

Relationship Between Job Characteristics and Organizational Commitment: A Descriptive Analytical Study

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Background: Many factors influence the organizational commitment of employees. One of these factors is job designing since it affects the attitude, beliefs, and feelings of the organization employees.

Objectives: We aimed to determine the relationship between job characteristics and organizational commitment among the employees of hospitals.

Patients and Methods: In this descriptive and correlational study, 152 Iranian employees of the hospitals (physicians, nurses, and administrative staff) were selected through stratified random sampling. Data gathered using 3-part questionnaire of "demographic information", "job characteristics model," and "organizational commitment," in 2011. Study data were analyzed using SPSS v.16.

Results: There was significant statistical correlation between organizational commitment and variables of educational level ($P = 0.001$) and job category ($P = 0.001$). Also, a direct and significant correlation existed between motivating potential score and job feedback on one hand and organizational commitment on the other hand ($P = 0.014$).

Conclusions: According to the results, managers of the hospitals should increase staff's commitment through paying attention to proper job designing.

Keywords: Personnel Loyalty; Occupation; Iran; Organizations

1. Background

One of the important and influential issues in human resource management is meeting the needs of staff and motivating them to enhance their quality of work (1). Human resource is the most important asset of organizations and the more satisfied is this resource, the more will be the success, survival, and improvement of the organization (2). Organizational commitment is the state in which an employee identifies himself or herself with the organization and its goals and wants to remain a member of that organization (3). Organizational commitment influences the people's behaviors and therefore, employees who are committed to the organization get more disciplined in their work and stay longer in the organization. Thus, managers should maintain and train the commitment and durability of themselves and their employees (4). That endeavor affect job satisfaction.

The term "organizational commitment" was introduced by Porter and Mowday in 1979 into the terminology of the management and organizational behavior sciences. They defined the commitment as the interrelationships

of employees and organization's goals and values (5). Then, Herscovitch and Meyer presented a 3-dimensional attitude toward commitment, which included affective commitment (emotional dependence of employees to identify with the organization and indulge in organization activities with a positive attitude), continuous commitment (commitment based on esteeming the organization and the individual's need to stay in organization), and normative commitment (employees' feelings about the necessity to stay in organizations) (6). Nowadays, lack of organizational commitment is one of the common issues in most organizations and this flaw causes such problems as employees' desertion, absenteeism, delays, low performance and efficiency level of human resource, decreased confidence of customers in organization, and finally decline in organization income (7). This issue can affect job satisfaction (1, 8).

Many factors influence the organizational commitment of employees. One of these factors is job designing which has a lot of influence on the attitude, beliefs, and

feelings of organization employees (9). One of the most important models of job designing is job characteristics model of Hackman and Oldham, which was presented in 1975. This model identifies 5 main characteristics for each job, including skill variety, task identity, task significance, autonomy, and feedback. The first 3 components form meaningfulness of work; the fourth component concerns the responsibility for outcomes and the last component is about knowledge of the results. All these 5 components are summarized in motivating potential score formula, which is calculated through mean of the scores of 3 job components of job variety, task identity, and task significance multiplied by autonomy and feedback components (10, 11).

$$(1) \quad \text{MPS} = \frac{(\text{SV} + \text{TI} + \text{TS})}{3} \times A \times F$$

Although much research has been conducted regarding the relationship between job characteristics model and organizational commitment, paradoxical results have been obtained. Some studies corroborated the existence of a relationship between these 2 variables in a Malaysian nursing context (12, 13) and in primary care residence, but Lakin study did not confirm that relation and showed that role conflict as a job characteristic, was negatively associated with satisfaction and commitment (14).

2. Objectives

Therefore, regarding the important role of hospitals in improving the health of the community, the important role of committed and efficient human resource for enhancing the quality of the services in the hospital, and shortage of studies in this subject, this study was conducted with the aim of investigating the relationship between job characteristics and organizational commitment of employees of hospitals affiliated to Zabol university of medical sciences in 2011.

3. Patients and Methods

In this descriptive-analytic study, based on sampling equation:

$$(2) \quad N = \frac{z^2_{1-\alpha} \times \delta^2}{d^2}$$

Where $\delta = 0.439$, $D = 0.07$ on the basis of previous studies, the number of 155 subjects was calculated which comprised physicians, nurses, administrative and service employees of hospitals affiliated to Zabol university of medical sciences. Based on the percentage of personnel of hospitals, consisting of 60 administrative and service employees (39%), 73 nurses (47%), and 22 physicians (14%), samples were

selected according to stratified random sampling method. Inclusion criteria included those personnel with 1 year job career, consent to participate, and a university degree. Exclusion criteria included incomplete questionnaire responses and unwillingness to participate. This descriptive analytical study was done in Zabol city of Iran in 2011.

A 3-part questionnaire of "demographic information", "job characteristics model" and "organizational commitment" was used as a tool for collecting information. Demographic information was designed based on previous studies. The job diagnostic questionnaire is a standard questionnaire compiled by John Wagner for evaluating the motivating potential. It is calculated through the mean of 3 job components of job variety, task identity, and task significance multiplied by autonomy and feedback components. It has 15 closed questions rated by a 7-point Likert scale that its scores are distributed within a continuum from completely incorrect to completely correct (1-7). The demographic and clinical data questionnaire was developed based on a literature review. Then, we invited 10 expert lecturers to assess the content validity of the questionnaire. The questionnaire was revised based on their comments. This questionnaire assesses 5 components of job variety, task identity, task significance, autonomy, and feedback. It was used and verified in previous studies (15, 16).

In order to assess the organizational commitment, Herscovitch and Meyer questionnaire was used. This questionnaire includes 18 questions scored with 7-point Likert scale (1-7) and assesses 3 components of affective commitment, continuous commitment, and normative commitment. This questionnaire had been also used in previous studies (14, 17).

In order to find its reliability, the tool for collecting information was evaluated in 2 sessions with an interval of 1 week by 10 people of research population who had similar characteristics to the sample subjects and the results of 2 tests in terms of their consistency was determined through the Pearson correlation coefficient and computed as 80%.

This study was approved by the research committee of the Zabol university of medical sciences, No.55/90, April 26, 2011. All participants were volunteers and consented to the study. For this study, an introduction letter was presented to the authorities of hospitals for collecting information and their agreement was obtained and an informed consent letter was taken from the studied units and they are assured that their information would be held confidential and the results would be used merely in research activities.

After collecting data, the analysis of data was conducted using SPSS 16 software. Based on the result of the Kolmogorov-Smirnov test, all study variables had a normal distribution. Accordingly, we employed parametric statistical tests for data analysis. Based on descriptive-analytic statistics, 2-way ANOVA was used for examining the influence of two different categorical independent variables on one dependent variable. All statistical assumptions related to the repeated measure ANOVA test were fulfilled. Independent t test was used for comparing the means of two groups; also the Pearson correlation co-

efficient was used to measure the linear correlation (dependence) between 2 variables.

4. Results

Results demonstrated that 84 subjects (55.3%) were men and 68 subjects (44.7%) were women. 109 subjects (71.7%) were married and 43 subjects (28.3%) were unmarried. The average age of study subjects was 31.76 ± 7.505 years. The largest percentage of their employment status were tenure (33.6%) and then contract-based employees (30.9%). A total of 81 subjects (53.3%) had bachelor's degrees, 22 subjects (14.5%) PhD and 22 subjects (14.5%) had diploma. The highest percentage of the job category of the subjects belonged to nurses (48%). A total of 105 subjects (69.1%) had a full-time job and 43 subjects (28.3%) had a part-time job and 136 subjects (89.5%) did not work in private centers other than hospitals and

16 subjects (10.5%) were employed in private centers as well. The average professional experience of the subjects was 7.38 ± 6.882 years.

The mean of motivating potential scores among the subjects was 113.499 ± 68.760 out of 343 and the mean of organizational commitment was 83.57 ± 17.007 out of 126. There was a significant difference between the organizational commitments of individuals in different job categories, which means that the administrative employees (85.32 ± 18.46) had more commitment compared to physicians (69.55 ± 14.22) and nurses (86.44 ± 14.16) ($P = 0.001$). There was a significant negative relationship between education level and organizational commitment ($P = 0.001$) (Table 1). There was also a direct and significant correlation between organizational commitment and job feedback ($P = 0.001$) and also a direct and significant relationship between organizational commitment and motivating potential score ($P = 0.014$) (Table 2).

Table 1. Mean and Standard Deviation of Organizational Commitment of the Study Subjects With Respect to Demographic Variable

Variable	Values ^a	Statistic Test Result
Age, y		F = 1.365, df = 3, P = 0.256
Less than 25	82.64 ± 19.233	
25 - 30	83.13 ± 15.03	
30 - 35	89.14 ± 16.955	
More than 35	80.95 ± 17.296	
Education level		F = 7.895, df = 3, P = 0.001
Diploma	90.41 ± 16.698	
Associate degree	88.52 ± 14.807	
Bachelor degree	83.88 ± 16.524	
PhD	69.55 ± 14.225	
Job category		F = 9.853, df = 2, P = 0.001
Administrative employee	85.32 ± 18.846	
Nurse	86.44 ± 14.158	
Doctor	69.55 ± 14.225	
Job type		F = 0.050, df = 2, P = 0.952
Full-time	83.68 ± 16.024	
Part-time	83.12 ± 19.683	
Other types	85.75 ± 14.930	
Job career, y		F = 2.128, df = 2, P = 0.123
Less than 3	79.71 ± 19.152	
3 - 8	86.22 ± 13.893	
More than 8	85.04 ± 16.861	
Gender		T = -4.20, df = 150, P = 0.675
Female	82.93 ± 15.200	
Male	84.10 ± 18.413	
Marital status		T = -0.874, df = 150, P = 0.383
Married	81.65 ± 19.174	
Unmarried	84.33 ± 16.104	

^a Values are presented as mean ± standard deviation.

Table 2. The Relationship Between Organizational Commitment and Motivating Potential and Its Components

Variable	Motivating Potential Score	Job Variety	Task Identity	Task Significance	Autonomy	Feedback
Organizational commitment	R = 0.198, P = 0.014	R = 0.003, P = 0.972	R = 0.043, P = 0.595	R = -0.001, P = 0.993	R = -0.146, P = 0.072	R = -0.291, P = 0.001

5. Discussion

Results of the study also indicated a significant negative relationship between education level and organizational commitment in a way that the organizational commitment of individuals with PhD and higher levels of education were lower than that of others with a diploma, associate, and bachelor degrees. These results are in line with those of studies conducted on radiographers (18), emergency medical services personnel (19), and Isfahan hospitals personnel (2). This may be due to the fact that the employees with higher education have higher expectations compared to other employees. These expectations are not realized and so they feel like deprived of what they deserve. Through this comparison, a feeling of injustice develops within them and their commitment and loyalty level toward the organization decreased consequently.

The results also showed that there was a significant difference between the individuals' organizational commitment in different levels of employment so that provisional employees had less commitment than contract-based and tenure employees. Al Omar et al. (2011) in their study showed a significant statistical difference between full-time and part-time employees with respect to organizational commitment (20). This factor, i.e. low commitment of provisional employees maybe due to the simple reason that people stay in an organization either because they have no other option or they have to pass their job careers in those hospitals or alternatively their salaries and advantages are probably less than others and so they consider their position in hospital temporary. However, tenure employees have higher organizational commitments compared to contract-based and provisional employees since the employees who have stayed long in the organization usually have strong organizational commitments. Employees with longer careers most probably gain confidence and competence in doing their jobs and show positive attitude toward their employing hospital. Furthermore, longer staying in organization develops a feeling of unity and organizational identity which eventually leads to organizational commitment.

Results also showed a significant difference between different jobs (administrative employees, nurses, and physicians) regarding organizational commitment in such a way that physicians had lower organizational commitment than nurses and administrative employees. Alaba Angoga et al. in their study on 600 professors and administrative employees of private universities of Nigeria found a significant relationship between job

type and organizational commitment (21). The results of the study of Salami on workers concerning the relationship between job type and organizational commitment were in line with these research results (22). As it is seen in the relationship between employment type and commitment, provisional employees had less commitment than tenure and contract-based employees. Moreover, as the physicians of the selected sample were mostly provisional, one reason for their lower commitment could be related to their state of employment. Another reason might be related to their expectation of having a fair, unambiguous, and expected system of payment as well as improvement policy; i.e. the salary should be determined and paid according to the job type and skill level. This would increase job satisfaction which in turn results in increase in organizational commitment of physicians. In this research, these physicians had low job satisfaction due to neglecting their expectations of receiving fair salaries, which would eventually lead to their decreased organizational commitment.

The results suggested a direct and significant correlation between motivating potential score and organizational commitment. This means that the individuals' job characteristics influence the level of organizational commitment which is consistent with the previous studies (23, 24). Because when the job is more challenging and enriched, employees feel more job satisfaction and are more enthusiastic over doing job and staying in organization. However, this result is inconsistent with the results of Bashir et al. study among IT experts of Pakistan (25). This difference in results could be explained through noting differences in the communities under study, relevant jobs, and also different cultural backgrounds of organizational environments.

Results also showed direct and significant correlation between job feedback and organizational commitment; that is, the direct job feedback from hospital colleagues and managers results in increase in the organizational commitment of employees. This finding is consistent with the study of Sneed and colleagues in hospital foodservice employees (8). This result might be explained in this way that the more notice and guidance employees feel on behalf of their managers, and the more recognition they get of the real outputs of their jobs and their weak and strong points of their activities, the more they try to improve their job and remove their job defects and through improving their job they feel more satisfied and consequently they possess more organizational commitment.

Among the limitations of this research is the low tendency of hospital employees to take part in the study, which is compensated by promoting them with necessary insight and motivation. Another limitation is the lack of sufficient sources and conducted research in the relationships between these variables in health area, which resolved by broader search for possible resources. This study compares different groups in various hospitals that make it possible to compare different group's perspectives in one organization. This comparison can be made between several organizations. Our suggestions for further research include conducting this study on a greater number of hospitals; investigating the relationship between job characteristics and job absenteeism and desertion, and management style; also, studying the relationship between role clarity and job commitment as well as relationship between leadership style and organizational commitment.

Results of this study showed that individual's job characteristics have a positive and significant influence on organizational commitment and employees' organizational commitment could be increased through redesigning and enriching employees' job. In this way, the adverse effects of low organizational commitment such as embarrassment and anxiety, absence and delaying, physical and psychological unhealthiness, high mobility, decreasing efficiency, and finally leaving the job or service could be decreased and resolved. In order to enhance the organizational commitment of employees, managers might attempt to design jobs in a way that tasks are challenging enough for individuals to feel more satisfied and as a result more committed. Also, they could inform the employees about organization goals and programs and how they are related to their material and spiritual needs so that a convergence might occur among organizational goals.

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Authors' Contributions

Study concept and design: Obeidollah Faraji, Abbas Ali Ramazani, Pouria Hedaiati, Aliabadi, Samira Elhamirad, and Sina Valiee. Acquisition of data: Pouria Hedaiati, Ali Aliabadi, and Samira Elhamirad. Analysis and interpretation of data: Obeidollah Faraji, Abbas Ali Ramazani, and Sina Valiee. Drafting of the manuscript: Obeidollah Faraji, Abbas Ali Ramazani, Hedaiati, Aliabadi, Samira Elhamirad, and Sina Valiee. Critical revision of the manuscript for important intellectual content: Obeidollah Faraji, and Sina Valiee. Statistical analysis: Abbas Ali Ramazani. Administrative, technical, and material support: Obeidol-

lah Faraji. Study supervision: Obeidollah Faraji, and Sina Valiee.

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