



Exploring the Relationship between Perceived Interpersonal Treatment and Organizational Commitment of Health Workers in Selected Health Institutions in Uyo

Nkeiru Ijeoma¹ and Otu O. Essien¹

¹Department of Psychology, University of Uyo, Uyo,
Akwa Ibom State

Corresponding Author: Otu Okon Essien
Email: otuessien@uniuyo.edu.ng

Abstract

This study explores the relationship between interpersonal treatment and organizational commitment among Health Workers in Uyo. The participants in the study comprised 105 employees drawn from selected health institutions within Uyo in Akwa Ibom State. They included 75(71.4%) males and 30(28.6%) females. Their ages ranged between 30-50 years, with mean age of 40.04 (SD, 4.70). The study utilized random sampling and purposive sampling techniques to select the organizations and participants respectively. Two measurements were used: perception of fair interpersonal treatment scale and organizational commitment multidimensional scale. The study adopted a correlational design and Pearson Moment Correlational Coefficient served as appropriate statistics for analyses of the data. The study results showed a significant positive relationship between interpersonal treatment and organizational commitment, ($r=0.69$, $p<0.01$). This study findings will guide the managers and co-workers of health workers to develop positive and healthy relational climate in workplace to promote and maintain good organizational commitment.

Keywords: Perceived interpersonal treatment, organizational commitment

Introduction

Organizational commitment is an important variable for work organization to consider since it acts as predictor of organizational efficiency and effectiveness, and a number of studies have found relationship between organizational commitment, attitude and behaviour in workplace (Koch & Steers, 2014). As a salient construct in organizational research paradigm, Herrera and Heras Rosas (2021) espoused reasons for studying organizational commitment to be related to: employees and work in relationship with

psychological contract, employees' behaviours and performance effectiveness, and commitment as attitudes and behaviour in relationship to workplace emotions.

Organizational commitment is defined as a psychological attachment and resulting loyalty of employees to an organization based on the pride of being part of the organization and belief that their organizations value them (Kanter 2018). In the same vein, Fantuhun *et al.*, (2023) emphasized that organizational commitment described how much team members care about their place of work, stressing that engaged or committed employees are asset to a company. Furthermore, Fantohun *et al.*, (2023) opined that it is employees' commitment and dedication that act as "catalyst" in increasing organizational engagement.

Committed employees are valuable asset to the organization as they adopt a productive, constructive approach to boost growth and development of the organization (Kanter, 2018). Mowday, steers and Porter (1989) strongly believed that committed individual's attitude reflects one identification with the involvement in organization, also individual commitment to organization is characterized by three rated factors, which include strong belief in the organization's goals and values, willingness to exert effort on its behalf, and strong desire to maintain membership.

Meyer and Allen (1991), proposed a model of commitment which was developed to integrate numerous definitions of commitment that had proliferated in the literature. From this perspective, organizational commitment is conceptualized under three factors, and Klein and Park (2016) see this as undimensional view of organizational commitment based on feelings of attachment and loyalty to one's organization. The three-pronged model breaks down commitment into three components based on individual's rationale for staying in the organization. These include affective, normative and continuance commitment. In affective commitment, employee strongly identifies with the goals of the organization and desires to stay out of emotional attachments. Individuals high in affective commitment enjoy the organization and choose to stay because they want to (Allen, 2016). While normative commitment consists of feelings of obligation to remain at an organization. These feelings may be derived from many sources including, the feeling that the organization may have invested resources in training an individual, who then feels a "moral" obligation to put forth effort on the job and stay with the organization to "repay"

the “debt”. Thus, individual high in normative commitment stays at organization because he/she “ought to”.

For continuance commitment, individual feels the need to stay at the organization based on analysis of the possible costs and benefits incurred from leaving. Individual is committed to the organization because of perceived cost of losing organizational membership, the perceived cost also involves economic costs (such as pension accruals), social costs (friendship ties with co-workers) and Allen (2016) concluded that, individuals could feel they have no option and would be too costly to work somewhere else.

Organizational researcher and social psychologists view commitment differently. Organizational researcher emphasizes and study attitudinal commitment, focusing on how employees identify with the goals and values of the organization, while social psychologists study behavioural commitment, which focus on how a person’s behaviour serves to bind him to the organization. Interestingly, the two approaches based their assumptions on human interpersonal relationship and treatment as an important indicator for organizational commitment.

Interpersonal treatment refers to the way employees are treated in workplace by superiors (managers, supervisors) or fellow co-workers that leads to healthy or disruptive organizational behaviour (Holland & Baird, 1988). Studies have demonstrated that interpersonal treatment within groups leads to more cohesion, produce greater interaction among members, greater goal Attainment, greater compliance to organizational norms and greater satisfaction with the job and all these relate positively with organizational commitment. In the domain of organizational justice, Krectner and Kinicki (2014) opined that justice reflects the extent to which individuals perceive that they are fairly treated, with dignity and respect at workplace. Justice here incorporates the three components of organization justice: viz distributive – a perceived fairness of how resources and rewards are allocated, procedural justice – a perceived fairness of the processes and procedures used to make allocations and decision, and interactional justice which emphasize and relates to the “quality of the interpersonal treatment people receive when procedures are implemented.”

Similarly, Garg *et al.*, (2014) stressed that the prevailing perception of fair treatment in organization by individuals, positively affects the emotional well-being of the employees,

also high interpersonal treatment creates exclusiveness that produce same effect as social support, which is a prerequisite for organizational support and commitment; and high interpersonal treatment among employees in local work units is shown to have positive effect on commitment to the work units (Attia, 2014). People who experience fair treatment, display a variety of positive responses, such as higher commitment to the organization and institutions they belong (Korsgaard *et al.*, 1995); better job performance, more positive emotional feeling Weiss *et al.*, 1999), and increased positive effect and decreased negative effect.

On the other hand, Greenberg and Land, (2000) posited that individuals who experience unfair treatment in work are more likely to be apathetic towards the organization and may even start behaving in anti-social ways.

Literature paid little attention to the relationship between interpersonal treatment and organizational commitment of health workers in Akwa Ibom State. Therefore, it becomes pertinent to look at interpersonal treatment and the link with organizational commitment among this significant work organization – health sector in Akwa Ibom State. It is therefore hypothesized that there will be a positive relationship between interpersonal treatment and organizational commitment.

Method

The study employed descriptive and correlational research design, which explores the relationship between variables without controlling or manipulating any variable.

Participants

The study participants were 105 Uyo based health workers, selected among employees in University of Uyo Teaching Hospital (UUTH) 65(61.9%) and St. Luke's Hospital Uyo, 40(38.1%). They comprised 75 (71.4%) males and 30 (28.6%) females. The participants' age ranged from 30 to 50 years, with a mean of 40.4 years (SD 4.70). Majority of the participants were married 88 (84%) and 12 (16%) were either not married or divorced. The participants were classified under different educational statuses of high 86(81.9%) and low educational Attainment 19(18.1%). All the participants demonstrated strong understanding of the contents of the instruments and signified their consent to participate in the study.

Instruments

Two instruments were used: Perceived Fair interpersonal Treatment (Donovan et al., 1998) and organizational commitment multidimensional scale Callen *et al.*, 1993).

Perceived Interpersonal Treatment

Interpersonal treatment was measured in the study with the 18 items perceived fair interpersonal treatment scale (Donovan, Orsaow, & Milson, 1998). The 18-item scale is constructed in a 3-point Likert response pattern ranging from 1= No, 2 = 1 don't know, 3 = yes. The items on the scale include, a "employees are praised for good work", supervisors yell at employees", "coworkers help each other"; "co-workers argue with each other". The perceived fair treatment scale has two dimensions: the first for supervisor subscale which consists of 14 items (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13 and 14), while the second is coworker subscale which consists of 4 items (15, 16, 17, 18). Donovan *et al.*, (1998) offered reason for supervisor's subscale garnering more items on the premise that employees' perceptions of the supervisors treatment may be more critical than their perceptions of the overall fairness/treatment of the work environment. Donovan *et al.*, (1998) reported a reliability of the 18 items perceived fair interpersonal treatment scale of an alpha of 0.90.

A Crombach alpha of 0.90 was also reported on the supervisor subscale and an alpha of 0.74 for coworker subscale respectively. An alpha of 0.82 with split half of 0.74 were obtained for the supervisor subscale, while 0.76 with split-half reliability of 0.68 were obtained for coworker subscale in this study.

Organizational Commitment

Organizational commitment scale was measured in the study with organizational commitment multi-dimensional scale (Allen, Meyer, & Smith, (1993). This scale has three dimensions, namely, Affective (6items), normative (6items) and continuance commitment (6 items). The organizational multidimensional scale revised has 18 items measured in 7-point Likert formant ranging from strongly disagree to strongly agree. Allen *et al.*, (1993) reported a reliability of the 18 items organizational commitment scale of split half of 0.78. An alpha of 0.75 with a split-half of 0.66 were obtained in this study.

Data Analysis

Pearson Product Moment correlational statistics was employed for data analysis in this study. Specifically, this statistic makes it possible to find significant relationship that exists between two variables (the predictor and criterion variables).

Results

Table I: summary of means, standard deviations, and zero-order correlation matrix showing inter-correlations of study variables in exploring relationship between interpersonal treatment and organizational commitment among health workers in Uyo.

VARIABLES	GENDER	AGE	MS	EQ	POP	MEAN	SD
Gender	1					1.54	0.50
Age	-.22*	1				40.04	4.70
MS	-.22*	.26	1			1.92	0.34
EQ	-.13	-.19	-.10	1		4.36	0.93
PO	-.56**	.34*	.07	.30*	1	3.30	2.59
JT	.071	.25*	-.06	.17	1	4.39	0.96

Note: MS = Marital status, EQ = Educational Qualification; PO = Position/Designation; JT = Job tenure.* Correlation significant at the 0.05 level,**Correlation significant at the 0.01 level

Table I shows the standard deviation and a zero order correlation of the extent to which the demographic variables were related to one another. The results indicate that out of the six (6) variables examined, there was seven relatedness or interactions of variables. For instance, age was negatively linked to gender ($r = -.22$; $p < 0.05$, $r = .26$; $p < 0.05$) Then marital status correlated with gender and age ($r = -.22$; $p < 0.05$, $r = .26$; $p < 0.05$) respectively. In the same vein, position of the health workers showed correlations (inverse and positive) with gender, age and educational qualification ($r = -.56$; $p < 0.01$, $r = .54$; $p < 0.05$; $r = .40$; $p < 0.05$) respectively. Also, job tenure indicated a direct connection with age ($r = .25$; $p < 0.05$)

Test of Hypothesis

There will be a positive relationship between interpersonal treatment and organizational commitment.

Table 2: Summary of Correlation of interpersonal treatment and organizational commitment (n=105).

Variables	r(Pearson)	Sig.
Interpersonal treatment Organizational Commitment	0.69	0.01

In order to understand the direction and magnitude of the relationship between interpersonal treatment and organizational commitment, the Pearson Product Moment Correlation Coefficient was utilized. The results revealed a positive relationship between the study's variables of interest (Interpersonal treatment and organizational commitment), $r = 0.69$, $p < 0.01$ level of significance. This implies that the fairer interpersonal treatment experience by health workers, the more organizationally committed they are to their organization. Thus, fair interpersonal treatment of workers in their workplaces is an important construct to be taken seriously in relationship to organizational commitment.

Discussion

The major purpose of the present study was to determine the relationship between interpersonal treatment and organizational commitment of health workers in Uyo, Akwa Ibom State. From this study, the relationship of interpersonal treatment with organizational commitment was observed to be significantly positive. It means whenever health workers receive fair treatment in workplaces, they tend to have higher organizational commitment. The finding of this study is in accordance with Bankole (2023) whose study indicates that there is significant relationship between organizational commitment and work performance, also there is a positive significant relationship between interpersonal treatment and willingness to be committed. The finding is also consistent with Morrison (2005), who report that negative relationship in the workplace affects worker's organizational commitment, cohesion and job satisfaction; and more negative and hostile interpersonal treatment decreases employees' commitment. The

finding agrees with Leineweber *et al.*, (2020), who found that how interpersonal justice (a factor of interpersonal treatment) perceptions increase the risk of subsequent organizational turnover. Also, the finding amplifies the finding of Steiner (2020) who revealed that when employees perceive that they are treated fairly, positive consequences result from them and for their organizations. Thus, when individuals are treated fairly, with dignity, they seem to be more satisfied, evaluate their organization more favourably, get involve in more prosaically behaviours within the organization and be proud and emotional attached to the organization. But when treated unfairly, it results in negative consequences which includes negative attitude and poor assessment of their organization.

Implications of the Study

The findings of the current study suggest that interpersonal treatment at work place is a salient variable to consider when considering organizational commitment. Supervisor must develop a keen interest in ensuring that there is fair treatment for the employees. Managers and supervisors in organization should strengthen relationship and be made to be aware of how their relationship with subordinates of not handle fairly, can be detrimental to the organization. Training and retraining seminars should be organized periodically to emphasize the import of fair treatment of employees. Fair treatment should be based on any presumed similarity or creating in-group identification. It should rather be fairly equitable. If workers perceived fairness and equity from the management and co-workers, they will be committed to the organization and the organizational goals. The study found a positive significant relationship between interpersonal treatment and organizational commitment. The positive relationship between interpersonal treatment and organizational commitment highlights the importance of fair treatment in today's organization that has under diversified workforce and emphasize the need for interactional fairness among the key players – management, supervisors and workers.

References

- Allen, N. J. (2016). Commitment as a multidimensional construct. In J. P. Meyer (Ed.), *Handbook of employee commitment* (pp. 28-42). Edward Elgar Publishing.
- Allen, N. J., Meyer, J. P. and Smith, C. A. (1993). *Commitment in the workplace: Theory, Research and application*. Sage Publications.
- Attia, S. T. (2014). The relationship between organizational justice and quality performance among healthcare workers: a pilot study. *Science World Journal*, 45.
- Bankole, Q. A (2023). Organizational commitment and interpersonal relationships of Library personnel as determinants of work performance in Nigeria Universities. *Journal of Social and Behavioural Research*, 7(2), 75-84.
- Donovan, M. A., Dragow, F., and Muson, L. J. (1998). The perception of fair interpersonal treatment scale: Development and validation of a measure of interpersonal treatment in workplace. *The Journal of Applied Psychology*, 83(5), 683-692.
- Fantahun, B., Dellie, E. and Debie, A. (2023). Organizational commitment and associated factors among health professionals working in public hospitals of South Western Oroma, Ethiopia. *BMC Health services research*.
- Garg, P., Rastogi, R., and Paul, H. (2014). Does perception of justice effect psychological well-being of employees? *International Journal of Special System Science*, 6, 264-284.
- Greenberg J. and Lind, E. A. (2000). The pursuit of organizational justice: from conceptualization to implication to application: In C. L. Cooper and E. A. Locke (Eds.), *Industrial and Organization Psychology*, 43 (3).
- Herrera, J., and Heras Rosas, C. D. (2021). Organizational commitment in the company and its relationship with the psychological contract. *Journal of organizational psychology*, (2).
- Holland, J L., and Baird, L. L. (1988). An interpersonal competency scale. *Educational and psychological measurement* 28, 503-510.
- Kanter, R. M. (2018). Commitment and social organization: A study of commitment mechanisms in Utopian communities. *American socio-logical Review*, 33, 499-577.
- Klein, H. J., and Park, A. M. (2016). Commitment as a multidimensional construct. In J. P. Meyer (ED.) *Handbook of employee commitment* (pp. 15-27). Edward Elgar Publishing.
- Koch, J., and Steers, R. (2014). Job attachment, satisfaction and turnover among public sector employees. *Journal of vocational Behaviour* 12, 119-128.

-
- Kreitner, R. and Kinicki, A. 2004). *Organizational Behaviour* (6th ed). London. McGraw Hills Education.
- Leineweber, C., Peristera, P., Bernhard Oettel, C. and Eib C. (2020). Is interpersonal justice related to group and organizational turnover? *Social science and medicine*, 265.
- Morrison, R. L. (2005). Friendship at work, job type and needs: The impact of organizational outcomes. *Australian Journal of Psychology*, 34, 345-353.
- Mowday, R. T., Porter, L. W. and Steers, R. M. (1989). The measurement of organizations commitment. *Journal of Vocational Behaviour*, 14, 224-247.
- Steiner, D. D. (2020). Organizational justice. *Psychology in Oxford Research Encyclopedias*. <https://doi.org/10.1093>.
- Weiss, H., Suckow, K. and Cropanzane, R. S. (1999). Effects of justice conditions on discrete emotions. *Journal of Applied Psychology*, Do: 101.