

The Relationship Between Organizational Silence and Allen-Meyer Organizational Commitment Model: A Research In The Health Sector In Turkey

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Abstract

The purpose of this study is to determine whether the organizational commitment of employees in the public health sector has a meaningful effect on employees' silent behavior. The study was carried out on a total of 120 people working in public hospitals, emergency health service stations and community health centers operating in Balıkesir's Erdek municipality. The data of the study were obtained by questionnaire. It was used 'organizational silence scale' developed by Van Dyne, Ang & Botero (2003) to measure the levels of silence and 'organizational commitment scale' developed by Meyer & Allen (1991) to measure the level of organizational commitment of employees in questionnaire. The reciprocal and causal relationships between organizational commitment and organizational silence were analyzed respectively by correlation and simple linear regression methods. According to the results of the research, organizational commitment affects organizational silence positively. In other words, as the organizational commitment increases, the employee silence increases.

Key Words: Organizational commitment, organizational silence, health sector.

Allen-Meyer Örgütsel Bağlılık Modeli ve Örgütsel Sessizlik İlişkisi: Türkiye'de Sağlık Sektöründe Bir Araştırma

Öz

Bu çalışmanın amacı, kamu sağlık sektöründeki çalışanların örgütsel bağlılıklarının örgütsel sessizlik davranışı üzerinde anlamlı bir etkisinin olup olmadığını, tespit etmektir. Çalışma, Balıkesir'in Erdek ilçesinde faaliyet gösteren kamuya ait hastane, acil sağlık hizmetleri istasyonu ve toplum sağlığı merkezinde çalışan toplam 120 kişi üzerinde gerçekleştirilmiştir. Çalışmanın verileri anket yöntemiyle elde edilerek, çalışanların örgütsel bağlılık düzeylerini ölçmek için Meyer ve Allen' in (1991) geliştirdiği 'örgütsel bağlılık ölçeği', sessizlik düzeylerini ölçmek için Van Dyne, Ann ve Botero' nun (2003) geliştirdiği 'örgütsel sessizlik ölçeği' kullanılmıştır. Örgütsel bağlılık ve örgütsel sessizlik arasındaki karşılıklı ilişki ve neden sonuç ilişkileri sırasıyla korelasyon ve basit doğrusal regresyon yöntemleriyle analiz edilmiştir. Araştırma sonucuna göre, örgütsel bağlılık örgütsel sessizliği pozitif yönde etkilemektedir. Diğer bir deyişle örgütsel bağlılık arttıkça çalışan sessizliği artmaktadır.

Anahtar Kelimeler: Örgütsel bağlılık, örgütsel sessizlik, sağlık sektörü.

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INTRODUCTION

Today, increasing global competition and the efforts of organizations to maintain their assets have made it necessary to increase the organizational commitment of talented employees. Employees attached to the organization consider themselves as a part of the organization (Johnston et al., 1990). A number of meta-analysis studies have shown that employees attached to the organization perform better, participate more actively in organizational processes, and demonstrate effective organizational citizenship behavior (Meyer & Maltin, 2010). In cases where the organizational commitment of the employees is not ensured, the employees leave the organization and work in other organizations. Organizational commitment has become an important concept for organizations and managers because of its close relationship with turnover (Meyer & Allen, 1988).

For the change and development of organizations in an increasingly competitive environment, it is necessary for employees to clearly state their ideas about issues of interest and issues in the decision-making process of the organization (Morrison & Milliken, 2000). Employees play an important role in early detection of opportunities and problems in work routines / procedures by providing important input into decision-making processes. Organizations can successfully respond to unexpected situations, prevent preventable errors, and provide continuous process improvement by enabling employees to communicate their views and concerns in a sincere manner (Tangirala & Ramanujam,

2012). In some cases, these employees reserve their knowledge and ideas. This creates a major obstacle to organizational change and development. In addition, organizations are deprived of important inputs in decision making, problems can not be detected early, and problems are caught unprepared. (Morrison & Milliken, 2000, Morrison, 2014). In particular, exhibitions of silent behaviors of health professionals who perform a task related to human life can jeopardize human health (Tangirala & Ramanujam, 2008).

When studies on organizational commitment and organizational silence are examined, it is seen that the relationships between these two concepts have inconsistent results (Deniz, Noyan & Ertosun, 2013). In order to evaluate the findings obtained from the studies, this study aims to investigate the relationship between organizational commitment and employee silence.

LITERATURE REVIEW

Organizational Commitment

Like every issue in organizational psychology, organizational commitment is conceptualized and measured in various forms. These different perspectives are more focused on the attitudinal and behavioral orientation of organizational commitment (Meyer & Allen, 1991). The common point of these studies is that organizational commitment is a strong bond with turnover. However, due to these various opinions on organizational commitment, there is no consensus on the definition of organizational commitment (Allen & Meyer, 1990; Meyer &

Allen, 1991). Allen & Meyer (1987a) set out a model of attitudinal organizational commitment to complement the shortcomings in this area and to shed light on future research (Allen & Meyer, 1990).

Almost all of these studies have emphasized affective commitment, perceived costs and obligations inherent in organizational commitment (Meyer & Allen, 1991), although there are different conceptualizations about organizational commitment in the article. In the commitment model developed by Allen & Meyer (1987a), these three themes are conceptualized as, affective commitment, continuance commitment and normative commitment (Allen & Meyer, 1990; Meyer & Allen, 1991, Gellatly et al., 2006). These concepts reflect the psychological evaluations of employees and their relations with the organization and affect employees' decision to leave the organization (Allen & Meyer, 1990).

Affective commitment is the emotional bond of an employee to the organization, the identity of the organization, and the willingness to remain in the organization. Employees with high affective commitment volunteer to stay in the organization (Allen & Meyer, 1988; Meyer, Allen & Smith, 1993). Continuance commitment is that the employee continues to stay in the organization because of the inability to see costs incurred when leaving the organization. Employees with high continuance commitment remain in the organization due to their need to work (Powell & Meyer, 2004). Normative commitment refers to employees' feelings of obligation towards organization. Employees with a

high normative commitment remain in the organization in the belief that it is necessary and appropriate to remain in the organization (Meyer & Parfyonova, 2010).

According to Allen and Meyer (1990), three types of commitment are influenced by different premises: (Meyer et al., 2002). Mowday et al., (1982) argue that affective commitment is influenced by personal characteristics, organizational structure, work-related characteristics and work experience factors. The most important of these factors is work experience (Allen & Meyer, 1988). The affective commitment of employees who are satisfied with their psychological needs, who feel comfortable working, and who are skilled in their work is increasing (Meyer & Maltin, 2010). According to Becker (1960), there is an inability to reach the side bets or investments and alternatives accumulated in the continuance commitment. In this case, employees continue to stay in the organization, by thinking that employment is limited and that they will lose the investments they accumulate when they leave the organization (Powell & Meyer, 2004). Weiner (1982) argues that normative commitment is influenced by organizational socialization processes after starting to work and familial and cultural socialization before starting to work in the organization. Practices such as family and cultural pressures, salary increases and education increase the normative commitment of the employee (Meyer & Parfyonova, 2010).

Organizational Silence

The silent studies in the literature of organizational behavior on organizational silence has emerged with Morrison & Milliken's (2000) conceptual study. Morrison & Milliken (2000) focus on organizational causes and effects that increase the silence climate in their work (Morrison, 2014). The authors expressed organizational silence as a common phenomenon that causes employees to not talk about possible problems and issues in an organization (Morrison & Milliken, 2000). According to Morrison & Milliken (2000), employees' fear of receiving negative feedback from management and managers' negative thoughts about employees are two important factors that increase employee silence (Morrison & Milliken, 2000).

Pinder and Harlos (2001) argue that organizational silence can be viewed at the individual level, and that silence can not be regarded merely as a lack of voice and speech (Van Dyne et al., 2003). The authors described organizational silence as the concealment of behavioral, cognitive, and emotional evaluations of perceived and experienced injustice against managers who have the ability to change or correct behavioral and cognitive conditions, and organizational conditions (Pinder & Harlos, 2001). The definitions of later researchers refer to the definition of Pinder and Harlos (2001) (Morrison, 2014; Tangirala & Ramanujam, 2008).

The traditional view of silence assumes that silence is mostly passive behavior (Van Dyne et al., 2003). Van Dyne et al., (2003) have examined the silence of employees in three

ways: acquiescent silence, defensive silence, and prosocial silence (Pinder & Harlos, 2001; Morrison & Milliken, 2003), arguing that employee silence is deliberate and conscious behavior. Acquiescent silence is an employee's idea of changing speech based on the belief that the idea of speech is meaningless and will not make a difference. Defensive silence is silence behavior in order to protect itself, depending on the employee's fear of the consequences of his speech. Prosocial silence is silence behavior for the benefit of the organization. In other words, business ideas are hiding in order to prevent harm to the organization and other employees (Van Dyne et al., 2003).

Employee silence is an obstacle to organizational change and development by blocking the flow of information to managers in decision-making processes (Tangirala & Ramanujam, 2008). In addition, silence causes employees to feel unworthy of themselves, to perceive lack of control over their environment, and to live in business disputes (Morrison & Milliken, 2000). Employees feel themselves worthless, reducing organizational commitment and trust. As a result of reduced commitment and trust, the motivation and satisfaction of employees decreases, psychological withdrawal behaviors and turnover increase (Bagheri, Zarei & Aeen, 2012; Morrison & Milliken, 2000). Employee feelings of lack of control can cause a variety of harmful effects, such as motivation, dissatisfaction, stress-related discomfort, physical and psychological withdrawal, sabotage or other forms of deviation. In bilateral coincidence, there is contradiction between working beliefs

and behavior, which creates stress and anxiety at work (Beheshtifar, Borhani & Moghadam, 2012; Morrison & Milliken, 2000).

Relationship Between Organizational Commitment and Organizational Silence

This section describes some of the studies in Turkey and abroad to explain the relationship between organizational commitment and employee silence.

Studies in Turkey

Seymen & Korkmaz (2017) found that there is positive relationship between organizational commitment and organizational silence in their study on public health employees. In same study, they found that there is negative relationship between affective commitment and acquiescent silence, and positive relationship between affective commitment and defensive and prosocial silence, and positive relationship between normative commitment and defensive and prosocial silence, and positive relationship between continuance commitment and acquiescent and prosocial silence. In contrary, there is no meaningful relationship between continuance commitment and defensive silence, and between normative commitment and acquiescent silence.

Vardarer & Akiner (2017) found that there is positive relationship between affective commitment and acquiescent silence, and negative relationship between affective commitment and defensive silence, and positive relationship between normative commitment and defensive silence in their study of employees of an insur-

ance company. There is no meaningful relationship between organizational commitment and other sub-dimensions of organizational silence. In the same study, generally, there is no meaningful relationship between organizational silence and organizational commitment.

Salha et al., (2016) found that there is negative relationship between affective commitment and acquiescent silence and defensive silence, and positive relationship between affective commitment and prosocial silence in their study on food and beverage company employees. In the same study, in general, there is negative relationship between organizational silence and organizational commitment.

Atilla Gök (2016) found that there is positive relationship between acquiescent silence and three of the dimensions of organizational commitment (affective, continuance, normative), and negative relationship between defensive silence and affective and continuance commitment, and positive relationship between prosocial silence and all three dimensions of commitment in her study on military school employees.

Elitok & Elitok (2016) found that there is positive relationship between affective commitment and organizational silence in their study on bank employees. In the same study, there is no meaningful relationship between normative commitment and organizational silence.

Köse (2014) found that there is negative relationship between organizational commitment and organizational silence in his study on teachers.

Deniz et al., (2013) found that there is negative relationship between affective commitment and defensive silence in their study on private hospital employees. They didn't found relationship between affective commitment and other forms of silence in the same study.

Ülker & Kanten (2009) found that there is positive relationship between affective commitment and organizational silence in their study on employees in food and machinery manufacturing enterprises.

Studies Abroad

Hesam & Raesi (2016) found that there is positive relationship between organizational commitment and sub-dimensions and organizational silence in their study on health employees in Iran.

Norouzi & Vazifeh (2016) found that there is negative relationship between organizational commitment and organizational silence and sub-dimensions in their study on railway employees in Iran.

Qazelvand & Shahtalebi (2016) found that there are negative relationships between organizational commitment and organizational silence and sub-dimensions in their study on teachers in Iran.

Hussain et al. (2016) found that there is positive relationship between organizational commitment and organizational silence in their

study on teachers working in the public education sector.

Dedahanov & Rhee (2015) found that there is negative relationship between organizational commitment and acquiescent silence and defensive silence in their study on employees in heavy industry in South Korea.

Fard & Karimi (2015) found that there is negative relationship between organizational commitment and organizational silence in their study on university employees in Iran.

Kim & Lee (2015) found that there is positive relationship between organizational commitment and organizational silence in their study on travel agencies employees in South Korea.

Laeque & Bakhtawari (2014) found that there is negative relationship between organizational commitment and organizational silence and sub-dimensions in their study on a higher education institution employees in Pakistan.

Nikmaram et al. (2012) found that there is positive relationship between the silent climate perception and the silent behavior of employees and organizational commitment in their study on university employees in Iran.

Panahi et al., (2012) found that is negative relationship between organizational commitment and organizational silence in their study on university employees in Azerbaijan.

The following hypothesis can be developed in the light of the empirical data above:

H.1. Organizational commitment or-
ganizational silence affects the negative direc-
tion.

H.1.a. Affective commitment affects
acquiescent silence in the negative direction.

H.1.b. Affective commitment affects
the defensive silence in the negative direction.

H.1.c. Affective commitment affects
prosocial silence in the positive direction.

H.1.d. Continuance commitment af-
fects acquiescent silence in the positive direc-
tion.

H.1.e. Continuance commitment af-
fects defensive silence in the positive direction.

H.1.f. Continuance commitment affects
prosocial silence in the positive direction.

H.1.g. Normative commitment affects
acquiescent silence in the positive direction

H.1.h. Normative commitment affects
defensive silence in the negative direction.

H.1.i. Normative commitment affects
prosocial silence in the positive direction.

METHODOLOGY

The research model of this study is as shown in Fig.1

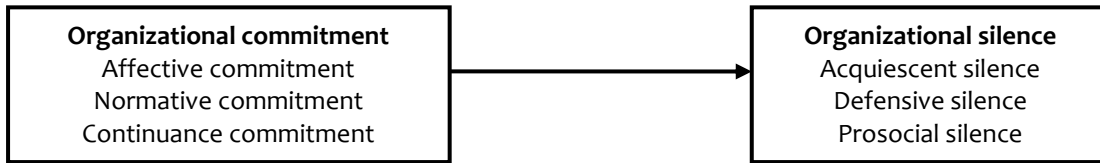


Figure 1. Model of the Research

Sampling

The study was carried out on a total of 120 people working in public hospitals, emergency health service stations and community health centers operating in Balıkesir's Erdek municipality. Within this scope, 150 questionnaires were applied to the employees; 120 questionnaires returned. The turnover rate of the questionnaires is 80%. In this case, the number of survey forms included in the analysis was 120.

Data Collection Tools

Organizational Commitment Scale:

The 18-item scale developed by Meyer & Allen (1991) was used in the study to measure the organizational commitment of employees. The scale consists of affective commitment (items 1-6), normative commitment (items 7-12) and continuance commitment dimensions (items 13-18). Each dimension contains six expressions. Expressions were measured with 5-Likert-type scales between 1 = strongly disagree and 5 = strongly agree.

Organizational Silence Scale: The 15-item scale developed by Van Dyne et al., (2003) was used to determine organizational silence levels of employees. The scale consists of the dimensions of acquiescent silence (1-5), defensive silence (6-10), and prosocial silence (11-

15). Each dimension contains five expressions. Expressions were measured with 5-Likert-type scales between 1 = strongly disagree and 5 = strongly agree.

FINDING

Demographic Finding

Table 1. Demographic Finding (n=120)

<i>DEMOGRAPHIC FEATURES</i>	<i>Frequency</i>	<i>%</i>
<i>Gender</i>		
Male	42	35
Female	78	65
<i>Marital Status</i>		
Unmarried	29	24,2
Married	91	75,8
<i>Age Range</i>		
18-25	21	17,5
26-35	58	48,3
36-49	39	32,5
50+	2	1,7
<i>Education Status</i>		
Primary School	1	0,8
High School	29	24,2
Associate	54	45
Undergraduate	33	27,5
Master Degree	3	2,5
<i>Experience Year</i>		
Less than 1	10	8,3
1-5	48	40
6-10	33	27,5
11-15	16	13,3
16-20	7	5,8
21+	6	5
TOTAL	120	100

As seen in Table 1, rate of male employees is %35 (n=42), rate of female employees is %65 (n=78), the rate of married employees is %75,8 (n=91) and rate of unmarried employees is %24,2 (n=29).

Rate of employees in the age range of 18-25 years is %17,5 (n=21), rate of employees in the age range 26-35 years is %48,3 (n=58), rate of employees in the age range 36-50 years %32,5 (n=39) and rate of employees aged 50 years or older is %1,7 (n=2).

Rate of primary school graduates is %0,8 (n=1), rate of high school graduates is %24,2 (n=29), rate of associate graduates is %45 (n=54), rate of undergraduate graduates is %27,5 (n=33) and rate of master degree graduates is %2,5 (n=3).

Rate of working less than one year in the health sector is %8,3 (n=10), rate of working in the 1-5 years range is %40 (n=48), rate of

working in the 6-10 years range is %27,5 (n=33), rate of working in the 11-15 years range is %13,3 (n=16), rate of working in the 16-20 years range is %5,8 (n=7), rate of working 21 years or more is %5 (n=6).

Findings related to Validity and Reliability

Organizational commitment: The general cronbach’s alpha of the organizational commitment scale is 0,833; the cronbach’s alpha of the affective commitment scale 0,784; the cronbach’s alpha of the normative commitment scale is 0,69 and the cronbach’s alpha of the continuance commitment scale is 0,715.

Organizational Silence: The general cronbach’s alpha of the organizational silence scale is 0,772. The cronbach’s alpha of the acquiescent silence scale is 0,864; the cronbach’s alpha of the defensive silence scale is 0,60; the cronbach’s alpha of the prosocial silence scale is 0,937.

Table 2. Cronbach’s Alpha Values

<i>Scales</i>	<i>Cronbach’s Alpha (a)</i>
Organizational Commitment	0,833
Affective Commitment	0,784
Normative Commitment	0,69
Continuance Commitment	0,715
Organizational Silence	0,772
Acquiescent Silence	0,864
Defensive Silence	0,60
Prosocial Silence	0,937

RESULTS

Data Analysis

I analyzed data in accordance with the research design in the statistical program. I performed parametric tests after I tested the normal distribution of the variables. In the normality

test, skewness and kurtosis values of organizational commitment and organizational silence variables were between -1.5 and +1.5; Kolmogorov-Smirnov values were observed as $p > 0.05$. These results showed the normality of the data.

Descriptive Statistics and Correlation Analysis

Table 3. Descriptive Statistics and Correlation Analysis

Variables	Mean	SD	1	2	3	4	5	6	7	8
1.OC	3,063	0,604	1							
2.AC	3,123	0,844	0,826**	1						
3.NC	3,104	0,724	0,840**	0,636**	1					
4.CC	2,961	0,751	0,673**	0,255**	0,348**	1				
5.OS	2,984	0,593	0,463**	0,236**	0,395**	0,470**	1			
6.AS	2,571	0,930	-0,082	-0,338**	-0,048	0,227**	0,487**	1		
7.DS	3,091	0,714	0,316**	0,184**	0,273**	0,291**	0,768**	0,325**	1	
8.PS	3,290	1,187	0,569**	0,508**	0,466**	0,351**	0,656**	-0,249**	0,296**	1

* $p < 0.05$, ** $p < 0.01$

As seen in Table 3, there is meaningful and positive relationship between organizational commitment and organizational silence ($r=0,463$, $p < 0,01$), defensive silence ($r=0,316$, $p < 0,01$), prosocial silence ($r=0,569$, $p < 0,01$). In contrary, there is no meaningful relationship between organizational commitment and acquiescent silence.

There is meaningful and positive relationship between affective commitment and organizational silence ($r=0,236$, $p < 0.01$), defensive silence ($r=0,184$, $p < 0,01$), prosocial silence ($r=0,508$, $p < 0,01$). In contrary, there is meaningful and negative relationship between affective commitment and acquiescent silence ($r=-0,338$, $p < 0,01$).

There is meaningful and positive relationship between normative commitment and organizational silence ($r=0,395$, $p < 0,01$), defense silence ($r=0,273$, $p < 0,01$), prosocial silence ($r=0,466$, $p < 0,01$). In contrary, there is no meaningful relationship between normative commitment and acquiescent silence.

There is meaningful and positive relationship between continuance commitment and organizational silence ($r=0,470$, $p < 0,01$), acquiescent silence ($r=0,227$, $p < 0,01$), defensive silence ($r=0,291$, $p < 0,01$), prosocial silence ($r=0,351$, $p < 0.01$).

Regression Analysis

Table 4. Regression Analysis

Variables	OS	AS	DS	PS
	<i>B</i>	<i>B</i>	<i>B</i>	<i>B</i>
OC	0,463*	-0,082	0,316*	0,569*
F	32,196	0,806	13,074	56,433
R ²	0,214	0,007	0,100	0,324
Adjusted R ²	0,208	-0,002	0,092	0,318
AC	0,236*	-0,338*	0,184*	0,508*
F	6,988	15,189	4,132	41,112
R ²	0,056	0,114	0,034	0,259
Adjusted R ²	0,048	0,107	0,026	0,252
NC	0,395*	-0,048	0,273*	0,466*
F	21,856	0,277	9,516	32,794
R ²	0,156	0,002	0,075	0,217
Adjusted R ²	0,149	-0,006	0,067	0,211
CC	0,470*	0,227*	0,291*	0,351*
F	33,386	6,441	10,958	16,540
R ²	0,221	0,052	0,085	0,123
Adjusted R ²	0,214	0,044	0,077	0,116

*p<0.05, **p<0.01

As seen in Table 4, there is meaningful and positive relationship between organizational commitment and organizational silence (B=0,463, p<0,05), defensive silence (B=0,316, p<0,05), prosocial silence (B=0,569, p<0,05). However, there is no significant relationship between organizational commitment and acquiescent silence. According to these results, H1 was rejected.

There is meaningful and positive relationship between affective commitment and organizational silence (B=0,236, p<0,05), defensive silence (B=0,184, p<0,05), prosocial silence (B=0,508, p<0,05) in Table 4. Moreover, there is meaningful and negative relationship between affective commitment and acquiescent silence (B=-0,338, p<0,05). According to these results, H1a and H1c were accepted; H1b was rejected.

There is there is meaningful and positive relationship between continuance commitment and organizational silence (B=0,470, p<0,05), acquiescent silence (B=0,227, p<0,05), defensive silence (B=0,291, p<0,05), prosocial silence (0,351, p<0,05) in table 4. According to these results, H1d, H1e and H1f were accepted.

There is there is meaningful and positive relationship between normative commitment and organizational silence (B=0,395, p<0,05), defensive silence (B=0,273, p<0,05), prosocial silence (B=0,466, p<0,05). However, there is no meaningful relationship between organizational commitment and acquiescent silence in Table 4. According to these results, H1i was accepted; H1h and H1g are rejected.

CONCLUSION

The purpose of this research is to determine the effects on the silent behavior of the organizational commitment of the 120 public health sector employees in the district of Erdek, Balıkesir. In this context, the relationship between organizational commitment and organizational silence are determined by correlation and regression analysis.

According to analysis results, organizational commitment affects positively organizational silence. In other words, as the employees's commitment increases, the employees's silence increases. This result is supported with the findings Seymen & Korkmaz (2017), Hesam & Raeesi (2016), Hussain et al., (2016), Kim & Lee (2015), and Nikmaram et al., (2012).

According to other results, while affective commitment affects positively the defensive and prosocial silence, It affects negatively acquiescent silence. In other words, as affective commitment increases, defensive and prosocial silence increase. But acquiescent silence decreases. While this result is in full similarity with the findings of Seymen & Korkmaz (2017), the findings of Salha et al., (2016) and Atilla Gök (2016) show partial similarity with this results.

Continuance commitment affects positively acquiescent defensive and prosocial silence. In other words, as commitment increases, all three silence behaviors increase. This result partially similarity with the findings of Seymen & Korkmaz (2017) and Atilla Gök (2016).

Normative commitment affects positively defensive and prosocial silence. There is no meaningful relationship between normative comitment and acquiescent silence. In other words, as the normative commitment increases, the defensive and prosocial silence increases. While this result fully coincides with Seymen & Korkmaz's (2017) research result, the findings of Vardarlier & Akıner (2017) are partially similar to this result.

The studies that investigate the relationship between organizational commitment and organizational silence in the literature, especially in the health sector, are limited. These studies were conducted mostly in turkey and Iran. When the results of the studies are examined, it is understood that the results are in part similar to this study. In this respect, this study will contribute to the comparison and evaluation of the consistency of the results of the relevant studies in the health sector and other sectors.

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