

Why Allied Health Workers Remain within their Organisations and Occupations

This research consisted of several smaller studies examining why allied health workers remain within their organisations and occupations. The studies explored the relationship between organisational embeddedness, occupational embeddedness occupational attrition intentions, organisational citizenship behaviours (OCB), counterproductive work behaviours (CWB), and whether this relationship is influenced by community factors or work sector (private, public or not for profit (NFP)). Organisational Embeddedness is described as how attached an individual is to the ethos of their organisation, whereas occupational embeddedness is described as how attached an individual is to their occupation. Community embeddedness refers to the forces outside the workplace that keep individuals in their current location.

Each area of embeddedness is composed of fit, links, and sacrifice. Fit refers to how well the individual's abilities, needs, and interests are similar to that of the organisation, occupation or community. Links refers to how many people an individual connects with in their occupation, organisation or community. Sacrifice refers to what the person would have to give up if they left that occupation, organisation, or community. Previous research suggests that the facets of fit, links and sacrifice within organisational embeddedness, occupational embeddedness and community embeddedness, will affect work-related behaviours. Furthermore, it has been reported that work sector is an influential component of embeddedness, and depending on which sector, this will change work-related behaviours of an employee. Job satisfaction, perceived employability and burnout were controlled for in all studies.

Method

The study consisted of 252 allied health workers in Australia, who completed an online questionnaire.

Results

It was found that there was no significant relationship between occupational attrition intention and organisational embeddedness, even when influenced by the work sector of participants. Though, increased job satisfaction produces a reduction in occupational attrition intention, whereas increased burnout produced an increased intention to leave their profession. There was also no significant relationship between occupational attrition intention and occupational embeddedness, when mediated by sector, though there was a significant relationship with burnout. There was also an interaction between private, public, and public NFP work sectors were significant. No influence was produced for participants working in the private NFP work sector. It should be noted that NFP sectors produced a small amount of participants, Private NFP (7), Public NFP (14).

When exploring the relationship between organisational embeddedness and occupational embeddedness predicting occupational attrition intentions, the results found both factors to be significant predictors of occupation attrition intentions. Burnout was also a significant predictor of occupational attrition intentions. However, this study found that community embeddedness does not influence the relationship between organisational embeddedness and occupational embeddedness in predicting occupational attrition intentions. Therefore, the results indicate that while organisational embeddedness and occupational embeddedness predict an individual's intention to leave their profession, the relationship is not influenced by the level of community embeddedness.

Organisational embeddedness was found to significantly predict OCB. This means that an allied health worker's attachment to his or her organisation influences additional helping behaviours in the workplace, such as assisting new employees and volunteering additional job tasks. Occupational embeddedness was not found to predict OCB in allied health workers, suggesting that the level of attachment they have to their profession does not influence extra-role work behaviours. Community embeddedness was not a significant condition needed in the relationship between organisational embeddedness and OCB. However, an allied health worker's level of community attachment did directly influence more workplace OCB. Thus, community embeddedness influenced extra-role work behaviours in allied health workers more than occupational embeddedness, though not as much as organisational embeddedness.

There was no apparent significant relationship between OCB and organisational embeddedness, within the private, public and public NFP work sectors. Further investigation as to the relationship between OCB and occupational embeddedness, was found to be the same. With the appearance that occupational embeddedness, organisational embeddedness and OCB was not dependant on sector, however the results did show that there was an apparent significance in perceived employability within sector, suggesting that an individual's perception of how easy it is to find employment differs from sector to sector.

When looking at work place behaviours the results revealed that there was no significant relationship between turnover intention, and an employee's occupational embeddedness and community embeddedness. Furthermore, an employee's embeddedness in the community had no significant effect on turnover intention. However, there was a significant relationship between turnover intention, and an employee's organisational embeddedness and community embeddedness. This would suggest that an employee's intention to leave their job is not solely dependent on how much they are embedded in their occupation but it is influenced by how embedded they are in their organisation and community. The results also found that burnout and job satisfaction had a significant effect on turnover intention.

When accounting for counterproductive work behaviours within the organisation, results from this study have shown no significant interactions between organisational embeddedness and counterproductive work behaviours. Also there was not any significant effects between occupational embeddedness and community embeddedness on counterproductive work behaviours, suggesting that there may not be an evident relationship between counterproductive work behaviours and embeddedness factors. However, there was a significant effect between burnout and counterproductive work behaviours, this would suggest that high levels of stress and fatigue would result in detrimental behaviours to the company.

Conclusion

There is sufficient evidence to show that embeddedness factors within the organisation, occupation and community have an impact on turnover intentions, occupation attrition intentions, counterproductive work behaviours and organisational citizenship behaviours. However, some were more influential than others. Hence to better understand the concepts of the embeddedness theory, it is essential that more research needs to be done, especially with chiropractors and dietitians which has had a lack in empirical research. Hopefully this research has shed new insight on the concepts of embeddedness and may act as a catalyst for future research.