From Job Satisfaction to Organizational Commitment: The Mediating Influence of Perceived Treatment of Diversity among Nigeria’s Public Healthcare Employees

Anthonia Adenike Adeniji, Adewale Omotayo Osibarnjo, Tunde Charles Iruonagbe, Tomike Olawande, Ayodotun Stephen Ibidunni*, Maxwell Ayodele Olokundun

Covenant University, Ota, Nigeria

Abstract

BACKGROUND: In the Nigerian, like most developing economies’, health sector, employees’ perceptions about treatments of diversity are crucial not only to their satisfaction with the job but equally to their commitment to the organisation. The importance of this view of the public health sector, is that it could induce political behaviours, result in conflict situations and hence promote tensed work environments, if not properly managed. Despite these facts, there is again, a dearth of existing literature that shows an element of empirical analysis to demonstrate the moderating influence of workforce diversity on job satisfaction and organisational commitment of public healthcare employees in Nigeria.

AIM: This study is focused on investigating the mediating effect of employees’ perceived treatments of diversity in the workplace on the relationship between job satisfaction and their commitment to the organisation.

METHODS: The survey method was used to collect data. One hundred thirty-three public health workers from the Lagos State Health Ministry in Nigeria were involved in this research. The research used questionnaires as the main tools to perform this research. The statistics on the reliability of the tools used in this study were 0.747. The statistical analysis was carried out using SPSS (version 22) and AMOS (version 23) software for this study.

RESULTS: The results from the statistical analysis indicate that job satisfaction significantly relates with all dimensions of workforce diversity in the following ways: education (r = 0.19), gender (r = 0.48), religion (r = -0.20), ethnicity (r = -0.42) and position (r = 0.15). The mediating effects of workforce diversity on the relationship between job satisfaction and employee commitment is also evident from the statistical analysis, especially with respect to education (affective commitment = 0.16, normative commitment = 0.18, continuance commitment = 0.18); gender (affective commitment = 0.32, normative commitment = 0.42); and religion (continuance commitment = 0.14).

CONCLUSION: This study concluded that not only is job satisfaction significant to ensuring the commitment of healthcare workers to their organisation, but more critical is the role of workforce diversity as viable leverage for translating the interest of employees from the level of job satisfaction to organisational commitment.

Introduction

Nigeria’s health sector is a part of its economy, which require critical discourse, especially concerning issues surrounding infrastructure, government funding, health workers motivation and satisfaction, among others. Considering the strategic role that health workers play within this sector, it is imperative that researchers and practitioners give the required attention to exploring and interrogating issues that can enhance their performance, to ensure that they function optimally [1], [2]. It is not untrue that where the workers in the Nigerian health sector are unfairly treated, the ailing patients will be at the receiving end of such injustice. Consequently, existing studies have attempted to show the relationships between healthcare workers satisfaction and the motivation towards work [3]. There have also been studies to demonstrate the factors that influence health workers satisfaction with their work [4], [5]. Notwithstanding, the case with Nigeria requires more than simply understanding the basic elements that explain job satisfaction of health workers. As [6] opined, there are insufficient empirical details in the literature to explain health workers’ motives for linking their level of job satisfaction with their motives to remain committed, or otherwise, to their organisation.
Literature has asserted that employees’ perception about treatments of diversity at the workplace is critical to enhancing, or otherwise, their behaviours and commitment to the job [7]. According to [8], [9] it is not sufficient to measure employees’ levels of satisfaction, but workplace diversity can influence the type of commitment they show to the organisation. In the Nigerian health sector, employees’ perceptions about treatments of diversity are crucial not only to their satisfaction with the job but equally to their commitment to the organisation [10], [11]. The importance of this view of the public health sector, that it could induce political behaviours, result in conflict situations and hence promote tensed work environments, if not properly managed. Despite these facts, there is again, a dearth of existing literature that shows an element of empirical analysis to demonstrate the moderating influence of workforce diversity on job satisfaction and organisational commitment of public healthcare employees in Nigeria.

Therefore, this study is focused on investigating the mediating effect of employees’ perceived treatments of diversity in the workplace on the relationship between job satisfaction and their commitment to the organisation.

**Material and Methods**

The method of survey was used to collect data. This research involved 133 public health workers from the Ministry of State Health of Lagos in Nigeria. Public health workers, especially in the Ministry of Health of Nigeria, are important for this research because of the increased awareness of the diverse workforce of the Ministry and the need to manage this diversity in a way that does not hurt employee satisfaction and commitment to the organisation [14]. Furthermore, due to the importance of the Ministry of Health for the population and the overall well-being of each country, this research is considered essential to maintaining employee interest and motivation in the provision of quality services [15].

**Sample Size & Sampling Procedure**

The sample size was determined using a sample size determination formula with a 5 per cent sampling error. Apply the Yamane sample size procedure [16].

\[
N = \frac{N}{(1 + N(e)^2)}
\]

where

\[
n = \text{sampling size}
\]

\[
N = \text{the population (that is 200 employees in the healthcare location)}
\]

\[
e = \text{sampling error (0.05)}
\]

\[
N = 200 / (1 + 200 (0.05)^2)
\]

\[
n = 200 / 1+ 200 (0.0025)
\]

\[
n = 200 / 1+ 0.5
\]

\[
n = 200 / 1.5
\]

\[
n = 133.33 \text{ (approximately 133)}
\]

\[
n = 133
\]

Therefore, the sample size is 133

For this research, the technique adopted is the simple random sampling technique. Simple random sampling which is a subdivision of the probability sampling is used and is applicable as a result of the small number and similarity of the population and all subdivision of the population have an equal chance of being selected. This technique allows every member of the population to be a respondent by selecting the respondents without any form of partiality.

**Execution of Field Research**

The research used questionnaires as the main tools to perform this research. The questionnaire was used in this study for the following reasons; it allowed the respondents to express themselves more freely and clearly and to gather the answers in a standardized manner; It saved time by allowing information to be collected as soon as possible and also by facilitating the collection of possible information from a large sample of respondents. The research questionnaire consisted of a 5-point Likert scale in which the respondent was expected to agree strongly, agree, disagree and strongly disagree with carefully constructed questions, ranging from very positive to very negative, to measure the influence of diversity in the workforce on the commitment and satisfaction of employees. The questionnaire has been tested by the pilot using the Cronbach reliability test. The investigation questionnaire was divided into two parts. Section A was designed to provide information on the background of respondents, while section B was designed to provide information on the nature of workforce diversity, employee satisfaction and level of commitment (affective, regulatory and continuing) in the Ajeromi General Hospital.

**Measures**

This research took advantage of the ideas from existing research studies. Workforce diversity issues were developed based on [17], [18], work satisfaction items were developed based on [19], while organisational commitment items were adapted from [20], [21]. The data collected was encoded and
entered into version 22 of SPSS. The analysis of data was carried out using descriptive statistics and structural equation modelling (SEM).

**Ethical Consideration**

The management of the questionnaire was based on the readiness of respondents to respond to the research instrument. The participants in the study were also assured of confidentiality and anonymity, as their names were not reflected in the questionnaire.

**Validity and Reliability of Research Instrument**

The alpha coefficient (Cronbach's alpha) has been used in this research to test the reliability of the measurement scale. The Cronbach alpha is a method to determine the internal consistency of a measuring instrument by identifying all possible ways to split the items in the instrument and then investigate the correlation degree. Values of the coefficient from 0 to 1. A highly reliable instrument has a coefficient value near 1, where a score very close to 0 indicates a very low or no reliability of the instrument. It is widely accepted that the score above 0.7 shows the instrument's reliability. The SPSS (Social Science Statistical Package) was used to test the reliability of the research instrument. The statistics on the reliability of the tools used in this study were 0.747. The validity of the instrument was determined by the validity of the content.

**Statistical Analysis**

The statistical analysis was carried out using SPSS (version 22) and AMOS (version 23) software for this study. Descriptive analysis showed the total number of respondents according to the analysed categories as well as the percentages of each category. The inferential statistics which established the multivariate relationships between public healthcare workers’ diversity issues and commitment to their organisation was analysed using structural equation modelling (SEM) at a significant level of $p < 0.000$.

**Results**

Sixty-four (48.1%) were male, and the remaining 69 (51.9%) were female. This research involves more female participants than male respondents.

The age distribution of the respondents revealed that 68 respondents were aged between 18 and 34 years; 45 respondents were aged between 35 and 44 years. The range of 13 respondents is 45 to 54 and 7 falls within the range of 55 years. This means that the age group was between 18 and 34 years old, with the majority of respondents and had 68 participants in this research.

**Table 1: Socio-demographic Distribution of Respondent**

| Demographic Variable | Frequency | Percentage |
|----------------------|-----------|------------|
| Gender               |           |            |
| Male                 | 64        | 48.1       |
| Female               | 69        | 51.9       |
| Age                  |           |            |
| 18-34                | 68        | 51.1       |
| 35-44                | 45        | 33.8       |
| 45-54                | 13        | 9.8        |
| 55 and above         | 7         | 5.3        |
| Years of Work        |           |            |
| less than 5 years    | 54        | 40.6       |
| 5-10 years           | 49        | 36.8       |
| 11-15 years          | 16        | 12.0       |
| 16 years above       | 14        | 10.5       |
| Educational Qualification |   |            |
| O.N.D                | 24        | 18.0       |
| N.C.E                | 9         | 6.8        |
| H.N.D                | 43        | 32.3       |
| Bachelor's degree    | 35        | 26.3       |
| Master's degree      | 22        | 16.5       |

Based on years of working experience (40.6%) of respondents worked for less than 5 years, the table shows that (36.8%) of respondents worked for 5-10 years and (12.0%) for 11-15 years. The table shows that there were some respondents 16 years ago (10.5%). Table 4 above shows the background of the students surveyed 24 (18.0%) were O.N.D., 9 (6.8%) were N.C.E., 43 (32.3%) were H.N.D., 35 (26.3%) were Bachelor, and 22 (16.5%) were Masters. This means that the majority of the education background was (32.3%), meaning H.N.D. There were 43 respondents.

**Figure 1: Regression Path of Job Satisfaction, Workforce Diversity & Employee Commitment**

Figure 1 shows the model for analysing the multifaceted relationships between workforce diversity, job satisfaction and commitment of employees. Table 2 also shows structural regression weights of multi-variable analysis. Chi-square / Degree of Freedom (Cmin / df) = 3.876, Goodness of Fit Index (GFI) = 0.949, Normal Fit Index (NFI) = 0.854, Comparative Fit Index (CFI) = 0.872, Root Mean Square Error Approximation (RMSEA) = 0.148 are used to ensure the model fit of the analysis. The values are important based on the arguments presented in the study [28], [29], [30].
The data supports a relationship between diversity of workforce and job satisfaction, diversity of workforce and organizational commitment and influence on the organizational commitment to work. The results of these data support existing research results [21, 22, 23, 24]. Specifically, the results from the statistical analysis indicate that job satisfaction significantly relates with all dimensions of workforce diversity in the following ways: education ($r = 0.19$), gender ($r = 0.48$), religion ($r = -0.20$), ethnicity ($r = 0.42$) and position ($r = 0.15$). The mediating effects of workforce diversity on the relationship between job satisfaction and employee commitment is also evident from the statistical analysis, especially with respect to education (affective commitment = 0.16, normative commitment = 0.18, continuance commitment = 0.18); gender (affective commitment = 0.32, normative commitment = 0.42); and religion (continuance commitment = 0.14).

### Discussion

The study focused on investigating the mediating effects of diversity in the workforce on job satisfaction and the organisational commitment of public health workers in Nigeria. For the analysis of data collected from respondents, the structural equation model was used. This study fills a research gap in the existing literature by empirically demonstrating the moderating influence of diversity in the workforce on the satisfaction of public health workers in Nigeria and their organisational activities. Through the understanding of such relationships, managers and governments in the healthcare sector are ably posed to curbing incidences that could arise as a result of adverse politicking and conflicts. Moreover, the findings of this study have been corroborated by existing literature that argued that diversity at the workplace can be harnessed not only to ensure sustainable satisfaction of employees, but to motivate them into creativity and commitment in the organization [13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25]. This study constitutes a significant departure from conventional studies on workforce diversity by adopting a mediating perspective of the concept. In other words, the strength of workplace diversity is projected as a means of achieving higher levels of satisfaction from healthcare workers. The perspective adopted in this study is significant to enhancing passion and emotional affinity of healthcare workers toward caring for patients, hence sustaining a healthy community [10, 11, 12]. Based on the findings from the study, educational diversity at the workplace is a very strategic linkage between job satisfaction and employees’ commitment (including affective, normative and continuance commitment). Indeed, the need to appreciate the roles of educational diversity reflects in the capacity of each to function across different cadres, yet achieving the common goal of the organisation [26, 27]. In the same way, diversities based on gender and religion has been evident from the statistical point of view of this study to be credible leverages for stimulating employees’ interest and commitment to the organisation.

This study concludes that not only is job satisfaction significant to ensuring the commitment of healthcare workers to their organisation, but more critical is the role of workforce diversity as viable leverage for transiting the interest of employees from the level of job satisfaction to organisational commitment. Specifically, three levels of workforce diversity, namely; education, gender and religion, were found to be strategic to enhancing healthcare workers perception about diversity treatments in the healthcare sector. Consequently, this study recommends that policymakers and managers in the Nigerian health care sector must pay adequate attention to creating a balance in the educational, gender and religious diversity of healthcare workers in Nigeria to sustain their satisfaction and stimulate their commitment to the organisation.

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