

THE INFLUENCE OF EMPLOYEE'S ATTITUDE TOWARDS WHP ON THEIR ORGANIZATIONAL COMMITMENT AND JOB SATISFACTION: A CASE STUDY IN CHINA-BASED ORGANIZATION¹

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Abstract: To date, since health problems are becoming critical to human beings all over the world, workplace health promotion (WHP) has gained more and more attention. However, few studies have tested its effects on employees' work-related behaviors such as job satisfaction, organizational commitment; especially, few relative studies have been found done in the context of Chinese organizations. In this research, the influence of employees' attitude towards their organization's workplace health policies on their organizational commitment and job satisfaction were examined in a China-based company with data collected from 123 workers and managers. The main hypotheses were that employees' attitude towards WHP were associated with (a) their job satisfaction, (b) and organizational commitment. Support was obtained for each hypothesis. Employees' attitudes towards workplace health policies were both positively related to their job satisfaction and organizational commitment. However, the hypothesis that employees' job levels related to their

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attitudes was not tested in this study. At last, implications and suggestions were given regarding developing workplace health policies in Chinese organizations in this research.

Key words: Workplace health policies, Attitude, Job Satisfaction, Organizational Commitment

1. INTRODUCTION

With developing of economy and techniques largely, one of the greatest challenges facing society is the maintenance of the health (Cox, 1997). Therefore, promoting health is not only the responsibility of the state but the work organizations and the individuals as well. The workplace is one of the most important settings influencing individual's health. Therefore, the concept of workplace health promotion (WHP) has been gaining more and more attentions. Workplace health promotion may be defined as the application of the concepts, principles and strategies developed in the *Ottawa Charter* to both the employees and the employers, and to the organizational and environmental aspects of the workplace itself (WHO, 1991) and the WHP includes all efforts made to promote well-beings and health in the contexts where individuals work (Thomson & Menckel, 1997).

1.1 Workplace Health Promotion

A large number of researches on WHP have indicated that it has benefits both on organizations and employees. First of all, workplace health promotion program has demonstrated its effectiveness in developing employees' health and lifestyle (Peersman, 1998; McMahon, 2002;). According to Chu (2000), WHP affects the employees' physical, mental, economic and social well-beings and in turn the health of their families, communities and society. Furthermore, some studies found that in the organizations that have implemented WHP, employees are more motivated and healthier because they working in an improved working environment, therefore it results in more innovations and a rise in productivity (Makrides, 2004). Also, according to a case study of Greek, in a small company that has implemented systematic WHP, ill-related absenteeism was quite low and the company had no serious accidents; moreover, both the employees and employers enjoy their improved occupational health and job satisfaction. However, the evaluation of a WHP program should consider the wider impact of WHP, not only on the occupational health outcomes but also its impact on the organizational function and organizational performance in the wider environment (Leka, 2003). Therefore, further issues regarding the effectiveness of WHP need to be addressed. Partanen (2002) proposed, the employee's attitude toward WHP is one of the three critical components in determining the feasibility of WHP. So employees' attitudes towards the WHP could be a further issue.

As far as China the biggest career population center is concerned, the idea of workplace health promotion was emerged in 1984, and the main purposes of WHP are to carry out health education and accelerate the awareness of the employed population on health, establish healthy behaviors and healthy environments for work, and reduce harmful factors to health. In recent years, there are great increases in industry in China; health and workplace safety issues are of more and more importance to China. The tentative WHP projects in Shanghai from 1993, 1995 had achieved great success (Chu, 2000). While, few researches of this field have been reported in China (Brown, 2003). Therefore, this study intended to conduct a research on the WHP and its effectiveness on employees' work-related behaviors in the context of Chinese organizations and give implications and suggestions to develop Chinese organization's WHP.

1.2 Job Satisfaction and organizational commitment

Job satisfaction is important to both employees and organizations; employees who feel satisfied with their jobs are more likely to stay with their organization and put efforts into their work (Acker, 1999,

2004). Organizational commitment is another important issue regarding employees' organizational citizenship behaviors. Mowday et al. (1982) suggested that further understanding of organizational commitment has implications to both employees and organizations (Mathieu, 1990). The most commonly studied type of organizational commitment is attitudinal (Mathieu, 1990). In addition, a widely accepted three-component model of commitment includes, affective commitment referring to the employee's emotional attachment to be involved in the organization, continuous commitment based on the cost of leaving the organization, while normative commitment referring to employee's obligation to stay with the organization (Meyer & Allen, 1991; Herscovitch, 2002; Hackett, 1994).

Chen (2003) examined the validity of three-component model of organizational commitment in six Chinese foreign-invested companies and found a reasonable fit of this model in Chinese context. However, some scholars argued that Chinese employees are emphasized to be loyal to their organizations, therefore, this research chose a China-based organization and tried to explore the relationship between WHP and employees' organizational commitment and job satisfaction; and examine the predictors of organizational commitment in the Chinese context.

1.3 Research questions

There are some previous researches that have examined the predictors of job satisfaction (e.g., Acker, 2004), examined the influence of role conflict, role ambiguity, and perceived social support on worker's job satisfaction; Noblet (2003) revealed that social support and job characteristics accounted for a large proportion of employees' job satisfaction. Moreover, some studies have examined the relationship between employees' attitudes and their organizational commitments (Rafaeli, 1986; Mathieu, 1990); research by McCaul (1995) proposed that organizational commitment is a global attitude that employees adopt to their organization; in addition, numbers of researches have examined the antecedents and consequences of organizational commitment. For instance, both social support and work design have been found positively related to the development of organizational commitment (Eisenberger, 1990; Parker, 2001). Moreover, organizational support theory suggested that perceived organizational support would strengthen employees' affective commitment to the organization (Rhoades, 2001). Another research conducted by Tannenbaum (1992) suggested that training fulfillment was positively related to development of organizational commitment.

There are other researches' findings demonstrated that organizational commitment correlated with job satisfaction (Morrow, 1983; Reichers, 1985; Mathieu, 1990). Also, some findings provided support to that the job satisfaction is an antecedent of organizational commitment (Williams, 1986, Mathieu, 1990), in contrast, Bateman (1984) indicated the opposite causation. Moreover, lots of studies have found that organizational tenure and age have a positive impact on the employees' organizational commitment, because of alternative employment opportunities tending to be decreased with aging (Allen & Meyer, 1993; Mowday et al., 1982; Gregersen & Black, 1992).

Based the literature, this research conducted a case study and tried to: describe the WHP polices in these Chinese organizations, find out what kind of WHP is expected by their employees; explore how did the employees assess their workplace polices, examine whether employees' evaluation over workplace polices are associated with their organization commitment and job satisfaction, inspect if the employees' evaluation over workplace polices are associated with their positions in the organizations and give some suggestions for developing workplace health policies in Chinese organizations in future.

1.4 Objectives and hypotheses of the present study

As mentioned before, WHP includes all the efforts made to improve employees' health in the workplace. Especially, the following issues are proved to be fairly important in promoting employees' health, 1) the comprehensive WHP model includes the health practice, psychosocial environment and physical environment (Makrides, 2004); 2) Noblet (2003) pointed out that the social support and job

control accounted for great proportion in influencing the workers' psychosocial health; 3) general social context is also a target for workplace health promotion intervention (Peltomaki, 2003); 4) training, workplace culture and the relationship with the colleagues have been tested as important factors in promoting employees' mental health (Secker, 2003). This research seeks to find out and assess employees' attitudes over these factors.

According to the literature reviewing, proposing the following hypotheses:

Hypothesis1: Employees' attitudes towards their workplace health policies are associated with their job satisfaction.

Hypothesis2: Employees' attitudes towards their workplace health policies, their job satisfaction and tenure are associated with their job satisfaction.

We proposed that the managers were clearer with their workplace health policies, therefore, the third hypothesis is:

Hypothesis3: Different levels of employees hold different attitudes toward their workplace health policies. Managers have more positive attitudes than workers

2. METHOD

2.1 Participants

The questionnaires were distributed to two sub-companies of a China-based film manufacturing company, which produces chemical for the films and the other company produces films.

Totally, 237 questionnaires had been distributed randomly by the human resource assistants in both companies; the participants were from a range of job positions include the managers, safety staff, product line workers and professional staffs. 193 volunteers returned the questionnaires. Of the 193 volunteers, 123 complete data were available from 193(64%). These 123 participants constituted this research sample. The final sample included 30 from the chemical sub-company and 93 from the film sub-company. There are 89 females, the average age of the final sample is 35 and the average organizational tenure is 14 years.

2.2 Procedure

The questionnaires were assigned randomly in the work time in the organization. Both companies provided a box to collect the returned questionnaires. All the questionnaires' were returned voluntarily. No names appeared on the questionnaires, participants were assured of confidentiality. No one in the organization assessed the completed questionnaires and the assistant sent all the sealed questionnaires to the researcher.

2.3 Questionnaire

The researcher, based on the literature and the target organization's policies, developed the *Attitude Towards Organization's Workplace Health Policies Questionnaire* to measure employees' attitudes towards the following facets: (1) the support from the organization and the circumstance, (2) The work design, (3) Work condition, (4) Training in terms of coping with risky problems at work, and (5) physical check-up. The reliability test for the questionnaire shows satisfactory coefficient (Cronbach's Alpha=.893) for the whole sample; and .874 for men and .901 for women.

2.4 Measures

This research combined three questionnaires and has four sections. The first section has 12 questions and measures the employees' attitudes towards their workplace health policies, the second section has 9 questions and measures employee's organizational commitment and the third section measures employee's job satisfaction by 3 items. The last part is optional and to ask employees' comments and suggestions to develop this company's relative policies.

All measures were based on 7-point Likert-type scales ranging from strongly disagree (1) to strongly agree (7) with neither agree nor disagree (4) as the midpoint.

2.4.1 Organizational commitment and job satisfaction

Organizational commitment was assessed with 9 items developed by Cook and Wall (1980). The OC score ranges from 7 to 63. This measure has been tested with satisfactory reliability. The overall job satisfaction was assessed by the three-item scale developed by Cammann et al, (1979); and the JS score ranges from 3 to 21.

2.4.2 Employees' attitude towards WHP

Based on the literature, researcher picked the aspects from workplace health policies that have been tested as important to develop the employees' health: the social supports, work design, work condition etc. In addition, we contacted the manager of the organization who in charge of this field of safety and health and got details of their company's workplace health policies and combined with the important factors.

In the questionnaire, the 1st, 2nd and 3rd items measure employees' perceived support from their organization and atmosphere, the 4th and the 5th items measure employees' awareness of the WHP, the 6th and 7th items examine attitudes to the training programs in coping with health and risk problems, the 8th items measure employees' attitude to the work-design, the item 9th and 10th measure attitude regarding work condition; the 11th and 12th items measure employees' perception over the facility of physical check-up.

After finishing designing the attitude questionnaire, a pilot test was put up with a sample of 10 persons in the organization to ensure the clarity of the wording and the instructions.

3. RESULTS

3.1 Summary

To test the first hypothesis, Pearson's correlation is used to test the relationship between attitude and job satisfaction. The participants' scores on each item of the attitude questionnaire came into their overall attitudes to their workplace health policies; in addition, the scores of employees' job satisfaction and organizational commitment were counted in the same way. Also, the relationships between job satisfaction and employees' perceived social support, their attitudes towards the work design and work conditions were examined by Pearson's correlation.

In terms of the second hypothesis, regression was conducted to test the influence of employee's attitudes towards WHP, their job satisfaction, job position, gender and organizational tenure on their organizational commitment. As the focus of organizational commitment, the attitude to WHP, organizational tenure, gender, position and job satisfaction served as the independent variables.

Means, standard deviations for all main study variables show in Table 1. The result shows that employees strongly agree that the facility of “physical check-up ” provided by the organization is necessary; in contrast, employees showed the least favor on their break rooms.

Table 1 Descriptive Statistics, and Bivariate Correlations (N=123)

	M	Sd.	OC	JS	OA	AWD	AWC	AT	APC	AOS
OC	14.220	3.508	1							
JS	38.707	9.638	.637(**)	1						
OA	54.772	13.900	.611(**)	.425(**)	1					
AWD	4.317	1.752	.429(**)	.423(**)	.710(**)	1				
AWC	7.228	3.024	.380(**)	.239(**)	.767(**)	.532(**)	1			
AT	10.699	2.679	.520(**)	.416(**)	.752(**)	.453(**)	.418(**)	1		
APC	10.155	2.516	.514(**)	.286(**)	.727(**)	.381(**)	.500(**)	.474(**)	1	
AOS	11.233	2.418	.587(**)	.456(**)	.892(**)	.630(**)	.605(**)	.582(**)	.578(**)	1

** Correlation is significant at the 0.01 level (2-tailed). (OC=Organizational commitment; JS=Job satisfaction; OA=Overall attitude; AWD=Attitude to work design; AWC=Attitude to work condition; AT=Attitude to training; APC=Attitude to physical check-up; AOS=Attitude to organizational support)

3.2 Test of Hypotheses 1.

As correlations showed in Table 1, employees’ attitudes towards organization’s workplace health promotion positively correlate with their job satisfaction, with high coefficient of .425($p < .01$). Moreover, as the attitude scale includes items which measures employees’ attitude towards their perceived social support, their work design, work conditions and training program regarding coping with risk and health problems, correlations between these factors and their job satisfaction were also tested.

The results showed that not only the employees’ overall attitudes significantly related to their job satisfaction, employees’ perceived support from the organization and the atmosphere ($r = .432, p < .01$), their attitudes towards the training program regarding coping risk ($r = .416, p < .01$), attitudes towards work design ($r = .423, p < .01$), work condition ($r = .239, p < .01$), physical check-up ($r = .286, p < .01$) showed significant correlation with their overall job satisfaction.

3.3 Test of Hypothesis 2

To test the second hypothesis, a regression was conducted. Table 2 presents the result of the regression. The result showed that employees’ attitudes towards WHP ($\beta = .440, p < .01$), employees’ organizational tenure ($\beta = .140, p < .05$) and their job satisfaction ($\beta = .444, p < .01$) were positively related to organizational commitment. Gender and job position are not significantly associated with the organizational commitment. The R Squared .569 shows that variables from all the five factors accounted for 56.9% in the variance of organizational commitment.

The result fully supports the hypothesis 2; these findings suggest that employees’ attitudes to their workplace health policies may have important effects on the development their organizational commitment.

3.4 Test of Hypothesis 3

An independent sample t-test was conducted to examine if there are true differences between different levels of employees in their attitudes towards the WHP to test the third hypothesis. The t-test compared the means of workers' attitudes and managers' attitudes. The results showed that there was no significant difference between workers' and managers' attitudes ($t=.816$, $p=.416$). Therefore, the third hypothesis was not supported by this research.

Table 2 Regression Analysis

Model		Unstd. Coe.		Std. Coe.	t	Sig.	Adju. R ²
		B	Std. Error	Beta			
1	(Constant)	.054	4.695		.011	.991	.551
	Attitude	.305	.047	.440	6.489	.000	
	Tenure	.133	.059	.140	2.264	.025	
	Job Sat.	1.220	.186	.444	6.570	.000	
	Position	1.195	2.979	.025	.401	.689	
	Gender	1.062	1.307	.049	.813	.418	

Predictors: (Constant), gender, JS, tenure, position, attitude Dependent Variable: Organizational commitment

4. DISCUSSION

The purpose of this study was to investigate the influence of employees' attitude to their workplace health policies on their organizational commitments and job satisfactions, provide insight into the workplace health policies in a China-based company. Some studies have examined the positive effects of the workplace health promotion intervening in employees' health and organizational productivity. This research used widely recognized standardized measures of commitment and job satisfaction. The result revealed that employees' evaluation of their workplace health policies are significantly related to and predictive of organizational commitment and job satisfaction among Chinese employees.

An assessment of feasibility of workplace health policies is a prerequisite of WHP program. There are three basic factors that needed to be evaluated, they are: (1) health hazard, (2) employees' acceptability of WHP and their need for hazard reduction, (3) the supporting social context (Partanen, 2002). The current research examined the role of employees' attitudes towards WHP in their organizational citizenship behaviors in a China-based organization. This study developed a questionnaire to measure employees' attitudes towards their workplace health policies. This questionnaire has showed satisfactory coefficient (Cronbach's Alpha=.893) for the whole sample, and .874 for men, .901 for women. The means of 131 employees' job satisfaction and organizational commitment were 14.2 (Range from 3 to 21) and 38.7 (Ranges from 9 to 63).

The result indicated that employees showed moderate attitudes towards their WHP with the mean score of 4-5 on most items. Among all the questions which measure their attitudes, employees showed the less favor on their break room and showed the higher level of acceptance of physical check-up. In addition, the research results showed a significant relationship between their attitudes towards the break room and their organizational commitment. It means employees with more positive attitudes to their break and canteen room are more likely committed to their organization. However, Sharmin and Rahman (1997) argued that there was a need for rest-breaks to recover from mental fatigues (Ahasan, 2002). In addition, a break may reduce physical loading (Ahasan, 2002). Obviously, the break and canteen room

play an important role in affecting employees' health ($r=.266, p<.01$). This research gave implications for running successful WHP in China: more attention should be paid to the develop employees' break rooms, the hygiene issues of the food, etc.

As expected, the result suggested that employees' attitudes towards their workplace health policies positively associated with their job satisfaction. That means employees with more positive attitudes towards their WHP are more likely satisfied with their jobs. Moreover, among the overall attitudes, employees' perceived support from the organization and their supervisor, their evaluation on their work design and training program were also strongly related to their job satisfaction. This result is consistent with previous researches (Noblet, 2003; Acker, 2004).

It have been supported that high commitment associated with increased productivity and lower turnover, organizational scientists have been struggling to find out the antecedents of organizational commitment (Hackett, 1994). As we discussed above, there are three components in organizational commitment, *Normative commitment* (Employees' attachment based on motivation to conform to social norms regarding attachment), *affective commitment* (an emotional attachment to the organization) and *continuance commitment* (attachment based on the accumulation of values such as pension, self-investment). In contrast to in west, Chinese organizations always emphasize employees' loyalty to their organizations to survive and seek for effectiveness (Brislin, 1993; Cheng, 2003), while in most government-owned organizations which practicing whole-life employment, employees are not afraid of losing their jobs. However, in this study, employees' organizational commitment was significantly influenced and predicted by employees' attitudes towards the WHP.

Not surprisingly, employees' attitudes towards WHP play an important role in influencing their organizational commitment. Since such attitude includes their attitude towards social support, the work characteristics and work conditions etc, the result was consistent with the previous findings which examined the relationship between organizational commitment and attitudes to work design and social support (Eisenberger, 1990; Parker, 2001). This implicated that, employees' affective commitments were effected positively by perceived care from their organizations, satisfaction with the training program regarding dealing with risk problems in work, convenient and comfortable break and canteen room, careful physical check-up.

Although attitude towards WHP was an important predictor of organizational commitment, they only accounted for part variance in organizational commitment. Tenure and job satisfaction were also related to the organizational commitment. As far as the tenure and job satisfaction in predicting organizational commitment were concerned, the findings is consistent with the literature researches (Allen & Meyer, 1993; Mowday et al., 1982, Gregersen & Black, 1992).

In the study, we expected that managers have more positive attitudes to the WHP because they were clearer about the WHP; while the result did not support the hypothesis. No significant difference between their attitudes was found. This result suggests that the job level makes no difference in employees' attitudes towards their WHP. Also, this issue may due to the small sample size of managers; there were only eight managers in the participants.

The study hypothesized that gender to be related to organizational commitment. Harrison (1998) conducted a research to compare the organizational commitment between genders in Mexico, and found that females were less committed to their organizations than males, because usually females paid much more attention to their families. As the Chinese women have the same tendency as Mexicans. While the result showed that there was no significant relationship between gender and development of organizational commitment. It may also due to the small sample size, and further research may examine the influence of gender factor in a bigger context.

5. LIMITATIONS AND SUGGESTIONS FOR FURTHER STUDIES

The sample of this research was limited to one organization and a specific location. Therefore, the results couldn't be generalized to all employees in the big social context of China, and should be used carefully. Comparing among various organizations may be a valuable direction for future.

Though this research used the well-established measures by Cook and Wall (1980), by Cammann (1979) to test organizational commitment and job satisfaction. These measures could not be absolutely culture free, which may have negative impact. So, developing more improved measures in different culture context will be a quite valuable work in future.

This research enables us to examine the correlations of each variable, but this study has not taken the personality issues in exploring employees' attitudes, job satisfaction and organizational commitment, therefore we should be careful about attributing all the results to workplace health policies itself.

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