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ON THE CAUSAL ORDERING OF JOB SATISFACTION AND ORGANIZATIONAL COMMITMENT

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Organizational commitment is usually defined as the extent to which an employee identifies with and is involved in an organization. Porter, Steers, Mowday, and Boulian (1974) identified three components of commitment: (1) a strong belief in an organization's values and goals, (2) a willingness to expend considerable effort for it, and (3) a strong intent or desire to remain employed by the organization. In contrast, other scholars have defined job satisfaction as the extent to which an employee expresses a positive affective

orientation toward a job (Smith, Kendall, & Hulin, 1969). In addition, job satisfaction has been treated as both a global concept referring to overall satisfaction and as a facet-specific concept referring to various aspects of work, such as pay, supervision, or workload (Cook, Hepworth, Wall, & Warr, 1981). Although many have assumed that satisfaction is a determinant of commitment (Angle & Perry, 1978; Buchanan, 1974; Hrebiniak & Alutto, 1973; Koch & Steers, 1978; Reichers, 1985; Steers, 1977; Wakefield, 1982), Bateman and Strasser (1984) suggested that the reverse causal ordering may be true.

Knowledge of the correct causal ordering of these variables has both theoretical and practical implications. We identified two theoretical implications. First, both variables have been widely investigated as dependent variables. If commitment is causally antecedent to satisfaction, as Bateman and Strasser suggested, then studies of satisfaction that omit this variable have employed misspecified models, which could have resulted in erroneous inferences concerning the importance of other variables linked to satisfaction. A similar line of reasoning can be applied to commitment.

Second, both satisfaction and commitment are important in models that attempt to describe the processes through which individuals' experience of work influences various outcomes, such as absenteeism and turnover. For instance, Steers and Rhodes (1978) viewed both satisfaction and commitment as determinants of motivation to attend, which, in turn, influences actual attendance. Price and Mueller (1986) proposed that commitment mediates the influence of satisfaction on turnover, which places satisfaction causally prior to commitment. Correct specification of the roles of satisfaction and commitment as intervening variables in such models requires knowledge of their correct causal ordering. In addition, if analysts simply treat the two variables as simultaneous determinants of an outcome, they may overlook total causal effects composed of both direct and indirect effects.

The ordering of satisfaction and commitment also has practical implications. In service organizations such as hospitals, effectiveness and efficiency require a high level of morale among employees, because the services rendered are personal and labor intensive. It is therefore important for managers to know how rewards and incentives are linked to outcomes like satisfaction and commitment. For example, if satisfaction is a determinant of commitment, it may be possible to indirectly influence commitment through a strategy that increases satisfaction. However, if the reverse causal ordering is true, and a manager is unaware of this, the same intervention strategy may not be effective.

Bateman and Strasser's (1984) finding that commitment is causally antecedent to satisfaction is troubling, because it contradicts a widely held assumption with empirical support. We identified three grounds on which to question their findings. First, they employed conventional least-squares regression, albeit within the context of a cross-lagged longitudinal model, and did not take measurement error into account. Correlated errors can be problematic in longitudinal models, and unreliability in measures can

differentially attenuate estimates of causal effects. This may account for their failure to find an effect of satisfaction on commitment. Second, they did not examine the possibility that temporal sources of error influenced their results. For example, method effects can produce underestimates of causal effects in longitudinal studies. Third, they did not employ the wide range of statistical controls that a high degree of confidence in the findings would mandate.

This study's objectives were to replicate and extend Bateman and Strasser's findings. Our model was similar to theirs and our respondents came from a comparable population, employees of hospital nursing departments. However, we employed an analytical strategy that controls for effects of measurement error and assesses other possible sources of error that may arise in longitudinal designs. In addition, our analysis included as statistical controls a number of independent variables representing many of the documented antecedents of satisfaction and commitment.

RESEARCH DESIGN

Population Studied

Respondents were employees in the nursing departments of five voluntary, short-term, general hospitals in a western state. This population, which was selected to replicate as closely as possible the population used by Bateman and Strasser, was part of a larger population consisting of all employees of the five hospitals, which was selected for a study of turnover and absenteeism among hospital employees (Price & Mueller, 1986).

Our subpopulation excluded men employees, because there were very few of them (19), as well as a small number of students and on-call employees who had no permanent attachment to the hospitals. The group of respondents used for the analyses reported here consisted of women working in nursing departments who returned questionnaires at two times ($N = 508$). Professional employees, primarily registered nurses, made up 67 percent; managers, all registered nurses, 10 percent; clerical workers, 9 percent; and service workers (nurses aides), 14 percent.

Data Collection

Data were collected for the larger study by means of a longitudinal design in which self-administered questionnaires were mailed to the homes of all hospital employees to maintain respondents' anonymity. The hospitals provided names and addresses. The first wave of data collection was completed in January 1981. Data taken from these questionnaires constitute the time 1 measurements. Data from a second wave of questionnaires, completed in August 1981, provide measures of satisfaction and commitment at time 2.

The response rate for the first wave was 63 percent of the total population; this yielded 2,192 useable questionnaires. The response rate for the second wave was 47 percent. Since information on response rates was not collected by departments, no response rate is available for the subpopulation used in

this study. However, the larger study's response rate for registered nurses, who make up 76 percent of our subpopulation, was 71 percent.

Measures

This study's primary focus is the interaction of satisfaction and commitment over time. We used a cross-lagged model similar to that employed by Bateman and Strasser (1984) to try to determine the causal ordering of these variables. The objective of the analysis was to ascertain the effects of satisfaction at time 1 on commitment at time 2, and the effects of commitment at time 1 on satisfaction at time 2. In addition, we included 15 variables as exogenous determinants of both satisfaction and commitment to serve as statistical controls. These include nine measures of employees' perceptions of organizational structure, four measures of employees' characteristics, and two measures of environmental characteristics. The Appendix presents descriptions of the variables and the questionnaire items.

Commitment was measured by the 9-item short version of the Organizational Commitment Questionnaire (Porter et al., 1974). Previous research has investigated the measurement properties of the 15-item version of this questionnaire (e.g., Mowday, Steers, & Porter, 1979). We measured satisfaction with six items selected from the index developed by Brayfield and Rothe (1951). Table 1 presents descriptive statistics and reliabilities for the

TABLE 1
Descriptive Statistics for Variables in the Analytical Model[a]

Variables	Means	Standard Deviations	Reliabilities
Commitment, time 1	32.70	5.19	.874
Commitment, time 2	31.79	5.62	.898
Satisfaction, time 1	21.87	4.16	.868
Satisfaction, time 2	21.19	4.20	.863
Centralization	9.99	2.76	.804
Routinization	12.44	2.53	.689
Instrumental communication	31.13	4.99	.902
Promotional opportunity	13.64	4.16	.895
Organizational size	0.79	0.41	
Pay	13.53	5.07	.836[b]
Distributive justice	12.50	3.28	.838
Integration	11.13	1.84	.560
Role overload	0.47	0.50	.489[b]
Work involvement	16.17	2.18	.679
Length of service	6.05	5.11	.954[b]
Education	14.99	1.33	.769[b]
Turnover experience	1.83	1.13	.790[b]
Employment opportunity	5.56	2.01	.792
Kinship responsibility	2.66	1.47	.944[b]

[a] The Appendix presents operational definitions of the variables.

[b] The reliabilities for these variables are the test-retest correlations between time 1 and 2. All other reliabilities are measured with Cronbach's alpha. Organizational size is assumed to be measured without error.

satisfaction and commitment indexes at time 1 and time 2 and also for the exogenous variables used as statistical controls.

All of the multiple-item indexes are factor-based, which we derived from factor analyses using maximum likelihood extraction with varimax rotation. These analyses indicated that the items intended to measure a given variable loaded on a single factor, and the factor loadings were greater than 0.3 in magnitude. Of particular interest were the items measuring satisfaction and commitment. We factor-analyzed the items for these variables as a set to assess the validity of the distinction between the two concepts. With some minor exceptions, these data supported the notion that satisfaction and commitment are distinct concepts, and the results were similar for data from both time 1 and time 2. In short, we obtained support for the discriminant and convergent validity of these items.

Analytical Method

The data were analyzed with the LISREL statistical package (Jöreskog & Sörbom, 1981), a tool for estimating causal effects adjusted for measurement error, examining correlated residuals, and obtaining indicators of a model's fit to data. One of the advantages of using LISREL over more traditional methods like multiple regression is that it permits specification of latent and manifest variables, with explicit modeling of measurement errors. Latent variables often represent theoretical concepts, and manifest variables usually consist of multiple empirical measures for each concept. We did not use multiple indicators to specify our measurement model because the number of individual questionnaire items was large. Instead, we specified the factor-based indexes described in the previous subsection as single indicators of the concepts they are intended to reflect. We accounted for measurement error by setting the loadings of the indicators on the latent variables equal to the square root of the reliability coefficient. This is the appropriate strategy when a correlation matrix is analyzed with LISREL. Using this strategy provides an estimation of causal effects among the latent variables controlling for errors in measurement.

RESULTS

Table 2 presents the results of the LISREL analysis. The coefficients in this table may be interpreted as standardized partial-regression coefficients. These data show the cross-lagged effects of satisfaction and commitment, their stability coefficients—the effect of time 1 commitment on time 2 commitment, for example—and the effects of the control variables on satisfaction and commitment at time 1.

The cross-lagged effects of satisfaction at time 1 on commitment at time 2 (−.002) and of commitment at time 1 on satisfaction at time 2 (.035) are not statistically significant. Indeed, the magnitude of these coefficients is near 0. Thus, in contrast to the findings of Bateman and Strasser (1984), our results provide no basis for asserting that commitment has a causal effect on satisfaction. However, just as important, we found no support for the widely

TABLE 2
Standardized Coefficients for the Cross-Lagged Effects
of Satisfaction and Commitment and the Exogenous Variables[a]

Independent Variables	Dependent Variables			
	Time 1		Time 2	
	Satisfaction	Commitment	Satisfaction	Commitment
Commitment, time 1			.035	.840*
Satisfaction, time 1			.809*	−.002
Centralization	−.122	−.035		
Routinization	−.460*	−.265*		
Instrumental communication	.063	.103*		
Promotional opportunity	.058	.144*		
Organizational size	−.055	.025		
Pay	−.166*	−.036		
Distributive justice	.195*	.272*		
Integration	.181*	.152*		
Role overload	.276*	.028		
Work involvement	.065	.165*		
Length of service	.099	.131*		
Education	−.152*	−.202*		
Turnover experience	.019	.092		
Employment opportunity	−.028	−.109*		
Kinship responsibility	.102*	.096*		
R^2	.584	.488	.688	.704

[a] These LISREL coefficients may be interpreted as standardized partial regression coefficients. The maximum likelihood chi-square is 21.38, $df = 30$, $p = .876$.

* $p < .05$

held tenet that satisfaction influences commitment. There appeared to be no causal effects in either direction between satisfaction and commitment over time.

The model was modified to allow examination of the possiblity that the error terms for the time 1 and time 2 measures of commitment and satisfaction are correlated. Correlated error terms can arise for various reasons, including method effects and the omission of variables that influence a dependent variable over time. For commitment, the longitudinal correlation between error terms is −.137; for satisfaction, it is .076. Neither correlation is statistically significant at the .05 level. In addition, allowing for these correlations did not significantly improve the overall fit of the model to the data. These results indicate that there are no sources of systematic variance biasing the estimates of the longitudinal effects of commitment and satisfaction.

The results also indicate that there was a high degree of stability (Heise, 1969) in commitment and satisfaction over the 7-month period between time 1 and time 2. The stability coefficient for commitment is .840; for satisfaction, it is .809. Although it is possible that levels of these variables fluctuated during the 7-month period, the similarity of these coefficients is interesting, because theorists have suggested that satisfaction should be less stable than commitment (Mowday, Porter, & Steers, 1982).

The concurrent correlations between satisfaction and commitment are also of interest.[1] At time 1, the zero-order correlation between satisfaction and commitment is .499. When the exogenous variables are held constant, the partial (maximum likelihood) correlation is .106, which is not statistically significant. For the time 2 measures, the zero-order correlation is .534, and the partial correlation is .190 (n.s.) when the time 1 measures are held constant. These results indicate that most of the covariation between concurrent measures of satisfaction and commitment is due to their common antecedents. For the time 1 measures, these antecedents were the variables we used for control purposes. For the time 2 measures, they were the measures of satisfaction and commitment at time 1.

Table 2 also shows the effects of the exogenous variables used as statistical controls. Routinization clearly has a strong influence on satisfaction measured at time 1, indicating that a high level of repetitive work depresses satisfaction. The second most important determinant of satisfaction is role overload; employees who felt that their workload was "about the right amount" were more satisfied than those who felt their workload was either too light or too heavy. Distributive justice and integration also have significant effects on satisfaction, with high levels of fairness of rewards and integration associated with high levels of satisfaction. Pay, education, and kinship responsibility also have statistically significant associations with satisfaction. With the exception of pay, the directions of these relationships are as expected. As a group, the exogenous variables explain almost 60 percent of the variance in satisfaction ($R^2 = .584$).

As for commitment, two indicators of organizational structure—routinization and distributive justice—have the strongest effects. High levels of repetitive work are associated with low commitment, and high levels of fairness of rewards are associated with high commitment. There is also an indication that individuals with relatively more education were less committed to the hospital. There are a number of variables with statistically significant effects of modest strength: instrumental communication, promotional opportunity, integration, work involvement, kinship responsibility, and opportunity. Taken as a group, the exogenous variables explain almost half of the variance in commitment at time 1 ($R^2 = .488$).

Possible effects of the exogenous variables on satisfaction and commitment at time 2 were also examined. We accomplished this by estimating effects for those variables that the LISREL modification indices indicated might have significant coefficients. However, including these variables did not significantly improve the fit of the model to the data, and the coefficients for individual variables were not statistically significant. In short, our analysis indicated that the exogenous variables had no effects on satisfaction and commitment at time 2 when the initial levels of these variables were held constant.

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[1] Table 2 does not show these statistics.

DISCUSSION

The primary finding of this study is that there is no support for either of the hypothesized causal linkages between job satisfaction and organizational commitment. Our analysis did not indicate that satisfaction is a determinant of commitment, a commonly held position, or that commitment is a determinant of satisfaction. Thus, our results do not support Bateman and Strasser's (1984) finding that commitment is causally antecedent to satisfaction.

Although our population, measures, and analytical method were, in general, similar to those used by Bateman and Strasser, there are at least two potential explanations for the differences in our findings and theirs. First, although our respondents were similar, they were from a different geographical area. Although it seems unlikely this accounts for the discrepancy in findings, the possibility remains. Second, our measures of satisfaction and commitment differed somewhat from our predecessors', in that we used the short version of the Organizational Commitment Questionnaire and they used the long version. Similarly, they combined the subscales of the Job Descriptive Index to measure overall satisfaction, and we used a global measure. Thus, it is possible that different measurement strategies might account for the differences between the two studies.

Our examination of exogenous variables, such as routinization, distributive justice, and integration, indicates that employees' perceptions of organizational structure have relatively important effects on their satisfaction and commitment, in the expected directions, when the independent and dependent variables are measured concurrently. In addition, role overload has a strong association with satisfaction, but not with commitment. Other measures of organizational structure, employee characteristics, and environmental variables had statistically significant, but relatively modest, effects.

However, none of these relationships were apparent when we used the time-lagged measures of satisfaction and commitment as dependent variables while holding their initial levels constant. To a large extent, these results are similar to Bateman and Strasser's. Where they found a lack of causal effects over time for commitment, we found a lack of causal effects for both commitment and satisfaction. Taken together, the results of the two studies call into question previous theoretical assumptions about the antecedents of satisfaction and commitment.

Our analytical method permitted estimation of causal effects corrected for measurement error and assessment of temporal sources of error variance. Although we did not find any evidence that these methodological improvements account for the discrepancy between our results and Bateman and Strasser's, longitudinal analyses should address these issues.

Since both our respondents and Bateman and Strasser's were employees of nursing departments in hospitals, and both studies used similar time lags, future research should include samples from different populations and use different time lags. Future studies should also replicate this work for different measures of satisfaction and commitment. We used a global measure of

satisfaction; facet-specific measures might yield different results. For example, it might be argued that satisfaction with aspects of work that are clearly linked to organizational policies, such as degree of autonomy, may be more closely linked to commitment than are aspects like satisfaction with co-workers. Similary, Reichers (1985) argued that commitment should be reconceptualized to address the possibility of multiple focuses.

In conclusion, we concur with Bateman and Strasser's recommendation that further research should employ dynamic designs to provide rigorous tests of causal models of satisfaction and commitment. The findings of our study, when coupled with theirs, suggest that the antecedents of both satisfaction and commitment require further theoretical specification and empirical evaluation.

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APPENDIX

Job satisfaction[a] was measured by six items adapted from Brayfield and Rothe (1951): (1) I find real enjoyment in my job, (2) I like my job better than the average worker does, (3) I am seldom bored with my job, (4) I would not consider taking another job, (5) most days I am enthusiastic about my job, and (6) I feel fairly well satisfied with my job.

Organizational commitment[a] was measured by the 9-item short version of the Organizational Commitment Questionnaire (Porter et al., 1974), with "hospital" substituted for "organization." Sample question: I would accept almost any type of job assignment in order to keep working for this hospital.

Centralization—the degree to which power is concentrated in an organization—was measured by four reverse-coded items: (1) how much freedom do you have as to how you do your job? with responses ranging from 1 = no freedom at all to 5 = a great deal of freedom; (2) how much does your job allow you to make a lot of decisions on your own? (3) how much does your job allow you to take part in making decisions that affect you? with responses ranging from 1 = never to 5 = almost all the time; (4) how much say do you have over what happens on your job? with responses ranging from 1 = none at all to 5 = a great deal.

Routinization—the degree to which job is repetitive—was measured by five items: (1) to what extent does your job require that you keep learning new things? 1 = always to 5 = never; (2) how often do you get to do a number of different things on your job? 1 = always to 5 = never; (3) to what extent does your job require a high level of skill? 1 = very high to 5 = very low; (4) to what extent does your job require that you do the same things over and over again? 1 = never to 5 = always; and (5) how creative does your job require that you be? 1 = very to 5 = no creativity required.

Instrumental communication—the degree to which an organization transmits information concerning the job—was measured by eight items: how well informed are you by the hospital about each of the following aspects of your job? (1) what is to be done, (2) standard operating procedures, (3) what is most important about the job, (4) how well the job is done, (5) what you need to know to do the job, (6) nature of equipment used, (7) how you are supposed to do the job, and (8) rules and regulations. Response categories ranged from 1 = not informed at all to 5 = very well informed.

Promotional opportunity[a]—the degree of opportunity for upward movement in an organization's hierarchy of authority—was measured by five items: how much do you agree or disagree with each of the following statements about promotional opportunities for a person with your qualifications somewhere in the hospital? (1) promotions are regular, (2) I'm in a dead-end job, (3) there is an opportunity for advancement, (4) there is a good opportunity for advancement, and (5) there is a good chance to get ahead.

Organizational size was measured by one item, originally coded as the number of beds in a hospital, but recoded as 0 = under 100 beds and 1 = between 100 and 500 beds.

Pay was measured by one item: what is your total yearly income at the present time from the hospital before taxes and other deductions are made? 1 = less than $5,000, 2 = $5,000–$7,499, 3 = $7,500–$9,999, 4 = $10,000–$12,499, 5 = $12,500–$14,999, 6 = $15,000–$19,999, 7 = $20,000–$24,999, 8 = $25,000 or over.

Distributive justice—the relationship between inputs to job performance and rewards dispensed by an organization—was measured by four items: when compared to other employees in the hospital where you work, how do you rate the fairness with which you have been treated by

your hospital in the distribution of the following rewards? (1) amount of money directly received, (2) fringe benefits; when compared to other employees who do not work in hospitals, how do you rate the fairness with which you have been treated by your hospital in the distribution of the following rewards? (3) amount of money directly received, (4) fringe benefits. Response categories ranged from 1 = no fairness to 5 = very fair.

Integration—the degree to which an employee has close friends in an immediate work unit—was measured by three items: (1) what would you say about the atmosphere in your immediate work group in terms of friendliness? from 1 = not friendly at all to 5 = very friendly; (2) to what extent do people in your immediate work group help you find ways to do a better job? (3) to what extent do you discuss personal problems with individuals in your immediate work group? Response categories for items 2 and 3 were 1 = never to 5 = very often.

Role overload was measured by one item: how heavy was your work load during the past three months? with 1 = often not enough to keep me busy, 2 = sometimes not enough to keep me busy, 3 = just about the right amount, 4 = hard to keep up with, 5 = entirely too much for me to handle. Because relationships with satisfaction and commitment were nonlinear, we recoded response categories 1, 2, 4, and 5 as 1, and recoded 3 as 0.

Work involvement[a]—the degree to which an employee is committed to high standards of occupational performance—was measured by four items: Listed below are some statements about different views toward a person's job. Please indicate the extent of your agreement or disagreement with each statement: (1) you can measure a person pretty well by how good a job he/she does, (2) I'm really a perfectionist about my job, (3) I feel particularly annoyed when other people do poor quality work, (4) sloppy work by anyone makes me very angry.

Length of service was measured by one item: how long have you worked in this hospital? 1 = less than 6 months, 2 = 6 months–1 year, 3 = 1–2 years, 4 = 3–5 years, 5 = 6–10 years, 6 = 11–15 years, 7 = more than 15 years. Years of service were assigned as category midpoints.

Education was measured by one item: how much schooling have you had? 1 = some grade school to 6 = completed college or other higher school. Years of schooling were assigned as category midpoints.

Turnover experience was measured by one item: in the past five years, how many places have you worked? 1 = one, 2 = two, 3 = three, 4 = four or five, 5 = six or more.

Employment opportunity—the availability of alternative jobs outside the organization—was measured by one item: how easy would it be for you to find a job with another employer in this geographical area that is as good as the one you now have? 1 = very difficult to 5 = very easy.

Kinship responsibility—obligations to relatives in the local community—was the sum of four items: (1) marital status, 0 = not married, 1 = married; (2) presence of children 21 or younger in the home, 0 = none, 1 = one, 2 = two or more; (3) presence of own relatives within 50 miles, 0 = none, 1 = one or more; (4) presence of spouse's relatives within 50 miles, 0 = none, 1 = one or more.

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[a] The response categories for the items used to measure these variables ranged from 1 = strongly disagree to 5 = strongly agree.

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ACADEMY OF MANAGEMENT
1987 REGIONAL MEETINGS

For more information or submissions contact the regional chairperson listed.

SOUTHWEST—March 10-14, Hyatt Regency, Houston, Texas
C. Aaron Kelley, (502) 588-7830
School of Business
University of Louisville
Louisville, Kentucky 40292

WESTERN—April 9-11, Sheraton Universal, Studio City, California
Barry Posner, (408) 554-4469
Department of Management
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Santa Clara, California 95053

MIDWEST—April 9-11, Memorial Union, Indiana University,
Bloomington, Indiana
Jay Kim, (614) 422-3045
Faculty of Management and Human Resources
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EASTERN—May 14-17, Back Bay Hilton, Boston, Massachusetts
D. Jeffrey Lenn, (202) 676-4988
Department of Business Administration
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SOUTHERN—November 4-7, New Orleans Hilton, New Orleans, Louisiana
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