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# AFFECTIVE COMMITMENT AND ORGANIZATIONAL CITIZENSHIP BEHAVIOR AMONG HEALTHCARE **EMPLOYEES: AN EMPIRICAL INVESTIGATION**

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### **ABSTRACT**

The current study aims to assess the impact of affective commitment on the exhibition of organizational citizenship behavior (OCB) among the healthcare employees based upon the tenets of Social Exchange Theory. Using stratified random sampling technique, data were collected from 379 employees working in different hospitals across Jammu and Kashmir. The findings revealed significant positive impact of affective commitment on employees' engagement in citizenship behaviors targeted at both individuals and organization. However, affective commitment emerged as the strongest predictor of OCB towards organization (OCBO) than towards the specific individuals (OCBI). The results of this study have contributed to the literature in the domain of organizational commitment and OCB by testing these linkages in Indian healthcare context, where there is dearth of studies confirming the said relationships. Moreover, this study has also contributed to Social Exchange Theory by validating its assumptions in a new context. This study also provides some valuable insights to healthcare sector which can have detrimental impact on the effective working of this

KEYWORDS: Affective commitment, extra-role behaviors, OCBI, OCBO, hospitals, SEM

### 1. INTRODUCTION

One of the critical set of behaviors that has been considerably researched in organizational sciences is organizational citizenship behavior (Bourdage et al., 2018). "OCB pertains to discretionary behavioral contributions that members render to their organizations" (Organ, 2015, p. 317). These behaviors play a key role in the accomplishment of organizational goals and are pivotal to the understanding of individual workplace behaviors (Majeed et al., 2018a; Rotundo & Sackett, 2002). OCBs are anticipated to positively impact employee productivity and organizational performance (Bolino et al., 2002; Podsakoff et al., 2009).

Given the importance of OCB, research has focussed on understanding the factors that can lead to higher exhibition of such citizenship behaviors. In line with this, a specific realm of research (see for example, Bateman & Organ, 1983; Cetin et al., 2015; Lambert et al., 2008; Organ & Ryan, 1995; Smith et al., 1983; William & Anderson, 1991) has focussed on comprehending the attitudinal correlates of these behaviors. Amongst the affective constructs, organizational commitment has emerged as a valuable predictor of OCBs (Podsakoff et al., 2000, Spitzmuller et al., 2008), more specifically affective form of organizational commitment has been consistently found as a significant correlate of all forms of OCBs (Grego-Planer, 2019; Meyer et al., 2002; Organ & Ryan, 1995). A plausible explanation as to how higher levels of affective commitment is associated with higher exhibition of OCBs can be best understood through the lens of Social Exchange Theory (Blau, 1964). When employees experience positive exchanges with the organization, they are more likely to reciprocate with positive behaviors that will benefit the organization in the long run. OCB seems to be one likely outcome of this exchange process (Liu & Cohen, 2010).

The extant literature clearly indicates that empirical investigations to ascertain the impact of affective commitment on OCB has been abundant. However, taking into account the context of health care, limited number of studies have examined the linkages between these two. Moreover, very few of such studies have included all the classes of healthcare employees, mostly focussing on either nurses or doctors and ignoring the paramedical staff. Therefore, in an attempt to address these gaps in the literature, the current study aims to test the influence of affective commitment on these citizenship behaviors targeted to benefit a specific individual as well as the organization.

## 2. THEORETICAL BACKGROUND

### **Affective commitment**

When an employee's identity becomes intertwined with the organization, leading to an alignment between his individual goals and that of the organization, organizational commitment is said to have developed (Meyer & Allen, 1997). Past research has shown that employees with low levels of commitment to their organizations tend to make more errors, experience higher job-stress,



## EPRA International Journal of Research and Development (IJRD)

Volume: 8 | Issue: 7 | July 2023 - Peer Reviewed Journal

face increased family-related conflicts and exhibit higher absenteeism compared to those with strong organizational commitment (Meyer et al., 2002). Numerous studies have identified three components of organizational commitment: normative, continuance and affective (Allen & Meyer, 1990; Ko et al., 1997).

Affective commitment involves an employee's emotional attachment and identification with their organization (Allen & Meyer, 1990). Ko et al. (1997) define affective commitment as the desire to remain employed in the organization due to the sense of recognition, emotional connection and active engagement with the organization. hence, affective commitment is characterized by a positive emotional bond between the individual and the organization they are working for. Higher levels of affective commitment can lead to a strong sense of belonging, loyalty, and pride in the organization. Such employees genuinely care about the organization's well-being and success. In comparison to other commitment components, i.e., normative and continuance, affective commitment has been associated with more positive organizational outcomes such as job performance, OCB and employee engagement (Alshaabani et al., 2021).

## Organizational Citizenship Behavior (OCB)

Organizational citizenship behavior (OCB) encompasses voluntary and positive actions that exceed an employee's official job requirements. These behaviors are not explicitly stipulated or rewarded by the organization, yet they play a vital role in enhancing its overall effectiveness and functioning (Organ et al., 2006). In fact, citizenship behaviors are amongst the most desirable behaviors in contemporary organizations (Majeed et al., 2018b). OCB entails engaging in actions that benefit co-workers, the organization or its stakeholders. It demonstrates an individual's readiness to assist and support others, foster a positive workplace atmosphere, and actively contribute to the organization's achievements beyond the scope of their designated job duties.

Employees can display these discretionary behaviors either to benefit a specific individual or the organization (Lee & Allen, 2002; Williams & Anderson, 1991). When employees engage in such actions such as supporting and assisting their colleagues at the workplace without being asked to do so, these actions come under the category of organizational citizenship behaviors towards individuals (OCBI). Likewise, when employees engage in such actions that aim to benefit the organization directly like willingly attending non-mandatory but important organizational meetings or showing support for organizational policies infront of outsiders, it is referred to as organizational citizenship behaviors towards organization (OCBO).

### Affective commitment and OCB

Extant literature has vouched for positive associations between affective commitment and OCB (Meyer et al., 2002; Organ & Ryan, 1995). In fact, Social Exchange Theory (Blau, 1964) has often been utilized to elucidate the fundamental reasons behind employees' voluntary participation in OCB. This theory proposes that human interactions are founded on the exchange of social and material resources, emphasizing the importance of achieving equilibrium in these exchange relationships. A key aspect of this theory is the norm of reciprocity, which suggests that individuals tend to reciprocate to those who have offered assistance or treated them fairly. Similarly, in the context of organizations, if employees perceive supportive and fair treatment from their organization, supervisors or their co-workers, they are inclined to respond with positive actions in return (Lambert et al., 2013). These positive actions may stem from employees' expertise, knowledge, or personal devotion such as organizational commitment (Lai et al., 2015). Hence employees who have a strong emotional attachment to their organization are more inclined to engage in behaviors that positively impact the organization's success and overall welfare (Lambert et al., 2021). These employees develop a family-like bond with the organization which can motivate them to exert additional effort and remain loyal to the organization even during difficult times. When employees genuinely care about their organization, they are inclined to go above and beyond their prescribed duties and demonstrate citizenship behaviors that benefit both the organization and its members (Alshaabani et al., 2021; Cetin et al., 2015; Liu & Cohen, 2010). Both of these aspects play a crucial role in cultivating a constructive work environment and enhancing the organization's performance and achievements. In line with these claims, the present study aims to examine the influence of affective commitment on OCB aimed at benefiting specific individuals (OCBI) and organization (OCBO) in the context of healthcare. Hence, it is hypothesized that:

- (H1) Affective commitment has a significant positive effect on OCBI among healthcare employees
- (H2) Affective commitment has a significant positive effect on OCBO among healthcare employees

### 3. METHODOLOGY

## Sample and Data collection

The study was conducted in tertiary care hospitals across the union territory of Jammu & Kashmir, India. Employees working in these hospitals on various designations formed the population of the study. Further, using Yamane's (1967) model, the adequate sample size for the study was determined which came out to be 379. Afterwards, stratified random sampling technique was utilized to divide the study population into three strata- Doctors, Nurses and Paramedics. Finally, a specific number of respondents were selected from each stratum on proportionate basis and questionnaires were distributed accordingly. The sample respondents were asked to return the questionnaire when filled out. They were assured that neither their identity nor their responses will be revealed to anyone.



## EPRA International Journal of Research and Development (IJRD)

Volume: 8 | Issue: 7 | July 2023 - Peer Reviewed Journal

#### Measures

#### **Affective commitment**

The TCM instrument developed by Meyer et al. (1993) was adopted to measure the level of affective commitment among the respondents. The sample items include "This organization has a great deal of personal meaning for me", "I do not feel a strong sense of belonging to my organization (R)".

#### **OCB**

Lee and Allen's (2002) scale was adopted to measure the display of OCB among the sample respondents. The sample items include: "Go out of the way to make newer employees feel welcome in the work group", "Give up time to help others who have work or nonwork problems" and "show pride when representing the organization in public".

### Demographic profile

The sample consisted of 42% males and 58% females. A significant portion of the respondents (66.2%) fell within the age range of 25-39 years. The majority of participants had attained Ms/MD/DNB/M.Sc. degrees (49.1%). Most of the respondents belonged to the age group of 25-39 years and had been working in their respective hospitals for less than ten years.

#### 4. RESULTS

The present study utilized PLS-SEM technique to analyse the data. Under this technique, measurement model assessment has to be performed as the first step, followed by structural model assessment. The present study has performed these two assessments respectively to arrive at valid results.

#### **Measurement Model Assessment**

Since the constructs in the present study are reflective in nature (Dhiman & Sharma, 2021; Farrukh, et al., 2017), therefore the techniques of reflective measurement model (see table 1) were checked for assessing the reliability and validity of these constructs. As reflected in table 1, the indicator loadings for all the items were above 0.5 threshold (Hair et al., 2019), therefore all the items were included for further analysis. Further, the Cronbach alpha scores and composite reliability for all the constructs were above 0.7 threshold (Hair et al., 2018), therefore reliability of constructs was proven. In addition, the AVE scores were above 0.5 threshold (Hair et al., 2018), thereby substantiating the convergent validity of these constructs.

Table 1. Reliability and Convergent validity of the constructs

Construct	Indicators	Loadings	Cronbach alpha	CR	AVE
Affective Commitment			0.87	0.90	0.61
	AC1	0.83			
	AC2	0.79			
	AC3	0.75			
	AC4	0.72			
	AC5	0.80			
	AC6	0.80			
OCB towards Individuals (OCBI)			0.89	0.91	0.58
	OCBI1	0.64			
	OCBI2	0.80			
	OCBI3	0.77			
	OCBI4	0.81			
	OCBI5	0.80			
	OCBI6	0.84			
	OCBI7	0.79			
	OCBI8	0.58			
OCB towards Organization (OCBO)			0.91	0.93	0.63
<b>G</b>	OCBO1	0.60			
	OCBO2	0.78			
	OCBO3	0.79			
	OCBO4	0.81			
	OCBO5	0.83			
	OCBO6	0.85			
	OCBO7	0.84			
	OCBO8	0.81			



## EPRA International Journal of Research and Development (IJRD)

Volume: 8 | Issue: 7 | July 2023 - Peer Reviewed Journal

Moreover, in order to determine the discriminant validity of the constructs, Fornell and Larcker (1981) criterion was used. According to this method, the square root of the AVE should be greater than the correlation value of the latent constructs. As reflected in table 2, the square rooted AVE values are greater than the latent variables' correlation values (see values in bold and italic), hence providing evidence for the discriminant validity of the study constructs.

**Table 2. Discriminant Validity of Constructs** 

Constructs	Affective commitment	OCBI	ОСВО	
Affective commitment	0.78			
OCBI	0.41	0.76		
ОСВО	0.54	0.65	0.79	

### **Structural Model Assessment**

Once the reliability and validity of constructs is established, the next step is to proceed for hypotheses testing. The results of hypotheses testing, as displayed in table 3, clearly reveals that affective commitment has a significant positive impact on the display of OCB towards the individual (beta coefficient = 0.18, p value < 0.01) as well as organization (beta coefficient = 0.30, p value <0.01). Hence, the results provided support to both hypotheses (H1 & H2). Further, the results also found that the effect of affective commitment on OCB towards organization (OCBO) was higher than that of the impact on OCB towards individuals (OCBI) among the health care employees.

Table 3 Hypotheses testing

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Hypothesis	Coefficient	SD	t-statistic	p- value	LLCI	ULCI	Decision	
H1: AC -> OCBI	0.18	0.05	3.43	0.00	0.08	0.27	Supported	
H2: AC -> OCBO	0.30	0.06	4.85	0.00	0.19	0.39	Supported	



## EPRA International Journal of Research and Development (IJRD)

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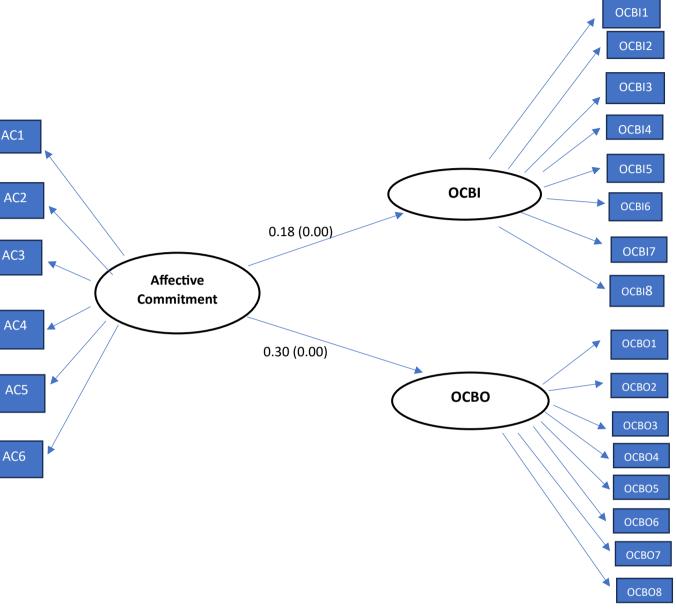


Figure 1. Path model

#### 5. DISCUSSION AND CONCLUSIONS

The findings of the study found a significant positive influence of the level of affective commitment on the display of OCB among the healthcare employees. Hence, when these employees feel high level of emotional attachment to their hospitals, they are likely to reciprocate with higher display of citizenship behaviors. Affective commitment leads these employees to feel a sense of responsibility and care for their colleagues' welfare. Consequently, they are more willing to help and support their co-workers when needed, even if falls beyond their formal requirements. Similarly, these employees are also more likely to support and defend their organizational policies whenever needed. Because of affective commitment, they have a strong belief in the decisions of the organization and are more likely to trust its leadership. This trust and support contribute to create a more positive organizational climate which eventually lead to betterment of the organizational performance. Moreover, these findings are in line with the prior studies (for instance, Alshaabani et al., 2021; Cetin, 2015; Meyer et al., 2002; Vazquez-Rodriguez et al., 2021; Zayas-Ortiz et al., 2015) which have also revealed significant positive linkages between affective commitment and OCB towards individuals and organization.

### 6. IMPLICATIONS

The study has offered a few theoretical and practical implications. First, the study found significant positive effect of affective commitment on OCB among healthcare employees in J&K. Therefore, this study has added to the extant pool of studies on affective



## EPRA International Journal of Research and Development (IJRD)

Volume: 8 | Issue: 7 | July 2023 - Peer Reviewed Journal

commitment and OCB relationship by revealing significant associations between the two in healthcare context where the studies are limited. Our findings have also added to the Social Exchange Theory by testing the theory principles in a different context. Moreover, this study has included doctors, paramedics and nurses as sample respondents, hence have contributed in generalizing the results to all types of health care employees.

On the basis of findings, the select sector authorities can be suggested to give due consideration to increase the level of affective commitment among the employees because committed employees are critical to the exhibition of positive extra-role behaviors, which in turn, are essential for the enhancement of organizational performance and well-being. Hence, devising strategies such as nurturing a positive environment, acknowledging and appreciating employee contributions can enhance affective commitment levels among the employees and subsequently, this can result in increasing the display of OCBs.

## 7. LIMITATIONS AND FUTURE RESEARCH DIRECTIONS

The current study has employed a cross-sectional design, therefore future researchers may adopt a longitudinal design to gain better understanding of the linkages. Additionally, relying solely on self-reported responses introduces the possibility of common method bias. To mitigate this, future researchers may consider gathering responses from alternative sources. Moreover, to obtain a more comprehensive understanding of the connection between affective commitment and OCB, future studies can incorporate mediating or moderating variables into the study model. These suggestions may contribute to a more robust and nuanced investigation of the linkages between affective commitment and OCB.

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Volume: 8 | Issue: 7 | July 2023 - Peer Reviewed Journal

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