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# The Impact of Organizational Culture on Achieving Organizational Commitment among Employees of Maysan Health Directorate / Al-Sadr Teaching Hospital

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**Abstract:** This study aims to investigate and analyze the causal relationship between the dimensions of organizational culture and organizational commitment within the context of healthcare institutions, focusing on identifying the cultural dimensions that best predict institutional belonging among medical and administrative staff. The study adopted a descriptive-analytical approach supported by a quantitative method; data were collected field-wise through a standardized questionnaire, with its psychometric properties—validity and reliability—rigorously verified. The study sample comprised a group of employees at Al-Sadr Teaching Hospital in Iraq, and inferential statistical methods were employed to analyze the interrelationships between variables. The findings revealed a statistically significant positive impact of organizational culture on enhancing various components of organizational commitment. Furthermore, the analysis showed a variance in the relative importance of cultural dimensions, where "Organizational Consistency" and "Clarity of Institutional Mission" emerged as the most influential factors in fostering employees' attachment to their organization and their willingness to exert extra effort toward achieving its goals. The study confirms that organizational culture serves as a structural and behavioral framework that contributes to shaping professional identity and strengthening institutional belonging in complex healthcare environments. The study concludes with a set of procedural recommendations for decision-makers regarding the necessity of utilizing culture as a strategic tool to enhance human performance efficiency and talent retention, which in turn positively reflects on the quality of healthcare delivery.

**Keywords:** Organizational Culture, Organizational Commitment, Institutional Performance, Healthcare Sector, Organizational Behavior.



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## Introduction

Healthcare institutions are characterized as complex and dynamic organizational environments, where rapid operational shifts and continuous pressures on human resources impose challenges necessitating precise strategic responses to ensure the sustainability of institutional performance and the achievement of healthcare quality [1], [2]. In this context, organizational commitment represents a pivotal pillar reflecting the nature of the relationship between healthcare staff and the organization. It transcends a mere desire to remain or continue; rather, it constitutes an affective and normative state that drives individuals to internalize organizational goals and exert exceptional efforts toward achieving them, thereby positively reflecting on service quality and

patient safety [3], [4]. Organizational culture plays a structural role in shaping this commitment, acting as the shared value and normative system that guides individual behaviors and molds professional identity. It serves as a moral and administrative compass determining the alignment of individual goals with the organization's vision, making it a critical variable in enhancing or undermining organizational loyalty according to the prevailing values be they supportive, hierarchical, or innovative [5]–[7].

### **Research Problem**

Despite the accumulation of knowledge in modern literature regarding the role of organizational culture as a strategic lever for enhancing institutional capabilities and fostering professional loyalty, the nature of the relationship between the dimensions of organizational culture and organizational commitment within the environment of Iraqi healthcare institutions in terms of direction, strength, and explanatory mechanisms—remains unclear and lacks sufficient research accumulation [4], [8]. Most previous studies have addressed different industrial or service sectors, or focused on individual outcomes such as job satisfaction, without delving into the sociotechnical analysis of variables associated with organizational sustainability and adaptation to structural pressures [5], [9].

The research gap further manifests in the limitation of theoretical and empirical models that explain the reflection of organizational culture dimensions according to the Denison model (Involvement, Consistency, Adaptability, and Mission) on organizational commitment across its three components: Affective, Continuance, and Normative [6], [10], [3]. This is of paramount importance in healthcare institutions facing structural constraints, resource allocation challenges, and tensions in balancing work requirements with the quality of health services [11], [12]. Accordingly, this research is based on the following primary question: "To what extent do the dimensions of organizational culture (Involvement, Consistency, Adaptability, and Mission) contribute to enhancing the levels of organizational commitment across its three dimensions among the staff of Al-Sadr Teaching Hospital? And what are the explanatory pathways that define the nature of this relationship within the organizational specificities of the Iraqi healthcare sector"?

### **Significance of the Research**

The theoretical value of this study lies in providing an integrative model that links the dimensions of organizational culture, according to the Denison Model, with the dimensions of organizational commitment, according to the Meyer and Allen Model. This contributes to bridging the knowledge gap in Arabic administrative literature regarding the organizational psychology of public healthcare institutions [13]–[15].

The practical significance is manifested in diagnosing the prevailing organizational culture at Maysan General Hospital and measuring its reflection on organizational commitment levels. This enables decision-makers to formulate policies and strategies to enhance institutional belonging and improve the quality of medical services. Furthermore, the research findings serve as a foundation for future studies related to developing conceptual and methodological frameworks to study interactions between organizational culture and modern variables, such as organizational agility, administrative empowerment, and innovation in healthcare delivery. It also aids in designing training programs for healthcare leaders based on "Management by Culture" to promote sustainable performance and institutional quality [16]–[19].

### **Research Objectives**

The study aims to:

- Develop an integrated conceptual framework explaining the interactions between the dimensions of organizational culture and organizational commitment.
- Assess the alignment of global models with the specificities of Iraqi healthcare institutions.
- Measure and analyze the correlational relationship and the statistical impact of organizational culture dimensions on the organizational commitment of Al-Sadr Teaching Hospital staff.

- Identify the most influential variables and formulate strategic recommendations based on fostering a positive culture and institutional commitment to enhance performance efficiency and healthcare quality.

### **Research Hypotheses**

#### **Main Hypothesis:**

There is a statistically significant impact of organizational culture dimensions (Involvement, Consistency, Adaptability, and Mission) on achieving organizational commitment among employees at Al-Sadr Teaching Hospital.

#### **Sub-Hypotheses:**

- **The First Sub-Hypothesis:** There is a statistically significant impact of the Involvement dimension on employees' organizational commitment.
- **The Second Sub-Hypothesis:** There is a statistically significant impact of the Consistency dimension on employees' organizational commitment.
- **The Third Sub-Hypothesis:** There is a statistically significant impact of the Adaptability dimension on employees' organizational commitment.
- **The Fourth Sub-Hypothesis:** There is a statistically significant impact of the Mission dimension on employees' organizational commitment.

### **Methodology**

#### **Theoretical Framework and Literature Review**

##### **First: Organizational Culture**

Organizational culture is a central concept in the literature of organizational behavior and human resource management, garnering significant attention due to its critical role in guiding employee behavior and enhancing organizational effectiveness. Edgar Schein defined organizational culture as a pattern of shared basic assumptions that organizational members develop while coping with problems of external adaptation and internal integration; these assumptions subsequently become a reference point that guides their perception, thought, and behavior [20]. This proposition was later expanded to include three interrelated levels of culture: Artifacts and Symbols, Espoused Values, and the Underlying Basic Assumptions that constitute the core of the culture [7].

From another perspective, Denison asserts that organizational culture is not merely a value framework but a dynamic system directly linked to organizational effectiveness and performance [6]. It reflects shared values and beliefs that influence employee behaviors and attitudes—a view reinforced by explanatory models linking organizational culture to institutional performance [10]. Furthermore, Cameron and Quinn introduced the Competing Values Framework (CVF), which illustrates that organizational culture types (Clan, Adhocracy, Hierarchy, and Market) vary in their impact on employee behavior, commitment levels, and performance [5].

In the healthcare context, the importance of organizational culture is magnified due to the complexity of the work environment and the overlapping of professional roles. Indicate that work culture in healthcare institutions determines the nature of professional relationships and patterns of cooperation between physicians, nurses, and support staff, directly reflecting on healthcare quality and patient safety [2]. Recent studies confirm that organizational culture in the health sector is a decisive factor in shaping a supportive work environment, enhancing job satisfaction, and reducing occupational stress [1].

Recent systematic reviews have revealed that organizational culture in healthcare organizations is linked to a set of core dimensions influencing employee attitudes, most notably: effective organizational communication, supportive leadership, teamwork, employee participation in decision-making, recognition of achievements, and job autonomy. Collectively, these factors contribute to enhancing job satisfaction and institutional belonging [8]. Other recent studies suggest that diverse and flexible organizational cultures can represent a strategic resource supporting

innovation and adaptation in healthcare institutions, especially amidst the rapid challenges facing this sector [14].

### **The Denison Organizational Culture Model**

The Denison Model is a pioneering framework for interpreting and measuring organizational culture [6], [10]. It provides an integrated structure linking cultural values to organizational performance through four primary dimensions: Involvement, Consistency, Adaptability, and Mission. This model is distinguished by its ability to explain how internal cultural components interact with external environmental requirements to enhance organizational effectiveness and sustainability.

**Involvement:** This dimension refers to the extent of employee participation in decision-making, their level of empowerment, and the availability of capacity-building opportunities. High involvement fosters a sense of responsibility and organizational belonging. This reflects the reciprocal relationship between the organization and its employees; increased participation and empowerment lead to higher levels of commitment and job satisfaction, consistent with Social Exchange Theory [17]. Recent studies indicate that high levels of involvement improve individual and collective performance, particularly in the healthcare sector [21], [22].

**Consistency:** This represents the degree of alignment and harmony between organizational values, systems, and internal procedures. The existence of a shared value system and effective coordination mechanisms contributes to organizational stability and fosters trust between employees and management. This dimension is fundamental for building a cohesive work environment with reduced organizational conflict and increased levels of Affective Commitment [5], [1].

**Adaptability:** This reflects the organization's capacity to respond effectively to environmental changes through continuous learning, innovation, and developing work methods to suit external variables. This is particularly vital in healthcare institutions facing rapid medical and technological advancements. A flexible organizational culture supports innovation, improves healthcare quality, and enhances patient safety [14]. Adaptability is also linked to achieving Organizational Resilience and crisis response, which bolsters sustainable institutional performance [13].

**Mission:** This refers to the clarity of the organization's strategic direction and long-term goals, and the extent to which employees internalize this mission. A clear organizational mission guides employee behavior and reinforces a sense of shared purpose, positively impacting organizational commitment and institutional belonging. Literature confirms that organizations with a clear, shared mission achieve higher levels of effectiveness and stability, as it unifies employee efforts toward achieving strategic objectives [10], [13].

### **Second: Organizational Commitment**

Organizational commitment is one of the most prominent concepts extensively studied in organizational behavior and human resource management literature, given its pivotal role in explaining employee stability and their level of belonging to the organization. Meyer and Allen defined organizational commitment as a psychological state that characterizes the employee's relationship with the organization and has direct implications for the decision to continue or discontinue membership [3]. This definition is considered one of the most comprehensive as it links the psychological and behavioral dimensions of commitment, emphasizing that it is a multi-dimensional rather than a unitary construct.

Meyer and Allen developed a three-component model illustrating that effective commitment comprises a mix of emotional attachment, perceived costs of leaving, and perceived obligation [23]. These dimensions interact in varying degrees to shape individual behavior within the organization, a framework recently validated in healthcare sector applications [11].

The significance of organizational commitment is particularly evident in healthcare institutions, where it is closely linked to service quality, patient safety, and professional performance

efficiency. A study by Fantahun et al. found moderate levels of commitment among public hospital employees, influenced by various organizational and cultural factors such as the work environment and institutional support [4]. Conversely, weak commitment is a primary driver of turnover intention in the health sector; Dalal et al. demonstrated that satisfaction with organizational communication indirectly affects commitment through job satisfaction, reflecting the complex nature of this variable [9]. This relationship can be interpreted through Social Exchange Theory, which posits that individual commitment is strengthened when employees perceive reciprocal organizational support [17], [24].

#### **Dimensions of Organizational Commitment:**

**Affective Commitment:** This refers to the employee's emotional attachment to, identification with, and involvement in the organization. Employees with strong affective commitment remain because they want to. This dimension is the most influential in enhancing performance and positive organizational citizenship behaviors. Meta-analyses have confirmed its strong correlation with job performance, satisfaction, and organizational engagement [25], [12]. This type of commitment is further explained by Social Identity Theory, which suggests that individuals tend to integrate into organizations that reflect their values and identity [19], [18].

**Continuance Commitment:** This relates to the individual's awareness of the costs associated with leaving the organization be they economic, social, or professional. Here, the employee remains because they need to. While important for reducing turnover, excessive reliance on this type of commitment may not yield positive performance results, as it can lead to "forced" retention lacking intrinsic motivation [3], [11].

**Normative Commitment:** This reflects a sense of moral obligation to remain with the organization. The employee stays because they feel they ought to. This commitment is shaped through organizational socialization, institutional culture, and social expectations [26], [9]. It is also linked to concepts of social exchange and Perceived Organizational Support (POS), where employees feel a duty to reciprocate the care and support provided by the organization [24].

#### **The Theoretical Relationship between Organizational Culture and Organizational Commitment**

The nexus between organizational culture and organizational commitment is a fundamental relationship in organizational literature. Theoretical frameworks seek to explain how culture shapes employee attitudes and fosters institutional belonging. Social Exchange Theory provides a primary explanation, assuming that interactions within an organization are based on the principle of reciprocity. When an organization provides a supportive cultural environment built on trust, justice, and participation in decision-making, employees feel a moral and behavioral obligation to respond by increasing their level of commitment and engagement [16], [17].

From the perspective of Social and Organizational Identity Theory, organizational culture helps shape individuals' perception of their professional identity. Strong, cohesive cultures enhance employees' sense of pride, leading to the consolidation of affective commitment [18], [19]. Individuals seek to maintain a positive self-image by belonging to organizations with a clear identity and positive status.

Furthermore, Perceived Organizational Support (POS) Theory highlights the role of culture in enhancing employees' perception of how much the organization values their contributions and cares about their well-being. Employees who perceive high institutional support are more likely to develop strong affective and normative commitment [27], [24].

In conclusion, these theoretical frameworks complement each other in explaining the relationship. Organizational culture transforms organizational values into positive attitudes and behaviors through mechanisms of social exchange, organizational identification, and perceived support. Recent healthcare studies confirm that a flexible and supportive culture is a decisive factor in achieving institutional sustainability and enhancing professional cooperation [14].

## Literature Review

The relationship between organizational culture and organizational commitment has garnered increasing attention in contemporary literature, particularly within the healthcare sector, due to its direct impact on performance quality and human resource stability. In this context, the study by Fantahun et al. aimed to analyze organizational commitment levels and their influencing factors among health professionals in public hospitals in the Oromia region of Ethiopia. Utilizing the Meyer & Allen model with a sample of 344 participants, the findings revealed that organizational commitment is influenced by a set of organizational and cultural factors, most notably management support, clarity of shared values, and the availability of professional development opportunities, reflecting the critical role of the organizational environment in fostering employee stability [4].

Taking a broader analytical approach, Georgescu et al. explored the integration between strategic human resource management practices and organizational culture in enhancing institutional resilience within public sector organizations. Using Structural Equation Modeling (SEM) on a sample of 501 employees, the study concluded that the dynamic interaction between organizational culture and strategic policies directly contributes to enhancing organizational commitment, while also supporting innovation and adaptability to environmental changes [13].

Provided a significant methodological contribution through a comprehensive systematic review of the relationship between organizational culture and job satisfaction in the health sector. They identified six key cultural dimensions influencing employee attitudes: Leadership, Communication, Teamwork, Participation, Recognition, and Autonomy. The results emphasized that a supportive organizational culture is the most influential factor in enhancing job satisfaction, which serves as a fundamental precursor to increasing organizational commitment levels [8].

In the same vein, addressed the nature of cultural heterogeneity within large healthcare organizations and its impact on institutional performance. Their study demonstrated that the degree of homogeneity in employees' perception of organizational culture is positively correlated with organizational commitment levels and contributes to reducing turnover rates, highlighting the importance of cultural consistency in achieving organizational stability [14].

Furthermore, conducted a cross-sectional study to analyze the determinants of organizational commitment in the health sector. The findings indicated that organizational culture, administrative support, and participation in decision-making are among the most prominent factors enhancing commitment, while noting contextual variations that necessitate further research in different environments, particularly in developing countries [12].

Regarding the analysis of organizational culture types, explored the impact of organizational culture patterns on the performance of health professionals in Saudi Arabia. Adopting the Competing Values Framework (CVF), the study showed that cultures based on teamwork (Clan) and innovation (Adhocracy) are associated with higher levels of organizational commitment and professional satisfaction compared to rigid bureaucratic cultures [1].

A review of these studies reveals a scientific consensus that organizational culture is a primary determinant of organizational commitment—whether by enhancing organizational support, consolidating shared values, or empowering employees. However, the nature of this impact varies across different organizational and cultural contexts.

### Gap Analysis: What Distinguishes the Current Study

Despite the valuable contributions of previous studies in explaining the relationship between organizational culture and organizational commitment, most have focused on international or regional contexts outside the Arab environment, specifically the Iraqi environment and its public health sector. This reveals a clear cognitive and empirical gap. Moreover, many studies addressed variables separately or within partial models, without a comprehensive methodological integration between organizational culture dimensions and organizational commitment using standardized, validated measurement tools.

The current study seeks to bridge this gap by adopting an integrated analytical framework that combines the Denison Model of organizational culture and the Meyer & Allen model of organizational commitment, applying it to a real-world field context: an Iraqi public hospital (Maysan General Hospital). This study is also distinguished by its descriptive-analytical approach based on internationally recognized and reliable measurement instruments, enhancing the accuracy and relative generalizability of its findings.

Consequently, the scientific value of this study stems from its contribution to enriching Arabic literature in organizational behavior, while its practical value lies in providing results that Iraqi healthcare institutions can utilize to develop their organizational environments and enhance employee commitment, ultimately reflecting positively on the quality of healthcare services provided.

### **Empirical Framework (Applied Aspect)**

The study population consists of all employees at Al-Sadr Teaching Hospital, totaling (940) individuals, including (345) females and (595) males. This demographic and professional diversity necessitates accurate representation within the research sample. Given the population size, a statistical sampling approach was adopted. The sample size was determined to be (274) respondents, based on William G. Cochran's formula (Cochran, 1977) at a 95% confidence level and a 5% margin of error.

A Proportional Stratified Random Sampling technique was employed based on the gender variable, resulting in (173) males and (101) females, reflecting the relative distribution of the study population. Sample units were selected randomly from each stratum, and questionnaires were distributed directly to ensure the acquisition of valid data for analysis.

### **Data Collection Methods and Instrumentation**

#### **Data Collection Methods**

To achieve its objectives and test its hypotheses, the research relied on two primary types of data:

**Primary Data:** This serves as the main source for statistical analysis. It was collected field-wise from the staff of Maysan General Hospital using a specifically designed questionnaire tailored to the research objectives to ensure precise measurement of the main variables.

**Secondary Data:** This forms the theoretical and conceptual foundation of the research. It was gathered through a comprehensive review of contemporary literature on organizational culture and organizational commitment, including specialized books, references, and peer-reviewed articles available in global databases such as Scopus, PubMed, and Google Scholar.

## **Results**

### **Research Scales**

The following validated scales were utilized in developing the questionnaire items:

**Table 1.** Validated Scales Used in the Questionnaire.

<b>Variable</b>	<b>Scale Source</b>	<b>Dimensions</b>
<b>Organizational Culture</b>	[6], [10]	Involvement - Consistency - Adaptability - Mission
<b>Organizational Commitment</b>	[3], [23]	Affective - Continuance - Normative

Due to its widespread use and reliability in administrative and organizational studies, a Five-Point Likert Scale was used to measure respondent attitudes. This scale facilitates the objective measurement of trends and behaviors. The reliability of the measurement instrument was further confirmed by calculating Cronbach's Alpha coefficient following the field data collection.

### **Reliability of the Questionnaire**

The reliability of the research instrument refers to the consistency of its results and its ability

to yield similar outcomes if redistributed to the same sample over time. Cronbach's Alpha coefficient was employed to verify this consistency. The following table illustrates these results:

**Table 2.** Cronbach's Alpha Coefficients for Questionnaire Reliability.

Research Variables	Dimensions	Number of Items	Cronbach's Alpha ( $\alpha$ )
<b>Organizational Culture</b>	Involvement	5	0.932
	Consistency	5	0.941
	Adaptability	5	0.936
	Mission	5	0.947
<b>Total Score (Variable 1)</b>	—	<b>20</b>	<b>0.965</b>
<b>Organizational Commitment</b>	Affective Commitment	6	0.938
	Continuance Commitment	6	0.924
	Normative Commitment	6	0.931
<b>Total Score (Variable 2)</b>	—	<b>18</b>	<b>0.957</b>
<b>Overall Questionnaire Reliability</b>	—	<b>38</b>	<b>0.973</b>

The Cronbach's Alpha coefficients for the sub-dimensions ranged between 0.924 and 0.947, while the overall reliability coefficient for the research instrument reached 0.973, indicating a superior level of reliability and internal consistency.

Regarding the Organizational Culture variable, all dimensions demonstrated high reliability levels. The Mission dimension recorded the highest coefficient ( $\alpha = 0.947$ ), reflecting the clarity of the items related to the organization's strategic direction and their effectiveness in measuring employees' perceptions of organizational goals. This was followed by Consistency ( $\alpha = 0.941$ ), Adaptability ( $\alpha = 0.936$ ), and Involvement ( $\alpha = 0.932$ ). These results indicate a high degree of homogeneity among the items within each dimension and confirm their ability to consistently measure the same underlying construct. The overall reliability coefficient for this variable was 0.965, which further confirms the robustness and psychometric soundness of the scale.

With regard to the Organizational Commitment variable, the findings also revealed high levels of reliability across its dimensions. Affective Commitment ranked first ( $\alpha = 0.938$ ), followed by Normative Commitment ( $\alpha = 0.931$ ), and Continuance Commitment ( $\alpha = 0.924$ ). These values indicate that the items within each dimension consistently measure the emotional, normative, and continuance attachment of employees to their organization. The overall reliability coefficient for this variable was 0.957, demonstrating strong internal consistency and reliability of the measurement instrument.

In conclusion, the overall Cronbach's Alpha coefficient of 0.973 reflects a high-quality measurement instrument, providing strong evidence of internal consistency. This supports the reliability of the collected data and justifies its use for subsequent statistical analyses and hypothesis testing, with no indications of internal inconsistency among the questionnaire items.

### Frequencies and Percentages of Demographic Variables

The characteristics of the study sample were analyzed based on gender, age, years of service, and educational level, as illustrated in the following table:

**Table 3.** Frequencies and Percentages of Demographic Variables.

Variable	Categories	Frequency	Percentage
<b>Gender</b>	Male	173	63.1%

	Female	101	36.9%
<b>Age Group</b>	30 years and below	39	14.2%
	31 - 40 years	133	48.5%
	41 - 50 years	69	25.2%
	Above 50 years	33	12.1%
<b>Years of Service</b>	Less than 5 years	42	15.3%
	5 - 10 years	114	41.6%
	11 - 15 years	78	28.5%
	More than 15 years	40	14.6%
<b>Educational Qualification</b>	Secondary School and below	12	4.4%
	Bachelor's Degree	145	52.9%
	Master's Degree	81	29.6%
	PhD	36	13.1%

The results presented in the demographic profile table indicate that the study sample possesses a relative diversity in its individual characteristics, which enhances the reliability of the findings and their generalizability within the study's scope. Regarding Gender, it is evident that males represent (63.1%) compared to (36.9%) for females. This male predominance may reflect the organizational structure of the study environment or the actual distribution of the workforce within the institution.

In terms of Age Groups, the (31–40 years) category ranked first at (48.5%), followed by the (41–50 years) category at (25.2%). Meanwhile, the (30 years and below) and (above 50 years) categories recorded lower percentages of (14.2%) and (12.1%), respectively. This distribution suggests that the majority of respondents belong to an age stage characterized by maturity and professional stability, which is likely to reflect positively on their level of experience, cognitive capacity, and objective evaluation of organizational practices.

Regarding Years of Service, the (5–10 years) category led with (41.6%), followed by (11–15 years) at (28.5%), then (less than 5 years) at (15.3%), and finally (more than 15 years) at (14.6%). This distribution demonstrates that most participants possess intermediate professional experience, reflecting a relative balance between fresh professional perspectives and the accumulated knowledge derived from years of work, thereby enhancing the quality of the elicited data.

At the Educational Qualification level, Bachelor's degree holders constituted the largest segment at (52.9%), followed by Master's degree holders at (29.6%), and PhD holders at (13.1%), while those with secondary education or below represented only (4.4%). This indicates a generally high educational level among the sample, contributing to an increased capacity for understanding, analysis, and accurate responses to the questionnaire items, which bolsters the reliability and objectivity of the responses.

Overall, these indicators demonstrate that the study sample maintains an acceptable balance in demographic characteristics, leaning toward categories with significant professional experience and high educational attainment. This supports the sample's suitability for statistical analysis and the extraction of results aligned with the research objectives.

#### Arithmetic Means and Standard Deviations of Research Variables

Table 4. Arithmetic Means and Standard Deviations.

Study Variables	Dimensions	Arithmetic Mean	Standard Deviation
<b>Organizational Culture</b>	Involvement	3.78	0.81
	Consistency	3.84	0.83
	Adaptability	3.72	0.85

	Mission	3.88	0.80
<b>Total Score (Axis I)</b>	—	<b>3.80</b>	<b>0.82</b>
<b>Organizational Commitment</b>	Affective Commitment	3.86	0.84
	Continuance Commitment	3.73	0.82
	Normative Commitment	3.79	0.81
<b>Total Score (Axis II)</b>	—	<b>3.79</b>	<b>0.82</b>

Regarding the Organizational Culture variable, the results show that the "Mission" dimension achieved the highest arithmetic mean of (3.88) with a standard deviation of (0.80). This indicates a relative clarity in employees' perception of the organization's goals and strategic vision, which contributes to directing their functional behavior toward achieving those objectives. This is followed by the "Consistency" dimension with a mean of (3.84) and a standard deviation of (0.83), reflecting a good degree of harmony in organizational values and practices within the work environment, serving as an indicator of relative stability in the adopted policies and procedures.

The "Involvement" dimension recorded a mean of (3.78) and a standard deviation of (0.81), indicating an acceptable level of employee participation and engagement with work. Meanwhile, the "Adaptability" dimension ranked last with a mean of (3.72) and a standard deviation of (0.85), suggesting that the organization's capacity to respond to environmental changes and external challenges still requires further enhancement and development. Overall, the total mean for Organizational Culture reached (3.80) with a standard deviation of (0.82), reflecting a relatively high level of organizational culture across its various dimensions, with acceptable homogeneity in the respondents' answers.

In terms of the Organizational Commitment variable, the results demonstrated that "Affective Commitment" achieved the highest mean of (3.86) with a standard deviation of (0.84). This signifies a strong emotional bond between employees and their organization, which is reflected in their levels of satisfaction and belonging. It is followed by "Normative Commitment" with a mean of (3.79) and a standard deviation of (0.81), reflecting an ethical sense of duty among employees to remain with the organization. "Continuance Commitment" recorded the lowest mean of (3.73) with a standard deviation of (0.82), indicating that for some employees, remaining in their positions may be driven by continuity factors or the perceived costs of leaving rather than purely intrinsic commitment.

Collectively, the overall arithmetic mean for Organizational Commitment was (3.79) with a standard deviation of (0.82), representing a relatively high level that reflects a good degree of commitment among staff across its different dimensions. Furthermore, the close proximity between the total means of Organizational Culture (3.80) and Organizational Commitment (3.79) indicates a general alignment in the levels of both variables, supporting the potential for a positive correlational relationship between them, where a positive organizational culture likely contributes to bolstering employees' commitment levels.

**Hypothesis Testing Results**

Main Hypothesis: There is a statistically significant impact of organizational culture dimensions on achieving organizational commitment.

To test this hypothesis, Multiple Linear Regression analysis was conducted. The results are presented in the following table:

**Table 5.** Multiple Linear Regression Results for the Main Hypothesis.

Independent Variable	B	Beta (β)	T	Sig.	R	R2	F	Sig. Form
<b>Involvement</b>	0.158	0.162	3.94	0.000	0.71	0.50	67.82	0.000
<b>Consistency</b>	0.336	0.341	7.86	0.000	0.71	0.50	67.82	0.000
<b>Adaptability</b>	0.214	0.219	5.12	0.000	0.71	0.50	67.82	0.000

<b>Mission</b>	0.271	0.266	6.03	0.000	0.71	0.50	67.82	0.000
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The multiple linear regression analysis indicates that the four dimensions of organizational culture—Involvement, Consistency, Adaptability, and Mission—are statistically significant predictors of organizational commitment. However, the strength of their effects varies, reflecting differences in their relative importance in explaining variations in organizational commitment among the study sample.

At the dimensional level, the Consistency dimension exhibited the strongest influence on organizational commitment ( $\beta = 0.341, t = 7.86, p < 0.001$ ). This finding suggests that alignment in organizational values, policies, and practices plays a pivotal role in fostering employee commitment. A stable and coherent organizational environment enhances trust, reduces ambiguity, and promotes a sense of predictability, all of which contribute to stronger commitment among employees.

The Mission dimension ranked second in terms of impact ( $\beta = 0.266, t = 6.03, p < 0.001$ ). This highlights the importance of having a clear organizational vision and well-defined strategic objectives. When employees understand the organization’s direction and purpose, they are more likely to feel a sense of belonging and alignment with organizational goals, which in turn strengthens their commitment.

The Adaptability dimension followed with a meaningful effect ( $\beta = 0.219, t = 5.12, p < 0.001$ ), indicating that organizational flexibility and responsiveness to environmental changes contribute positively to employee commitment. An adaptive organizational environment enhances employees’ confidence in the organization’s ability to respond effectively to challenges, thereby reinforcing their attachment to the organization.

The Involvement dimension showed the lowest relative impact among the four dimensions ( $\beta = 0.162, t = 3.94, p < 0.001$ ), although it remains statistically significant. This suggests that employee participation, engagement, and empowerment contribute to organizational commitment, but to a lesser extent compared to the other cultural dimensions.

At the aggregate level, the correlation coefficient ( $R = 0.71$ ) indicates a strong relationship between organizational culture dimensions and organizational commitment. The coefficient of determination ( $R^2 = 0.50$ ) shows that organizational culture collectively accounts for a substantial proportion of the variance in organizational commitment. Additionally, the F-statistic ( $F = 67.82, p < 0.001$ ) confirms the overall statistical significance of the regression model and its explanatory power.

In conclusion, organizational culture emerges as a significant determinant of organizational commitment. Among its dimensions, Consistency exerts the greatest influence, followed by Mission, Adaptability, and Involvement, reflecting the varying degrees to which each dimension contributes to strengthening employees’ commitment within the organization.

**Sub-Hypotheses Testing Results**

The results of the Simple Linear Regression analysis for each dimension of organizational culture individually reveal a statistically significant positive impact on organizational commitment. However, the strength of this impact and the level of variance explained differ across the four dimensions.

**Table 6.** Simple Linear Regression Results for Sub-Hypotheses.

Indicators	Involvement	Consistency	Adaptability	Mission
<b>Correlation Coefficient (R)</b>	0.63	0.69	0.61	0.67
<b>Coefficient of Determination (R<sup>2</sup>)</b>	0.40	0.48	0.37	0.45
<b>Adjusted R<sup>2</sup></b>	0.39	0.47	0.36	0.44
<b>Standard Error</b>	0.62	0.58	0.65	0.60
<b>F-Value</b>	181.42	250.36	160.87	224.19
<b>Significance Level (ANOVA)</b>	0.000	0.000	0.000	0.000

<b>Constant Regression Coefficient (B)</b>	1.21	1.08	1.34	1.15
<b>Significance of Constant</b>	0.012	0.018	0.000	0.009
<b>Regression Coefficient (B) for Variable</b>	0.58	0.64	0.55	0.62
<b>Beta Coefficient (<math>\beta</math>)</b>	0.63	0.69	0.61	0.67
<b>t-Value</b>	13.47	15.82	12.68	14.97
<b>Sig.</b>	0.000	0.000	0.000	0.000

Regarding the Involvement dimension, the results indicate a moderate to strong positive relationship with organizational commitment ( $R = 0.63$ ). The coefficient of determination ( $R^2 = 0.40$ ) suggests that this dimension accounts for 40% of the variance in organizational commitment. The regression coefficients ( $B = 0.58$ ,  $\beta = 0.63$ ) alongside a high t-value ( $t = 13.47$ ,  $p < 0.001$ ) confirm that employee involvement significantly contributes to enhancing organizational commitment. Furthermore, the high F-statistic ( $F = 181.42$ ) demonstrates the overall statistical significance and robustness of the model.

In relation to the Consistency dimension, the findings reveal the highest explanatory power among all dimensions, with a correlation coefficient ( $R = 0.69$ ) and a coefficient of determination ( $R^2 = 0.48$ ). This indicates that consistency explains approximately 48% of the variance in organizational commitment. The regression results ( $B = 0.64$ ,  $\beta = 0.69$ ,  $t = 15.82$ ,  $p < 0.001$ ) highlight that alignment in organizational values, policies, and practices is the most influential factor in predicting commitment. The model's validity is further supported by a substantial F-value ( $F = 250.36$ ), indicating strong overall significance.

For the Adaptability dimension, the results show a positive correlation with organizational commitment ( $R = 0.61$ ) and an  $R^2$  of 0.37, indicating that it explains 37% of the variance in the dependent variable. Although its explanatory power is relatively lower compared to Consistency and Mission, the regression coefficients ( $B = 0.55$ ,  $\beta = 0.61$ ,  $t = 12.68$ ,  $p < 0.001$ ) confirm that organizational flexibility and responsiveness to environmental changes significantly enhance employee commitment. The model's significance is further validated by an F-value of 160.87.

Finally, the Mission dimension demonstrates a strong positive correlation ( $R = 0.67$ ) and an  $R^2$  of 0.45, indicating that it explains 45% of the variance in organizational commitment. The regression results ( $B = 0.62$ ,  $\beta = 0.67$ ,  $t = 14.97$ ,  $p < 0.001$ ) suggest that clarity of organizational vision and strategic objectives provides a guiding framework that strengthens employees' understanding of organizational goals, thereby increasing their level of commitment. The high F-value ( $F = 224.19$ ) confirms the robustness and statistical significance of the model.

In summary, all dimensions of organizational culture exert statistically significant positive effects on organizational commitment. Consistency emerges as the most influential dimension in terms of explanatory power, followed by Mission, Involvement, and Adaptability. The consistently high values of  $R$  and  $R^2$ , along with significant F-statistics ( $p < 0.001$ ), affirm the predictive validity of these sub-models and demonstrate that the dimensions of organizational culture collectively and integratively contribute to explaining and enhancing organizational commitment.

### Discussion

The results of the current study demonstrate a positive and statistically significant impact of all four dimensions of organizational culture Involvement, Consistency, Adaptability, and Mission on the organizational commitment of employees at Al-Sadr Teaching Hospital in Maysan Governorate. These findings provide clear empirical evidence of the pivotal role that organizational culture plays in shaping employee behavior and strengthening their bond with the institution. Furthermore, these results address the primary research question regarding the extent to which organizational culture contributes to formulating organizational commitment within the Iraqi healthcare environment, which is characterized by dynamic nature and increasing operational challenges.

Analysis of the results reveals that Consistency and Mission represent the most influential pillars in enhancing organizational commitment. Organizational consistency contributes to creating a work environment characterized by clarity, stability, and justice, which bolsters employees' trust in management and reduces levels of ambiguity and contradiction in administrative practices. This directly reflects on enhancing commitment, particularly Affective Commitment. On the other hand, the clarity of the Mission and strategic vision enhances employees' perception of the organization's goals and future directions, fostering a sense of meaning and purpose in their work and contributing to the alignment of individual efforts within a shared organizational framework.

These findings align with contemporary literature asserting that the clarity of values and strategic orientations is a decisive factor in fostering organizational belonging. Specifically, this result is consistent with Georgescu et al. who emphasized that organizational consistency is a key determinant of affective commitment, and the model, which illustrated that a cohesive organizational culture enhances psychological stability [13], [5]. Furthermore, these results harmonize with regarding the role of mission clarity in raising commitment levels, as well as, who confirmed that the integration between organizational values and strategic trends leads to enhanced normative and affective commitment [8], [4].

Regarding Involvement, it emerged as a significant factor in supporting commitment by promoting employee participation and engaging them in decision-making processes. This fosters a sense of empowerment and organizational ownership, enhancing intrinsic motivation. Similarly, Adaptability supports commitment by bolstering the organization's flexibility and responsiveness to environmental changes; however, its impact appeared relatively lower. This could be attributed to the nature of the healthcare environment, which often demands greater organizational stability compared to rapid flexibility, or due to limited resources that may constrain institutional adaptation speed.

From a deeper analytical perspective, these results highlight that organizational culture does not function as a unidimensional variable, but rather as an integrated system where components interact dynamically: Consistency fosters stability, Mission guides behavior, Involvement activates participation, and Adaptability supports continuity amidst challenges. This integration leads to a cohesive organizational state that motivates individuals to voluntarily adopt and commit to organizational goals.

### **Theoretical and Practical Implications**

The theoretical contribution of this research lies in confirming that organizational culture transcends its traditional role as a determinant of organizational climate to become an effective strategic tool in human resource management, especially in sensitive service sectors like healthcare. The study expands the literature by providing an integrated explanation of the relationship between culture and commitment in a context that differs from the industrial settings focused on by most previous studies.

On a practical level, the results suggest that administrative leaders should adopt an integrated approach to managing organizational culture. This involves:

**Strengthening Consistency:** By unifying policies and procedures and applying them with justice and transparency to bolster organizational trust.

**Consolidating the Mission:** Continually clarifying the institutional mission to ensure individual efforts align with strategic goals.

**Activating Involvement:** Engaging employees in decision-making and expanding organizational communication channels.

**Developing Adaptability:** Adopting proactive and flexible strategies to respond to the evolving requirements of the health environment.

### **Future Outlook and Limitations**

Looking forward, this research opens horizons for subsequent studies to expand the

application to multiple health institutions or to test the roles of mediating and moderating variables such as Transformational Leadership, Job Satisfaction, and Organizational Trust. However, certain limitations must be considered, such as the reliance on self-reported data which may be subject to perceptual biases, and local organizational challenges like cultural resistance to change and structural constraints. Consequently, maximizing the benefits of organizational culture requires flexible and integrated management strategies that consider the specificity of the healthcare context, ensuring a balance between stability and adaptation to enhance institutional commitment and sustainable performance.

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