

Factors Affecting Organizational Commitment of Employees in Healthcare Sector of Kathmandu Valley

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Abstract

In today's context the demand for healthcare service has increased due to people's awareness on the importance of health and quality of life. Though there is a lot of advancement in medical technology employees are considered an important asset of an organization. Employees' commitment is important matter to consider because the presence of committed employees helps in reducing absenteeism, delays and turnover in the organization. So, the aim of the study is to investigate the factors affecting organizational commitment of employees in healthcare sector of Kathmandu Valley. In order to fulfill the objectives of the study, the survey was conducted using a well-structured and self-administered questionnaire. The sample of 185 was randomly selected from sampling frame of 4683 employees of 11 private hospitals of Kathmandu Valley. Data were analyzed using descriptive statistics, correlation and regression analysis. The study revealed that the level of employee commitment is moderate in hospitals of Kathmandu Valley. The findings derived from multiple regression analysis confirmed that organizational reward and work-life balance are important factors that positive and significantly affect organizational commitment. It indicates that higher the organizational reward and work-life balance, higher would be the organizational commitment. However, supervisory support, training and development and organizational culture do have insignificant influence on organizational commitment of employees in health care sector of Kathmandu Valley. Thus, it is assured that the results from the study are more valid and they could have a significant policy implication for concerning health sector authorities of Nepal.

Keywords: Organizational commitment, organizational culture, organizational reward, supervisory support, work-life balance

Background

For every individual, society and organization health care is a basic need. The demand for healthcare services has increased due to people's awareness in the importance of health and quality of life. Due to the emerging health issues employee commitment has become an inevitable part of every organization. As human resources are the crucial assets of any organization, their knowledge and skills aids in achieving competitive advantage (Amdan, Rahman, Shahid, Bakar, Khir & Demong, 2016). Even though

many factors could lead to the success and failure of an organization, one of the factors that could lead to a healthy organizational environment is organizational commitment. Organizational commitment focuses on employee's dedication to working. Govindasamy and Jayasingam (2009) define organizational commitment as a desire of an employee to continue existing work in a specific organization.

Mensah, Akvoko and Ellis (2016) explained that organizational commitment is the degree to which an employee identifies himself/herself as an employee of an organization. To understand the concepts of organizational commitment a large number of studies have been conducted. Among them Meyer and Allen (1991) three-component model of organizational commitment has been the central framework for research in the past decade because it is created on the complete understanding of organizational commitment. Initially, the organizational commitment was known to be single-dimensional and now has been popular for the multi-dimensional construct. The multi-dimensional construct model developed by Meyer and Allen consists of; affective, continuance, and normative commitment.

Colquitt, Lepine and Wesson (2018) urged that employees who are affectively committed feel that they are fit for the organization and are satisfied with their work. Continuance commitment occurs when employees desire to stay in organization will be higher than the cost of leaving the organization. For instance; employees feel the need to stay with their organization because their salary and fringe benefits will not improve if they move to another organization. Normative commitment reflects that staying in the organization is the "right" thing to do. Normatively committed employees feel that leaving the organization will have a harmful effect. Saleem, Yaseen and Zahra (2018) defined that healthcare sector is a sensitive service place where extreme dedication by all the personnel is required. Therefore, developing a better understanding of organizational commitment is necessary for improving management decisions, enhancing work performance and strengthening the relationship between the employee and employers.

The organization aims to bring productive and satisfied employees but still many times employees themselves disengaged in their work for different reasons (Colquitt, Lepine & Wesson, 2018). Past studies explained that there are various factors that may affect the organizational commitment of employees namely; communication, career development, working environment. Chelliah (2015) state that it is not just enough for an organization to have skillful and intellectual employees but it is also necessary to find out the right talented employee to stay long in the organization. Thus, to improve the performance of an organization it is necessary to identify the factors that play a vital role in engaging the employees.

This study acts as a basis for further investigation in the area of healthcare sector. The focus is to address the factors that affects organizational commitment of employees in the health care sector of Kathmandu Valley. The result of this study would give information regarding the organizational commitments to the human resource managers and employees working particularly in health care sector and different other sectors as well. Also, the findings from the study would deliver the information about the organizational commitments among several employee's working in the different healthcare sectors of Kathmandu Valley.

Theoretical Framework and Review of Literature

The concept of organizational commitment has begun in 1960. Since then, the growing interest in understanding the concept has been increased. Over the years, there have been three approaches for defining and measuring organizational commitment. The three theories of organizational commitment are; the calculative approach, the attitudinal approach and the multi-dimensional approach.

The calculative approach is based on the “side-bet” theory of Howard Becker. Becker introduced the term “side-bet” in 1960. Cohen (2007) defined the term side-bet as anything of value that an individual has invested in and that may be lost or deemed worthless if he/she leaves the organization. Meyer and Allen (1984) described that employee are committed because they have made some hidden investment by remaining in a particular organization. An investment namely; seniority, income, status, development of employee's specific skills and the use of benefits from an organization such as; reducing the mortgage and even the friendship. The theory further explains that the fear of losing such benefits makes an employee committed to the organization.

The *attitudinal approach* is also known as the “psychological approach” or “organizational behavior”. In this approach, commitment is termed as affective commitment and value commitment. Porter, Steers, Mowday and Boulian (1974) elaborated that commitment under an attitudinal approach can be categorized into three factors; strong acceptance, participation, and loyalty. The theory explains that employees feel committed to the organization because they easily accept the objectives and identifies the organizational goals and values.

The multi-dimensional approach argues that the calculative and the attitudinal approach were based on a single-dimensional approach. After that, the leading multi-dimensional approach was established by Meyer and Allen in the year 1984. The theory explains the three scales of commitment namely; affective commitment,

continuance commitment and normative commitment. According to the theory, affective commitment was designed to measure the emotional attachment of employees to the organization. Whereas, continuance commitment was designed to measure an individual perception of the costs associated with leaving the organization. And normative commitment was designed to express an obligation by an employee to continue with the organization.

Hsiao, Chang & Tu (2011) found that organizational culture was strongly related to organizational commitment among nursing executives. Awan, Ahmed and Shahid (2011) reported that there is a great impact of salary/incentives, interpersonal conflicts, employees-organization interface, job satisfaction and organizational culture on organizational commitment of the employees. Sakthivel and Jayakrishnan (2012) studied nurses working in the public and private sector hospital in the Cuddalore district of Tamilnadu, India. Result revealed a positive relationship between work-life balance and organizational commitment. Yasar, Emhan & Eber (2014) found that there is a positive impact of supervisory support on organizational commitment. Azeem & Akhtar (2014) indicate a significant relationship between work-life balance, job satisfaction and organizational commitment. Sethi (2014) conducted a study on women employees working in public and private sector banks. The results from the study showed that there is positive relation of work-life balance with organizational commitment. Maina & Waiganjo (2015) reported that there is a strong positive relationship between employee commitment and reward practices in Kenya's public health sector.

Rahmani, Azari, Vasokolae, Mirghaed & Raadabadi (2015) found a positive and significant relationship between organizational culture and organizational commitment among employees in hospital. Nkosi (2015) documented that there is a significant effect of training on employee commitment, retention and performance enhancement. Shah, Hussain & Rahman (2016) indicated that the organizational commitment of healthcare employees depends on the training and development practices. Fabiene and Kachchhap (2016) conducted a study on employee commitment among healthcare professionals suggests in enhancing employee commitment by creating a favorable working environment and providing training opportunities to employees. Khaliq, Naeem & Khalid (2016) documented that the organizational rewards both monetary and non-monetary, supervisor support, career development opportunities, work-family support, and favorable job conditions have a positive impact on organizational commitment.

Li (2018) found that the work-life balance of employees has significant and positive impact on affective commitment, continuance commitment and normative

commitment. Shabir and Gani (2019) examined the impact of work-life balance on organizational commitment of women health-care workers. The study documented a significant relationship between work-life balance and organizational commitment. But it was also found that work-life balance has a negative relationship with continuance commitment. Basnet (2019) revealed that there is a positive relationship between training and education, teamwork, organizational culture and organizational commitment.

In the context of Nepal, Shrestha (2015) revealed that the commitment of employees is significantly affected by the role of the supervisor and the training program of the organization. Timalina, K.C., Rai and Chhantyal (2018) found a moderate level of organizational commitment of nursing faculty within Kathmandu Valley. Ghimire (2018) investigated the relationship between trust, justice and organizational commitment at hospitals in Nepal. The study found a significant impact and positive association of distributive justice, procedural justice and interactional justice with trust in management and employees' commitment. Kharel (2018) reported that there is a significant effect of reward management on affective commitment. Shrestha and Parajuli (2020) revealed that the organizational commitment of employees is predicted by supervisory support/ behavior. Saud (2020) documented that job characteristics have significant positive effects on organizational commitment. Pandey (2020) reported that there is a positive relationship between work-life balance and employee commitment.

The studies done so far do not have consistency in their findings of various studies concerning the studies on organizational reward, supervisory support, training and development, work-life balance, organizational culture, job characteristics, career opportunities, compensation, justice, teamwork and organizational commitment. However, the objective of this study is to investigate the factors affecting organizational commitment of employees in healthcare sector of Kathmandu Valley. More specifically, it only examines the effect of organizational reward, supervisory support, and training and development, work-life balance, and organizational culture on organizational commitment of employees in healthcare sector.

Methodological Aspects

The research design adopted in this study is descriptive and causal research designs. All the employees working in private hospitals of Kathmandu Valley are the population for this study. There are altogether 32 private hospitals in Kathmandu Valley, from which 11 hospitals were selected as a sample unit for the study. The employees working in 11 hospitals consist of 4,863 which creates the sampling frame of the study. Using random sampling, 185 employees have been selected as the respondents for the study

(refer to Table 1).

The study has been focused on quantitative data of primary source using a well-structured and self-administered questionnaire. A total of 245 questionnaires were distributed to the employees of the different healthcare sector in Kathmandu Valley. Out of which only 185 responses were received where the response rate is 75.51 percent. Questionnaire has been designed in five-point Likert scale items (where 1 indicates strongly disagree and 5 indicates strongly agree). It is divided into two sections; the first section includes demographic information of respondents and the second section includes the statements that are used to find out the responses regarding factors affecting organizational commitment of employees. Organizational commitment is dependent variable and organizational reward, supervisory support, training and development, work-life balance and organizational culture are the independent variables used in the study.

Table 1

List of Sample Hospitals and Sample Observations

The table consists of different private hospitals of Kathmandu Valley which has been taken as a sample, and also the number of employees working in each hospital along with the number of respondents.

S.N.	Name of hospitals	Number of employees	Sample observations	Percentage of sample
1	Green City Hospital	260	26	10.0
2	Grande International Hospital	738	28	3.7
3	Norvic Hospital	500	21	4.2
4	Vayodha Hospital	350	14	4.0
5	Kantipur Dental Hospital	200	16	8.0
6	Kathmandu Medical College and Teaching Hospital	800	12	1.5
7	HAMS	450	14	3.1
8	Sumeru Hospital	300	10	3.3
9	B&B Hospital	750	15	2.0
10	Star Hospital	300	12	4.0
11	Chirayu National Hospital	190	17	8.9
	Total	4863	185	-

Source: Online Questionnaire Survey 2020

Organizational commitment items are adapted from Visanh & Xu (2018) for measuring affective, continuance and normative commitment that consist of five

items. Organizational reward is measured using five items adapted from Bam, Badal & Bhattarai (2018) for measuring intrinsic and extrinsic reward. Supervisory support is measured using five questions adopted from Rhoades, Eisenberger & Armeli (2001). Training and development is measured utilizing five items adopted from Refkin (2015). Work-life balance items were adopted from Talukder (2016) for measuring proper arrangement between work and life that consists of five items. And lastly organizational culture is measured using five items adapted from Alvi, Hanif, Adil, Ahmed & Veinhardt (2014) for measuring bureaucratic culture, supportive culture and innovative culture.

After collecting required data, the reliability analysis has been conducted to confirm the internal consistency of the Likert scale items of the questionnaire using Cronbach’s alpha which is presented in Table 2.

Table 2

Reliability Test of Scale Items

This table presents the variable code, explanations of the variables under study, number of scale items, and coefficients of Cronbach's Alpha for the variables.

Code	Variables	Items	Cronbach’s Alpha
OC	Organizational commitment	5	0.787
ORD	Organizational reward	5	0.900
SS	Supervisory support	5	0.937
TD	Training and development	5	0.904
WLB	Work-life balance	5	0.865
OCL	Organizational culture	5	0.919

Source: Online Questionnaire Survey 2020 and Author's calculation using SPSS

The value of Cronbach’s alpha for each of the variables is above 0.600, so the data are considered as reliable.

Model

The model estimated in this study analyzed the factors affecting the organizational commitment of employees in the healthcare sector of the Kathmandu Valley. The functional relationship between variables are as follows:

Organizational commitment = f(organizational rewards, supervisory support, training and development, work-life balance, organizational culture)..... i) The functional

relationship shown in equation (i) can be restated in linear regression model as $OC = \beta_0 + \beta_1 ORD + \beta_2 SS + \beta_3 TD + \beta_4 WLB + \beta_5 OCL + e_i$
(ii) Where, OC = Organizational commitment, ORD = Organizational reward, SS = Supervisory support, TD= Training and development, WLB= Work-life balance, OCL= Organizational culture and e_i is the error term. β_0 is constant and $\beta_1, \beta_2, \beta_3, \beta_4$ and β_5 are the beta coefficients of the independent variables to be estimated.

Organizational Reward

Fareed, Abidan, Shahzad, Amen & Lodhi (2013) asserts that reward is the benefit that employees receive in return for their work during the job. Reward system makes employee more committed to the organization (Haq, Jindong, Hussain & Anjum, 2014). There are two types of reward namely; intrinsic and extrinsic reward. Mottaz (1985) explained that extrinsic reward is a financial reward given to individual in the form of pay, promotions, fringe benefits and security. Whereas, intrinsic reward is an inner feeling of employee's satisfaction which originates from power possessed, achievements and personal growth (Oriarewo, Agbim&Owutuamor, 2013). Maina & Waiganjo (2015) documented a positive relationship between reward and employee commitment. The study conducted by Korir & Kipkebut (2016) indicated that there is a significant positive effect of reward on affective, normative and continuance commitment. Kharel (2018) found a positive relationship between reward management and affective commitment.

The majority of the finding shows that there is a positive relation between organizational reward and organizational commitment. Therefore, the following hypothesis is being set.

H1: There is a positive relationship between organizational reward and organizational commitment.

Supervisory Support

Ferreira (2014) defined that supervisor are the mediator of organization in guiding and appraising employees they play a crucial role in employee's personal growth and development, as well as providing employees feedback regarding job performance. Yasar, Emhan & Ebere (2014) reported that there is a positive correlation between supervisor support and organizational commitment. Ferreira (2014) found that affective commitment is significantly and positively related with supervisory support. Kalidass & Bahron (2015) documented that there is significant relationship between perceived supervisor support, organizational support and organizational commitment. The majority of the finding shows a positive relationship between supervisory support

and organizational commitment. Therefore, the following hypothesis is being set.

H2: There is a positive relationship between supervisory support and organizational commitment.

Training and Development

Bashir & Long (2015) argued that as a learning process by which the management, human resource or the trainer of the organization or outside the organization provides their employees purposeful opportunities in structured manner. Brum (2007) revealed that training has positive impact on commitment and turnover of employees. Nkosi (2015) found that training has a significant effect on employee commitment. Shah, Hussain & Rahman (2016) revealed that healthcare employees commitment depends on the training and development practices. Ocen, Francis & Angundaru (2017) found positive relationship between training and employee commitment.

The majority of the finding shows that there is a positive relation between training and development and organizational commitment. Therefore, the following hypothesis is being set.

H3: There is a positive relationship between training and development and organizational commitment.

Work-life Balance

Ali, Kundi, Qureshi & Akhtar (2014) defined work-life balance as the proper arrangement between work -career, ambition; and life -health, pleasure, leisure, and family. The satisfaction and effective working at home and workplace with a less of role conflict is also known as work-life balance (Clark, 2000). Hofmann, and Stokburger-Sauer (2017) found that work-life balance has a positive effect on employee's commitment. Li (2018) revealed that work-life balance of employees has significant and positive impact on organizational commitment. Tufail & Bilal (2018) concluded that work-life balance of employees has positive impacts on organizational commitment through perceived organizational support. Shabir & Gani (2019) found that there is positive relationship between work-life balance and affective and normative commitment of employees. But it was found that work-life balance has negative relationship with continuance commitment.

The majority of the finding shows that there is a positive relation between work-life balance and organizational commitment. Therefore, the following hypothesis is being set.

H4: There is a positive relationship between work-life balance and organizational commitment.

Organizational Culture

Yusuf (2020) defined that culture is the beliefs, values, and norms made by the organization and shared to the member to achieve organizational goals. Hsiao, Chang and Tu (2011) found a positive relationship between organizational culture and organizational commitment. Momeni, Marjani and Saadat (2012) revealed that there is a significant and positive relationship between organizational culture and organizational commitment. Rahmani, Azari, Vasokolaee, Mirghaed and Raadabadi (2015) found a positive and significant relationship between organizational culture and organizational commitment in the staffs of hospital. Katper, Chaudhry, Tunio and Ali (2020) found organizational culture significantly influence on organizational commitment. Lee (2020) found that there is a positive impact of organizational culture and capabilities on commitment of healthcare sector employees.

The majority of the conclusion shows a positive relationship between organizational culture and organizational commitment. Therefore, the following hypothesis is being set.

H5: There is a positive relationship between organizational culture and organizational commitment.

Results and Discussion

In this section descriptive statistical analysis, correlation and regression analysis has been performed. The results of the study are presented in a systematic order and the outcomes have been interpreted with discussion comparing with the previous works.

Descriptive Statistics

Table 3 shows the descriptive statistics of dependent and independent variables. It shows the employee's opinion for all the variables ranges from minimum one to maximum five.

Table 3

Descriptive statistics

The table shows the descriptive statistics of dependent and independent variables. The dependent variable is (OC) organizational commitment and independent variables are organizational reward (ORD), supervisory support (SS), training and development

(TD), work-life balance (WLB), and organizational culture (OCL)

Variables	Mean	S.D.	Min	Max	N
OC	3.23	0.90	1	5	185
ORD	2.70	1.15	1	5	185
SS	3.13	1.08	1	5	185
TD	3.47	0.96	1	5	185
WLB	3.53	0.84	1	5	185
OCL	3.21	1.03	1	5	185

Source: Online Questionnaire Survey 2020

The average mean score of organizational commitment is 3.23 which is above three and standard deviation is 0.90. It implies that organizational commitment of employee's is found moderate in hospitals of Kathmandu Valley. Likewise, the average mean score of organizational reward is 2.70 with the average score of standard deviation 1.15. The below average mean of organizational reward shows that employees are unsatisfied with the reward structure of the organization. Similarly, the average mean score of supervisory support is 3.13 and the standard deviation is 1.08. It indicates that supervisory support is average in the organization towards their employees. Also, the average mean score of training and development is 3.47 and standard deviation is 0.96. Furthermore, the average mean score of work-life balance is 3.53 with standard deviation of 0.84. This implies that the employees work-life balance is satisfactory in the organization. Moreover, the average mean score of organizational culture is 3.21 and 1.03 standard deviation. This indicates that organizational culture is found moderate in hospital of Kathmandu Valley.

Relationship between Dependent and Independent Variables

Using Pearson correlation coefficient matrix, the relationship between dependent and independent variables has been examined. A correlation refers to the statistical measure of the relationship between two variables.

Table 4 shows that there is a positive relationship between organizational commitment and organizational reward. The relationship is significant at one percent level of significance. This indicates that increase in organizational reward increases organizational commitment. The study is in line with the findings of Maina and Waiganjo (2015). Similarly, there is a positive relationship between organizational commitment and supervisory support which indicates that higher the supervisory support higher will be the organizational commitment. The relationship is significant

at one percent level of significance. This finding of the study is similar with the finding of Yasar, Emhan and Ebere (2014).

Table 4

Relationship between Dependent and Independent Variables

The table presents the relationship between dependent and independent variables that has been examined using Pearson correlation coefficient matrix. The correlation coefficients are based on 185 observations. The dependent variable is OC (organizational commitment). The independent variables are ORD (organizational reward), SS (supervisory support), TD (training and development), WLB (work-life balance), OCL (organizational culture).

Variables	OC	ORD	SS	TD	WLB	OCL
OC	1	.751**	.616**	.392**	.509**	.568**
ORD		1	.763**	.471**	.554**	.698**
SS			1	.575**	.518**	.631**
TD				1	.363**	.482**
WLB					1	.458**
OCL						1

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

Source: Online Questionnaire Survey 2020

Moreover, there is a positive relationship of training and development with organizational commitment it indicates that increase in training and development increases the organizational commitment. The relationship is significant at one percent level of significance. This finding is in consistent with the finding of Shah, Hussain and Rahman (2016). Likewise, there is a positive relationship between work-life balance and organizational commitment at one percent level of significance. This is consistent with the study by Sethi (2014). Also, there is a positive relationship between organizational culture and organizational commitment which indicates that a better organizational culture increases organizational commitment. The relationship is significant at one percent level of significance. This finding is similar to the findings of Basnet (2019).

Impact of Dependent Variable on Independent Variables

Impact of dependent variable on independent variables has been examined using ordinary least square regression (OLS). A process for estimating the relationship between a dependent variable and one or more independent variables is known as regression analysis. It provides a directional relationship and defines the degree of effect

of one variable on another one. The independent variables are organizational reward, supervisory support, training and development, work-life balance and organizational culture. Whereas, the dependent variable is organizational commitment.

Table 5

Estimated Regression Results of Dependent Variable and Independent Variables

The result is based on 11 private hospitals of Kathmandu Valley with 185 observations of 2020 survey using a linear regression model. The model is $OC = \beta_0 + \beta_1 ORD + \beta_2 SS + \beta_3 TD + \beta_4 WLB + \beta_5 OCL + ei$. Where, the dependent variable is OC (Organizational commitment) and the independent variables are organizational reward (ORD), supervisory support (SS), training and development (TD), work-life balance (WLB), and organizational culture (OCL).

Model	Regression coefficients of					Adj. R_bar2	SEE	F-value	
	ORD	SS	TD	WLB	OCL				
1	1.641 (14.593)***	0.589 (15.389)***				0.562	0.596	236.832	
2	1.629 (10.145)***	0.513 (10.569)***				0.376	0.712	111.694	
3	1.957 (8.520)***		0.367 (5.762)***			0.149	0.831	33.199	
4	1.306 (5.267)***			0.574 (7.995)***		0.255	0.778	63.915	
5	1.631 (9.048)***				0.500 (9.334)***	0.319	0.744	87.128	
6	1.244 (6.419)***	0.491 (8.041)***	0.062 (0.974)	0.133 (2.102)**		0.572	0.590	82.893	
7	0.845 (3.610)***			0.338 (4.872)***	0.373 (6.564)***	0.394	0.71	60.846	
8	1.272 (6.138)***	0.355 (5.412)***	0.004 (0.054)		0.262 (4.047)***	0.423	0.684	45.987	
9	1.183 (5.350)***	0.470 (7.017)***	0.049 (0.715)	0.006 (0.101)	0.128 (2.006)**	0.048 (0.781)	0.569	0.592	49.503

Note. 1. Figures in parenthesis are t-values. 2. The asterisk (***) , (**) sign indicates that the results are significant at 1 and 5 percent level of significance respectively. 3. Organizational commitment is a dependent variable.

Source: Online Questionnaire Survey 2020

Table 5 shows the beta coefficient of variable organizational reward is positive and significant. This means that higher the organizational reward, higher would be the organizational commitment. This finding is similar to that of Khaliq, Naeem and Khalid (2016). Likewise, beta coefficient is positive and significant for supervisory support which means when supervisory support increases organizational commitment

of employees also increases. This finding is similar to the finding of Haq, Jindong, Hussain and Anjum (2014).

Similarly, the beta coefficient of training and development is positive. This means that higher the training and development higher will be the organizational commitment. This finding is similar to the finding of Fabiene and Kachchhap (2016). Furthermore, the beta coefficient of work-life balance is positive. This means that higher the work-life balance, higher will be the organizational commitment. This finding is similar to Li (2018). Also, the beta coefficient of organizational culture is positive which means that increase in organizational culture increases organizational commitment. This finding is similar to the finding of Awan, Ahmed and Shahid (2011).

Multiple regression model shows that organizational reward and work-life balance have a significant influence at 1 percent and 5 percent level respectively. It implies that higher the reward structure and work-life balance of employees higher will be their organizational commitment. The predictive power of the model is 57.2 percent which is highest among all the models. Likewise, the variables work-life balance and organizational culture have a positive and significant impact on organizational commitment at 1 percent level. Similarly, supervisory support and organizational culture has positive and significant effect on organizational commitment at 1 percent level.

The full model of multiple regression shows that only the variables organizational reward and work-life balance have positive and significant influence on organizational commitment at 1 percent and 5 percent level respectively. Though, supervisor support, training and development and organizational culture have positive influence on organizational commitment but are statistically insignificant. However, the model is significant at 1 percent level and the predictive power of the model is 56.9 percent.

The computation of histogram illustrates that the data appear to be normal. Multiple regression models reveal that there is no problem of multicollinearity since variance inflation factor (*VIF*) of all independent variables is far below than 10 and tolerance (*TOL*) is ≤ 1.0 . Therefore, there is no evidence of multicollinearity in the regression models. Scatter plots of standardized residuals in all the regression models depicted that there is no pattern observed in the plots indicating data used in the study appear to be homoscedastic. Thus, the regression models used in this study fulfill all the regression assumptions. So, it is assured that the results are more valid and they could have a significant policy implications of concerned health sector authorities of Nepal.

Conclusions

The major conclusion of this study is that organizational commitment of employees is found moderate in hospitals of Kathmandu Valley. The status of the organizational factors in terms of organizational reward is below average which indicates that employees are not satisfied with the reward structure of the organization. Similarly, the status of the organizational factors in the healthcare sector of Kathmandu Valley in terms of supervisory support, organizational culture, and training and development are average. This leads to the conclusion that employees are moderately satisfied with their supervisory support, training and development programs and organizational culture in the organization. Furthermore, the status of work-life balance is found moderate indicating that the employees' work-life balance is satisfactory in the hospitals of Kathmandu Valley.

The study further concludes that organizational reward and work-life balance are the factors highly influencing organizational commitment. This indicates that increase in organizational reward and work-life balance increases organizational commitment of employees. The findings from the study also conclude that supervisory support, training and development and organizational culture are the factors weakly influencing organizational commitment. Since, they are considered as an important factor that needs to be improved in hospitals of Kathmandu Valley. Therefore, the hospital administrators that are willing to improve employee commitment should focus on providing a supportive environment, effective training program and good working environment where employee feel heard and care about. Further, other factors like job characteristics, compensation, leadership style, career opportunities also affect the organizational commitment of employees so it is suggested that the future researchers can incorporate these variables in their studies in the days to come. Based on the study findings and conclusions, it is recommended that healthcare administrators should focus on providing a supportive environment, effective training program and good working environment to improve employee commitment in healthcare sector of Kathmandu Valley.

This study has some limitations. The study is limited to medical and administrative staffs, of private hospitals of Kathmandu Valley. Therefore, the result may not be generalizable to other sector organizations. The researcher was able to administer the online questionnaire of 185 with the respondents in the course of data collection. The reliability of the conclusions of the study depends upon the accuracy of the opinion provided by the respondents. Mainly Likert-scale questions were used in the questionnaire. It is not obvious that only the factors undertaken in the study affects the organizational commitment of employees.

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