0.154
Inclusive/	18	7.93±1.91	44.1%	9.19±2.62	51.1%	3.315	0.001**
centralized plateau							
Psychological plateau	15	$7.08 \pm 2.20$	47.2%	$7.20 \pm 2.64$	48.0%	0.223	0.824
Total career plateau	93	47.30±6.11	50.9%	48.52±52	52.2%	2.333	0.023*

Table (2): Total mean score and mean percent of nursing staff perception regarding career plateau dimensions (n=355).

\* Statistical significant difference  $P \le 0.05$ , \*\* highly statistical significant difference  $P \le 0.001$ 

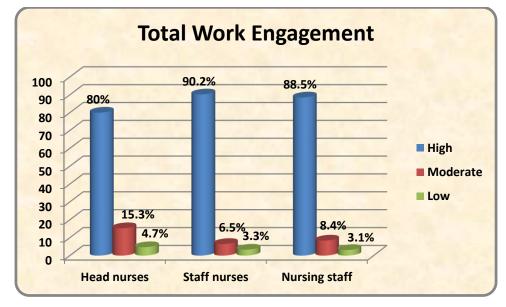


Fig. (2) Total levels of work engagement among studied nursing staff.

Table (3) Total mean score and mean percent of nursing staff' levels of work engagement dimensions (n=355).

Work engagement	Maximum score	Head nurses		Staff nurses		t-test	P value
dimensions		Mean ± SD	Mean%	Mean ± SD	Mean%		
Vigor	18	$15.88 \pm 2.40$	88.2%	16.18±1.89	89.9%	0.793	0.431
Dedication	15	$13.90 \pm 2.01$	92.7%	$14.28 \pm 1.18$	95.2%	0.187	0.852
Absorption	18	14.53±2.12	80.6%	14.21±2.45	78.9%	0.150	0.881
Total work engagement	51	44.31±4.79	86.9%	44.68±4.20	87.6%	0.385	0.702

 Table (4) Correlation between total perception level of career plateau and total level of work engagement among studied nursing staff.

	Nursing staff work engagement		
Nursing staff career plateau	r	P value	
	-0.525	0.000**	

\*\*A highly statistical significant difference  $P \le 0.001$ 

### 4. Discussion

The desire of vertical advancement inside an organization occupied much of the early career development debate. This assumes that job will remain stable throughout one's life. It has been more challenging to uphold this concept since the employment landscape has become unstable and jobs are constantly created and eliminated. The possibility of an individual's occupational ascension to higher levels is decreasing or does not exist at all in situations known as career plateau which are characterized as states in which people have a limited chance of future career growth. Career plateaus are thought to be a permanent and chronic obstacle to professional success that causes annoyance and psychological distress [2].

Because engaged nursing staff are anticipated to perform better on the job, work engagement benefits both organizations and healthcare professionals. Since it is essential for organizational performance, innovation and competitiveness, work engagement should be one of the top goals for organizational leaders. Work engagement is a positive, contented mental state that is characterized by vigor, dedication, and absorption. [16]. Career plateau has a detrimental impact on different work attitudes as nursing staff may become less involved and demotivated in their work as well as can harm the engagement and psychological well-being. of nursing staff [10].

Therefore the current study aimed to assess nursing staff' perception regarding career plateau and its relation to their work engagement.

Regarding personal characteristics of the studied nursing staff, the present study results indicated that approximately two fifths of the studied nursing staff were aged ranged from 25 to less than 30 years old, as regarding to gender and marital status the majority of the studied nursing staff were female and married, respectively. More than half of the studied nursing staff had associated degree in nursing. More than one third of the studied nursing staff had 5 to less than 10 years of experience. The most of the studied nursing staff were staff nurses. More than half of the studied nursing staff were working at medical building.

Concerning total levels of nursing staff' perception regarding career plateau, the findings of the current study clarified that less than three quarters of studied nursing staff had low perception level regarding career plateau, while the lowest percentage of nursing staff had high perception level. From the investigator point of view, this may be due to nursing profession requires nursing staff continuously expand their knowledge and abilities and they have an opportunity to learn through participating in continuous training and educational programs in hospital.

This result was supported by [17] who founded that most teachers didn't experience career plateauing. In addition, [18] reported that career plateau is an objective-subjective situation whose degree and type differ among different groups within a society and is influenced by individual abilities, organizational characteristics, privileges and opportunities available to individuals and their perceptions of these opportunities.

On the same line [19] who reported that a lack of direct longitudinal effects of career plateau on job attitudes, for the most part, which suggests that career plateau in and of itself is not necessarily a negative phenomenon. Also, [20] stated that career plateau phenomenon is now considered a normal stage in career development.

The findings of this study was in disagreement with [21] who founded that nursing staff had high perception level of career plateau. Also, [22] reported that around two thirds of head nurses had high perception level regarding career plateau.

Concerning total mean score and mean percent of nursing staff' perception regarding career plateau dimensions, the current study indicated that the highest mean score of head nurses' perception regarding career plateau was related to job content plateau. While, the lowest mean score of head nurses' perception regarding career plateau was related to inclusive plateau. From the investigator point of view, this result could be due to when head nurses remain longer in the same position the probability of experiencing the job content plateau can occur and head nurses are bored with their jobs.

This result in the same line with [21] who founded that highest mean score of staff nurses was related to job content plateau, while the lowest mean score was related to structural / hierarchical plateau. In addition, [23] who stated that job content plateau had stronger effect sizes and participants experience feelings associated with job content plateau daily, whereas the effect of hierarchical plateau may be only periodic.

Moreover, the findings of this study revealed that he highest mean score of staff nurses' perception regarding career plateau was related to hierarchical plateau. On the other hand, the lowest mean score of staff nurses' perception regarding career plateau was related to psychological plateau. This may be organizations' hierarchical structures are similar to a pyramid so the number of staff nurses reaching the upper ranks is naturally low and there is a minimal chance of moving vertically in an organization.

The present study was in harmony with [24] who reported that hierarchical career plateau is a major obstacle for the careers of the employees. In addition, [25] who stated that hierarchical plateau has clearer and more negative effects on individuals.

On the contrary, the present study results was disagreed with [21] who founded that the lowest mean score was related to structural / hierarchical plateau. In addition, [26] who reported that the centralized plateau score was the highest, followed by the work content plateau, while the hierarchical plateau score was the lowest.

Regarding total levels of work engagement among studied nursing staff, the results of the current study revealed that the majority of studied nursing staff had high level of work engagement, while the lowest percentage of them had low level. From the investigator point of view, this may be owing to the supportive work environment which includes good communication and collaboration between nursing staff and skillful leaders that affect and reflect on staff. Also, nursing staff act in ways that support the success of their organizations and they are committed to succeed in all aspects that they do in their organizations and when organization provides the right resources the nursing staff might cope with demands even better, have higher work engagement and hence perform better.

This result was matching with [27] who founded that more than two thirds of studied head nurses had high level of work engagement. On the same line, [28] who revealed that the most of the studied sample showed high levels of work engagement.

These findings were consistent with [29] who founded that majority of head nurses had high level of work engagement. In addition, [30] who reported that there was high work engagement levels among nurses.

On the other hand, this result was inconsistent with [31] who reported that the nurses had moderate level of work engagement. Also, [32] reported that the participants had decrease in work engagement.

Conversely, this result was contraindicated with [33] who founded that nurses are moderately engaged in their work. In addition, [34] and revealed that work engagement among registered nurses was relatively low.

Regarding total mean score and percent of nursing staff level of work engagement dimensions, the

current study represented that the highest mean score of head nurses and staff nurses was related to dedication dimension, while the lowest mean score of head nurses and staff nurses was related to absorption dimension. From the investigator point of view, this might be due to nursing staff have a sense of meaning to their work, feeling of excitement and pride in their nursing work, which motivate and challenge them at work.

This result was parallel to [35] who represented that studied nurses had high levels of dedication. Additionally, [36] founded that the majority of participants nurses had higher level of dedication.

On the other hand, this finding was in disagreement with [37] who founded that the highest mean score was related to vigor dimension followed by dedication. In addition [38] reported that more than half of staff nurses working at non-critical care units had high level regarding absorption.

Regarding correlation between total perception career plateau and total work engagement level of level among studied nursing staff, the findings of the present study indicated that there was a highly statistical significant negative correlation between total perception level of career plateau and total level of work engagement among studied nursing staff. From the investigator point of view this may be due to when career plateau decreased nursing staff work engagement increased and nursing staff must learn to adapt to different and flexible career development path to deal with rapid changes in the job content of their current position and also nursing staff recently began to place a greater emphasis on own lives outside their work.

This result was supported by [39] who revealed that relatively high levels of work engagement could potentially explain the less strong experiences of career plateau. Additionally, [9] founded that hierarchical plateau was negatively correlated to work engagement. As well as, [40] who reported that there was negative statistically and practically significant relation between work engagement and subjective career plateau.

On the other hand, this result was inconsistent with [41] who reported that there was no statistical significant relation between hierarchical plateauing and work engagement. In addition, [42] founded that there was a moderate positive statistical significant relation between employee engagement and career plateau.

#### 5. Conclusion

The present study concluded that less than three quarters of nursing staff had low perception level regarding career plateau, while the lowest percent of them had high level. Moreover, the majority of nursing staff had high level of work engagement, while the lowest percent of them had low level. Furthermore, there was a highly statistical significant negative correlation between total perception level of career plateau and total work engagement level among studied nursing staff.

#### Recommendations

- Ensuring that there is fairness, equity and consistency in the promotion of nursing staff to avoid a feeling of unfairness and injustice that have an effect on their work engagement.
- Maintaining a supportive work environment for nursing staff by supplying all the resources necessary for their work and by using job enrichment to enhance their work engagement.
- Providing nursing staff with education programs about their job description and road map for career advancement at the time of orientation and socialization.
- Nursing staff should identify their job description, role and responsibilities of their work at the beginning of their employment to reduce risk of career plateau.
- Participating in internal and external training programs workshops and conferences to update their knowledge and skills.
- Further studies should be conducted for exploring relation between career plateau and career adaptability.

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#### Madeha.S.Elsayed, Aya.G.Hasanin and Amira.M.Abd-Elmonem

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