

# **The Influence of Servant Leadership on Loyalty and Discretionary Behavior of Employees: Evidence from Healthcare Sector**

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This study proposed that servant leadership influences loyalty and discretionary behavior of employees in healthcare sector. It was hypothesized that servant leadership affects organization citizenship behavior (OCB) through affective organizational commitment. A sample of 387 doctors from 14 hospitals was selected through purposive sampling technique. A Likert scale questionnaire was utilized for data collection. Covariance based Structural Equation Modeling in AMOS was utilized to assess the theorized model. The results supported the hypothesized relationships. Leaders serving others will inspire and motivate followers to serve others. The findings can be utilized to refine current methodological approaches in this area, guiding theoretical improvement and policy development related to loyalty and discretionary behavior in healthcare.

**Keywords:** Discretionary Behavior; Loyalty; Servant Leadership; Structural Equation Modeling.

## **1. INTRODUCTION**

Leadership plays a prominent role in achieving organizational objectives. An organization can acquire the top talent but still fails to achieve its objectives if its employees are not motivated. Leadership is about motivating people to work towards the achievement of organizational goals. It is also one of the main factors that affect an individuals' intention to stay with or quit an organization. Servant leadership is a philosophy of leadership that stresses serving fellow member instead of satisfying self-interest. It has overthrown the old-styles of leadership. It is more useful than other leadership styles and has changed the perspective of leadership and management. By sharing power, leaders empower others to act. A leader's prominence comes from serving others (Greenleaf, 1977; 1996).

Servant leadership has immense potential for improving individual's loyalty and commitment to organization. Because of its emphasis on follower's growth, shared leadership and community building, it is more linked to organization citizenship behavior (Graham, 1991; Laub, 2003; Podsakoff et al., 2000). Since loyal employees perform over and beyond the call of duty, leadership behaviors play a central role in enhancing OCB.

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Social exchange theory (Blau, 1968) suggests a useful and interesting viewpoint as an illustrative mechanism for how servant leadership influences employees' behaviors in the workplace. Social exchange theory proposes that if staff members perceive that organization consider their welfare and appreciates their role and impact, then it will produce sense of responsibility in employees to return positive behavior and involve in activities which help organization (Liden et al., 1997).

Servant leaders help and support group members as well as serve organization. A leader can promote loyalty and discretionary behavior through servant leadership. Numerous other studies (Shehzad et al., 2013; Allamehet al., 2013; Ramli & Desa, 2014) have uncovered association of servant leadership and OCB. Similarly, several studies (Lok & Crawford, 2004; Drury, 2004) informed that organizational commitment is influenced and improved by appropriate leadership style. Similarly, organizational commitment had significant positive relationship with OCB and that committed employees exhibited a higher degree of discretionary behavior. Previously, many other studies (Ramli & Desa, 2014; Hill, 2008; Rimes, 2011; Mahembe & Engelbrecht, 2013) also reported that servant leadership significantly predicts organizational commitment. An appropriate relationship with fellow members leads to increased commitment (Meyer & Allen, 1997). Meyer and Herscovitch (2001) argued that loyal employees demonstrate increased level of discretionary behavior. High affective commitment of employees enhances employees' discretionary behavior.

Even though the association of servant leadership with OCB has been tested in many other industries (Hayden, 2011; Schneider & George, 2011; Shahzad, et al., 2013; Bombale, 2014) however, insufficient research exists that focuses on servant leadership in healthcare sector. Given that scarcity of resources, particularly in the existing economic environment, it was imperative to find the distinctive contributions and relative influence of servant leadership in health sector. Thus, this study was carried out to find influence of servant leadership on employees' loyalty and discretionary behavior in healthcare sector. The findings can be utilized to refine current methodological approaches in this area, guiding theoretical improvement and policy development related to loyalty and discretionary behavior in healthcare.

## **2. LITERATURE REVIEW**

### **Servant Leadership**

A novel form of leadership popularized by Greenleaf (1970) is totally distinct from other leadership practices (Covey, 2006; Blanchard, 2003; Sipe & Frick, 2009; Lawrence & Spears, 2004). Servant leadership emphasizes serving fellow beings instead of satisfying personal interest (Greenleaf, 1977). A servant leader empowers and serves fellow members (Spears, 1996; 2010; Sendjaya & Sarros, 2002; Spears, 2010). It is concerned with leading individuals at an advanced degree by taking them to a higher level (Blanchard, 2003).

The four basic principles of servant leadership includes service to others, empowerment and cooperation. Servant leaders are empathic, aware, persuasive, curative, influential, foresighted, compassionate, cooperative, and work towards community and group development (Greenleaf, 2003). Some of the traits can be learned and easily developed while others are hard to acquire (Barbuto & Wheeler, 2007).

Servant leadership empowers and creates sense of collaboration among group members. The empowerment and collaboration is driven by leader's vision and his or her commitment to develop and serve followers (Smith, 2005; Dierendonck, 2011). Further, servant leaders exhibit justice, stewardship, social approval, modesty, and offer direction resulting in empowered and autonomous group members. Moreover, servant leaders focus on improving individual's growth and self-efficacy. It is about participative decision-making and ethical behavior which enhances the individual employee's development while promoting to the quality of organizations (Spears, 2005). Service and sympathy to group members is deep-rooted in servant leader (Laub, 1999).

### **Organization Citizenship Behavior**

Any discretionary behavior that is not identified by an organization's compensation system but valuable to organization's operations is referred to organization citizenship behavior (Organ et al., 1988). A non-compulsory conduct which is neither part of individual formal responsibilities nor it is considered as portion of an employee's output but promotes the organization's effectiveness (Moorman & Blakely, 1995; Podsakoff, Organ & Mackenzie, 2006). OCB includes factors such as personal industry, individual initiative, loyal boosterism and interpersonal helping (Graham, 1989).

Podsakoff et al. (2000) and Nobari et al. (2014) argued that discretionary behavior of employees is greatly influenced by leadership function of organization. Due to its emphasis on group development, shared decision making and supporter's growth, servant leadership is closely associated with OCB (Laub, 2003). Several other studies occupied the viewpoint that servant leadership affects employee's behaviors (Wayne et al., 2002; Hutchison & Garstka, 1996; Allen, Shore & Griffith, 2003; Sendjaya et al., 2008) while various scholars (Hayden, 2011; Shahzad et al., 2013; Bombale, 2014) reported servant leadership as the predictor of OCB. Numerous other scholars (Graham, 1991; Hill, 2008; Güçel & Begec, 2012) reported that servant leadership predicts organizational commitment, OCB and trust.

### **Organizational Commitment**

Commitment is an emotional or psychological condition with three elements that imitates an ambition, a need and an obligation to carry on service. It is the degree of an individual's contribution and recognition with a specific organization (Robbins, 2012). Affective commitment is an individual's psychological connection to, recognition with and participation in the organization. Presumed loss of abandoning an organization is referred to as Continuance commitment. Normative commitment is an individual working with organization due to sense of responsibility to maintain service. The three elements are different but interrelated. An employee may undergo diverse levels of the three components (Meyer & Allen, 1991; 1997).

Appropriate leadership styles have influence and improve organizational commitment (Lok & Crawford, 2004; Drury, 2004). Organization culture and management style supported by leadership significantly influences employees' commitment (Nierhoff, Enz & Grover, 1990).

Purba et al. (2015) reported affective commitment as mediator of association of personality and OCB. Individuals have an advanced degree of commitment when they believed that the company and supervisor favor them. Further, such employees were innovative, had greater involvement and more aware regarding their duties (Eisenberger et al., 1990; Koopman, 1991). A good relationship with group members leads to advanced degrees of commitment (Meyer & Allen, 1997). Similarly, Schneider and George (2011) reported that servant leadership significantly predicted organizational commitment. This study has taken into consideration only the affective commitment because of its consistent positive relationship with OCB.

### **Conceptual Underpinning and Research Hypotheses**

The study proposes that servant leadership influences employees' loyalty and discretionary behavior in organization. To examine the proposed theoretical model, the following relationships were hypothesized and tested:

*Hypothesis H1:* Servant leadership is a significant predictor of organization citizenship behavior.

*Hypothesis H2:* Affective commitment mediates the association of servant leadership and organization citizenship behavior.

## **3. RESEARCH METHODOLOGY**

### **Sampling and Data Collection Procedure**

The study conducted survey from 387 doctors from 14 hospitals in which 3 were public sector hospitals while 11 were private sector hospitals. A Likert-scale questionnaire having five points was utilized for data gathering. The participants were selected through purposive sampling technique. Costello and Osborne (2005) recommended 10 to 15 respondents per item for factor analysis. Thus, the required sample size was 510 respondents. Out of the total respondents identified, 394 were accessed and the questionnaires were administered to them. Of the total respondents, 27 were Head of Departments (HODs). The servant leadership questionnaires were administered to HODs only. After carefully analyzing all the administered questionnaires, 387 were selected for further analysis.

### **Instrument**

The study utilized the modified version of the scales developed by Barbuto and Wheeler (2007), Podsakoff et al., (1990) and Meyer and Allen (1997) for measuring servant leadership, OCB and affective commitment respectively.



#### 4. DATA ANALYSIS

##### Descriptive Statistics

Table 1 depicts the demographic features of participants.

Table 1

##### *Demographic Features (N= 387)*

Demographic Variables		Frequency	Mode	S.D
Age	Below 30 years	89	2.00	50.74
	31- 35 years	169		
	36- 40 years	78		
	Above 40 years	51		
Gender	Male	334	1.00	198.69
	Female	53		
Designation	HOD	27	6.00	39.37
	Senior Registrar	48		
	Junior Registrar	54		
	Trainee Registrar	35		
	MO	81		
	TMO	134		
Qualification	MBBS	223	1.00	41.71
	MBBS+ FCPS	164		
Experience	Below 5 years	144	1.00	20.22
	5 to 10 years	137		
	Above 10 years	106		
Department	ENT	45	5.00	32.22
	Cardiology	17		
	Gastro	21		
	Guinea	65		
	Oral/maxillofacial	15		
	Medical	36		
	Orthopedic	41		
	Neuro	29		
	Others	118		

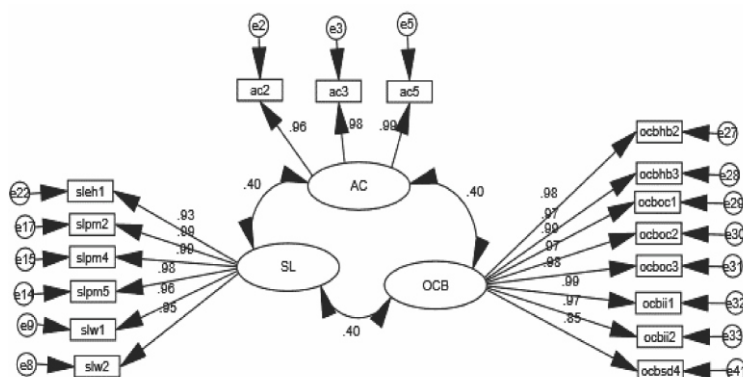
Source: primary data.

##### Model Assessment

To assess the measurement model and validate the factor structure a Pooled Confirmatory Factor Analysis (PCFA) was executed in AMOS. The items exhibited factor loadings greater than 0.70 as displayed in Figure 1. The inter-constructs correlation was less than 0.8. The measurement model was assessed using several model fit indices

namely CMIN/DF, RMSEA, CFI, NFI, GFI, TLI and PMR. The measurement model fulfilled the fitness standards: CFI= .944, GFI= .958, TLI= .978, NFI= .959, PMR= .029, RMSE= .036 and CMIN/DF= 2.293. Moreover, Herman single factor test was conducted. The total variance was .23 which is an indication of the fact that data collected was free from common method bias.

**Figure1. Pooled Confirmatory Factor Analysis**



The measurement model was evaluated for reliability and validity. Critical ratios (CR) and Cronbach's alpha values were estimated to ascertain construct reliability (Hu & Bentler, 1999). The alpha values were above 0.70 and critical ratios were above 0.60. Average Variance Extracted (AVE) was computed to ascertain convergent validity (Fornell & Larker, 1981). The results of reliability and validity analysis show that all the constructs exhibited AVE values greater than the threshold value of .50. Moreover, items exhibited factor loadings greater than 0.8 as displayed in Table 2. Thus, all the constructs demonstrated reliability and validity.

**Table 2**

*Results of Validity and Reliability Analyses*

Construct	Items (factor loadings)	$\alpha$	CR	AVE	MSV
Servant Leadership	I am good at assisting followers with sensitive problems (.93).	.81	0.99	0.93	0.158
	I supports fellow members to dream big (.99).				
	I am very convincing (.99).				
	I am good at persuading others (.98).				
	I consider the moral role of organization in society (.96).				
	I consider that our company should function as a community (.95).				
Organization	I help fellows in need (.98).	.83	0.99	0.92	0.159
Citizenship Behavior	I help my fellows in work-related problems (.97).				
	I am always careful of my duty hours (.99)				
	I obey discipline even without monitoring (.97).				
	I opine my coworkers to follow rules and regulation (.98).				
	I voluntarily take extra duties (.99).				
	I inform others of any opportunity of improvement (.97).				
	I often meet my deadlines (.85).				

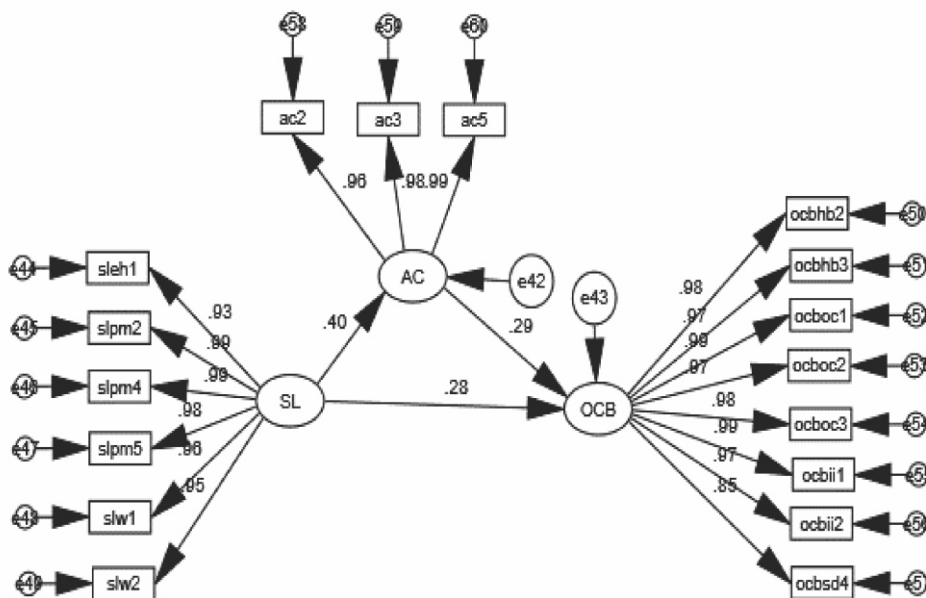
Affective Commitment	I have emotional connection with my company (.96).	.82	0.98	0.95	0.159
	I own my company problems (.98).				
	I have sense of belongingness to my organization (.99).				

Significance level=  $p < 0.001$ .

### Testing of Hypotheses

The hypotheses of the study were assessed using Covariance based Structural Equation Modeling in AMOS. The findings indicated that servant leadership significantly predicts organization's citizenship behavior ( $\beta = 0.40$ ;  $P\text{-value} = 0.001$ ;  $t\text{-value} = 5.114$ ). The standardized regression weight was .28 which indicates that when servant leadership increases by 1 standard deviation, organization's citizenship behavior increases by 0.28 standard deviation or 1 percent change in exogenous variable servant leadership causes 28 percent change in the endogenous variable organization citizenship behavior. To overcome the problem of multicollinearity, Variance inflation factor (VIF) was computed. The VIF was below .50 which demonstrates that the model had no issue of multicollinearity. Moreover, the  $f^2$  values were between 0.40 and 0.63 which demonstrates larger effect size of relationships. Therefore, Hypothesis H1 was accepted.

**Figure 2: Proposed Theoretical Framework**



### Mediation Analysis

For mediation analysis the direct, indirect and total effects of servant leadership, affective organizational commitment and servant leadership were computed in AMOS.

The direct effect of servant leadership on OCB was .28. The indirect effect was .116 ( $0.40 \times 0.29 = .116$ ) while the total effect (direct +indirect effect) was 0.396 (.28+.116). The findings indicate that direct effect of servant leadership on OCB decreased when mediator affective commitment was incorporated in model but association of servant leadership with OCB was still significant. It can be inferred from these results that affective commitment is partial mediator of association of servant leadership and OCB. Hence, hypothesis H2 was accepted.

Table 3

*Standardized Estimates of Paths among SL, AC and OCB*

Hypotheses	Std. Beta	S.E.	t-value	f <sup>2</sup>	P-value	VIF	Decision
H1: SL -----> OCB	.28	.108	5.114	0.47	***	0.985	Accepted
SL -----> AC	.40	.039	2.519	0.62	***	1.242	
AC -----> OCB	.29	.172	3.834	0.49	***	0.895	
H2: SL -----> AC -----> OCB	.23	.137	4.279	0.41	***	1.22	Accepted

Significance level:  $p < 0.001$ .

## 5. RESULTS AND DISCUSSION

The current study proposed that servant leadership significantly influences the loyalty and discretionary behavior of employees in health sector. To empirically test the proposed relationship, it was theorized that servant leadership significantly predict OCB and affective commitment act as mediator between them. The findings revealed that servant leadership significantly predicts organization citizenship behavior. Several previous studies also reported similar findings (Organ et al., 2006; Allameh et al., 2013; Sendjaya et al., 2008; Nobari et al., 2014; Hayden, 2011; Güçel & Begec, 2012; Shehzad et al., 2013). Servant leaders help and support group members. Group member's attitude is greatly influenced by leadership style. The degree to which leader serves fellow members and takes interest in their welfare would determine the quality of the association between organization and employees and would influence members' behaviors. Leaders serving others will inspire and motivate followers to serve others.

The findings also revealed that association of servant leadership with OCB was mediated by affective commitment. Previously, several other previous studies (Hill, 2008; Mahembe & Engelbrecht, 2013; Rimes, 2011; Ramli & Desa, 2014) also found servant leadership as predictor of affective commitment and servant leadership. Evidence by Rhoades and Eisenberger (2002) supported the viewpoint that servant leadership enhances loyalty and discretionary behaviors and minimizes turnover intentions. Servant leadership results in increased loyalty (organizational commitment) of group members for the organization who will exert additional effort (organization citizenship behavior) to work for organization. Thus, discretionary behavior is partly shaped and regulated by the loyalty of employees who work in a setting where the leader serves his/her group members.

## 6. CONCLUSION AND IMPLICATION

It can be concluded from the findings of the study that servant leadership is a significant predictor of OCB. Moreover, affective commitment mediates the association of servant leadership and OCB. Servant leaders will inspire and motivate followers to

serve others which will lead to increased loyalty and discretionary behavior of employees in organization.

The findings can be utilized to refine current methodological approaches in this area, guiding theoretical improvement and policy development related to loyalty and discretionary behavior in healthcare. An implication of current study is that leaders serving others will inspire and motivate followers to serve others.

### Limitations and Future Research Directions

The study relied on self-reported data. Associated with which is the problem of common method variance. Future researchers can focus on uncovering the influence of servant leadership on other important organizational factors such as service quality, return on investment, work life balance, employees' performance, well-being and innovation.

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