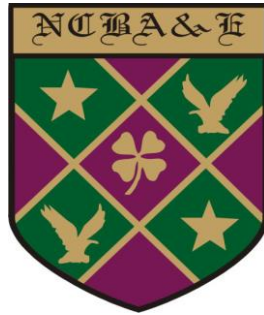


*National College of Business  
Administration and Economics  
Lahore*



**THE LINK BETWEEN PERCEIVED HIGH-  
PERFORMANCE HRM PRACTICES, EMPLOYEE  
ATTITUDES AND BEHAVIORS:  
A STUDY ON HEALTH-SECTOR OF PAKISTAN**

**BY**

*ANAM MASOOD*

**MASTER OF PHILOSOPHY  
IN  
BUSINESS ADMINISTRATION**

**NOVEMBER, 2016**

# **NATIONAL COLLEGE OF BUSINESS ADMINISTRATION AND ECONOMICS**

**THE LINK BETWEEN PERCEIVED HIGH-  
PERFORMANCE HRM PRACTICES, EMPLOYEE  
ATTITUDES AND BEHAVIORS:  
A STUDY ON HEALTH-SECTOR OF PAKISTAN**

**BY**

**ANAM MASOOD**

**A dissertation submitted to  
School of Business Administration**

**In Partial Fulfillment of the  
Requirements for the Degree of**

**MASTER OF PHILOSOPHY  
IN  
BUSINESS ADMINISTRATION**

**November, 2016**



*In the name of ALLAH,  
The Most Beneficial,  
The Most Merciful,*

**NATIONAL COLLEGE OF BUSINESS  
ADMINISTRATION AND ECONOMICS  
LAHORE**

**THE LINK BETWEEN PERCEIVED HIGH-  
PERFORMANCE HRM PRACTICES, EMPLOYEE  
ATTITUDES AND BEHAVIORS:  
A STUDY ON HEALTH-SECTOR OF PAKISTAN**

**BY  
ANAM MASOOD**

---

A dissertation submitted to School of Business Administration, in partial fulfillment of the requirements for the degree of

**MASTER OF PHILOSOPHY IN  
BUSINESS ADMINISTRATION**

---

**Dissertation Committee:**

\_\_\_\_\_  
**Chairman**

\_\_\_\_\_  
**Member**

\_\_\_\_\_  
**Member**

\_\_\_\_\_  
**Rector**

National College of Business  
Administration and Economics

# **DECLARATION**

It is to declare that this research work has not been submitted for obtaining similar degree from any other university/college.

**ANAM MASOOD**  
**November, 2016**

*Dedicated to  
My Parents*

*Masood Shuja  
&  
Abida Masood*

## **ACKNOWLEDGEMENT**

Thanks to Almighty Allah Whose unending blessings enabled me to accomplish this gigantic task. This dissertation could not have been completed without the time, effort, and support of a number of people. Therefore, I wish to acknowledge the contributions of all of them.

I am very grateful to my supervisor and teacher, Dr. Amman Ullah for his endless help, support and encouragement. His knowledge, wisdom, patience and availability are significant sources of my work's conceptual development and dissertation writing.

My father, Masood Shuja, for his constant support and encouragement. Simply, this work would not have been completed without him. My mother, Abida Masood, for taking over my responsibilities, my husband, Muhammad Faisal, for his sacrifice on time, patience and support for my household tasks. My sisters: Sobia, Sumbal and Zara, my brother, Moiz for their love and motivation.

Last but not the least, my son, Muhammad Hadi (Late) for being my strength and inspiration to complete this dissertation on time.

Thank you all...

## **RESEARCH COMPLETION CERTIFICATE**

Certified that the research work contained in this thesis entitled “**The Link between Perceived High-Performance HRM Practices, Employees Attitudes and Behaviors: A Study on Health-Sector of Pakistan**” has been carried out and completed by **Anam Masood** under my supervision during her **M.Phil. Business Administration** Programme.

*(Dr. Amman Ullah)*  
**Supervisor**

## SUMMARY

Health has become a major issue worldwide and there is lack of proper implementation of performance-oriented HRM practices in the hospitals throughout the world and particularly in developing countries. Studies in SHRM frequently emphasize the importance of perceived High-performing HRM practices by confirming positive impact of it on desired employee outcomes and negative impact of low-performing HRM practices on undesired outcomes. In addition to the direct impact of perceived high- performance HRM practices on employees' attitudes and behaviors, researchers call for intervening mechanism.

Therefore, in this study an attempt has been made to discuss link between employees' perceptions of high-performance HRM practices, one dimension of employees' job attitudes (affective commitment) and three behavioral outcomes (OCB, intent to remain and absenteeism). Based on social exchange theory, it further proposes affective commitment as mediating mechanism between HRM practices-outcomes relationship. Hence, we say that HRM practices and employee attitudes and job behaviors are interrelated variables.

To test the proposed hypotheses, the study utilizes probability technique to size sampling of 18 public and private hospitals of Punjab, Pakistan. The results are based on a questionnaire based survey. Survey is conducted in natural setting with minimal interference of researcher. The 400 sets of questionnaires were distributed from which 317 (response rate is 79%) useable sets were received.

Data is analyzed by using appropriate and recommended techniques in HR and OB, such as mean, standard deviation for study variables, descriptive analysis for demographic variables, correlation test for association and direction of association between our study variables. Cronbach's alpha has been performed for reliability analysis. OLS regression analysis and Sobel Mediator test was performed for the hypotheses testing.

Results showed significant relationship between perceived high-performance HRM practices, employees' attitudes and behaviors except absenteeism. Further, mediating role affective commitment is also supported where it mediates the relationship between employees' perception of high-performance HRM practices and OCB. Relationship between high-performing HRM practices and intent to remain with the organization is also mediated by affective commitment while the results showed non-significant relationship with absenteeism. The study discusses the results and provides a number of theoretical and practical implications along with limitations and future research directions.

## LIST OF TABLES

Table No.	Title	Page
4.1	Details of Frequency Distribution and Percentages of the Age Category	34
4.2	List of the Approached Hospitals	36
4.3	Means and Standard Deviations of Study Variables	38
4.4	Reliability Analysis	39
4.5	The Correlation Matrix	41
4.6	Rotated Component Matrix (High-Performance HRM Practices)	43
4.7	Rotated Component Matrix (Affective Commitment)	44
4.8	Rotated Component Matrix (Organization Citizenship Behavior)	45
4.9	Rotated Component Matrix (Intent to Remain)	46
4.10	Absenteeism	47
4.11	Relationship of HRM Practices with OCB, Intent to remain and Absenteeism	48
4.12	Relationship of HRM Practices with Affective Commitment	51
4.13	Relationship of Affective Commitment with OCB, Intent to remain and Absenteeism	53
4.14	Sobel Test Calculation for the Test of Mediation (Staffing Practices, Affective Commitment, Courtesy)	54
4.15	Sobel Test Calculation for the Test of Mediation (Staffing Practices, Affective Commitment, Expanded Efforts)	55
4.16	Sobel Test Calculation for the Test of Mediation (Other Formal HRM Practices, Affective Commitment, Courtesy)	56

Table No.	Title	Page
4.17	Sobel Test Calculation for the Test of Mediation (Other formal HRM Practices, Affective Commitment, Expanded Efforts)	58
4.18	Sobel Test Calculation for the Test of Mediation (Staffing Practices, Affective Commitment, Intent to Remain)	59
4.19	Sobel Test Calculation for the Test of Mediation (Other Formal HRM Practices, Affective Commitment, Intent to Remain)	60
4.20	Sobel Test Calculation for the Test of Mediation (Staffing Practices, Affective Commitment, Absenteeism)	62
4.21	Sobel Test Calculation for the Test of Mediation (Other Formal HRM Practices, Affective Commitment, Absenteeism)	63
4.22	Summary of Hypotheses Testing	64

## LIST OF FIGURES

Figure No.	Title	Page
2.1	The Theoretical Framework	21
3.1	The Research Process	25
4.1	The Path Diagram: (Staffing Practices, Affective Commitment, Courtesy)	55
4.2	The Path Diagram: (Staffing Practices, Affective Commitment, Expanded Efforts)	56
4.3	The Path Diagram: (Other Formal HRM Practices, Affective Commitment, Courtesy)	57
4.4	The Path Diagram: (Other formal HRM Practices, Affective Commitment, Expanded Efforts)	58
4.5	The Path Diagram: (Staffing Practices, Affective Commitment, Intent to Remain)	60
4.6	The Path Diagram: (Other Formal HRM Practices, Affective Commitment, Intent to Remain)	61
4.7	The Path Diagram: (Staffing Practices, Affective Commitment, Absenteeism)	62
4.8	The Path Diagram: (Other Formal HRM Practices, Affective Commitment, Absenteeism)	65

# TABLE OF CONTENTS

DECLARATION.....	v
DEDICATION .....	vi
ACKNOWLEDGEMENT.....	vii
SUMMARY .....	ix
LIST OF TABLES .....	x
LIST OF FIGURES.....	xii
<b>CHAPTER 1: INTRODUCTION .....</b>	<b>1</b>
1.1 Background of The Study.....	1
1.2 Statement of the Topic .....	3
1.3 Research Questions .....	4
1.4 Objectives of the Study .....	5
1.5 Research Hypotheses.....	5
1.6 Research Significance and Likely Contribution.....	6
1.7 Research Methodology.....	7
1.8 Data Analysis .....	7
1.9 Findings .....	8
<b>CHAPTER 2: LITERATURE REVIEW AND DEVELOPMENT OF HYPOTHESES .....</b>	<b>9</b>
2.1 Relationship Between High-Performance HRM Practices and Its Proximal Outcomes .....	9
2.2 High-Performance HRM Practices and Affective Commitment .....	13
2.3 The Role of Affective Commitment as a mediating Variable.....	15
2.3.1 Organization Citizenship Behavior (OCB).....	17
2.3.2 Intent to Remain with the Organization .....	17
2.3.3 Absenteeism.....	18
2.4 Theories underpinning This Research.....	19
2.5 The Theoretical Framework .....	20
<b>CHAPTER 3: RESEARCH METHODOLOGY .....</b>	<b>23</b>
3.1 Research Paradigm .....	23
3.2 Study Design .....	24
3.3 The Research Process .....	24
3.4 Population and Sample .....	26
3.4.1 Targeted Population.....	26
3.4.2 Sampling Design.....	26
3.4.3 The Actual Sample .....	26
3.5 Data Collection Techniques .....	26
3.5.1 Instrument.....	26
3.5.2 Administration Procedure.....	27

3.6	Measurement of Variables.....	27
3.6.1	Employees' Perception of High-Performance HRM Practice.....	27
3.6.2	Affective Commitment .....	28
3.6.3	Organizational Citizenship Behavior.....	28
3.6.4	Intent to Remain with the Organization .....	29
3.6.5	Absenteeism.....	29
3.7	Data Analysis Techniques .....	29
3.7.1	Reliability of Scales (Cronbach Alpha).....	30
3.7.2	Correlation Test .....	31
3.7.3	Factor Analysis .....	31
3.7.4	OLS Regression Analysis and Sobel Mediator Test .....	31
3.8	Conclusion of the Chapter.....	32
<b>CHAPTER 4: DATA ANALYSIS AND INTERPRETATION .....</b>		<b>33</b>
4.1	Respondents Characteristics.....	33
4.2	Mean and Standard Deviation of the Study Variables .....	36
4.3	Reliability Analysis .....	39
4.4	Correlations Matrix .....	40
4.5	Factor Analysis.....	42
4.5.1	High-performance HRM Practices Perceptions .....	42
4.5.2	Affective Commitment .....	44
4.5.3	Organization Citizenship Behavior (OCB).....	45
4.5.4	Intent to Remain .....	46
4.5.5	Absenteeism.....	46
4.6	Hypotheses Testing with OLS Regression Analysis.....	47
4.6.1	Relationship between Perceived High-Performance HRM Practices and Organization Citizenship Behavior.....	47
4.6.2	Relationship between Perceived High-Performance HRM Practices and Intent to Remain with the Organization.....	49
4.6.3	Relationship between Perceived High-Performance HRM Practices and Absenteeism.....	50
4.6.4	Relationship between Perceived High-Performance HRM Practices and Affective Commitment. ....	50
4.6.5	Relationship between Affective Commitment and Organization Citizenship Behavior (OCB).....	51
4.6.6	Relationship between Affective Commitment, Intent to remain and Absenteeism.....	52
4.7	Hypotheses Testing with Sobel Mediator Test .....	53
4.7.1	The Mediating Effect of Affective Commitment on the Relationship between High-Performance HRM Practices and OCB .....	54
4.7.2	The Mediating Effect of Affective Commitment on the Relationship between High-Performance HRM Practices and Intent to Remain.....	59
4.7.3	The Mediating Effect of Affective Commitment on the Relationship between High-Performance HRM Practices and Absenteeism.....	61
4.8	Summary of the Results .....	64

<b>CHAPTER 5: DISCUSSION AND CONCLUSION</b> .....	66
5.1 Discussion on Results.....	66
5.2 Research Implications .....	70
5.2.1 Theoretical Implications .....	70
5.2.2 Practical Implications .....	71
5.3 Limitations and Future Research Directions .....	72
5.4 Conclusion.....	73
REFERENCES.....	75
ANNEXURE A: Research Questionnaire.....	83

# CHAPTER 1

## INTRODUCTION

### 1.1 BACKGROUND OF THE STUDY

As Pakistan is a developing nation where there is a need to improve health services given to people. Doctors and medical staff are expected to deliver quality services to the patients at affordable rates (Stock, McFadden, & Gowen, 2007). Medical sector has also its concerned areas like patient safety, medical errors and high medical costs (Stock, McFadden, & Gowen, 2007). These medical services can be delivered more efficiently when staff of the hospitals i.e. doctors, nurses, paramedical staff and others are effectively managed to provide more productivity and effectiveness to attain organizational goals and that is possible with the well-execution of performance-oriented HRM practices in the hospitals. Thus, we say that performance of the organizations can be made better not only by providing quality services and technology support but also by increasing the performance of their employees (Stock, McFadden, & Gowen, 2007).

Although, many researchers have suggested that high-performance Human resource management (HRM) practices system might be linked with better individual or organizational-level performance (Delery & Doty, 1996; Dyer & Reeves, 1995; Wright, Dunford, & Snell, 2001) but still there is a black-box in the relationship of high-performance HRM practices and organizational performance that needs to be explored (Dyer & Reeves, 1995).

According to the HRM scholars, more work is needed to find the results of applying high-performance HRM practices on employees- level outcomes (Dyer & Reeves, 1995). These employee level outcomes are the most immediate and nearest result of HRM practices implementation and that can help us understand the HR-performance relationship more clearly (Kehoe & Wright, 2013). Hence, we have obtained our survey responses from employees as they can inform best about their experiences of HR practices in their organization and not by HR managers.

We have taken *High performance HRM practices* in this study as it means a set of HRM practices which emphasizes on the promotion of employees abilities, enhancing motivation level, and offers them opportunity to perform (Applebaum, Bailey, Berg, & Kalleberg, 2000; Combs, Liu, Halls & Ketchen, 2006). The purpose of implementing such HRM practices is to make

employees performing such behaviors which are in accordance with the organizational goals. Such high-performance human resource practices will be forming employees' perception and their perception will form their job attitudes and behaviors on workplace. According to Kehoe & Wright (2013), employees' perceptions of performance-oriented HRM practices perform a key role to the increased firm performance. It is also important because employees' perception about HRM strategies and practices can be different from what is reported by HRM managers on strategic level (Nishii, Lepak, & Schneider, 2008). Hence, the impact of HRM practices on employees' attitudes and behaviors can be well-examined with paying attention to the perception of employees working in the organization. Therefore, we have examined the effects of employees' perceptions of HR system use on more proximal employees' outcomes that are employees' job attitudes and behaviors in this study.

Further, three variables of behavioral outcomes have been taken in the present study that are organization citizenship behavior, intent to remain and absenteeism. These dependent variables are highly important to an organization's performance. *OCB* is the discretionary behavior by the employees usually who feel more committed to their job and organization (Organ, 1988). It is not mandatory on workers to perform such activities by their job description. For example, to help co-workers in their task, showing sportsmanship and participating in all activities of the company are some of the examples of performing *OCB*.

While *intent to remain* refers to the likelihood of employees staying with the organization (Kehoe & Wright, 2013). Furthermore, so as to understand the link between high-performance HRM practices and employees behavioral outcomes, there is a need to uncover the mechanism through which employees job behaviors are impacted by the HRM practices (Alfes, Shantz, Truss & Soane, 2013). This study focuses on employees' attitude that is affective commitment as the mediating variable between perceived HRM practices and employees behaviors. *Affective commitment* is the replication of employees' attitudes towards the organization (Moorman, Niehoff, & Organ, 1993).

The specific employee-level outcomes that motivate performance will most likely vary by context (Wright & McMahan, 1992). In fact, it has been shown by researchers that it is essential to understand important employee behaviors that relate HR practices to performance in different settings (Collins & Smith, 2006). To answer the call for context specific research, we chose to study professional services firms to understand the relationship between specific employee-level outcomes and HRM practices. For this study, we

chose medical sector because health-care has become a major issue in the world in the last recent years. Moreover, majority of previous researches have focused only on manufacturing firms (Arthur, 1992, 1994; MacDuffie, 1995; Youndt, Snell, Dean, & Lepak, 1996) thus we can find a few studies on the service industry (Delery & Doty, 1996; Batt, 2002). It is also important because such employee attitudes and behaviors tend to work as important differentiator and it leads to competitive advantage within services firms and causes better performance of the organization as employees' interactions with customers affect job satisfaction of the employees.

By concluding the above-mentioned arguments, we can say that this research has tried to uncover the linking mechanism between high-performing HRM practices and organizational performance by assessing more proximal outcomes that are employees' attitudes and job behaviors. Further, we have conducted this research in the context of health-care sector of Pakistan which has never been studied as far as this topic of research is concerned.

Hence, this study linkages the relationship between employees' perception of high-performance HR practices, one dimension of employees' attitudes (affective commitment) and three dimensions of employees' job behaviors (OCB, intent to remain and absenteeism) in health-care sector of Pakistan. In addition, the mediating effect of affective commitment on the relationship between perceived High-performance HRM practices and employees' behavior has also been analyzed.

## **1.2 STATEMENT OF THE TOPIC**

Many Pakistani doctors and medical professionals choose to migrate to foreign countries which result in brain drain and shortage of chronic skills in the country (Abid, 2012). Low salary packages, reference-based hiring, poor recruitment and slow promotion system are usually the major reasons of doctors' dissatisfaction, non-commitment, high absenteeism and turnover intention in the hospitals (Abid, 2012). This is mainly because of lack of proper implementation of performance-oriented HRM practices in the health-care sector. It is often considered that employees' perceptions of high-performance HRM practices contribute to the increased firm performance (Kehoe & Wright, 2013). Non-implementation of such HRM practices is a loss not to the hospitals performance only but to the nation as well.

Although a significant relationship between HRM practices and organizational performance has been established by many scholars in strategic human resource management (e.g., Dunford, & Snell, 2001) but less

consideration has been given to more proximal outcomes of HRM practices such as employees' affective commitment and their consequent behaviors (e.g. OCB, intent to remain and absenteeism) which can play mediating role in the HRM practices-performance relationships (Kehoe & Wright, 2013). These employees' level outcomes are highly important and relevant in creating organizational performance.

Therefore, this study focuses on employees' attitude that is affective commitment as the mediating variable between perceived high-performing HRM practices and employees behaviors. We propose, if employees perceive that HRM practices which are being implemented in their hospitals are to facilitate them then they would feel more committed to their job and as a result they perform extra role behaviors (OCB), their absenteeism decreases and intent to remain with the organization increases that leads to higher hospital performance as indicated by social exchange theory.

In addition, we have given attention to the employees' viewpoint in this study as their perception about such HRM practices makes their attitudes and behaviors at workplace that leads towards organization performance. Hence, based on the Social exchange theory, this study aims at empirically investigating the linkages between employees' perception of high-performance HRM practices, employees job attitude (affective commitment) and behaviors (Organization citizenship behavior, intent to remain and absenteeism) in the context of health-care sector of Pakistan, particularly focusing on the mediating effect of affective commitment on the relationship of HRM practices and employees behaviors.

### **1.3 RESEARCH QUESTIONS**

Following are the research questions of this study:

- RQ1:** To what extent high-performance HRM practices are implemented in the hospitals of Pakistan?
- RQ2:** What is the relationship of high-performance HRM practices with affective commitment, organizational citizenship behavior (OCB), intent to remain and absenteeism?
- RQ3:** Does affective Commitment mediate the relationship between high-performance HRM practices OCB, intent to remain with the organization and absenteeism?

## 1.4 OBJECTIVES OF THE STUDY

This research aims to achieve the following objectives:

1. To explore the level of implementation of High-performing HRM practices in Pakistani public and private hospitals.
2. To examine the relationship between employees perception of High-performance HRM practices, affective commitment, OCB, intent to remain and absenteeism.
3. To investigate the mediating effect of affective commitment on the relationship between HRM practices, OCB, intent to remain and absenteeism.

## 1.5 RESEARCH HYPOTHESES

In order to achieve research aims, our study converts above-mentioned objectives into following hypotheses. The grounding of hypotheses on the base of existing knowledge in the field is detailed in Chapter 2. The list of hypotheses is provided here:

- H1a:** There will be a positive and significant relationship between perceived high-performance HRM practices and organizational citizenship behavior (OCB).
- H1b:** There will be a positive and significant relationship between perceived high-performance HRM practices and employees' intent to remain with the organization.
- H1c:** There will be a negative and significant relationship between perceived high performance HRM practices and employees' absenteeism.
- H2:** Perceived High-performance HRM practices will be positively related to affective commitment.
- H3a:** Affective commitment mediates the relationship between high-performance HRM practices and Organization citizenship behavior (OCB).
- H3b:** Affective commitment mediates the relationship between high-performance HRM practices and intent to remain.
- H3c:** Affective commitment mediates the relationship between high-performance HRM practices and employees' absenteeism.

## 1.6 RESEARCH SIGNIFICANCE AND LIKELY CONTRIBUTION

The purpose of this research is to examine the relationship between employees' perception of high-performance HRM practices and employees work outcomes i.e. affective commitment, OCB, intent to remain and absenteeism. This study also tends to analyze the mediating effect of affective commitment on the relationship of perceived performance-oriented HRM practices, OCB, intent to remain and absenteeism.

This research tries to contribute in the existing literature by several ways: Firstly, we tried to explore the black-box between high-performance HRM practices and organization performance through employees' job attitudes and behaviors which are considered to be more proximal outcomes of employees when performance-oriented HRM practices are implemented by HR managers in the organization. So, current study is focusing on the immediate outcomes of High-performance work systems (HPWS) and not the distal outcomes such as firm performance because it is necessary to consider the proximal outcomes first.

Secondly, the originality of this research work lies in the fact that it has paid attention to the employees perception as employees are the receivers of an organization's HRM practices ultimately, and their perceptions of these practices affect their attitudes and behavior on the workplace. Therefore, data has been collected from the employees of the hospitals to measure HRM practices and our study variables and not by HRM managers.

Thirdly, the mediating effect of affective commitment is assessed on the relationship between high-performance HRM practices and employees behaviors. The mediator of affective commitment was chosen due to its high relevance with our independent variable that is high-performing HRM practices use. When a high-performance work system is implemented in an organization, it results in the creation of an employment relationship which is mutually rewarding for both the employer and to the employee. Where an organization is making investment in the personnel skills and providing them better incentives and rewards then in return it expects from employees to invest in better organizational productivity and performance (Huselid, 1995). The attitude of affective commitment is the employees' consequence of that mutual exchange employment relationship.

Fourthly, we have conducted this research on the employees of health-care sector of Pakistan. Health has become a major issue worldwide and there is lack of proper implementation of HRM practices in the hospitals throughout the world. Particularly, this research is contributing in the context of a

developing nation like Pakistan where there is a need to improve health services given to people (Abid, 2012). The performance of the hospitals can be improved when staff of the hospitals that are doctors, nurses, paramedical staff and others have are performing in the interest of their organizations and that is possible with the application of high-performance work systems. We have seen research work in this area more in the European countries (e.g., Wheeler, Halbesleben, & Harris, 2012) and some of the Asian countries such as India (Gupta & Singh, 2011; Patil & Choudhari, 2013) but health-care sector of Pakistan has never been studied so far.

The findings of the work will be helpful not to the hospitals management only for policies making but to each kind of organization in order to identify the right kind of high-performance practices that need to be implemented in the organization so that employees perception can be improved and in return they show more positive attitudes and behaviors while performing their duties which ultimately results in better organization performance.

## **1.7 RESEARCH METHODOLOGY**

Type of investigation of current study is co-relational where unit of analysis is individuals. Targeted population consists of permanent and contractual employees (full time) of various public and private hospitals in Pakistan. One self-administered questionnaire was designed to investigate study variables by using well-established constructs. Structured questionnaires were distributed among 400 employees, out of which we received 317 (79% response rate) useable responses through personal visits of resource person. Data has been collected at one point of time during normal working hours of hospital from two cities. Complete details of research design, sampling procedures, measurements and other methodological issues is available in Chapter 3.

## **1.8 DATA ANALYSIS**

Statistical package for social sciences (SPSS) is used for statistical analysis of the study variables. Descriptive analysis has been performed to investigate the characteristics of sample data and to determine the appropriate techniques for further analysis. Cronbach's alpha is calculated to check the inter item consistency of scale items. Co-relational analysis is executed to estimate association between study variables. OLS regression analysis is performed to test the impact of independent variables on the dependent

variables. Finally, Sobel mediator test was conducted to examine the mediating effect of mediator (affective commitment) as well as to test the study hypotheses. A detail of data analysis is provided in Chapter 4.

## **1.9 FINDINGS**

This study finds positive and significant relationship between perceived high-performance HRM practices and its immediate outcomes that is employees' attitudes and behaviors except absenteeism. Further, the mediating role of affective commitment is also supported between the relationship of employees' perception of high-performance HRM practices and OCB. Relationship between high-performing HRM practices and intent to remain with the organization is also mediated by affective commitment while the results showed non-significant relationship of affective commitment on the relationship of HRM practices and absenteeism. The current study contributes in existing literature of SHRM by shedding light on the intervening mechanism between HRM practices and organizational performance relationship through employees' attitudes and behaviors in the context of Pakistani Health-sector. This research also shows some future directions along with limitations. The details of findings, discussion, implication, limitations and future directions are provided in Chapter 5.

In the next chapter, we will take review of literature to test the relationship between HRM practices, employees' perception of high-performing HRM practices, employees' job attitudes and behaviors and their impact on firm performance. On the basis of extensive literature review, research hypotheses are developed with a theoretical framework for this thesis. After that, research methodology and research process to carry out this study has been discussed.

## **CHAPTER 2**

### **LITERATURE REVIEW AND DEVELOPMENT OF HYPOTHESES**

As mentioned above, the aim of this study is to examine the link between employees' perception of high performance HRM practices, affective commitment and employees' behaviors. This research also tests that whether affective commitment mediates the relationship between HRM practices and OCB, absenteeism and intent to remain. In this chapter, we will take review of the literature regarding employees' perceptions of performance-oriented human resource management practices, employees' attitudes, behaviors and organizational performance along with the hypotheses development. Social exchange theory has also been discussed as the theory underpinning this research. Then finally, theoretical framework is developed on the base of literature at the end of the chapter.

#### **2.1 RELATIONSHIP BETWEEN HIGH-PERFORMANCE HRM PRACTICES AND ITS PROXIMAL OUTCOMES**

According to strategic human resource management (SHRM), it is better to implement a set of human resource management practices rather than using individual practices (Dyer & Reeves, 1995) because using set of HRM practices can result in better organization performance (Gould & Mohamed, 2010) and effectiveness. Secondly, if high-performance practices are included in HR system that may serve as foundation for the competitive advantage of the firm. High performance practices include such interconnected practices which promote employees abilities, increase motivation level and provide them opportunity (Kehoe & Wright, 2013) for achieving organization goals. Further, such practices may include selection, information sharing, rewards, training opportunities, merit-based promotion system etc (Kehoe & Wright, 2013).

Previous research demonstrates that high-performance HRM practices are more appropriate in explaining the employees' job attitudes and behaviors (Kehoe & Wright, 2013). For example, Leea, Lee & Kang, (2012) have found that human resource is the fundamental ability and most important resource that enables the hospitals management to provide quality services to customers and improve hospitals performance. This is possible mainly when employees of the health care sectors are given proper job skills, information systems and

good incentives for achieving organizational goals (Leea, Lee & Kang, 2012). Although, the impact of HRM practices on corporate or organization level performance has been studied by many scholars (Bowen & Ostroff, 2004; Delaney & Huselid, 1996) but recent studies demand research to examine the black-box or mechanism through which HR practices affect organization performance.

According to Dyer & Reeves (1995), positively perceived HRM practices are associated with higher organization performance but this link can be examined more clearly through job attitudes that is affective commitment and job behaviors that are OCB and turnover intention. According to Bowen & Ostroff (2004), effective HRM practices lead to the favorable organizational climate which results in positive employees' attitudes and behaviors that ultimately cause better organizational performance. The authors made us believe that employees' job attitudes and behaviors are the more proximal outcomes which need to be assessed before the firm performance.

In order to explore the effect of HR practices on employees' work outcomes, it is important to see how these HRM practices are perceived by the employees (Alfes, Shantz, Truss & Soane, 2013) as their perception will form their attitudes and ultimately influence their behaviors. Another study examines the relationship between employees' perception of high performance HRM practices and commitment to the organization on individual level. The authors argue that it is essential to study the mechanism through which these perceptions are translated into employees' attitudes and job behaviors on employees' level in order to understand the relationship of HRM practices and organization performance more clearly (Farndale, Hope & Kelliher, 2010). It should be noted that actual HRM practices at strategic level and conveyed by the HRM managers can be different from employees' perceptions of HRM practices. Their perceptions are formed depending upon their personal experiences, values and beliefs in the organization and their personal experiences of organizational HR system depend upon how HR managers actually implement those strategies (Nishii & Wright, 2008).

Thus in this study, we will examine employees perception on their individual level because it is the employees who can tell best about their attitudes and behaviors as a result of HR practices. Kehoe and Wright (2013) find if employees perceive their HRM practices are performance oriented so they show more commitment and positive behaviors towards their job. Specifically, it is argued by scholars that HR practices whether these are categorized as performance-oriented or commitment-oriented, leads to better firm performance through performing high-level of voluntary tasks (OCB)

because such practices give employees various opportunities to take part in organizational activities, enhance their skills and motivation to perform better.

Patil & Choudhari (2013) have investigated and identified human resource management practices and its influence on doctors and nurses job satisfaction level in hospitals of Jalagaon District, India. They have compared these HRM practices in government and private hospitals by using self-administered questionnaires among doctors of the hospitals. Chi-square, p – value, count value, cross tabulations and sample percentage value were used to analyze the data for interpretation. Results show that HRM practices are more competently applied in private hospitals than government hospitals. Customer-oriented training to staff is given in private hospitals however working procedures are well known to the government employees than in private hospitals.

Similarly Alfes, Shantz, Truss and Soane (2013) have studied the relation between high performance HR practices and employees behavior i.e. organizational citizenship behavior and turnover intention. They developed a moderation mediation model showing that relationship between HRM practices and both behavioral work outcomes is mediated by employees' engagement while relationship between employees' engagement and both behavioral outcomes is moderated by employees' perception of organizational support and Leader-member exchange. Data has been collected from 297 employees of a division of a large UK-based organization. Correlation, Hierarchical multiple regression and hierarchical moderated regression were used to test the hypotheses. Findings came out that there is positive relation between performance-oriented HR practices and OCB and negative relationship to the turnover intention. Moreover, the relationship between HRM practices, OCB and turnover intention is partially mediated by employees' engagement. However, this study has not considered the mediating effect of important dimension of employees' attitude i.e. affective commitment.

Although we can find various recent studies where effect of HRM practices has been examined with different behavioral outcomes while in some studies the link between HRM practices and employees attitudinal outcome has been studied but still research remains scarce where both attitudinal and behavioral outcomes are investigated in a single research. So, still there is a need to make theoretical and empirical contribution in this domain. So, we propose a model where we take one dimension of employees' attitude i.e. affective commitment and three dimensions of employees' behaviors such as organizational citizenship behavior (OCB), intent to remain and absenteeism. We have chosen these dimensions as these are highly relevant, important for

an organization and we can also generalize our results to a wide variety of industries.

First high-performance HR system promotes an employment culture where organization invests in the employees skills and in return, expects work-related contributions from the employees (Kehoe & Wright, 2013). Affective commitment is a reflection of such exchange relationship from the perspective of employee and organizational citizenship behavior, intent to remain and absenteeism are the consequences of organizational commitment thus considered as highly important for any organization. According to Alfes, Shantz, Truss & Soane (2013), positively perceived HRM practices are related to enhance organizational citizenship behavior and decreased turnover intention. Similarly, previous empirical research by the same authors supports that perceived HRM practices are positively related to organizational citizenship behavior and well-being and negatively related to intentions to turnover (Alfes, Shantz & Truss, 2012). However the research of Alfes et al., (2013) has not found a significant relationship of HRM practices with task-performance. Results from a research of employees in North-East England propose that relationship between HRM practices and organizational citizenship behavior is positive and this effect is mediated by perceived job influence (Snape & Redman, 2010).

Hence, in particular, established on the principles of social exchange theory (Blau, 1983), we propose a model that pays attention to the relationship of high-performance HRM practices with affective commitment, OCB, intent to remain and absenteeism specifically examines that affective commitment mediates the relationship between HR practices and three behavioral outcomes. Hence, we propose that:

- H1a:** There will be a positive and significant relationship between perceived high-performance HRM practices and organizational citizenship behavior (OCB).
- H1b:** There will be a positive and significant relationship between perceived high-performance HRM practices and employees' intent to remain with the organization.
- H1c:** There will be a negative and significant relationship between perceived high performance HRM practices and employees' absenteeism.

## **2.2 HIGH-PERFORMANCE HRM PRACTICES AND AFFECTIVE COMMITMENT**

Recent calls in this area demand to investigate the effect of employees' perception of HRM practices on individual level outcomes as previous research in this domain has established a significant relationship between HRM practices and organizational performance. Hence we are considering more proximal outcomes of HR practices such as employees' attitudes and behaviors. Affective commitment is the mediating variable between perceived HRM practices-employees outcomes relationship. It is described as the strong sense of emotional attachment of employees with their organization and the job they do (Meyer & Allen, 1991). It is either because they love their work or their goals align with the company's goals and therefore, they do not want to leave their company (Meyer & Allen, 1991). Affective commitment means feeling proud to work for the organization (Meyer & Allen, 1997).

Although, the relationship of employees commitment with their organization has been studied for over fifty years (Klein et al., 2009). But still this topic receives lot of attention because commitment is that important employee attitude which results in generating important job behaviors of employees. Hence, the focus of SHRM scholars and managers is to influence this relationship so that organizational strategic level goals can be achieved (Collings & Wood, 2009). So, managers will use human resource management practices to influence affective commitment and thus obtain anticipated organizational behaviors. It has been shown that HRM practices and their perception of employees has a direct link with employees' commitment.

Commitment, which can be developed by employees, may be categorized into different types, for example, commitment for organization, commitment for job, union commitment, leader commitment, career, team and customer etc. These are defined as targets (Meyer et al., 1998). In the context of current investigation, we are talking about organizational commitment and that is our target commitment. Allen and Meyer (1991) have developed a model of organizational commitment which consists of three components namely: affective commitment, normative and continuance commitment. It has been confirmed by research that these three types relate differently to various antecedents (Meyer, Stanley, Herscovitch, & Topolnytsky, 2002).

Current research focuses on affective commitment to relate with perceived HRM practices and employees behaviors due to the several reasons: first affective commitment relates strongly to important employees behaviors such as low absenteeism and organization citizenship behavior (Meyer et al., 2002), second it also serve as an significant connecting mechanism between

high performance HRM practices and high-performance HR outcomes which has been supported by previous research (Gong et al., 2009). Third, affective commitment is affected by employees job experience (Meyer et al., 2002).

Ang, Bartram, McNeil, Leggat & Stanton (2013) have found the impact of high-performance work system on employees' job attitudes (engagement, job satisfaction and affective commitment) and employees' intent to leave for different occupational groups in a hospital. The research was carried out with the survey of both 58 managers and 193 employees of a large regional Australian hospital. Regression analysis by Baron and Kenny (1986) and Sobel test were used to test the mediation. The authors find that positive relation between management HPWS and engagement and job satisfaction is mediated by employees HPWS. Overall results indicate that HPWS results in increased engagement, satisfaction, high commitment and less turnover only when manager's implementation of HPWS is similar to the employees' perception of HR practices. Similarly Wheeler, Halbesleben & Harris (2012) examined multilevel association between HRM effectiveness, employees' turnover intention and employees' workarounds (mindfulness behaviors) based on resource based view, in a hospital system. Data was collected from 871 employees of a hospital system located in United States. Correlation, Hierarchical Linear Modeling and Baron and Kenny's (1986) Regression procedure was applied to test the hypotheses.

Guest & Conway (2011) have explored the impact of effective HRM practices on both immediate and remote (proximal and distal) work-outcomes. They also test whether the effect of HR system usefulness is greater when there is agreement between senior line managers and HR managers. They suggest that employees' attitudes and behaviors (employee quality, commitment and labor turnover) are more proximal outcomes that are affected by HR practices than financial performance of the firm which may be influenced due to other reasons like marketing strategy and competitive environment (Guest & Conway, 2011). They conducted interviews with 610 HR managers and 462 chief executive officers from 237 companies located in UK. Inter-correlation and series of Hierarchical regression were used to for data analysis and interpretation.

Similarly, there are several studies in the past where they have examined a significant relationship between HRM practices and affective commitment (e.g. Gould & Davies, 2005; Pare & Tremblay, 2007) etc. Gilbert, Winne & Sels (2011) have examined the impact of perceived HRM practices rather than planned HRM practices on job attitudes and behaviors of employees. The results of this empirical investigation showed if there is effective implementation of HR practices and network-oriented leadership is

demonstrated then it will result in increased affective commitment by line managers (Gilbert, Winne & Sels, 2011). Another study indicates that there exists a significant link between support-oriented HRM practices, employees commitment, job satisfaction and employees turnover intention and the relationship between these independent and dependent variables is mediated by perceived organizational support (Allen, Shore & Griffeth, 2003).

Precisely, according to social exchange theory organizations make employees to build strong association with them through implementing performance-oriented HRM practices (Blau, 1983). When these practices are applied effectively by HR managers then employees start developing positive perception about their firm (Blau, 1983). They perceive that their organization is having a system of fair and unbiased feedback, performance-based rewards, opportunities for growth and promotion, availability of training to enhance employees' skills. In return, they develop feeling of proud and association with their organization which is defined as affective commitment. Hence, based on the above-mentioned arguments, we propose that:

**H2:** Perceived High-performance HRM practices will be positively related to affective commitment.

### **2.3 THE ROLE OF AFFECTIVE COMMITMENT AS A MEDIATING VARIABLE**

According to Ogilvie (1986), if commitment is not managed properly it may cause serious problems for the organization. Subsequently, it is important for the scholars to examine factors which may influence commitment in order to help managers so that they are able to make strategies which lead to desired employee behaviors (Ogilvie, 1986). It is reasoned by Strategic Human-Resource Management literature that firm performance is indirectly impacted by HRM practices (Kehoe & Wright, 2013). There are mediating variables such as employees' attitudes e.g. commitment, behaviors of workers e.g. turnover intention, organizational citizenship behavior and employees' task performance e.g. productivity which work as a causal chain and causes this relationship to happen. Gould & Davies (2005) have showed a significant positive relationship between HRM practices and affective commitment.

Similarly, this relationship has also been examined by some other studies (e.g. Pare & Tremblay, 2007) etc. Another research considers the impact of perceived HRM practices instead of intended HR practices on employees' job attitudes and behaviors. They further elaborate that if there is effective implementation of HR practices and network-oriented leadership is

demonstrated then it will result in increased affective commitment by line managers (Gilbert, Winne & Sels, 2011). Allen, Shore & Griffeth (2003) showed that there exists a positive relation between supportive HRM practices and employees commitment, job satisfaction and employees turnover and the relationship between these independent and dependent variables is mediated by perceived organizational support.

However, research attention is required to examine the mediating effect of affective commitment on perceived HRM practices and employees' behavior relationship that will result in increased firm performance (Kehoe & Wright, 2013). Employees increased level of commitment is likely to impact their behaviors on workplace for two reasons: First, this employee attitude alone is not enough to balance the benefits received by both parties that are employees and organization. Additional contribution is required on the part of employees that may provide larger benefits to both of them. Second, employees who are managed by high-performance HRM practices, develop a strong association that is affective commitment and which in turn, leads to the production of behaviors which are more in the favor of organizations and this is all due to the sense of obligation they feel towards their organization (Social exchange theory).

Empirically, it has been established that important withdrawal behaviors (e.g. low absenteeism and less turnover intention) are related with the concept of commitment. It is also related to high-levels of organization citizenship behavior (Becker, 1992; Meyer and Herscovitch, 2001; Meyer et al., 1989; Ogilvie, 1986). Kehoe & Wright (2013) empirically support that high performance human resource management practices have a significant impact on employees' job behaviors that is organizational citizenship behavior through employees' attitudes that is affective commitment.

Social exchange theory (Blau, 1967) support this phenomenon by stating that if organization is rewarding the employees' through better implemented High-performance human resource practices then in turn they would produce better performance results by showing more commitment towards the employer and their organization. This is called 'norm of reciprocity'. Hence, workers who are having a good relationship with the organization in terms of affective commitment, will more likely to show organizational citizenship behavior and less turnover intention (Kehoe & Wright, 2013).

### **2.3.1 Organization Citizenship Behavior (OCB)**

OCB is described as the discretionary behavior of employees which is not rewarded by the formal rewarding system of the organization directly. In other words, these are voluntary activities of employees which overall, promote effective performance of the organization (Organ, 1988). OCB is distinguished from task performance of employees as these activities are not part of their formal job description (Mayer & Schoorman, 1992). These are also called extra role behaviors which are not performed by employees to gain any immediate rewards or to avoid punishment (Shore & Wayne, 1993). According to past studies, the relationship between high-performance HRM practices and organizational citizenship behavior has been established (Sun et al., 2007). For example, extensive training and performance based rewards are provided by HR managers to increase the discretionary behaviors of employees.

We suggest that here must be some linking attitudinal mechanism which is connecting this relationship and which does not depend upon direct rewards. Specifically, the link between HR practices and OCB (employee behavior) is indirectly affected by the impact of HR practices on affective commitment (employee attitude) based on social exchange theory. Feeling of being committed with organization helps to maintain employees' behavior even in the absence of incentives (Scholl, 1981). So it is likely that employees who are committed to their jobs are more interested to increase the effectiveness of organization by contributing their extended efforts even when they are not being rewarded by their formal HR system (Kehoe & Wright, 2013). OCB is a direct source for committed employees to perform extra role behaviors beyond just task performance for their organization. Previous research has also revealed positive link between affective commitment and organization citizenship behavior (Podsakoff et al., 2000). Hence, based on above arguments we are making following prediction:

**H3a:** Affective Commitment Mediates the Relationship between high-performance HRM practices and Organization Citizenship Behavior (OCB).

### **2.3.2 Intent to Remain with the Organization**

Intent to remain with the organization is defined as the likelihood of employees to stay with the organization. Employees who are more affectively committed with their organization are more likely to stay with their company because they have emotional attachment with the company and they feel

obligated to increase effectiveness of their organization and perform better based on social exchange theory (Kehoe & Wright, 2013).

Although empirical studies have demonstrated a significant relationship between performance-oriented HRM practices and turnover (Guthrie, 2001) but still, some attitudinal explanation is required that works as a causal chain between this relationships. Studies of Sun et al., (2007) investigated the mediating effect of organizational citizenship behavior on the relationship of HR practices and turnover but their research lack the explanation on OCB as a connecting variable rather they relied more on affective association which generates employees behaviors. Hence, consistent with social exchange theory, we argue that relationship between high-performance HRM practices and intent to remain might be better explained by indirectly that is through affective commitment.

A system of performance oriented HRM practices provides a mean for committed employees to achieve organizational goals because employees who love their work will be more eager to participate towards better organizational performance. Such employees have deep bond with their organization and demonstrate a higher level intention to stay as compared to employees who have a weak bond with their employer. These are reasons following reasons behind this relationship. Firstly, employees would be able to achieve organizational targets and goals only when they decide to stay with the company in long term or in other words when they continue their job. So, the link between achieving organizational goals and personnel' intent to remain go side by side. Secondly, an employee decides to leave the organization when they feel that rewards being given to them are not sufficient to match with the contributions they are making (March & Simon, 1958). Hence their intention to remain with the organization depends upon the stronger bond or feeling of attachment they have with it. Similarly staff's turnover has a link with the lack of emotional attachment with their employer (Kehoe & Wright, 2013). Based on the above mentioned arguments with the empirical support for the significant relationship between affective commitment and intent to remain and turnover (see Harter, Schmidt, & Hayes, 2002), we conclude our explanation by making following prediction:

**H3b:** Affective commitment mediates the relationship between high-performance HRM practices and intent to remain.

### **2.3.3 Absenteeism**

According to Sheridan (1985), absenteeism is defined as a form of withdrawal behavior. Kehoe & Wright (2013) say that employees who are

more affectively committed with their organization are more likely to show less absenteeism as per social exchange theory. A high-performance HRM system is more likely to affect absenteeism in an indirect way through some attitudinal explanation that is affective commitment while individual practices such as giving bonuses for excellent attendance might have direct impact on absenteeism (Kehoe & Wright, 2013).

According to Kehoe and Wright (2013), in a system of high-performance HRM practices, employees with high absenteeism will be affected and lose their benefits but employees with moderate level of absenteeism would still be taking part in decision making, getting available training, task performance, and would likely to enjoy other benefits of a high-performance work system. So benefits provided in such HR system do not bring significant reductions in absenteeism directly (Kehoe & Wright, 2013). We suggest that there might be some other mechanism through which performance-oriented HRM practices have an impact on absenteeism indirectly and in current study we focus on affective commitment as the mediating variables between HRM practices perception and absenteeism.

In particular, employees would be able to contribute to organizational effectiveness only when they are present at work. Under a high-performance HR system and based on social exchange theory, employees feel obligated to return their organization benefits which they owe (Blau, 1983) by showing positive attitude and consequently, they behave in ways which is more beneficial to their employer. Thus, they contribute towards better organizational performance by performing their job activities. Hence, we propose that:

**H3c:** Affective commitment mediates the relationship between high-performance HRM practices and employees' absenteeism.

## **2.4 THEORIES UNDERPINNING THIS RESEARCH**

Based on Social exchange theory, this research tries to explore the link between employees' perceptions of high-performance HR practices and organizational performance relationships. We argue that before HRM practices impact organizational performance there are more proximal outcomes that are employees' attitudes (affective commitment) and behaviors (OCB, intent to remain, absenteeism) which are influenced by employees perception of High-performance HR practices while organizational performance is a distal outcome of HRM practices so, there is a need to answer the call of context-specific research in this domain.

Social exchange theory was given by Blau in 1964. According to his definition, social exchanges are sort of discretionary actions. When an organization initiates by treating his employees and make an expectation that such action would be reciprocated by the employees (Barbera, 2012). Similarly, if employees have a positive perception about the organizational strategies and practices, they would reciprocate by showing positive attitudes and positive behaviors towards their job as well as organization (Barbera, 2012).

Under high-performance management system, when HR managers implement such HRM practices the purpose of which is to enhance employees skills, giving them opportunities to participate in decision making, all important organization information is shared with them. Merit based promotions are conducted. Proper incentives and rewards are provided which match the level of contribution employees making for achieving organization goals. Then, employees develop an exchange relationship with their employer.

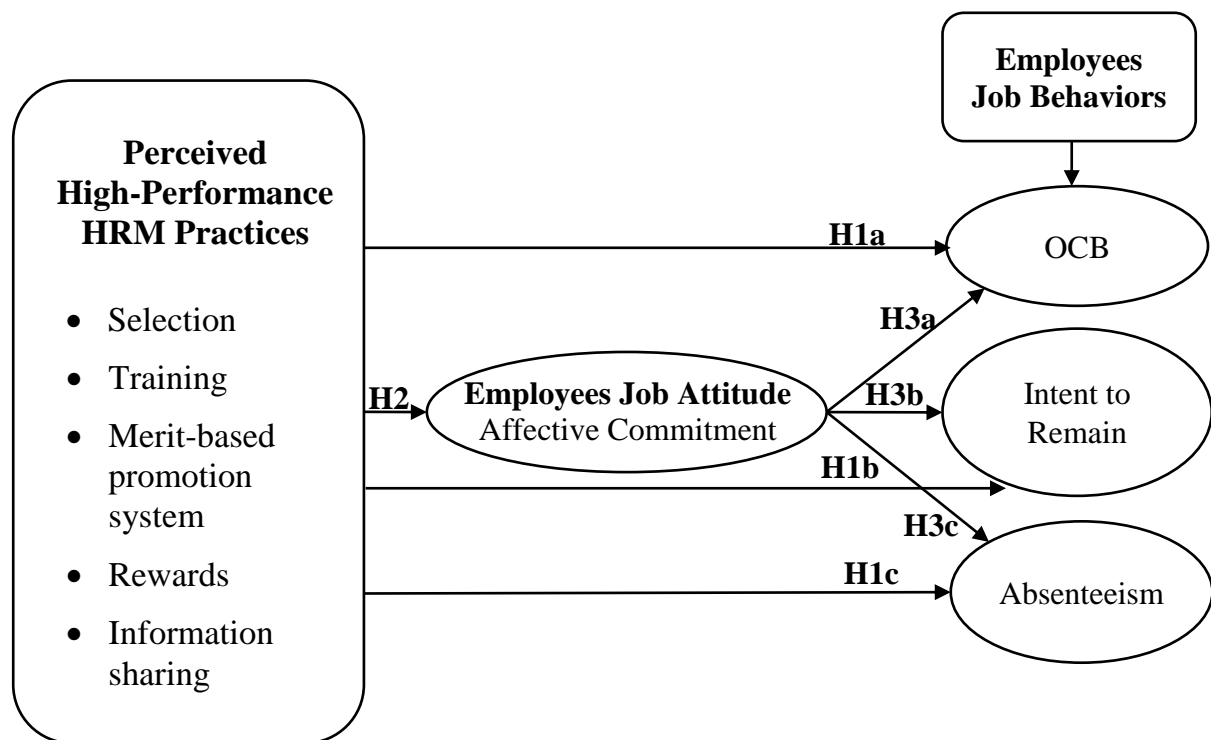
According to Barbera (2012), under this exchange relationship, organizations often focuses on affective or normative commitment to increase the commitment level of employees by using high-performance management practices. By doing this, organizations create perception in the minds of their workers that they are providing supporting environment to their staff and resultantly, employees feel more committed and behave in the favor of organization.

Hence, social exchange theory (Blau, 1967) states that in return of organization better implemented HR practices and rewards, employees show more committed behavior resulting in higher organization performance. The theory provides clarification that how employees' perception of set of HRM practices are associated and linked with employees' attitudes and behaviors. For example, employees are more likely to return to their organization through a range of positive attitudes and behaviors when they perceive that organization is investing in them by way of positively experienced HRM practices (Kuvaas & Dysvik, 2010).

## **2.5 THE THEORETICAL FRAMEWORK**

The graphical illustration of the relationship between perceived high-performance Human resource management practices and three employees' behavioral dimensions (OCB, Intent to remain and absenteeism) is shown in Figure 2.1 as H1a, H1b and H1c. The relationship between our independent variable and affective commitment is demonstrated as H2. Moreover, the

mediating role of affective commitment (employees' attitude) on the relationship of HRM practices and employees job behaviors is also depicted as H3a, H3b, and H3c in Figure 52.1.



**Fig. 2.1: The Theoretical Framework**

We conclude our discussion by saying that competitive markets of today's era demand firms to enhance their quality and act more rapidly to adapt changes for which they have to rely on employees' capabilities and creativity level more (Wood & Wall, 2007). System of high-performance management practices provide all source to employees to work in supportive environment where they can promotes their abilities and skills, and get enough incentives and rewards for performing well.

The current study has made the following contribution in the existing literature: Firstly, We have introduced a set of performance oriented HRM system which is more widely focused rather than using individual practices for achieving organizational goals effectively.

Second, we shed light on the underlying mechanism between high-performance HRM practices and organizational performance relationship. This mechanism still serve as a black box which needs to be uncover to understand HR practices-performance link more clearly (Macky & Boxall, 2008). Thus, we say that employees' attitudes (affective commitment) and employees' behaviors (OCB, intent to remain and absenteeism) are more immediate

outcomes of HR practices. These attitudes and behaviors are more likely to connect the relationship of HR practices and organizational performance. Thirdly, we proposed that affective commitment mediates the relationship between perceived high-performance HRM practices and three behavioral outcomes. Hence this study has examined the HR practices –performance link more closely.

Fourth, the focused of existing literature on this topic has been limited to the manufacturing industries (Bartel, 2004) though services-sector is a major contributor to the GDP in many industrialized and intermediate (transitional) economies (Chuang & Liao, 2010). Further, the research work on strategic human resource management exclusively focused on western world (Rose & Kumar, 2006). That is why, we have chosen health care sector which is a large service sector and besides we have conducted this research on a developing country like Pakistan considering that work system and practices of firms may vary from sector to sector and it can also vary in different countries coming with a different social, cultural and occupational context (Boxall & Macky, 2009).

Finally, based on social exchange theory, the present research builds a theoretical framework linking perceived high-performance HRM practices, affective commitment, organizational citizenship behavior, intent to remain and absenteeism. We continue our research work by heading towards research methodology which includes research design and data collection techniques with measures of our study variables.

We can conclude this chapter by stating that this chapter and the earlier one have described in detailed the reasons for conducting this research. The importance of human resource management and its relationship with employees' job outcomes in health sector is identified by the Literature review. Various theoretical models and empirical studies relevant to HRM, employees' job attitudes and behavior and firm performance have been explained. Variables were derived selectively from the extensive literature review and those were used to build a conceptual framework. We hypothesized that employees' perceptions of performance-oriented HRM practices will cause certain HRM outcomes. The resultant HRM outcomes will be then leading to better organizational performance.

## **CHAPTER 3**

### **RESEARCH METHODOLOGY**

This research purposes to examine the relationship between employees' perception of high-performance human resource management practices, employees' attitudes and behaviors in the context of health sector of Pakistan. More specifically, this study also investigates the mediating effect of affective commitment on the relationship of perceived HRM practices and three types of employees behavior that is OCB, intent to remain and absenteeism.

A suitable research design and the instruments for collecting data for the analysis must be determined in order to test the conceptual model. Therefore, this chapter aims at addressing the research design and research methods for this thesis. By taking the approach that is commonly used in social science research (e.g., Creswell, 2009), the main questions that should be answered in this chapter regarding the research methodology process includes the following:

#### **3.1 RESEARCH PARADIGM**

It is important to choose a research paradigm for the selection of right research method for the study. There are three main categories of research paradigms: Realism, Constructivism and Positivism. A realist relies on the case studies and interviews to find out reality. A constructivist reaches at findings by translating the dialogues between the researcher and the subject being studied while a positivist tries to find out the truth by relying on quantitative techniques such as survey or questionnaires (Creswell, 2009).

We have chosen a positivist paradigm for this study for two reasons. Firstly because this research aims at examining the relationship between high-performance HRM practices and certain employees job outcomes so measurement of specific HRM practices and their impact on employees' job outcomes is possible when we rely on positivist approach. Secondly, in this research several hypotheses are developed with a conceptual framework. A survey questionnaire was administered and various data analysis techniques such as factor analysis, correlation, and OLS regression analysis and Sobel test were performed. All these techniques have helped us in achieving the objective of this study.

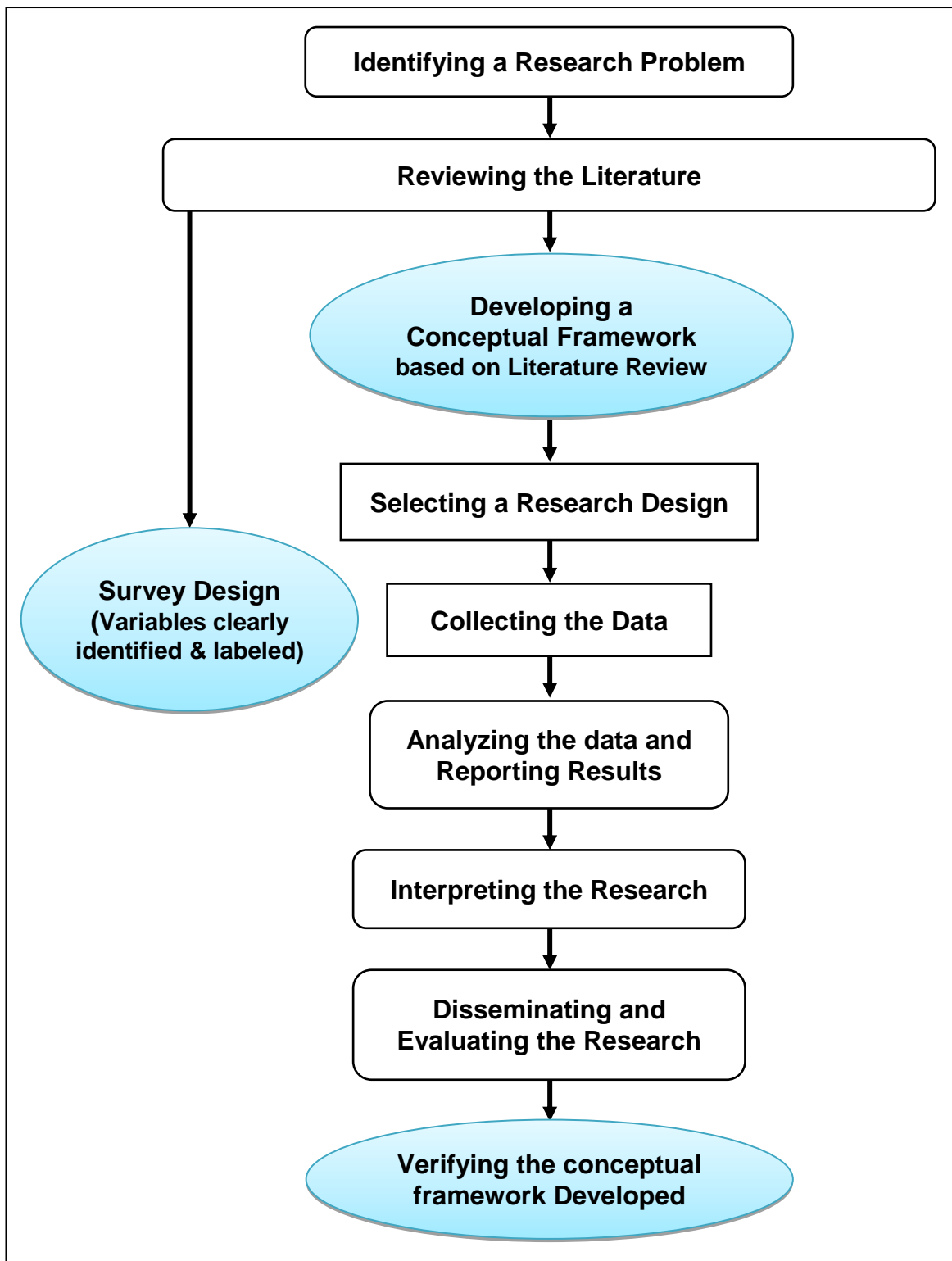
## **3.2 STUDY DESIGN**

This research is quantitative in nature as it involves hypothesis testing by using questionnaires in order to explain the nature of relationship between HRM practices and employees' job attitudes and behaviors. A quantitative method is used when a research includes testing of theoretical framework examining the association between variables. These variables can be measured on survey instruments, so that coded data can be analyzed using statistical procedures (Creswell 2009).

Unit of analysis is individuals working as employees in hospitals. The time horizon of this study is cross sectional and study settings are non-contrived i.e. natural environment setting with minimum interference of researcher.

## **3.3 THE RESEARCH PROCESS**

After the selection of research paradigm and appropriate research method (design) for the study, the next step is to discuss about research process. It is also important to discuss the research process to be followed in order to answer that how data would be collected according to the type of research method of a study. The main focus of this section is to outline the research process that has been followed in this research. Current research has adopted a research process given by Plano Clark and Creswell (2010) in the following figure.



**Fig. 3.1: The Research Process**

Source: Based on Plano Clark and Creswell (2010)

### **3.4 POPULATION AND SAMPLE**

#### **3.4.1 Targeted Population**

Data has been collected from permanent and contractual employees of health sector. Employees includes doctors and nurses working in various public and private hospitals located in Punjab province and its cities Lahore and Faisalabad of country Pakistan. Permanent and contractual employees are taken because we needed diversified view of employees' perception of their human resource management practices and a comparative research can also be conducted in future. There was need to perform this research in a wider and services-sector context (Wright & Boswell 2002, Guest 2011) that is why health-sector has been chosen.

#### **3.4.2 Sampling Design**

Simple Random sampling has been used, in which every part of the subset has an equivalent likelihood of being picked. It is an unprejudiced representation of an assembly. For this purpose, a list of major hospitals from Lahore and Faisalabad has been generated. Out of which we had taken a random sample of 18 hospitals by using Ms. Excel.

#### **3.4.3 The Actual Sample**

We sent 400 sets of questionnaires to 18 hospitals and receive 317 useable sets. Therefore, the actual sample size of study is 317 and response rate is 79%.

### **3.5 DATA COLLECTION TECHNIQUES**

#### **3.5.1 Instrument**

One questionnaire has been designed to conduct the current study using established constructs. The questionnaire contains two parts: first consists of demographic information and second is consisted of measurement of the study variables. Questionnaire was administered in English language by using original items and brief introduction of study and each variable was provided in a few lines to clarify the purpose of the study and to enhance the truthfulness of response. Medium of education is English in Pakistan so

respondents did not find any difficulty regarding understanding of the language.

We used self-administered questionnaires by visiting the hospitals after getting no proper response from online survey.

### **3.5.2 Administration Procedure**

Doctors and nurses of 18 hospitals were requested to participate in the study. In Lahore which is the resident city of resource person, survey was conducted through the personal visits of resource person during the routine working hours of hospitals. As we know that doctors and nurses have very busy and tough schedule so it was made cleared that every instrument took 7-10 minutes to fill, which provide confidence to the health-sector staff that this activity would not create disturbance in their routine functioning. To ensure ingenuous response from employees, the study was introduced by resource person prior to the distribution of survey instruments.

Further, secrecy of the information was assured to provide confidence that their response would not affect their performance appraisal and relationship with the hospital management. Survey questionnaires were distributed during the visit and collected 2-3 days later in some of the hospitals while in rest of the hospitals, these were collected in same visits from all respondents.

For other cities, questionnaires were administered in hospitals with the help of a friend who is resident there. Resource person made time to time telephonic calls to highlight the purpose of study and requested him to introduce the study to employees and to follow up data collection procedures.

## **3.6 MEASUREMENT OF VARIABLES**

### **3.6.1 Employees' Perception of High-Performance HRM Practice**

Perceived high-performance human resource management practices is the independent variable of the study. Perceived high performance HRM practices are described as employees' perception of such interconnected practices implemented by HR managers in their organizations which promote employees abilities, increase their motivation level and provide them opportunities to play a part in various tasks for achieving organization goals. Further, such practices may include selection, information sharing, rewards,

training opportunities, merit-based promotion system etc. (Kehoe & Wright, 2013).

We had asked employees to answer fifteen (15) HRM practices on 7-point likert scale which have been identified by the HRM practices literature. We developed our measure by using previous empirical researches (Huselid, 1995; Combs et al., 2006; Sun et al., 2007) which includes questions relating to employees recruitment and selection, performance appraisal, compensation and rewards, promotion opportunities and information sharing system. The purpose of such HRM practices is to assess employees' skills, motivation and opportunity to perform. The sample items are "For this job, I have taken formal tests before being hired". The likert scale ranges from 1 ('strongly disagree') to 7 ('strongly agree'). The scale has high reliability ( $\alpha = 0.891$ ).

### **3.6.2 Affective Commitment**

Affective commitment is the mediating variable between perceived HRM practices-employees outcomes relationship. It is described as the strong sense of emotional attachment of employees with their organization and the job they do. It is either because they love their work or their goals align with the company's goals and therefore, they do not want to leave their company (Meyer & Allen, 1991).

To measure affective commitment, employees had been asked to respond on a 7-point scale of (Meyer & Allen, 1997; Porter, Steers, Mowday, & Boulean, 1974), consisting of 5 items. Where 1 represents "strongly disagree" and 7 represents "Strongly Agree". Sample item include "I am willing to work harder to help this company succeed". Studies show high reliability of this scale ( $\alpha = 0.847$ ).

### **3.6.3 Organizational Citizenship Behavior**

We have three dependent variables in our study. The first dependent variable is OCB. Organization citizenship behavior is described as the discretionary behavior of the employees to perform extra role behaviors for their organization (Organ, 1988). These roles are not part of their formal job description but employees perform them voluntarily, for example assisting co-workers in their job etc. It has been defined as "individual behavior that is discretionary, not directly or explicitly recognized by the formal reward system, and in the aggregate promotes the efficient and effective functioning of the Organization" (Organ, 1988).

Organizational citizenship behavior (OCB) has been assessed on 7-point Likert scale consisting of 6 items that has been taken from (Podsakoff et al., 2000). The response scale ranged from 1 ('strongly disagree') to 7 ('strongly agree'). Sample items included "I willingly share my expertise with my coworkers". The scale has reliability coefficient,  $\alpha = 0.759$ .

### **3.6.4 Intent to Remain with the Organization**

Intent to remain with the organization is defined as the likelihood of employees to stay with the organization (Kehoe & Wright, 2013). Employees who are more affectively committed with their organization are more likely to stay with their company because they have emotional attachment with the company and they feel obligated to increase effectiveness of their organization and perform better based on the concept of social exchange theory (Kehoe & Wright, 2013).

It has been measured with a four-item scale developed by (Van Breukelen, Van der Vlist, & Steensma, 2004). An example item is, "I would turn down a job with more pay in order to stay with this organization". Employees had been asked to respond on a 7-point likert scale. The Cronbach alpha for this construct is good ( $\alpha = 0.765$ ).

### **3.6.5 Absenteeism**

According to Sheridan (1985), absenteeism is defined as a form of withdrawal behavior. Kehoe & Wright (2013) say that employees who are more affectively committed with their organization are more likely to show less absenteeism as per social exchange theory.

We asked respondents to state the number of days they had remain absent from work in the last calendar year in order to measure absenteeism.

## **3.7 DATA ANALYSIS TECHNIQUES**

Potential data analysis techniques are now considered according to the use of positivist approach as mentioned above and the nature of data collected. First of all, descriptive analyses of key variables has been performed to get a feel of the data which has been collected from respondents.

Following four factors are identified by De Vaus (2002) that affect how data is analyzed. First, choice for method of the analysis depends upon the number of variables being examined in a study. It decides whether a Univariate (single variable), bivariate (two variables) or multivariate (three or more variables) method of analysis will be used. As, this study intends to explore the relationship between more than two variables, that is, a set of High-performance HRM practices and HRM outcomes (employees' attitudes and job behaviors). Therefore, multivariate statistics was used in this study.

Secondly, the next thing is to decide which analytical technique should be used. It depends upon the level of measurement of the variables. The level of measurement includes: nominal, ordinal, interval or ratio (Sapsford, 2006). According to De Vaus (2002), more influential and sophisticated analytical techniques are only suitable for interval-level variables. These are the measurements used in this study.

Thirdly, it is the ethical responsibility of the researcher to rightly present the results and findings. De Vaus (2002) recommends that 'negative' reporting and amending the theory is better than presenting 'positive' results which are fake or which support a researcher hypothesis. Hence the fairness and integrity of the researcher also affects how data is analyzed. Multivariate analysis techniques must be adopted for rigorous testing of scales and to ensure reliability of the scales.

### **3.7.1 Reliability of Scales (Cronbach Alpha)**

Reliability of the scales or Cronbach alpha has also been evaluated in this research. The reliability of a scale explains how free the scale is from random error. It can be illustrated using the most frequently-used method, an internal consistency score (Pallant, 2011). A scale is said to have high internal consistency when the items of scale are highly correlated and results in a Cronbach's alpha appear greater than 0.70 (Nunnally, 1978). All constructs that is HRM practices, affective commitment, OCB, intent to remain in the current study have achieved the acceptable Cronbach's alpha value of either equivalent to .70 or more than .70 (See Table 4.9). Hence it is suggesting that internal consistency of the scale (Nunnally, 1978) has been developed for this study.

Fourthly, the purpose of analysis is important in the choice of statistics to be applied. Descriptive statistics is applied where purpose of the analysis is to summarize arrangements in a sample but where the purpose is to explore the relationship among variables then a number of techniques can be used, as

suggested by Pallant (2011). To analyze the relationship between High-performance HRM practices and employees job attitudes and behaviors, the existing literature has widely used statistical procedures such as factor analysis and regression analysis (e.g., McDuffie 1995; Huselid 1995; Delaney and Huselid 1996; Guthrie 2001; Zheng *et al.* 2006, Guthrie *et al.* 2009). These techniques are discussed here in order to justify their use for the current research.

### **3.7.2 Correlation Test**

Correlation test has been performed to examine association between high-performance HRM practices and employee job attitude (affective commitment) and employees job behaviors (OCB, intent to remain and absenteeism). Correlation test is helpful in evaluating whether the study variables are positively related or negatively related. In addition, significance level (p- value) also indicates whether variables are significantly related or not.

### **3.7.3 Factor Analysis**

Factor analysis is applied to reduce a large number of interrelated variables to a more controllable number before applying those variables to further analysis, for example, in multiple regression (Pallant, 2011). With the help of factor analysis, we can separate uncorrelated factors which can be used for regression analysis, as this technique requires an independent variable that is uncorrelated in order to avoid the happening of multi-collinearity. As we are expecting multi-collinearity among our study variables that is why we have conducted Factor analysis before performing regression.

### **3.7.4 OLS Regression Analysis and Sobel Mediator Test**

After performing factor analysis, Ordinary Least Square (OLS) regression method has been performed to examine that how changes in the independent variables will bring changes in the dependent variable. Regression is a statistical technique that is used for assessing the relationship between one or more independent variables  $X_1, X_2 \dots X_k$  and a single dependent variable  $Y$  with continuous scale (Pallant, 2011). The Ordinary Least Squares (OLS) regression was chosen as an analytical technique for this research as it is appropriate according to the nature of the data collected and the research questions outlined for this study. Lastly, Sobel test was performed in order to check the mediating effect of affective commitment on the relationship of

high-performance HRM practices and Organization citizenship behavior, intent to remain and absenteeism.

### **3.8 CONCLUSION OF THE CHAPTER**

In order to investigate the research question and to test the hypotheses of this study, this chapter has clarified the logic for selecting the positivist paradigm and its corresponding research method (targeted population, sample size, sampling technique, measures etc). The data collection procedures for the survey were discussed. The suitability of adopting various data analytical techniques was also explained. The results from the data analysis are presented next in Chapters 4 and 5.

## **CHAPTER 4**

### **DATA ANALYSIS AND INTERPRETATION**

In this chapter, collected data through survey was analyzed and interpreted by using SPSS 20 and Sobel Mediator test Calculator. Different mathematical and statistical tests have been performed, for example, reliability analysis test, and descriptive analysis of our demographic variables, mean and standard deviation of study variables. Correlation test was performed to see association and direction of association between variables. Then, Ordinary least Square Regression analysis has been performed to test the impact of independent variables on dependent variables of this study. Sobel test was conducted lastly to test the mediation. Following are the details of all these various data analysis techniques which we have been applied to get the results.

#### **4.1 RESPONDENTS CHARACTERISTICS**

Our sample comprises 317 respondents from which 63% are females. 65% fall within the age group of 21-30 and 25.9% fall within the age group of 31-40 years. Respondents below 20 and above 40 years are small in number. Complete details of frequency distribution and percentages of the age category are provided in Table 4.1.

**Table 4.1**  
**Details of Frequency Distribution and Percentages of the Age Category**

	<b>Category</b>	<b>Frequency</b>	<b>Percentage</b>
<b>Age Distribution of the Respondents</b>	Under 20	3	0.9
	21-30	206	65.0
	31-40	82	25.9
	41-50	20	6.3
	51-60	6	1.9
	Total	317	100
<b>Gender Distribution of the Respondents</b>	Male	115	36.3
	Female	201	63.4
	4	1	0.3
	Total	317	100
<b>Marital Status of the Respondents</b>	Single	201	63.4
	Married	116	36.6
	Total	317	100
<b>Job Designation of the Respondents</b>	Doctors	226	71.3
	Nurses	91	28.7
	Total	317	100
<b>Job Type of the Respondents</b>	Permanent	137	43.2
	Fixed Contract	178	56.2
	Others	2	0.6
	Total	317	100
<b>Income Level of the Respondents</b>	Below 20K	38	12.0
	21-30K	53	16.7
	31-40K	84	26.5
	41-50K	74	23.3
	51-60K	62	19.6
	61K-100000	5	1.6
	Above Rs. 100000	1	0.3
	Total	317	100
<b>Hospital Type</b>	Public	293	92.4
	Private	24	7.6
	Total	317	100

Out of total respondents, approximately 63% respondents belong to the female category which means that our targeted population i.e. doctors and nurses of public and private hospitals majorly consist of female category. As we can see from frequency distribution of marital status in Table 4.1 that 63.4% respondents are single or unmarried while remaining are married. Out of 317 medical professionals, 71% are doctors and remaining 28.7% are nurses. It is because either nurses were busy or not willing to respond to the questionnaires. In addition, those who were willing had less understanding about the fulfillment of forms.

Out of 317 respondents, 56% are those who are on contractual jobs having fixed tenure contract with their hospitals but they were full time employees and remaining 43% are permanent employees of the hospitals. 26.5% respondents belong to the income category of 31-40k, 23.3% have income level between 41-50k while very few respondents have income below 20 thousand (12%) and above 60 thousand rupees (1.9%).

Out of 317 respondents, 92.4% respondents are employees of Public or Government hospitals and only 7.6% belong to the private hospitals. It was relatively easy to approach doctors and nurses in government hospitals while the response rate from private hospitals has been very low.

As it can be seen from the frequency Table 4.2 that majority of our respondents that are medical professionals belong to public hospitals i.e. 29% from Jinnah hospital, 16% are from General hospital, around 12% are from Services hospital. While response rate of private hospitals is comparatively very low i.e. 2.5% from Rasheed Hospital DHA, Fauji Foundation 2.8 %, CMH 1.6%. It is because government hospitals are over-crowded with patients due to their low cost and availability of doctors and nurses is comparatively high in day hours while in private hospitals, accessibility of many doctors and nurses for data collection was a problem because either they were available during their limited duty hours only or were too busy to fill up the questionnaire.

**Table 4.2**  
**List of the Approached Hospitals**

Category	Frequency	Percentage
Allied Hospital Faisalabad	26	8.2
Civil Hospital Faisalabad	2	0.6
CMH Lahore	5	1.6
District Headquarter Hospital (DHQ)	8	2.5
Fauji Foundation Hospital Lahore	9	2.8
Sir Ganga Ram Hospital Lahore	30	9.5
General Hospital	51	16.1
Kot-Khawaja Saeed Hospital Lahore	11	3.5
Jinnah Hospital	94	29.7
Mayo Hospital	21	6.6
Punjab Institute of Cardiology	1	0.3
Rasheed Hospital Lahore	9	2.8
Services Hospital	1	13.2
Shalimar Hospital Lahore	1	0.3
Sheikh Zaid Hospital Lahore	1	0.3
Tehsil Headquarter (THQ) Faisalabad.	6	1.9
<b>Total</b>	<b>317</b>	<b>100</b>

#### **4.2 MEAN AND STANDARD DEVIATION OF THE STUDY VARIABLES**

The descriptive statistics of the study variables is presented in Table 4.3. The mean of majority of the High-performance Human resource management practices on a scale of 1 to 7 is more than 4 which indicates that according to employees' perception, there is average level of implementation of performance-oriented Human Resource management practices in the hospitals of Pakistan. HRM practices such as "Taken formal tests before hiring" got the highest mean that is 4.87. Similarly, other performance-oriented HRM practices with high mean values are "Structured interviews before hiring" (M=4.81) and "Involvement in formal participation process" (M=4.60).

Affective Commitment is showing mean values of greater than 5 on a scale of 1 to 7 which indicates that employees of government and private hospitals of Pakistan feel quite committed to their jobs as a result of prevailing high-performance HRM practices. Items showing highest mean value for affective commitment includes “Willing to work harder to help hospital succeed” (M=5.51) and “Feel strong sense of belonging” (M=5.47).

All items of Organization Citizenship Behavior (OCB) are having means greater than 5 on a scale of 1 to 7 except one “Provides constructive suggestions” (M=4.61). It explains that doctors and nurses of hospitals in Pakistan perform voluntary behaviors that are OCB, quite well. The OCB items that got highest mean values are “Willingly share my expertise with coworkers” (M=5.83) and “Help others having large amount of work” (M=5.74).

**Table 4.3**  
**Means and Standard Deviations of Study Variables**

<b>Variables</b>	<b>Items</b>	<b>Mean</b>	<b>SD</b>	<b>N</b>
<b>High-Performance HRM Practices</b>	I had taken formal tests for this job (paper and pencil or work -sample) before being hired.	4.87	1.923	317
	I had undergone structured interviews (Job related questions, same questions asked for all applicants) for this job before being hired.	4.81	1.851	317
	I am involved in formal participation processes such as quality improvement groups, problem solving groups, or roundtable discussions in this job.	4.60	1.784	317
	I am having a reasonable and fair complaint process in this job.	4.44	1.878	317
	In this job, I have the opportunity to earn group bonuses for productivity, performance or other group performance outcomes.	3.75	2.139	317
	I have the opportunity to earn individual bonuses (or commission) for productivity, performance or other individual performance outcomes at this job.	3.55	2.122	317
	At least once a year I receive a formal evaluation of my performance in this job.	4.47	1.769	317
	I regularly receive formal communication regarding hospital goals and objectives in this job.	4.25	1.855	317
	In the last 4 months, the hospital has made a change in how work is completed in my department based on the suggestion(s) of an associate or group of associates.	4.41	1.849	317
	Pay raises in this job are based on job performance.	3.65	2.158	317
	Qualified associates in this job have the opportunity to be promoted to positions of greater pay and/or responsibility within the hospital.	4.31	1.964	317
	I am allowed to make important work related decisions such as how the work is done or implement new ideas in this job.	4.51	1.775	317
	The hospital hires only the very best people for this job.	4.33	1.936	317
	Total pay for this job is the highest for the type of work in the area.	3.64	2.077	317
	On average, some hours of formal training I do receive each year in this job.	4.30	1.986	317
<b>Affective Commitment</b>	I am willing to work harder to help this hospital succeed.	5.51	1.540	317
	I am proud to work for this hospital.	5.46	1.566	317
	I feel a strong sense of belonging to this hospital.	5.47	1.444	317
	I would refer a friend to come work at this hospital.	5.35	1.749	317
	Overall, I am satisfied working at this hospital.	5.36	1.616	317

<b>Variables</b>	<b>Items</b>	<b>Mean</b>	<b>SD</b>	<b>N</b>
<b>Organization Citizenship Behavior (OCB)</b>	I provide constructive suggestions about how my department can improve its effectiveness.	4.61	1.759	317
	For issues that may have serious consequences, I express my opinions honestly even when others may disagree.	5.00	1.546	317
	I “touch-base” with my coworkers before initiating actions that might affect them.	5.10	1.443	317
	I encourage others to try new and effective ways of doing their job.	5.38	1.408	317
	I help others who have large amounts of work.	5.74	1.220	317
	I willingly share my expertise with my coworkers.	5.83	1.174	317
<b>Intent to remain</b>	I would turn down a job with more pay in order to stay with this hospital.	4.06	1.922	317
	I plan to spend my career at this hospital.	4.84	1.719	317
	I intend to stay at this organization for at least the next 12 months.	5.14	1.715	317
	I do not plan to look for a job outside of this hospital in the next 6 months.	4.98	2.115	317
<b>Absenteeism</b>	How many days did you miss from work in the last 12 months?	10.97	12.848	317

Whereas mean values of Intent to remain items fall between 4-5 on a scale of 1 to 7. The highest mean for the intent to remain is M=5.14 for “Intend to stay for at-least next 12 months”. Similarly, we can see from the Table 4.3 that absenteeism has the mean value of M=10.97 which indicates that employees of hospitals in Pakistan have absenteeism rate of around 11 days in a year.

### 4.3 RELIABILITY ANALYSIS

Cronbach’s alpha is estimated for measuring the reliabilities. The scales of all study variables are reliable, as alphas are greater than 0.75. The complete detail is provided in Table 4.4.

**Table 4.4**  
**Reliability Analysis**

<b>Variables</b>	<b>Items</b>	<b>Cronbach’s Alpha</b>
High-Performance HRM Practices	15	0.891
Affective Commitment	5	0.847
Organizational Citizenship Behavior	6	0.759
Intent to Remain	4	0.765

#### **4.4 CORRELATIONS MATRIX**

Bi-variate correlations of the study variables are presented in Table 4.5. Perceived High-performance HRM practices has a positive and significant relationship with Affective Commitment (0.473,  $p < 0.01$ ), Organization Citizenship Behavior (0.508,  $p < 0.01$ ), Intent to remain (0.523,  $p < 0.01$ ) while Perceived HRM practices show insignificant relationship with absenteeism. Affective Commitment is positively correlated with OCB (0.468,  $p < 0.01$ ) and Intent to remain (0.613  $p < 0.01$ ) while it has insignificant relation with absenteeism. Hence all these correlations are in hypothesized directions except H1c.

**Table 4.5**  
**The Correlation Matrix**

Variables	CORRELATIONS																																					
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31							
1 HRM1	1																																					
2 HRM2	.438**	1																																				
3 HRM3	.256**	.388**	1																																			
4 HRM4	.159**	.366**	.435**	1																																		
5 HRM5	.084	.235**	.334**	.440**	1																																	
6 HRM6	.046	.149**	.216**	.407**	.680**	1																																
7 HRM7	.102	.127*	.233**	.313**	.463**	.432**	1																															
8 HRM8	.085	.232**	.306**	.434**	.479**	.479**	.463**	1																														
9 HRM9	.068	.157**	.206**	.333**	.525**	.484**	.410**	.570**	1																													
10 HRM10	.071	.203**	.263**	.406**	.593**	.691**	.457**	.408**	.470**	1																												
11 HRM11	.112*	.198**	.175**	.415**	.516**	.448**	.386**	.447**	.417**	.594**	1																											
12 HRM12	.083	.167**	.215**	.373**	.452**	.420**	.332**	.451**	.460**	.466**	.491**	1																										
13 HRM13	.058	.161**	.234**	.274**	.438**	.471**	.325**	.415**	.376**	.483**	.422**	.496**	1																									
14 HRM14	.088	.143*	.230**	.392**	.519**	.583**	.371**	.369**	.378**	.571**	.474**	.405**	.455**	1																								
15 HRM15	.080	.246**	.249**	.348**	.421**	.438**	.222**	.451**	.371**	.382**	.384**	.335**	.394**	.508**	1																							
16 AC1	.161**	.097	.009	.067	.075	.037	.139*	.187**	.218**	.077	.226**	.267**	.227**	.206**	.122*	1																						
17 AC2	.087	.184**	.109	.183**	.173**	.155**	.200**	.248**	.266**	.198**	.382**	.351**	.257**	.246**	.138*	.695**	1																					
18 AC3	.175**	.229**	.157**	.321**	.064	.199**	.126*	.232**	.236**	.239**	.272**	.276**	.183**	.234**	.129*	.361**	.612**	1																				
19 AC4	.155**	.235**	.218**	.261**	.289**	.226**	.315**	.316**	.369**	.286**	.417**	.366**	.306**	.306**	.233**	.505**	.636**	.467**	1																			
20 AC5	-.025	.146**	.211**	.295**	.390**	.308**	.304**	.393**	.398**	.404**	.488**	.469**	.347**	.398**	.291**	.431**	.531**	.379**	.621**	1																		
21 OCB1	.203**	.180**	.292**	.340**	.295**	.278**	.228**	.316**	.379**	.241**	.191**	.399**	.279**	.348**	.246**	.374**	.322**	.268**	.386**	.304**	1																	
22 OCB2	.224**	.270**	.239**	.252**	.214**	.145**	.200**	.180**	.223**	.186**	.269**	.290**	.197**	.232**	.218**	.285**	.226**	.199**	.242**	.182**	.527**	1																
23 OCB3	.128*	.223**	.258**	.317**	.244**	.240**	.127*	.261**	.182**	.205**	.129*	.199**	.240**	.257**	.327**	.134*	.112*	.256**	.102	.178**	.358**	.366**	1															
24 OCB4	.175**	.266**	.283**	.330**	.258**	.190**	.168**	.221**	.291**	.220**	.254**	.319**	.164**	.054	.171**	.196**	.273**	.299**	.310**	.184**	.326**	.367**	.337**	1														
25 OCB5	.236**	.176**	.246**	.214**	.148**	.090	.139*	.144*	.170**	.116*	.274**	.184**	.174**	.134*	.185**	.223**	.281**	.286**	.298**	.152**	.183**	.276**	.227**	.478**	1													
26 OCB6	.229**	.183**	.208**	.154**	.095	.073	.125*	.130*	.155**	.147**	.265**	.184**	.134*	.095	.158**	.306**	.304**	.306**	.252**	.233**	.236**	.349**	.338**	.455**	.457**	1												
27 ITR1	.176**	.230**	.214**	.236**	.283**	.345**	.177**	.290**	.297**	.331**	.300**	.359**	.305**	.313**	.294**	.260**	.311**	.237**	.239**	.263**	.414**	.265**	.171**	.179**	.105	.076	1											
28 ITR2	.132*	.108	.182**	.305**	.284**	.294**	.311**	.349**	.335**	.356**	.399**	.412**	.409**	.320**	.164**	.468**	.540**	.429**	.509**	.485**	.371**	.241**	.165**	.158**	.210**	.192**	.461**	1										
29 ITR3	.142*	.131*	.108	.273**	.179**	.149**	.235**	.250**	.382**	.216**	.294**	.345**	.299**	.165**	.140*	.456**	.561**	.422**	.512**	.471**	.330**	.249**	.189**	.179**	.185**	.188**	.356**	.664**	1									
30 ITR4	.023	.120*	.065	.245**	.301**	.288**	.237**	.223**	.339**	.299**	.330**	.260**	.270**	.227**	.184**	.213**	.328**	.215**	.323**	.336**	.199**	.157**	.086	.040	.057	.113*	.305**	.459**	.527**	1								
31 ABS1	.074	-.045	-.005	-.030	.024	.055	-.095	-.129*	-.100	.025	.051	-.053	.042	.085	.099	-.116*	-.079	-.068	-.034	-.046	-.109	-.027	.005	-.114*	.034	-.009	-.064	-.017	-.044	-.008	1							

\* p < 0.05, \*\* p < 0.01

## **4.5 FACTOR ANALYSIS**

Factor analysis is used to reduce a bulk of data and deriving essential factors from a set of correlated variables. As it is revealed from the correlation matrix that high-performance HRM practices are inter-related and there exist correlations among other variables such as employees' attitudes and behaviors too. If moderate and significant correlations among these variables occur, this can cause to a problem of multi-collinearity, which can affect the results of subsequent regression analyses. Factor analysis of HRM practice and employees outcomes enables the production of non-correlated variables for the regression analysis, which is used to assess the strengths of relationships between HRM practices, employees' job outcomes in this study. This section presents the results of the factor analysis:

### **4.5.1 High-performance HRM Practices Perceptions**

The rotated component matrix from the factor analysis of 15 items of the "High-performance HRM practices" scale is shown in Table 4.6. The rotated component matrix has extracted two factors from set of HRM practices. The first factor consists of first four HRM practices. The first factor has higher means on items related to "Taken formal tests before hiring" has loaded with mean value of .731, "Structured interviews before hiring" (.811) and "Involvement in formal participation process" (.622). It means that these HR practices are highly related with each other. Hence, these HR practices could be labeled as "Staffing practices".

**Table 4.6**  
**Rotated Component Matrix (High-Performance HRM Practices)**

<b>Coding</b>	<b>Items</b>	<b>Factor</b>	<b>Factor Name</b>
<b>HRM-1</b>	I had taken formal tests for this job (paper and pencil or work -sample) before being hired. (.731)	<b>Factor 1</b>	<b>Staffing Practices</b>
<b>HRM-2</b>	I had undergone structured interviews (Job related questions, same questions asked for all applicants) for this job before being hired. (.811)		
<b>HRM-3</b>	I am involved in formal participation processes such as quality improvement groups, problem solving groups, or roundtable discussions in this job. (.662)		
<b>HRM-4</b>	I am having a reasonable and fair complaint process in this job. (.489)		
<b>HRM-5</b>	In this job, I have the opportunity to Earn group bonuses for productivity, performance or other group performance outcomes. (.770)	<b>Factor 2</b>	<b>Other Formal HRM Practices</b>
<b>HRM-6</b>	I have the opportunity to earn individual bonuses (or commission) for productivity, performance or other individual performance outcomes at this job. (.802)		
<b>HRM-7</b>	At least once a year I receive a formal evaluation of my performance in this job. (.600)		
<b>HRM-8</b>	I regularly receive formal communication regarding hospital goals and objectives in this job. (.672)		
<b>HRM-9</b>	In the last 4 months, the hospital has made a change in how work is completed in my department based on the suggestion(s) of an associate or group of associates. (.688)		
<b>HRM-10</b>	Pay raises in this job are based on job performance. (.790)		
<b>HRM-11</b>	Qualified associates in this job have the opportunity to be promoted to positions of greater pay and/or responsibility within the hospital. (.702)		
<b>HRM-12</b>	I am allowed to make important work related decisions such as how the work is done or implement new ideas in this job. (.664)		
<b>HRM-13</b>	The hospital hires only the very best people for this job. (.663)		
<b>HRM-14</b>	Total pay for this job is the highest for the type of work in the area. (.720)		
<b>HRM-15</b>	On average, some hours of formal training I do receive each year in this job. (.584)		

**Extraction Method: Principal Component Analysis.**

**Rotation Method: Varimax with Kaiser Normalization.**

**a. Rotation Converged in 3 Iterations.**

The second factor consists of remaining eleven HRM practices which is labeled as “Other formal HRM practices”. Existing literature supports that formal HRM practices must include practices such as employees training, information sharing, performance based rewards, merit-based promotion opportunities etc (Kehoe & Wright, 2013). The second factor has higher means on items related to “Having opportunity to earn individual bonuses for individual performance outcomes” (.802), “Pay raises on job performance” (.790), “Highest total pay in area” (.720) and “Having opportunity to earn group bonuses for group performance outcomes” (.770). These HR practices are closely related and somewhat determine the formal HRM practices. Thus, these are termed as “Other formal HRM practices”.

#### 4.5.2 Affective Commitment

The rotated component matrix resulted from the factor analysis of the 5 items of Affective Commitment scale is shown in Table 4.7. The result is one factor solution. All items are highly loaded with mean values either greater than .7 or .8. It appears that “Willingness to work harder for hospital success” (.763), “Proud to work for this hospital” (.891), “Strong sense of belonging to this hospital” (.705), “I would refer a friend to come work” (.826), and “Overall, satisfied working at this hospital” (.748) are closely associated and that is why these are termed as “Affective Commitment”. Existing literature also provides support to this phenomenon that affective commitment scale must incorporate all items which explain a strong bond of employees and a strong sense of belonging with their organization (see Kehoe & Wright, 2013).

**Table 4.7**  
**Rotated Component Matrix (Affective Commitment)**

<b>Coding</b>	<b>Items</b>	<b>Factor</b>	<b>Factor Name</b>
<b>AC-1</b>	I am willing to work harder to help this hospital succeed. (.763)	<b>Factor 1</b>	<b>Affective Commitment</b>
<b>AC-2</b>	I am proud to work for this hospital. (.891)		
<b>AC-3</b>	I feel a strong sense of belonging to this hospital. (.705)		
<b>AC-4</b>	I would refer a friend to come work at this hospital. (.826)		
<b>AC-5</b>	Overall, I am satisfied working at this hospital. (.748)		

**Extraction Method: Principal Component Analysis**  
**a. 1 Components extracted**

### 4.5.3 Organization Citizenship Behavior (OCB)

The rotated component matrix resulted from the factor analysis of the 6 items of Organization Citizenship Behavior (OCB) scale is shown in Table 4.8. The result is two factors solution. The first factor is labeled as “Courtesy” because it has relatively high loading on item related to employees’ actions which are usually performed in good manners such as “Providing constructive suggestions to the department” (.852), “To express honest opinion” (.779) and “Touching-base with co-workers before taking actions” (.623).

**Table 4.8**  
**Rotated Component Matrix (Organization Citizenship Behavior)**

<b>Coding</b>	<b>Items</b>	<b>Factor</b>	<b>Factor Name</b>
<b>OCB-1</b>	I provide constructive suggestions about how my department can improve its effectiveness. (.852)	<b>Factor 1</b>	<b>Courtesy</b>
<b>OCB-2</b>	For issues that may have serious consequences, I express my opinions honestly even when others may disagree. (.779)		
<b>OCB-3</b>	I “touch-base” with my coworkers before initiating actions that might affect them. (.623)		
<b>OCB-4</b>	I encourage others to try new and effective ways of doing their job. (.717)	<b>Factor 2</b>	<b>Expanded Efforts</b>
<b>OCB-5</b>	I help others who have large amounts of work. (.841)		
<b>OCB-6</b>	I willingly share my expertise with my coworkers. (.755)		

**Extraction Method: Principal Component Analysis.**

**Rotation Method: Varimax with Kaiser Normalization.**

**a. Rotation converged in 3 iterations.**

Second factor consists of remaining three items from the scale of OCB and is labeled as “Expanded Efforts” as this factor combines the items related to “Encouraging others to try new ways” (.717), “Helping others who have large amounts of work” (.841) and “Willingly share expertise with coworkers” (.755). According to Kehoe & Wright (2013), Organization citizenship behavior scale must include all those items that better explains an employee discretionary behavior which is not part of his formal job description. These job behaviors are performed by employees when they are committed to their jobs and for effective working of organization. Hence, these actions are classified as “Expanded Efforts”.

#### 4.5.4 Intent to Remain

Table 4.9 is showing the results of factor analysis which has been performed to merged correlated items of Intent to remain scale into factors. Here, the result is one factor solution. This factor is loaded high on items related to “Would turn down a job with more pay to stay” (.653), “Planning to spend my career at this hospital” (.853), “Intend to stay at this organization for at least the next 12 months” (.844) and

“No plan to look for a job outside of this hospital in the next 6 months” (.736). Kehoe and Wright (2013) explain that intention of employees to remain with the organization is developed and maintained when they perceive that performance-oriented HRM practices are being implemented by their HR managers and hence they plan to stay with the organization for longer term as a result of their committed job attitude. The values of factor analysis are indicating the close association between scale items and hence these are named as “Affective commitment”.

**Table 4.9**  
**Rotated Component Matrix (Intent to Remain)**

<b>Coding</b>	<b>Items</b>	<b>Factor</b>	<b>Factor Name</b>
<b>ITR-1</b>	I would turn down a job with more pay in order to stay with this hospital. (.653)	<b>Factor 1</b>	<b>Intent to Remain</b>
<b>ITS-2</b>	I plan to spend my career at this hospital. (.853)		
<b>ITR-3</b>	I intend to stay at this organization for at least the next 12 months. (.844)		
<b>ITR-4</b>	I do not plan to look for a job outside of this hospital in the next 6 months. (.736)		

*Extraction Method: Principal Component Analysis*  
*a. 1 Components extracted*

#### 4.5.5 Absenteeism

As Absenteeism scale has only one item for its measurement, hence factor analysis by its very nature, cannot be performed on it and no factors are extracted from this scale. See Table 4.10.

**Table 4.10**  
**Absenteeism**

<b>Coding</b>	<b>Items</b>	<b>Factor Name</b>
<b>ABS-1</b>	How many days did you miss from work in the last 12 months?	<b>Absenteeism</b>

#### **4.6 HYPOTHESES TESTING WITH OLS REGRESSION ANALYSIS**

OLS regression analysis is often used to describe that how well an independent variable or a set of independent variable is able to predict a dependent variable (Pallant, 2010). As the purpose of our study is to examine the impact of employees perception of high-performance HRM practices on employees' job attitudes and behaviors that is why OLS regression is the right tool to test the proposed hypotheses of this study.

Secondly, the OLS regression analysis also provides information about the overall Model fit. It also gives knowledge regarding the relative contribution of each variable that forms a model (Pallant, 2011). This research has also a conceptual model that is made up of both independent and dependent variables. In order to test the model, several hypotheses expressing the relationships between our study variables, have also been developed. That is why, it is believed that using OLS regression is sufficient and effective to predict the dependent variables (employees' job attitudes and behaviors) by independent variable (employees perception of high-performance HRM practices) in this study.

Thirdly and lastly, OLS regression has been used widely by various empirical studies in the past to predict the impact of HRM practices and organization performance (e.g., Huselid 1995; Guthrie 2001; Guthrie *et al.* 2009). The purpose of present study is to replicate the data analysis techniques which are fundamental to understand the relation between high-performance HRM practices and employees' job attitudes and behaviors (affective commitment, OCB, intent to remain and absenteeism) in the context of Pakistani health sector.

##### **4.6.1 Relationship between Perceived High-Performance HRM Practices and Organization Citizenship Behavior.**

Under H1a, we hypothesized the positive relationship of employees' perception of High performance HRM practices adopted by health-sector in

Pakistan with organization citizenship behavior (OCB). High-performance HRM practices are divided into two factors by performing factor analysis that are labeled as “Staffing practices” and “Other formal HRM practices” (see Table 4.6). Similarly, OCB has also been divided into two factors by conducting factor analysis and these factors are termed as “Courtesy” and “Expanded Efforts” (see Table 4.8).

**Table 4.11**  
**Relationship of HRM Practices with**  
**OCB, Intent to remain and Absenteeism**

High-performance HRM Practices	Courtesy	Expanded Efforts	Intent to Remain	Absenteeism
	Model 1	Model 2	Model 3	Model 4
Staffing Practices	0.150***	0.361***	0.491***	-0.001
Other formal HR Practices	0.283***	0.283***	0.165***	-0.004
<b>Model Fit</b>				
R <sup>2</sup>	0.103	0.210	0.269	0.000
Adjusted R <sup>2</sup>	0.097	0.205	0.264	-0.006
F Value	17.991***	41.735***	57.651***	0.002

\*p < 0.1; \*\*p < 0.05; \*\*\*p < 0.01 (All variables showed Beta Coefficients with their Sig. levels.)

OLS regression was performed to test the hypothesis. The empirical model 1-2 are presented in the form of following formula:

$$\text{Courtesy} = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \dots + \beta_{15} X_{15} + \varepsilon$$

$$\text{Expanded Efforts} = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \dots + \beta_{15} X_{15} + \varepsilon$$

where “X1 to X15” represent the high-performance HRM practice factors, “β<sub>i</sub>” represents the regression coefficients, “β<sub>0</sub>” represents the constant and “ε” represents the error.

Results of the analysis are provided in Table 4.11. Model 1 is showing the relationship between Staffing practices and Courtesy (coefficient=0.150, p < 0.01). It means that there is a positive relationship between staffing practices and courtesy and the relationship is significant at 0.01 significance level. Model 2 in Table 4.11 is expressing the relationship between Staffing practices and Expanded efforts (coefficient=0.361, p < 0.01) which shows that staffing practices are positively and significantly related to the Expanded efforts.

Similarly, Model 1 in Table 4.11 is also exhibiting the positive and significant relationship between other formal HRM practices and Courtesy (coefficient= 0.283,  $p < 0.01$ ) and Model 2 indicates that other formal HRM practices are positively and significantly related with Expanded efforts (coefficient=0.283,  $p < 0.01$ ). Considering the results extracted from Model 1 and Model 2, it is said that H1a is strongly supported.

The summary of the model fits (i.e.,  $R^2$  and F-values) for each model suggests that both models (1 and 2) are reasonably fit with overall significant levels of  $p < 0.01$ . It means set of 15 high-performance HRM practices factors have reasonable prediction power for courtesy ( $R^2 = 0.103$ ,  $F = 17.991$ ,  $p < 0.01$ ) and Expanded efforts ( $R^2 = 0.210$ ,  $F = 41.735$ ,  $p < 0.01$ ). It also shows that combination of HRM practices are significantly related with organization citizenship behavior (courtesy and expanded efforts). Hence our first hypothesis is fully supported.

#### **4.6.2 Relationship between Perceived High-Performance HRM Practices and Intent to Remain with the Organization.**

Under H1b, positive relationship between perceived high-performance HRM practices and intent to remain with the organization is hypothesized. The empirical model 3 is presented in the form of following formula:

$$\text{Intent to remain} = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \dots + \beta_{15} X_{15} + \varepsilon$$

where “X1 to X15” represent the high-performance HRM practice factors, “ $\beta_i$ ” represents the regression coefficients, “ $\beta_0$ ” represents the constant and “ $\varepsilon$ ” represents the error.

Model 3 in Table 4.11 is representing the results for this hypothesis. Factor 1 of set of HRM practices that is Staffing practices is having positive and significant relationship with intent to remain (coefficient= 0.491,  $p < 0.01$ ). While factor 2 that is Other formal HRM practices is exhibiting positive relation with intent to remain with the organization and the relationship is also significant at 1% confidence interval (coefficient= 0.165,  $p < 0.01$ ).

It is also sown from the results of model 3 that set of high-performance HRM practices factors have good explanatory power for intent to remain ( $R^2 = 0.269$ ) and model is significantly fit for intent to remain (  $F= 57.651$ ,  $p < 0.01$ ). Hence, H1b is also strongly supported.

#### **4.6.3 Relationship between Perceived High-Performance HRM Practices and Absenteeism.**

Under H1c it is hypothesized that there exist a negative relationship between employees perception of high-performance HRM practices and employees absenteeism. The empirical model 4 is presented in the form of following formula:

$$\text{Absenteeism} = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \dots + \beta_{15} X_{15} + \varepsilon$$

where “X1 to X15” represent the high-performance HRM practice factors, “ $\beta_i$ ” represents the regression coefficients, “ $\beta_0$ ” represents the constant and “ $\varepsilon$ ” represents the error.

The results of OLS regression analysis are presented in Model 4 of Table 4.11. According to the results, high-performance HRM practices adopted by hospitals in Pakistan are reducing absenteeism but these HRM practices are not significantly impacting on Absenteeism. Staffing practices are contributing no changes in Absenteeism (coefficient= -0.001, p = NS). Same is the case with other formal HRM practices and absenteeism (coefficient= -0.004, p = NS). The model fit values ( $R^2 = 0.000$ ,  $F = 0.002$ ,  $p = NS$ ) also show that high-performance HRM practices factors are not significantly related with absenteeism and do not have enough explanatory power for absenteeism. Hence, based on our results from model 4, we can say that H1c is rejected.

#### **4.6.4 Relationship between Perceived High-Performance HRM Practices and Affective Commitment.**

Under H2, we hypothesized that there will be positive and significant relationship between employees perception of high-performance HRM practices and affective commitment. The empirical model 5 is presented in the form of following formula:

$$\begin{aligned} \text{Affective Commitment} \\ = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \dots + \beta_{15} X_{15} + \varepsilon \end{aligned}$$

where “X1 to X15” represent the high-performance HRM practice factors, “ $\beta_i$ ” represents the regression coefficients, “ $\beta_0$ ” represents the constant and “ $\varepsilon$ ” represents the error.

Ordinary Least Square (OLS) Regression analysis results are presented in Model 5 of Table 4.12. Greater use of performance-oriented staffing practices in hospitals brought 42% increase in the affective commitment level of doctors and nurses (coefficient = 0.428,  $p < 0.01$ ) and relationship between staffing practices and affective commitment is also significant.

**Table 4.12**  
**Relationship of HRM Practices with Affective Commitment**

High-Performance HRM Practices	Affective Commitment Model 5
Staffing Practices	.428***
Other formal HR Practices	.184***
<b>Model Fit</b>	
R <sup>2</sup>	.217
Adjusted R <sup>2</sup>	.212
F Value	43.556***

\* $p < 0.1$ ; \*\* $p < 0.05$ ; \*\*\* $p < 0.01$

(All variables showed Beta Coefficients with their Sig. levels.)

On the other hand, other formal HRM practices are also positively and significantly related with affective commitment of employees (coefficient = 0.184,  $p < 0.01$ ). Results showed that model 5 is significant ( $F=43.556$ ,  $p < 0.01$ ) and has a better explanatory power ( $R^2=.217$ ). Hence, based on the above results our H2 is accepted.

#### **4.6.5 Relationship between Affective Commitment and Organization Citizenship Behavior (OCB).**

Now OLS regression analysis has been perform to test whether affective commitment is able to predict organization citizenship behavior, intent to remain and absenteeism. Table 4.13 showed the results of Model 6, Model 7, Model 8 and Model 9. Model 6 explains the relationship between affective commitment and OCB factors. The empirical model 6 is presented in the form of following formula:

$$\text{Courtesy} = \beta_0 + \beta_1X_1 + \beta_2X_2 + \beta_3X_3 + \dots + \beta_5X_5 + \varepsilon$$

where “X1 to X5” represent the affective commitment factors, “ $\beta_i$ ” represents the regression coefficients, “ $\beta_0$ ” represents the constant and “ $\varepsilon$ ” represents the error.

Factor analysis was performed to extract the uncorrelated factors from the OCB scale. The result was two factor solution (see Table 4.8). The results of OLS regression shows that affective commitment significantly increases the Courtesy (Factor 1 of OCB) actions of employees in the hospitals (coefficient = 0.322,  $p < 0.01$ ). Fitness of the model overall is shown by  $F=36.443$  and it is significantly fit at 0.01 significance level.

Similarly, the relationship between affective commitment and Expanded efforts (Factor 2 of OCB) is shown by Model 7. The empirical model 7 is presented in the form of following formula:

$$\text{Expanded Efforts} = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \dots + \beta_5 X_5 + \varepsilon$$

where “X1 to X5” represent the affective commitment factors, “ $\beta_i$ ” represents the regression coefficients, “ $\beta_0$ ” represents the constant and “ $\varepsilon$ ” represents the error.

Results showed that employees of health sector in Pakistan are quite committed to their jobs as a result of prevailing performance oriented HRM practices and this feeling of commitment significantly increases the Expanded efforts by employees (coefficient = 0.333,  $p < 0.01$ ). Results also showed that overall model is significantly fit ( $F = 39.311$ ,  $p < 0.01$ ) and has reasonable explanatory power ( $R^2 = 0.111$ ).

#### **4.6.6 Relationship between Affective Commitment, Intent to remain and Absenteeism.**

OLS Regression analysis was conducted to examine that how well employees’ job attitude (affective commitment) is able to predict employees’ job behaviors (intent to remain and absenteeism). The empirical model 8 and 9 is presented in the form of following formula:

$$\begin{aligned} \text{Intent to remain} &= \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \dots + \beta_5 X_5 + \varepsilon \\ \text{Absenteeism} &= \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \dots + \beta_5 X_5 + \varepsilon \end{aligned}$$

where “X1 to X5” represent the affective commitment factors, “ $\beta_i$ ” represents the regression coefficients, “ $\beta_0$ ” represents the constant and “ $\varepsilon$ ” represents the error.

**Table 4.13**  
**Relationship of Affective Commitment**  
**with OCB, Intent to remain and Absenteeism**

Variables	Courtesy	Expanded Efforts	Intent to Remain	Absenteeism
	Model 6	Model 7	Model 8	Model 9
Affective Commitment	0.322***	0.333***	0.636***	-0.087
<b>Model Fit</b>				
R <sup>2</sup>	0.104	0.111	0.404	0.007
Adjusted R <sup>2</sup>	0.101	0.108	0.403	0.004
F Value	36.443***	39.311***	213.919***	2.376

\*p < 0.1; \*\*p < 0.05; \*\*\*p < 0.01

(All variables showed Beta Coefficients with their Sig. levels.)

Affective commitment appears to have positive and significant relationship with intent to remain with the organization (coefficient= 0.636, p < 0.01). The summary of the model fits (i.e., R<sup>2</sup> and F-values) for model 8 suggests that model 8 is reasonably fit with overall significant levels of p < 0.01. It means affective commitment has reasonable prediction power for intent to remain (R<sup>2</sup> =0.404, F =213.919, p < 0.01) and model is significantly fit overall.

Results from Model 9 of Table 4.13 showed that there exists negative relationship between affective commitment and absenteeism but the relationship is not statistically significant (coefficient = -0.087, p = non-significant). Model fit values (F= 2.376, p = non-significant) showed that model 9 is insignificant. Affective commitment of employees in hospitals of Pakistan helps reducing absenteeism but it is not significantly impacting employees' absenteeism. It means that despite the fact that high-performance HRM practices are quite prevalent in public and private hospitals of Pakistan and employees (doctors and nurses) are committed to their jobs but still HRM practices has no impact on employees' absenteeism. There may be several reasons for such results that are discussed in Chapter 5.

#### **4.7 HYPOTHESES TESTING WITH SOBEL MEDIATOR TEST**

Sobel test is used to test whether the mediation effect of a variable is significant to the relationship between an independent and dependent variable. This test is introduced by the Michael E. Sobel who was a professor of statistics in New York Columbia University (Sobel, 1982). In mediation, it is

hypothesized that the relationship between an independent and dependent variable is due to the effect of a third variable which is called mediator. When a mediator is added in the model in a regression analysis so resultant influence of independent variable is reduced. A Sobel test is used to determine whether this reduction in the effect of independent variable is significant and as a result the effect of mediation is statistically significant (Sobel, 1982).

#### 4.7.1 The Mediating Effect of Affective Commitment on the Relationship between High-Performance HRM Practices and OCB

Under H3a it is hypothesized that affective commitment positively mediates the relationship between perceived High-performance HRM practices and Organization Citizenship Behavior. Sobel mediation test was performed to test this hypothesis. As mentioned above, HRM practices were divided into two factors that is “staffing practices” and “other formal HRM practices” by conducting factor analysis. Similarly, OCB has two factors termed as “courtesy” and “expanded efforts”. Hence firstly, following are the results of Sobel test to examine the mediation effect of affective commitment on the relationship between staffing practices and courtesy presented in Table 4.14:

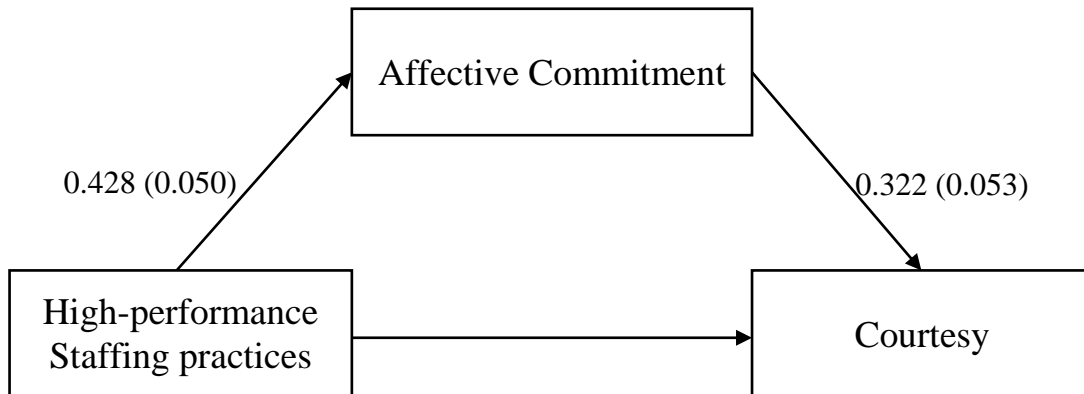
**Table 4.14**  
**Sobel Test Calculation for the Test of Mediation**  
**(Staffing Practices, Affective Commitment, Courtesy)**

Input		Test Statistic	Std. Error	p-value
<i>a</i>	0.428	4.95441766	0.00000036	0.00000073
<i>b</i>	0.322			
<i>Sa</i>	0.050			
<i>Sb</i>	0.053			

Where *a* is the unstandardized coefficient between staffing practices and affective commitment, *b* is the unstandardized coefficient between affective commitment and the courtesy. *Sa* is the standard error of *a* while *Sb* is the standard error of *b*. Test statistic value = 4.95 and  $p < 0.001$  showed that Sobel mediator test was significant as *p* value is very tiny. It means that the mediator of affective commitment significantly explained that courtesy (DV) is determined by the staffing practices (predictor) with the help of affective commitment (mediator).

In other words, if more performance-oriented staffing practices are applied in hospitals then we can predict that employees’ courtesy actions

would be increased only if they are more affectively committed to their jobs. In other words, if employees of hospitals feel less affectively committed to their jobs then we cannot confidently predict that their courtesy actions will be based on the high-performance staffing practices prevalent in the hospitals.



**Fig. 4.1: The Path Diagram: (Staffing Practices, Affective Commitment, Courtesy)**

Figure 4.1 illustrates unstandardized regression coefficients ( $a$  and  $b$ ) for the relationship between variables i.e. high-performance staffing practices and courtesy as mediated by affective commitment. The standard error for the relationship between staffing practices, affective commitment and courtesy ( $Sa$  and  $Sb$ ) is shown in parenthesis.

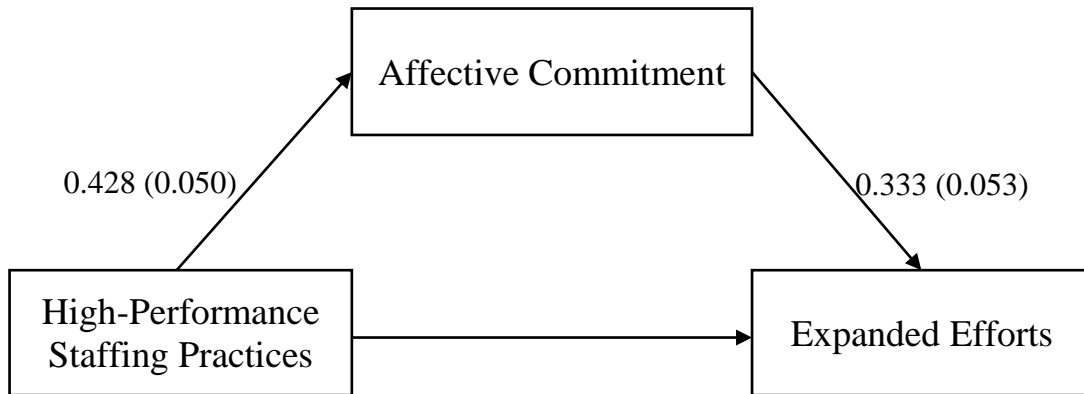
Secondly, Table 4.15 presents the results of Sobel test mediator to examine the mediation effect of affective commitment on the relationship between staffing practices and expanded efforts presented.

**Table 4.15**  
**Sobel Test Calculation for the Test of Mediation**  
**(Staffing Practices, Affective Commitment, Expanded Efforts)**

Input		Test Statistic	Std. Error	p-value
$a$	0.428	5.06505302	0.00000020	0.00000041
$b$	0.333			
$Sa$	0.050			
$Sb$	0.053			

Where  $a$  is the unstandardized regression coefficient between staffing practices and affective commitment,  $b$  is the unstandardized regression coefficient between affective commitment and the expanded efforts.  $Sa$  is the standard error of  $a$  while  $Sb$  is the standard error of  $b$ .

As the results showed that Sobel mediator test is significant for relationship between staffing practices, affective commitment and expanded efforts (Test statistic = 5.06,  $p < 0.001$ ). It means affective commitment mediates the relation between staffing practices and expanded efforts. In other words, if more staffing practices are implemented in hospitals then employees expanded efforts would be increased only when they would be committed affectively with their employer.



**Fig. 4.2: The Path Diagram: (Staffing Practices, Affective Commitment, Expanded Efforts)**

Figure 4.2 illustrates unstandardized regression coefficients ( $a$  and  $b$ ) for the relationship between variables that are high-performance staffing practices and expanded efforts as mediated by affective commitment. The standard error for the relationship between staffing practices, affective commitment and expanded efforts ( $Sa$  and  $Sb$ ) are shown in parenthesis.

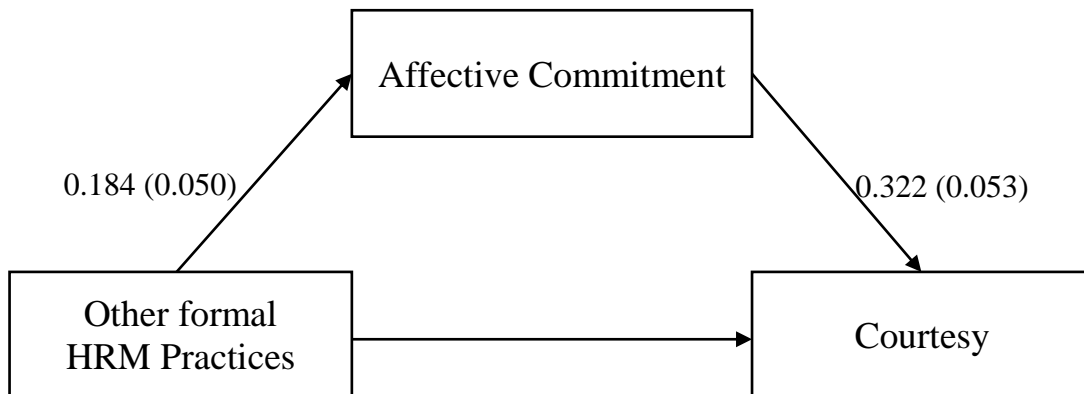
Thirdly, Table 4.16 represents the results of Sobel mediator test to examine the mediating effect of affective commitment on the relationship between “Other formal HRM practices” and “Courtesy”.

**Table 4.16**  
**Sobel Test Calculation for the Test of Mediation**  
**(Other Formal HRM Practices, Affective Commitment, Courtesy)**

Input		Test Statistic	Std. Error	p-value
$a$	0.184	3.14761110	0.00082305	0.00164611
$b$	0.322			
$Sa$	0.050			
$Sb$	0.053			

Where  $a$  is the unstandardized regression coefficient between other formal HRM practices and affective commitment,  $b$  is the unstandardized regression coefficient between affective commitment and Courtesy.  $Sa$  is the standard error of  $a$  while  $Sb$  is the standard error of  $b$ .

As the results showed that Sobel mediator test is significant for relationship between other formal HRM practices, affective commitment and courtesy (Test statistic = 3.15,  $p < 0.01$ ). It means affective commitment mediates the relation between other formal HRM practices and courtesy. In other words, if more formal HRM practices are implemented in hospitals then employees' courtesy actions would be increased only when they would be committed affectively with their employer.



**Figure 4.3: The Path Diagram: (Other Formal HRM Practices, Affective Commitment, Courtesy)**

Figure 4.3 illustrates unstandardized regression coefficients ( $a$  and  $b$ ) for the relationship between variables i.e. Other formal HRM practices and Courtesy as mediated by affective commitment. The standard error for the relationship between other formal HRM practices, affective commitment and courtesy ( $Sa$  and  $Sb$ ) are shown in parenthesis.

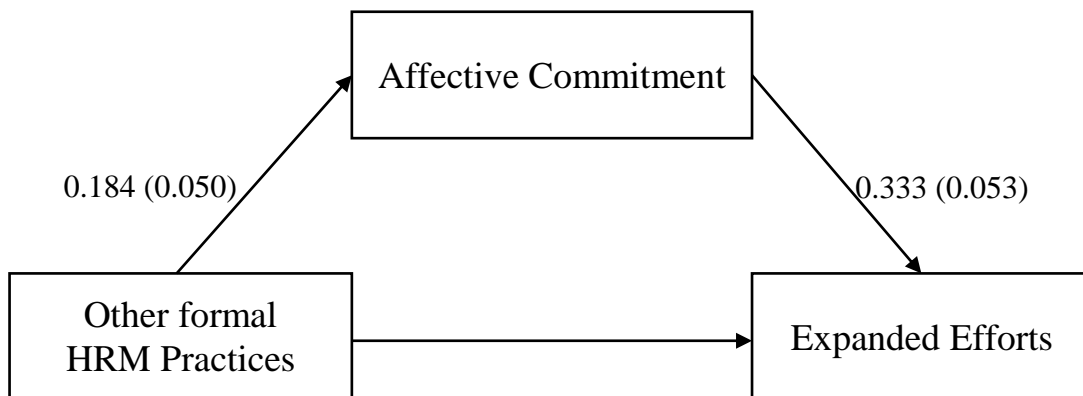
Lastly, is to see the mediating effect of affective commitment on the relationship between other formal HRM practices and expanded efforts. Sobel mediator test was performed to get the results. Results are presented in the following Table 4.17. The value of t. statistic (3.18) and significance value that is  $p < 0.01$  showed that the mediator has significantly explained that expanded efforts (DV) are determined by the other formal HRM practices (predictor) with the help of affective commitment (mediator). Hence we say our hypothesis H3a is accepted.

**Table 4.17**  
**Sobel Test Calculation for the Test of Mediation**  
**(Other formal HRM Practices, Affective Commitment, Expanded Efforts)**

Input		Test Statistic	Std. Error	p-value
<i>a</i>	0.184	3.17542265	0.00074809	0.00149618
<i>b</i>	0.333			
<i>Sa</i>	0.050			
<i>Sb</i>	0.053			

Where *a* is the unstandardized regression coefficient between other formal HRM practices and affective commitment, *b* is the unstandardized regression coefficient between affective commitment and expanded efforts. *Sa* is the standard error of *a* while *Sb* is the standard error of *b*.

In other words, if more performance-oriented Human resource management practices are applied in hospitals then we can predict that employees' OCB actions would be increased only if they are more affectively committed to their jobs. In other words, if employees of hospitals feel less affectively committed to their jobs then we cannot confidently predict that their organization citizenship behavior will be based on the high-performance HRM practices being implemented in the hospitals. Therefore, we can say that H3a is supported.



**Figure 4.4: The Path Diagram: (Other formal HRM Practices, Affective Commitment, Expanded Efforts)**

Figure 4.4 illustrates unstandardized regression coefficients (*a* and *b*) for the relationship between variables i.e. Other formal HRM practices and Expanded efforts as mediated by affective commitment. The standard error for the relationship between other formal HRM practices, affective commitment and expanded efforts (*Sa* and *Sb*) are shown in parenthesis.

#### 4.7.2 The Mediating Effect of Affective Commitment on the Relationship between High-Performance HRM Practices and Intent to Remain

Under H3b, we hypothesized that affective commitment mediates the relationship between employees perception of High-performance HRM practices and their Intent to remain with the organization. In order to get the results, Sobel Mediator test was performed with both factors of HRM practices that are “Staffing practices” and “Other formal HRM practices” with affective commitment and intent to remain.

Hereafter, following are the results of Sobel test to assess whether affective commitment mediates the relationship between staffing practices and intent to remain presented in Table 4.18.

**Table 4.18**  
**Sobel Test Calculation for the Test of Mediation**  
**(Staffing Practices, Affective Commitment, Intent to Remain)**

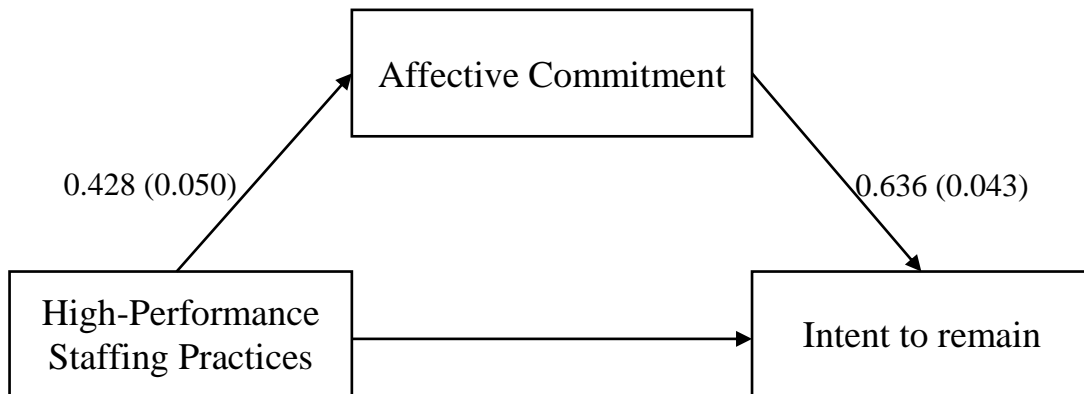
Input		Test Statistic	Std. Error	p-value
<i>a</i>	0.428	7.40870822	0.0	0.0
<i>b</i>	0.636			
<i>Sa</i>	0.050			
<i>Sb</i>	0.043			

Where *a* is the unstandardized regression coefficient between staffing practices and affective commitment, *b* is the unstandardized coefficient between affective commitment and intent to remain. *Sa* is the standard error of *a* while *Sb* is the standard error of *b*.

Test statistic value = 7.41 and  $p < 0.001$  showed that Sobel mediator test was significant as p value is very tiny. It means that the mediator of affective commitment significantly explained that intent to remain (DV) is determined by the staffing practices (predictor) with the help of affective commitment (mediator).

In other words, if more performance-oriented staffing practices are applied in hospitals then we can predict that employees’ intent to remain feeling with the organization would be increased only if they are more affectively committed to their jobs. In other words, if employees of hospitals feel less affectively committed to their jobs then we cannot confidently predict

that their intention of staying will be based on the high-performance staffing practices prevalent in the hospitals.



**Figure 4.5: The Path Diagram: (Staffing Practices, Affective Commitment, Intent to Remain)**

Figure 4.5 illustrates unstandardized regression coefficients ( $a$  and  $b$ ) for the relationship between variables that are high-performance staffing practices and intent to remain as mediated by affective commitment. The standard error for the relationship between staffing practices, affective commitment and intent to remain ( $Sa$  and  $Sb$ ) is shown in parenthesis.

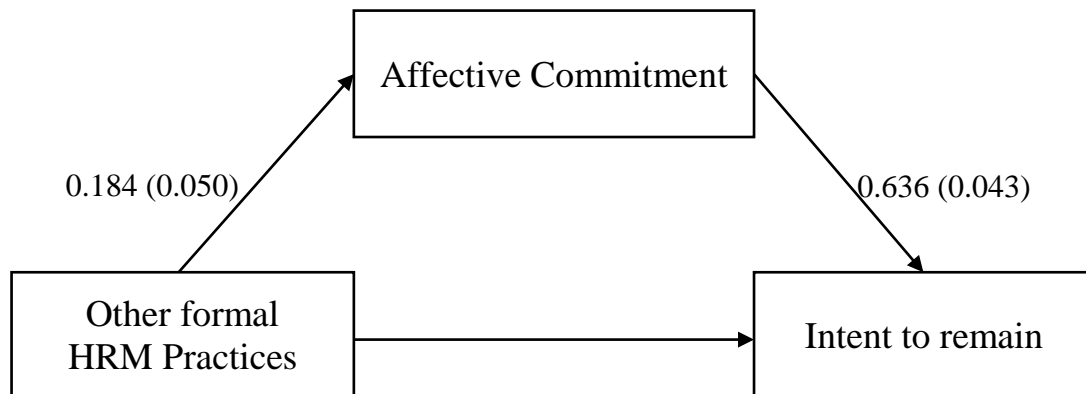
Secondly, results are given in Table 4.19 to see the mediating effect of affective commitment on the association between other formal HRM practices and Intent to remain with the organization.

**Table 4.19**  
**Sobel Test Calculation for the Test of Mediation**  
**(Other Formal HRM Practices, Affective Commitment, Intent to Remain)**

Input		Test Statistic	Std. Error	p-value
$a$	0.184	3.57112623	0.00017772	0.00035545
$b$	0.636			
$Sa$	0.050			
$Sb$	0.043			

Where  $a$  is the unstandardized regression coefficient between other formal HRM practices and affective commitment,  $b$  is the unstandardized coefficient between affective commitment and intent to remain.  $Sa$  is the standard error of  $a$  while  $Sb$  is the standard error of  $b$ .

Test statistic value = 3.57 and  $p < 0.01$  showed that Sobel mediator test was significant as  $p$  value is very small. It means that the mediator of affective commitment significantly explained that intent to remain (DV) is determined by the other formal HRM practices with the help of affective commitment (mediator). Therefore we say that our hypothesis H3b has been proved true that affective commitment positively mediates the relationship between high-performance HRM practices and intent to remain with the organization.



**Figure 4.6: The Path Diagram: (Other Formal HRM Practices, Affective Commitment, Intent to Remain)**

Figure 4.6 illustrates unstandardized regression coefficients ( $a$  and  $b$ ) for the relationship between variables that are other formal HRM practices and intent to remain as mediated by affective commitment. The standard error for the relationship between other formal HRM practices, affective commitment and intent to remain ( $Sa$  and  $Sb$ ) is shown in parenthesis.

#### **4.7.3 The Mediating Effect of Affective Commitment on the Relationship between High-Performance HRM Practices and Absenteeism**

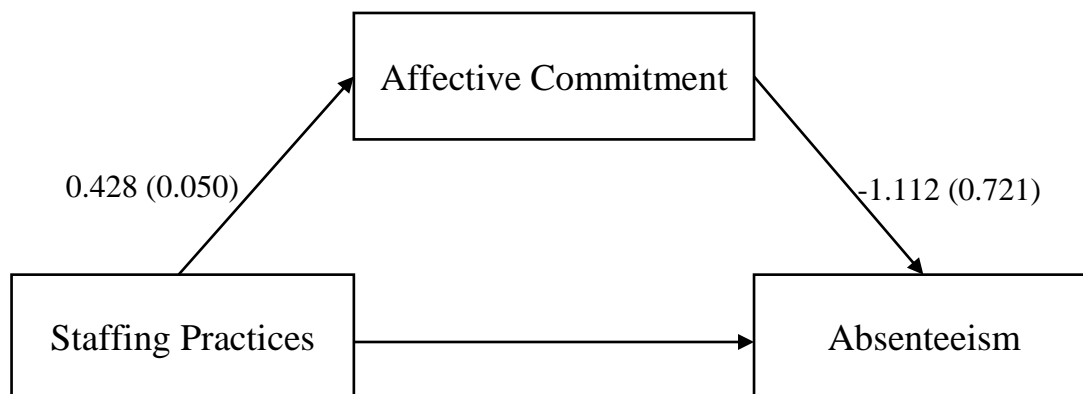
Under H3b, current study hypothesized the mediating effect of affective commitment on the relationship between High-performance HRM practices and absenteeism. Results of Sobel Mediator test are offered below in Table 4.20.

**Table 4.20**  
**Sobel Test Calculation for the Test of Mediation**  
**(Staffing Practices, Affective Commitment, Absenteeism)**

Input		Test Statistic	Std. Error	p-value
<i>a</i>	0.428	-1.51786179	0.06452462	0.12904924
<i>b</i>	-1.112			
<i>Sa</i>	0.050			
<i>Sb</i>	0.721			

Where *a* is the unstandardized regression coefficient between staffing practices and affective commitment, *b* is the unstandardized regression coefficient between affective commitment and absenteeism. *Sa* is the standard error of *a* while *Sb* is the standard error of *b*.

The results showed that affective commitment is negatively impacting the relationship between staffing practices and absenteeism however the relationship does not appear significant as significance value *p* is greater than 0.10 (Test statistic = -1.52, *p* = 0.13).



**Figure 4.7: The Path Diagram: (Staffing Practices, Affective Commitment, Absenteeism)**

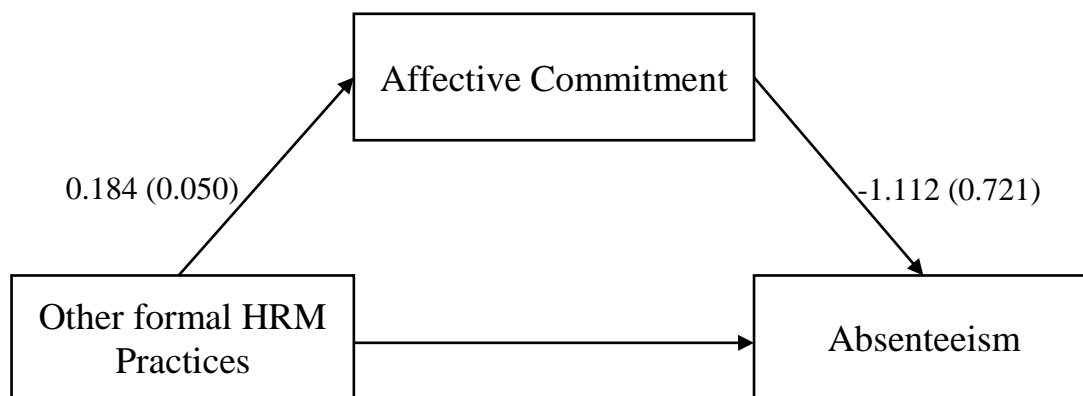
Figure 4.7 illustrates unstandardized regression coefficients (*a* and *b*) for the relationship between variables that are other staffing practices and absenteeism as mediated by affective commitment. The standard error for the relationship between staffing practices, affective commitment and absenteeism (*Sa* and *Sb*) is shown in parenthesis.

**Table 4.21**  
**Sobel Test Calculation for the Test of Mediation**  
**(Other Formal HRM Practices, Affective Commitment, Absenteeism)**

Input		Test Statistic	Std. Error	p-value
<i>a</i>	0.184	-1.42242984	0.07745075	0.15490151
<i>b</i>	-1.112			
<i>Sa</i>	0.050			
<i>Sb</i>	0.721			

Where *a* is the unstandardized regression coefficient between other formal HRM practices and affective commitment, *b* is the unstandardized regression coefficient between affective commitment and Absenteeism. *Sa* is the standard error of *a* while *Sb* is the standard error of *b*.

The results showed that affective commitment is reducing the relationship between other formal HRM practices and absenteeism however the relationship does not appear significant as significance value *p* is greater than 0.10 ( Test statistic = -1.42, *p* = 0.15). Based on the above results, we can say that our hypothesis H3c is not supported. The relationship between high-performance HRM practices and absenteeism is not significantly explained by the mediator that is affective commitment.



**Figure 4.8: The Path Diagram: (Other Formal HRM Practices, Affective Commitment, Absenteeism)**

Figure 4.8 illustrates unstandardized regression coefficients (*a* and *b*) for the relationship between variables that are other formal HRM practices and absenteeism as mediated by affective commitment. The standard error for the relationship between other formal HRM practices, affective commitment and absenteeism (*Sa* and *Sb*) is shown in parenthesis.

## 4.8 SUMMARY OF THE RESULTS

The purpose of this section was to analyze the data collected and performing various data analysis techniques in order to get results. First of all, descriptive analysis was performed to get the frequencies and percentages of respondents to know about their characteristics. Reliability analysis has been performed which showed that all the constructs used in this study have Cronbach alpha greater than 0.70. It means that the scales used in this study are reliable and consistent in their results. Means and standard deviations of all the study variables with their items are calculated. Items with high mean values are highlighted in the tables. Factor analysis was performed that has divided the high-performance HRM practices into two factors that are staffing practices and other formal HRM practices. OCB scale has extracted two factors labeled as courtesy and expanded efforts.

**Table 4.22**  
**Summary of Hypotheses Testing**

<b>S.No.</b>	<b>Hypotheses</b>	<b>Results</b>
H1a	There will be a positive and significant relationship between perceived high-performance HRM practices and organizational citizenship behavior (OCB).	Supported
H1b	There will be a positive and significant relationship between perceived high-performance HRM practices and employees' intent to remain with the organization.	Supported
H1c	There will be a negative and significant relationship between perceived high performance HRM practices and employees' absenteeism.	Not Supported
H2	Perceived High-performance HRM practices will be positively related to affective commitment.	Supported
H3a	Affective commitment mediates the relationship between high-performance HRM practices and Organization citizenship behavior (OCB).	Supported
H3b	Affective commitment mediates the relationship between high-performance HRM practices and intent to remain.	Supported
H3c	Affective commitment mediates the relationship between high-performance HRM practices and employees' absenteeism.	Not Supported

Results from the OLS regression showed that employees' perception of high-performance HRM practices are positively related to employees' behaviors at workplace that are Organization Citizenship Behavior (OCB), intent to remain with the organization and negatively related to employees' absenteeism. It is also shown by the results of Sobel Mediator Test that employee's job attitude (affective commitment, positively mediates the relationship between high-performance HRM practices and OCB at hospitals. The relationship between high-performing HRM practices and intent to remain is significantly mediated by affective commitment. While the mediator of affective commitment has failed to significantly mediates the relation between employees perception of high-performing HRM practices and employees absenteeism at job. The summary of hypotheses testing is provided in Table 4.22.

# CHAPTER 5

## DISCUSSION AND CONCLUSION

### 5.1 DISCUSSION ON RESULTS

Giving the answer to the call of context-specific research, according to which the topic of performance-oriented HRM practices must be studied in a wider sector and those sectors should be services-oriented (Wright & Boswell 2002; Guest 2011), the current study investigates the predictive role of perceived high-performance HRM practices on generating employees' attitudes and employees' job behaviors in the context of health-care sector of Pakistan. We took one dimension of employees' job attitude that is affective commitment and three dimensions of employees job behaviors (Organizational citizenship behavior, intent to remain with the organization and absenteeism). Further, it also focuses on the mediating role of affective commitment on the relationship between perceived HRM practices and OCB, intent to remain and absenteeism. The Study utilizes social exchange theory to propose several hypotheses.

Probability sampling has been used to generate a random sample of 18 hospitals from a total of \_\_\_\_\_. Out of 400 survey questionnaires distributed among the doctors and nurses of public and private hospitals of Lahore and Faisalabad, 317 were returned giving a response rate of 79%. The study was conducted in natural setting and minimal interference of the researcher. The data is collected through one questionnaire which includes well-established constructs, at one point of time. Data is analyzed by using appropriate and recommended techniques in SHRM and organization behavior (OB).

The results may be categorized in following seven sections and are discussed here. The first section contains the results of our first hypothesis i.e. H1a: There will be a positive and significant relationship between perceived high-performance HRM practices and organizational citizenship behavior (OCB). Results of correlation test shows full support to it. It means employees' perception of high-performance human resource management practices and organizational citizenship behavior are positively related and this relationship is significant too at 0.01 significance level. Results of OLS regression analysis has confirmed that high-performing HRM practices significantly predict the dependent variable that is OCB. High-performance HRM practices and OCB both have their foundation in social exchange theory. For example, individuals

will have a higher tendency to perform extra role behaviors when they have a positive perception of human resource management practices which are being implemented in their organization (Alfes, Shantz, Truss & Soane, 2013). Moreover if those HR practices are to increase the employees' skills and provides them opportunities to grow and earn better than their tendency to perform discretionary actions will be enhanced. Overall that would lead to better firm performance.

Further, social setup in Pakistan is also a reason that people here are usually more helping and cooperative to their colleagues and team-working provides medical staff the chances to increase their practice and learn more effectively. In addition, performing OCB can result into making better relationships with their co-workers which ultimately helps in achieving organizational goals. Moreover, as a result of HPWS employees perceive that their firm support practices which are more humanistic and managers care about their well-being so based on exchange relationship they are inclined to increase their contribution by exhibiting OCB (Gupta & Singh, 2011). Hence, we say that our proposed hypothesis H1a is accepted.

The second section covers the results of our second hypothesis i.e. H1b: There will be a positive and significant relationship between perceived high-performance HRM practices and employees' intent to remain with the organization. From the correlation test, it has been shown that independent variable is positively associated with dependent variable and result is significant at 1% confidence interval. Results from previous research also support this relationship. For example, Alfes et al., (2013) states in their research that employees will more likely to stay with their organizations or their turnover intention is reduced when they feel more engaged to their jobs as a result of positively perceived HRM practices. Results from OLS regression analysis also showed that employees' perception of high-performance HRM practices have reasonable explanatory power for intent to remain with the organization.

This study is showing positive results between high-performance HRM practices and intent to remain of employees with the organization due to the major reasons that there are many public and private hospitals in Pakistan where high-performance HRM practices are being implemented which leads to the employees' job satisfaction. When employees feel satisfied and committed to their job then their intention to stay with the organization increases. Further, there are less job opportunities for people in Pakistan so once they get a good job where they are getting most of the good HRM practices being impended in the hospitals then they find it harder to switch to another job. Hence, based on the above results, we can say that our hypothesis H1b is accepted.

The third section of this chapter comprises the findings of third hypothesis H1c: There will be a negative and significant relationship between perceived high performance HRM practices and employees' absenteeism. From the correlation test, we have found that perceived performance-oriented HRM practices are insignificantly related to absenteeism.

Results of OLS regression analysis also showing negative but insignificant relationship between High performance HRM practices and employees job absenteeism. The results are making us to conclude that despite the managers are implementing performance oriented HRM practices for employees to grow but there is no impact of implanting such HRM practices on absenteeism of employees in health sector of Pakistan. Although previous researches have shown a significant relationship between HRM practices and absenteeism (e.g., Meyer et al., 1989) but results of this research is not significantly supporting the relationship.

Despite of positive perceptions about HR system, employees' absenteeism is reduced apparently but not HRM practices do not have reasonable explanatory power for absenteeism as per the findings of OLS regression. According to Kehoe and Wright (2013), in a system of high-performance HRM practices, employees with high absenteeism will be affected and lose their benefits but employees with moderate level of absenteeism would still be taking part in decision making, getting available training, task performance, and would likely to enjoy other benefits of a high-performance work system. So benefits provided in such HR system do not bring significant reductions in absenteeism directly (Kehoe & Wright, 2013). There might be other mechanism though which performance-oriented HRM practices have an impact on absenteeism indirectly.

Further, employees had remain absent due to sickness or other family problems. There is also a trend here in Pakistan to go absent from work without any valid reason. Hence, we say that our proposed hypothesis H1c is not fully supported.

Fourth section comprises of outcome from hypothesis H2: Perceived High-performance HRM practices will be positively related to affective commitment. Bivariate correlation test has shown positive and significant relationship between high-performance work practices and affective commitment (0.473,  $p < .01$ ). The relationship of performance-oriented HRM practices perceptions and affective commitment has been studied many times in the context of social exchange theory (e.g., Kehoe & Wright, 2013; Barbera, 2012). Such HRM practices are real and tangible activities by the

organizations which reflect a sense of reciprocity among employees (Barbera, 2012). Under this idea of exchange relationship, when employees feel that their organization implements HR practices, the purpose of which is to give more and more benefit to the employees and enhance their skill level too, their level of commitment will likely be increase (Barbera, 2012). Hence, we conclude our fourth section of findings by saying that H2 hypothesis is accepted. Results from OLS regression showed that high-performance HRM practices have good prediction power of the dependent variable here that is affective commitment.

Coming towards fifth section of this chapter, next hypothesis H3a states that affective commitment mediates the positive relationship between perceived high-performance HRM practices and Organization citizenship behavior (OCB). Sobel mediator test was performed to test the mediation. Results showed that affective commitment significantly mediates the relationship between employees' perception of high-performance HRM practices and OCB. It means it is the feeling of affective commitment that causes employees to perform OCB when HPWS is working in the hospitals. In other words, lack of affective commitment would lead doctors and nurses to perform less extra role behaviors when there is a lack of implementation of performance –oriented HRM practices in the hospitals. Hence we conclude that hypothesis H3a is supported.

Likewise section sixth states hypothesis H3b: Affective commitment mediates the positive relationship between perceived high-performance HRM practices and intent to remain. Results of Sobel mediator test showed that relationship between employees' perception of high-performance HRM practices and intent to remain with the organization is significantly mediated by affective commitment. In other words, employees of hospitals are more likely to stay with their organizations when they have positive perception about the various policies and HRM practices implemented in the hospitals that these HR practices are to increase employees' performance. Due to this positive perception employees feel committed affectively at workplace and their intention of not leaving the organization gets flourished. Hence, we say that H3b has been supported.

Likewise last section discusses the hypothesis H3c: Affective commitment mediates the negative relationship between perceived high-performance HRM practices and employees' absenteeism. Founded on social exchange theory, this relationship between independent and dependent variables is through their effect on an essential attitudinal outcome that is, affective commitment (Kehoe & Wright, 2013). As mentioned earlier, current study showed that perceived HRM practices has a non-significant relationship

with absenteeism. Similarly, Sobel test results also revealed that the mediator of affective commitment is not significantly reducing the employees' absenteeism as a result of implementing high-performance HRM practices in the hospitals of Pakistan. According to Kehoe & Wright (2013), employees' behaviors are affected by their perceptions of performance-oriented HRM practices to at least some extent. Similarly, there might be any other reasons due to which absenteeism of employees can be affected in hospitals but that reason is not their positive attitude of affective commitment. Hence, based on above results it is said that last hypothesis of this study that is H3c is not supported.

As our findings reveal that affective commitment (employees job attitude) mediates the relationship between perceived high-performance HRM practices and two behavioral outcomes (OCB and intent to remain) while the relationship between HRM practices perceptions and absenteeism is not mediated by the mediating variable. So we suggest that future research should concentrate on finding that is there any other attitudinal mechanism through which perceived HRM practices impact employees' behaviors (absenteeism)?

## **5.2 RESEARCH IMPLICATIONS**

### **5.2.1 Theoretical Implications**

Research on human resource management practices and employee outcomes spread over years. Direct effects of HRM practices on OCB, intent to remain and absenteeism are important but studies call for the exploration of intervening mechanism between HRM practices-outcomes relationships (Dyer & Reeves, 1995). In response, current study attempts to shed light that how HRM practices are related to employee job behaviors by examining affective commitment as mediators through the lens of social exchange theory. The study provides evidence for partial mediation of affective commitment between HRM practices and OCB relation. It also shows partial mediation of affective commitment between HRM practices and intent to remain with the organization in the presence of direct relationship of HRM practices with affective commitment, OCB, intent to remain and absenteeism. While relationship between perceived HRM practices and absenteeism is insignificant.

From a theoretical view, our results take a withdrawal from the existing literature of strategic HRM practices. Findings show that employees' job outcomes of HRM practices are responses to the management techniques

which are implemented consistently by managers. These management techniques are also pre-determined.

We have used social exchange theory in the context of health-sector of a developing country and used its tenants to make a contribution in the domain of HRM and OB literature. Further, this research work can also be extended in other contexts.

We have focused on employees' attitudes and employees' job behaviors in a single model. These employees' outcomes are immediate consequence of perceived high-performance HRM practices. It was need of the time to conduct this research in order to address calls for empirical investigation on more proximal outcomes of HR and organizational performance relationship (Wright & Gardner, 2003). Thus, it adds to the existing literature of SHRM and HRM practices.

Particularly, we have given attention to the causal chain by introducing affective commitment as the mediating variables between perceived HRM practices and employees behaviors. Which ultimately leads to the production of organization performance.

Our findings showed a significant relationship between HRM practices perception and employees attitudes (affective commitment). HRM practices perception is also significantly related to the two dimensions of employees' behaviors (OCB and intent to remain with the organization) while non-significant with one dimension (absenteeism). These results are likely to have important implications in multiple organizational contexts. While it has been shown that HR practices perceptions of employees do affect employees' behaviors to some extent through employees' attitude i.e. affective commitment. While literature support the importance of social exchange theory in this regard.

### **5.2.2 Practical Implications**

Study results are important for organizational decision-makers. As we see that perceived HRM practices effect employees' behaviors through employees' affective commitment partially so, it is important for the organizations to focus on the design and selection of such HR system which includes practices like selection, training, information sharing, merit-based promotions, performance-based rewards etc. because it leads to the development of highly committed employees with their organizations and in

exchange they also show positive behaviors at workplace that causes better organization performance.

From the practical perspective, this study has highlighted the importance of consistent implementation of High-performance HRM practices in the organizations and there must be proper communication to the employees about these management techniques and HR practices. It means HR practices not only effect at individual level but also extends to the organizations. This is necessary to ensure organizational support for their employees and get employees more engaged in organizational activities as it provide help in creation of an emotional and affective bond thus leading to the exchange relationship with the organization. Training is important, further salary increase and promotion is also important as it causes alteration in nature of relationship which in turn effect employees outcomes particularly employees attitude (affective commitment) and employees behaviors (OCB, intent to remain, absenteeism). Moreover, bonuses for presence at work can be introduced to encourage employees to reduce their absenteeism.

### **5.3 LIMITATIONS AND FUTURE RESEARCH DIRECTIONS**

Despite noteworthy contribution, current study faces some limitations. The acknowledgment of these limitations is important for better interpretation of results.

At first, nature of the study is cross-sectional that is why we cannot conclude a causal relationship although results have shown that there exists a relationship with one-time data collection. This study has been conducted in natural environment with minimum interference of the researcher and respondents were reluctant to serve too much time to fill in the questionnaire. In future, this research can be extended by doing longitudinal data collection.

Secondly, the study has relied on self-report of employees outcomes. Data has been collected from employees regarding their perceptions of HR practices, affective commitment, OCB and intent to remain with the organization. While to measure absenteeism, employees were asked to report number of days they had remain absent from their work in last year. More accurate data could have been collected from managers or administrative staff of the hospitals regarding OCB and absenteeism but we could not get managerial reports.

Thirdly, we have used set of high-performance HRM practices which is not completely representative of earlier high-performance HR systems. For

example, questions regarding profit sharing can be added to ask from employees in future research to test the same model. But our set of HRM practices is comprehensive enough that contains the core elements of performance-oriented HR system.

Fourthly, as our findings reveal that affective commitment partially mediates the relationship between perceived high-performance HRM practices and two behavioral outcomes (OCB and intent to remain) while the relationship between HRM practices perceptions and absenteeism is not mediated by the mediating variable. So we suggest that future research should concentrate on the reasons that is there any other attitudinal mechanism which affects employees' behaviors.

Further, due to lack of time and resources, data has been collected from limited cities i.e. Lahore and Faisalabad only. Future research can test this model with the inclusion of wider geographical area within Pakistan for better generalizability.

Moreover, sample set of 18 hospitals is selected using random sampling. Because of lack of accessibility, we were not able to obtain lists of employees from every hospital so present study suggests to use randomly selected sample of employees in next research.

This study also includes some other future research directions for High-performance HRM practices-outcomes relationship. Study can also be conducted at job-group level as perceptions of employees are also affected by the experiences of their co-workers. Further, study can also include other important variables like job satisfaction, task performance, and turnover intention. Overall as per our belief, limitations of this study are offset by its strengths and contribution to the SHRM literature and practice.

## **5.4 CONCLUSION**

This study examines the predictive role of High-performance HRM practices for affective commitment, organizational citizenship behavior, intent to remain with the organization and absenteeism. It also examines the mediating effect of affective commitment on the relationship of high-performance HRM practices and OCB, intent to remain and absenteeism through the lens of social exchange theory. By doing this, current research contributes to the SHRM literature that how employees' attitudes and behaviors lead towards organizational performance and serve as a causal chain of HR practice-performance relationship. These are important as SHRM

literature calls for explanation that how perceived high-performance HRM practices convert to attitudinal and behavioral outcomes. Moreover, mediating effect of affective commitment is analyzed which is the unique contribution of this study. The study answers to many questions raised by previous researches but the results draw attention towards future research for advancing current findings. Particularly, examination of association between HRM practices perceptions and other work related attitudinal and behavioral outcomes by incorporating other intervening mechanisms are suggested. Moreover, close examination of the lens of social exchange theory is noteworthy.

## REFERENCES

1. Ang, S., Bartram, T., McNeil, N., Leggat, S. and Stanton, P. (2013). The effects of high-performance work systems on hospital employees' work attitudes and intention to leave: a multi-level and occupational group analysis. *The International Journal of Human Resource Management*, 24(16), 3086-3114.
2. Alfes, K., Shantz, A.D., Truss, C. and Soane, E.C. (2013). The link between perceived human resource management practices, engagement and employee behavior: a moderated mediation model. *The International Journal of Human Resource Management*, 24(2), 330-351.
3. Alfes, K., Shantz, A.S. and Truss, C. (2012). The link between perceived human resource management practices, performance and well-being: the moderating effect of trust in the employer. *Human Resource Management Journal*, 22(4), 409-427.
4. Abid, A.M. (2012). *Why are the doctors out on the streets?* The Dawn publications.
5. Allen, D.G., Shore, L.M. and Griffeth, R.W. (2003). The role of perceived organizational support and supportive human resource practices in the turnover processes. *Journal of Management*, 29, 99-118.
6. Applebaum, E., Bailey, T., Berg, P. and Kalleberg, A.L. (2000). *Manufacturing advantage: Why high-performance work systems pay off.* Ithaca, NY: Cornell University Press.
7. Arthur, J.B. (1994). Effects of human resource systems on manufacturing performance and turnover. *Academy of Management Journal*, 37(3), 670-687.
8. Arthur, J.B. (1992). The links between business strategy and industrial relations systems in American steel minimills. *Industrial and Labor Relations Review*, 45(3), 488 -506.
9. Bowen, D. and Ostroff, C. (2004). Understanding HRM-Firm performance linkages: The role of the “Strength” of the HRM system. *Academy of Management Review*, 29(2), 203-221.
10. Barbera, C.L. (2012). *HRM Effects on Employee Affective Commitment to the Organization: An Empirical Assessment of Social Identity Linkages.* Unpublished Master Thesis, AARHUS University.

11. Boxall, P. and Macky, K. (2009). Research and theory on high-performance work systems: progressing the high-involvement stream. *Human Resource Management Journal*, 19(1), 3-23.
12. Batt, R. (2002). Managing customer services: Human resource practices, quit rates, and sales growth. *Academy of Management Journal*, 45(3), 587-597.
13. Bartel, A.P. (2004). Human resource management and organizational performance: Evidence from retail banking. *Industrial and Labor Relations Review*, 57(2), 181-203.
14. Becker, T.E. (1992). Foci and Bases of Commitment: Are They Distinctions Worth Making? *Academy of Management Journal*, 35(1), 232-244.
15. Blau, P.M. (1983). *On the nature of organizations*. Malabar, FL: Krieger.
16. Baron, R. and Kenny, D. (1986). The Moderator-Mediator Variable Distinction in Social Psychological Research: Conceptual, Strategic, and Statistical Considerations. *Journal of Personality and Social Psychology*, 51(6), 1173-1182.
17. Blau, P.M. (1967). *Exchange and power in social life* (2nd edition), New York, NY: Wiley.
18. Blau, P.M. (1964), *Exchange and Power in Social Life*. John Wiley & Sons, Inc.-Transaction Publishers.
19. Plano Clark, V.L. and Creswell, J.W. (2010). *Understanding research; a consumer's guide*. Pearson Education, Inc.
20. Creswell, J.W. (2009). *Research design: Qualitative, quantitative, and mixed methods approaches*, SAGE Publications, Thousand Oaks, CA.
21. Collings, D.G. and Wood, G. (2009). *Human Resource Management: a Critical Approach*. D. G. Collings & G. Wood.
22. Combs, J., Liu, Y., Hall, A. and Ketchen, D. (2006). How much do high-performance work practices matter? A meta-analysis of their effects on organizational performance. *Personnel Psychology*, 59, 501-528.

23. Collins, C. and Smith, K. (2006). Knowledge exchange and combination: The role of human resource practices in the performance of High-Technology firms. *Academy of Management Journal*, 49(3), 544-560.
24. Chuang, C. and Liao, H. (2010). Strategic human resource management in service context: Taking care of business by taking care of employees and customers. *Personnel Psychology*, 63(1), 153-196.
25. De Vaus, D. (2002). *Surveys in Social Science Research*. Crows Nest, New South Wales: Allen & Unwin.
26. Delaney, J. and Huselid, M. (1996). The impact of human resource management practices on perceptions of organizational performance. *Academy of Management Journal*, 39(4), 949-969.
27. Delery, J.E. and Doty, D.H. (1996). Modes of theorizing in strategic human resource management: Tests of universalistic, contingency, and configurational performance predictions. *Academy of Management Journal*, 39(4), 802- 835.
28. Dyer, L. and Reeves, T. (1995). Human resource strategies and firm performance: What do we know and where do we need to go? *International Journal of Human Resource Management*, 6, 656-670.
29. Farndale, E., Hope, V. and Kelliher, C. (2010). High Commitment Performance Management: The Roles of Justice and Trust. *Personnel Review*, 40(1), 5-23.
30. Gupta, V. and Singh, S. (2011). *High performance HRM practices, Organizational citizenship behavior, and positive psychological capital: A relational perspective*. Unpublished Doctoral dissertation, Indian Institute of Management, Lucknow.
31. Guest, D. and Conway, N. (2011). The impact of HR practices, HR effectiveness and a 'strong HR system' on organizational outcomes: a stakeholder perspective. *The International Journal of Human Resource Management*, 22(8), 1686-1702.
32. Gong, Y., Law, K.S., Chang, S. and Xin, K.R. (2009). Human resource management and firm performance in China: The different role of managerial affective and continuance commitment. *Journal of Applied Psychology*, 94, 263-275.

33. Guest, D.E. (2011). Human Resource Management and Performance: Still Searching for Some Answers. *Human Resource Management Journal*, 21, 3-13.
34. Gilbert, C., Winne, S. and Sels, L. (2011). The influence of line managers and HR department on employees' affective commitment. *Department of Marketing and Organization Studies*, 22(8), 1618-1637.
35. Gould, W.J. and Mohamed, R.B. (2010). A Comparative Study of the Effects of "Best Practice" HRM on Worker Outcomes in Malaysia and England Local Government. *International Journal of Human Resource Management*, 21, 653-675.
36. Guthrie, J.P., Flood, P.C., Liu, W. and MacCurtain, S. (2009). High performance work systems in Ireland: human resource and organizational outcomes. *The International Journal of Human Resource Management*, 20(1), 25-112.
37. Gould, W.J. and Davies, F. (2005). Using social exchange theory to predict the effects of HRM practice on employee outcomes-An analysis of public sector workers. *Public Management Review*, 7, 1-24.
38. Guthrie, J.P. (2001). High-involvement work practices, turnover, and productivity: Evidence from New Zealand. *Academy of Management Journal*, 44, 180-190.
39. Huselid, M.A. (1995). The impact of human resource management practices on turnover, productivity, and corporate financial performance. *Academy of Management Journal*, 38, 635-672.
40. Harter, J.K., Schmidt, F.L. and Hayes, T.L. (2002). Business-unit-level relationship between employee satisfaction, employee engagement, and business outcomes: A meta-analysis. *Journal of Applied Psychology*, 87, 268-279.
41. Kehoe, R.R. and Wright, P.M. (2013). The impact of high performance human resource practices on employees' attitudes and behaviors. *Journal of Management*, 39(2), 366-391.
42. Klein, H.J., Meyer, J.P. and Becker, T.E. (2009). Commitment in Organizations: Accumulated Wisdom and New Directions. *Johnson Graduate School of Management, Cornell University*. Sage Publications.

43. Kuvaas, B. and Dysvik, A. (2010). Exploring alternative relationships between perceived investment in employee development, perceived supervisor support and employee outcomes. *Human Resource Management Journal*, 20(2), 138-156.
44. Leea, S., Lee, D. and Kang, C. (2012). The impact of high-performance work systems in the health-care industry: employee reactions, service quality, customer satisfaction, and customer loyalty. *The Service Industries Journal*, 32(1), 17-36.
45. Macky, K. and Boxall, P. (2008). High-involvement work processes, work intensification and employee well-being: A study of New Zealand worker experiences. *Asia Pacific Journal of Human Resources*, 46(1), 38-55.
46. Meyer, J.P. and Herscovitch, L. (2001). Commitment in the Workplace: Toward a general model. *Human Resource Management Review*, 11, 299-326.
47. Meyer, J.P., Allen N.J. and Topolnytsky, L. (1998). Commitment in a Changing World of Work. *Canadian Psychology/Psychologie Canadienne*, 39, 1-2. The University of Western Ontario.
48. Mayer, R.C. and Schoorman, F.D. (1992). Predicting participation and production outcomes through a two dimensional model of organizational commitment. *Academy of Management Journal*, 35, 671-684.
49. Meyer, J.P. and Allen, N.J. (1991). A Three Component Conceptualization of Organizational Commitment. *Human Resource Management Review*, 1, 61-89.
50. Meyer, J.P. and Allen, N.J. (1997). *Commitment in the workplace: Theory, research, and application*. Thousand Oaks, CA: Sage.
51. Meyer, J.P., Stanley, D.J., Herscovitch, L. and Topolnytsky, L. (2002). Affective, continuance, and normative commitment to the organization: A meta-analysis of antecedents, correlates, and consequences. *Journal of Vocational Behavior*, 61, 20-52.
52. Moorman, R.H., Niehoff, B.P. and Organ, D.W. (1993). Treating employees fairly and organizational citizenship behaviors: Sorting the effects of job satisfaction, organizational commitment, and procedural justice. *Employee Responsibilities and Rights Journal*, 6, 209-225.

53. MacDuffie, J.P. (1995). Human resource bundles and manufacturing performance: Organizational logic and flexible production systems in the world auto industry. *Industrial and Labor Relations Review*, 48(2), 197-221.
54. Meyer, J.P., Paunonen, S.V., Gellatly, I.R., Goffin, R.D. and Jackson, D.N. (1989). Organizational Commitment and Job Performance: It's the Nature of the Commitment that Counts. *Journal of Applied Psychology*, 74(1), 152-156.
55. Sobel, Michael E. (1982). Asymptotic Confidence Intervals for Indirect Effects in Structural Equation Models. *Sociological Methodology*, 13, 290-312.
56. March, J.G. and Simon, H.A. (1958). *Organizations*. New York: Wiley.
57. Nishii, L.H., Lepak, D.P. and Schneider, B. (2008). Employee Attributions of the "Why" of HR Practices: Their Effects on Employee Attitudes and Behaviors, and Customer Satisfaction. *Personnel Psychology*, 61, 503-545.
58. Nishii, L.H. and Wright, P.M. (2008). Variability within organizations: Implications for strategic human resources management. In D.B. Smith (Ed.). *The people make the place: Dynamic linkages between individuals and organizations*, 225-248.
59. Nunnally, J. (1978). *Psychometric theory*. New York: McGraw-Hill.
60. Organ, D.W. (1988). *Organizational citizenship behavior: The good soldier syndrome*. Lexington, MA: Lexington Books.
61. Ogilvie, J.R. (1986). The Role of Human Resource Management Practices in Predicting Organizational Commitment. *Group & Organization Studies*, 11(4), 335-359.
62. Pallant, J. (2011). *SPSS Survival Manual A Step by step guide to data analysis using SPSS. 4<sup>th</sup>*. Crow's Nest: Allen & Unwin.
63. Patil, S. and Choudhari, P. (2013). Investigation of Human Resource Management Practices (HRM) in Hospitals of Jalgaon District. *International Journal of Science, Spirituality, Business and Technology*, 1(2), 2277-7261.

64. Pare, G. and Tremblay, M. (2007). The Influence of High-Involvement Human Resources Practices, Procedural Justice, Organizational Commitment, and Citizenship Behaviors on Information Technology Professionals' Turnover Intentions. *Group & Organization Management*, 32, 326-357.
65. Podsakoff, P.M., MacKenzie, S.C., Paine, J.B. and Bachrach, D.G. (2000). Organizational citizenship behaviors: A critical review of the theoretical and empirical literature and suggestions for future research. *Journal of Management*, 26, 513-563.
66. Porter, L.W., Steers, R., Mowday, R. and Boulean, P. (1974). Organizational commitment, job-satisfaction, and turnover among psychiatric technicians. *Journal of Applied Psychology*, 59, 603-609.
67. Rose, R.C. and Kumar, N. (2006). The influence of organizational and human resource management strategies on performance. *Performance Improvement*, 45(4), 18-24.
68. Stock, G.N., McFadden, K.L. and Gowen, C.R. III (2007). Organizational culture, critical success factors, and the reduction of hospital errors. *International Journal of Production Economics*, 106(2), 368-392.
69. Snape, E. and Redman, T. (2010). HRM practices, organizational citizenship behavior and performance: A multilevel analysis. *Journal of Management*, 47(7), 1219-1247
70. Sun, L., Aryee, S. and Law, K.S. (2007). High-performance human resource practices, citizenship behavior, and organizational performance: A relational perspective. *Academy of Management Journal*, 5, 558-577.
71. Sapsford, R. (2006). *Survey research*. SAGE Publications Limited.
72. Shore, L.M. and Wayne, S.J. (1993). Commitment and employee behavior: Comparison of affective commitment and continuance commitment with perceived organizational support. *Journal of Applied Psychology*, 78, 774-780.
73. Sheridan, J.E. (1985). A catastrophe model of employee withdrawal leading to low job performance, high absenteeism, and job turnover during the first year of employment. *Academy of Management Journal*, 28, 88-109.

74. Scholl, R.W. (1981). Differentiating organizational commitment from expectancy as a motivating force. *Academy of Management Review*, 6, 589-599.
75. Van Breukelen, W., Van der Vlist, R. and Steensma, H. (2004). Voluntary employee turnover: Combining variables from the “traditional” turnover literature with the theory of planned behavior. *Journal of Organizational Behavior*, 25, 893-914.
76. Wheeler, A., Halbesleben, J. and Harris, K. (2012). How job-level HRM effectiveness influences employee intent to turnover and workarounds in hospitals. *Journal of Business Research*, 65(4), 547-554.
77. Wood, S.J. and Wall, T.D. (2007). Work enrichment and employee voice in human resource management-performance studies. *International Journal of Human Resource Management*, 18(7), 1335-1372.
78. Wright, P.M. and Boswell, W.R. (2002). Desegregating HRMA Review and Synthesis of Micro and Macro Human Resource Management Research. *Journal of Management*, 28, 247-276.
79. Wright, P.M., Dunford, B.B. and Snell, S.A. (2001). Human resources and the resource based view of the firm. *Journal of Management*, 27, 701-721.
80. Wright, P. and McMahan, G. (1992). Theoretical perspectives for strategic human resource management. *Journal of Management*, 18(2), 295-320.
81. Youndt, M.A., Snell, S.A., Dean, J.W. and Lepak, D.P. (1996). Human resource management, manufacturing strategy, and performance. *Academy of Management Journal*, 39(4), 836-866.
82. Zheng, C., Morrison, M. and O'Neill, G. (2006). An empirical study of high performance HRM practices in Chinese SMEs. *The International Journal of Human Resource Management*, 17(10), 1772-1803.

# ANNEXURE A

## RESEARCH QUESTIONNAIRE

Dear participants!

This questionnaire is designed to study “Perceived High-performance HRM practices and its impact on employees attitudes and behaviors”. The information you provide will help us better understand this relationship. Because you are the one who can give us a correct picture of how you experience your life at work, I request you to respond to the questions frankly and honestly.

Your response will be kept strictly confidential. Only members of my research team will have access to the information you give. Thank you very much for your time and cooperation. I greatly appreciate the help of your organization and yourself in further this research endeavor.

### HIGH-PERFORMANCE HRM PRACTICES AT YOUR HOSPITAL

Over the past decades the importance of people or human resource management (HRM) in the health-sector worldwide has increasingly been recognized. Despite its growing importance, managing a workforce effectively still seems to be a challenging issue in the medical sector of Pakistan. The questions in this section seek to gain an understanding of specific Human Resource management practices as applied to your hospitals.

Please read each of the following statements and indicate by circling the degree to which you agree or disagree by circling a number from 1 to 7:		Strongly Disagree	Disagree	Disagree Somewhat	Neither agree Nor Disagree	Agree Somewhat	Agree	Strongly Agree
<b>HRM-1</b>	I had taken formal tests for this job (paper and pencil or work -sample) before being hired.	1	2	3	4	5	6	7
<b>HRM-2</b>	I had undergone structured interviews (Job related questions, same questions asked for all applicants) for this job before being hired.	1	2	3	4	5	6	7
<b>HRM-3</b>	I am involved in formal participation processes such as quality improvement groups, problem solving groups, or roundtable discussions in this job.	1	2	3	4	5	6	7
<b>HRM-4</b>	I am having a reasonable and fair complaint process in this job.	1	2	3	4	5	6	7

Please read each of the following statements and indicate by circling the degree to which you agree or disagree by circling a number from 1 to 7:		Strongly Disagree	Disagree	Disagree Somewhat	Neither agree Nor Disagree	Agree Somewhat	Agree	Strongly Agree
<b>HRM-5</b>	In this job, I have the opportunity to earn group bonuses for productivity, performance or other group performance outcomes.	1	2	3	4	5	6	7
<b>HRM-6</b>	I have the opportunity to earn individual bonuses (or commission) for productivity, performance or other individual performance outcomes at this job.	1	2	3	4	5	6	7
<b>HRM-7</b>	At least once a year I receive a formal evaluation of my performance in this job.	1	2	3	4	5	6	7
<b>HRM-8</b>	I regularly receive formal communication regarding hospital goals and objectives in this job.	1	2	3	4	5	6	7
<b>HRM-9</b>	In the last 4 months, the hospital has made a change in how work is completed in my department based on the suggestion(s) of an associate or group of associates.	1	2	3	4	5	6	7
<b>HRM-10</b>	Pay raises in this job are based on job performance.	1	2	3	4	5	6	7
<b>HRM-11</b>	Qualified associates in this job have the opportunity to be promoted to positions of greater pay and/or responsibility within the hospital.	1	2	3	4	5	6	7
<b>HRM-12</b>	I am allowed to make important work related decisions such as how the work is done or implement new ideas in this job.	1	2	3	4	5	6	7
<b>HRM-13</b>	The hospital hires only the very best people for this job.	1	2	3	4	5	6	7
<b>HRM-14</b>	Total pay for this job is the highest for the type of work in the area.	1	2	3	4	5	6	7
<b>HRM-15</b>	On average, some hours of formal training I do receive each year in this job.	1	2	3	4	5	6	7

## AFFECTIVE COMMITMENT

Listed below a series of statements that represent feelings that individuals might have about the hospital or organization for which they work. With respect to your own feelings about the particular organization for which you are now working, please indicate the degree of your agreement or disagreement with each statement by circling a number from 1 to 7:		Strongly Disagree	Disagree	Disagree Somewhat	Neither agree Nor Disagree	Agree Somewhat	Agree	Strongly Agree
<b>AC-1</b>	I am willing to work harder to help this hospital succeed.	1	2	3	4	5	6	7
<b>AC-2</b>	I am proud to work for this hospital.	1	2	3	4	5	6	7
<b>AC-3</b>	I feel a strong sense of belonging to this hospital.	1	2	3	4	5	6	7
<b>AC-4</b>	I would refer a friend to come work at this hospital.	1	2	3	4	5	6	7
<b>AC-5</b>	Overall, I am satisfied working at this hospital.	1	2	3	4	5	6	7

## ORGANIZATION CITIZENSHIP BEHAVIOR (OCB)

OCB refers to extra role behaviors which an employee performs for his organization. These activities may not part of their formal job description. Kindly rate your response about OCB by circling a number from 1 to 7:		Strongly Disagree	Disagree	Disagree Somewhat	Neither agree Nor Disagree	Agree Somewhat	Agree	Strongly Agree
<b>OCB-1</b>	I provide constructive suggestions about how my department can improve its effectiveness	1	2	3	4	5	6	7
<b>OCB-2</b>	For issues that may have serious consequences, I express my opinions honestly even when others may disagree.	1	2	3	4	5	6	7
<b>OCB-3</b>	I “touch-base” with my coworkers before initiating actions that might affect them.	1	2	3	4	5	6	7
<b>OCB-4</b>	I encourage others to try new and effective ways of doing their job.	1	2	3	4	5	6	7
<b>OCB-5</b>	I help others who have large amounts of work.	1	2	3	4	5	6	7
<b>OCB-6</b>	I willingly share my expertise with my coworkers.	1	2	3	4	5	6	7

## INTENT TO REMAIN

Intent to remain refers to the likelihood of employees staying with the hospital or organization. Look at each of the following statements and rank yourself by circling a number from 1 to 7:		Strongly Disagree    Disagree    Disagree Somewhat    Neither agree Nor Disagree    Agree Somewhat    Agree    Strongly Agree						
		1	2	3	4	5	6	7
<b>ITR-1</b>	I would turn down a job with more pay in order to stay with this hospital.	1	2	3	4	5	6	7
<b>ITR-2</b>	I plan to spend my career at this hospital.	1	2	3	4	5	6	7
<b>ITR-3</b>	I intend to stay at this organization for at least the next 12 months.	1	2	3	4	5	6	7
<b>ITR-4</b>	I do not plan to look for a job outside of this hospital in the next 6 months.	1	2	3	4	5	6	7

## ABSENTEEISM

Please read the following statement and indicate number of days you had remain absent from your work in the last calendar year.

<b>ABS-1</b>	How many days did you miss from work in the last 12 months?	
--------------	---	--

## DEMOGRAPHIC INFORMATION FORM

Please indicate the appropriate choice by tick marking the right circle:

1. **Gender:**             Male  
                               Female
  
2. **Marital Status:**  Single  
                               Married
  
3. **Age Group:**         Under 20  
                               21-30  
                               31-40  
                               41-50  
                               51-60  
                               Over 60
  
4. **Job Designation:**  Doctor  
                               Nurses
  
5. **Job Type:**          Permanent  
                               Fixed Contract
  
6. **Job Time:**          Full Time  
                               Part Time
  
7. **Income Level:**     Below 20k  
                               21-30k  
                               31-40k  
                               41-50k  
                               51-60k  
                               61k to 100000  
                               Above 100000 Rs.
  
8. **Hospital Type:**     Public  
                               Private
  
9. **Hospital Name:** \_\_\_\_\_