

Psychological Empowerment in Hospital Administrative Staff Predicts their Organizational Commitment

Ali Kebriaei^{1*}, Meysam Rakhshaninejad², Zahra Afshari³, Mohamadreza Mohseni²

¹ Ali Kebriaei, Department of Public Health, Zahedan University of Medical Sciences, Zahedan, Iran ² Meysam Rakhshaninejad, School of Management, Islamic Azad University-North Tehran Branch, Tehran, Iran ³ Zahra Afshari, Department of Counseling, Zabol University of Medical Sciences, Zabol, Iran

Abstract

Background and Objectives: Quality services delivery in the health settings is contingent on hospital administrative staff organizational commitment. Inspired by previous research indicating the prominent role of psychological empowerment in organizational commitment, this study aimed to explore the relationship between the two variables in hospital administrative staff.

Methods: A random sample of 172 administrative staff in Khatam-ol-Anbia Hospital at Zahedan city, situated in South-Eastern Iran, was selected. Mishra and Spreitzer's scale was used to measure psychological empowerment, which comprises 15 items grouped into five dimensions, including Meaningfulness, Competence, Self-determination, Impact, and Confidence. Organizational commitment was measured, using a short version of the Meyer and Allen's scale. The participants responded anonymously to the items of the two questionnaires. Correlations analysis, t-test, and simple and multiple regressions were used to analyze the data.

Findings: Significant positive correlations were found between psychological empowerment and its dimensions as perceived by hospital administrative staff and their perceived organizational commitment. Psychological empowerment was found to be a significant predictor of organizational commitment ($\beta = 0.724$, $P < 0.001$). In addition, among all dimensions of psychological empowerment, Impact ($\beta = 0.474$, $P < 0.001$) and Self-determination ($\beta = 0.301$, $P = 0.001$) significantly predicted the organizational commitment, together explaining 51.9% of the variance in the latter variable.

Conclusions: Our results extend the established relationship between psychological empowerment and organizational commitment to the hospital administrative staff. In particular, the significant influence of Impact and Self-determination on organizational commitment implies that administrative staff's organizational commitment will increase if they are given the adequate autonomy to make decision about the work processes. Psychological empowerment can only partially explain organizational commitment variance in hospital administrative staff suggesting existence of other influencing factor remaining to be explored. The fact that Impact shows a stronger effect on organizational commitment supports the notion that the extent to which administrative employees feel a sense of influence on the work processes and outcomes would be the most important factor affecting their organizational commitment. Our findings can help hospital administrators in developing strategies aimed at promoting their organizational commitment via psychological empowerment.

Keywords: Psychological Empowerment, Organizational Commitment, Hospital Administrative Staff, Hospital Management, Hospital Performance, Healthcare Services Delivery, Healthcare Workers, Human Resources

Background and Objectives

Human resources is a determinant of the survival of organizations in current competitive environment and a key factor for achieving high organizational performance [1]. In many organizations, employees often complain about

their feeling of being isolated, undervalued, dehumanized, and exploited [2]. One of the most useful approaches to improve employees' productivity and performance is the employee empowerment [3, 4].

Strategies such as elimination of the organizational bureaucracy, developing dynamic work groups, and involving employees in decision-making process have frequently been suggested to improve organizational performance [1]. However, to successfully implement such strategies, employees should already have been

*Corresponding author: Ali Kebriaei, Department of Public Health, Zahedan University of Medical Sciences, Zahedan, Iran, Tel/Fax: +98 361 5550111, Email: kebria_noosh@yahoo.com

adequately empowered [5]. In recent decades, more than 70% of organizations have adopted some kind of empowerment initiative in their workforce [6].

Psychological Empowerment (PE) refers to an employee's belief about their role in relation to the organization and their feeling a sense of control in relation to their work role [7-9]. This construct represents an employee's feelings of meaningfulness, competence, self-determination, confidence, and impact [7]. From a psychological perspective, empowerment is considered as an organic process, through which the psychological states of the employee produce a perception of being empowered and having control on the work [10]. In another word, PE emphasizes on the notion that it is the reactions of an employee to the conditions of the work context, rather than the conditions themselves that influence the employee's organizational behavior [11]. According to the literature, stronger motivation [8, 12], higher job satisfaction [12-14], greater effectiveness [9, 15], lower rate of turnover [8, 12], organizational citizenship behavior [16], and organizational commitment [4, 14, 17, 18] are among the possible outcomes of employee empowerment.

On the other hand, Organizational Commitment (OC) is defined as a psychological state that influences the willing and decision of an employee to continue working for the organization [19]. OC is considered as a key determinant of organizational performance [20, 21], controllable absenteeism [22], and organizational citizenship behavior [23]. The importance of OC for achieving organizational goals has led the employee commitment to remain as an active study area and as one of the most exciting topics for both executives and researchers [24].

Despite the numerous studies on the relationship between PE and OC in various kinds of organization, the appeal for higher organizational performance, especially in the limited resources health systems, warrant further research. In particular, in the hospitals, where healthcare workers are often exposed to high job-stress, heavy workload, and other factors contributing to job dissatisfaction, giving due emphasis to OC is crucial to achieving a high hospital organizational performance [25].

Studies show provision of quality services in the hospitals is contingent on effectively addressing the administrative staff [26]. Nevertheless, research into the factors influencing administrative staff organizational commitment in the healthcare domain is limited. Inspired by previous research indicating the prominent role of PE in OC promotion, this study aimed to examine the extent to which the two constructs are correlated in hospital administrative staff, and how strongly the perceived OC in these staff could be predicted by its perceived PE.

Methods

Study Design, Setting, and Sample

This cross sectional study was carried out in 2013. A random sample was selected among 131 administrative staff in Khatam-ol-Anbia Hospital of Zahedan city, the Center of Sistan and Baluchestan Province, situated in South Eastern Iran.

Ethics

An approval of the Ethical Committee of the Zahedan University of Medical Sciences was obtained for conducting the study. The informed consents of the target participants were obtained, and the confidentiality of the responses was guaranteed by asking the respondents to complete the questionnaires anonymously.

Measurement Tool

Psychological Empowerment

For measuring PE, the popular scale of Mishra and Spreitzer [7] was used. The questionnaire comprises 15 items grouped into five PE dimensions, including Meaningfulness, Competence, Self-determination, Impact, and Confidence. Meaningfulness refers to the value of a work objective, judged in connection with an individual's own ideals and standards. Competence (self-efficacy) refers to an individual's belief in their capability to perform well the assigned jobs. Self-determination (selection) is associated with an individual's feeling of having an option in starting and regulating the work procedures. Impact reflects an individual's feeling of having influence on the outcomes of the assignments. Finally, Confidence refers to an individual's sense of being fairly behaved [7].

Organizational Commitment

For measuring OC, a short version of the Meyer and Allen's organizational commitment questionnaire (22) was used.

Scale

The items in both questionnaires were of 7-point Likert-type ranging from 1 (strongly disagree) to 7 (strongly agree). The total score ranges from 15 to 105 for PE and from 5 to 35 for OC.

Validity and Reliability

The questionnaires were translated into Persian to be used in an Iranian context. Three experts in the field

Table 1 Descriptive statistics of the perceived PE and its dimensions and OC, and the results of t-test for comparison of the variables with the average values

Variables	Min	Max	Mean	SD	t	Significance
Psychological Empowerment (PE)	27	102	74.79	21.49	5.269	< 0.001
Meaning	3	21	15.83	5.15	8.180	< 0.001
Competence	3	21	17.54	4.16	14.645	< 0.001
Self-determination	3	21	14.46	5.76	4.699	< 0.001
Impact	3	21	13.66	5.26	3.471	< 0.001
Confidence	3	21	13.30	6.09	2.343	< 0.05
Organizational Commitment (OC)	5	35	23.96	8.59	5.067	< 0.001

inspected the Persian version of questionnaire to ascertain its consensual validity and the wording of statements was also simplified. To investigate the content validity of the survey tools, a pilot study was conducted by enrolling 30 respondents, who were excluded from the main study, and final adjustment was made according to their comments. The internal consistency reliability of the questionnaires was measured by calculating Cronbach's alpha. A reliability of 0.931 for PE (meaning, 0.853, competence, 0.781, self-determination, 0.903, confidence, 0.901 and impact, 0.821), and 0.864 for OC was observed.

Data Analysis

Descriptive statistics (mean and standard deviation) were used for summarizing the data. The data were analyzed using one-sample t-test, Pearson's correlation coefficient, and simple and multiple regression analyses. One-sample t-test was used to compare

the sample mean with a supposed mean. Pearson's correlation coefficient was calculated to measure the strength of relationships between PE and its five dimensions and OC. PE and its dimensions were considered as independent variables, and OC was considered as the dependent variable. Simple linear regression was conducted to examine the extent to which PE can predict the OC. Stepwise multiple regression analysis was used to determine the extent to which PE would be affected by each dimension of OC. $P < 0.05$ was considered as statistically significant. All statistical analyses were carried out using SPSS Version 16 Software.

Results

Demographic Data

Out of 131 distributed questionnaires, 121 valid questionnaires were returned (response rate = 92.4%). Of the total

Table 2 Correlations of psychological empowerment and its dimensions with organizational commitment

	PE ^a	ME ^b	CO ^c	SD ^d	IM ^e	CN ^f	OC ^g
PE	1						
ME	0.814**	1					
CO	0.714**	0.562**	1				
SD	0.841**	0.584**	0.559**	1			
IM	0.865**	0.595**	0.481**	0.716**	1		
CN	0.809**	0.577*	0.415**	0.526**	0.677**	1	
OC	0.724**	0.544**	0.478**	0.640**	0.689**	0.567**	1

^a Psychological Empowerment ^b Meaningfulness ^c Competence ^d Self-determination ^e Impact ^f Confidence ^g Organizational Commitment

** Significant at 0.01 level (2-tailed), * Significant at 0.05 level (2-tailed)

respondents, 62.8% were male, 78.5% were married, and 57% held a high school diploma. The mean age of the respondents was 32.947.6 years.

Survey Findings

Table 1 shows the mean and standard deviation of the scores of OC, PE, and PE's five dimensions. One-sample t-test revealed that these score means are significantly higher than the average. While Competence gained the highest score mean, the lowest score mean was received by Confidence (Table 1).

Table 2 represents the correlations between OC and PE and its dimension. As seen, a significant positive correlation exists between PE and its dimensions, and OC. Whereas Impact shows the highest correlation with OC, and the lowest corresponding correlation is seen for Competence.

To further evaluate these preliminary findings, simple and stepwise multiple regressions were applied between dependent and independent variables. The results of the simple regression analysis indicated that PE is a significant predictor of OC ($\beta = 0.724$, $F = 131.08$, $P < 0.001$).

Table 3 presents the results of a stepwise multiple regression analysis. As seen, two dimensions of PE, including Impact and Self-determination significantly predict the OC, and together explain 51.9% of the variance in the latter construct. Meanwhile, Impact shows a stronger influence on the OC ($\beta = 0.474$, $P < 0.001$) as compared with Self-determination ($\beta = 0.301$, $P = 0.001$).

Discussion

The main purpose of this study was to examine the impact of psychological empowerment and its dimensions on organizational commitment in the hospital administrative staff. Consistent with the findings of the earlier studies [13, 27, 28], PE and all its dimensions showed significant positive relationships with OC (Table 2). It can, hence, be concluded that the more psychologically empowered the employees are, the more committed to the organization will they be.

Similar to the earlier researches [27, 29, 30], our study showed that the OC can be predicted by PE. However, congruent with other studies [24, 31, 28, 32] that found only two or three PE dimensions predicting OC, in our study, only Impact and Self-determination significantly predicted the latter variable. In another word, the respondents have stated that their organizational commitment will increase if they can influence strategic, administrative or operating outcomes

Table 3 The stepwise multiple regressions of psychological empowerment dimensions and organizational commitment

	Organizational Commitment		
	β	t	Significance
Impact	0.474	5.18	.000
Self-determination	0.301	3.29	.001

at work, especially if they are given the autonomy to make decision about the work processes. This finding can guide hospital administrators to develop innovative strategies aimed at empowering the administrative staff, and thereby promoting OC in them, which in turn would result in improved healthcare services delivery and overall hospital performance [20-23].

On the other hand, the fact that, Impact and Self-determination together explained only around half of the OC variance ($F = 63.708$, $P < 0.001$), suggests the existence of unexplored PE dimensions or some factor(s) other than PE, with the potential to influence OC, whose identification is waiting for further research.

Among the two PE dimensions with a significant influence on OC, the Impact showed a stronger effect. While this observation is consistent with the work of Moughali *et al.* [17], it provide further support for the notion that the extent to which employees feel a sense of influence on the outcomes of the work processes would be the most important factor affecting their organizational commitment.

In line with some other studies [26, 31, 33, 34] and inconsistent with others, in our study, the employees' PE was significantly higher than the average. Yet there is room for improvements in Confidence, Impact and Self-determination dimensions. Given the fact that empowerment is a cognitive quality influenced by changes in the work environment rather than a basic personality trait [12], it could be increasingly improved by CEOs through developing an organizational climate appreciating the managerial insights of the administrative staff in carrying out the work processes, and support their control on their assigned tasks. In turn, such a climate would contribute to fostering organizational commitment.

Study Limitations

The study was a questionnaire-based survey inheriting the limitations of the studies of the kind. The limited sample size and the fact that the survey data were collected from a single hospital require caution in generalization of the results.

Conclusions

This study chiefly aimed to investigating the influence of psychological empowerment on organizational commitment among hospital administrative employees. Our results extend the established relationship between PE and OC to the hospital administrative staff, and introduce psychological empowerment as a significant predictor of administrative employee organizational commitment. In particular, the significant influence of Impact and Self-determination on OC implies that administrative staff's organizational commitment will increase if they can influence strategic, administrative, and operating outcomes of the work, especially if they are given the autonomy to make decision about the work processes. On the other hand, the fact that these two significant predictors of OC explained only half of the OC variance indicates that PE can at best partially influence the OC, calling for further research to identify and explore the nature of other factors contributing to hospital administrative staff organizational commitment.

Abbreviations

(PE): psychological empowerment; (OC) organizational commitment

Competing Interests

The authors declare no competing interests.

Author's Contributions

MR developed the original idea and contributed to the data collection. MM designed the study, developed the guideline to carry out the study, and analyzed the data. AK contributed to full development of the idea, and drafted and revised the manuscript. All authors read and approved the final manuscript.

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