

Examination of Relationships among Organizational Characteristics and Organizational Commitment of Nurses in Western and Eastern Region of Nepal

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ABSTRACT

Introduction: The objective of this study is to identify relationships between three components of organizational commitment and organizational characteristics of nurses in the western and the eastern region of Nepal.

Methods: A self-administrated questionnaire was used to collect data from 310 nurses currently working at various hospitals in the eastern and the western region of the country. The questionnaire included three sections namely 1) personal characteristics 2) organizational characteristics and 3) organizational commitments scale. Descriptive analysis and multiple regression analysis were performed to identify significance in various relationships.

Results: Out of the 240 completed questionnaires, 226 were found valid for analysis. The mean age was 27.4 years. For each depended variable affective, continuance and normative commitment, multiple regression analysis was performed with personal Characteristics and organizational characteristics as independent variables. All independent variables were found significantly related to each of the two dependent variables; affective commitment and normative commitment (R^2 adjusted=0.24, $p<0.01$ and R^2 adjusted=0.05, $p<0.01$ respectively). However, they were not significantly related to the continuance commitment. Both support from boss ($\beta=0.138$, $p<0.05$) and satisfaction with training ($\beta=0.301$, $p<0.05$) were found to be positive and significant with affective commitment. On the other hand, satisfaction with training ($\beta=0.191$, $p<0.05$) was also positive and significant with normative commitment.

Conclusions: Since both support from boss and training program were found to be positive and significant with affective commitment, hospitals must encourage supervisors to provide more assistance to the subordinate nurses. Moreover, hospitals should develop more training programs to keep nurses motivated.

Keywords: *nursing management; organizational commitment; organizational characteristics; retention.*

INTRODUCTION

To deliver better healthcare service to patients, hospitals must take up measures to solve the following two important issues: 1) how to retain the currently employed nurses and 2) how to get better work

performance from nurses.

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Three components of organizational commitment has been associated with a number of positive outcomes, for example, a highly committed staff has a) lower intention to leave the organization¹⁻² b) a lower absenteeism rate, and c) a better job performance and quality of work.²⁻³ Researchers have also found that the poor job performance of nurses can be attributed to a lack of organizational commitment.⁴⁻⁶

Considering these previous outcomes as the baselines, the purpose of this study is to identify relationships between the three components of organizational commitment of the nurses and various organizational characteristics of the hospitals in the western and the eastern region of Nepal, where the nurses are currently employed.

METHODS

1) Sample (Data Collection)

A request letter explaining our research objectives was sent to nine hospitals for data collection. The hospitals, registered under the Department of Health Science, were randomly selected from two development regions. Out of the nine hospitals, four (one from the eastern region and three from the western region) agreed to cooperate. The head nurse of each of these hospitals was requested to distribute the questionnaire to the nurses employed by the hospital. Altogether 310 questionnaires were distributed to nurses working at various hospitals; 240 nurses submitted the questionnaire and only 226 completed questioner were found valid for the analysis. The survey was conducted over a period of four months (between September and December, 2013).

2) Measurements

The questionnaire consists of three sections: a) Personal Characteristics b) Organizational Characteristics and c) Organizational Commitment.

a) Personal Characteristics

Each participant is asked to provide the following personal data: age in years, academic qualification (ANM; Staff Nurse; BN; B.Sc. Nursing; MN), marital status (married; unmarried), and nursing experience in years.

b) Organizational Characteristics

This section contains questions regarding the following organizational characteristics: number of beds in hospital, number of nurses in hospital, number of night duties in per week. Data about "salary satisfaction",

and "training satisfaction" is derived from the following single surveyed items: "Are you satisfied with your salary", "Are you satisfied with the training program organized by the organization?" The responses are measured in 4 point Likert scale ranging from 1 (strongly disagree) to 4 (strongly agree). Nurses' consideration about support from seniors are also assessed by a single item, "Does your senior (boss) support you?" The responses are made on 4 point Likert scale ranging between 1 (never) and 4 (always).

c) Organizational Commitment

Organizational scale by Allen and Mayer, 1993⁷ is used to measure the organizational commitment. Each scale consists of three subscales: affective, continuance and normative. Each subscale contains six items. Affective commitment consists of items such as "I would be very happy to spend the rest of my career with this organization". Continuance commitment contains items such as "right now staying with my organization is a matter of necessity as much as desire". Normative commitment consists of items such as "I owe a great deal to my organization". All items are measured by using five point scale ranging from 1 (strongly disagree) to 5 (strongly agree).

3) Ethical Considerations

The study was approved by the research ethics committee of Okayama Prefectural University and the ethics committee of each hospital involved in the study. Participating nurses were informed by a letter about the voluntary nature of participation, withdrawal option, and confidentiality in data handling. They were not required to sign a consent form. However, the returning of the questionnaire was considered an implied consent.

1. Data Analysis

First descriptive statistics such as total scores means and standard deviations were calculated for each variable. Multiple linear regression analyses were then carried out with the personal characteristics and organizational characteristic as the independent variable and organizational affective commitment, organizational continuance commitment and organizational normative commitment as dependent variables. All analysis were conducted using the SPSS version 22.0 program and the level of significance for each test was set at 5% ($p < 0.05$).

RESULTS

1) Descriptive Analysis

The questionnaires were distributed among 310 nurses working at various hospitals; 240 (77.41%) participants completed the questionnaire and only 226 were found valid for the analysis. The participants had a mean age of 27.4 years with a standard deviation of 8.1 years. Taking the education levels of the participants, it was found that 22.1% were ANM, 65% were PCL graduates, and 12.8% were BN/B.Sc./MN graduates. The mean value of participants' nursing experience was 77.2 ± 88.6 months. As for the marital status, 50.4% of nurses were married whereas 48.2% were single. The mean scores of the nurses for Affective Commitment, Continuance Commitment, and Normative Commitment were 3.7 ± 0.6 , 3.3 ± 0.6 , and 3.5 ± 0.5 respectively (Table 1).

2) Regression Analysis

Initially, all hypothesized predictor variables were entered into the regression model. However, since there was a statistically strong significant correlations ($r=0.939$, $p<0.01$) between the two variables "age" and "nursing experience", only the latter was used for the analysis. It should not affect the final outcome whatsoever because both of the variables are similar in nature.

For each depended variable affective, continuance and normative commitment, multiple regression analysis was performed by taking personal characteristics and organizational characteristics as independent variables. The level of significance for each test was set at $p<0.05$ (Table 2). All independent variables were found significantly related to each of the two dependent variables; affective commitment and normative commitment (R^2 adjusted = 0.24, $p<0.01$ and R^2 adjusted = 0.05, $p<0.01$ respectively). However, they were not significantly related to the continuance commitment. The result shows that personal characteristic and organizational characteristic were most strongly related to affective commitment.

While two of the personal characteristics, qualification ($\beta=0.172$, $p<0.05$) and nursing experience ($\beta=0.182$, $p<0.05$) turned out positive and significant to affective commitment, another two variables of organizational characteristics, hospital bed number ($\beta=-0.164$, $p<0.05$) and night duty ($\beta=-0.164$, $p<0.05$) were negative and significant to affective commitment. However, support from boss ($\beta=0.138$, $p<0.05$) and satisfaction with training ($\beta=0.301$, $p<0.05$) were found to be positive and significant with affective commitment. On the other hand, satisfaction with training ($\beta=0.191$, $p<0.05$) was also positive and significant with normative commitment.

	Range	Mean	Sd	(%)
Age		27.4	8.1	71.7
Nursing experience/M		77.2	88.6	
Qualification				
ANM				50 (22.1)
PCL				147 (65.0)
BN/B.sc/M.Sc				29 (12.8)
Hospital bed number/N		305.4	212.4	
Night shift/W	1-4	2.0	1.0	
Salary satisfaction	1-4	2.2	0.7	
Support from boss	1-4	3.3	0.7	
Satisfy with training	1-4	2.5	0.7	
Affective Commitment	1-5	3.7	0.6	
Continuance Commitment	1-5	3.3	0.5	
Normative Commitment	1-5	3.5	0.5	

	Affective commitment		Normative commitment	
	β	P	β	P
Qualification	0.172	**	0.124	ns
Nursing experience	0.182	**	0.126	ns
Hospital Bed	-0.164	*	-0.065	ns
Night Duty	-0.154	*	-0.01	ns
Salary satisfaction	0.001	ns	-0.044	ns
Support form boss	0.138	*	0.116	ns
Satisfy with training	0.301	**	0.191	ns
F	11.59		2.90	**
R	0.27		0.09	
Adjusted R	0.24		0.05	

** $p<.01$, * $p<.05$

DISCUSSION

Several researchers argue that an organization is a social system and the importance of 'human resources' should be well-understood if the organization is to be run effectively and efficiently. It is hard to conceive the success of an organization without considering enormous efforts and commitments of their employees. Employees, who have higher commitment to the organization, are likely to possess greater willingness to get involved in organizational activities and stay with the employing organization.^{1, 8-9}

Meyer and Allen (1991)¹⁰ argued that the three distinctive components of organizational commitment namely 1) affective, 2) continuance, and 3) normative

have different influences on work-related behaviours such as attendance, absenteeism, and performances of the required duties. According to Meyer and Allen, nurses who have a strong affective commitment feel emotionally attached to the hospital and possess a greater motivation to contribute meaningfully to the organization than the ones with weaker affective commitment. On the other hand, nurses who are linked to the organization based on continuance commitment, stay in the hospital not because of emotional attachment, but because of the cost associated with leaving the organization. As for normative commitment, the third component of the organizational commitment, nurses with strong normative commitment are connected to the organization due to the feelings of obligation and duty.

Furthermore, several researchers have applied organizational commitment model to find out the predictors of organizational commitments. Several nursing studies reveal that organizational characteristics such as organizational culture, support, salary, training and education are important factors which strengthen nurses' commitment to their hospitals.¹¹⁻¹⁶ Regarding personal characteristics, factors such as age, qualification, nursing experience, marital status are the ones which are found to be most significant predictors in industrial sectors as well as in nursing professions.^{2, 5, 15-16}

Based on the outcomes of our study, this section discusses several issues regarding the relationships between the three components of organizational commitment and various organizational characteristics of the hospitals considered in our study. The fundamental idea is to discover the significant factors that will be helpful in predicting nurses' work performance.

1) Descriptive analysis

The study revealed that the mean age of the respondents was 27.5 years. Moreover, 71.7% of the nurses were below 30 years, which is much higher than the national figure 29.6% as stated in the HRH Nepal country profile. One of the reasons for this high number of young nurses working at these hospitals can be attributed to a better work environment since the surveyed hospitals are recently built, technically advanced, and central ones in these regions. Furthermore, 65% of the participating nurses were graduated PCL. Since there are no official figures available for the PCL graduates in the country as a whole, a direct comparison is not possible. Accurate statistical data regarding all the nurses in the nation are necessary for further research in the future.

2) Regression analysis among affective and normative commitment and organizational characteristics

According to the previous research, nurses who are committed to their hospitals are found to be highly likely to remain in the employing organization. Therefore, this study aims to identify the factors that affect the three components of the organizational commitment. For each depended variable affective, continuance and normative commitment, multiple regression analysis was performed by taking personal characteristics and organizational characteristics as independent variables. All independent variables were found significantly related to each of the two dependent variables; affective commitment and normative commitment. Although the explanation rate of normative commitment to the organizational characteristic was very low in this study, the result of the study is congruent with the previous findings.^{2,10} However, they were not significantly related to the continuance commitment.

Previous research outcomes suggest that employees with strong affective commitment feel emotionally attached to the organization. Thus it is expected that employees with strong affective commitment have low rate of absent from work and are motivated to have better job performance.^{2, 10, 17-23} In this regard, our study also has the same result and therefore supports the previous findings. Moreover, to strengthen the affective commitment of the nurses in the hospital, it is important to understand how commitments are developed in the first place. The results also showed that personal characteristics and organizational characteristics were most strongly related to affective commitment.

Two of the personal characteristics, qualification and nursing experience turned out positive and significant to affective commitment. In addition, two organizational qualifications "support from boss" and "satisfaction with training" were found to be positive and significant with affective commitment. Furthermore, "satisfaction with training" was also positive and significant with normative commitment.

The variable "years of nursing experience" has emerged as one of the predictors of affective commitment. The result is similar to the ones published in the previous reports.^{17, 24-26} The positive relationship between "years of experience" and organizational commitment might be due to the fact that a long working period in an organization naturally builds up a strong emotional attachment to that organization. However, further research is necessary to find out the casual relationship between "years of experience" and affective commitment since the results in this study did not identify it.

Qualification is another variable that has become apparent to be positive and significant with affective commitment. Nevertheless this result disagrees with

the previous findings which suggest employees with higher level of education have rather lower level of commitment. It is because highly qualified employees either have higher expectations from the organization or have greater opportunities for alternative jobs.²⁷ The result of the study suggests that, having an opportunity to work in the technically advanced hospitals is important for nurses to enhance their job related performances, which may ultimately build up a strong affective commitment to the employee organization.

Yet another equally important factor that may provide nurses a feeling of attachment to the organization is the support from the supervising boss (nurse leader in this case). Nurses who were satisfied with their boss were highly committed to their organizations. This result was congruent with the previous study which showed that a nurse leader has a key role not only in providing direct support and advice to ward staff, but also in acting as an advocate for staff in discussions with the upper management.²⁸⁻²⁹ Contribution of a supportive nurse leader is one of the key factors in developing affective commitment of the nurses.

A significant relationship is also found between the affective commitment and the variable "training program". Several studies have revealed that the affective commitment of staff is intensified by training programs provided by the organization.³⁰⁻³² It is because provision of such programs make the organization appear supportive and dependable, which may result

in an increase in the organizational commitment. Among three components of commitments, our results showed that normative commitment was also significant with the variable "training program". Since normative commitment reflects an individual's feelings of obligation to remain in the organization¹⁰, the concept of providing training programs could be a good investment for developing organizational commitment in the long run.

Retaining nurses should be one of the most important policies of a hospital management. Organizational characteristics such as 1) salary, 2) support from seniors, and 3) training provided by the hospital, play important roles in this process. However salary was not a significant predictor of organizational commitment in this study. As the participant of this study were employed by the central hospitals of each region, which have good working environments, financial reward may be less important than organizational support.

CONCLUSIONS

The outcomes of our study suggest that among the three components of organizational commitment, affective comment is the one which is most strongly related to organizational characteristics and personal characteristics. Our study has revealed that two important factors that are essential for strengthening affective commitment of the nurses are 1) support from boss and 2) training program.

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