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**RESILIENCE AND HOPE AS PREDICTORS OF**  
**ORGANIZATIONAL COMMITMENT AMONG PRIVATE**  
**HOSPITALS' NURSES**

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***Abstract***

In view of the nursing shortage and the complementary role of the private healthcare sector to Malaysia's overall healthcare system, organizational commitment is regarded as an essential work attitude among nursing professionals. Nurses who are committed to the organization are known to always give their best at their work because they possess the willingness and sense of responsibility to perform their job tasks efficiently and effectively. In nursing, resilience and hope are deemed as two desirable personal traits that could enhance commitment. Therefore, the aim of this study is to examine the role of resilience and hope in predicting organizational commitment. Self-administered questionnaires were used to collect the survey data on 639 staff nurses working in large private hospitals in Malaysia. Data was subsequently analysed using Partial Least Squares (PLS) method. Our results revealed that hope alone has a direct and positive effect on organizational commitment. The present findings suggest the importance of possessing positive mindsets in enhancing nurses' commitment. Positive expectations regarding work goals will lead to greater levels of motivation and dedication among nurses. Lastly, useful insights are provided to hospital administrators on recruitment and training strategies to help ensure nurses continue to deliver superior quality care to patients on behalf of the employing healthcare organization.

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## 1. Introduction

The Malaysian healthcare system is composed of a mixture of the public and private healthcare providers that are under the responsibility of the Ministry of Health Malaysia (Hassali et al., 2014). The country provides healthcare services to all its population through a tax-based public healthcare system, which promises delivery of care to all Malaysians with minimal charges (Loganathan et al., 2019). On the other hand, private healthcare providers are profit-oriented that charge their patients based on services offered (Chee & Barraclough, 2007). According to the Department of Statistics Malaysia (2017), the private healthcare sector has become an essential contributor to the Malaysian economy due to its rapid growth throughout the country. For instance, under the Economic Transformation Programme (ETP), the private healthcare sector is expected to generate a revenue of RM 6.59 billion by 2020 besides creating 26,966 jobs (PEMANDU, 2013).

According to Alipour and Kamaee (2015), organizational commitment is a very desirable employee attitude in healthcare organizations. This is because committed employees will have greater retention, lower absences, and better performance. All these benefits will translate into higher-quality care to patients. Organizational commitment of nurses is highly prized given that the healthcare industry not only have to reduce its operational costs but at the same time need to improve its quality of services within an environment of constantly changing technology. Nurses have been described as the most essential human resources in a hospital and the effectiveness of a hospital in delivering quality healthcare services depends on its nurses' commitment to the organization (Khan & Jan, 2015). Organizational commitment represents an employee's attitude towards the organization which affects employees' identification with the goals and values of the organization, their willingness to contribute a substantial amount of effort for the organization as well as the desire to stay working for that particular organization (Mowday et al., 1979).

Nurses represent the largest share of the healthcare workforce (Buchan & Aiken, 2008). They are responsible in providing care to patients while ensuring effective patient health outcomes (Buchan & Aiken, 2008). Nurses are always involved in physically and emotionally demanding situations which often expose them to occupational and health risks as well as work overload, increased patient numbers, incidences of bullying, and even harassment at the workplace (Bogossian et al., 2014). Due to such taxing environments, nurses require a high level of psychological capital in order to perform their job effectively (Luthans & Youssef, 2004). Luthans and Youssef (2004) stated that psychological capital denotes a positive state of mind which is displayed during the growth and development of an individual. There are four key components of psychological capital which includes self-efficacy, optimism, resilience and hope (Luthans & Youssef, 2004). However, given the challenges and stressful situations that nurses encounter in their daily work, two dimensions of psychological capital in the form of resilience and hope are deemed as more appropriate. Hence, the present study will focus on these two variables.

Resilience denotes an individual's capability to bounce back from a tough situation to attain victory and is typically found in people who perceive life as meaningful and needs improvisation and adaptation (Luthans & Youssef, 2004). Meanwhile, hope signifies a cognitive set of positive expectations for goal achievement based on one's goal-directed determination and one's plans of meeting those goals (Snyder et al., 1991a). In other words, individuals with hope possess the ability to focus on their goals and fulfil those goals (Snyder et al., 1991b). Individuals with hope will remain hopeful that there is always an alternative

way in every circumstances (Snyder, 1994). These individuals will therefore perform creatively and explore all possible avenues towards reaching their goal due to their strong determination (Larson & Luthans, 2006). According to Peng et al. (2013), hope and resilience have positive and significant relationships with organizational commitment. Furthermore, Lifeng (2007) demonstrated that both hope and resilience are important determinants of employees' organizational commitment. This notion was further supported by Toor and Ofori (2009) who stated that hope and resilience lead to increased organizational commitment. Therefore, this study sought to inspect the effects of two dimensions of psychological capital (resilience and hope) on organizational commitment of nurses from Malaysian private hospitals.

## **2. Problem Statement**

Since nurses who represent the largest group of professionals in a hospital are responsible in carrying out the hospital's work activities, their role is essential in determining the quality of the hospital's services (Khan & Jan, 2015). According to Huang et al. (2006), nurses were more pleased with their work if they were dedicated to their principles, values and practices in the organization (Huang et al. 2006). Moreover, nurses with low organizational commitment, may not be able to perform work effectively, which may ultimately, lead to decreased patient care quality (Ford et al., 2006). Joo (2010) stated that one important strength for employees working in any organization is their commitment because employees who are committed will remain loyal to their employing organization and willing to extend efforts on its behalf. As such, they would be more likely to engage in extra role behaviour in order to achieve their organization's goals (Luthans, 2002).

Nowadays, healthcare organizations throughout the world are faced with high turnover rate among healthcare personnel which can negatively affect a hospital's capacity to meet patients' needs (Laschinger et al., 2006). Malaysia is also confronted with problems related to nursing shortage where the turnover rate of Malaysian nurses are on the rise year by year (Barnett et al., 2010). Haider et al. (2015) asserted that high turnover rate can cause monetary and non-monetary problems to healthcare organizations. As a result, healthcare organizations have experienced economic losses because they have to continuously recruit new nurses (Buerhaus et al., 2007). To address this concern there is a need for healthcare personnel to exhibit high organizational commitment. According to Dixit and Bhati (2012), committed employees are unlikely to leave their organization and are acknowledged to always perform at their best, which ultimately, in the aggregate, lead to enhanced organizational performance. In light of this, an improved understanding of the effects of hope and resilience on nurses' organizational commitment is essential. Therefore, this study aims to contribute to the literature by examining the role of resilience and hope as predictors of organizational commitment among Malaysian private hospitals' nurses.

## **3. Research Questions**

The following are the research questions for this study.

- Does resilience has a direct and positive effect on organizational commitment of nurses attached to Malaysian private hospitals?

- Does hope has a direct and positive effect on organizational commitment of nurses attached to Malaysian private hospitals?

## 4. Purpose of the Study

The purpose of this study was to investigate the effects of two dimensions of psychological capital (resilience and hope) on organizational commitment among nurses working in private hospitals in Peninsular Malaysia. This research used a cross sectional approach where all variables and data were collected over a set period of time. All variables for this study were measured at the individual level using self-administered questionnaires.

## 5. Research Methods

### 5.1. Sample and Data Collection Procedure

This study involved private hospitals with more than 100 beds located in Peninsular Malaysia. The website of Malaysian Private Hospitals Association identified 44 private hospitals which have more than 100 beds in Peninsular Malaysia (APHM, 2016). Emails were sent to the Human Resource Department of all the 44 hospitals to inform them of the purpose of the study and seek their participation. Phone calls were also made as follow-ups. However, only 9 hospitals decided to partake in our survey. In total, 770 questionnaires were disseminated according to the number of staff nurses at each hospital. The questionnaires were given to the matron of each hospital. A matron was chosen by each of the hospitals' directors to be in charge of the distribution and collection of the questionnaires to the staff nurses. A period of 2 weeks was initially given to the staff nurses to answer the questionnaire. Due to their busy schedule, data was finally collected within 2 months. In total, 639 useable questionnaires were analyzed.

### 5.2. Instruments

Resilience was measured using 5 items adapted from Wagnild and Young (1993). The sampled item for resilience include, "I usually manage one way or another". Hope was measured using 6 items adapted from Snyder et al. (1996). The sampled item for hope include, "If I find myself in a difficult situation, I could think of ways to get out of it". Organizational commitment was measured using 3 items adapted from Mowday et al. (1979). The sampled item for organizational commitment include, "I would accept almost any type of job assignment in order to keep working for this hospital". The response format was based on a five-point Likert Scale which ranges from "1" = "strongly disagree" to "5" = "strongly agree".

## 6. Findings

### 6.1. Respondents' Profile

Our sample were predominantly females (91 %). Most of them (82.3 %) were diploma holders. The average age, job tenure and organizational tenure for the sampled nurses were 29.5 years, 4.9 years and 5.3 years respectively. The mean scores and standard deviations (SD) for the study variables were: 3.70 for resilience (SD = 0.56), 3.64 for hope (SD = 0.52), and 3.40 for organizational commitment (SD = 0.74).

## 6.2. Measurement Model Results

Factor loadings, composite reliability (CR), and average variance extracted (AVE) were computed to measure convergence validity. As shown in Table 1, all indicators ranged from 0.676 to 0.860, which exceeded Hair et al.'s (2010) minimum cut-off value of 0.5. Similarly, all latent constructs demonstrated adequate convergent validity with AVE values ranging from 0.596 to 0.707. Meanwhile, the CR values for the latent variables ranged from 0.879 to 0.898 and were above Hair et al.'s (2010) threshold value of 0.7, suggesting the existence of significant homogeneity. Thus, the measurement model is considered reliable and displayed sufficient convergent validity.

**Table 01.** Results of the Measurement Model

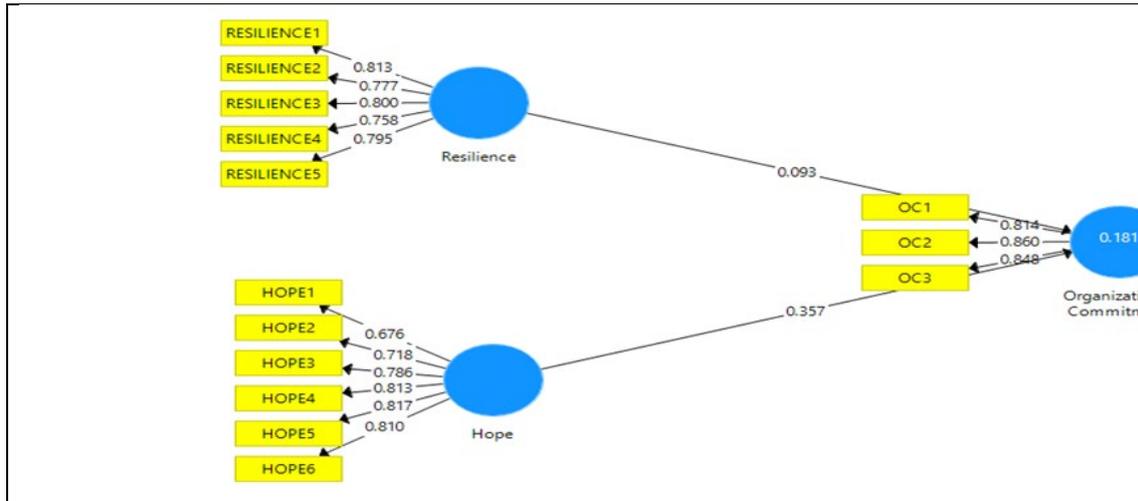
Model construct	Items	Loadings	AVE	CR
Resilience	Resilience1	0.813	0.622	0.892
	Resilience2	0.777		
	Resilience3	0.800		
	Resilience4	0.758		
	Resilience5	0.795		
Hope	Hope1	0.676	0.596	0.898
	Hope2	0.718		
	Hope3	0.786		
	Hope4	0.813		
	Hope5	0.817		
	Hope6	0.810		
Organizational Commitment	OC1	0.814	0.707	0.879
	OC2	0.860		
	OC3	0.848		

Discriminant validity was assessed by the Heterotrait-Monotrait (HTMT) ratio of correlations between the study variables. As shown in Table 2, all HTMT values (ranging from 0.389 to 0.791) did not surpass Gold et al.'s (2001) threshold value of 0.90, which corroborated the existence of discriminant validity.

**Table 02.** Heterotrait-Monotrait (HTMT) Ratio of Correlations

Variables	Hope	Organizational Commitment	Resilience
Hope			
Organizational Commitment	0.496		
Resilience	0.791	0.389	

Figure 1 shows that the R<sup>2</sup> values for organizational commitment is 0.181 which suggests that 18.1% of the variance in organizational commitment can be explained by resilience and hope.



**Figure 01.** Measurement Model of the Study

### 6.3. Structural Model Results

Bootstrapping results (refer to Table 3) indicate that hypothesis 1 is not supported while hypothesis 2 is supported. Resilience was found to be unrelated to organizational commitment. These findings challenge the discoveries from previous works for instance by Shin et al. (2012) and Bardoel et al. (2014) who reported that resilience have a significant and positive relationship with organizational commitment. This could be due to the fact the nurses in this study are considered relatively young where their average age is only 29.5 years. Therefore, they might need further experience to develop resilience and have the ability to bounce back from a difficult situation. Furthermore, the job tenure and organizational tenure for the nurses are 4.9 years and 5.3 years respectively. This could also mean that the nurses in this study have not learnt to improvise and adapt to the culture of their respective healthcare organizations. Hope, however, was found to have a positive relationship with organizational commitment which is consistent with the findings by previous researchers (Lifeng, 2007; Toor & Ofori, 2009) who asserted that employees who have hope will be more committed to their organization. Hopeful individuals have the will to struggle and to achieve positive outcomes. In so doing, they are more likely to be energetic, willing to exert effort for the sake of the organization, and become more intrinsically bound to the organization, resulting in higher organizational commitment.

**Table 03.** Results of Structural Model

Effects	Paths	Std Beta	Standard Error	T values	Decisions
Direct	Resilience -> Organizational Commitment	0.093	0.057	1.642*	Not Supported
	Hope -> Organizational Commitment	0.357	0.057	6.285**	Supported

Notes: \*\*p<0.01, \*p<0.05, bootstrapping (n=5000).

## 7. Conclusion

Given the importance of the healthcare industry to the health and wellbeing of society in a country, this study sought to examine the direct and positive relationships between two dimensions of psychological

capital (resilience and hope) and organizational commitment. Our sample comprised nurses from private hospitals in Malaysia. Our statistical results indicated that hope alone has a positive and direct effect on organizational commitment. Given that nurses represent the largest component of healthcare professionals, their commitment to the organization is essential in ensuring superior healthcare quality provided to patients. Therefore, hospital administrators may want to focus on recruiting candidates that have positive outlooks. In addition, training programs may be continuously conducted to boost nurses' inner strength in the form of hope so that they are able to persevere toward goals, and in times of difficulty, redirect their goal's route to another pathway in order to win. Hence, nurses become bonded to their employer, resulting in greater organizational commitment.

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