

Empirical Study of Organizational Citizenship Behavior— Through Knowledge Sharing and Empowerment

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ABSTRACT: Organizational citizenship behavior (OCB) leads to tangible benefits for employees and organizations in many industries. Due to the importance of OCB, a number of researchers have made an effort to explore the phenomenon or influential determinants of OCB with regard to employees as this study would examine the effects of knowledge sharing and empowerment on OCB. Besides, the factor analysis was utilized for testing construct validity whereas reliability analysis (Cronbach's alpha) was applied to test internal consistency of the research instruments. The survey questionnaires were collected from registered nurses. Confirmatory factor analysis (CFA) was used to validate psychometric properties of instruments, and path analysis was used to test hypotheses. The results of this study indicated that the internal consistency reliability (α) of the knowledge sharing, empowerment and OCB is .92, .90 and .86, respectively. The results of the CFA demonstrated acceptable fit for knowledge sharing, empowerment and OCB which required deletion of the items with factor loadings lower than .50. In addition, knowledge sharing was significantly positive related to empowerment. Moreover, as hypothesized, the coefficient of the path from knowledge sharing to OCB ($\beta = .55$, $p < .001$) was significant. Furthermore, the coefficient of the path from empowerment to OCB ($\beta = .30$, $p < .001$) was significant. Discussion of the empirical findings are also mentioned.

Keywords: Empowerment, Knowledge sharing, Organizational citizenship behavior

I. INTRODUCTION

Organizational changes are bountiful especially in hospitals because of the changing customer preferences, structure of population and fluctuating environment such as policy of national health insurance. Since 2001 to 2015, the number of hospitals has been decreasing from 637 to 494, namely, there were 143 hospitals closed during last 15 years in Taiwan [1]. Therefore, in such harsh environment, to ensure quality and productiveness in healthcare services, robust leadership is necessary. Leadership is important for professionals in the healthcare sector as is the case in other sectors [2]. Nurses who work with other professionals in the healthcare sector must have the knowledge needed to provide appropriate health care and accept the responsibilities of professional management and leadership.

During the past decade, knowledge became the primary asset which generates organizational wealth [3]. Knowledge sharing is an activity involving the transfer and dissemination of knowledge from one person to another. It is essential to conserve and share knowledge in the organization so that when an employee leaves, the existing employees will have sufficient information about how to perform their job [4]. Owing to the changing rapidly of medical knowledge and technology, knowledge sharing of nursing staff therefore has a vital role in facilitating the growth of knowledge to increase its value. When knowledge is retrieved from those who hold it and shared with those who need it, organizational effectiveness is significantly improved [5]. Indeed, to encourage knowledge sharing within the organizations the management needs to increase the opportunities for employees to propose new ideas and thoughts [6]. In this context, knowledge sharing is logically correlated with leadership whose behavior motivates their members to act and challenge the process.

Disempowerment can manifest in disinterest and apathy which subsequently influences patient care. Kettering-Murray [7] also considers that the recent nursing retention and recruitment difficulties are predominantly a consequence of disempowerment amongst nurses. Clearly, the benefits of empowering nurses are enormous for the nursing profession.

This study would like to delve into subordinate's extra-role performance (i.e., organizational citizenship behavior; OCB). OCB is definitely beneficial to organizations' operations in the long run which will play a crucial role in determining the effectiveness of organizational performance. It has been established that OCB leads to tangible benefits for employees and organizations in many industries [8][9]. Moreover, Organ [10] has asserted that the benefits of OCB are pivotal to ensuring an organization's survival. Therefore, due to the importance of OCB, a number of researchers have made an effort to explore the phenomenon or influential determinants of OCB with regard to employees as this study would scrutinize the effects of knowledge sharing and empowerment on OCB.

As noted in this paper, our findings have the opportunity to contribute to both practice and theory. For example, practically, the findings could be applied for human resource management in both nursing managers and nursing staff.

II. LITERATURE REVIEW

2.1 Organizational Citizenship Behavior

Organ [10] defined OCB as discretionary not formally rewarded or punished by the organization, which, in the aggregate, benefits the organization by improving efficiency and/or effectiveness. In the same notion, Organ [11] asserted that organizational citizenship behaviors are work-related activities performed by employees; such behaviors increase organizational effectiveness but are beyond the scope of job descriptions and formal, contractual sanctions or incentives. Hence, Schnake [12] defined OCB as “those behaviors which are not formally prescribed, but yet are desired by an organization”. OCB is often labeled as extra-role behavior (ERB). Van Dyne, Cummings and McLean Parks [13] defined extra-role behavior as “behavior which benefits the organization and/or is intended to benefit the organization, which is discretionary and which goes beyond existing role expectations”. In general, OCB contains not only enactment of positive gestures and contributions, but also the eagerness to endure the occasional costs, inconveniences, and minor frustrations that often go connectedly with working in an organization [10]. Therefore, OCB are beneficial and desirable from an organizational perspective. As such, OCB is especially important in new work systems with reduced supervision and greater autonomy, where behavior cannot be as easily observed and reinforced [14]. Five dimensions of OCB have been most frequently explored by researchers including altruism, conscientiousness, civic virtue, sportsmanship, and courtesy.

2.2 Knowledge Sharing and OCB

Knowledge has become one of the most important intangible assets for the organization in the current vying environment [3][15], being of particular importance knowledge creation processes within an organization [16] in order to achieve long-term competitive advantage [17]. Knowledge is defined as an individual’s experience and understanding that can be communicated and shared. There are two forms of organizational knowledge: explicit or tacit /implicit. Bartunek and colleagues [18] distinguished between tacit and explicit knowledge. A knowledge that cannot be adequately expressed or articulated is known as tacit knowledge as it is based on individual experiences, and involves personal beliefs, perspectives and values. Implicit Knowledge is knowledge that can be articulated but is yet to be and can only be inferred from observable behavior or performance. Knowledge becomes explicit if it has been articulated and stored in a form that can be transmitted. Thus, explicit knowledge is formal and systematic knowledge [19], which is dependent on norms, attitudes, flow of information, and ways of making decisions that shape how people deal with one another.

Knowledge sharing has long been viewed as one of the most important components of knowledge management [15]. To maximize the value of knowledge is important for managers since knowledge management allows the firm to influence core competences and obtain competitive advantage in a long term, the creation of knowledge within organization being of particular importance for this process [20]. Knowledge sharing practices should be an essential part of day-to-day dialogue [21]. However, commonly existing issues internal to enterprises result in obstacles to knowledge sharing among peers. Most knowledge owners are unwilling to share their most important knowledge assets with others [22]. The concept of knowledge markets recognizes the interest that individuals have in holding onto the knowledge they possess [23]. In order to part with it, they need to receive something in exchange. Any organization is a knowledge market in which knowledge is exchanged for other things of value—money, respect, promotions, or other knowledge. This derives three dimensions for knowledge sharing which are reciprocity, reputation and altruism.

According to the theory of reasoned action (TRA) [24], which was based on the social psychology, there are interdependent relationships between attitudes, intentions and behavior. Besides, Ajen and Fishbein [24] verified that behavior of the leading factors is the behavioral intention that is the extent to which someone is willing to perform a certain behavior. In this respect, it is obvious that knowledge sharing intentions will have a positive effect on the OCB. Teh and Yong’s study [25] has proven that the individual’s intention to share knowledge is an important factor influencing the actual knowledge sharing behavior. Besides, Mogotsi [26] confirmed that there is a positive correlation between knowledge sharing behavior and OCB and knowledge sharing behavior indeed is a type of OCB. As a result, there is a positive relationship between knowledge sharing intentions and OCB.

2.3 Empowerment and OCB

Empowerment has been defined as a cognitive state that results in increased intrinsic task motivation, and as a broad and multidimensional concept including meaning, competence, self-determination, and impact [27]. Meaning concerns a fit between the requirements of a work role and a person’s beliefs, values, and

behaviors. The dimension of competence is explained as a belief in one's capacity to perform work activities with skill. Self-determination reflects autonomy over the initiation and continuation of work behavior and processes. Impact is defined as the degree to which one believes he or she can influence organizational outcomes. Jiang, Sun and Law [28] concluded that "Empowerment is thought to leave employees optimistic, involved, committed, able to cope with adversity, and willing to perform independently and responsibly." In line with this conclusion, in a qualitative study of nurse empowerment five categories were identified, describing the performance and qualities of an empowered nurse that included: (1) moral principles (e.g. showing ethical responsibility, respect for the individual), (2) personal integrity (e.g. resourceful, flexible, able to act under pressure), (3) expertise (e.g. competent, autonomous with informal power), (4) future-orientated (e.g. innovative, enthusiastic, forward thinking); and (5) sociability (e.g. open-minded, respected by others) [29].

In a nutshell, empowerment reflects positive and active behavior in his/her work context. By active orientation, Spreitzer [27] mentioned that an orientation in which an individual wishes and feels able to shape his/her work role. Thus, it will have an effect on OCB. Self-determination reflects autonomy in the initiation and continuation of work behaviors and processes. Although scholars have devoted increasing attention to empowerment in organizations in recent years, relatively little research has focused on the consequences of empowerment, and findings of empowerment's effects were inconsistent. Accordingly, there is a need for more comprehensive understanding about how and when empowerment works [30].

III. METHODS

3.1 Sample and Procedure

Convenient sampling was adopted for this study from registered nurses of the district hospitals in the northern Taiwan. Only ward nurses were involved in the study and the head nurses and assistant head nurses were excluded. Each questionnaire with an envelope was accompanied by a covering letter explaining the purpose of the study and providing assurance that the confidentiality of responses was respected. The questionnaires were distributed by the researcher personally to the wards which have been chosen purposely. The respondents will be asked directly to return the seal completed questionnaire to the researcher in order to guarantee their anonymity.

3.2 Measures

3.2.1 Organizational Citizenship Behavior (OCB) Questionnaire

The Chinese citizenship behavior questionnaire has been developed by Farh, Earley and Lin [31] with five dimensions (20 items): identification with the company, altruism toward colleagues, conscientiousness, interpersonal harmony and protecting company resources. The Chinese citizenship behavior questionnaire was applied for this study because this study was taken in Chinese culture – Taiwan and this questionnaire was designed specifically for participants in ethnic Chinese societies. A 6-point rating scale was used to evaluate nurses' OCB, so that a higher score means higher OCB. Example items include "Willing to stand up to protect the reputation of the hospital" (identification with the company); "Willing to assist new colleagues to adjust to the work environment" (altruism toward colleagues); "Complies with company rules and procedures even when nobody watches and no evidence can be traced" (conscientiousness); "Uses position power to pursue selfish personal gain" (interpersonal harmony); and "Conducts personal business on company time" (protecting company resources).

3.2.2 Knowledge Sharing Questionnaire

Ajzen and Fishbein [24] defined behavioral intentions as the subjective probability of an individual to engage in a certain behavior. In other words, it is the extent to which someone is willing to perform a certain behavior. In this research the subjective probability of hospitals' nurses engaging in knowledge-sharing behaviors was measured. The questionnaire includes thirty questions based on Davenport and Prusak's [23] concept and developed by Hwang [32] including three dimensions: reciprocity, reputation, and altruism. Example items include "I intend to share knowledge in order to have a support from team member" (reciprocity); "I intend to share knowledge which leads to admire from my colleagues" (reputation); and "I intend to share knowledge because I have ideals to my work" (altruism).

3.2.3 Empowerment (EP) Questionnaire

The four dimensions of empowerment were measured with multiple items developed and validated by Spreitzer [27]. There are totally 12 items for this part including four dimensions with each 3 items: meaning, competence, self-determination, and impact. Example items include "The work I do is very important to me" (meaning); "I am confident about my ability to do my job" (competence); "I can decide on my own how to go about doing my work" (self-determination); and "My impact on what happens in my department is large" (impact).

IV. RESULTS

4.1 Reliability analysis and CFA

For OCB questionnaire, the results of the CFA showed moderate fit (CFI = .92, NFI = .87, TLI = .88, RMSEA = .08), which required deletion of the items with factor loadings lower than .50. The overall scale's reliability has been to be acceptable ($\alpha = .86$). In terms of knowledge sharing questionnaire, the results of the CFA showed acceptable fit (CFI = .93, NFI = .95, TLI = .96, RMSEA = .09), which required deletion of the items with factor loadings lower than .50. The overall scale's reliability coefficient (alpha) was .92. In the aspect of empowerment questionnaire, the overall scale's reliability has been to be acceptable ($\alpha = .90$). All of the items significantly loaded on their corresponding factors ($p < .0001$), and fit indexes provided evidence of good fit (CFI = .96, NFI = .94, TLI = .95, RMSEA = .08).

4.2 Effects of knowledge sharing and empowerment

The results of path analysis are presented with the standardized path coefficients (Table 1) for showing the effectiveness of the knowledge sharing and empowerment. All the paths were significantly positive effects. All the parameter estimates have acceptable statistical significance levels. In summary, the coefficient of the path from knowledge sharing to OCB was significant ($\beta = .55$, $p < .001$). In addition, the coefficient of the path from empowerment to OCB was significant ($\beta = .30$, $p < .001$).

Table 1 Results of Path Coefficients

Causal Path	Standardize Regression Weight (β)	Standard Errors	p-value
knowledge sharing→OCB	.55	.060	.001***
empowerment→OCB	.30	.074	.001***

*** $p < .001$

V. DISCUSSION AND CONCLUSION

The evidence for the direct relationship between the subordinates' knowledge sharing and OCB is an important finding, and it is in line with the theory of reasoned action (TRA) by Ajzen and Fishbein[24] who affirmed that behavior of the leading factors is the behavioral intention. In this view, OCB is influenced by the knowledge sharing intentions. However, one empirical research found an inconsistent finding [25] with this study that reported individual's OCB has a positive effect on intention to share knowledge. Because they contended employees' intention to share knowledge is likely to be influenced by OCB in today's business world and employees who perceive OCB are more apt to develop behavior intention to share knowledge. In the light of TRA, there are interdependent relationships between attitudes, intentions and behavior. Accordingly, the subordinates' knowledge sharing has an affect on OCB, vice- versa.

Previous Hwang's research [33] has also demonstrated the same mediating role of empowerment. Although the results of empowerment practices are inconsistent and unstable, the current finding contributes to a more comprehensive understanding about how empowerment works. The implications of the results contribute profoundly meaning to researchers and practicing managers. Through transformational leadership behavior empowered nurses are highly motivated, well informed and committed to the organizational goals, and thus deliver patient care with greater performance. The present results corroborate this notion and exhibit further underlying mechanisms. It appears that by empowering subordinates may also be well demonstrating knowledge sharing between the subordinates, therefore creating opportunities for them to significantly impact their work, which could lead to higher levels of OCB. Indeed, the high level of OCB is very important to the medical fields.

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