

Chapter One

Introduction

1.1 Background to the Study

The healthcare system is pivotal in societal well-being, and the commitment of healthcare workers is of paramount importance¹. Although other sectors, are also subjected to high pressure to ensure sustainability and efficiency, the healthcare sector face more critical characteristics, where the commitment of workers influence the functioning of the healthcare delivery system and the quality of patient care^{2, 3}. Healthcare workers, such as doctors, nurses, pharmacists and support staff, operate in environments that are inherently stressful, demanding and emotionally charged^{1, 4}. The nature of work, combined with external pressures such as resource constraints and the ongoing global health challenges in the wake of COVID-19 pandemic emphasizes the importance of commitment among healthcare workers³.

Organisational commitment refers to the emotional and psychological attachment an individual has to their workplace⁵. This attachment is characterized by a sense of loyalty, identification with organisational values, and active involvement in achieving its goals. As highlighted by Meyer and Allen's Three-Component Model of Commitment, organisational commitment encompasses affective, continuance, and normative dimensions, all of which influence an employee's dedication to their role and workplace. Employees who exhibit strong organisational commitment tend to go beyond their prescribed job roles, contributing supplementary effort toward achieving organisational objectives, thus enhancing overall performance and reducing turnover rates⁶.

Affective commitment refers to the emotional attachment and identification that employees feel toward their organisation. Healthcare workers with high affective commitment

often derive a sense of pride and fulfillment from their roles, particularly when they perceive their work as meaningful and aligned with personal values⁷. For instance, the collectivist culture like Nigeria, fosters a sense of purpose among healthcare workers, as they often view their roles as serving their communities⁸. However, affective commitment is significantly influenced by the psychological climate, including perceptions of fairness, resource availability, and leadership support. When these factors are lacking—such as inadequate infrastructure, delayed salaries, and poor recognition—healthcare workers may experience emotional detachment, ultimately reducing their commitment⁹.

Continuance commitment involves an employee's recognition of the costs associated with leaving the organisation. For healthcare workers in Nigeria, continuance commitment may be shaped by economic realities and limited job opportunities within the local healthcare sector. The persistent shortage of healthcare workers globally and the high cost of professional relocation, especially to developed countries, may compel some individuals to remain in their positions despite dissatisfaction¹⁰. However, continuance commitment does not necessarily translate to job satisfaction. For instance, healthcare workers in rural areas may remain in their roles due to lack of alternatives, but the absence of a supportive work environment can lead to low morale and burnout, adversely affecting service delivery¹¹.

Normative commitment is based on an employee's sense of obligation to stay with their organisation due to moral or ethical reasons. In the Nigerian healthcare system, normative commitment may stem from cultural expectations, professional ethics, or loyalty to the community. Many healthcare workers feel a strong moral duty to provide care, especially in underprivileged areas where access to medical services is limited¹². Despite the challenging conditions—such as resource constraints, exposure to infectious diseases, and security risks—

this sense of obligation drives many healthcare workers to remain steadfast in their roles. However, excessive reliance on normative commitment without addressing systemic issues can lead to resentment and reduced long-term commitment¹³.

In the healthcare sector, organisational commitment is pivotal due to the critical nature of its operations³. Healthcare workers are tasked with safeguarding patient lives and ensuring the delivery of quality care. A lack of commitment among healthcare workers can lead to dire consequences, such as substandard patient care, increased medical errors, and diminished health outcomes⁶. Empirical studies show that happiness and job satisfaction significantly influence commitment and performance. For instance, a previous study revealed that positive emotional states among healthcare workers improve organisational outcomes by fostering resilience and collaboration¹⁴. However, despite the critical importance of commitment in healthcare, many professionals report dissatisfaction and disconnection from their roles, a phenomenon driven by various structural and psychosocial factors.

The healthcare sector has experienced a major global shift, including workforce shortages¹⁵. The COVID-19 pandemic significantly impacted the healthcare system worldwide¹⁶.¹⁷ Healthcare workers face unprecedented challenges, including a heavy workload, increased stress, and exposure to health risks. Organisational commitment has become more paramount because of these factors associated with the global health challenges¹⁸. Beyond the necessity of commitment to retain healthcare workers due to workforce shortages, there has also been a noticeable shift in the values and expectations of different generations in the workforce¹⁹. For instance, the United State of America is facing a challenge of shortage of nurses because of aging population and retirement of experienced nurses²⁰. It has been suggested that younger healthcare workers often seek workplaces that prioritize work-life balance, professional

development, and a positive organisational culture. In the United Kingdom, younger healthcare workers are suggested to face challenges related to work-life balance²¹. Organisations that align with these values are more likely to foster commitment²².

Organisational commitment among healthcare workers in Africa is shaped by a combination of unique cultural factors and common challenges faced by healthcare sectors across the continent. Healthcare workers in Africa often face challenges, including resource constraints, infectious disease burdens, and infrastructural limitations^{23, 24}. The World Health Organisation indicated that only 3% of healthcare professionals worldwide are found in Africa, despite the continent bearing 24% of the global disease burden²⁵. However, despite these statistics, many African cultures have a strong sense of community and collectivism. This may influence a deep commitment to serve their communities, and this sense of purpose may positively influence organisational commitment.

The Nigeria's healthcare sector is burdened with issues ranging from government insincerity and unwillingness to transform the sector to healthcare workers nonchalant attitudes toward patients and brain drain of the best hands to foreign countries^{26,27}. The Nigerian government's attitude toward the healthcare sector has been marked by issues such as inadequate budgetary allocations, delayed payment of salaries, and insufficient attention to infrastructure development²⁸. For instance, the federal government allocated an average of only 5% of its national budget to health between 2014 and 2020, far below the 15% benchmark set by the 2001 Abuja Declaration²⁹. This chronic underfunding affects the availability of essential resources and hinders the sector's ability to retain skilled workers³⁰. Moreover, a doctor-to-patient ratio of approximately 4:10,000 in Nigeria, compared to the World Health Organisation's recommendation of 1:600, highlights the dire shortages in the healthcare workforce³¹. Factors

including brain drain, inadequate training facilities, and challenging working conditions exacerbate the shortage of healthcare workers.

According to the World Health Organisation, the shortages are a direct result of the massive migration of healthcare employees to environments where their services are rewarded³². The migration of healthcare workers to better-paying and better-equipped foreign systems further exacerbates this crisis. Nigerian healthcare professionals often seek greener pastures due to insufficient remuneration, suboptimal working conditions, and limited access to modern medical technologies. The ripple effect is evident in the over one billion dollars spent annually on medical tourism, underscoring the healthcare sector's inability to meet local needs²³. Culturally, the collectivist orientation in many African societies fosters a sense of duty and purpose among healthcare workers. However, this intrinsic motivation is often insufficient to counterbalance systemic shortcomings.

Workplace happiness refers to the positive emotional state and sense of fulfillment that employees experience in their professional environment. It encompasses feelings of satisfaction, engagement, and well-being derived from various aspects of work, such as job roles, relationships with colleagues and supervisors, organisational culture, and alignment with personal values and goals^{33, 34}. Workplace happiness involves the positive emotional state of employees resulting from their work experiences, relationships with colleagues, and overall job satisfaction³⁵. Workplace happiness is not merely the absence of stress or dissatisfaction; it involves a proactive sense of contentment and motivation that drives employees to perform optimally and contribute meaningfully to organisational success. Factors influencing workplace happiness include fair compensation, opportunities for growth, supportive leadership, work-life balance, and recognition for contributions^{36, 37}.

Workplace happiness is paramount among workers in the healthcare sector. For instance, there is more evidence on healthcare professionals' experiences of higher levels of distress, burnout syndrome, depressive symptoms, and suicidal ideations more than among other professionals in other sectors³⁸. Employers attempt to keep employees happy in order to enhance good relationship among employees and employment remunerations and to retain competent and productive. The happiness of employees has a positive impact on mindset; perform optimally which help employers to achieve sale, production and sale target. Organisational commitment is intricately linked to the psychological climate within healthcare organisations³⁹.

Psychological climate refers to the collective perceptions employees hold about their work environment, encompassing factors such as leadership styles, communication patterns, fairness, and organisational culture. In healthcare, this climate holds particular significance due to the emotionally and physically demanding nature of the work and its direct impact on employee well-being and patient outcomes. A positive psychological climate fosters trust, motivation, and commitment, while a negative climate can lead to stress, dissatisfaction, and disengagement⁴⁰. The psychological climate in Nigerian healthcare settings is influenced by a myriad of challenges, including security issues, economic instability, and social comparisons. Security threats, such as the kidnapping and killing of healthcare workers in conflict-prone regions, create a pervasive sense of fear and vulnerability, diminishing job satisfaction and commitment^{41, 42}. Insecurity Insight identified 2109 of violence against or obstruction of health care in 53 countries and territories between 01 January and 30 September 2024⁴³. In Africa, about 480 health workers were killed in 2023⁴³.

The kidnapping epidemic in Nigeria is compounding the country's fragile healthcare system, already strained by resource shortages and health worker emigration. Since 2019, over

100 health workers have been abducted, with alarming cases like that of Dr Ganiyat Popoola, who has been held captive for over eight months despite her family and professional associations' efforts⁴⁴. Data from the Safeguarding Health in Conflict Coalition reveals that between 2019 and 2023, 109 health workers were kidnapped and 17 killed, with incidents involving doctors, nurses, and other professionals⁴³. Kidnappings occurred during road ambushes, home invasions, and while workers were at hospitals or travelling. Violence peaked in 2021, with 30 health workers kidnapped and four killed, often accompanied by the destruction of health facilities and looting of supplies, particularly in northern states like Kaduna and Borno. Although 2023 saw a decline in reported kidnappings to 19 and no recorded killings, violence persists, with incidents spreading to previously unaffected states like Nasarawa and Osun⁴³.

Similarly, economic issues, such as inflation and inadequate remuneration, exacerbate feelings of unfairness and stress among healthcare professionals, as they struggle to meet personal and professional needs⁴⁵. Social influence further compounds these issues, as Nigerian healthcare workers often compare their working conditions and compensation with their counterparts in countries like the United Kingdom, where healthcare professionals receive better pay, resources, and support⁴⁶. This disparity amplifies feelings of dissatisfaction and contributes to the ongoing brain drain often face resource constraints, infrastructural decay, and limited support systems.

Fairness is a critical element of the psychological climate and significantly affects healthcare workers' perceptions of their work environment^{47, 48}. The absence of equitable policies, such as fair distribution of resources, transparent promotion processes, and competitive compensation, often leads to perceptions of injustice, which undermine commitment and productivity⁴⁹. In Nigeria, government policies have historically failed to adequately address the

healthcare sector's needs. Chronic underfunding, delayed salary payments, and insufficient infrastructural development have created an environment where healthcare workers feel undervalued and unsupported. For instance, between 2014 and 2020, the federal government allocated an average of only 5% of its national budget to health, far below the 15% recommended by the 2001 Abuja Declaration⁵⁰. These systemic inadequacies not only hinder the delivery of quality healthcare but also erode workers' confidence in the system and their willingness to remain committed⁵¹.

1.2 Statement of the Problem

Health workers, essential to the nation's well-being, are leaving the country in droves in search of greener pastures causing challenges within the healthcare system⁵². These threats contribute to a precarious work environment that undermines organisational commitment—a vital element for the efficient functioning of healthcare institutions. Low organisational commitment among healthcare workers in Nigeria has emerged as a pressing concern, with significant implications for service delivery and patient care.

Health workers frequently experience burnout and dissatisfaction due to systemic inefficiencies, resource shortages, and overwhelming workloads. These challenges lead to frustration and detachment, causing many to explore career opportunities abroad or in other industries, thereby fuelling the "brain drain" phenomenon⁵³. This exodus not only worsens the workforce shortage but also diminishes the morale of the remaining employees, perpetuating a vicious cycle of low commitment and high turnover. Organisational commitment, which encompasses employees' loyalty, emotional attachment, and identification with their workplace, is essential for maintaining the quality of healthcare services. However, the inability to retain a

committed workforce jeopardizes the efficiency of healthcare institutions, as highlighted in previous studies^{54, 55}.

The challenges facing healthcare workers in Nigeria are compounded by poor working conditions, inadequate remuneration, limited opportunities for career growth, and insufficient resources. These factors collectively undermine the willingness of employees to remain loyal and dedicated to their organisations^{12, 36, 56}. Despite the recognized importance of organisational commitment in ensuring stable healthcare services, targeted strategies to address this issue remain limited. Moreover, while existing literature emphasizes the physical challenges faced by health workers, there has been insufficient exploration of the psychological and emotional dimensions that influence commitment, particularly in the Nigerian context.

Emerging research suggests the crucial role of workplace happiness and psychological climate in fostering organisational commitment. Previous studies have shown that positive psychological environments promote emotional attachment, loyalty, and reduced turnover intentions among employees^{57, 58}. However, these studies primarily focused on academic staff and university employees, leaving a gap in understanding the dynamics of these factors in healthcare settings. An author further identified that perceived inequities in promotions and workload distribution negatively impact organisational commitment, emphasizing the need for fairness in workplace policies⁵⁹.

Despite these insights, limited attention has been paid to how workplace happiness and psychological climate affect organisational commitment among healthcare workers in Nigeria. The psychological and emotional challenges, compounded by insecurity, including kidnappings and violence, and economic pressures like inflation, further complicate the work environment for Nigerian healthcare professionals. These factors have yet to be comprehensively studied in

relation to their impact on organisational commitment and workplace happiness. This study seeks to fill these gaps by investigating how workplace happiness and psychological climate influence organisational commitment among healthcare workers in Nigeria.

1.3 Aim and Objectives of the Study

The primary objective of this research was to explore the potential influence of workplace happiness and psychological climate and organisational commitment among healthcare workers. The study aimed to determine whether happiness at work and work environment play a role in employee commitment to the workplace.

The specific objectives were as follow:

- i. To determine if workplace happiness will influence organisational commitment among healthcare workers in Ibadan metropolis.
- ii. To explore the influence of psychological climate on organisational commitment among healthcare workers in Ibadan metropolis.
- iii. To examine gender differences in organisational commitment among healthcare workers in the Ibadan metropolis.
- iv. To investigate whether there will be an interaction of workplace happiness and psychological climate on organisational commitment among healthcare workers in the Ibadan metropolis.
- v. To explore the variation in commitment to the workplace across professions in the healthcare system in Ibadan metropolis.

1.4 Research Questions

The following questions were addressed in this study:

- i. How does workplace happiness influence organisational commitment among healthcare workers in Ibadan metropolis?
- ii. How does psychological climate influence organisational commitment among healthcare workers in Ibadan metropolis?
- iii. How will gender influence organisational commitment among healthcare workers in Ibadan metropolis?
- iv. What is the interaction influence of workplace happiness and psychological climate on organisational commitment among healthcare workers in the Ibadan metropolis?
- v. What differences will professions play on organisational commitment among healthcare workers in the Ibadan metropolis?

1.5 Hypotheses

- i. Participants who report higher Workplace Happiness will express higher Affective Organisational Commitment than those who report lower Workplace Happiness.
- ii. Participants who report higher Workplace Happiness will express higher Continuance Organisational Commitment than those who report lower Workplace Happiness.
- iii. Participants who report higher Workplace Happiness will express higher Normative Organisational Commitment than those who report lower Workplace Happiness.
- iv. Participants who report higher Workplace Happiness will express higher Organisational Commitment than those who report lower Workplace Happiness.

- v. Participants with a more positive perception of the Psychological Climate will exhibit greater Affective Commitment compared to those with a less favourable perception
- vi. Participants with a more positive perception of Psychological Climate will exhibit greater Continuance Commitment compared to those with a less favourable perception
- vii. Participants with a more positive perception of Psychological Climate will exhibit greater Normative Commitment compared to those with a less favourable perception
- viii. Participants with a more positive perception of Psychological Climate will exhibit greater Organisational Commitment compared to those with a less favourable perception
- ix. There will be gender differences in organisational commitment among health workers.
- x. Workplace Happiness and Psychological Climate will jointly influence organisational commitment among health workers.
- xi. There will be a significance difference in Commitment among different professionals of Healthcare Workers.

1.6 Significance of the Study

This study holds profound empirical, practical, and policy significance, particularly within the context of Nigeria's healthcare system, which faces challenges such as insecurity, brain drain, and declining employee commitment. By examining the relationship among workplace happiness, psychological climate, and organisational commitment, the research aims to uncover critical factors influencing healthcare workers' dedication to their organisations. Organisational commitment is a cornerstone of effective healthcare delivery, influencing patient care, staff retention, and overall system efficiency. Improving organisational commitment has the potential to enhance patient outcomes, reduce medical errors, and increase satisfaction among both healthcare providers and recipients.

The relevance of this study lies in its contribution to understanding the psychosocial factors that impact organisational commitment. By focusing on workplace happiness and psychological climate, this research fills a gap in the existing literature, offering a nuanced perspective on how positive workplace experiences influence health workers' loyalty and engagement. These findings will expand theoretical frameworks in industrial and organisational psychology, particularly within the context of developing nations where insecurity and resource constraints are significant concerns.

This study has substantial implications for designing strategies to strengthen the healthcare workforce. The insights gained can inform the development of targeted policies aimed at enhancing workplace happiness and fostering a supportive psychological climate. Policymakers can utilize these findings to improve working conditions, ensure fair remuneration, and establish robust safety measures to address the pressing security challenges faced by health workers, such as kidnappings and workplace threats. For instance, integrating workplace happiness programs and regular psychological support into health sector reforms can significantly improve workers' morale and commitment.

Additionally, the study revealed the importance of policy interventions to enhance security for healthcare workers, who are often vulnerable due to the high-risk environments in which they operate. Implementing security measures such as safe housing, transportation services, and protective protocols for healthcare staff can reduce fears of abductions and violence, fostering a greater sense of safety and commitment. Furthermore, the study's findings can support the development of organisational policies that prioritize employees' psychological well-being, ensuring they feel valued and protected. In addition to its practical relevance, this study will contribute to the existing literature on organisational commitment by focusing on internal

psychological processes, providing a unique perspective beyond variables like burnout and leadership style.

1.7 Scope of the Study

This study investigated the effect of workplace happiness and psychological climate on organisational commitment among healthcare workers in Oyo State, Nigeria. More specifically, the study examined how the three dimensions of workplace happiness—engagement, work satisfaction, and affective organisational commitment—as well as psychological climate factors such as role clarity, supportive management, contribution and recognition, and self-expression and challenge—will influence organisational commitment (affective, continuance, and normative commitment) of healthcare workers in Oyo State, Nigeria.

The study was restricted to healthcare workers working in federal and state hospitals in Ibadan metropolis, Oyo State, Nigeria. Healthcare workers who comprised the sample for this study include doctors, nurses, pharmacists, administrators, and technicians. The justification to use these categories of healthcare workers was that the issues under investigation are prevalent among them⁶⁰. The choice of conducting this research in Ibadan, Oyo State was because it has an established healthcare system and offers an appropriate geographical setting to conduct this study.

1.8 Operational Definition of Terms

Organisational Commitment: This refers to the degree of an individual's emotional connection, identification, and involvement with a specific organisation. It is the extent to which an employee is viewed as having a strong emotional bond, identifying closely with the organisation, and is willing to contribute to the goals and objectives of the organisation. Organisational

commitment in this study will be determined using the Organisational Commitment (OC) scale developed by Meyer and Allen (1997) based on three dimensions including affective, continuance and normative⁶¹. It will be determined from participants' score on all dimensions of the OC scale consisting of 24 items that are rated on a 7-point Likert-type scale ranging from strongly disagree (1) to strongly agree (7), with higher scores indicating higher level of commitment to the organisation.

Affective Commitment: This refers to the emotional attachment an employee has to the organisation. Employees with high affective commitment genuinely care about the organisation and feel a sense of belonging. It will be determined from participants' score on affective dimension of the OC scale consisting of 8 items that are rated on a 7-point Likert-type scale ranging from strongly disagree (1) to strongly agree (7), with higher scores indicating higher level of affective commitment to the organisation.

Continuance Commitment: This refers to an employee's perception of the costs associated with leaving the organisation. It involves a calculation of the investment an employee has made in the organisation and the potential losses they would incur if they were to leave. It will be determined from participants' score on continuance dimension of the OC scale consisting of 8 items that are rated on a 7-point Likert-type scale ranging from strongly disagree (1) to strongly agree (7), with higher scores indicating higher level of continuance commitment to the organisation.

Normative Commitment: This refers to an employee's sense of obligation to remain with the organisation. It is influenced by a belief in the moral or ethical duty to stay, often because the organisation has invested in the employee's development. It will be determined from participants' score on normative dimension of the OC scale consisting of 8 items that are rated

on a 7-point Likert-type scale ranging from strongly disagree (1) to strongly agree (7), with higher scores indicating higher level of normative commitment to the organisation.

Workplace Happiness: This refers to the subjective and positive emotional state experienced by employees within their work environment. It encompasses feelings of contentment, joy, and satisfaction arising from various factors such as a supportive workplace culture, positive relationships with colleagues, meaningful tasks, and overall job fulfilment. In this study, workplace happiness will be determined from participants' scores on the engagement and work satisfaction dimension on the Shortened Happiness at Work (SHAW) scale consisting of six items rated on a 5-point Likert scale ranging from strongly disagree (1) to strongly agree (5), with higher scores indicating higher happiness at work⁶².

Psychological Climate: This refers to the shared perceptions and attitudes of individuals within a workplace, reflecting the overall psychosocial environment. It involves the employees' collective understanding and interpretation of the organisational culture, leadership styles, communication patterns, and the prevailing emotional tone within the work setting. Psychological climate in this study will be determined from participants' scores on the six dimensions (supportive management, role clarity, contribution, recognition, self-expression and challenge) of the Psychological Climate Scale (PCS) consisting of 21 items rated on a 7-point Likert-type scale ranging from disagree strongly (1) to agree strongly (7), with higher scores indicating a higher psychological climate⁶³.

Healthcare workers: This refers to the people saddled with the responsibility of protecting and improving the health of the communities. There are different professionals operating in

healthcare environments. In this study, it means doctors, nurses, pharmacists, technicians and administrative staff.

Endnotes

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Chapter Two

Literature Review

2.1 Conceptual Review

2.1.1 Workplace Happiness

Happiness is a significant factor for most individuals and a highly esteemed goal across diverse societies¹. It is recognized as a fundamental component of human emotions and appears as joy in various basic emotion typologies. Within the range of human experience, happiness is a ubiquitous condition, with most people experiencing some degree of happiness for a significant portion of their lives^{1, 2}. Happiness has been a subject of interest since ancient times, and its systematic exploration in psychological research has emerged more prominently in recent years, particularly with the introduction of positive psychology². Happiness, according to the ancient Greek philosopher Aristotle (384–322 BC), is the ultimate motivator behind decisions and behaviours made by people³. The United Nations (UN) has acknowledged the pursuit of pleasure as an essential human objective, echoing this idea. The presidents of the 193 UN General Assembly member states adopted a historic resolution (A/Res/66/281) on July 12, 2012, designating March 20th as the International Day of Happiness⁴. This change represents a move away from the traditional disease model, which mainly concentrates on negative experiences like illness, depression, and stress and instead emphasizes the study of positive states such as happiness⁵.

Researchers have offered varied definitions of happiness, reflecting divergent conceptualizations. The primary distinction lies between hedonic and eudaimonic views⁶.

Hedonic perspectives portray happiness as pleasant feelings and favourable judgments, while eudaimonic perspectives encompass virtuous actions, moral integrity, authenticity, meaningfulness, and personal growth^{6,7}. The eudaimonic view of well-being emphasizes self-validation, self-actualization, and the pursuit of virtuous actions and meaningful goals. According to this perspective, a fulfilling life involves moral integrity, personal growth, and the utilization and development of one's skills and talents, irrespective of momentary emotional states. It is widely believed that persistent happiness –the pursuit of only pleasurable experiences – is unsustainable in the absence of eudaimonic well-being⁸. Despite the common distinction between hedonic and eudaimonic well-being, empirical research often finds a significant correlation between the two constructs, prompting scholars to question the utility of maintaining a strict dichotomy^{7,8}.

Subjective well-being is an essential concept in the study of happiness. It typically involves two interrelated parts: judgments of life satisfaction and affect balance. Judgment of life satisfaction consists of overall life satisfaction and domain-specific life satisfaction, while affect balance is defined as a higher proportion of positive than negative feelings. Research on affect, mood, and emotions constantly identifies the hedonic view as crucial in describing people's emotional experiences. In this sense, "happy" is a defining anchor at the positive end of the pleasantness spectrum inside the conventional affect circumplex model⁹.

Happiness is not frequently used in academic discourse on employee experiences within organisations. Researchers have long been interested in related constructs that overlap considerably with the broader concept of happiness⁹. Job satisfaction, for instance, is the most noticeable construct in organisational research, serving as both an independent and dependent variable. Several new constructs reflecting various forms of happiness or positive affective

experiences in the workplace have emerged in recent years^{10,11}. These constructs typically encompass positive attitudes or experiences, such as positive feelings, moods, emotions, and flow states. The perceived degree of presence, stability across time, and precise content of happiness-related categories in organisational study vary noticeably. Happiness, in essence, entails the experience of positive emotions while concurrently perceiving one's life as meaningful and worthwhile. However, historically, research on the mental health of healthcare professionals has been more concerned with psychopathology than with positive aspects of mental health^{12,13}.

Happiness is the foundation of positive affect, which includes experiencing happy emotions and believing that one's life is morally upright, significant, and valuable. Workplace happiness is a crucial part of organisational success and individual fulfillment¹⁴. It is defined as the overall positive emotional state that employees experience in their work environment¹⁴. Workplace happiness encompasses various factors that contribute to employees' contentment, motivation, and engagement at work.¹⁴ It involves feelings of fulfillment, engagement, and motivation derived from meaningful work, supportive relationships, and a positive organisational culture. Happiness at work goes beyond mere job satisfaction and includes a sense of purpose, accomplishment, and well-being in one's professional life. According to the 2017 World Happiness Report (WHR), happiness in the workplace correlates with increased productivity and consistency¹⁵.

Work constitutes a significant aspect of happiness, as individuals spend a considerable portion of their waking hours engaged in work-related activities. It provides not only income but also identity and fulfillment¹⁶. The strength of this conceptualization lies in several factors that influence workplace happiness. A fundamental principle of workplace happiness is the concept

of meaningful work¹⁷. Meaningful work involves personally fulfilling work that aligns with one's values and passions and contributes to a sense of purpose and significance, leading to a feeling of engagement, motivation, and satisfaction¹⁷. When employees perceive their work as meaningful and aligned with their values, interests, and skills, they are more likely to experience a heightened sense of satisfaction and engagement. Another aspect of workplace happiness is positive relationships within the workplace ecosystem¹⁸. This aspect involves supportive relationships with colleagues, managers, and organisational leaders, cultivating a sense of camaraderie, trust, and belonging and thereby enhancing overall well-being. Autonomy and empowerment are other factors of workplace happiness¹⁹. Autonomy refers to the state of being self-governing or having control over one's own life. It involves making choices and acting on them without external influence or coercion. Decision-making process autonomy empowers employees to exercise control over their work, fostering a sense of competence and satisfaction. Recognition and appreciation for employees' contributions further reinforce their sense of value and intrinsic motivation, fueling happiness at work²⁰. Organisations that prioritize employee well-being by promoting work-life balance, fostering a positive organisational culture, and offering opportunities for growth and development create conducive environments for happiness to thrive²¹.

Happiness at work is a profoundly personal and individual experience, arising when various aspects of work align harmoniously²². Research suggests that focusing on human capital and fostering a sense of meaning and contribution in the workplace are essential for promoting happiness among employees¹⁴. Happiness can be understood through two distinct dimensions: affective and cognitive. The affective aspect pertains to emotions, while the cognitive component relates to characteristics such as morality, self-truthfulness, meaning, and personal growth²³.

Employers often prioritize the happiness of their employees to foster positive relationships among team members, improve job satisfaction, and retain skilled and productive staff. Research indicates that employee happiness correlates positively with mindset, leading to optimal performance and increased productivity, ultimately aiding organisations in achieving their sales and production targets²⁴.

Positive emotions, such as joy and thankfulness, are crucial in promoting a conducive work environment. These emotions often arise from interactions among employees and can motivate individuals to make healthier decisions, indirectly contributing to overall well-being²⁵. Studies have even demonstrated that experiencing positive emotions can influence the safety of patients and improve communications, highlighting the broad-reaching impact of positivity in various contexts^{26, 27}. Maslow's hierarchy of needs offers a framework for understanding the relationship between work satisfaction and happiness at work. While work can fulfill various needs, such as physiological, safety, and belongingness, self-actualization often emerges as a central motivator in today's Western societies²⁸. Work satisfaction is considered a manifestation of happiness at work, contributing to work motivation and positive work-related outcomes²⁹.

Happiness at work has broad effects on individuals and organisations. It improves decision-making, communication skills, and overall job performance. Research indicates that happy employees are more likely to remain with their current employer³⁰. Although critics argue that excessive happiness may lead to complacency and decreased initiative, the benefits of workplace happiness are still widely recognized³¹. Happy employees contribute to a positive work environment, enhanced customer satisfaction, and improved organisational outcomes.

Job-related well-being encompasses the fulfillment experienced by employees, which directly influences individual and organisational productivity. Research exploring different dimensions of well-being suggests that employees' perceptions of organisational support significantly impact their overall well-being³². Organisations that prioritise employee health through programs and support mechanisms tend to have higher levels of employee satisfaction, retention, and job performance³³. The World Health Organisation (WHO) Health System Framework comprises six building blocks, with the health workforce being one of them. Researchers have emphasized the pivotal role of the health workforce in every health system. The UN and numerous researchers acknowledge the significance of happiness as an individual pursuit and a societal endeavour³⁴. Scholars advocate for governments to adopt a utilitarian approach to happiness, wherein policies aim to maximize overall happiness within populations. By grounding happiness policy in empirical research and logical reasoning, authorities can foster optimism and encourage individuals to strive for a better quality of life. Consequently, contextually relevant characteristics should inform the creation and implementation of effective happiness strategies.

2.1.1.1 Work Satisfaction

Work satisfaction is a crucial dimension of workplace happiness that has garnered extensive attention in organisational psychology. Work satisfaction, used interchangeably with job satisfaction, encompasses employees' overall contentment and fulfillment with their jobs, influenced by various factors and conditions inherent in the work environment³⁵. One early definition of job satisfaction was by Locke, who defined job satisfaction as a pleasurable or positive emotional state resulting from the appraisal of one's job³⁶. This definition reflects the degree to which individuals positively evaluate their work experiences, conditions, and

environment. It emphasizes the subjective experience of happiness derived from the job itself. Hoppock, an eighteenth-century scholar, defined job satisfaction as a combination of psychological, physiological, and environmental factors that lead an individual to state, “I am satisfied with my job truthfully”³⁷. This definition highlights the internal nature of job satisfaction, emphasizing the role of personal feelings and experiences in shaping an individual’s perception of their work environment.

Building on Hoppock’s work, Vroom focused on the affective orientations of individuals toward their work roles, defining job satisfaction as the emotional attachment individuals have to their current work roles³⁸. This definition emphasizes the subjective nature of job satisfaction, highlighting the importance of individual perceptions and attitudes toward their work. At its core, job satisfaction represents a combination of positive or negative feelings individuals harbour toward their work. It reflects the extent to which an individual’s expectations about their job align with the actual rewards and experiences they receive.

Weiss proposed an alternative view to the definition of job satisfaction as a cognitive evaluation process akin to an attitude³⁹. According to this perspective, job satisfaction involves evaluative judgments, affective experiences, and beliefs about one’s job. According to Weiss, job satisfaction comprises three separate but interrelated components: evaluative judgments, affective experiences, and beliefs about the job³⁸. Evaluative judgments involve assessing the job or specific aspects of it, while affective experiences encompass the emotional responses and moods experienced at work. Beliefs about the job reflect employees’ perceptions and interpretations of their work environment.

Despite ongoing debate about the nature of job satisfaction, it remains a central aspect of workplace happiness. Research on job satisfaction often focuses on cognitive evaluation judgments about the job, aiming to understand employees' perceptions and evaluations of their work conditions⁴⁰. The focus may be mainly general satisfaction with the job or specific aspects or conditions of the job⁴¹. Nature of the work, remuneration, promotional opportunities, supervision, control, levels of support, and level of autonomy are some of the conditions studied regarding job satisfaction^{42, 40}. Employees derive satisfaction from tasks that are challenging, meaningful, and aligned with their skills and interests⁴⁰. Fair and competitive compensation, opportunities for career advancement, effective leadership, and supportive work environments contribute to employees' overall satisfaction. Workplace satisfaction is essential for several reasons. Satisfied employees are more likely to remain with the organisation, reducing turnover rates and associated costs³⁰. They are also more engaged, committed, and motivated to contribute to the organisation's success³⁶. Workplace satisfaction positively influences organisational performance and effectiveness, driving business success and competitive advantage.

Job satisfaction encompasses a sense of achievement and success on the job and a feeling of fulfillment and enthusiasm in one's work⁴³. Moreover, job satisfaction is closely intertwined with employee behaviour in the workplace. Positive job satisfaction often leads to greater productivity, higher levels of engagement, and increased commitment to the organisation⁴⁴. Equally, dissatisfaction with one's job can result in negative behaviours such as absenteeism, turnover, and decreased performance^{45, 46}. Factors such as supervision, job design, workplace environment, and performance pay all play a crucial role in shaping employees' satisfaction levels⁴⁰. Effective leadership styles, characterized by participatory management and supportive communication, have been shown to positively influence job satisfaction⁴⁷. Furthermore, job

satisfaction is not only beneficial for individual employees but also for organisations as a whole. Satisfied employees are more likely to be motivated, engaged, and committed to their work, leading to improved organisational performance and outcomes⁴⁷. Organisations prioritizing employee satisfaction and well-being are better equipped to retain talent, foster innovation, and achieve long-term success⁴².

2.1.1.2 Engagement

Work engagement is a crucial dimension of workplace happiness that has gained increased attention in recent years. It involves the positive emotional experiences that workers have and the motivational states associated with their work. It is characterized by tenacity, vitality, energy, dedication, absorption, excitement, alertness, and pride. Like other concepts in happiness literature, engagement is complex and involves various psychological, affective, and behavioural components. The framework of work engagement was propounded by Macey and Schneider, including trait engagement, state engagement, and behavioural engagement⁴⁸. Trait engagement refers to dispositional tendencies towards engagement, while state engagement reflects an individual's current emotional and cognitive state related to work. Behavioural engagement entails observable behaviours and actions driven by engagement⁴⁸. This framework highlights the dynamic and multifaceted nature of engagement, influenced by individual traits, situational factors, and organisational conditions.

Organisational conditions play a pivotal role in shaping work engagement⁴⁹. Attributes of the work environment, such as challenge, autonomy, and variety, contribute to employees' sense of engagement and fulfillment⁴⁸. Transformational leadership and trust within the organisation foster a supportive and empowering climate conducive to engagement⁵⁰. Maslach, Schaufeli, and

Leiter's three-dimensional model of engagement distinguishes work engagement from other constructs such as job involvement, organisational commitment, and job satisfaction⁵¹. This model includes energy, involvement, and efficacy, underlining the motivational and affective aspects of engagement.

Kahn conceptualizes work engagement at a personal level, focusing on individuals' psychological experiences of themselves in their work roles⁵². He defines engagement as harnessing oneself to one's work role, characterized by meaningfulness, safety, and availability. Equally, disengagement involves uncoupling oneself from work roles, resulting in withdrawal and defensive behaviours. Another scholar described work engagement as a positive, fulfilling, affective, motivational state characterized by vigour, flow, dedication, and absorption⁵³. Vigour reflects high levels of energy and resilience, dedication entails involvement and commitment, while absorption denotes complete immersion and concentration in one's work.

Flow, proposed by Csikszentmihalyi, represents another concept closely related to happiness and engagement. It describes flow as an optimal experience characterized by intense focus, enjoyment, and fulfillment resulting from deep engagement in challenging activities⁵⁴. Workplace engagement is a critical dimension of workplace happiness that reflects employees' positive psychological, emotional, and behavioural connection to work. It goes beyond mere satisfaction with the job and encompasses a deep sense of involvement, commitment, and fulfillment in one's professional role.

One key aspect of workplace engagement is the emotional component, characterized by positive affective experiences such as enthusiasm, pride, and enjoyment derived from work activities⁵⁵. Engaged employees tend to experience high energy and enthusiasm while

performing their tasks, often demonstrating a strong dedication and passion for their work. Additionally, workplace engagement involves a cognitive component, which refers to employees' beliefs, attitudes, and perceptions about their work⁵⁶. Engaged employees typically have a positive outlook on their job roles, seeing them as meaningful, purposeful, and aligned with their values and goals. They exhibit a sense of efficacy and confidence in their abilities to perform well and make meaningful contributions to their organisation.

Behavioural engagement is another important aspect of workplace engagement, reflecting employees' proactive involvement and investment in their work⁵⁷. Engaged employees are often highly motivated and committed to achieving their goals and objectives, going above and beyond their job requirements to contribute to the success of their team and organisation. They are also more likely to demonstrate initiative, creativity, and resilience in the face of challenges and obstacles.

Organisations play a crucial role in fostering workplace engagement by creating a supportive and empowering work environment that values employees' contributions, provides opportunities for growth and development, and promotes open communication and collaboration.⁴⁴ Effective leadership, precise goal setting, and recognition of employee achievements are essential to promoting engagement and fostering a positive work culture⁴⁷. Workplace engagement is beneficial not only for individual employees but also for organisations as a whole. Engaged employees are more likely to be productive, innovative, and committed to organisational goals, leading to improved performance, higher customer satisfaction, and overall organisational success.

2.1.2 Psychological Climate

Psychological climate has been conceptualized as employees' perceptions of their work environment, focusing on how organisational policies, practices, and procedures are perceived and interpreted by individuals within the organisation⁵⁸. The measurement of employees' perceptions of their work environments and the effects these perceptions have on their actions and attitudes is a fundamental concept in organisational psychology. Psychological climate measures center on the workplace as it is cognitively represented in terms of its psychological significance and meaning for the individual⁵⁹. These climate perceptions play a crucial role in shaping individual behaviour by mediating between the objective characteristics of the environment and individual responses⁶⁰. In essence, psychological climate reflects an individual's appraisal of the work environment and its significance.

The concept of psychological climate has evolved significantly since the initial discussions by Lewin and his associates regarding 'social climates' in the workplace⁶¹. The social climate of a workplace involves the overall atmosphere or environment created by interpersonal relationships, norms, and attitudes within the organisation. Lewin emphasizes that the psychological and social aspects of the work environment influence employees' behaviours and attitudes. Early comprehensive discussions emerged in the late 1960s with Litwin and Stringer's model of organisational climate, which included several dimensions such as structure, challenge, reward, support, and social inclusion⁶². Their experiments demonstrated that organisational climate significantly affected employee satisfaction and performance. Other researchers, such as James and James, have further refined and broadened the idea of the psychological environment^{63, 64 59, 60}. James and James proposed that psychological climate variables often cluster within four higher-order factors: role, job, leader and workforce⁶⁴. They proposed that variables such as role ambiguity, role conflict, role overload, job challenge, job

autonomy, job importance, leader trust and support, leader goal facilitation, hierarchical influence, workgroup cooperation, friendliness, and pride play essential roles in maintaining a psychological climate in an organisation. This validates the concept of an all-encompassing general factor of psychological climate.

There is a distinction between psychological climate and organisational climate, as they serve different purposes. Psychological climate refers to individual-level perceptions of the work environment, while organisational climate pertains to shared perceptions among employees about organisational policies and practices^{65, 59}. In other words, the psychological climate is personalized, while organisational climate is shared among members of the organisation. This distinction allowed for more precise research and understanding of the respective impacts on individual and organisational outcomes. The examination of the connections between psychological climate and other factors has been made more accessible by the hierarchical model, which has improved the understanding of how to work settings affect employee well-being and organisational success⁶⁴.

Psychological climate encapsulates positive and negative aspects of the work environment, influencing employees' attitudes, behaviours, and performance. Various factors, including organisational structure, processes, events, and work environment characteristics, influence the formation of a psychological climate^{66, 59}. It is shaped by employees' experiences within the organisation and their interpretation of these experiences. One of the key factors contributing to psychological climate is leadership styles. Research has highlighted the importance of leadership behaviour in shaping the organisational climate⁶⁷. Supportive and empowering leadership styles are associated with a positive psychological climate, characterized by trust, collaboration, and employee engagement. In contrast, autocratic or abusive leadership

can create a hostile and toxic climate, leading to low morale, dissatisfaction, and employee turnover.

Organisational culture also plays a significant role in shaping psychological climate⁶⁸. The values, norms, and beliefs that characterize an organisation's culture influence employees' perceptions of the work environment and their interactions with colleagues and supervisors. A culture that promotes openness, transparency, and inclusivity tends to foster a favourable psychological climate, whereas a culture that values competition, secrecy, or micromanagement may contribute to a negative or stressful climate⁶⁸. Communication patterns within the organisation also contribute to psychological climate⁶⁹. Effective communication channels and practices facilitate information sharing, feedback exchange, and conflict resolution, enhancing employee trust and collaboration. Poor communication, on the other hand, can lead to misunderstandings, distrust, and anxiety, contributing to an adverse climate.

Workload and job demands are additional factors that influence psychological climate⁷⁰. Excessive workload, time pressure, and role ambiguity can contribute to feelings of stress, burnout, and dissatisfaction among employees. In contrast, manageable workloads, clear expectations, and opportunities for growth and development foster a positive climate⁷⁰. Social relationships and dynamics among coworkers, supervisors, and teams also shape psychological climate⁷¹. Positive social interactions, mutual respect, and supportiveness contribute to a favourable climate, whereas conflict, gossip, or interpersonal conflicts can create a hostile atmosphere.

The consequences of psychological climate are far-reaching and have significant implications for employee attitudes, behaviours, and outcomes. A positive psychological climate

is associated with higher job satisfaction, morale, and employee engagement⁷². It promotes intrinsic motivation, commitment, and loyalty, leading to higher employee performance and productivity levels⁶⁶. A positive climate is also linked to lower turnover rates and higher levels of employee retention⁷³. Psychological climate significantly influences the causes of work stress. Work stressors encompass various aspects of work design, organisational management, and the social and environmental contexts of work, which have the potential to cause psychological, social, or physical harm. The consequences of psychological climate are extensive, impacting workers' health, the quality of services and products, accidents, injuries, conflicts both at home and in the workplace, medication use, and even suicide⁷³.

The association between work and mental health and the importance of preventing ill health are global concerns highlighted by international organisations such as the World Health Organisation and the International Labour Organisation⁷⁴. Fear, a natural defense response in humans and animals, becomes problematic when chronic and disproportionate, leading to various mental disorders. During pandemics like Ebola and COVID-19, fear-related behaviours can exacerbate mental health issues among individuals and communities, highlighting the need to address psychological climate to mitigate adverse consequences⁷⁵.

More so, there is growing concern about organisational failure due to declining service delivery, industrial efficiency, and negative job attitudes such as corruption and absenteeism⁷⁶. Workers' attitudes toward work, characterized by inefficiency and lack of commitment, contribute to this organisational decline, necessitating attention from all stakeholders. Scholars have identified various factors contributing to the psychological climate within organisations, including inadequate rewards, poor leadership, ineffective decision-making, and perceived job disempowerment among nurses^{60, 67}. Creating a positive organisational climate that fosters

commitment and engagement among employees is essential for organisational success⁶³. Research has shown that affective commitment is positively associated with perceived organisational support and negatively related to nurses' role stress and work engagement, underscoring the importance of a supportive climate⁶⁰. Organisational-level factors such as job insecurity can impact employees' affective reactions, highlighting the need to foster a positive departmental and organisational climate to enhance job satisfaction, commitment, and performance⁷⁰.

2.1.2.1 Role Clarity

Role clarity refers to how employees understand their roles, responsibilities, and expectations within the organisation. It encompasses the clarity and specificity of job tasks, objectives, performance standards, and reporting relationships. Role clarity is a crucial dimension of psychological climate in the workplace, as it directly impacts employee perceptions, attitudes, and behaviours⁷⁷. Several factors contribute to role clarity in the workplace. Effective communication from supervisors and managers is essential for clearly articulating job expectations and providing feedback on performance⁷⁸. Job descriptions and role specifications also play a fundamental role in defining the scope of work and clarifying responsibilities⁷⁹.

Organisational structure and design can influence role clarity by delineating reporting relationships, decision-making processes, and authority levels within the organisation⁸⁰. Well-defined processes and procedures for task allocation, coordination, and collaboration can

enhance role clarity by reducing ambiguity and uncertainty⁸¹. Training and development programs can also clarify roles by equipping employees with the necessary skills, knowledge, and resources to perform their jobs effectively⁸². Providing opportunities for skill enhancement and career advancement can clarify career paths and expectations, thereby promoting role clarity and employee engagement⁵⁹.

Research has shown that role clarity significantly affects employee attitudes, behaviours, and outcomes. Employees who perceive high levels of role clarity tend to experience lower levels of stress, job dissatisfaction, and turnover intentions⁸³. They are more likely to feel competent, confident, and motivated in performing their tasks, leading to higher job performance and organisational commitment⁸⁴. Role clarity increases job satisfaction, morale, and employee well-being⁸³. Clear role expectations and performance standards enable employees to understand how their contributions align with organisational goals and priorities, fostering a sense of purpose and meaning in their work⁸².

2.1.2.2 Supportive Management

Supportive management, a dimension of psychological climate, refers to the leadership behaviours and practices exhibited by managers and supervisors that create a positive and supportive work environment for employees. It encompasses actions taken by management to provide encouragement, guidance, resources, and recognition to employees, thereby fostering their well-being, growth, and performance within the organisation⁶⁸. Several factors contribute to supportive management in the workplace. Effective communication is a fundamental aspect of supportive management, involving open and transparent communication channels between managers and employees⁸⁵. Managers who actively listen to employee concerns, provide

constructive feedback and involve employees in decision-making demonstrate supportive behaviours that contribute to a positive psychological climate⁸⁶. Empowerment is another critical component of supportive management, involving delegation of authority, autonomy, and decision-making power to employees⁸⁷. Managers who empower their employees by trusting their judgment, encouraging initiative, and providing opportunities for skill development and career advancement create a sense of ownership and commitment among employees, leading to higher engagement and job satisfaction⁸⁸.

Recognition and rewards are essential to supportive management, as they acknowledge and reinforce employee contributions and achievements⁶⁸. Managers who regularly recognize and reward employee efforts, whether through verbal praise, bonuses, promotions, or other incentives, demonstrate appreciation for employee performance and create a positive motivational climate in the workplace. Supportive management involves providing resources and support to employees to help them perform their jobs effectively. This may include access to training and development programs, adequate equipment and technology, flexible work arrangements, and opportunities for work-life balance. Managers prioritizing employee well-being and proactively addressing work-related challenges contribute to a supportive psychological climate that enhances employee satisfaction and performance⁸⁷.

Research has shown that supportive management significantly affects employee attitudes, behaviours, and outcomes. Employees who perceive high levels of supportive management tend to experience lower stress levels, burnout, and turnover intentions⁸⁸. They report higher job satisfaction, organisational commitment, and perceived supervisor support, leading to greater job engagement and performance⁸⁷.

2.1.2.3 Contribution

Contribution, as a dimension of psychological climate, refers to employees' perceptions of the significance and value of their contributions within the organisational context⁸⁹. It encompasses the extent to which employees feel that their efforts, skills, and ideas are recognized, appreciated, and effectively utilized by the organisation. A climate of contribution emphasizes the importance of employees' roles in achieving organisational goals and fosters a sense of purpose, efficacy, and fulfillment in their work. Several factors contribute to the perception of contribution in the workplace. Effective communication is crucial in conveying the organisation's expectations, goals, and feedback to employees⁹⁰. Managers who communicate clear objectives, provide regular performance feedback and recognize employees' achievements help reinforce the importance of individual contributions to the organisation's success⁹¹.

Moreover, opportunities for meaningful participation and involvement in decision-making contribute to employees' sense of contribution⁹¹. When employees are given a voice in shaping organisational policies, strategies, and initiatives, they perceive their contributions as valuable and impactful, leading to greater motivation and engagement⁹². Recognition and rewards are essential components of fostering a climate of contribution. Managers who acknowledge and celebrate employees' achievements, whether through formal rewards, informal praise, or public acknowledgment, reinforce the importance of individual contributions and inspire continued effort and commitment⁹³.

Additionally, skill development, learning, and growth opportunities contribute to employees' perception of contribution⁹⁰. When organisations invest in employees' professional development and provide avenues for acquiring new knowledge, skills, and experiences,

employees feel valued and motivated to contribute their best efforts to the organisation's success⁸⁸. Research has demonstrated the significant impact of a climate of contribution on employee attitudes, behaviours, and outcomes. Employees who perceive their contributions are valued and recognized report higher job satisfaction, organisational commitment, and engagement⁸⁸. They are more likely to exhibit discretionary effort, creativity, and innovation in their work, leading to improved performance and organisational effectiveness⁸⁴.

2.1.2.4 Recognition

Recognition, as a dimension of psychological climate in the workplace, refers to how employees feel acknowledged, appreciated, and valued for their contributions and achievements within the organisation. It encompasses formal and informal expressions of gratitude and praise from supervisors, colleagues, and the organisation⁸⁹. Several factors contribute to the perception of recognition in the workplace. Effective leadership plays a crucial role in creating a climate of recognition by setting the tone for acknowledging and celebrating employees' efforts and accomplishments⁴⁷. Leaders who actively express appreciation, provide constructive feedback and publicly recognize employees' achievements help reinforce a culture of recognition within the organisation⁹⁴.

Organisational practices and policies also influence the perception of recognition among employees. Formal recognition programs, such as employee of the month awards, recognition ceremonies, and incentive programs, provide structured mechanisms for acknowledging outstanding performance and contributions⁹³. Additionally, informal gestures of recognition, such as thank-you notes, verbal praise, and peer-to-peer recognition, contribute to a culture of appreciation and validation⁹⁴. Moreover, consistency and fairness in recognition practices are

essential for fostering a positive psychological climate. Employees are more likely to perceive recognition as meaningful and sincere when it is applied consistently across individuals and teams, regardless of hierarchy or status⁹³. Transparency in the criteria for recognition and the decision-making process reinforces employees' trust in the fairness of the system⁹⁴.

Research has demonstrated the significant impact of recognition on employee attitudes, motivation, and performance. Employees who feel recognized and valued by their organisation report higher job satisfaction, engagement, and commitment levels⁹³. They are more likely to demonstrate discretionary effort, loyalty, and dedication to their work, leading to improved productivity and organisational outcomes⁹⁴.

2.1.2.5 Self-expression

Self-expression refers to employees feeling free and encouraged to express their thoughts, ideas, and emotions within the workplace⁹⁵. It encompasses the ability and freedom to communicate one's ideas, feelings, and personality without fear of negative consequences. This dimension of psychological climate is crucial because it fosters a sense of authenticity and individuality among employees. The concept of self-expression is rooted in several psychological theories. According to Self-Determination Theory (SDT), autonomy, competence, and relatedness are fundamental to human motivation and well-being⁹⁶. Self-expression aligns with the need for autonomy, as it involves having the freedom to voice one's opinions and ideas. It supports relatedness by fostering open communication and emotional connections among colleagues.

Research has identified several essential aspects of self-expression in the workplace. A study found that a supportive environment for self-expression significantly enhances employees'

creative performance⁹⁵. Encouraging open communication and providing platforms for employees to share their ideas and feedback regularly are essential for self-expression. This can be through suggestion boxes, regular town hall meetings, or open-door policies. Leaders in organisations should be equipped with the skills to create and maintain a psychologically safe environment. This includes active listening, providing constructive feedback, and recognizing and valuing employees' contributions.

Research showed that psychological empowerment, which includes self-expression, is positively correlated with job satisfaction⁹⁷. Employees who feel empowered and able to express themselves are generally more satisfied with their jobs. A study revealed that teams with high levels of self-expression and open communication perform better and have higher levels of collective efficacy⁹⁸. This indicates that self-expression benefits individual employees and enhances overall team dynamics. Employees who feel they can express their true selves are more likely to experience higher job satisfaction and engagement. This is because self-expression aligns with their intrinsic motivations and values, leading to a greater sense of purpose and fulfillment at work.⁹⁹

Self-expression contributes to better psychological well-being by reducing stress and anxiety. When employees can openly communicate their thoughts and feelings, they are less likely to experience the strain of suppressing their emotions, which can lead to burnout and other mental health issues⁹⁹. A climate that encourages self-expression can boost creativity and innovation. When employees feel safe to share their ideas, they are more likely to contribute novel solutions and approaches, driving organisational growth and competitiveness⁹⁵. Employees who feel valued and heard are more likely to develop a strong emotional attachment to their organisation, resulting in higher organisational commitment and lower turnover rates⁹⁹.

2.1.2.6 Challenges

Challenges in the workplace refer to tasks, goals, and expectations that require employees to exert effort, develop skills, and overcome obstacles to achieve desired outcomes¹⁰⁰. It is a dimension of psychological capital that influences employee motivation, performance, and job satisfaction. These challenges range from complex problem-solving tasks to high-performance expectations and innovative project assignments. Challenges encourage employees to stretch their capabilities and acquire new skills, contributing to their professional growth and development. Facing and overcoming challenges can enhance intrinsic motivation, as employees find satisfaction in mastering complex tasks and achieving goals⁹⁹. A balanced level of challenge can lead to higher job satisfaction, as employees feel a sense of accomplishment and purpose in their work¹⁰⁰.

Psychological climate is shaped by employees' perceptions of various dimensions of their work environment¹⁰¹. Challenges are a significant component of this climate, influencing how employees perceive their roles, responsibilities, and potential for growth. Clear and achievable goals that align with employees' skills and interests provide a framework for facing challenges. When employees understand their expectations, they are better prepared to tackle complex tasks¹⁰². Providing adequate support and resources enables employees to meet challenges effectively. This includes access to training, mentoring, and necessary tools or information.

Challenging tasks that match employees' skill levels can lead to a state of flow characterized by deep engagement and immersion in work. This state is associated with higher productivity and job satisfaction⁹⁷. Continuous exposure to challenges promotes learning and professional growth. Employees develop new competencies and enhance their problem-solving

abilities, which can lead to career advancement opportunities⁶⁹. Successfully overcoming challenges builds resilience and adaptability, preparing employees to handle future obstacles more effectively. This resilience is essential for coping with the dynamic nature of modern work environments⁶⁵. Challenges that are perceived as meaningful and aligned with personal and professional goals can enhance intrinsic motivation. Employees are more likely to be motivated by the inherent satisfaction of overcoming challenges rather than external rewards⁹⁹.

2.1.3 Organisational Commitment

The concept of commitment encompasses various factors that either enhance or diminish an individual's work performance and relationship with the organisation. Commitment is a multifaceted concept that has proven somewhat elusive in terms of comprehensive definition¹⁰³. It remains a significant study area within management, organisational behaviour, and human resource management. Over the years, numerous definitions and perspectives have emerged, reflecting the complexity and multidimensionality of the concept. Researchers from various disciplines tend to emphasize different aspects of commitment, further complicating the development of a unified definition¹⁰⁴. Commitment, at its core, is often perceived as a force that binds an individual to a course of action necessary to one or more targets¹⁰⁵. These targets include people, such as family and friends, and various institutions, including sports teams, community groups, and work organisations. This broad perspective highlights the universal nature of commitment across different domains of life.

There have been numerous definitions of organisational commitment over the years. Some scholars described the organisational commitment as employees' acceptance of organisational goals and their willingness to exert effort on behalf of the organisation¹⁰⁶. This

perspective aligns with Cohen's assertion that "commitment is a force that binds an individual to a course of action of relevance to one or more targets"¹⁰⁷. Another scholar further elaborates that organisational commitment involves the degree to which an individual identifies with and participates in an organisation¹⁰⁸. A scholar also emphasizes that organisational commitment is when an employee identifies with an organisation and its goals and desires to maintain membership¹⁰⁹. This highlights the significance of aligning an employee's values with the organisation's objectives. Therefore, organisational commitment can be seen as the degree to which an employee is willing to stay with the organisation due to their interest and association with its goals and values.

Organisational commitment, a specific type of workplace commitment, refers to the psychological attachment and loyalty an employee feels towards their organisation¹⁰⁴. This type of commitment is crucial for fostering a productive and engaged workforce. Organisational commitment is a multifaceted concept, varying significantly across different professions¹⁰⁷. Highly committed individuals tend to exhibit different behaviours; they generally show lower levels of absenteeism and voluntary turnover, as they are less likely to seek new employment opportunities compared to those with lower commitment levels¹⁰⁶. In the workplace, commitment can be divided into several aspects¹¹⁰. Employees may exhibit commitment to their career, occupation, organisational goals, teams, leaders, or the organisation as a whole. These diverse forms of workplace commitment indicate that employees can simultaneously hold multiple commitments that influence their overall engagement and performance.

Organisational commitment can be influenced by various factors, including job satisfaction, alignment with organisational values and goals, relationships with colleagues and supervisors, and perceived organisational support¹¹⁰. Some scholars assert that commitment is

one of several energizing forces for motivated behaviour^{111, 108, 104}. High supervisor evaluation and positive supervisor perceptions play a key role in motivation, which, in turn, results in greater organisational commitment. Organisational commitment is also crucial for creating a business environment that fosters motivation in the workplace. Both motivation and commitment are vital issues in the healthcare profession, as they are critical for the effective delivery of health service.¹¹² Organisational commitment in health service significantly influences outcome variables such as job satisfaction, self-efficacy, emotional intelligence, and work motivation.

A comprehensive review of previous studies and conceptualizations on workplace commitment revealed that employees develop more than one work-relevant commitment^{111, 107}. These commitments, though distinct, collectively contribute to an employee's total workplace commitment. Each form of commitment has its own unique characteristics and implications, yet they coexist and interact within the organisational environment. These various commitments may exist at the same time, and employees always have many commitments to different institutions and people. For instance, employees may have commitment to family, friends, sports, and community groups. Therefore, it is unrealistic to expect total commitment to the organisation¹⁰⁷.

Organisational commitment is fundamental because it provides positive feedback for the organisation. Employees who are committed to the organisation are likely to develop a more positive mindset towards their work and the organisation¹⁰⁹. They will be enthusiastic about expending extra energy and effort for the benefit of the organisation. This commitment manifests in their readiness to work and a high sense of responsibility, which fosters a desire to remain with the company¹⁰⁸. Research has shown a direct correlation between organisational commitment and employee performance¹¹³. Higher organisational commitment leads to better individual performance. The mutual commitment between the company and its employees is

essential as it fosters professional work environments. Employees with low organisational commitment might engage in behaviours that disrupt organisational performance, such as working slowly, complaining, or even striking. In contrast, those with high organisational commitment enhance organisational performance through loyalty and responsibility towards their work.

Organisational commitment has two aspects - attitudinal and behavioral¹¹⁴. Attitudinal commitment involves evaluative statements or judgments about the organisation, reflecting feelings of attachment, identification, and loyalty¹¹⁵. Organisational commitment as an attitude is characterized by positive cognitive and affective components about the organisation. On the other hand, behavioural commitment is defined by actions that demonstrate an employee's commitment to the organisation¹¹⁴. Committed individuals enact specific behaviours based on the belief that it is morally correct rather than personally beneficial. Behavioral commitment is visible when organisational members are dedicated to existing groups within the organisation¹¹⁴. This perspective underscores the idea that organisational commitment is a state where members are bound by their actions and beliefs that sustain their involvement in the organisation.

In the past decade, the influence of organisational commitment has significantly increased in the field of management development. Research on organisational commitment dates back to the 1960s. One of the prominent models in this area is the one developed by Meyer and Allen¹¹⁶. The model has gained substantial popularity among other models. The three-component model highlights the importance of both emotional and rational factors in determining an employee's commitment to their organisation. This model provides valuable insights into how organisations can foster commitment and improve employee retention and performance. This model is the most widely accepted conceptualization of organisational

commitment and sees commitment as comprising three distinct forms: affective commitment, continuance commitment, and normative commitment.

2.1.3.1 Affective Commitment

The first dimension of organisational commitment in Meyer and Allen's model is affective commitment, which represents an individual's emotional attachment to their organisation. Affective commitment is defined as "the employee's emotional attachment to, identification with, and involvement in the organisation"¹¹⁶. This dimension of organisational commitment is characterized by employees who continue working for the organisation because they genuinely want to¹¹⁷. These employees perceive their personal employment relationship as being congruent with the goals and values of the organisation. High affective commitment indicates that an employee has a strong emotional connection to the organisation, leading them to remain with the organisation for an extended period. Employees with high affective commitment are not only content but also actively engaged in organisational activities¹¹⁸. This engagement includes participation in discussions and meetings, offering valuable input or suggestions to benefit the organisation, and demonstrating proactive work ethics.

Affective commitment is essentially a work-related attitude that reflects positive feelings towards the organisation¹¹⁵. A scholar maintains that this attitude is an orientation towards the organisation, which associates or attaches the identity of the person to the organisation.¹¹⁸ Affective commitment is described as the relative strength of an individual's identification with and involvement in a particular organisation. The strength of affective commitment is significantly influenced by the extent to which an individual's needs and expectations about the organisation are matched by their actual experiences¹¹⁵. Other scholars also describe affective

commitment as “value rationality-based organisational commitment,” which refers to the degree of value congruence between an organisational member and the organisation¹¹⁴.

Meyer and Allen’s organisational commitment model indicates that several factors influence affective commitment, including job challenge, role clarity, goal clarity, goal difficulty, receptiveness by management, peer cohesion, equity, personal importance, feedback, participation, and dependability¹¹⁶. These factors collectively contribute to the development of an emotional bond between the employee and the organisation. Employees with high affective commitment often identify with organisational goals, feel a sense of belonging within the organisation, and derive satisfaction from their work. These employees feel valued and act as ambassadors for their organisation, making them significant assets. Their emotional investment in the organisation drives them to contribute positively and actively towards achieving organisational objectives. Employees with strong affective commitment continue employment with the organisation because they want to.

The development of affective commitment involves two key processes: identification and internalization¹¹⁹. Identification is based on the desire to establish a rewarding relationship with the organisation. It involves employees seeing themselves as integral parts of the organisation, aligning their personal identity with organisational membership. Internalization, on the other hand, refers to the congruence between the goals and values held by individuals and those of the organisation. Through internalization, employees adopt the organisation’s goals and values as their own, which strengthens their emotional attachment to the organisation.

2.1.3.2 Continuance Commitment

The second dimension of the tri-dimensional model of organisational commitment is continuance commitment. Continuance commitment is defined as awareness of the costs associated with leaving the organisation¹¹⁰. This type of commitment is calculative in nature, as it involves the individual's perception and weighing of the costs and risks associated with leaving their current organisation¹²⁰. Meyer and Allen described continuance commitment as employees whose primary link to the organisation is based on continuance commitment remain because they need to do so¹¹⁷. Continuance commitment refers to an employee's perceived cost of leaving the organisation. This includes the accumulation of valued side bets such as skill transferability, relocation, pension, and self-investment co-varying with organisational membership. Continuance commitment involves the perception of the costs associated with leaving the organisation, which can be work-related (e.g., wasted time and effort acquiring non-transferable skills) or non-work-related (e.g., relocation costs)¹²⁰. When an employee has a high level of continuance commitment, they believe that staying with the organisation is necessary due to the significant investments they have made, both emotionally and mentally, and the potential costs associated with leaving. This type of commitment arises when employees feel they need to remain with the organisation because they have already invested considerable time and energy, creating a strong sense of attachment.

Continuance commitment can be viewed as an instrumental attachment to the organisation, where the individual's association is based primarily on an assessment of the economic benefits gained¹¹⁸. Organisational members develop this type of commitment due to the positive extrinsic rewards obtained through their effort-bargain, rather than a deep identification with the organisation's goals and values. The strength of continuance commitment is determined by the perceived costs of leaving the organisation and continuance organisational

commitment will therefore be the strongest when availability of alternatives are few and the number of investments are high¹²⁰. This argument supports the view that when better alternatives are available, employees may choose to leave the organisation. For example, over time, an individual may develop a commitment to their workplace, driven by emotional investment. This commitment may be one of the reasons why an employee chooses not to quit, despite any dissatisfaction they may feel. Employees with continuance commitment often think that leaving the organisation would be too costly, whether due to the loss of accumulated benefits, the challenge of finding a new job with similar conditions, or other financial and non-financial factors¹²⁰.

Continuance commitment is characterized by the employee's feeling of necessity to stay in the organisation. The primary reasons behind this type of commitment often include the lack of job alternatives and concerns about wages¹²⁰. For instance, an employee might feel the need to stay because moving to another organisation might not offer better salary and benefits. This situation can pose a problem for organisations, as employees with high continuance commitment might stay even if they are dissatisfied and disengaged from their work. Such employees remain not because they are motivated or fulfilled, but because they perceive the cost of leaving to be too high.

Meyer maintain that accrued investments and poor employment alternatives tend to force individuals to maintain their line of action and are responsible for these individuals being committed because they need to¹¹⁰. This implies that individuals stay in the organisation because they are lured by accumulated investments, such as pension plans, seniority, or organisation-specific skills, which they could lose if they were to leave. Continuance commitment is fundamentally about the "profit" associated with continued participation in the organisation and

the “cost” associated with leaving. Scholars supports the profit notion by describing continuance organisational commitment as “an exchange framework, whereby performance and loyalty are offered in return for material benefits and rewards.” Therefore, to retain employees who exhibit continuance commitment, organisations need to focus on elements that boost the employee’s morale to foster a more affective commitment¹¹⁸.

2.1.3.3 Normative Commitment

The third and final dimension of the organisational commitment model is normative commitment. Normative commitment is defined as a feeling of obligation to continue employment¹¹⁰. This form of commitment stems from internalized normative beliefs of duty and obligation, making individuals feel compelled to sustain membership within the organisation¹²⁰. Some scholar suggests that employees with normative commitment feel that they ought to remain with the organisation¹¹⁶. In this dimension, employees stay because they believe they should or because it is the proper thing to do. Normative commitment is a form of organisational commitment where an employee feels a sense of obligation to remain with the organisation.

Normative commitment is characterized by a sense of duty, obligation, and loyalty towards the organisation¹¹⁶. Employees with high levels of normative commitment feel that they ought to remain with the organisation due to a sense of loyalty or duty. This type of commitment is rooted in a belief that staying is the right thing to do, often driven by factors such as moral obligations, feelings of loyalty, and a sense of duty. Organisational members who are normatively committed are driven by moral reasons¹²¹. These employees consider it morally right to stay in the organisation, regardless of the status enhancement or satisfaction they might receive over the years. The strength of normative organisational commitment is influenced by

accepted rules about reciprocal obligation between the organisation and its members¹²⁰. This reciprocal obligation is rooted in the social exchange theory, which posits that a person receiving a benefit feels a strong normative obligation to repay the benefit in some way¹²². Therefore, individuals often feel obligated to repay the organisation for investments made in them, such as through training and development. Employees with high normative commitment may stay with an organisation because they feel a moral duty to do so. This sense of obligation can stem from several sources.

One significant factor is the belief that others have invested in their development and success¹²³. For example, if a mentor or manager has taken a special interest in their career growth, the employee might feel indebted and obligated to stay. Another factor is a perceived fairness in how they are treated within the organisation. If employees believe they are treated justly and with respect, they may feel a strong sense of duty to remain loyal to their employer. This feeling of obligation can also arise from the fear of the unknown, where employees are wary of leaving a familiar and stable environment for the uncertainties of a new job, often described as the fear of “jumping from the frying pan into the fire”.

Normative commitment is characterized by the internal pressure employees feel to stay in their organisation¹²⁰. Employees who exhibit normative commitment often experience guilt at the thought of leaving. This guilt is typically associated with the potential negative consequences of their departure, such as creating a knowledge or skill gap that would place additional pressure on their colleagues. Such feelings of obligation can significantly impact employee performance. When employees are driven by normative commitment, they may perform their duties out of a sense of duty rather than genuine interest or enthusiasm. This can sometimes lead to suboptimal

performance if the underlying motivation is not aligned with personal fulfillment or job satisfaction.

Normative commitment is influenced by the organisational culture and the socialization processes within the organisation. Some scholars argue that moral obligation arises either through the process of socialization within the society or the organisation¹¹⁷. In either scenario, it is based on a norm of reciprocity¹²⁴. Essentially, if an employee receives a benefit from the organisation, it places the employee or the organisation under a moral obligation to reciprocate in kind. Employees who are socialized to value loyalty and duty towards the organisation are more likely to develop a strong sense of normative commitment. This can be reinforced through organisational practices that emphasize reciprocal obligations and moral responsibility¹²⁴.

In Nigeria, research on organisational commitment among workers has produced mixed findings^{125, 126}. Some researchers argue that Nigerian workers lack commitment to their workplaces, while others believe that workers are dedicated to organisational goals, but it is the organisations that fail to demonstrate commitment to the well-being of their employees. Organisational commitment is seen as one side of the reciprocal relationship between employer and employee, with both parties needing to fulfill their roles. Many organisations in Nigeria have undergone and are continuing to undergo restructuring, reengineering, and downsizing due to government economic reforms, which can create a sense of job insecurity among workers. To navigate global economic competition, organisations need committed employees. Employees with higher organisational commitment are more likely to engage in organisational citizenship behaviours, which can lead to improved performance and increased work motivation, ultimately benefiting the organisation. This suggests that employee productivity is closely linked to motivation levels, which in turn can enhance organisational commitment.

3.2 Theoretical Review

3.2.1 Social Exchange Theory

Developed by George Homans, the Social Exchange Theory (SET) is a sociological and psychological theory that explains social behaviour in terms of the exchange of resources between individuals or groups¹²⁷. This theory posits that human interactions are based on an economic model of costs and benefits. Individuals engage in social relationships when they perceive that the rewards (benefits) outweigh the costs (disadvantages)¹²⁷. The theory was initially developed by sociologist George Homans and further developed by Peter Blau, and Richard Emerson^{127, 128, 129}. This theory combines elements from both utilitarianism and behaviourism, providing a comprehensive framework to understand how social exchanges shape micro-level interactions and the macro-structures they create in society.

Homans defined social exchange as the exchange of tangible or intangible activities between at least two persons, emphasizing the cost and reward dynamics of these interactions¹²⁷. His work relied heavily on reinforcement principles from behaviourism, suggesting that behaviours that are rewarded are likely to be repeated. Homans focused on dyadic exchanges and how these interactions can explain broader social phenomena such as power, conformity, and justice. Blau extended social exchange theory by incorporating a more economic and utilitarian view of social behaviour¹²⁸. He highlighted the importance of reciprocal exchanges, where voluntary actions are motivated by expected returns. Blau's work emphasized the emergent properties of social structures created through these exchanges, noting that social exchanges often involve unspecified obligations, fostering long-term relationships and trust.

Central to the theory lies the norm of reciprocity which can be described as the social expectation that people will respond in a positive way to positive actions and in a negative way to negative actions¹³⁰. The social exchange theory holds that individuals feel obligated to return favours or benefits received from others. The reciprocal nature of social exchanges implies that when employees perceive that their organisation values their contributions and cares about their well-being, they are more likely to feel happy and satisfied at work¹³¹. This positive emotional state is a benefit that employees receive in exchange for their hard work and loyalty. When organisations invest in creating a happy workplace by offering supportive management, fair compensation, and opportunities for personal growth, employees feel valued and are likely to reciprocate with increased loyalty and commitment. This commitment is further strengthened when employees feel happy and perceive a positive psychological climate, creating a virtuous cycle of mutual benefit and sustained organisational commitment.

Researchers have increasingly adopted social exchange as a theoretical foundation for understanding exchange relationships between individuals and their organisations^{130, 131}. This research demonstrates the explanatory power of social exchange to a variety of work-related attitudinal and behavioural outcomes. It has been shown repeatedly and consistently that individuals seek to enter and maintain a fair and balanced exchange relationship with the organisation they work at, described as the norm of reciprocity¹³⁰. This norm is based on the assumption that organisational members tend to reciprocate beneficial treatment they receive with positive work-related behaviour and tend to reciprocate detrimental treatment they receive with negative work-related behaviour. In this respect, the relationship has important implications on healthcare organisations' ability to attract, retain and motivate scarce nursing professionals. The reciprocal nature of social exchanges implies that when employees experience positive

interactions and support from their organisation, they are likely to respond with increased commitment.

Social exchange involves evaluating the costs (e.g., time, effort, resources) and rewards (e.g., social approval, financial gain, emotional support) associated with relationships.¹³¹ Individuals seek to maximize rewards and minimize costs. Social exchange theory suggests that the psychological climate is a crucial determinant of the quality of exchanges between employees and the organisation¹³². A positive psychological climate is perceived as a form of support from the organisation, enhancing the quality of the social exchange. When employees perceive a positive psychological climate, they feel that the organisation is fulfilling its part of the exchange relationship by providing a supportive and fair environment.

Social exchange theory holds that relationships are characterized by mutual dependence¹³³. The actions of one party influence the outcomes for the other, creating a dynamic interplay of exchanges. Employees with high workplace happiness and a positive psychological climate develop affective commitment, where they stay with the organisation because they want to. Their emotional attachment is driven by the rewarding and supportive work environment. When employees perceive high costs associated with leaving a supportive and happy work environment, they develop continuance commitment. They stay with the organisation because they need to, as the benefits of staying outweigh the potential costs of leaving.

Researchers have often used social exchange-based constructs to explain organisationally desired work attitudes and behaviour^{131, 132, 134}. Accordingly, an extensive body of evidence exists in support of the norm of reciprocity. This indicates that when employees are the recipients of (un)favourable treatment from their employer, they reciprocate by changing their attitudes and

behaviour towards the organisation. Three key constructs rooted within the social exchange theory and are linked to retention factors of healthcare professionals: psychological contract breach (PCB), perceived organisational support (POS) and leader–member exchange (LMX)^{134,135}.

The psychological contract is described as the individual's belief in mutual obligations in the relationship with the employer¹³⁵. These beliefs are based on the perception that promises have been made and considerations are offered in exchange, which bind the employee and the organisation to a set of reciprocal obligations. More specifically, previous research found that healthcare workers value a relationship with the organisation in which they are cared about, treated with respect and in which their professional contribution is supported by the organisation.¹³⁵ Breach of the psychological contract occurs when employees perceive a discrepancy between what was promised and what they actually receive¹³⁶.

Perceived organisational support (POS) is defined as the global beliefs concerning the extent to which the organisation values the employee's contributions and well-being¹³⁷. Previous research identified POS as an important and highly versatile factor¹³⁷. It was found that low support at work contributes to intention to leave the profession and evidence relates POS to attitudes towards the organisation such as affective and normative organisational commitment, the perceived person-organisation fit and development experiences.

3.2.2 Organisational Commitment Theory

Organisational Commitment Theory (OCT) is a framework for understanding the psychological attachment employees feel towards their organisation¹³⁸. This theory, extensively developed by Meyer and Allen, categorizes organisational commitment into three distinct

components: affective commitment, continuance commitment, and normative commitment¹³⁸. Affective commitment refers to an employee's emotional attachment to, identification with, and involvement in the organisation¹²⁰. Employees with strong affective commitment remain with the organisation because they want to. Continuance commitment involves an awareness of the costs associated with leaving the organisation¹²¹. Employees with high continuance commitment stay because they need to, due to the perceived loss of investments (e.g., time, effort, benefits) or lack of alternatives. Normative Commitment reflects a feeling of obligation to remain with the organisation¹²³. Employees with strong normative commitment feel they ought to stay due to personal values or social pressures.

The study of commitment began with sociological theories analyzing the impact of punitive systems on socially accepted values. However, a scholar took a sociological and psychological approach, and this was probably the source of the study of the links between the individual and the organisation from the perspective of organisational behaviour^{114, 116}. A few decades later, organisational commitment is a complex concept that continues to be actively studied. Although new approaches have emerged recently, most researchers agree that organisational commitment should be treated as a multidimensional structure and consistent correlations with other concepts differ according to dimensions. However, there is no consensus on their interpretation due to the use of different measurement tools and findings regarding the internal structure.

When employees are happy at work, they are more likely to develop a strong emotional bond with the organisation. This positive emotional state enhances affective commitment as employees feel a sense of belonging and alignment with organisational goals and values. Research indicates that job satisfaction and positive emotional experiences at work are

significant predictors of affective commitment¹¹. A positive psychological climate enhances affective commitment by providing a supportive and fair work environment. When employees perceive fairness, recognition, and autonomy, they feel respected and valued, leading to stronger emotional attachment and identification with the organisation¹³⁹.

While workplace happiness primarily influences affective commitment, it can also indirectly affect continuance commitment. Happy employees are less likely to seek alternative employment opportunities, thereby increasing their perceived costs of leaving the organisation. This reduction in turnover intention can enhance continuance commitment as employees recognize the value of staying with an organisation that contributes to their well-being. Psychological climate influences continuance commitment by affecting employees' perception of job security and the availability of alternative job opportunities¹³⁹. A supportive and fair work environment reduces the likelihood of employees seeking external opportunities, thus increasing their continuance commitment. Employees are more likely to stay with an organisation that provides a positive work environment, minimizing the perceived costs of leaving¹¹⁰.

Workplace happiness can foster a sense of loyalty and moral obligation towards the organisation¹⁴. When employees feel valued and supported, they are more likely to internalize organisational norms and values, enhancing normative commitment. The reciprocal relationship between employer support and employee loyalty underscores the moral obligation to reciprocate positively towards the organisation¹¹⁰. A positive psychological climate fosters a sense of duty and obligation towards the organisation. When employees perceive that the organisation is fair, supportive, and recognizes their contributions, they develop a normative commitment based on a moral obligation to reciprocate the positive treatment they receive. This sense of duty can enhance employees' willingness to stay with the organisation and contribute to its success¹¹⁷.

Individuals have high commitment toward their organisations if they have good connections to their organisations. A high organisational commitment benefits the employee, the organisation, and society¹²⁰. Thus, the commitment of healthcare professionals can be seen as a bridge between individual professionals and their health organisations. Organisational commitment plays a pivotal role in determining whether an employee will stay with the organisation for a longer period of time and work passionately towards achieving the organisation's goal¹²⁴.

3.2.3 Self-Determination Theory

Self-Determination Theory (SDT), developed by Deci and Ryan, posits that human motivation is driven by the need to satisfy basic psychological needs¹⁴⁰. It emphasizes the importance of the social environment in influencing an individual's motivation and well-being. At the core of Self-determination theory are three basic psychological needs: autonomy, competence, and relatedness¹⁴¹. These needs are essential for fostering self-determined motivation, well-being, and personal growth.

Autonomy refers to the need to feel in control of one's own behaviours and goals. In the workplace, autonomy can be enhanced by providing employees with choices and encouraging self-initiative. When employees feel they have a say in their work and are not being overly controlled, their intrinsic motivation increases¹⁴¹. This sense of autonomy contributes to workplace happiness by fostering a sense of ownership and personal investment in work tasks. Autonomy is crucial for intrinsic motivation, as employees feel empowered to take initiative and make decisions that align with their values and goals¹⁴². High levels of autonomy lead to stronger affective commitment, as employees are more likely to feel emotionally attached to an

organisation that supports their independence¹⁴³. When employees perceive their work environment as supportive of their autonomy, they are more likely to commit to organisational goals and values, enhancing organisational commitment. A positive psychological climate enhances perceptions of autonomy by providing a supportive environment where employees feel empowered to make decisions and take initiative. This empowerment increases intrinsic motivation and affective commitment, as employees feel more aligned with the organisation's goals and values¹⁴¹.

Competence involves feeling effective and capable in one's activities. It is the need to gain mastery of tasks and learn different skills. A psychologically supportive climate in the workplace can enhance feelings of competence by providing appropriate challenges, constructive feedback, and opportunities for skill development¹⁴⁴. When employees believe they are capable and their efforts are valued, their intrinsic motivation and job satisfaction increase¹⁴¹. This sense of competence reinforces their commitment to the organisation, as they feel valued and capable in their roles¹⁴⁵. Happiness at work enhances feelings of competence. Employees who are happy are generally more engaged and willing to invest effort into their work, which improves their skills and performance¹⁴⁶. This boosts workplace happiness, as employees feel successful and recognized. It increases competence fosters a sense of achievement and pride in one's work, leading to higher affective commitment and a stronger desire to stay with the organisation. A competence-supportive environment encourages employees to engage more deeply with their tasks, leading to higher organisational commitment¹⁴⁶.

Relatedness is the need to feel connected to others. It involves a sense of belonging and attachment to others¹⁴¹. A positive psychological climate in the workplace fosters relatedness by promoting collaboration, support, and a sense of community. When employees feel they belong

and are valued by their colleagues and supervisors, their intrinsic motivation and overall job satisfaction improve¹⁴⁶. Workplace happiness also enhances feelings of relatedness. Positive relationships with colleagues and supervisors contribute to a sense of belonging and community within the organisation. When employees feel connected to their peers and supported by their leaders, their normative commitment increases as they feel a moral obligation to reciprocate the positive social environment they experience¹⁴⁷. This sense of belonging and mutual respect enhances workplace happiness, making employees more likely to align with organisational goals and commit to the organisation.

Workplace happiness and psychological climate are interrelated and together significantly influence organisational commitment. A positive psychological climate contributes to workplace happiness by providing employees with a supportive and fair environment. In turn, this happiness enhances employees' intrinsic motivation and emotional attachment to the organisation, leading to stronger affective commitment.

2.3 Review of Empirical studies

Empirical studies have revealed that workplace happiness and psychological climate play significant roles in organisational commitment^{148, 149}. Research indicates that employees who experience a positive psychological climate, characterized by supportive management, clear communication, and a sense of fairness, are more likely to feel committed to their organisation.^{148, 149} Furthermore, workplace happiness, which encompasses job satisfaction, work-life balance, and a positive work environment, has been shown to enhance employee engagement and reduce turnover rates¹⁴⁹.

2.3.1 Demographic Factors and Organisational Commitment

Various demographic factors such as age, gender, education, tenure, and marital status have been empirically studied to understand their impact on organisational commitment. A paper examined the influence demographic variables (gender, age and work experience) might have on teachers' commitment¹⁵⁰. Using a non-experimental research design, 150 public secondary school teachers responded to a questionnaire on demographic information. It was found that gender had a statistically insignificant weak positive correlation with organisational commitment. Age was found to have statistically significant weak negative correlation with organisational commitment and work experience has statistically significant weak positive correlation with organisational commitment. Findings further revealed that gender, age and work experience are responsible for a 10.2 percent variation in teachers' organisational commitment. This means that there were still 89.8 percent of the variations that occurred in teachers' organisational commitment that could be explained by other factors not covered in the study.

The findings is in contrast to a paper that examined age, gender and organisational tenure as antecedents to organisational commitment¹⁵¹. The paper found that there is no significant difference among gender, age groups and grouping by tenure with regard to commitment scores. Similarly, another study investigated the direct and indirect effects of demographic factors on employee compensation, job satisfaction and organisational commitment in private higher educational institutes in Bangladesh¹⁵². Using a structural equation modelling, data from 515 were analysed. The results showed that though demographic factors have no direct impact on organisational commitment, they have indirect impacts on organisational commitment through the mediation of compensation structure and faculty job satisfaction.

Another study investigated demographic characteristics as antecedents of organisational commitment¹⁵³. Age and gender significantly negatively affected overall organisational

commitment, continuance and normative commitment, while marital status affected the same significantly positively. Work experience and duty station affected affective commitment positively but continuance commitment negatively. Employees' work location significantly affected continuance and normative commitments. Level of formal education insignificantly affected all types of commitment consistently. The findings imply that demographic characteristics played a significant role as antecedents of organisational commitment.

A paper explored the predictive value of demographic variables, perceived work stress, and job satisfaction with regard to organisational commitment in nurses¹⁵⁴. Using a cross-sectional research design, data was collected from 189 nurses at a hospital in southern Taiwan. The finding revealed that societal support and job satisfaction were identified as the most significant predictors of organisational commitment during the COVID-19 pandemic, explaining 47 percent of the total variance in organisational commitment. It was also found that level of perceived work stress was highest among the participants who were married and had young children. Participants with a bachelor's degree or higher, a monthly income > NT\$70,000, or with children reported relatively higher levels of job satisfaction and organisational commitment.

A study was conducted to explore the demographic characteristics of optical sector employees, and their relationship to organisational commitment and job satisfaction.¹⁵⁵ Some 320 opticians participated in the study, and findings suggests that the sum of organisational commitment, affective commitment, continuance commitment, and normative commitment were average among the sampled population. It was found that there is a significant relationship between demographic factors such as gender, age, marital status, education, title, income levels, working time in the profession, and job satisfaction and organisational commitment. Similarly, a

paper investigated the influence of gender, age and work experience on the commitment level of employees in the thermal power sector¹⁵⁶. The data from 379 participants were statistically analysed and it was found that age played a crucial role in organisational commitment levels. It was found that commitment increases with the age of employees. However, gender did not make any variation in organisational commitment, which means that male and female employees express similar commitment toward their work. The study further indicated that work experience significantly influences organisational commitment.

A quantitative study was carried out using a causal analysis to determine the effect of demographic factors and compensation on organisational commitment with job satisfaction as a mediating factor¹⁵⁷. 109 employees of the Inspectorate Office of Merauke and Boven Digoel Regency, and the result suggested that demographic factors had a negative effect on organisational commitment and compensation, but did not have a significant effect on job satisfaction. It was found that job satisfaction also had a positive and significant effect on organisational commitment. Compensation mediated the relationship between demographic factors with organisational commitment and job satisfaction. Job satisfaction mediated the relationship between compensation with organisational commitment, but did not mediate the relationship between demographic factors with organisational commitment.

Some authors investigated the influence of socioeconomic characteristics as well as organisational profile as predictors of the organisational and career commitments of real estate employees in the employment of private estate surveying and valuation firms¹⁵⁸. A total of 124 surveyors and valuers participated in the study. The findings revealed that male real estate employees reported a higher level of organisational commitment compare to female real estate employees, although, female employees showed a higher level of career commitment.

Demographic factors such as age, management level and professional qualification had a statistically significant relationship with career commitment, factors relating to marital status, academic qualification, management level and firms' year of the establishment were statistically significant with employees' organisational commitment.

A study examined the three-dimensional organisational commitment and its effects on socio-demographic factors such as gender, age, and tenure of Nepal Telecom employees¹⁵⁹. Using random sampling technique, 322 samples were gathered and it was found that age and work experience had significant correlation with employees' normative commitment while higher working years of employees are different from less experiential employees in terms of overall commitment and continuance commitment.

A scholar examined how employee performance is influenced by organisational citizenship behaviour and workplace happiness interventions in organisations¹⁶⁰. The study aim was to clarify the relationship between the demographic traits of workers and their organisational commitment. In the study, a survey questionnaire were distributed to a total of 304 employees. Findings showed variations in employees' organisational commitment as related to their age, duration, and education. There was also disparities in organisational commitment relating to gender and marital status. The study also indicate that distinct subcategories of each demographic trait correspond to varying organisational commitment levels.

2.3.2 Workplace Happiness and Organisational Commitment

Workplace happiness is strongly linked to job satisfaction, which is a critical determinant of organisational commitment^{161, 162}. Employees who find joy and satisfaction in their roles are more likely to develop a strong attachment to their organisation. Some scholars examined the

role of work-life balance and job satisfaction on organisational commitment among healthcare professionals¹⁶¹. Utilizing a cross-sectional research design, a total of 235 healthcare professionals were sampled and finding revealed a significant positive correlation among work-life balance, job satisfaction and organisational commitment. The finding also suggested that communication satisfaction and work satisfaction accounted for 61 percent of the variation in organisational commitment. The study reveals that work satisfaction and communication satisfaction are important in building a sense of commitment in healthcare professionals.

Another study investigated the effect of job satisfaction on the organisational commitment higher education administrators by understanding the relationship between organisational commitment and overall job satisfaction¹⁶². Some 383 questionnaires were administered to administrative staff members and a strong correlation between affective commitment and job satisfaction; and moderate correlations between job satisfaction and moral imperative. Finding also showed a strong correlation between indebted obligation and job satisfaction. However, the study revealed a weak correlation between job satisfaction and continuance commitment. In the study, job satisfaction contributed positively to the prediction of affective commitment, moral imperative, indebted obligation and continuance commitment.

A journal examined the influence of nurses working motivation and job satisfaction on intention to quit as an empirical investigation in Taiwan¹⁶³. The author hypothesized that higher levels on general job satisfaction among nurses, including overall satisfaction with their professional role and general job happiness will lead to lower intention to quit. Data was collected by administering survey questionnaire to 648 nurses in 3 hospitals in Taiwan with 82 percent response rate. Findings revealed that job satisfaction, general job happiness, satisfaction with salary and promotion, institution, educational background, and age of nurses' youngest

child were factors that are significant predictors of nurses' intention to quit. Some scholars studied the association psychological contract breach and happiness at work in the health care sector using the double mediation of colleague support and deviant workplace behaviour to understand the variables¹⁶⁴. The study sampled 401 employees in the health sector in Lahore, Pakistan. Findings of the study indicated that there is a negative relationship between psychological contract breach and happiness at work. It also revealed that when there is manifestation of psychological contract breach, colleague support is reduced which in turn leads to reduction in workplace happiness. The study also showed that when there is presence of psychological breaches, deviant behaviour increases which in turn reduces happiness at work.

Some scholars investigated the effects of job crafting, burnout and job satisfaction on nurses' turnover intention¹⁶⁵. Data was collected from a total of 212 nurses working in three Korean hospitals. Findings revealed that promotion-focused job crafting had direct effects on burnout and job satisfaction and results showed that promotion-focused job crafting had indirect effect on job satisfaction via burnout. Results also indicated that promotion-focused job crafting had an indirect effect that is mediated by burnout and job satisfaction. Result also showed that promotion-focused job crafting had mediation effect on turnover intention through burnout and job satisfaction. Based on the results of the study, the strategy of reducing burnout by strengthening nurses' promotion-focused job crafting and lowering turnover intention by increasing job satisfaction can have a positive effect on organisational performance.

A research aimed at examining the linkage between work-related factors, person-environment fit, work-family balance and perceived job security, employee satisfaction and organisational commitment by understanding the insights from public health professionals¹⁶⁶. Participant were selected using stratified sampling to sample 287 professionals in three public

health institutions in Gauteng, South Africa. Findings revealed that there is a positive correlation between job security and person-environment, and this as a result predicted employee satisfaction. Findings also showed a weak association between work life balance and employee satisfaction, and also a strong relationship between employee satisfaction and organisational commitment. The study provided evidence on how both work-related and human-related factors could contribute to the prosperity of the public health sector, both at micro and macro levels.

A journal examined empowerment, job satisfaction and organisational commitment by studying a comparative analysis of nurses working in Malaysia and England¹⁶⁷. The main aim of the study was to explore the relationship between nurses' empowerment, job satisfaction and organisational commitment. To achieve the aim of the study, data was collected through a survey sampling a total 556 registered nurses in two teaching hospitals in England and Malaysia. Study findings revealed that the Malaysian nurses felt more empowered and committed to their organisation and the English nurses were more satisfied with their job. A study utilized sampling approach to examine mediating role of work satisfaction in the relationship between organisational communication satisfaction and organisational commitment of healthcare professionals¹⁶⁸. Some 235 healthcare professionals participated in the study, and findings revealed that work satisfaction partially mediates the relationship between organisational communication satisfaction and organisational commitment.

A study investigated the influence of job satisfaction and job commitment among health care worker in community clinics in lower Perak District, Malaysia¹⁶⁹. Data was collected by administering survey questionnaires to 141 staff from 7 community clinics. Findings suggested working condition, pay and benefit were three factors that significantly motivated job commitment. In contrast, none of the predicting factors of job satisfaction was significantly

associated with job commitment. The findings indicated that the motivational needs of health care employee was still situated at the low level of Maslow's motivational needs pyramid, i.e. the belongingness level. The study also indicated that the community health care workers have similar organisation behaviour, which was consistent to custodial model. Pay and benefit were the most important attractions to motivate them continuously.

A scholar studied the secrets of happiness at work through a case study of private healthcare providers in Dubai¹⁷⁰. The aim of the study was to explore factors such as effective working relationships with colleagues, company's financial stability, normal work-life balance, attractive salary, interesting job, recognition, good relationships with superiors, job security, autonomy, company values, appreciation for work and learning and career development opportunities that might have a significant effect on happiness of employees working in the private healthcare sector. Data for the study were collected through survey questionnaire to six hundred and fifty employees in 27 healthcare organisations. Data responses were a total of 443 with a response rate of 68%. Findings showed high levels of healthcare employee happiness which help to empower and persuade colleagues, especially when they are faced by challenges while dealing with critical health care issues of the patients.

Some scholars studied work engagement as a mediator between organisational commitment and job satisfaction among community health-care workers in China¹⁷¹. The study aim to understand the various levels of organisational commitment, job satisfaction and work engagement among community health-care workers in China, and to explore relationships between measured variables. Using a structural equation model to analyse data from 1404 community healthcare workers, findings revealed work engagement and job satisfaction positively correlate with organisational commitment. Findings also showed that there was a

direct and indirect influence of organisational organisation on job satisfaction which was positively mediated by work engagement. Improvement in work engagement may lead to higher level of job satisfaction and organisational commitment.

A study explored the impact of job satisfaction on creating a sustainable workplace, through the lens of empirical analysis of organisational commitment and lifestyle behaviour¹⁷². Data for the study were collected using a purposive sampling technique and responses were gathered using an online survey. Findings revealed that organisational commitment has a positive association with workers' job satisfaction, while work stress have a negative association with job satisfaction. Similarly, job characteristics and job involvement also have a strong positive association with organisational commitment, which in turn has a significant impact on job satisfaction. Findings also indicated that lifestyle behaviour have a positive association with work stress and job burnout negatively influencing job satisfaction. Another study aimed to determine the predictive power of job satisfaction and occupational stress in organisational commitment among midwives¹⁷³. Simple random sampling was used to select 107 midwives working in maternity wards. Findings revealed a significant negative correlation between occupational stress and organisational commitment, and a significant positive correlation between organisational commitment and job satisfaction. The study suggested that job satisfaction can predict organisational commitment better, indicating that even with the pressures and challenges in the midwifery profession, midwives can still be committed and engaged by enhancing their job satisfaction and decreasing occupational stress.

A scholar examined the influence of work motivation, job satisfaction, and organisational commitment on employee performance with work discipline serving as a mediator¹⁷⁴. Data for the study was gathered by administering questionnaires to 49 civil servants in Tegal City

Diskominfo and was analysed using Structural Equation Modelling (SEM). Findings showed partial significant positive influence of job motivation, job satisfaction, and organisational commitment on employee work discipline. Another major finding is that work discipline and organisational commitment have significant and positive influence on employee performance, while job motivation and job satisfaction have no influence on employee performance. A researcher also studied organisational commitment and job satisfaction among employees¹⁷⁵. Data were collected from a sample of 80 employees from different companies and institutions through survey questionnaires. Although findings revealed a significant relationship between organisational commitment and job satisfaction, there was no significant difference in organisational commitment and job satisfaction among male and female employees.

A study aimed to understand employees' psychological risk such as a change in lifestyle, tiredness, burnout and a drop in job satisfaction¹⁷⁶. The authors explored the impact of job satisfaction on creating a sustainable workplace, especially analyzing organisational commitment and lifestyle behaviour. Using a non-probability sampling method, data of logistics company's employees were collected through online survey. It was found that organisational commitment has a positive association with workers' job satisfaction, while work stress have a negative association with job satisfaction. Similarly, job characteristics and job involvement also had a strong positive association with organisational commitment, which in turn had a significant impact on job satisfaction. Findings also indicated that lifestyle behaviour had a positive association with work stress and job burnout negatively influencing job satisfaction.

Most organisations are human-capital intensive, especially higher citadel of learning¹⁷⁷. Practices followed by a university for enhancing the satisfaction of its teachers may be of great help in attracting, retaining and managing highly qualified and competent teachers. A study

investigated the effects of job satisfaction on organisational commitment among university teachers in India. Using a structural equation model to analyse data from 396 academicians, it was found that job satisfaction influences the organisational commitment of university teachers in India. An astonishing finding showed that with as low as one percent in estimates of pay, job security, organisation support and job challenge would increase by 21, 36, and 49 percent respectively in organisational commitment of university teachers. Findings of the study indicate that there are several factors influencing organisational commitment of which job challenge is the most significant contributing factor, followed by organisational commitment and pay and job security which help in motivating and retaining the teachers in higher education institutions in India.

Happy employees are more engaged in their work. Engagement involves a deep connection and enthusiasm for one's job, which often translates into higher productivity and commitment. Research indicates that engaged employees are not only more productive but also more likely to stay with their employers, thus fostering long-term organisational commitment. A paper examined the effect of happiness at work on employee engagement and intention to stay of hospital employees¹⁷⁸. The study adopted a cross-sectional research design to sample 154 respondents. Data were analysed using PLS which yielded a positive and significant relationship between happiness at work and employee engagement. The result also shows that employee engagement has a positive and significant relationship with intention to stay; and happiness at work has no direct relationship with intention to stay, but has a relationship through employee engagement.

Albert Schweitzer remarked that "success is not the key to happiness, happiness is the key to success"¹⁷⁹. However, many organisations continue to view employee happiness as an

insignificant factor, unrelated to financial results. A paper examined the association between employee happiness and outcome of organisational interest¹⁷⁹. It was found that employee happiness's ability can significantly mediate the relationship between job demands and organisational outcomes. A high level of job demands decreased employee happiness, which subsequently decreased employees' organisational commitment, task performance, and contextual performance, while increasing turnover intentions and counterproductive work behaviours.

A study examined employees work engagement by establishing correlations with employment personal characteristics, organisational commitment and workplace happiness¹⁸⁰. Data for the study was collected from 76 employees of manufacturing companies in Manila and Phillipines. It was found that participants had a high level of employee work engagement and job satisfaction, and a moderate level of employee organisational commitment. There was also a significant positive correlation between the level of employee engagement and employee happiness at work. Similarly, some scholars investigated the role of employee engagement, job satisfaction and organisational commitment on happiness at work at a Saudi organisation¹⁸¹. The authors utilized a simple random sampling and three thousand copies of a questionnaire were distributed to the employees with a response rate of 23.5 percent. The findings showed that workplace happiness influences organisational commitment. Employee engagement and job satisfaction also contributing factors to the individual's happiness at work.

A research investigated the relationship between two measurements of employee engagement, that is, job engagement and organisational engagement, and the dimensions of organisational commitment¹⁸². The study adapted a quota and convenience sampling and questionnaire was distributed to 336 employees of banks in Jordan. It was found that frontline

employees who have high job engagement and organisational engagement will have high level of affective and normative commitment. Conversely, high employees' job engagement can significantly influence employees' continuance commitment.

Another scholar examined happiness, work engagement, and organisational commitment of support staff at a tertiary institution¹⁸³. The study used a cross-sectional survey design and sampled 123 support staff members from a tertiary education institution in South Africa. Result showed a significant positive relationship between work engagement and happiness. It also indicated that happiness and work engagement have predictive value for affective organisational commitment. This finding is in line with another scholar that examined the impact of employee empowerment and employee engagement on organisational commitment and found that employee engagement and empowerment enhances organisational commitment of employees.

A study examined the impact of employee happiness on organisational citizenship behaviour with special reference to the executive level employees in selected leading mobile telecommunication companies¹⁸⁴. Data from 153 executive level employees using simple random sampling technique and finding revealed that there is a positive strong relationship between the employee happiness and organisational citizenship behaviour. A scholar examined happiness at work using a multi-criteria decision-making approach¹⁸⁵. Data was collected from key representatives of information technology (IT) firms located in India using the decision-making trial and evaluation laboratory (DEMATEL) technique to establish causal relationship among enablers of happiness at work. The study findings indicated that 5 out of the 12 enablers as causal, namely, transformational leadership, authentic work climate, person-organisation work fit, organisational virtuousness and meaningfulness in work.

Some scholars studied impact of work life balance on job satisfaction with mediating relationships of employee engagement and organisational commitment¹⁸⁶. Data for the study was collected from 202 respondents and responses were analysed using bivariate and multivariate analysis. The findings indicated a negative significant relationship between work life balance and job satisfaction. Findings also implied that employee engagement mediates the relationship between work life balance and job satisfaction, and a negative insignificant relationship is depicted between work life balance and organisational commitment whereas a positive and significant relationship was seen between organisational commitment and job satisfaction.

Some scholars explored compassion, mindfulness and the happiness of healthcare workers. 400 healthcare workers were randomly selected to participate in the study¹⁸⁷. Responses analysed indicated that self-compassion was significantly and independently associated with perceived happiness, accounting for 39 percent variance after factors such as age, marital status, gender, time spent exercising and attendance to an exercise facility were adjusted. Similarly, self-compassion is meaningfully and independently associated with happiness and well-being in healthcare professionals.

A scholar investigated the relationship between workplace spirituality and organisational citizenship behaviour among nurses through mediation of affective organisational commitment¹⁸⁸. Using a cross sectional research design, 305 nurses working in public healthcare sectors in Kerman, Iran. Results showed that workplace spirituality has a positive influence on nurses' organisational citizenship behaviour and affective commitment, with workplace spirituality explained 16 percent of variation in organisational citizenship behaviour and 35 percent of variation in affective commitment among nurses. It was found that affective organisational

commitment mediated the influence of workplace spirituality on organisational citizenship behaviour.

A study examined the organisational and social commitments and related factors during the coronavirus pandemic of healthcare workers in northern Iran¹⁸⁹. Data was collected from 260 healthcare workers of Babol. Findings showed that 27.7 percent of the healthcare workers had moderate organisational commitments and 72.3 percent had high organisational commitments. Also, about 9.2 percent of the healthcare workers had moderate social commitments and 90.8 percent had high social commitments. Study result found that the education, job position and the area in which healthcare workers were present for service were significantly associated with organisational commitments. It was also found that healthcare workers with master's and doctoral education levels had 3.482 times more social commitments than others and the health group had 2.455 times more social commitments compared to the treatment group.

A study investigated the role of employee engagement, job satisfaction and organisational commitment on happiness at work at a Saudi organisation¹⁹⁰. The authors utilized a simple random sampling and three thousand copies of a questionnaire were distributed to the employees with a response rate of 23.5 percent. The findings showed that workplace happiness influences organisational commitment. Employee engagement and job satisfaction also contributing factors to the individual's happiness at work. Another paper studied Employees work engagement by establishing correlations with employment personal characteristics, organisational commitment and workplace happiness¹⁹¹. Data for the study was collected from 76 employees of manufacturing companies in Manila and Phillippines. Data were analysed using correlation analysis and result revealed a high level of employee work engagement and job satisfaction, and

a moderate level of employee organisational commitment. There was also a significant positive correlation between the level of employee engagement and employee happiness at work.

A study examined investigated the mediating role of work happiness on the relationship between value congruence and organisational commitment¹⁹². In the study, a random sampling technique was used to select participants and 386 responses were analysed using SmartPLS3. Study results showed that congruence and work happiness have a positive and significant influence on organisational commitment. Also, result indicated that work happiness also mediate the relationship between value congruence and organisational commitment. Some scholars investigated happiness at work, organisation citizenship behaviour and workplace diversity through a study on Indian private sector bank employees¹⁹³. The paper aimed to understand whether employees' perception of diversity management practices will mediates the relationship between happiness at work and organisational citizenship behaviour. A total of 498 employees of three major private sector banks in the Delhi-NCR region were sampled and their responses was analysed using structural equation modelling. Happiness at work has a significant positive impact on organisational citizenship behaviour, and employees' perception of diversity management plays a strong mediating role between the relationship of happiness at work and organisational citizenship behaviour.

A scholar conducted an analysis of employee happiness, engagement and organisational commitment in the banking sector of India¹⁹⁴. The study aimed at identifying a relationship between employee happiness, employee engagement and organisational commitment and tries to understand role of employee happiness and employee engagement in predicting organisational commitment in the banking sector of India. 337 bank employees participated in the study, and it was found that a significant positive relationship exist between employee happiness and

engagement. It was also indicated that employee happiness and engagement can accurately predict organisational commitment for the employees working in the Indian banking sector. A paper studied happiness at work through the lens of organisational culture, job embeddedness and continuance commitment¹⁹⁵. Data for this study includes the administration of questionnaires to fifty-nine administrators, leaders and workers. The result indicates that there were no statistical significance between being happy at work and not being happy at work regarding to continuance commitment.

A scholar studied happiness, work engagement and organisational commitment of support staff at a tertiary education institution in South Africa¹⁹⁶. The main aim of the research was to understand the relationship between happiness, work engagement and organisational commitment and to determine whether happiness and work engagement can accurately predict organisational commitment of support staff. In the study, a cross-sectional survey design was used by administering questionnaires to a sample of 123 support staff members from a tertiary education institution in South Africa. The study findings indicated a significant positive relationship between affective organisational commitment and work engagement, as also seen between affective organisational commitment and happiness. The study result also indicated significant positive relationship between work engagement and happiness.

2.3.3 Psychological Climate and Organisational Commitment

Employees' perceptions of their work environment can influence their behaviour and attitudes towards the organisation, including their commitment to the organisation. Some scholars studied the role of psychological climate in mediating the relationship between leadership and organisational commitment¹⁹⁷. The study used a saturated sampling method and

collected data by administering questionnaires to all members of the cooperative in members in Bali and data responses were analysed using PLS. It was found that leadership has a positive influence on organisational commitment and psychological climate, which in turn provides positive organisational commitment.

Organisations may need to manage not only the physical and cognitive energies of employees but also their psychological connection to their work and the organisation. Providing a positive, fulfilling work environment that supports employee well-being is crucial, as it allows employees to improvise and contribute to organisational success. Specifically, the psychological climate can significantly impact organisational effectiveness. However, this relationship is not straightforward; for a positive climate to enhance organisational performance, it must first positively affect individual-level outcomes. A study examined psychological climate, organisational commitment and morale by considering its implications for Army Captains' Career Intent¹⁹⁸. The aim of the research was to understand how work experience can contribute to junior officers' intentions to leave the army. Data from 649 captains was analysed and it was found that psychological impacts intents to leave the Army by influencing captains' affective commitment and morale. The psychological climate dimension of leadership had the largest impact on affective commitment, morale, and intent to leave the Army. Affective commitment did not interact with continuance commitment to predict intent to leave. However, the findings also revealed that affective commitment did not interact or influence continuance commitment to predict intent to leave.

Some scholars examined the moderating effect of organisational tenure on relationship between psychological climate and affective commitment¹⁹⁹. Data for the study was collected from a total of 1117 with a response rate of about 53 percent from public sector agency in West

Australia. The results revealed that affective commitment is stronger for employees with longer tenure, while perceptions of psychological climate appear to be less positive for these employees. It was also discovered that the moderation effect for tenure is as a result of the importance of supervisor involvement to affective commitment for employees with one to nine years' tenure.

Organisations require employees to be proactive, take initiative in their roles, and stay dedicated to maintaining high performance standards. A paper examined psychological climate and organisational effectiveness by understanding the role of work engagement²⁰⁰. Using a structural equation model, data from a total of 300 employees in different service organisations in India were analysed. It was found that work engagement fully mediates the relationship between psychological climate and organisational effectiveness, suggesting that employees' engagement with their work plays a significant role in shaping the effectiveness of their organisation. A positive and supportive context is needed for human resources to achieve sustainable growth and performance.

Role clarity involves understanding job responsibilities, expectations, and the scope of one's role within the organisation. Empirical studies suggest that high role clarity is positively associated with organisational commitment. When employees have a clear understanding of their roles, they are more likely to feel competent and satisfied, leading to higher levels of commitment. Conversely, role ambiguity can cause stress and dissatisfaction, reducing commitment levels. A study investigated the role of leadership styles in influencing commitment to service quality with the moderation of role clarity²⁰¹. Data from 315 medical officers from 43 public-sector hospitals was analysed using the partial least squares structural equation modelling (PLS-SEM) technique and Smart PLS 3 software. It was found that role clarity moderated the

relationships transformational leadership and laissez-faire leadership with commitment to service quality.

A study explored the effect of perceived role clarity on innovative work behaviour through the mediation of intrinsic motivation and job involvement²⁰². Some 613 employees belonging to 196 organisations operating in India participated in the survey. The findings showed that that intrinsic motivation and job involvement individually and serially mediate the effect of perceived role clarity on innovative work behaviour. It shed importance to perceived role clarity in developing positive work attitudes and innovative behaviour among employees.

A scholar utilized a cross-sectional design to determine whether contextual factors such as role clarity influences the relationship between authentic leadership, psychological empowerment and work engagement²⁰³. Data from 236 employees was analysed and it was found that the value of authentic leadership to enhance work engagement, both directly and indirectly via psychological empowerment. Results also concluded that authentic leadership exerts its influence on work engagement through psychological empowerment, regardless of employees' levels of role clarity. Similarly, a paper investigated the mediating effect of resilience and role clarity with the conditional indirect effect of intrinsic motivation in the role of transformational leadership in reducing the risk of burnout among hospital employees²⁰⁴. Using a structural equation model to analyse data collected from 398 employees, it was found that transformational leadership significantly reduces burnout. Findings revealed that resilience and role clarity mediate the relationship between transformational leadership and burnout.

Role clarity for employees in human service organisations is crucial. It is directly and positively linked to organisational commitment and can also foster positive work attitudes such

as job involvement and job satisfaction. This, in turn, enhances the organisational commitment of social workers. A paper investigated the relationship of role clarity and organisational commitment by integrating the mediating effects of job involvement and job satisfaction of social workers²⁰⁵. Data from 330 social workers was analysed using partial least squares structural equation modeling. Result showed a partial mediation effect of job involvement and job satisfaction in simple and jointly as serial mediation models between the direct relationship of role clarity and organisational commitment. The findings highlighted the sequential relationship between job characteristics (role clarity, job involvement, and job satisfaction) and the behavioural outcome of organisational commitment.

Job satisfaction is positively influenced by role clarity, which in turn enhances job satisfaction. This improved job satisfaction positively impacts nurses' roles and responsibilities, ultimately influencing their commitment to the organisation. A paper investigated the influence of role clarity on job satisfaction among nurses²⁰⁶. Data from 141 nurses was analysed, and it was found that nurses' perception about role clarity correlated positive with job satisfaction dimensions of communication and relations. Communication and relations correlated positive with educational qualification and marital status respectively. Nurses are aware of causes of role ambiguity, and nurses' perception about role clarity correlated positive with job satisfaction dimension of communication and relations.

Some authors examined the mediating role of role clarity and affect-based trust relationship in organisational socialization tactics and newcomer adjustment²⁰⁷. They examine two pathways through which organisational socialization tactics influence newcomers' adjustment. First, by reducing job-related uncertainty and then, by fostering the development of social-exchange relationships with supervisors and co-workers. Using a 3-wave study of a

sample of 224 newcomers, it was found that role clarity which indicate of uncertainty reduction route mediates a positive relationship between social tactics and self-rated task performance. Role clarity was found to mediate the relationship between organisational socialization tactics and self-rated task performance.

A study examined the relationship of role clarity and organisation-based self-esteem with 4 dimensions of commitment to supervisors and organisations (affective, normative, perceived high sacrifice and perceived lack of alternatives) and turnover intentions²⁰⁸. It was found that role clarity was positively related to affective, normative, and perceived high sacrifice supervisory commitment; while it was not related to organisational commitments. Role clarity of frontline staff is critical to their perceptions of service quality in call centres. A paper investigated the effect of role clarity and its antecedents and consequences on employee-perceived service quality²⁰⁹. Using a structural equation model, data from 342 call centre representatives were analysed. It was found that role clarity plays a critical role in explaining employee perceptions of service quality. Furthermore, the research findings revealed that feedback, participation, and team support significantly enhance role clarity, which subsequently impacts job satisfaction and organisational commitment.

A scholar investigated the effect of role clarity and work autonomy on the performance of employees with the mediating influence of organisational commitment²¹⁰. Data gathered from 311 employees of five different multinational telecommunication organisations was analysed, and it was found that role clarity and work autonomy have a significant positive effect on the work performance of individuals. Organisational commitment partially mediates the relationship between role clarity and work autonomy with work performance among employees of multinational telecommunication organisations. Employees who are uncertain about their job

responsibilities tend to be less engaged and motivated at work. Therefore, organisations should eliminate role ambiguities and conflicts to enhance staff commitment by clearly defining roles, thereby improving work performance.

Some researcher explored the relationship between role ambiguity, role conflict, and affective, normative and continuance commitment as mediated by job satisfaction among faculty members²¹¹. Using a structural equation model, data from 133 faculty members at a US-accredited university in Lebanon was analysed, and it was revealed that a decrease in role ambiguity strengthens affective and normative commitment but weakens continuance commitment. It was also found that job satisfaction partially mediates the relationship between role ambiguity and affective commitment, but does not mediate the relationship between role ambiguity and normative or continuance commitments. Similarly, job satisfaction acts as a mediator in the relationship between role conflict and commitment. Another paper investigated the relationship between role clarity and work satisfaction among university library staff in South-West Nigeria²¹². Data from 356 library workers was analysed and it was found that role clarity had a substantial impact on the work satisfaction of university library staff.

Supportive management involves supervisors provide guidance, feedback, and emotional support to their employees. Supportive management has been consistently linked to higher organisational commitment. Employees who perceive their managers as supportive are more likely to feel valued and appreciated, which enhances their loyalty to the organisation. Some scholars investigated the impact of managerial support on the employee commitment of employees working in Hotel industry of Malaysia²¹³. Using regression model, 415 data collected was analysed and it was found that managerial support is positively and significantly related with

employee commitment. Managers should pay more attention to supporting employees in their routine activities to achieve competitive advantage over its competitors.

A study investigated the mediating role of organisational commitment and person–organisation fit between the causal relationship of supportive work environment and employee retention²¹⁴. It was found that supportive work environment had a significant positive association with employee retention. Organisational commitment and person–organisation fit acted as mediators between the relationship of supportive work environment and employee retention. A paper investigated the interplay between organisational support, career development, and organisational commitment within the financial services industry in Indonesia²¹⁵. Data of participants was analysed using Partial Least Squares Structural Equation Modelling (PLS-SEM). The study found a significant positive relationship between organisational support and organisational commitment, career development and organisational commitment, and the sequential effect of organisational support on career development, leading to organisational commitment. The findings underscored the importance of fostering supportive environments and providing growth opportunities to enhance organisational commitment.

Some scholars examined the mediating role of organisational commitment between perceived organisational support and employees' perceptions of unethical pro-organisational behaviour in public sector universities²¹⁶. Using the Partial Least Squares Structural Equation Modeling (PLS-SEM), data from 233 respondent were analysed. The study found that organisational commitment in public sector institutions mediates the relationship between perceived corporate support and employee perceptions. Employees who adhere to management directives and established procedures contribute to growth and generate creative ideas. The research concluded that organisational commitment plays a crucial role in mediating the

relationship between perceived support and employee perceptions within public sector universities. It facilitates constructive growth and fosters creativity. Perceived organisational support enhances commitment, and providing a supportive work environment significantly boosts employee well-being.

A study explored the mediating role of supportive leadership in the relationship between quality of work life and organisational commitment among teachers²¹⁷. Data from 384 teachers was analysed, revealing a positive correlation between quality of work life and organisational commitment, with supportive leadership playing a mediating role in this relationship. The findings suggest that improving quality of work life and fostering supportive leadership can enhance the organisational commitment of teachers, resulting in a more committed and engaged workforce. A study also aimed to determine the effect of perceived organisation support on employee organisational commitment. Data from 50 employees of MSMEs XYZ Denpasar was analysed using simple linear regression. The results of this study indicated that perceived organisational support had a positive and significant effect on organisational commitment.

A study explored the impact of contextual variables, such as prosocial motivation, on employee discretionary behaviour and organisational commitment, and the mediating mechanism of managerial support at work²¹⁸. Data from 303 administrative, instructional, and supervisory staff working in Technical and Vocational Education and Training (TVET) for Pakistan's public sector were collected and analysed using SPSS version 24. Confirmatory factor analyses indicated a good fit model, while a correlation matrix showed a significant positive effect of prosocial motivation on employee citizenship behaviour and organisational commitment. Managerial support mediated the relationship between prosocial motivation and employees' organisational commitment and citizenship behaviour.

A journal investigated the influence of supervisor-subordinate guanxi and organisational commitment in the information security management²¹⁹. Data gathered from 235 Chinese government employees was analysed. It was found that there was a direct effect of supervisor-subordinate guanxi on government employees' information security policy compliance but also suggest that supervisor-subordinate guanxi indirectly influences compliance behaviour via the mediation of organisational commitment. Organisational commitment weakens the negative influence of perceived costs on compliance behaviour and also weakens the positive effect of self-efficacy on employees' information security policy compliance. For low-commitment employees, the negative influence of perceived costs on compliance behaviour is more significant than that of those with strong organisational commitment, and self-efficacy exerts a stronger effect on information security policy compliance for low-commitment employees than it does for high-commitment employees.

Contribution involves employees' perception of their ability to make meaningful and valued contributions to the organisation. When employees feel that their contributions are recognized and valued, their sense of purpose and commitment to the organisation increases. Empirical evidence from a study shows that employees who perceive their contributions as significant are more likely to develop strong affective commitment. () This sense of contribution enhances their overall job satisfaction and loyalty. A paper examined the direct and indirect effect between meaningful work and affective commitment to change with work engagement as a mediator²²⁰. Utilizing a structural equation model, data from 501 faculty members from 16 higher education institutions in Indonesia. It was found that work engagement functions as a partial mediator in the relationship between meaningful work and affective commitment to change. Organisations need to create an atmosphere that creates meaningful work experiences

and increase work engagement to foster affective commitment to change to drive successful organisational transformation.

Meaningfulness of work leads to positive job-related outcomes, resulting in employees who are engaged, satisfied, productive, trustworthy, and devoted. A paper examined the relationship between meaningfulness of work, employee engagement, and affective commitment, particularly, the mediating influence of affective commitment on the relationship²²¹. Data from 319 employees was analysed and it was found that a positive relationship exist between meaningfulness of work, employee engagement, and affective commitment. Affective commitment acts as a mediator on the relationship between the meaningfulness of work and employee engagement.

Humans can find personal significance through work, making it a fundamental and central aspect of life. A study explored dimensions that contribute most to employees' perceptions of meaningful work, thereby encouraging job engagement and organisational commitment²²². A total of 352 hospitality employees participated in the study. It was revealed that employees' meaning of work positively influences their job engagement and organisational commitment. Work centrality, interpersonal relations, economic orientation, and obligation norms significantly affect employees' job engagement, while entitlement norms and expressive orientation do not. Furthermore, work centrality, obligation norms, economic orientation, interpersonal relations, and expressive orientation—among the meanings of work—significantly influence employees' commitment. Additionally, employees' engagement positively impacted organisational commitment.

A study investigated the relationships amongst psychological meaningfulness, work engagement and organisational commitment and to test for a possible mediation effect of work engagement on the relationship between psychological meaningfulness and organisational commitment²²³. Data from 415 working employee was analysed, and it was revealed that there is a positive relationship between psychological meaningfulness, work engagement and organisational commitment. Psychological meaningfulness predicted work engagement, whilst psychological meaningfulness and work engagement predict organisational commitment.

Some scholars investigated the mediating role of meaningful work in the effect of organisation's commitment to organisational citizenship behaviour²²⁴. Using a PLS structural equation model, data from 104 participants was analysed. The findings indicated no relationship between organisational commitment and organisational citizenship behaviour. However, there was a significant positive relationship between organisation commitment and meaningful work. There was also a link between meaningful work and organisational citizenship behaviour. It was shown that meaningful work is the only difference between organisational commitment and citizenship behaviour. Organisational commitment and citizenship behaviours are related and reinforced by meaningful work.

A scholar explored the relationship between employees' meaningful work and organisational outcomes at public Jordanian universities with individual work performance as a mediating variable²²⁵. Data from 442 participants was analysed. It was revealed that that meaningful work has a positive relationship with organisational outcomes. The findings also indicated that individual work performance showed a partial mediating role in the link between meaningful work and organisational outcomes. Another paper examined the relationships between corporate social responsibility and employee commitment using both social identity

theory and social exchange theory by developing a conceptual model which incorporates mediation effects of meaningful work and positive affect²²⁶. Using the structural equation model, data from 410 was analysed. The findings indicated that there was a positive relationship between corporate social responsibility perceptions and employee commitment. Meaningful work and positive affect were found to partially mediate the relationship between corporate social responsibility and employee commitment.

Recognition involves acknowledging and rewarding employees' achievements and contributions. Recognition is a powerful driver of organisational commitment. When employees feel recognized and rewarded for their efforts, they are more likely to remain committed to the organisation. Research indicates that intrinsic motivation, driven by recognition, significantly enhances organisational commitment. Employees who receive regular recognition are more motivated and engaged, leading to higher commitment levels. A study explored the influence of recognition and reward on employee commitment and performance²²⁷. It was found that the relationship of elements or variables as job performance of employees with job security, job satisfaction, performance appraisal, reward system, employee turnover, employee commitment, and organisational productivity.

A study examined the interconnectedness of commitment, satisfaction, recognition, reward, and organisational justice with employee engagement level²²⁸. It was revealed that there was a strong positive correlation between elevated engagement and enhanced employee experiences, characterized by deeper involvement, heightened motivation, and greater job and company satisfaction. It was also shown that increased engagement translates into tangible organisational benefits, including significantly improved productivity, superior work quality, reduced employee turnover, and ultimately, enhanced organisational performance.

A scholar examined the relationship among reward, recognition and motivation while working within an organisation²²⁹. 250 self-administered questionnaires were distributed among the employees with a response rate of 88 percent. Findings revealed that dimensions of work motivation and satisfaction are significantly correlated and reward and recognition have great impact on motivation of the employees. Another study examined the impact of reward and recognition on job satisfaction and motivation²³⁰. The authors aimed to identify academic staff and administrators' perceptions about reward and recognition and to explain challenges of reward implementation in private tertiary institutions. Data from 157 academic staff were analysed, and it was found that rewards had a positive impact on work motivation but no significant relationship existed between reward and job satisfaction.

Self-expression is the ability of employees to express their individuality and creativity at work. A work environment that encourages self-expression fosters higher levels of organisational commitment. Employees who feel they can express themselves are more likely to be satisfied and committed to their organisation. A study examined the influence of self-expression on organisational commitment. Some 19 individual interviews were conducted and it was revealed that there were opportunities of expressing identities in business and work organisation, but they were limited and related to the job and organisation²³¹. Expression of the "real-self" will lead to the developing an identification with the organisation and contribution to the organisation beyond the "call of duty". A scholar explored the role of self-definition in identity enactment leading to organisational commitment²³². Utilizing an in-depth qualitative analysis, it was found that employees' desire to develop meaningful self-definition in relation to their profession or/and organisation leads to a strong identification.

Challenge involves to the extent to which employees feel that their job provides opportunities for growth, learning, and development. Jobs that offer appropriate levels of challenge are linked to higher organisational commitment. When employees are challenged, they are more likely to feel engaged and motivated, leading to greater loyalty to the organisation. A paper examined the relationships between promotion, development, and recognition opportunities at work and organisational commitment, and whether these relationships are moderated by the job opportunities employees have in other organisations²³³. Using a hierarchical multiple regression analysis, data from 550 employees was analysed. Finding showed that opportunities for development and recognition are predictors of organisational commitment. Job opportunities negatively moderate the relationship between recognition opportunity at work and organisational commitment, and that promotion opportunity does not predict organisational commitment.

Many studies in organisational behaviour consider organisational commitment and job involvement to be closely linked. Research has assessed the impact of job enrichment characteristics on manager identification and involvement and found that job characteristics and task identification were significant predictors of organisational involvement. Work engagement, organisational commitment, and employee performance, highlighting the importance of creating challenging work conditions to enhance employee passion and performance. A paper exam the linkage between organisational commitment and work engagement to employee performance²³⁴. Data from 274 workers was analysed and it was found that a positive relation exist between performance and effective commitment, normative commitment and work engagement with engagement showing a stronger association. Work engagement was relevant to explain employee performance because commitment did not present significant predictor strength.

2.3.4 Organisational Commitment Variation in Specialisation among Healthcare Workers

Organisational commitment in healthcare is crucial for job performance, retention, and patient care quality. Addressing challenges like workforce shortages and high turnover rates is essential. Research shows that commitment is influenced by professional, demographic, and contextual factors, affecting employees' intentions to stay or leave their positions. A paper explored how occupational roles impact the link between human resource practices and patient care outcomes in three large hospitals in China²³⁵. Through a cross-sectional survey involving 499 healthcare professionals, including doctors, nurses, allied health workers, and managers, the study highlighted distinct responses to HR management practices based on profession. Doctors rated the quality of patient care more highly than nurses, with 'training,' 'transformational leadership,' and 'information sharing' significantly influencing nurses' ratings. Conversely, teamwork was more strongly associated with doctors' perceptions of care quality, suggesting that while both groups operated within the same management structure, professional roles shaped their response to HR practices differently.

A scholar reviewed organisational commitment levels among healthcare professionals, with a focus on physicians²³⁶. They found that physicians tend to have lower organisational commitment compared to other healthcare workers, a trend that remains consistent across various countries and healthcare systems. Factors such as age, job satisfaction, and specific job-related characteristics were shown to influence physicians' commitment to their organisations. The study suggests that supportive work environments, autonomy, and job satisfaction are

essential for improving organisational commitment among physicians, reinforcing the need for healthcare institutions to adopt strategies that encourage physicians' engagement and retention.

In a study, the focus was on the link between organisational commitment, job satisfaction, burnout, and nurses' intention to remain in the profession (ITSN)²³⁷. An analysis of responses from 756 registered nurses revealed that organisational commitment was the most significant predictor of ITSN, with low burnout and high job satisfaction also playing essential roles. This study, conducted amid the global nursing shortage, emphasizes the importance of fostering commitment and reducing burnout among nurses to enhance retention, which is critical in healthcare management. Also, some studies assessed organisational commitment and turnover intentions among nurses in Portuguese public hospitals²³⁸. The study found that high levels of affective and continuance commitment were associated with reduced intentions to leave. Both structural factors (such as staffing and work environment) and individual characteristics were linked to commitment and retention. Despite challenges like staffing issues and limited professional growth opportunities, nurses exhibited a satisfactory level of organisational commitment.

Some authors conducted a cross-sectional descriptive study in a Saudi Arabian public hospital to assess nurses' organisational commitment and the influence of sociodemographic factors. Using a modified version of the three-component model (TCM) questionnaire, they surveyed a sample of 384 nurses and found that nearly half of the nurses had positive responses to organisational commitment items. Commitment levels varied significantly across age groups, with age serving as a primary predictor of commitment. The findings suggest that both age and nationality positively affect nurses' commitment, with continuous commitment showing the

highest positive response. In a systematic review by some authors, pharmacist turnover rates and intentions to leave their roles or the profession were examined through data sourced from six databases²³⁹. Out of 28 studies reviewed, results indicated an increasing turnover trend, with pharmacists in hospitals showing higher turnover intentions compared to those in community settings. The analysis revealed that turnover and turnover intentions in both European and Asian countries have gradually risen over time, underscoring a growing concern about pharmacist retention within healthcare systems.

A study explored how job engagement impacts job performance among Greek healthcare professionals²⁴⁰. From data collected from 269 participants, they found that work engagement significantly influenced job performance among doctors but was less pronounced among administrative staff and nurses. Interestingly, doctors displayed higher engagement but lower job performance relative to the other employee groups. The study concludes that professional roles heavily influence engagement and, in turn, performance, with age—though not experience—positively affecting engagement levels. A study assessed healthcare workers' organisational and social commitment during the COVID-19 pandemic in Babol, Iran²⁴¹. Among 260 healthcare workers, high levels of commitment were observed, with none reporting low organisational commitment. Factors such as education level, job position, and work location significantly influenced commitment levels. Those with advanced education showed greater social commitment, as did health service workers compared to treatment staff. This study highlights the elevated levels of commitment among healthcare workers in challenging times, with education and job positions acting as significant contributors.

2.4 Conceptual Model

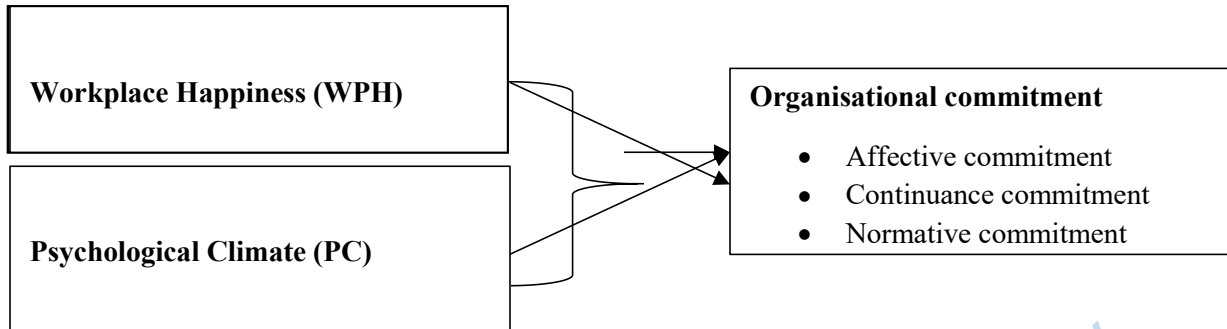


Figure 1 Conceptual Framework

Figure 1 above shows the proposed relationship between the independent and dependent variables. There are two independent variables; workplace happiness and psychological climate. Organisational commitment is the dependent variable and has three dimensions – affective, continuance, and normative.

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Chapter Three

Methodology

3.1 Research Design

The study employed an ex-post facto research design, which is appropriate for investigating the relationship between variables without manipulating them. Data was also collected from different sectors in various hospitals in Ibadan, including doctors, nurses, pharmacists, technologists and administrators. This design allowed the researcher to analyse existing conditions or events retrospectively to identify possible causal relationships. In this context, the ex-post facto approach was suitable for examining how workplace happiness and psychological climate influence organisational commitment among healthcare workers in Ibadan, as these variables cannot be experimentally controlled or manipulated. Workplace happiness is a continuous variable occurring at two levels (high/low). Similarly, psychological climate is a continuous variable occurring at two levels (high/low), and organisational commitment is a continuous variable with three dimensions (affective, continuance and normative), all occurring two levels (high/low). Age and work experience were controlled in this study.

The study utilized a quantitative method of data collection, employing structured questionnaires to gather information from healthcare workers across various institutions in Ibadan. The questionnaire was divided into three sections, capturing demographic data, measures of workplace happiness and psychological climate, and levels of organisational commitment.

3.2 Population of the Study

The study population comprised clinical and administrative staff of public hospitals in Oyo State. The hospitals selected were all government owned hospitals. The reason for using these hospitals was that the issues investigated are prominent within government managed healthcare facilities. Moreover, the choice of conducting this research in Oyo State is because it has an established healthcare system.

Table 3.1: List of Hospitals for the Study

S/N	Name	Staff Strength
1	University College Hospital, Ibadan	2675
2	Jericho Nursing home	139
3	Jericho Specialist Hospital	187
4	Adeoyo Memorial Specialist Hospital	219
5	Adeoyo Yemetu Hospital	276
		3496

Source: Human Resource Office (2022)

3.3 Sample Size and Sampling Technique

The study made use of a multi-stage sampling technique. Stage one involved purposive selection of government owned hospitals in Oyo State. These include the University College Hospital (UCH), Jericho Nursing home, Jericho Specialist Hospital, Adeoyo Memorial Specialist Hospital, and Adeoyo Yemetu Hospital. Stage two involved stratification of the population based on profession into five strata; doctors, nurses, pharmacists, technologists and

administrators. Participants were equally distributed into all the strata. This enabled the researchers to capture key population characteristics in the study sample¹. Stratified random sampling gave fewer error-margins when compared with an outright simple random sampling technique. Sampling of the participants based on the stratum was disproportional to the staff strength of each hospital. Stage three involved accidental sampling of participants based on the availability and willingness of the participants to take part in the study.

The sample size drawn from the sampling frame (see table 3.1) was computed using the sample determination for a finite population¹. The use of this formula to determine sample size was considered necessary as the study cannot study the entire population of the healthcare workers in Ibadan. The formula is shown below:

$$S = \frac{X^2NP(1-P)}{d^2(N-1) + X^2P(1-P)}$$

Where:

S = Required Sample size

X = Z value (e.g. 1.96 for 95percent confidence level)

N = Population Size

P = Population proportion (expressed as decimal) (assumed to be 0.5 (50percent))

d = Degree of accuracy (5percent), expressed as a proportion (.05); It is margin of error with target population of 3496 health-care personnel.

$$S = \frac{(1.96)^2 3496 \times 0.5 (1 - 0.5)}{(0.05)^2 (3496 - 1) + (1.96)^2 \times 0.5 (1 - 0.5)}$$

$$S = \frac{(3.8316) 3496 \times 0.5 (0.5)}{(0.0025) (3495) + (3.8316) \times 0.5 (0.5)}$$

$$S = \frac{13395.3 \times 0.25}{8.7375 + 0.9579}$$

$$S = \frac{3348.82}{9.6954}$$

$$S = 336$$

To enhance the response rate 30percent (100) of the sample size was added to the computed sample. The addition of 100 sample was to address attrition; this procedure is in concomitance with existing literature². Therefore, the sample for health-care workers in Oyo State, Nigeria, was 436. Hence, 436 copies of the questionnaire were administered to health-care workers in Oyo State, Nigeria, as presented in Table 3.3 below.

Table 3.2: Sample Size Distribution

S/N	Name	Staff Strength	Calculation	Proportion to each Hospital
1	University College Hospital, Ibadan	2675	$2675/3496 \times 436$	333
2	Jericho Nursing home	139	$139/3496 \times 436$	18
3	Jericho Specialist Hospital	187	$187/3496 \times 436$	23
4	Adeoyo Memorial Specialist Hospital	219	$219/3496 \times 436$	27
5	Adeoyo Yemetu Hospital	276	$276/3496 \times 436$	35
		3496		436

Source: Researcher's computation (2024)

3.4 Research Instrument

A structured questionnaire comprising of four sections was used for data collection among participants. Section one covered demographic information such as gender, age, marital status, area of specialisation and length of service. Section two measured workplace happiness. Section three measured psychological climate. Section measured organisational commitment.

3.4.1 Independent Variables

3.4.1.1 Workplace Happiness

Workplace happiness was measured using the modified Short Happiness at Work (SHAW) scale developed by Salas-Vallina and Alegre in 2021³. It included six items, rated on a 5-point Likert scale, ranging from 1 (strongly disagree) to 5 (strongly agree). Two dimensions of the scale was utilized in the study. Engagement (items 1, 2, and 3) sample items included “I am enthusiastic about my job”, and I get carried away when I am working”, and job satisfaction (items 4, 5, and 6) sample items included “How satisfied are you with the pay you receive for your job?” and “How satisfied are you with the opportunities that exist in this organisation for advancement (promotion)”. Engagement is characterized by enthusiasm and passion at work and positive mental states (vigor and dedication) and job satisfaction is related to a worker’s judgments about working conditions. The higher the score, the happier the individual was at work. The authors of the scale found good reliability for the scale with a Cronbach alpha of 0.87³. The SHAW scale has obtained good psychometric properties in several studies.

3.4.1.2 Psychological Climate

Psychological climate was measured using the Psychological Climate (PC) Scale developed by Brown and Leigh in 1996⁴. It measured the meaningful psychological representations made by individuals relative to the structures, processes, and events that occur in the organisation. This scale consisted of 21 items with 6 factors namely, supportive management, role clarity, contribution, recognition, self-expression, and challenge. Items for supportive management included questions such as “My manager is supportive of my ideas and ways of getting things done”, “I can trust my boss to back me up on decisions I make in the field.”, and “My boss is flexible about how I accomplish my job objectives.” The items for role clarity included “The norms of performance in my department are well understood and communicated.” Items for contribution included questions such as “I feel like a key member of the organisation.”, and “The work I do is very valuable to the organisation”. Items for recognition included questions such as “The organisation recognizes the significance of the contributions I make”, Items for self-expression included “The feelings I express at work are my true feelings”. The survey used a Likert scale scoring system ranging from ‘Strongly Disagree’ to ‘Strongly Agree’. Higher scores indicate higher psychological climate while lower scores indicate lower psychological climate. The developers found a good reliability coefficient for the scale with a Cronbach alpha of .89⁴.

3.4.2 Dependent Variable

3.4.2.1 Organisational Commitment

Organisational commitment was measured using the Organisational Commitment Scale (OCS) developed by Meyer and Allen in 1997⁵. It measured organisational commitment as a tri-

dimensional construct. The OCS is a structured questionnaire items, measuring the affective, continuance, and normative dimensions of organisational commitment. The scale has 24 items, eight items per dimension. Items for the affective dimension include “I think that I could easily become as attached to another organisation as I am to this one” and “I would be very happy to spend the rest of my career with this organisation”. Items for the continuance dimension include “It would be very hard for me to leave my organisation right now, even if I wanted to” and “Right now, staying with my organisation is a matter of necessity as much as desire”. Items for the normative dimension include “If I got another offer for a better job elsewhere, I would not feel it was right to leave my organisation” and “Things were better in the days when people stayed with one organisation for most of their careers”. The scale is rated on a five-point Likert-type scale ranging from 1 (Strongly disagree) to 4 (Strongly agree). Higher scores indicate higher organisational commitment while lower scores indicate lower organisational commitment. The developers established an internal consistency reliability of the f the OCS dimensions varying between 0.85 for affective, 0.79 for continuance and 0.73 for normative. The overall reliability estimates exceed 0.70⁵.

3.5 Validity of Research Instrument

The research instrument demonstrated face, content, and construct validity, supporting its use as a reliable measure of employees’ organisational commitment. The study scales have been utilized in other studies and have been rated valid. The validity measures face, construct, content, internal, external, and criterion validity. The validity of the SHAW (Shortened Version of Happiness at Work) instrument was rigorously assessed to ensure it measures what it is intended to measure⁶. Three forms of validity—content, convergent, and discriminant—were evaluated, providing a comprehensive validation of the scale. The content validity of SHAW scale items

was derived from previously validated instruments^{7, 8}, confirming their relevance and alignment with the dimensions of happiness at work: engagement, job satisfaction, and affective organisational commitment. Additionally, criterion validity has been supported through studies showing significant correlations between PCS scores and relevant outcome measures. These findings indicate that the PCS accurately reflects employees' psychological climate and is predictive of essential workplace attitudes and behaviors⁴.

Meyer and Allen in 1997 found that the correlation between the OCS and antecedent variables provides evidence that the scale is a valid measure of organisational commitment and can be used for future research⁵. Construct validity of the dimensions of the OCS is based on the fact that they correlate as predicted with the proposed antecedents' variables. 0.77 Continuance Commitment (CC) 0.80 Normative Commitment (NC) 0.71 Average 0.76⁵. The scales utilized in this study were subjected to validation by their respective developers and obtained statistical coefficient results as stated in their reports and this study.

3.6 Reliability of Research Instrument

The developers of utilized scales in this study stated the reliability coefficient vis-à-vis the validity report. The scales' reliability coefficients were tested primarily using a test-retest measure (repeatability test). The reliability of the Shortened Version of Happiness at Work (SHAW) was thoroughly evaluated to ensure the consistency and accuracy of the measurements. Following established psychometric practices, the scale was assessed using a new sample (N = 251)⁶. Confirmatory factor analysis (CFA) was conducted using EQS to evaluate the instrument's psychometric properties, including dimensionality, reliability, and validity. All composite reliability values exceeded 0.70, and R^2 values were above 0.50, confirming the high reliability

of the SHAW scale⁶. This indicated that the instrument measures workplace happiness consistently across its dimensions, minimizing random error.

Brown and Leigh in 1996 assessed the reliability of the PC Scale using internal consistency measures and reported an overall scale and its sub-dimensions demonstrated high internal consistency, with Cronbach's alpha values typically exceeding 0.70, the threshold for acceptable reliability. In their study, the overall reliability was reported as 0.92, indicating excellent consistency in measuring the construct⁴.

For this study, the researcher found a good reliability coefficient for work engagement with a Cronbach alpha of .75, job satisfaction with a Cronbach alpha of .35, supportive management with a Cronbach alpha of .80, role clarity with a Cronbach alpha of .75, contribution with a Cronbach alpha of .57, recognition with a Cronbach alpha of .74, self-expression with a Cronbach alpha of .73, challenge with a Cronbach alpha of .79 and organisation commitment with a Cronbach alpha of .71.

3.7 Data Collection

A letter of introduction was obtained from the department prior to data collection. The researcher met with the departments within the identified hospitals to sought permission to conduct this study. This was critical because their approval facilitated the questionnaire administration, retrieval and increasing the response rate regarding data collection. Participant were provided with the informed consent form which included a brief summary of what the research entailed and their rights as participants. Those who consented were administered the questionnaire. The participants were assured of confidentiality and anonymity of the data provided. A total of four hundred and thirty-six copies of questionnaires were administered.

3.8 Data Analysis

Both descriptive and inferential statistics was used in the analysis of data. Hypothesis one to nine was tested using The Independent Samples T-Test. The T-test is ideal for group comparison where the goal is to determine whether the mean scores of these two groups differ significantly. Hypothesis one compared the mean difference between low workplace happiness and high workplace happiness of healthcare workers on affective organisational commitment. Hypothesis two compared the mean difference between low workplace happiness and high workplace happiness of healthcare workers on continuance organisation commitment. Hypothesis three compared the mean difference between low workplace happiness and high workplace happiness of healthcare workers on normative organisation commitment. Hypothesis four compared the mean difference between low workplace happiness and high workplace happiness of healthcare workers on overall organisation commitment.

Hypothesis five compared the mean difference between low psychological climate and high psychological climate of healthcare workers on affective organisation commitment. Hypothesis six compared the mean difference between low psychological climate and high psychological climate of healthcare workers on continuance organisation commitment. Hypothesis seven compared the mean difference between low psychological climate and high psychological climate of healthcare workers on normative organisation commitment. Hypothesis eight compared the mean difference between low psychological climate and high psychological climate of healthcare workers on organisation commitment.

Hypothesis nine compared the mean difference between male and female's organisational commitment. The independent samples t-test was used because some of the assumptions were met, including normally distributed data for each group, homogeneity of variance and independence of the two groups. Hypothesis ten was tested using a multiple regression to measure the combined effect of workplace happiness and psychological climate on organisational commitment. The R^2 value measured the proportion of variance in organisational commitment explained by the combined predictors. Multiple regression accounts for multiple predictors simultaneously. Hypothesis eleven was tested using a one-way ANOVA. It involved comparing the means of a dependent variable across three or more distinct groups of a categorical independent variable. Comparing organisational commitment among healthcare workers based on their professional categories (e.g., doctors, nurses, and allied health professionals). The hypothesis was further tested using a post-hoc analysis. The Bonferroni test was chosen to compare all possible pairs of means.

3.9 Ethical Considerations

The questionnaire was designed to exclude the identities of respondents in order to maintain anonymity. Confidentiality was ensured in the process of data gathering. The research instrument was administered to eligible respondents without any undue influence, and making sure the respondents know that the data to be collected will be solely for academic purposes only.

Before contacting participants, approval from the department was obtained. Participants were required to give informed consent, which means they were fully informed about the study and voluntarily agreed to participate. The researcher explained the purpose of the study and described what participation would entail, including time commitments and tasks. The researcher

assured participants that their responses would be anonymous or confidential, and data would be used solely for research purposes. It was emphasized that participation was entirely voluntary, with the right to withdraw at any time without penalty. Participants signed a written consent form acknowledging their understanding of these points.

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Endnotes

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Chapter Four
Results and Discussion of Findings

4.1: Preliminary Data Analysis

Table 4.1.1 Demographic profile of respondents by age, length of service, institution, gender, marital status, and area of specialization

Demographic Profile(N=397)	M	(SD)	Range	No	%
Age	41.58	8.90	25 – 64		
Length of service	15.01	8.42	2 – 37		
Institution					
Adeoyo Memorial Specialist Hospital				25	6.3
Adeoyo Yemetu Hospital				31	7.8
Jericho Nursing Home				22	5.5
Jericho Specialist Hospital				36	9.1
University College Hospital, Ibadan				283	71.3
Gender					
Male				176	44.3
Female				219	55.2
Others				2	.5
Marital status					
Single				48	12.1
Married				330	83.1
Divorced				19	4.8
Area of specialization					
Doctor				148	37.3
Pharmacist				41	10.3
Nurse				104	26.2
Technician				25	6.3
Administrator				79	19.9

The frequency analysis was performed on the demographic characteristics of the participants. Three hundred and ninety-seven (397) respondents participated in the study. Participants' gender analysis

shows that 176 males (44.3%), 219 females (55.2%), and other gender 14 (0.5%). Their age range was 25 to 58 years (Mean = 41.58, SD = 8.90). the length of service shows the years spent on the job range from 2 to 37 years (Mean = 15.01, SD = 8.42). Analysis of institution shows that 25 (6.3%) of the respondents work in Adeoyo Memorial Specialist Hospital, 31 (7.8%) work in Adeoyo Yemetu Hospital, 22 (5.5%) work in Jericho Nursing Home, 36 (9.1%) work in Jericho Specialist Hospital and 283 (71.3%) work in University College Hospital, Ibadan. Marital status result shows that 48 (12.1%) of the respondents were single, 330 (83.1%) of the respondents were married, and 19 (4.8%) of the respondents were divorced. The frequency analysis of their area of specialization shows that 148 (37.3%) were Doctors, 41 (10.3%) were Pharmacist, 104 (26.2%) were Nurse, 25 (6.3%) were Technician, and 79 (19.9%) were Administrator.

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Table 4.1.2: Summary of Pearson correlation among workplace happiness, psychological climate, and organisational commitment

Variables	1	2	3	4	5	6	7	8	9	10	11	Mean	SD
1. Engagement	-											11.9	3.1
2. Satisfaction	-.003	-										9.9	1.5
3. Management support	.472*	-	-									11.6	5.5
	*	.117*											
4. Role clarity	.358*	.140*	.388*	-								9.0	4.0
	*	*	*										
5. Contribution	.061	.026	.397*	.254**	-							13.3	4.0
			*										
6. Recognition	.375*	-.030	.205*	.344**	.122*	-						7.2	3.7
	*		*										
7. Self-expression	.317*	-.086	.219*	-	-	.378**	-					7.6	4.0
	*		*	.173**	.131**								
8. Challenge	-	.171*	-.053	.164**	.268**	-	-	-				8.7	2.2
	.316*	*				.338**	.579**						
	*												
9. Affective commitment	.194*	.019	.295*	.537**	.061	.220**	-.088	.188*	-			23.9	6.3
	*		*					*					
10. Continuance commitment	.013	-.033	.242*	.149**	-.044	.029	.053	-.067	.641*	-		24.1	6.7
			*						*				
11. Normative commitment	.414*	-.083	.521*	.120*	.271**	-.104*	.081	.006	-.038	.000	-	25.1	5.56
	*		*									4	
12. Org. commitment	.279*	-.043	.493*	.391**	.123*	.078	.019	.060	.805*	.832*	.409*	73.1	12.9
	*		*						*	*	*	5	9

** . Correlation is significant at the 0.01 level (2-tailed).

* . Correlation is significant at the 0.05 level (2-tailed).

The results in Table 4.3.1 shows that work engagement has a significant positive relationship with affective organisational commitment ($r = .19, P < .01$); normative organisational commitment ($r = .41, P < .01$); overall organisational commitment ($r = .28, P < .01$). Supportive management has significant positive relationship with affective organisational commitment ($r = .30, P < .01$); continuance organisational commitment ($r = .24, P < .01$); normative organisational commitment ($r = .52, P < .01$); overall organisational commitment ($r = .49, P < .01$). Role clarity has significant positive relationship with affective organisational commitment ($r = .54, P < .01$); continuance organisational commitment ($r = .15, P < .01$); normative organisational commitment ($r = .12, P < .05$); overall organisational commitment ($r = .39, P < .01$). Contribution has significant positive relationship with normative organisational commitment ($r = .27, P < .01$); overall organisational commitment ($r = .12, P < .05$). Recognition has significant positive relationship with affective organisational commitment ($r = .22, P < .01$); and negative relationship with normative organisational commitment ($r = -.10, P < .05$).

However, there is no significant relationship between work satisfaction and affective, continuance, normative, and overall organisational commitment. And between work engagement and continuance organisational commitment. No relationship between recognition and continuance organisational commitment and overall organisational commitment. Sell-expression and affective, continuance, normative, and overall organisational commitment, and between challenge and affective, continuance, normative, and overall organisational commitment.

4.2 Test of Hypotheses

Hypothesis One: participants who report higher workplace happiness will express higher affective organisational commitment than those who report lower workplace happiness. T-test of independent sample was used to analyse it. The result is presented in Table 4.2.1.

Table 4.2.1: Summary of t-test for independent sample showing the difference between low and high work happiness on affective organisational commitment

Variable	N	\bar{x}	SD	df	t	p	d
Low workplace happiness	195	22.92	6.44				
				395	-2.993	< .01	-.30
High workplace happiness	202	24.81	6.13				

The results in Table 4.2.1 shows that there is significant difference between low workplace happiness ($\bar{x} = 22.92$) and high workplace happiness ($\bar{x} = 24.81$) on affective organisational commitment ($t(395) = -2.993, p < 0.01$). This means healthcare workers who have high workplace happiness exhibited higher affective organisational commitment than healthcare workers who have low workplace happiness. The effect size was calculated with Cohen's d, and this shows that the size of effect of workplace happiness on affective organisational commitment is moderate (effect size $d = -.30$).

Hypothesis Two: participants who report higher workplace happiness will express higher continuance organisational commitment than those who report lower workplace happiness. T-test of independent sample was used to analyse it. The result is presented in Table 4.2.2.

Table 4.2.2: Summary of t-test for independent sample showing the difference between low and high work happiness on continuance organisational commitment

Variable	N	\bar{x}	SD	df	t	p
Low workplace happiness	195	23.47	7.20	395	-1.898	.058
High workplace happiness	202	24.75	6.21			

The results in Table 4.2.2 shows that there is no significant difference between low workplace happiness ($\bar{x} = 23.47$) and high workplace happiness ($\bar{x} = 24.75$) on continuance organisational commitment ($t(395) = -1.898, p > 0.05$). This means healthcare workers who have high workplace happiness did not exhibit higher affective organisational commitment than healthcare workers who have low workplace happiness.

Hypothesis Three: participants who report higher workplace happiness will express higher normative organisational commitment than those who report lower workplace happiness. The result is presented in Table 4.2.3.

Table 4.2.3: Summary of t-test for independent sample showing the difference between low and high work happiness on normative organisational commitment

Variable	N	\bar{x}	SD	df	t	p	D
Low workplace happiness	195	24.40	5.46	395	-2.603	< .01	-.26
High workplace happiness	202	25.85	5.57				

The results in Table 4.2.3 shows that there is significant difference between low workplace happiness ($\bar{x} = 24.40$) and high workplace happiness ($\bar{x} = 25.85$) on normative organisational commitment ($t(395) = -2.603, p < 0.01$). This means healthcare workers who have high workplace happiness

exhibited higher normative organisational commitment than healthcare workers who have low workplace happiness. The effect size was calculated with Cohen's d, and this shows that the size of effect of workplace happiness on normative organisational commitment is moderate (effect size $d = .26$).

Hypothesis Four: participants who report higher workplace happiness will express higher organisational commitment than those who report lower workplace happiness. T-test of independent sample was used to analyse it. The result is presented in Table 4.2.4.

Table 4.2.4: Summary of t-test for independent sample showing the difference between low and high work happiness on organisational commitment

Variable	N	\bar{x}	SD	df	t	p
Low workplace happiness	195	69.99	14.36	395	-1.305	> .05
High workplace happiness	202	71.71	11.95			

The results in Table 4.2.4 shows that there is no significant difference between low workplace happiness ($\bar{x} = 69.99$) and high workplace happiness ($\bar{x} = 71.71$) on organisational commitment ($t(395) = -1.305, p > 0.05$). This means healthcare workers who have high workplace happiness did not exhibit higher organisational commitment than healthcare workers who have low workplace happiness.

Hypothesis Five: participant with a more positive perception of psychological climate will exhibit greater affective commitment compared to those with a less favourable perception. T-test of independent sample was used to analyse it. The result is presented in Table 4.2.5.

Table 4.2.5: Summary of t-test for independent sample showing the difference between low and high psychological climate on affective organisational commitment

Variable	N	\bar{x}	SD	df	t	p	D
Low psychological climate	220	21.78	6.64	395			
					-7.926	< .01	-.80
High psychological climate	177	26.50	4.84				

The results in Table 4.2.5 shows that there is significant difference between low psychological climate ($\bar{x} = 21.78$) and high psychological climate ($\bar{x} = 26.50$) on affective organisational commitment ($t(395) = -7.926, p < 0.01$). This means healthcare workers who have high psychological climate exhibited higher affective organisational commitment than healthcare workers who have low psychological climate. The effect size was calculated using Cohen's d, and this shows that the size of effect of psychological climate on affective organisational commitment is large (effect size $d = -.80$).

Hypothesis Six: participant with a more positive perception of psychological climate will exhibit greater continuance commitment compared to those with a less favourable perception. T-test of independent sample was used to analyse it. The result is presented in Table 4.2.6.

Table 4.2.6: Summary of t-test for independent sample showing the difference between low and high psychological climate on continuance organisational commitment

Variable	N	\bar{x}	SD	df	t	p	D
Low psychological climate	220	22.25	6.86	395	-6.503	.000	-.66
High psychological climate	177	26.46	5.81				

The results in Table 4.2.6 shows that there is significant difference between low psychological climate ($\bar{x} = 22.25$) and high psychological climate ($\bar{x} = 26.46$) on continuance organisational

commitment ($t(395) = -6.503, p < 0.01$). This means healthcare workers who have high psychological climate exhibited higher continuance organisational commitment than healthcare workers who have low psychological climate. The effect size was calculated using Cohen's d , and this shows that the size of effect of psychological climate on continuance organisational commitment is large (effect size $d = -.66$).

Hypothesis Seven: participant with a more positive perception of psychological climate will exhibit greater normative commitment compared to those with a less favourable perception. T-test of independent sample was used to analyse it. The result is presented in Table 4.2.7.

Table 4.2.7: Summary of t-test for independent sample showing the difference between low and high psychological climate on normative organisational commitment

Variable	N	\bar{x}	SD	df	t	p	D
Low Climate	220	23.13	4.453	395			
					-8.781	.000	-.89
High Climate	177	27.64	5.78				

The results in Table 4.2.7 shows that there is significant difference between low psychological climate ($\bar{x} = 23.13$) and high psychological climate ($\bar{x} = 27.64$) on normative organisational commitment ($t(395) = -8.781, p < .01$). This means healthcare workers who have high psychological climate exhibited higher normative organisational commitment than healthcare workers who have low psychological climate. The effect size was calculated using Cohen's d , and this shows that the size of effect of psychological climate on normative organisational commitment is large (effect size $d = -.89$).

Hypothesis Eight: participant with a more positive perception of psychological climate will exhibit greater organisational commitment compared to those with a less favourable perception. T-test of independent sample was used to analyse it. The result is presented in Table 4.2.8.

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Table 4.2.8: Summary of t-test for independent sample showing the difference between low and high psychological climate on organisational commitment

Variable	N	\bar{x}	SD	df	t	p	D
Low psychological climate	220	68.89	15.38	395			
					-3.365	< .01	-.34
High psychological climate	177	73.32	9.30				

The results in Table 4.2.8 shows that there is significant difference between low psychological climate ($\bar{x} = 68.89$) and high psychological climate ($\bar{x} = 73.32$) on organisational commitment ($t(395) = -3.365, p < .01$). This means healthcare workers who have high psychological climate exhibited higher organisational commitment than healthcare workers who have low psychological climate. The effect size was calculated using Cohen's d, and this shows that the size of effect of psychological climate on organisational commitment is moderate (effect size $d = -.34$).

Hypothesis Nine: There will be significant gender difference in organisational commitment among health workers. T-test of independent sample was used to analyse it. The result is presented in Table 4.2.9.

Table 4.2.9: Summary of t-test for independent sample showing the difference between male and female on organisational commitment

	Gender	N	\bar{x}	SD	df	t	p	d
Affective commitment	Male	176	23.44	6.33	393	-1.369	> .05	
	Female	219	24.32	6.32				
Continuance commitment	Male	176	23.70	6.74	393	-1.262	> .05	
	Female	219	24.56	6.68				
Normative commitment	Male	176	23.95	4.77	393	-3.893	< .01	-.39
	Female	219	26.11	5.97				
Org. commitment	Male	176	71.20	14.24	393	.317	> .05	
	Female	219	70.78	12.26				

The results in Table 4.2.9 shows that there is no significant difference between male healthcare workers ($\bar{x} = 23.44$) and female healthcare workers ($\bar{x} = 24.54$) on affective commitment ($t(395) = -1.37, p > 0.05$). This indicates that level of affective organisational commitment is the same for both male female healthcare workers.

There is no significant difference between male healthcare workers ($\bar{x} = 23.70$) and female healthcare workers ($\bar{x} = 24.56$) on continuance organisational commitment ($t(395) = -1.26, p > 0.05$). This indicates that level of continuance commitment is the same for both male and female healthcare workers.

Likewise, the overall organisational commitment result shows no significant difference between male healthcare workers ($\bar{x} = 71.20$) and female healthcare workers ($\bar{x} = 70.78$) on organisational commitment ($t(395) = .317, p > 0.05$). This indicates that level of organisational commitment is the same for both male and female healthcare workers.

However, the result shows significant difference between male healthcare workers ($\bar{x} = 23.95$) and female healthcare workers ($\bar{x} = 26.11$) on normative organisational commitment ($t(395) = -3.89, p < 0.01$). this mean that female healthcare workers were more committed than their male counterparts. The effect size was calculated using Cohen's d , and this shows that the size of effect of gender on organisational commitment is moderate (effect size $d = -.39$).

Hypothesis Ten: workplace happiness and psychological climate will jointly influence organisational commitment among health workers was analysed with multiple regression. The result is presented in Table 4.2.10.

Table 4.2.10: Summary of multiple regression analysis showing joint influence of workplace happiness and psychological climate on organisational commitment among health workers

Model	Source	β	T	p	R	R ²	R ²	F	P
1	Age	-.123	-.740	> .05	.159	.025		5.105	< .01
	Length of service	.272	1.637	> .05					
2	Age	-.172	-1.029	> .05					
	Length of service	.291	1.759	> .05	.197	.039	.013	3.946	< .01
	Happiness	-.088	-1.666	> .05					
	Climate	.118	2.126	< .05					

Age and length of service were included as covariates in the hierarchical multiple regression analysis. The results hierarchical multiple regression in Table 4.2.10 shows that in model one, age ($\beta = -.123$, $p > .05$) and length of service ($\beta = .272$, $p > .05$) had no significant influence on organisational commitment. In the second model when workplace happiness and psychological climate were included, both workplace happiness ($\beta = -.088$; $p > .05$) and psychological climate ($\beta = .118$, $p < .05$) had significant joint influence on organisational commitment, $\Delta R^2 = .013$, $F(4,392) 3.946$, $p < .01$. Also, the workplace happiness and psychological climate accounted for 1.3% variance in organisational commitment among healthcare workers.

Hypothesis Eleven: There will be a significance difference in Commitment among different professionals of Healthcare Workers was analysed with one-way ANOVA. The result is presented in Table 4.2.11.

Table 4.2.11: Summary of One-Way ANOVA showing significant difference among area of specializations on organisational commitment

		SS	df	MS	F	p
Affective commitment	Between Groups	593.384	4	148.346	3.784	< .01
	Within Groups	15369.286	392	39.207		
	Total	15962.670	396			
Continuance commitment	Between Groups	1235.649	4	308.912	7.225	< .001
	Within Groups	16761.303	392	42.758		
	Total	17996.952	396			
Normative commitment	Between Groups	2805.424	4	701.356	29.198	< .001
	Within Groups	9415.956	392	24.020		
	Total	12221.380	396			
Org. commitment	Between Groups	8808.129	4	2202.032	14.345	< .001
	Within Groups	60173.060	392	153.503		
	Total	68981.189	396			

The result from table 4 shows that there is significant difference in area of specializations on affective organisational commitment of participants $F(4,392) = 3.79$, $p < .01$; continuance commitment of participants $F(4,392) = 7.23$, $p < .001$; normative commitment of participants $F(4,392) = 29.20$, $p < .001$; overall organisational commitment of participants $F(4,392) = 14.35$, $p < .001$;. This indicated that area of specializations significantly influences organisational commitment, hence the need to conduct post hoc analysis using Bonferroni test. The Bonferroni test was chosen to

compare all possible pairs of means. It is a useful tool that helps to identify which groups differ significantly from each other when the size of each group is not equal.

Table 4: Multiple comparisons showing a Bonferroni test of organisational commitment across area of specializations (Doctor, Pharmacist, Nurse, Technician, and Administrator)

	Groups	1	2	3	4	5	Mean	SD
Affective	1. Doctor		.82	2.75*	.84	-.34	24.68	7.03
	2. Pharmacist			1.93	.01	-1.15	23.85	7.50
	3. Nurse				-1.92	-3.08*	21.92	6.08
	4. Technician					-1.17	23.84	6.00
	5. Administrator					-	25.01	3.90
Continuance	1. Doctor		-0.82	1.19	-3.91	-3.30*	23.45	7.79
	2. Pharmacist			2.01	-3.09	-2.48	24.27	4.70
	3. Nurse				-5.10*	-4.49*	22.26	7.34
	4. Technician					-.61	27.36	4.50
	5. Administrator					-	26.75	3.45
Normative	1. Doctor		2.70*	2.50*	5.26*	7.14*	27.82	5.32
	2. Pharmacist			-0.20	2.56	4.44*	25.12	5.65
	3. Nurse				2.77	4.64*	25.33	4.80
	4. Technician					1.87	22.56	6.12
	5. Administrator					-	20.68	3.03
Org. commitment	1. Doctor		-2.70	1.44	-8.34*	-10.78*	68.30	14.28
	2. Pharmacist			4.14	-5.64	-8.06*	71.00	13.40
	3. Nurse				-9.78*	-12.22*	66.86	12.70
	4. Technician					-2.44	76.64	10.17
	5. Administrator					-	79.08	7.08

*. The mean difference is significant at the 0.01 level.

Specifically, the result of Bonferroni multiple comparisons test shows that participants who are Doctor ($\bar{x} = 24.68$) significantly reported higher affective commitment than Nurses ($\bar{x} = 23.85$) with mean difference of (2.75, $p < .01$). Participants who are Administrative ($\bar{x} = 25.01$) significantly reported higher affective commitment than Nurses ($\bar{x} = 23.85$) with mean difference of (-3.08, $p < .01$). However, there are no significant difference among other professionals on affective commitment.

The result of Bonferroni multiple comparisons test shows that participants who are Doctor ($\bar{x} = 24.68$) significantly reported lower continuance commitment than Administrator ($\bar{x} = 26.75$), with mean difference of (-3.30, $p < .01$). Nurses significantly reported lower continuance commitment than Technician ($\bar{x} = 27.36$) with mean difference of (-5.10, $p < .01$) and Administrator ($\bar{x} = 26.75$), with mean difference of (-4.49, $p < .01$). However, there are no significant difference among other professionals on continuance commitment.

The result of Bonferroni multiple comparisons test shows that participants who are Doctor ($\bar{x} = 27.82$) significantly reported higher normative commitment than Pharmacist ($\bar{x} = 25.12$), Nurses ($\bar{x} = 25.33$), Technician ($\bar{x} = 22.56$), and Administrator ($\bar{x} = 20.68$) with mean difference of (2.70, $p < .01$; 2.50, $p < .01$; 5.26, $p < .01$; 7.14, $p < .01$) respectively. Again, Pharmacist ($\bar{x} = 25.12$) and Nurses ($\bar{x} = 25.33$) significantly reported higher continuance commitment than Administrator ($\bar{x} = 20.68$) with mean difference of (4.44, $p < .01$) and (4.46, $p < .01$). However, there are no significant difference between Pharmacist and Nurse; between Pharmacist and Technician, between Technician and Administrator.

On the overall organisational commitment, the result of Bonferroni multiple comparisons test shows that participants who are Doctor ($\bar{x} = 68.30$) significantly reported lower organisational commitment than Technician ($\bar{x} = 76.64$), and Administrator ($\bar{x} = 79.08$) with mean difference of (-8.34, $p < .01$; -10.78, $p < .01$) respectively. Nurse ($\bar{x} = 66.86$) significantly reported lower organisational commitment than Technician ($\bar{x} = 76.64$) with mean difference of (-9.78, $p < .01$). Again, Pharmacist ($\bar{x} = 71$) and Nurses ($\bar{x} = 66.86$) significantly reported lower organisational commitment than Administrator ($\bar{x} = 79.08$) with mean difference of (8.06, $p < .01$) and (-12.22, $p < .01$). However, there are no significant difference between Doctor and Pharmacist, between Doctor and Nurse, between Pharmacist and Nurse; between Pharmacist and Technician, between Technician and Administrator on organisational commitment.

4.3 Discussion of Findings

This study investigated the influence of workplace happiness and psychological climate on organisational commitment among healthcare workers. Eleven hypotheses were tested; eight hypotheses were supported and three were not supported.

The findings of the first hypothesis suggests that workplace happiness plays a vital role in influencing affective organisational commitment among healthcare workers. Healthcare workers who were happier at work demonstrated greater affective organisational commitment. This result implies that workplace happiness plays an important role in enhancing employees' emotional attachment and identification with their organisation. Healthcare workers who experience greater happiness in their work environment are more likely to feel committed to their organisation, reflecting a deeper sense of loyalty and motivation to contribute positively.

Research have suggested a strong correlation between positive work environments and increased employee loyalty¹. Previous studies highlighted the significance of workplace happiness which encompasses job satisfaction and engagement in fostering employee commitment^{1, 2}. These studies indicated that happy and fulfilled employees are more likely to develop a strong emotional connection to their organisation, leading to increased affective commitment, aligning with finding of this study. Some authors emphasize the influence of emotional experiences on affective commitment³. Positive emotions, often arising from workplace happiness, contribute to a sense of belonging and a desire to remain with the organisation⁴. This aligns with the current findings, where healthcare workers experiencing higher levels of workplace happiness demonstrated greater emotional commitment to their organisations. Further evidence is provided by Babatunde and Magret in 2023, who argue that workplace happiness is often a result of job resources such as support, autonomy, and

professional growth opportunities⁵. These resources not only enhance employee well-being but also strengthen their organisational commitment by creating supportive and fulfilling work environments.

The moderate effect size found further suggested that workplace happiness has a meaningful, though not overwhelming, influence on affective organisational commitment, emphasizing its importance as a factor in fostering a committed and engaged workforce. Research within the healthcare sector also confirms these findings. A study found that nurses who experience job satisfaction due to empowering leadership and supportive teamwork demonstrate stronger emotional attachment to their organisation⁶. This is particularly important in healthcare, where employee engagement directly impacts patient care outcomes. Similarly, previous literature discovered a strong link between job satisfaction and emotional commitment to the organisation^{7, 8}. Employees who are content with their work environment are more likely to develop a deep emotional connection to their employer, highlighting the crucial role of workplace happiness in fostering a dedicated workforce.

The findings of the second hypothesis indicated that workplace happiness does not influence continuance commitment. This suggests that workplace happiness may not play a critical role in influencing this dimension of organisational commitment. Continuance organisational commitment is typically characterized by an employee's perceived need to remain with an organisation due to the costs associated with leaving, such as loss of financial benefits, job security, or limited alternative opportunities. Unlike affective commitment, which is driven by emotional attachment, continuance commitment is more calculative and pragmatic in nature. The findings imply that the emotional benefits derived from workplace happiness do not strongly impact the decision to stay in an organisation based on these calculative factors.

Previous studies have suggested that while characteristics like as job satisfaction and workplace happiness were strong predictors of affective commitment, their effect on continuation commitment was limited^{9 10}. Instead, continued commitment was more significantly associated with career alternatives, longevity, and individuals' perceived investments in their employment. Some authors discovered that continuous commitment is mostly driven by calculative considerations, such as a lack of other career prospects and fear of financial loss, rather than workplace satisfaction or good feelings¹¹. Their findings also demonstrated that external and structural variables, such as economic concerns or contractual duties, may have a greater effect on continued commitment than subjective well-being or emotional fulfilment.

Healthcare personnel may remain dedicated to their organisations because it is a practical requirement to keep their jobs, rather than because they are happy at work. Some authors found that work satisfaction was a major predictor of emotional commitment but had no effect on continuation commitment^{12, 13}. The study showed that healthcare professionals' continued commitment was mostly motivated by financial dependency and job security concerns, rather than workplace satisfaction. Kustiawan and colleagues reiterated that employees' decision to stay or leave an organisation often depends on a cost-benefit analysis¹⁴. While workplace factors like happiness and job satisfaction can influence emotional attachment (affective commitment), they have a weaker impact on the decision to stay based on economic considerations (continuance commitment).

The hypothesis third hypothesis suggests that workplace happiness influence normative commitment among healthcare workers. Healthcare workers who report high levels of workplace happiness demonstrate a greater sense of normative organisational commitment than their counterparts with lower workplace happiness. This indicates that workplace happiness positively influences the sense of moral obligation or duty to remain with the organisation. Empirical evidence

supports the idea that workplace happiness significantly influence employees' organisational commitment. Research by previous scholars describes job satisfaction and happiness at work as a positive emotional state derived from workplace experiences^{15, 16}. This satisfaction serves as a precursor to various forms of organisational commitment, including normative commitment.

Research suggests that employees who feel valued and fulfilled at work develop a stronger sense of duty and loyalty to their organisation, which can improve retention and organisational stability. Additionally, Ng and colleague found that workplace happiness and job satisfaction not only directly influence organisational commitment but also indirectly do so by fostering job involvement¹⁷. Employees who are more satisfied with their jobs tend to be more engaged, leading to stronger commitment to organisational goals and values¹⁸. Other studies by Taştan and colleagues, and Thompson and Bruk-Lee support this link, demonstrating that workplace happiness is a predictor of organisational commitment^{19, 20}. These findings underscore the importance of workplace policies that promote employee well-being to boost loyalty and reduce turnover. The study reinforces the crucial role of a positive work environment in fostering not only productivity but also a sense of ethical obligation to remain with the organisation.

Furthermore, Babatunde and Margret demonstrated an association between higher levels of happiness and increased normative commitment among employees. Employees who reported higher job satisfaction and overall happiness were more likely to express loyalty to their organisation²¹. Akgunduz and colleagues showed that happier employees are less likely to leave their organisations and more likely to engage in behaviors beneficial to the organisation, such as helping colleagues and promoting the organisation²².

The calculated effect size demonstrated a moderate influence, suggesting that while workplace happiness is an influential factor in fostering normative commitment, other variables may also play a role. The findings imply that when healthcare workers feel happy and fulfilled at work, they are more likely to experience a sense of loyalty and ethical responsibility to their organisation, potentially enhancing retention and overall organisational stability. However, an author suggests that when employees feel appreciated and satisfied at work, their loyalty to the organisation grows, perhaps leading to higher retention rates²³. According to Stamouli and Gerbeth in 2021, job satisfaction is highly correlated with several types of commitment among healthcare workers (affective, normative, and continuation)²⁴. According to the findings, improved job satisfaction leads to stronger loyalty and ethical duty to the organisation, which improves retention and stability.

The findings of the fourth hypothesis suggested that workplace happiness does not influence the overall organisational commitment among healthcare workers. This result implies that while workplace happiness might contribute to various aspects of employee experience, it does not necessarily translate into a universal increase in overall organisational commitment. Factors such as personal values, career goals, leadership styles, and broader organisational dynamics might moderate or dilute the direct influence of workplace happiness on organisational commitment. The finding of this study contradicts previous literature that suggested a significant positive effect of workplace happiness on organisational commitment, implying that when employees feel happy and fulfilled at work, they are more likely to develop a strong sense of loyalty and responsibility to their organisation^{25, 26}.

A paper also showed that job satisfaction directly contributes to employee happiness, which, in turn, strengthens organisational commitment²⁷. This suggests that organisations can create happier and more engaged employees by focusing on improving job satisfaction. However, it's important to

consider that organisational commitment is influenced by multiple factors beyond workplace happiness. Job security, opportunities for career advancement, and alignment with organisational values can also play significant roles in shaping an employee's overall commitment to their workplace²⁸.

The findings of the fifth hypothesis suggested that perception of the psychological climate influences affective organisational commitment. Healthcare workers who perceived the psychological climate more positively demonstrated markedly higher levels of affective organisational commitment. The significant relationship between psychological climate and affective organisational commitment observed in this hypothesis aligns with the findings of Ekmekci and colleague in 2021 who discovered that psychological climate is important, and its influence on affective organisational commitment can be mediated by other factors such as individual resilience and workload balance²⁹. Their study suggested that even in positive environments, excessive workload or a lack of personal coping mechanisms could weaken the relationship between psychological climate and affective commitment.

Similarly, a study reported that psychological climate had a less pronounced effect on employee performance in organisations with structural and resource-based challenges, such as understaffing or inadequate compensation, which undermined employees' emotional connection to the workplace³⁰. This finding underscores the critical role of the psychological climate in fostering employees' emotional attachment and identification with their organisation.

When these perceptions are positive, employees are more likely to feel valued and emotionally connected to their workplace, enhancing their affective commitment. The large effect size further highlighted the substantial influence of psychological climate on affective commitment,

suggesting that it is a key driver of employees' emotional engagement. This finding is consistent with previous studies emphasising the necessity of providing a friendly and inclusive work environment to increase emotional organisational commitment. Some authors claimed that telecommunications employees who see their work environment as helpful are more likely to form an emotional link with their organisation, resulting in enhanced organisational loyalty and lower turnover intentions³¹. Similarly, Ojokuku and colleagues emphasised that such beliefs generate a sense of belonging and connection with organisational goals, hence increasing workers' desire to participate emotionally in their job³².

The findings of the sixth hypothesis suggested that psychological climate influences continuance commitment among healthcare workers. Healthcare workers who reported a more positive psychological climate exhibited higher levels of continuance commitment than those who perceived their psychological climate more negatively. The effect size, calculated using Cohen's *d*, indicates a large effect, meaning the psychological climate had a substantial impact on the level of continuance commitment. A more positive psychological climate can increase the perceived "cost" of leaving an organisation, as employees in such an environment may feel more valued and integrated. The findings suggest that in healthcare settings, fostering a positive psychological climate can enhance both affective commitment (emotional attachment) and continuance commitment (practical or instrumental attachment). In organisations with a supportive and positive climate, employees may feel more inclined to remain due to perceived benefits like job security, recognition, and a sense of belonging.

An author revealed that employees in organisations with supportive and safe work environments reported stronger emotional attachment to their organisation³³. However, when

considering continuance commitment specifically, the study found weaker correlations. This suggests that while a positive psychological climate influences affective commitment, it may not be as impactful on continuance commitment, especially when the perceived costs of leaving an organisation were low. Meanwhile, Astakoni and colleagues stated that a positive psychological climate, characterized by supportive leadership and a healthy work environment, significantly enhances organisational commitment³⁴. When healthcare workers perceive their workplace positively, they are more likely to exhibit higher levels of commitment, including continuance commitment.

Similarly, a study revealed that while a positive psychological climate did influence continuance commitment, the strength of the relationship was moderate³⁵. Employees who perceived their work environment as supportive and fair were more likely to stay in their jobs for financial or social reasons, thus enhancing continuance commitment. However, the study also found that other factors, such as career development opportunities and job security, played a more significant role in driving continuance commitment. Lee and colleagues noted that while a positive psychological climate generally supports higher levels of commitment, factors such as stress and burnout can negatively impact this relationship³⁶. Factors such as transformational leadership, communication, and professional growth opportunities within the workplace contribute to creating a positive psychological climate, which in turn fosters greater employee loyalty and ethical responsibility.

The finding of the seventh hypothesis suggested that psychological climate influences normative organisational commitment. Specifically, healthcare workers who perceived the psychological climate more positively demonstrated higher levels of normative organisational commitment. A positive psychological climate, which is shaped by factors like organisational fairness, interpersonal support, and clear communication, fosters a sense of loyalty and moral

responsibility among employees. This result suggests that when employees perceive the work environment as supportive and fair, they are more likely to feel a strong duty to remain with the organisation, contributing to greater normative commitment. The large effect size further emphasizes the strong influence of psychological climate on normative commitment. This suggests that the psychological climate has a powerful impact on employees' moral obligations to their organisation.

These findings are consistent with the findings of Moloney and colleagues in 2020, who found that a supportive organisational climate, with strong communication and appreciation of efforts, fosters a feeling of duty among workers, increasing their likelihood of staying with the organisation³⁷. Some authors discovered that a good psychological environment, in which employees feel appreciated and encouraged, is substantially connected with greater levels of organisational commitment, especially normative commitment^{38, 39}. Their findings confirm the assumption that employees who regard their organisational environment as good have a larger moral commitment to stay with the organisation.

Some authors found that a positive psychological climate significantly boosted employees' emotional attachment, sense of duty, and practical commitment to the organisation³⁸. They concluded that when employees perceive a supportive work environment, they tend to be more committed overall. Similarly, Eisenberger and colleagues that employees' perception of the psychological climate, particularly in terms of support and fairness, positively influenced their sense of duty to the organisation⁴⁰. When employees feel valued, they are more likely to exhibit a stronger sense of obligation to their organisation. Mohd Rasdi and Tangaraja in 2022 observed that while a supportive environment significantly enhanced job satisfaction and emotional attachment, its influence on a sense of duty was less predictable⁴¹. They suggested that external factors, including economic

conditions and individual job satisfaction, might have a stronger impact on shaping employees' commitment levels compared to the organisational climate alone.

The findings of the eighth hypothesis suggests that psychological climate influences overall organisational commitment among healthcare workers. Specifically, healthcare workers who perceived the psychological climate more positively demonstrated higher levels of organisational commitment. The findings suggest that healthcare workers who perceive their work environment as more positive are more likely to feel a strong connection to their organisation and display higher organisational commitment. The moderate effect size indicates that the impact of psychological climate on organisational commitment, while significant, is of moderate strength. This suggests that while psychological climate does influence organisational commitment, other factors may also play a role in determining how committed employees feel toward their organisation. Nevertheless, the significant difference between the groups implies that improving the psychological climate in healthcare settings could lead to stronger organisational commitment, which can have positive implications for employee retention, engagement, and overall organisational performance.

Studies support the concept that a healthy psychological environment increases organisational commitment. Oluwatayo and Adetoro in 2020 observed that in telecommunications firms, a positive work environment is strongly associated with better levels of employee engagement⁴². This positive relationship is based on the idea that workers flourish in work conditions where they feel psychologically safe and appreciated, resulting in a stronger emotional commitment to the organisation. Research by some authors indicated that there was a strong link between psychological climate factors like trust, innovation, support, recognition, and fairness and teachers' organisational commitment, including commitment to their school and occupation^{43,44}. Trust and inventiveness were very powerful indicators of commitment to teaching job .

The findings of the ninth hypothesis suggests gender differences in organisational commitment among healthcare workers revealed a nuance picture. It implies that both genders exhibit similar emotional attachment to their organisation, indicating that gender may not be a determining factor in fostering an emotional bond with the workplace. This study is in line with a previous study that found that affective commitment is largely influenced by job satisfaction and organisational support, rather than gender, indicating that both male and female employees are equally capable of developing a strong emotional attachment to their organisation if the work environment is supportive⁴⁵. A paper found that affective commitment positively correlates with work satisfaction for all genders, highlighting the fact that an individual's impression of support has a greater influence on affective commitment than gender⁴⁶. Furthermore, another author discovered that affective commitment and psychological safety are mediated by job satisfaction for both genders, confirming that psychological safety encourages comparable degrees of emotional connection in all workers⁴⁷.

Similarly, the results suggest that factors influencing retention decisions are likely consistent across genders, which could include job security, benefits, and personal commitments that transcend gender differences. In contrast, a significant difference was identified in normative commitment, with female healthcare workers demonstrating a higher level of commitment compared to their male counterparts. The effect size indicates that male healthcare workers exhibit normative commitment that is lower by a noticeable margin. This finding may reflect underlying social or cultural expectations that influence women to feel a stronger sense of obligation or loyalty to their workplace.

The overall organisational commitment results show no significant difference between male and female healthcare workers. This finding indicates that despite the variations observed in normative commitment, when considering all dimensions of organisational commitment, both

genders exhibit a comparable level of overall commitment to their organisation. It implies that while specific aspects of commitment may differ, the collective impact on organisational allegiance remains consistent across genders. Some studies found substantial differences in emotional and normative commitment, but gender had no discernible effect on continuance commitment^{48, 49}. These results imply that overall commitment levels are similar even if certain commitment aspects vary by gender.

The study further pointed to how job characteristics and family obligations can impact commitment, suggesting that despite more career advancement barriers, women's commitment levels align closely with men's when factors like job satisfaction are accounted for. Furthermore, the relationships between organisational culture and thriving at work among health workers highlights that a supportive work culture enhances affective commitment equally among male and female nurses, suggesting no gender-based difference in emotional attachment when organisational culture is positive.

Hypothesis ten which stated that workplace happiness and psychological climate will jointly influence organisational commitment among healthcare workers. The results from the hierarchical multiple regression analysis provide insight into the joint influence of workplace happiness and psychological climate on organisational commitment among healthcare workers. In the first model, age and length of service were included as covariates, but neither variable showed a significant influence on organisational commitment, suggesting that demographic factors such as age and work experience do not play a substantial role in determining healthcare workers' organisational commitment in this sample.

However, Al-Haroon, and Al-Qahtani, in 2020 found discovered that the majority of nurses demonstrated a moderate level of organisational commitment, with the highest levels of commitment observed in the continuous commitment subscale⁵⁰. The findings suggest that organisational commitment is positively influenced by socio-demographic variables such as age and nationality, with age emerging as the only significant predictor of overall organisational commitment. This indicates that older nurses may exhibit a stronger commitment to their organisation compared to younger nurses.

In the second model, when workplace happiness and psychological climate were added, workplace happiness did not show a significant influence on organisational commitment. However, psychological climate was found to have a significant positive effect, with a modest contribution to organisational commitment. The inclusion of workplace happiness and psychological climate together accounted for 1.3% of the variance in organisational commitment, with psychological climate emerging as a more significant predictor. The small amount of variance explained (1.3%) indicates that while workplace happiness and psychological climate are important factors, other variables not included in this analysis may also significantly contribute to organisational commitment. These findings suggest that while workplace happiness might not directly influence organisational commitment, the psychological climate in the workplace—referring to the overall perceptions and feelings about the work environment—plays a more significant role in fostering a sense of commitment among healthcare workers.

This study find empirical support from the study outcome of highlighting that supportive management and work engagement significantly enhance normative commitment. Fantahun and colleague in 2023 claimed that normative commitment is strengthened when management shows support because it creates a sense of duty and loyalty⁵¹. Supportive management also fosters job

engagement, which enhances workers' sense of accountability to the company and strengthens their dedication. Expanding on this, Rodríguez-Fernández and colleague in 2021 provide a model in which normative commitment is enhanced by supportive management practices, which raises engagement levels and makes workers feel more devoted to their company⁵².

Nevertheless, rather than internal motivators like work engagement, de Las Heras-Rosas and colleagues found that external variables like employment stability and perks had a greater influence on continuing commitment⁵³. This implies that employees' perceptions of the costs of leaving their organisation are not always altered by high engagement levels alone, or even when combined with supportive management. Similar findings were made by Arage and colleague in 2022, who found that whereas supportive management and work engagement increase organisational commitment, they had no effect on emotional or continuation commitment⁵⁴. Rather than being impacted by the combined effects of managerial support and employee engagement, these commitment characteristics seem to be more driven by individual perspectives and outside circumstances.

The findings of the eleventh hypothesis suggests that organisational commitment differs across specializations area of specialization on various dimensions of organisational commitment among participants. This implies that individuals' specialized fields may shape their level of attachment, willingness to stay, and sense of obligation within the organisation. Given this influence of specialization on commitment levels, a post hoc analysis was conducted using the Bonferroni test. This result discovered that doctors showed higher levels of affective commitment compared to nurses, suggesting that doctors may experience a stronger emotional attachment to their organisation. Similarly, administrative staff reported higher affective commitment than nurses, indicating that their role might foster a deeper sense of loyalty. However, no significant differences in affective commitment were observed among other professional groups.

To support the above findings, a paper revealed that education, job position, and the area of service were significantly associated with organisational commitment among healthcare workers⁵⁵. However, none of the healthcare workers had a low organisational commitment. A significant proportion of healthcare workers demonstrated high organisational commitment, while a smaller portion showed moderate organisational commitment. Similarly, most healthcare workers exhibited high social commitment, with a smaller percentage showing moderate social commitment. Also, some authors indicated that work engagement strongly correlates with job performance among doctors, but this relationship is weaker for administrative staff and nurses⁵⁶. Doctors showed higher engagement but lower job performance compared to both administrative staff and nurses, who showed the opposite trend. Engagement levels increased with age, but not necessarily with experience. These results suggest that while work engagement influences organisational commitment, its impact varies across professional roles.

In terms of continuance commitment, doctors reported lower levels than administrators, implying that administrators may feel a stronger obligation to remain with the organisation due to potential costs associated with leaving. Additionally, nurses reported lower continuance commitment compared to both technicians and administrators, suggesting that nurses may feel less compelled to stay due to external pressures or benefits. No other significant differences were found between other professional groups in this area. Regarding normative commitment, doctors demonstrated significantly higher levels than pharmacists, nurses, technicians, and administrators, indicating that doctors may experience a stronger sense of moral obligation to their organisation.

Pharmacists and nurses also showed higher normative commitment compared to administrators, suggesting that they may feel a greater responsibility to fulfil their roles, although no

significant differences were observed between pharmacists and nurses, pharmacists and technicians, or between technicians and administrators⁵⁷. In contrast to the result, a paper discovered that hospital pharmacists, in particular, reported higher turnover intentions compared to their community counterparts, with turnover intentions in both settings increasing over time in both European and Asian countries. This trend suggests a potential link between turnover intention and organisational commitment. Specifically, lower levels of organisational commitment drive higher turnover intention, as pharmacists who feel less attached or committed to their organisation are more likely to consider leaving.

A study revealed that doctors showed better organisational commitment than nurses⁵⁸. However, doctors rated the quality of patient care higher than nurses. For nurses, practices such as ‘training’, ‘transformational leadership’, and ‘information sharing’ were more strongly associated with higher ratings of quality patient care. In contrast, doctors showed a stronger association between the practice of ‘teams’ and the quality of patient care, suggesting that teamwork was a more significant factor for doctors in enhancing patient care quality. In contrast, a study demonstrated that nurses exhibit high levels of both affective and continuance commitment to the hospital, coupled with a reduced intention to leave⁵⁹. A significant positive association was found between the intention to leave and individual/structural factors, indicating that various elements influence nurses' decisions to stay or leave.

For overall organisational commitment, doctors reported lower commitment levels than both technicians and administrators. Similarly, nurses displayed lower overall commitment than technicians, and both pharmacists and nurses showed lower commitment than administrators. This implies that technicians and administrators may feel more invested in their organisation as a whole,

while doctors and nurses might feel less so. However, no significant differences were found in overall commitment between doctors and pharmacists, doctors and nurses, or between other combinations of professional groups.

Some authors discovered that physicians generally exhibited lower levels of organisational commitment compared to nurses and other healthcare workers, regardless of their country, personal characteristics, job type, or place of employment; work-related variables, particularly age and job satisfaction, were significant factors influencing doctors' organisational commitment; and the factors shaping organisational commitment were consistent across doctors working in various healthcare settings, with similarities found in their responses to work-related practices and overall organisational commitment⁶⁰. Furthermore, in contrast, a paper discovered that a significant majority of nurses demonstrated a strong intention to remain in the profession⁶¹. Organisational commitment and low levels of burnout were identified as key predictors influencing nurses' decision to stay in nursing throughout their career lifespan.

However, some authors also discovered that the majority of nurses demonstrated a moderate level of organisational commitment, with the highest levels of commitment observed in the continuous commitment subscale⁶². The findings suggest that organisational commitment is positively influenced by socio-demographic variables such as age and nationality, with age emerging as the only significant predictor of overall organisational commitment. This indicates that older nurses may exhibit a stronger commitment to their organisation compared to younger nurses.

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Chapter Five

Conclusion

5.1 Summary of Findings

This study explored the influence of workplace happiness and psychological climate on organisational commitment among healthcare workers, testing eleven hypotheses.

The first hypothesis examined whether participants with higher workplace happiness would exhibit greater affective organisational commitment compared to those with lower workplace happiness. The analysis revealed a significant difference between the two groups, suggesting that healthcare workers who report higher workplace happiness demonstrate a stronger emotional attachment to their organisation. This finding is consistent with the idea that a positive emotional state at work enhances employees' connection to their workplace. In contrast, the second hypothesis explored if participants who report higher workplace happiness will express higher continuance organisational commitment than those who report lower workplace happiness. The findings showed no significant difference between employees with low and high workplace happiness, indicating that workplace happiness does not significantly influence employees' commitment to stay with the organisation due to perceived costs or benefits. This suggests that, while happiness can affect emotional attachment, it may not be a strong enough factor to influence employees' decisions to remain with the organisation when considering practical reasons.

The third hypothesis focused on whether higher workplace happiness would lead to greater normative organisational commitment. The analysis found a significant difference, with employees reporting higher workplace happiness demonstrating stronger commitment to adhere

to the norms and values of the organisation. This implies that workplace happiness contributes to a sense of duty and responsibility to the organisation. However, the effect was moderate, implying that other factors might also play a role in shaping employees' sense of duty. Regarding the fourth hypothesis, the study tested whether participants who report higher workplace happiness will express higher organisational commitment than those who report lower workplace happiness. The results indicated no significant difference between employees with low and high workplace happiness on overall organisational commitment. This finding suggests that while happiness at work may affect specific types of commitment, it does not directly influence employees' overall commitment to their organisation.

Moving to the fifth hypothesis, the study examined whether participant with a more positive perception of psychological climate will exhibit greater affective commitment compared to those with a less favourable perception. The results indicated a significant difference, with employees who perceived a more positive psychological climate showing stronger emotional attachment to their organisation. This suggests that the work environment plays a crucial role in fostering emotional bonds with the organisation, highlighting the importance of a supportive and positive workplace culture in enhancing affective commitment. Similarly, the sixth hypothesis explored whether psychological climate would affect continuance organisational commitment. The analysis found a significant difference, indicating that employees who experienced a more positive psychological climate were more likely to stay with the organisation for practical reasons. This suggests that a supportive psychological climate provides the necessary conditions for employees to feel secure and committed to staying within the organisation.

The seventh hypothesis assessed whether participant with a more positive perception of psychological climate will exhibit greater normative commitment compared to those with a less favourable perception. The results revealed a significant difference, with employees who perceived a better psychological climate displaying stronger normative commitment. This finding highlighted that a positive work environment can foster a sense of responsibility to uphold the organisation's values and norms. In line with the eighth hypothesis, the study examined whether participant with a more positive perception of psychological climate will exhibit greater organisational commitment compared to those with a less favourable perception. The results revealed a significant difference, with employees who perceived a better psychological climate reporting higher overall organisational commitment. This underscores the broader impact of psychological climate on employees' general attachment to the organisation. A positive psychological climate contributes not only to emotional and normative commitment but also to overall organisational loyalty.

In terms of gender differences, the ninth hypothesis tested whether there would be a significant gender difference in organisational commitment between male and female healthcare workers. The findings showed no significant difference in affective and continuance commitment between genders. However, a significant difference was observed in normative commitment, with female workers demonstrating higher normative commitment than male workers. This suggests that gender may play a role in how employees internalize their duty to the organisation, with women potentially placing more importance on aligning with organisational norms and values. The tenth hypothesis tested the joint influence of workplace happiness and psychological climate on organisational commitment. The analysis indicated a significant joint influence, suggesting that both factors together contribute to employees' overall organisational commitment.

While individual predictors such as age and length of service did not have a statistically significant impact, there was a joint significant influence of workplace happiness and psychological climate on organisational commitment. This finding suggests that a positive workplace environment and happiness are both essential factors in fostering strong organisational commitment.

The eleventh hypothesis investigated differences in organisational commitment among various professional groups within healthcare. The study reveals that participants' areas of specialization significantly impact their organisational commitment, including affective, continuance, and normative dimensions, as well as their overall commitment. Specifically, professional roles influence how participants experience organisational attachment, a sense of responsibility, and willingness to stay. Doctors exhibited higher affective commitment than nurses, suggesting stronger emotional ties to their organisation, while administrative staff also showed a heightened affective commitment compared to nurses. In terms of continuance commitment, administrators reported higher levels than doctors, potentially due to the perceived costs of leaving, while nurses demonstrated lower continuance commitment compared to both technicians and administrators. For normative commitment, doctors showed greater levels than pharmacists, nurses, technicians, and administrators, indicating a strong sense of obligation in their roles. However, nurses and pharmacists displayed higher normative commitment than administrators. Lastly, overall organisational commitment was lower among doctors and nurses compared to technicians and administrators, who appeared more invested in the organisation as a whole.

5.2 Conclusion

In conclusion, this study highlights the significant roles that workplace happiness and psychological climate play in shaping the organisational commitment of healthcare workers. The findings support the notion that a positive work environment and emotional well-being are crucial factors in fostering affective and normative commitment. Specifically, employees who report higher workplace happiness tend to develop stronger emotional attachments to their organisations, although this did not translate into a significant influence on continuance commitment or overall organisational commitment. This suggests that while workplace happiness influences emotional and normative ties to the organisation, it may not be as influential in decisions based on practical reasons, such as the perceived costs of leaving.

Psychological climate, on the other hand, emerged as a more powerful factor in influencing all types of organisational commitment. Employees who perceive a more positive work environment show stronger affective, normative, and continuance commitment. This underscores the importance of fostering a supportive and inclusive organisational culture, which not only strengthens emotional ties but also encourages employees to stay with the organisation due to a sense of duty and security. The findings show the importance of creating and maintaining a positive work environment that can enhance not only the emotional attachment of employees but also their sense of security and obligation to the organisation.

Additionally, the study found notable gender differences in normative commitment, with female healthcare workers demonstrating a stronger sense of obligation to their organisations than their male counterparts. This suggests that gender may influence how employees internalize their roles and responsibilities within the organisation, with women potentially placing greater emphasis on adhering to organisational values and norms. The study also revealed that the joint

influence of workplace happiness and psychological climate significantly contributed to organisational commitment, further emphasizing the importance of both individual and environmental factors in shaping employees' attachment to their organisations. This finding suggests that healthcare organisations should focus on both improving workplace happiness and cultivating a positive psychological climate to foster stronger commitment across their workforce.

Finally, the analysis of organisational commitment across various professional groups within healthcare revealed differences in how different roles relate to the organisation. Doctors exhibited stronger affective commitment compared to nurses, while administrative staff showed higher levels of continuance commitment. Interestingly, normative commitment was highest among doctors, indicating a strong sense of moral obligation, while nurses and pharmacists demonstrated higher normative commitment than administrators. These differences highlight the diverse ways in which professional roles and responsibilities influence employees' organisational commitment and suggest that tailored strategies may be needed to address the specific needs and motivations of different professional groups within healthcare.

5.3 Recommendations

Based on the findings of this study, several recommendations can be made to improve organisational commitment among healthcare workers, focusing on policy, academic initiatives, healthcare practices, and psychological approaches.

Policies should focus on improving the psychological climate by creating a work environment that addresses workers' needs for emotional support, safety, and job security. Healthcare institutions should work with government agencies to secure funding for workplace

enhancements and safety measures. Implementing policies that promote a positive psychological climate, including establishing clear communication channels, anti-harassment measures, and conflict resolution strategies, would help build a more resilient healthcare workforce. Additionally, given the security challenges in Nigeria, healthcare organisations must implement workplace safety protocols, including personal security measures for healthcare workers, especially in volatile regions. Workers need to feel secure in their work environment to develop strong organisational commitment. Therefore, policies aimed at improving security, such as providing healthcare staff with protection against external threats (e.g., robbery or violence), should be prioritized.

Universities and training institutions can offer courses and workshops on topics such as leadership in healthcare, conflict resolution, and strategies for improving workplace happiness, with a focus on how these factors can enhance organisational commitment in Nigerian settings. Given the significance of these factors in the Nigerian healthcare context, incorporating case studies on Nigerian healthcare challenges, including those related to security and organisational culture, would allow students to better understand the unique pressures healthcare workers face in the country. Furthermore, academic research on organisational commitment in Nigerian healthcare settings is critical, particularly studies that examine the intersection of security issues and emotional attachment to the organisation. Such studies can provide empirical data that will inform both policy and practice.

Organisations should implement comprehensive employee well-being programs that address both mental and physical health needs. Given the impact of workplace happiness on organisational commitment, healthcare institutions in Nigeria must provide staff with regular

access to mental health services, counseling, and support groups to help them manage stress, especially in high-stress environments such as emergency rooms or rural clinics. Security measures should also be enhanced by providing physical protection, secure transportation, and emergency response protocols to safeguard healthcare workers against external threats. Furthermore, healthcare facilities must prioritize training programs for leaders and managers to promote a positive work environment that recognizes the unique challenges faced by Nigerian healthcare workers, such as dealing with underfunding, limited resources, and security issues. These leaders must also be trained to recognize the signs of burnout and psychological distress, which can impact commitment levels.

It is important that healthcare organisations provide comprehensive psychological support programs tailored to the Nigerian context. This includes counseling services, stress management workshops, and resilience training to help workers cope with the pressures of their roles. Since workplace happiness directly influences affective organisational commitment, Nigerian healthcare organisations should work toward fostering environments that are emotionally supportive. This can be done through regular feedback, employee recognition programs, and team-building activities that enhance social connections and promote a sense of belonging. Given the findings on gender differences in organisational commitment, gender-sensitive programs should be introduced to ensure that both male and female healthcare workers are equally supported in their professional roles. Female healthcare workers, in particular, should be encouraged to share their experiences and challenges within the organisation, helping to build a more inclusive workplace culture.

Many healthcare workers in the country are at risk of violence or threats due to poor infrastructure, economic instability, and sometimes hostile working environments. To mitigate these risks, healthcare organisations must prioritize security measures, including the installation of security systems, provision of safety training for staff, and collaboration with local security forces to ensure the protection of healthcare workers, particularly in regions prone to violence. Additionally, providing secure housing or transportation options for healthcare workers in remote or insecure areas can significantly reduce their stress and increase their commitment to the organisation. As part of their security policies, healthcare institutions should also ensure that workers have access to emergency response teams/intervention team and that staff are trained to respond to security threats or incidents effectively.

Future studies should focus on the role of security and its direct impact on the workplace happiness and commitment of healthcare workers. Researchers should also investigate the cultural, regional, and institutional factors that may shape organisational commitment across different healthcare sectors in Nigeria. It is essential to study how local and national economic conditions, as well as the political climate, influence healthcare workers' emotional attachment to their organisations and their decisions to stay. Additionally, research should focus on how psychological climate and organisational happiness can be tailored to the Nigerian context, considering the socio-cultural challenges specific to the region.

5.4 Contribution to Knowledge

This study enhances the understanding of factors influencing organisational commitment by identifying workplace happiness and psychological climate as pivotal contributors within the healthcare sector. It provides empirical evidence that healthcare workers' levels of happiness at

work and their perceptions of the psychological climate are directly linked to their organisational commitment, underscoring the importance of fostering a supportive and positive work environment to enhance employee retention and engagement. The findings expand the literature by showing that healthcare workers' commitment is not only influenced by traditional workplace factors but also by unique aspects of workplace happiness and psychological climate, including role clarity, managerial support, and work engagement. These findings offer actionable insights for healthcare administrators to prioritize employee well-being initiatives as a strategy for bolstering commitment levels.

By focusing on psychological climate, this study contributes a nuanced perspective on how healthcare workers' perceptions of their organisational environment—such as feelings of safety, trust, and autonomy—can serve as crucial predictors of organisational commitment. This adds a new layer to organisational psychology research, suggesting that psychological climate interventions may improve commitment, even in high-stress settings typical of healthcare. The study demonstrates that workplace happiness, particularly through the dimensions of work engagement and job satisfaction, plays a significant role in enhancing organisational commitment. This finding reinforces theories that link happiness and productivity, emphasizing that well-being is integral to employee retention and performance. Practical implications suggest that healthcare organisations should embed happiness-centric practices into their culture to support sustainable commitment.

This study opens avenues for future research on sector-specific strategies to enhance commitment and well-being in healthcare. It encourages further exploration of how psychological climate and workplace happiness can be strategically cultivated to address unique

workforce challenges, thereby contributing to a healthier, more committed, and effective healthcare workforce.

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5.5 Suggested Areas for Further Research

1. Conducting longitudinal studies could provide insights into how workplace happiness and psychological climate impact organisational commitment over time. Such studies could help determine if interventions to improve these factors have sustained effects on commitment and other organisational outcomes.
2. Future research could explore how psychological climate and workplace happiness affect organisational commitment across different cultural or regional contexts. Since healthcare environments can vary widely by culture, these studies could help reveal unique cultural dynamics that may influence the effectiveness of organisational strategies aimed at enhancing commitment.
3. While this study focused on organisational commitment, additional research could explore how psychological climate influences other important outcomes, such as job performance, absenteeism, and employee turnover rates, particularly in healthcare.
4. Experimental research could investigate the effectiveness of specific interventions designed to improve workplace happiness and psychological climate, such as structured employee engagement programs, mental health initiatives, and management training. Studies could assess which interventions yield the greatest improvement in organisational commitment among healthcare workers.
5. Investigating how individual personality traits, such as resilience, emotional stability, and conscientiousness, interact with workplace happiness and psychological climate could

add depth to understanding commitment. This would allow organisations to create tailored interventions that cater to diverse personality profiles within healthcare teams.

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Appendix A: Questionnaire

A Questionnaire on THE RELATIONSHIP BETWEEN WORKPLACE HAPPINESS, ORGANISATIONAL CLIMATE AND ORGANISATIONAL COMMITMENT AMONG HEALTHCARE WORKERS IN THE IBADAN METROPOLIS, OYO STATE, NIGERIA.

Section A: Socio-Demographic Information of the Respondents

1. Gender: (a) Male () (b) Female () (c) Other, please specify _____
2. Age as at last birthday: _____
3. Marital Status: (a) Single () (b) Married () (c) Divorced () (d) Other, please specify _____
4. Area of Specialization: (a) Doctor () (b) Pharmacist () (c) Nurse ()
(d) Technician () (e) Administrator ()
5. Length of Service: _____

Section B: (*Workplace happiness*)

Rating: 1- Strongly Disagree (SD), 2 - Disagree (D), 3 - Undecided (U), 4 - Agree (A),

5 - Strongly Agree (SA)

S/n	Items	SD	D	U	A	SA
1	At my job, I feel strong and vigorous.					
2	I am enthusiastic about my job					
3	I get carried away when I am working.					
4	I am satisfied with the nature of the work I perform					
5	I am satisfied with the pay I receive for my job					
6	I am satisfied with the opportunities which exist in this organisation for advancement [promotion]					

Section C: (Organisational climate)

Rating: 1- Strongly Disagree (SD), 2 - Disagree (D), 3 - Undecided (U), 4 - Agree (A),

5 - Strongly Agree (SA)

S/n	Items	SD	D	U	A	SA
1	My boss is flexible about how I accomplish my job objectives.					
2	My manager is supportive of my ideas and ways of getting things done.					
3	My boss gives me the authority to do my job as I see fit.					
4	I am careful in taking responsibility because my boss is often critical of new ideas.					
5	I can trust my boss to back me up on decisions I make in the field.					
6	Management makes it perfectly clear how my job is to be done.					
7	The amount of work responsibility and effort expected in my job is clearly defined.					
8	The norms of performance in my department are well understood and communicated.					
9	I feel very useful in my job.					
10	Doing my job well really makes a difference.					
11	I feel like a key member of the organisation.					
12	The work I do is very valuable to the organisation.					
13	I rarely feel my work is taken for granted.					
14	My superiors generally appreciate the way I do my job.					
15	The organisation recognizes the significance of the contributions I make.					
16	The feelings I express at work are my true feelings					
17	I feel free to be completely myself at work.					
18	There are parts of myself that I am not free to express at work,					

19	It is okay to express my true feelings in this job.					
20	My job is very challenging.					
21	It takes all my resources to achieve my work objectives.					

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Section D: (for Organisational commitment)

Rating: 1- Strongly Disagree (SD), 2 - Disagree (D), 3 - Undecided (U), 4 - Agree (A), 5 - Strongly Agree (SA)

S/n	Items	SD	D	U	A	SA
1	I would be very happy to spend the rest of my career with this organisation					
2	I enjoy discussing my organisation with people outside of it					
3	I really feel as if this organization's problems are my own					
4	I think that I could easily become as attached to another organisation as I am to this one					
5	I do not feel like "part of the family" at my organisation					
6	I do not feel "emotionally attached" to this organisation					
7	This organisation has a great deal of personal meaning for me					
8	I do not feel a strong sense of belonging to my organisation					
9	I am not afraid of what might happen if I quit my job without having another one lined up					
10	It would be very hard for me to leave my organisation right now, even if I wanted to					
11	Too much in my life would be disrupted if I decided I wanted to leave my organisation now					
12	It wouldn't be too costly for me to leave my organisation now					
13	Right now, staying with my organisation is a matter of necessity as much as desire					
14	I feel that I have too few options to consider leaving this organisation					
15	One of the few serious consequences of leaving this organisation would be the scarcity of available alternatives					
16	One of the major reasons I continue to work for this organisation is that leaving would require considerable personal sacrifice another					

	organisation may not match the overall benefits I have					
17	I think that people these days move from company to company too often					
18	I do not believe that a person must always be loyal to his or her organisation					
19	Jumping from organisation to organisation does not seem at all unethical to me					
		SD	D	U	A	SA
20	One of the major reasons I continue to work for this organisation is that I believe that loyalty is important and therefore I feel a sense of moral obligation to remain					
21	If I get another offer for a better job elsewhere I would not feel it was right to leave my organisation					
22	I was taught to believe in the value of remaining loyal to one organisation					
23	Things were better in the days when people stayed with one organisation for most of their careers					
24	I do not think that wanting to be a “company man” or “company woman” is sensible anymore (Loyal to the organisation)					

Appendix B: Permission for data collection



Lead City University (LCU)

Motto: Knowledge for Self-reliance

Administrative Building, Lagos - Ibadan Expressway, Toll Gate Area, Ibadan, Oyo State, Nigeria

Faculty of Management and Social Sciences
Department of Psychology

www.lcu.edu.ng

14th June, 2024.

To Whom It May Concern,

**PERMISSION FOR DATA COLLECTION
SALAKO RAUF OLATOKUNBO LCU/PG/001594**

The above named postgraduate student of the Department of Psychology is conducting a research titled: **RELATIONSHIP BETWEEN WORKPLACE HAPPINESS, PSYCHOLOGICAL CLIMATE AND ORGANIZATIONAL COMMITMENT AMONG HEALTHCARE WORKERS IN THE IBADAN METROPLIS, OYO STATE, NIGERIA.**

I hereby seek permission on his behalf to obtain data which is strictly for research only.

Thank you.

Yours faithfully,

Dr. Jane Adebuseyi
Head of Department