

Relationship between in-roll behavior (IRB) and organization citizenship behavior (OCB) of employees, organizational commitment (OC) of managers and the neurotic organizational disorders

Fateme Mazaheri Tehrani¹, Firouze Haghighi², Manochehr Kamkar³, Khodamord Momeni

¹. Young Researcher and Elites Club, Sanandaj Branch, Islamic Azad University, Sanandaj, Iran,

². Educational Sciences and psychology Department, de Isfahan university, Isfahan, Iran

³. Associate Professor, Educational Sciences and Psychology Department, Islamic Azad University Khorasgan (Isfahan) Branch, Iran

⁴. Associate Professor, Social Sciences Department, Razi University, Kermanshah, Iran

Received: July 24, 2015

Accepted: September 31, 2015

ABSTRACT

The purpose of this study was predicted job performance (in-roll behavior (IRB) and organization citizenship behavior (OCB)) of employees and organizational commitment (OC) of managers based on the neurotic organizational disorders. For this purpose, 45 managers and 263 subordinates of them selected with the simple randomized sampling manner. They answered to the Williams and Anderson's OCB, the Allen and Meyer's OC, and the Kamkar's assessment of organizational mental disorders. In this research, the data analyzed with the SPSS statistical software version 18. The Pearson correlation and multiple linear regressions were used to examine relationships. The finding argued that: Significant negative multiple correlations ($p < 0.01$), were observed between organizational anxiety and job performance. However, there were the significant positive relationships between dramatic organization with job performance, OCBO and OCBI. There were positive multiple correlations between depressed and obsessive organization with managers' continuous OC, and between schizoid organization with continuous and normative OC. Furthermore, schizoid organization related negatively with OCBI. Finally, significant negative multiple correlations observed between organizational paranoia with OCBO and OCBI.

KEYWORDS: in-roll behavior, organization citizenship behavior, organizational commitment, neurotic organizational disorders.

1. INTRODUCTION

Conventional organization theory portrays organizations as rationally ordered, appropriately structured, and emotion-free life-spaces, where the right decisions are made for the right reasons by the right people, in a reasonable and predictable manner. For most people, this image is about as far from reality [1]. Many of employees work in dysfunctional, neurotic, psychotic or otherwise disturbed organizations where conflict, contradictions, and recurring problematic behaviors are the norm, rather than the exception [2]. These are organizations that are obsessed by rules, by compulsions to control and regulate, and by addiction to work, manifesting outwardly the trappings of success while inwardly concealing suppressed emotions and tensions until they erupt in the form of violence, burnout, depression or sabotage [1].

While the study of organizational health is important in terms of developing an understanding of effective organizational functioning and a sense of normative ideals, it is by no means sufficient. Often times only way to develop a true understanding of how things really function is looking at failures, problems and mistakes. Studying the neurotic organization and/or the disturbed psychodynamics within organizations provides a useful counterpoint to the preoccupation with normal (or normalized) organizations. Kets de Vries [3], argued that neurotic management can lead the organizations to neurotic functions and organizational structure and culture reflect the neurosis of its chief executive. Organizations may become *paranoid*, *compulsive*, *dramatic*, *depressive* or *schizoid*. In paranoid organizations, Management uses an extensive monitoring of internal and external processes, events, and people and makes complicated information systems. Compulsive organizations, also, have extensive control mechanisms but they focus on internal rather than external monitoring. Their chief executives are perfectionists and seek to control every detail of organizational life. By contrast, dramatic organizations are adventuresome, schizophrenic organizations move in many directions at the same time, while depressive organizations remain in their own worries and insecurities [1]. Organizational neurosis has been associated with low productivity and innovation [4]. Many evidences mentioned that quality of executives-subordinate relationships related directly with organizational outcomes such as job performance (in-roll behavior (IRB)) and organizational citizenship behavior (OCB), organizational commitment (OC) and job satisfaction [5, 6].

Job performance has three dimensions: *in-roll behavior* (task behavior), *organizational citizenship behavior individually-directed* (OCBI) and *organizational citizenship behavior organizationally-directed* (OCBO). Organizational

citizenship behavior (OCB) has been considered to be one of the most important factors influencing organizational effectiveness [7]. Organizational Citizenship Behavior was first illustrated in the work of Bateman and Organ [8]. In-roll or task behavior directly mentioned in the organizational job description. Organizational Citizenship Behavior is a distinct behavior, which is not directly recognized by the formal reward system but in the average promotes the organizational performance [9]. OCBI has been suggested to benefit the supervisor (e.g. helping a new employee), whereas the OCBO may benefit both the organization and supervisor (e.g. making innovative suggestions to improve the department) [10].

In early commitment research, Steers [11] defined commitment as “the relative strength of an individual’s identification with and involvement in a particular organization” (p. 46). Allen and Meyer [12] think in organizational commitment as an employee outcome that expresses feelings of solidarity with the organization. They proposed a Three-Component Model of organizational commitment (Affective (AC), Continuance (CC), and Normative (NC) Commitment). *Affective commitment* denoting an emotional attachment to, identification with, and involvement in the organization, *continuance commitment* denoting the perceived costs associated with leaving the organization and *normative commitment* reflects a perceived obligation to remain in the organization [13]. Harrison, Newman, and Roth [14] found commitment to be related to turnover, lateness, and absenteeism as well as focal performance. Hafer et al. [15] also, showed that Organizational commitment still appears to be the best predictor of intention to turnover. These researches explain why commitment continues to deserve attention in organizational research and practice.

Little research related to how employees respond to organizational events or the effects of negative treatment of employees by organizations is available. In this article, we attempt to indicate relationship between job performance and organization citizenship behavior (OCB) of employees, managers' organizational commitment (OC) basis on the neurotic organizational disorders (Yet there is limited empirical research investigating this relationships). Thus, we hypothesized that:

H1. The neurotic organizational disorders and employees' IRB have the multiple relationships.

H2. The neurotic organizational disorders and employees' OCBI have the multiple relationships.

H3. The neurotic organizational disorders and managers' OCs have the multiple relationships.

2. MATERIALS AND METHODS

The participants for this study were 396 people (66 managers and 330 subordinates of them) that worked in Entekhab Group (an Iranian producer of household appliances company). The participants selected with the simple randomized sampling manner and ask them to voluntarily participate in this study. The subordinates answered to the Williams and Anderson's OCB and the Levine's DLMX, and the managers answered to the Allen and Meyer's OC. Finally, 335 employees (45 manager and 263 subordinates of them) fully completed their questionnaires and returned it. All of the participants were male and the mean age was 38.3 years (SD = 9.64). The average length of participants' work experience was 15.7 years (SD = 9.6).

The organizational citizenship behavior questionnaire used in this study was developed by Williams and Anderson [16], used in this study, which contains 21 questions examining the relationship of employees to the organization. A five-point Likert scale ranging from strongly disagree (1) to strongly agree (5) was used. The three factors identified were: (a) IRB; (b) OCBI; and (c) OCBO. Researchers reported reliability coefficient of IRB subscale as 0.85, OCBI subscale as 0.87 and OCBO subscale as 0.7522. For measuring job performance variable we used Persian version of Williams and Anderson's OCBQ.

The organizational commitment questionnaire used in this study was developed by Allen and Meyer [17]. This scale is known as a standard organizational commitment scale and has been used by many researchers [18]. It contains 18 questions examining the relationship of employees to the organization. Strong evidence for the reliability and validity of the OC scale has been reported [19]. A five-point Likert scale ranging from strongly disagree (1) to strongly agree (5) was used. The three factors identified were: (a) AC; (b) CC; and (c) NC.

The assessment of organizational mental disorders used in this research at first was a checklist that prepared by Kets de verise and Miller in 1984 [2] then developed and normalized by Kamkar (2006) [20] at Esfahan industries. He identified 6 factors and reported the Cronbach's Alpha for each factor: 1. organizational anxiety (with 7 items and $\alpha = 0.90$), 2. depressed organization (with 16 items and $\alpha = 0.92$), 3. obsessive organization (with 8 items and $\alpha = 0.91$), 4. schizoid organization (11 items and $\alpha = 0.90$), 5. organizational paranoia (7 items and $\alpha = 0.90$), 6. dramatic organization (10 items and $\alpha = 0.91$).

3. RESULTS

We assumed organizational anxiety, depressed, obsessive and schizoid organizations, organizational paranoia, and dramatic organization as the predictor variables. Other variables –IRB, OCBI, OCBO, CA, CC, and NC – assessed as criterion variables. Based on table 1, IRB has significant and negative relation with all dimensions of the organizational neurotic disorders except dramatic organization dimension ($P < 0.01$). OCBI has negative correlations with obsessive and schizoid organization, and organizational paranoia, and OCBO, also, has significant negative correlations with all dimensions of the organizational neurotic disorders except dramatic organization –relation between dramatic organization and OCBO was positive– ($P < 0.01$). By contrast, CC has negative correlation with dramatic organization, and also with organizational anxiety, schizoid organization ($P < 0.01$), and organizational paranoia ($P < 0.05$).

Table 1. Mean and standard deviation of variables and The Pearson's correlation of predictor variables and criterion variables

Variable	OA	DEPO	OO	SO	OP	DO	IRB	OCBI	OCBO	AC	CC	NC
Mean	17.8	37.17	21.63	28.16	17.82	31.72	29.05	27.57	29.07	43.85	25.65	33.34
Standard Deviation	5.78	12.07	6.39	8.94	6.04	8.69	3.19	3.21	3.13	6.08	5.87	4.82
OA							-.33**	-.09	-.30**	.02	-.19**	-.10
DEPO							-.29**	-.09	-.31**	.07	-.11	-.06
OO							-.20**	-.17**	-.28**	.04	-.09	.01
SO							-.28**	-.20**	-.32**	.05	-.18**	-.10
OP							-.26**	-.16**	-.33**	.02	-.16*	-.07
DO							-.10	.04	.18**	-.01	-.17**	-.04

OA= organizational anxiety, DEPO= depressed organization, OO= obsessive organization, SO= schizoid organization, OP= organizational paranoia, DO= dramatic organization, **P<0.01, *P<0.05

In the following we used OA, DEPO, OO, SO, OP and DO as the predictor variables into the models under study. IRB, OCBI, OCBO, AC, CC and NC used also as criterion variables of each model (T.2 and T.3). After analyzing regression on research data, we observed the models 1, 2, 3 explain about 18 percent of IRB, 18 percent of OCBI and about 15 percent of OCBO respectively (see T.2). We used statistical test of variance analysis to determine significance of R² and also, statistical T test to calculate significance of the calculated beta coefficients of every predictor variable of each model. The results showed that organizational anxiety with beta -0.32 was a negative predictor and dramatic organization with beta 0.42 was a positive predictor of employees' IRB. SO and OP with beta -0.47 and -0.032 were negative predictors of OCBI and Surprisingly, DO was positive predictor of OCBI (beta = 0.59). OP and DO also, were negative and positive predictors of OCBO respectively (beta= -0.30 and 0.32).

Table 2. Amount of F, R², B, β , T and significance test in under study models 1, 2 & 3 (relationship between the neurotic organizational disorders and employees' job performance).

Variable	F	Significant Level	R ²	B	β	T	Significant Level
IRB (model.1)							
Equation constant	8.93	0.001	0.18	30.87	-	42/53	<0.001
OA				-0.18	-0.32	-2.67	0.008
DEPO				-0.04	-0.14	-0.99	0.32
OO				0.06	0.11	0.86	0.39
SO				-0.05	-0.15	-1.08	0.28
OP				-0.01	-0.21	-1.74	0.08
DO				0.16	0.42	4.00	0.001
OCBI (model.2)							
Equation constant	9.09	<0.001***	0.18	27.75	-	38.08	<0.001
OA				0.04	0.08	0.65	0.51
DEPO				0.07	0.25	1.77	0.08
OO				-0.12	-0.24	-1.83	0.07
SO				-0.17	-0.47	-3.44	0.001
OP				-0.17	-0.32	-2.61	0.01
DO				0.22	0.59	5.59	0.001
OCBO (model.3)							
Equation constant	7.20	<0.001***	0.15	31.55	-	43.47	<0.001
OA				-0.03	-0.05	-0.43	0.66
DEPO				-0.03	-0.13	-0.91	0.36
OO				0.002	0.004	0.03	0.97
SO				-0.06	-0.16	-1.17	0.24
OP				-0.16	-0.30	-2.45	0.01
DO				0.11	0.32	2.96	0.003

As shown in Table 3, depressed and obsessive organizations were positive predictors (beta= 0.32 and 0.28) and schizoid organization was negative predictor (beta= -0.31) of managers' CC. As well as, we find out the obsessive organization positively and schizoid organization negatively predicted managers' NC (beta=0.40 and -0.33).

Table 3. Amount of F, R², B, β , T and significance test in under study models 4, 5 & 6 (relationship between the neurotic organizational disorders and managers' organizational commitment).

Variable	F	Significant Level	R ²	B	β	T	Significant Level
AC(model.4)							
Equation constant	0.81	0.56	0.02	44.22	-	30.81	<0.001
OA				-0.09	-0.09	-0.71	0.48
DEPO				0.12	0.24	1.57	0.12
OO				0.04	0.04	0.29	0.77
SO				0.02	0.03	0.18	0.86
OP				-0.03	-0.03	-0.22	0.82
DO				-0.11	-0.16	-1.39	0.16

CC (model.5)							
Equation constant	3.61	0.002	0.08	29.23	-	21/27	<0.001
OA				-0.21	-0.21	-1.70	0.09
DEPO				0.15	0.32	2.17	0.03
OO				0.24	0.28	2.00	0.04
SO				-0.20	-0.31	-2.16	0.03
OP				-0.10	-0.10	-0.79	0.43
DO				-0.10	-0.16	-1.45	0.15
NC (model.6)							
Equation constant	2.22	0.04	0.05	34.11	-	30.10	<0.001
OA				-0.07	-0.09	-0.68	0.50
DEPO				0.02	0.06	0.43	0.67
OO				0.29	0.40	2.82	0.005
SO				-0.17	-0.33	-2.26	0.02
OP				-0.09	-0.2	-0.88	0.38
DO				0.002	0.004	0.04	0.97

4.DISCUSSION

The data analysis showed that organizational anxiety negatively predicted employees' IRB. Schizoid organizations were negative predictors of OCBI also, paranoid organization negatively predicted OCBI and OCBO. Dramatic organization was positive predictor of IRB, OCBI and OCBO. Accordingly the first and second hypotheses of this research are conformed.

According to Fischer [21], dysfunctional organizations put on all of their resources and energy to avoid failure. But this is a less successful approach and usually causes fail. Anxiety is common denominator of neurotic organizations. In these organizations, the executive managers are anxious all the time and makes Subordinate anxious, eventually anxiety can become an organizational cutler [22]. Carr and Zanetti [23], point out that the relationship between individuals and organizations not only reflects and promotes narcissistic dependency, but that the resistance to such a relationship potentially results in psychologically and emotionally traumatic experiences. Carr [24] describes the impact of this in terms of a "psychological fingerprint" or "psycho structure". Some studies showed that employees who perceive their work environments as supportive tend to hold favorable attitudes toward their employment and exceed minimum job requirements [25]. It is also the case that the more management behavior is perceived as ethical by subordinates, the more likely ethical behavior will be organizational norm. And the management neurotic behavior can be extends to the organization as a whole in the form of culture [26, 27]. Organizations can be populated white neurosis that has been associated with low productivity and innovation [4].

Hostility and mistrust are common specifications of paranoid and schizoid organizations that lead to productivity reduction [25]. Despite negative effect of anxious, schizoid and paranoid organizations on employees' job performances; surprisingly it seems that dramatic organizations can improve their job performances. One of the most important characteristic of these organizations is Hyperactivity. In the other words a dramatic organization is impulsive and exaggerative; often place themselves in risky situations without considering the consequences. This is can affect personnel performances. On the other hand, these organizations have charismatic managers that boost motivation, creativity and productivity. Although their employees have a high performance, these organizations have limited success in receive to organizational goals because they usually set multiple goals that are not in the one direction [2]. Appelbaum and Roy-Girard [28], also argued that many toxic managers succeed by achieving short-term goals, but at the same time damage the organization by creating a negative environment impacting on the dependent variables of increased turnover, high absenteeism, and low productivity.

The depressed and obsessive organizations were positive predictors and schizoid organization was the negative predictor of managers' CC. As well as, we find out the obsessive organization positively and schizoid organization negatively predicted managers' NC. Accordingly the third hypothesis of this research is conformed.

Obsessed organizations may be evident in a chronic obsession with rules, reports, and regulations. Rather than taking situational appropriate steps, the organization clings to standard procedures [29]. These are organizations that are obsessed by rules, by compulsions to control and regulate, and by addiction to work, manifesting outwardly the trappings of success while inwardly concealing suppressed emotions and tensions until they erupt in the form of violence, depression or sabotage. [30]. Organizational hierarchy in the obsessed organization caused to middle managers obligate to remain in the organization and increase the cost of leaving the organization. In the other hands, in depressed organizations managers cannot control environment and events. They do not try to change the environment and when crisis hits they wait until someone rescue them [22]. These managers do not have any motivation for leaving their organization.

Cohen and Cohen [29] argued that psychosis occurs when organizations lose contact with reality and begin to ignore any information that contradicts their particular view of the world. They move in many directions at the same time and withdrawing and avoidance ruling on the organizational climate. These managers do not have any interest on organizational activities; in the other words they have low organizational commitment, which in turn leads to turnover, lateness, and absenteeism at all levels of an organization [31].

Although employee performance and commitment are the keys to organizational success, this does not occur unless in the healthy organizations. In this regard managers have a major role. They must become aware about effect of their

treatments on organizational health.

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