

# Benevolent Leadership and Organizational Citizenship Behavior: Evidence from Healthcare Sector

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**Abstract:** *The study aims to examine the role of benevolent leadership in enhancing the organizational citizenship behavior of healthcare sector employees. The data was collected from 152 employees working in hospitals of Haryana, India. Further, data was analyzed using the PLS-SEM approach and bootstrapping procedures. The findings of the study confirm the positive association between benevolent leadership and organizational citizenship behavior of employees working in hospitals. The study highlights the significance of benevolent leadership. The study will help hospital management to understand the importance of benevolent leadership in enhancing the organizational citizenship behavior of hospital staff.*

**Keywords:** *Benevolent Leadership, Organizational Citizenship Behavior, Healthcare Sector, PLS-SEM.*

## 1. INTRODUCTION

Every economy is dependent upon the medical sector, which is considered as in charge of people's health and well-being. The Indian healthcare sector is currently one of the biggest in terms of both employment and revenue generation. Hospitals, medical tourism, medical equipment, health insurance, clinical trials, outsourcing, telemedicine and medical devices are all included in the category of healthcare. Any industry's effectiveness and efficiency are determined by the attitudes and behavior of its workforce. Because of these factors, it becomes significant to comprehend employee behavior and the different factors that affect it in order to ensure the effective operation of businesses in a specific sector. In an effort to boost patients' experiences with healthcare services, people working in the healthcare sector are expected to fulfill additional responsibilities for example, organizational citizenship behavior (OCB) in addition with their in-role service behavior (Garavan et al., 2021). Individuals' voluntary behaviors that are neither specifically nor directly acknowledged by the official incentive system are referred to as OCB. However, OCB promotes the organization's effective functioning (Organ, 1988). OCB are complimentary and voluntary actions that help the organization to operate smoothly. Personnel who exhibit OCB will assist their coworkers, carry out beneficial tasks, etc., creating a favorable work environment that is crucial for delivering outstanding services.

OCB of the employees are influenced by several factors. According to Atta and Khan (2016) there is a negative relation between perceived organizational politics and OCB. Psychological empowerment and OCB have a significant and positive relationship (Newman et al., 2017; Turnipseed & VandeWaa, 2020). Kumar et al. (2009) found a favorable association between conscientiousness and OCB. Cronyism may lead to a decrease in desired job outcomes (like organizational commitment, job satisfaction and OCB) and an increase in undesirable job outcomes like poor employee performance, turnover intention, deviant workplace behavior (Saleem et al., 2018; Turhan, 2014). OCBs oriented towards organization (OCBO) and those oriented towards the individuals (OCBI) should be identified separately (Williams & Anderson, 1991). The current study aims to explore the influence of benevolent leadership BL on OCBI. Like other organizations, healthcare sector organizations should also recognize the significance of leadership and use its tenets to improve behavior of personnel.

### Benevolent Leadership

In the Asian context, BL has been recognized as a desired approach of leadership (Chan & Mak, 2012; Chen et al., 2014). Karakas and Sarigollu (2012) proposed the notion of BL as a way to encourage productive improvements in the

organizations. Community responsiveness, spirituality, vitality and morality are the four streams which together make up the framework of BL. Care, admiration, empathy and respect are traits that define BL (Chen et al., 2014). The leaders think it is their civic responsibility to take care of their staff. Consequently, management treat their staff members like family and extend both professional and personal support. A leader's concern for their staff members' daily operations is referred to as personal support. While professional support describes how a leader promotes their team members' efforts and provides chances for professional development. Benevolent leaders provide comprehensive and long-term care for the well-being of both individuals and organizations. A benevolent leader would support their subordinates' career development, give them opportunities to learn from their failures, and teach them effective performance techniques (Wang & Cheng, 2010). BL can be referred as a type of personalized care in the workplace, such as giving subordinates the chance to make corrections, offering coaching and mentoring, attempting to resolve their work-related issues and demonstrating concern for their professional growth. According to Wang and Cheng (2010), it may exist as a type of individual attention outside of the workplace, which includes treating subordinates like family, assisting them in personal emergencies, and demonstrating holistic concern beyond of professional ties.

### **Organizational Citizenship Behavior**

Numerous employee behaviors have been identified by organizational experts which are critical for the smooth operation of the organizations (Kanwal et al., 2019). Some of such behaviors are role-specific, while others are extra-role activities which are not predetermined. The OCB refers to people's voluntary behaviors which contribute to the smooth operation of the organization but are neither explicitly nor directly acknowledged by the official incentive structure (Organ 1988). In its enormous literature, OCB has been expressed in a variety of ways (e.g., Borman & Motowidlo, 1993; Organ, 1988, 1997). At the heart of all definitions, however, is the notion that OCB are those behaviors that support organizational performance even when they are not mandatory to the work or job. Therefore, illustrations of OCB include assisting coworkers, attending functions that are not obligatory and so on. As suggested by Organ (1997); Williams and Anderson (1991) OCB directed to individuals (OCBI) and those directed to the organization (OCBO) should be differentiated. It makes sense to suggest that OCB that is more specifically designed to support the enterprise and maintain harmony in a social transaction between the enterprise and its employees should be regarded as OCBO. Therefore, OCBO is more likely to be a direct result of employees' perceptions of their job attributes. On the contrary, OCBI that concentrates on assisting people at work, appears to have at most indirect effects on preserving equilibrium in the relationship between the company and its employees. As several social psychology research have demonstrated (Isen & Levin, 1972) such behaviors may in fact comprise a natural manifestation of individual's emotions at work rather than an intentional attempt by employees to restore equilibrium with the organization.

### **Benevolent Leadership and Organizational Citizenship Behavior**

According to Kozak and Uca (2008), leadership approach is a crucial managerial tool because, if applied correctly, it may improve service performance, foster positive relationships with employees and improve the organizational atmosphere. Effective leaders motivate their staff members to accept responsibility for duties, think proactively to solve organizational issues, and make decisions that can improve the team's and the company's well-being. Employees' attitudes and behaviors at work can be positively affected by benevolent leaders (Chan, 2017). The leadership literature (Karakas & Sarigollu, 2012) argues that followers of highly benevolent leaders must improve their performance and behaviors in organizations. Many research investigations have demonstrated the advantageous impact of BL on follower outcomes, including work performance (Chan & Mak, 2012) and inventive behavior (Gumusluoglu et al., 2017), and OCB (Tang & Naumann, 2015). Furthermore, Nguyen et al. (2023) confirmed how and why BL results in OCBO and OCBI, each of which benefits both the organization and other people. BL enhances followers efforts and positive actions on behalf of organization. Hence, it is considered as an effective approach of leadership.

**H<sub>3</sub>:** Benevolent leadership has a significant relationship with OCBI

## **2. RESEARCH METHODOLOGY**

### **Sample and Procedure**

The present study uses data gathered from front line employees from the hospitals located in Haryana, India. Data collection began by asking for consent from HR managers of the above-mentioned organizations. All necessary ethical guidelines, including autonomy, justice and beneficence were adhered to in order to gather data. After taking permission from hospital management, the data was collected in blended mode i.e. online and offline. The responses were gathered from clinical and non clinical staff of respective hospital. 152 healthcare workers provided the information. Male respondents made up 62.5% of the sample; they were primarily under 35 years old (42.1%) and had less than five years of job experience (51.3%).

**Measures**

*Benevolent Leadership:* BL was measured using Cheng et al.’s (2004) 11-item scale (1: “strongly disagree”; 6: “strongly agree”).

*Organizational Citizenship Behavior:* OCBI was measured by using Lee and Allen’s (2002) 16-item, 7 point likert scale (1: Never; 7: Always) i.e. 8-item for OCBI.

**Common Method Bias**

There was a high chance of common method bias because the data was cross-sectional and self-reported. Thus, both statistical and procedural techniques were used to reduce this risk (Podsakoff et al., 2003). Randomization of questions and simple, straightforward wording are examples of procedural precautions. It separates the concepts being studied psychologically (Podsakoff et al., 2012). Variation inflation factor (VIF) values were stated below the inner limit of 5.0 in the statistical measures, suggesting that there was no common method bias in the study (see Table 1).

**Measurement Model Assessment**

The authors examined the constructs’ convergent validity and reliability using PLS-SEM, as indicated in Table 1. The internal reliability was confirmed by evaluating the composite reliability values, which exceeded the 0.70 criterion (Hair et al., 2019). Convergent validity of the constructs was also established with AVE values greater than 0.50. HTMT ratios were evaluated in order to confirm the constructs’ discriminant validity. These ratio values fell within the permissible range of 0.85, as indicated in Table 2 (Henseler et al., 2015).

**Table 1: Reliability and Validity Analysis**

	VIF	CR	AVE	Outer Loadings
<b>BL1</b>	2.233	0.945	0.635	0.779
<b>BL10</b>	2.551			0.784
<b>BL11</b>	2.254			0.775
<b>BL2</b>	2.642			0.791
<b>BL3</b>	2.905			0.798
<b>BL4</b>	3.455			0.832
<b>BL5</b>	2.504			0.815
<b>BL6</b>	2.685			0.825
<b>BL7</b>	2.786			0.801
<b>BL8</b>	2.255			0.759
<b>BL9</b>	2.584			0.802
<b>OCBI1</b>	2.763	0.927	0.656	0.807
<b>OCBI2</b>	2.543			0.805
<b>OCBI3</b>	3.818			0.877
<b>OCBI4</b>	2.768			0.764
<b>OCBI5</b>	2.566			0.802
<b>OCBI6</b>	2.104			0.73
<b>OCBI7</b>	4.04			0.799
<b>OCBI8</b>	4.122			0.883

*Source: Author’s own work*

**Table 2: Discriminant Validity (HTMT Ratio)**

	BL	OCBI
<b>BL</b>		
<b>OCBI</b>	0.477	

*Source: Author’s own work*

**Structural Model and Hypothesis Testing**

First, the structural model’s VIF values were evaluated to look for any problems with multicollinearity. Nevertheless, the fact that every value is below the 5.00 threshold suggests that there isn’t a problem with the suggested study. Additionally, the “model fit” was evaluated using the “Standardized Root Mean Residual” (SRMR), which produced a

value of 0.07—below the cutoff value of 0.08 (Henseler et al., 2016). The statistical significance of the suggested hypothesis was then evaluated using a bootstrapping approach at 10,000 sub-samples. The results indicate that the suggested path, with path coefficient  $\beta = 0.450$ , was significant at  $p < 0.001$ .  $H_a$  was thus supported. It suggests that there is a favorable correlation between BL and healthcare workers' OCBI. Additionally, the suggested model's predictive usefulness was evaluated using fits such as  $f^2$  (see table 3),  $R^2$  (0.2) and  $Q^2$  (0.188).

**Table 3: Hypothesis Testing**

Hypothesis	Relationship	Std beta	Std error	t-values	p-values	BCI LL	BCI UL	$f^2$	Decision
$H_a$	BL → OCBI	0.45	0.06	7.527	0	0.318	0.553	0.255	Supported
	Age → OCBI	-0.03	0.059	0.501	0.616	-0.146	0.084	0.001	Insignificant
	Gender → OCBI	0.036	0.106	0.335	0.738	-0.18	0.236	0	Insignificant

Source: Author's own work

### Discussion and Implications

The planned study adds a great deal to the body of knowledge in management. This study contributes to the corpus of research on BL by showing that BL can influence personnel job behaviors (both in-role and extra-role). The study's conclusions support the implementation of OCBI, or extra-role employee behavior. The literature on BL has noted the lack of connections between BL and OCBI. The current study model suggests that in order to encourage both clinical and non-clinical employees to negotiate work flexibility with their employer, managers in Indian healthcare companies should adopt a paternalistic leadership style that is acceptable with Indian culture. Given the increasing demand patterns in healthcare facilities in recent years, the results demonstrated that OCBI is valid in the healthcare sector and successfully coupled with the proposed research model. Furthermore, the current study builds on previous studies on BL by looking at BL and OCBI in the healthcare industry.

### Limitations and Future Research Directions

Given the proposed research significance, there are certain drawbacks. First, response bias may result from the use of "self-reported cross-sectional data". It restricts the study's scope. As a result, future researchers might use multi-wave or longitudinal study designs. Additionally, the study focuses on front-line healthcare workers; further research might be done in other service areas. Our study model of BL may only be applicable to Asian transition economies with cultures similar to India because it was developed using data from India.

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