

Organizational Commitment and Its Relationship to the Locus of Control Among Midwives

A field study in public healthcare institutions in the city of Biskra.

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Abstract:

The current study aimed to investigate the correlational relationship between organizational commitment and locus of control among midwives, conducted on a sample of 105 midwives working in public healthcare institutions in the city of Biskra. The study employed a descriptive approach with a correlational design. Data collection utilized the Meyer, Allen, and Smith Organizational Commitment Scale, as well as the Rotter Locus of Control Scale. The study yielded the following results:

- ✓ The level of organizational commitment was found to be moderate, with an average score of 59.65.
- ✓ Internal locus of control was predominant among midwives, accounting for 67.62%.
- ✓ There was a statistically significant correlational relationship between organizational commitment and locus of control among midwives.

Keywords: organizational commitment; locus of control; midwives.

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1- Introduction :

Any organization is concerned with ensuring the optimal utilization of its human and material resources, although the material aspect is more evident and directly addressed than the human aspect. This is due to the specificity of the human resource, which is easily influenced and affected by emerging factors. Hence, the urgent need arises to manage human resources to ensure the optimal direction of employees' efforts to achieve organizational goals.

Employee organizational commitment is one of the areas of focus for human resource management due to its relationship with organizational effectiveness and work accomplishment. Organizational commitment reflects an individual's orientation towards the organization, encompassing a strong desire to remain a member and manifesting in the employee's willingness to exert additional effort at work and achieve the highest level of performance. Committed individuals towards their organizations represent sources of strength that aid in their sustainability and competition with other organizations.

Locus of control is one of the influential dimensions of human behavior addressed by social learning theory, initially introduced by Rotter in 1954 as "reinforcement control center" and later conceptualized as "locus of control." It is a complex psychological construct that defines an individual's beliefs about the degree of personal control they can exert over themselves or their environment. (Al-Rabie,2018,380)

Locus of control relates to the individual's perception of the outcomes of events in their lives and is a fundamental variable in psychology that researchers have extensively studied. This concept has been interpreted in various ways, sometimes referred to as control center or locus of control. Consequently, it may directly correlate with many phenomena in the work environment that influence the organization and its performance, whether positively or negatively.

Therefore, the current study aims to explore this relationship through a survey conducted within a healthcare organization in the city of Biskra, specifically focusing on midwives.

2-General Framework of the Study:

2-1- Problem Statement:

The success of organizations is fundamentally tied to the human element, which is one of its most important components. Therefore, it becomes necessary for any organization to develop its human resources, both generally and particularly in the psychological and emotional aspects. Organizations strive to increase the attachment of their employees, leading them to be committed and focused on achieving its goals.

Organizational behavior represents the true translation of employees' performance of their duties within their organization, in exchange for material and moral rights they receive. One of the determinants and guidelines of organizational behavior that has attracted the attention of researchers and practitioners alike is the topic of employees' organizational commitment towards their organization. It represents the sum of the strong interaction between

individuals' characteristics and personalities, work conditions, organizational factors, societal indicators, and the general environment. Commitment is manifested in employees' willingness to exert additional effort at work. Committed individuals towards their organizations are a source of strength that aids in their sustainability and competition with other organizations.

Individual behavior is subject to their perception of themselves and their environment. Understanding and controlling behavior depends on knowing the locus of control as a fundamental variable of personality that relates to an individual's belief about which factors have the most power and control over important outcomes in their life. Is it internal factors such as skill, ability, and competence, or external factors such as luck and chance? This is known as the locus or center of control. The importance of knowing the locus of control increases as individuals bear professional and occupational responsibilities, especially if the organization has importance and impact on society, such as educational and healthcare systems, considering that their practices and behavior not only reflect on them but also extend to their surroundings.

The healthcare sector in any country is a strategic sector due to the services it provides, including care, support, prevention, and ensuring healthy growth requirements. The latter is fundamentally based at the level of maternity hospitals and pediatric hospitals, which are of utmost importance in any country aiming for development, justifying the adoption of the natural increase rate as an indicator of progress and advancement.

Midwives represent the primary human element in maternity institutions as they are directly responsible for the safety of both mother and fetus. This necessitates attention to them from recruitment to monitoring their performance and factors that could positively or negatively affect it. This is the focus of the current study, aiming to answer the following question: Is there a relationship between organizational commitment and locus of control among midwives working in public healthcare institutions in the city of Biskra?

2-2- Study Questions :

- What is the level of organizational commitment among midwives in public healthcare institutions in the city of Biskra?
- What is the predominant locus of control among midwives in public healthcare institutions in the city of Biskra?
- Is there a statistically significant correlational relationship between organizational commitment and locus of control among midwives in public healthcare institutions in the city of Biskra?

2-3- Study Variables:

Organizational Commitment: This refers to the extent to which an individual is committed to their organization where they perform their tasks. It encompasses three dimensions: affective commitment, continuance commitment, and normative commitment. Procedurally, it is reflected in the degree to which individuals in the sample respond to the Meyer, Allen, and Smith Organizational Commitment Scale adopted in the current study.

Locus of Control: It refers to the stance through which an individual justifies their behavior outcomes in different situations. It comprises two opposing dimensions: external locus of control versus internal locus of control. Procedurally, it is represented by the range of scores obtained by individuals in the sample on the Rotter Scale adopted in the current study.

2-4- Importance and Objectives of the Study:

The study derives its importance from the significance of its variables on one hand and its sample on the other hand. The importance of employees' organizational commitment has been previously highlighted as it is considered one of the key factors for the organization's success. Additionally, locus of control, as a personal characteristic, has significant implications for the level of behavior exhibited by individuals, especially those entrusted and responsible for outstanding performance tasks, such as members of the healthcare sector including midwives.

The study aims to achieve the following objectives:

- To assess the level of organizational commitment among midwives.
- To identify the predominant locus of control among midwives.
- To investigate the correlational relationship between organizational commitment and locus of control among midwives.

2-5- Literature review:

There are numerous studies that have addressed the variable of organizational commitment in relation to other organizational variables, but they mostly target industrial and productive organizations or educational institutions. Examples include the study by Ben Safia in 2014, the study by Ziane and Bousahimen in 2018, the study by Al Ayashi in 2019, the study by Moumen in 2019, the study by Kaouda and Salami in 2020, the study by Delili in 2021, and the study by Dakhkhna and Qadouri in 2021.

As for studies conducted in the healthcare sector, they are very few. Among them is the study by Saada in 2019, titled "The Impact of Organizational Commitment on Creativity among Employees in the Public Hospital Institution of Batna."

Regarding locus of control, the majority of studies target samples of students or teachers and link them to psychological variables. Studies that link locus of control to organizational variables are very scarce. Examples include the study by Badawi and Zekor in 2013, titled "Locus of Control and Its Relationship with Coping Skills with Occupational Pressures."

To the best of the researcher's knowledge, there are no published studies that have specifically focused on studying the relationship between organizational commitment and locus of control in the healthcare sector, particularly among midwives.

3-The Theoretical Aspect of the Study:

3-1- Organizational Commitment:

3-1-1- Concept of Organizational Commitment: Meyer, Allen, and Smith defined organizational commitment as: "The force that binds an individual to a path of action related to one or more goals. This force takes shape for workers in

three rules or beliefs: affective, normative, and continuance, which are directly related to their goals and those of their organization, reflecting emotional ties, perceived duties as values, and costs without return towards the organization." (Meyer, Allen & Smith, 1993, p. 539)

Organizational commitment is also defined as a psychological state describing the relationship between the employee and the organization. It has an impact on the individual's decision to stay or leave the organization. It is a fundamental conviction in the organization and its goals, and a match between these goals and the individual's goals, as well as an internal desire to stay in the organization while recognizing the costs associated with leaving the organization. Thus, effort is made to maintain this commitment from both the individual and the organization's perspectives. (Almasdi, 2011, p. 5)

3-1-2-The importance of organizational commitment: It can be summarized in the following points:

- Organizational commitment provides individuals with psychological stability, raises their morale, and gives them a heightened sense of self-confidence and satisfaction with their achievements. It helps individuals develop motivation for work and feel satisfied, joyful, and happy with every success or distinction in performing their tasks. This is an initial stage for their professional growth.
- From the organization's perspective, organizational commitment drives employees to be creative and proactive, contributing to achieving continuous good performance at work. This results in reducing costs and losses caused by underutilization of capabilities, fostering a desire to continue with the organization, and reducing turnover in the workplace. (Ben Momen, 2022, p. 85)

3-1-3- Dimensions of Organizational Commitment:

There are several classifications that have addressed the dimensions of organizational commitment. In the current study, we adopt the division proposed by Allen and Meyer in 1990, which identifies three fundamental dimensions:

- **Affective Commitment:** This dimension is influenced by an individual's perception of the characteristics that distinguish their work, such as independence, significance, required skills, proximity to supervisors, and their guidance. The extent of an individual's emotional commitment is also affected by their sense of being able to participate effectively in decision-making processes related to their work or personal matters within the organizational environment, which represents a limited form of attachment. Those with this orientation work based on a self-assessment of the requirements imposed by various work conditions, resulting in their commitment to the organization stemming from a sense of belonging and emotional attachment.
- **Normative Commitment:** This refers to an individual's sense of commitment to staying within the organization, often reinforced by the organization's good support for its employees, allowing them to

participate and interact positively not only in work implementation procedures but also in setting goals, planning, and formulating the organization's general policies. It is characterized by a high ethical attachment. Employees with this orientation are conscientious workers who act according to their conscience and the public interest.

- **Continuance Commitment:** This dimension arises from the factors that govern an individual's commitment to the organization they work for, primarily driven by the perceived value they could achieve by continuing to work with the organization compared to what they might lose by joining other entities. It is a primarily utilitarian attachment based on the benefits received from the organization. As long as the organization provides returns that exceed those offered by other organizations, the individual will continue to be committed to it. However, if better returns are anticipated elsewhere, the individual will not hesitate to transition to a different situation. Individuals with this type of attachment are opportunistic and ambitious. (KheirEldin, Al-Najjar, 2010, p. 26)

3-2- Locus of Control :

3-2-1- Definition of Locus of Control:

"Julian Rotter" in 1966 is considered the pioneer in studying the concept of locus of control, with his definition being the most common and comprehensive in studies targeting locus of control.

Rotter defined locus of control as a generalized expectation that refers to an individual's belief regarding the direction to which they attribute the control of the reasons for obtaining reinforcement. (Sharqi, Khattout, 2021, p. 334)

Lefcourt considers locus of control as a dimension of personality that influences various types of behavior. The belief that an individual can control their own affairs allows them to continue living and enjoy life, enabling them to harmonize with their environment.

This definition emphasizes that locus of control is a significant dimension of personality that has a major impact on an individual's behavior and their ability to control events, enabling them to harmonize with themselves and their surroundings. (Ben Zahri, Ben Alzain, 2012, p. 25)

3-2-2- Dimensions of Locus of Control:

The dimensions of locus of control primarily consist of two opposing dimensions:

Internal Locus: It refers to the factors inherent in the individual that they believe are responsible for the outcomes they achieve in their lives, whether successes or failures. Individuals who belong to this dimension are referred to as having an internal locus of control. They perceive that their actions and characteristics have an impact on their way of life. They believe they are responsible for the events they experience and see their behavior as a result of their actions and willpower. They attribute events to internal causes such as ability, willpower, and skill. They can determine their behavior themselves and constantly strive to improve their circumstances, adopting positive attitudes.

Causes of Internal Locus:

- **Ability:** It refers to success and speaking about motives and behavior in different situations.
- **Effort:** This involves performing tasks well and taking a leadership position while problem-solving.
- **Personal Skill:** This involves participation, exchanging emotions and compliments, harmony and compatibility with others, and self-confidence. (Al-Hayali, 2021, p.94)

External Locus: The external locus dimension considers that the reinforcement following behavior is beyond the individual's control or influence and is inconsistent with their behavior. Therefore, they see reinforcement as originating from external factors such as luck, chance, the influence of powerful individuals, or unpredictable factors.

Causes of External Locus:

- **Luck:** This is the belief that the world is unpredictable, and deterministic influences are responsible for all events.
- **Fate:** The belief that the individual cannot change or intervene in the course of events because they are predetermined.
- **Powerful Others:** The belief that events are influenced by powerful and influential others, and the individual considers themselves weak compared to them and their influence.
- **Life Complexity:** The inability to predict and understand events. The individual believes that life is too complex, making it impossible to predict events as they are mixed up and cannot be understood or controlled. (Al-Hayali, 2021, p.95)

4- Method and Tools:**4-1- Methodological Procedures of the Study:****4-1-1- Study Methodology:**

The study falls within the descriptive correlational studies as it aims to examine the correlational relationship between organizational commitment and locus of control among midwives. Therefore, the most appropriate methodology for the study is the descriptive correlational approach.

4-1-2- Study Sample:

The study sample consisted of practicing midwives in public institutions in the city of Biskra. The sample size of the study was 105 midwives practicing in the city of Biskra.

4-1-3- Study Measures:**Meyer and Allen's Organizational Commitment Scale:**

Meyer and Allen's Organizational Commitment Scale consists of 18 items equally divided into three dimensions: affective commitment (6 items), normative commitment (6 items), and continuance commitment (6 items). Responses are specified according to a Likert scale with 5 alternatives taking

numerical values sequentially as follows: Strongly Agree (5), Agree (4), Neutral (3), Disagree (2), Strongly Disagree (1).

Regarding the interpretation of the scale results, they are subject to an interpretive scale as illustrated in the following table:

Table (1): Interpretive Scale for Scale Results

Factor	Low	Moderate	High
Mean	1.00 – 2.33	2.34—3.66	3.67—5.00
Dimension Mean	6.00—13.00	14.00—22.00	23.00—28.00
Scale Mean	18.00—42.00	43.00—76.00	77.00—90.00

Source: Prepared by the researcher

In the current study, we relied on the arithmetic mean in interpreting the study results.

As for the psychometric properties of the scale, they were calculated on a sample estimated at 50 midwives, and the results are shown in the following table:

Table (2): Psychometric Properties of the Organizational Commitment Scale

Scale	Alpha's Cronbach	Spearman-Brown	Estimation
Affective Commitment	0.81	0.77	Good
Normative Commitment	0.79	0.78	Good
Continuance Commitment	0.79	0.78	Good
Organizational Commitment	0.84	0.81	Good

Source: Prepared by the researcher based on SPSS23 outputs

It is evident from the table that all reliability values exceed 0.75, indicating good reliability of the scale.

Rotter's Locus of Control Scale:

The Rotter scale consists of 29 statements. Twenty-three statements contain two items, one measuring internal control and the other measuring external control. There are also six camouflage items that do not contribute to determining the locus of control.

Respondents choose only one item per statement, with a score of 1 given for items measuring internal control and a score of 2 given for items measuring external control.

The scoring of the scale is as follows:

- A total score of 23 to 34 indicates an internal locus of control.

- A total score of 35 to 46 indicates an external locus of control.

Psychometric properties of the scale were calculated based on a sample of 50 participants, and the results are presented in the following table:

Table (3): Psychometric Properties of the Locus of Control Scale

Scale	Cronbach's Alpha	Spearman-Brown	Estimation
Locus of control	0.79	0.83	Good

Source: Prepared by the researcher based on SPSS23 outputs.

It is evident from Table 3 that the Locus of Control scale exhibits a good level of validity and reliability.

4-2- Statistical Methods of the Study:

The current study adopted a set of statistical methods, which are as follows:

- Cronbach's Alpha coefficient for calculating the validity and reliability of scales (internal consistency).
- Spearman-Brown coefficient for assessing the stability of scales (split-half reliability).
- Frequencies and percentages to determine the distribution of sample individuals.
- Mean scores to determine the levels of commitment.
- Chi-square to calculate the independence or correlation between organizational commitment and locus of control.
- Correlation coefficient to assess the relationship between organizational commitment and locus of control.

5- Results and Discussion

5-1- The results of the study regarding the level of organizational commitment among the study sample individuals:

We present through tables (4, 5, 6, 7) the level of organizational commitment and its dimensions.

Table (4): Affective Commitment Level of Midwives

Level	Low	Moderate	High	Total
Number of Midwives	8	48	49	105
Percentage	7.61	45.72	46.67	100

Mean = 20.19 (Moderate Level)

Standard Deviation = 4.63

Source: Prepared by the researcher based on SPSS23 outputs.

Table (5): Level of Normative Commitment for Midwives

Level	Low	Moderate	High	Total
Number of Midwives	10	51	44	105
Percentage	9.53	48.57	41.90	100

Mean19.69=(Moderate Level)

Standard Deviation=4.63

Source: Prepared by the researcher based on SPSS23 outputs.

Table (6): Level of Continuance Commitment for Midwives

Level	Low	Moderate	High	Total
Number of Midwives	9	72	24	105
Percentage	8.57	68.57	22.86	100

Mean19.67=(Moderate Level)

Standard Deviation = 4.63

Source: Prepared by the researcher based on SPSS23 outputs.

Table (7): Level of Organizational Commitment for Midwives

Level	Low	Moderate	High	Total
Number of Midwives	6	60	39	105
Percentage	5.71	57.14	37.15	100

Mean59.65=(Moderate Level)

Standard Deviation = 10.64

Source: Prepared by the researcher based on SPSS23 outputs.

The tables above indicate that all the mean scores for organizational commitment and its dimensions are at a moderate level. The number of midwives whose commitment was weak in one of the commitment dimensions did not exceed 9.53%, while organizational commitment decreased to 5.71%, indicating that only 6 midwives exhibit a low and weak level of organizational commitment.

As for midwives who demonstrate a high level of organizational commitment, their percentage reached 37.15%, or 39 midwives. Some variations were observed in the distribution of highly committed midwives across dimensions, with the highest percentage in affective commitment at 46.67% (49 midwives) and the lowest percentage in continuance commitment at 22.86% (24 midwives), while normative commitment stood at 41.90% (44 midwives).

5-2- The study results related to the locus of control:

Table 8 shows the distribution of the study sample individuals according to their predominant locus of control.

Table (8): Distribution of Midwives According to Locus of Control

Locus of Control	Internal Control	External Control	Total
Number of Midwives	71	34	105
Percentage	67.62	32.38	100

Source: Prepared by the researcher based on SPSS23 outputs

Table 8 shows that the predominant locus of control among midwives is internal control, with 71 midwives accounting for 67.62%, compared to 34 midwives who exhibit external control, representing 32.38%.

5-3- The results of the study regarding the correlation between organizational commitment and locus of control:

Before delving into the values of independence or correlation between all aspects of organizational commitment and locus of control among midwives, we address the distribution of midwives across levels of commitment according to locus of control, as illustrated in Table 9.

Table 9: Distribution of Levels of Commitment for Midwives by Locus of Control

Variability	Organizational Commitment			Total
	Low	Moderate	High	
Internal control	1	48	22	71
External control	5	12	17	34
Total	6	60	39	105

Source: Prepared by the researcher based on SPSS23 outputs

It is evident from the table that midwives with an internal locus of control predominantly exhibit a moderate level of organizational commitment, with 48 out of 71 midwives falling into this category. On the other hand, midwives with an external locus of control showed a higher level of commitment, with the majority of 17 out of 34 midwives falling into the high commitment category.

Table 10 illustrates the values of both the coefficient of determination (R-squared) and the correlation coefficient between the level of organizational commitment and locus of control among midwives.

Table (10): Correlation Values between Organizational Commitment and Locus of

Control			
Statistical Treatment	Value	Significance	Judgment
Pearson's R-squared	14.73	0.001	Significant at 0.01 level
Coefficient of Concordance	0.35	0.001	Significant at 0.01 level

Source: Prepared by the student based on SPSS23 outputs

Table 10 indicates that both the coefficient of determination (R-squared) and the coefficient of concordance are significant at the 0.01 level, suggesting a significant correlation between organizational commitment and locus of control among midwives.

5-4- Discussion of Study Results:

Discussion of the First Research Question: What is the level of organizational commitment among midwives?

The data from Tables 4, 5, 6, and 7 indicate that the level of organizational commitment among midwives is average. This result can be attributed to a variety of personal and organizational factors. Among the personal factors, gender can be considered one of the influencers on professional commitment. Social considerations, including role duality and the numerous commitments of midwives, may impact their organizational commitment.

Regarding organizational factors, they seem to have the most significant impact. Work pressures, especially night shifts, inadequate salary coverage for increasing needs amidst the rising cost of living, along with indicators of weak relationships with management and a perceived lack of organizational justice, may contribute to the average level of commitment.

It is noteworthy that the weakest dimension of commitment is the continuance commitment compared to affective or normative commitment. This raises concerns about midwives' profession not meeting their financial needs, prompting them to consider changing professions if better alternatives are available. However, midwives exhibit significant dedication and passion for their profession, which is complemented by a strong sense of humanitarian service.

Discussion of the Second Research Question: What is the predominant locus of control among midwives?

The study results presented in Table 8 indicate that the majority of midwives have an internal locus of control. This suggests that they perceive their responsibilities as inherent and logical outcomes of their actions and decisions. This can be attributed to the social progress in women's independence and their ability to cope with life's challenges, especially considering that they are educated and knowledgeable.

As for midwives with an external locus of control, this may be attributed to upbringing factors or stressful experiences they have encountered. Despite advancements in dealing with women's rights and independence, there are still numerous practices that may lead some midwives to adopt a more externally

controlled approach in response to societal expectations or under the pressure of necessity.

Discussion of the Third Research Question: Is there a statistically significant correlation between organizational commitment and locus of control among midwives?

The results from Table 10 indicate that both the coefficient of determination (r-squared) and the concordance coefficient demonstrate a statistically significant correlation between the level of organizational commitment and locus of control among midwives. Although the significance level was 0.001, the correlation value was somewhat low at 0.35, indicating a moderate correlation.

Organizational commitment as an organizational variable allows the organization to optimize the capabilities of its members. It is not only related to the work environment but also to the personal characteristics of individuals, especially in the normative and affective dimensions, which are closely related to the value system and upbringing style that individuals have experienced.

On the other hand, the nature of the profession, particularly in healthcare and specifically in the childbirth process with its inherent risks to both the mother and the fetus, may be one of the factors that strengthen or weaken the relationship between organizational commitment as an organizational variable and locus of control as a personal variable.

6- Conclusion

As a summary of the current study, the researchers have reached the following conclusions:

- The level of organizational commitment among midwives is average.
- Internal locus of control is predominant among midwives.
- There is a statistically significant correlation between the level of organizational commitment and locus of control among midwives.

We suggest conducting further studies in the healthcare sector, especially focusing on midwives, targeting personal variables such as personality traits or coping strategies, etc.

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