

## **BUILDING EMPLOYEE ATTITUDES THROUGH HUMAN RESOURCE PRACTICES: EVIDENCE FROM A PUBLIC HOSPITAL IN MAKURDI**

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### **ABSTRACT**

*Drawing upon the ability-motivation-opportunity (AMO) framework and social exchange theory, this study examined the effect of HR practices (training, employee benefits, and employee participation) on employee attitude (satisfaction, affective commitment, normative commitment and continuance commitment). Primary data was collected from 521 medical workers (excluding medical doctors) in a large public hospital in Makurdi through the use of questionnaire. Results of multiple regression analysis indicates a positive effect of HR practices on job satisfaction, affective commitment, and normative commitment. However, the effect of HR practices on continuance commitment was negative. This implies that respondents in the study have a social exchange relationship with their organization. The study recommends that managers of public hospitals should consider employees as important stakeholders and invest in HR practices that improves their skills and abilities, as well as motivate and provide opportunities for employees to contribute to workplace decisions. This will engender positive attitudes that benefit both employees and their organizations.*

**Keywords:** Affective commitment, continuance commitment, HR practices, job satisfaction, normative commitment

### **INTRODUCTION**

In today's dynamic and competitive business environment, organizations face the constant challenge of attracting and retaining required talents. In this pursuit, human resource (HR) practices emerge as a critical factor in shaping employee attitudes. The attitude of employees have a profound impact on their overall performance. Positive employee attitudes contribute to a healthy work environment, increased productivity, and improved organizational outcomes. Conversely, negative attitudes can lead to lower motivation levels, and reduced organizational effectiveness.

HR practices encompass a wide range of strategies and processes, including recruitment and selection, training and development, performance management, compensation and benefits, work-life balance initiatives, employee engagement, employee participation, and effective communication, among others (Katou & Budhwar, 2014). Each of these practices influence how employees perceive their role within the organization, the level of support they receive, and their overall work experience. Although HR practices have been a subject of research over the years, different studies have focused on a variety of practices (Heffernan & Dundon, 2016).

This study is focused on three HR practices, namely, training, employee benefits, and employee participation. These are selected to reflect the ability-motivation-opportunity (AMO) framework (Appelbaum *et al.*, 2000; Boxall & Purcell, 2003). Based on this framework, training is an ability-enhancing HR practice, employee benefits are motivation-enhancing, while employee participation is an opportunity-enhancing HR practice. These three practices are capable of enhancing the ability of employees, motivating them, and providing them the opportunity to contribute towards work-related decisions.

Employee attitude relate to the dispositions of employees towards their jobs and organization. In this study, job satisfaction and organizational commitment are considered for several reasons. While job satisfaction is an attitude towards one's job, organizational commitment is an attitude towards the organization. Moreover, these two forms of employee attitudes have been considered as the most powerful predictors of behaviour (Judge & Kammeyer-Mueller, 2012) and have been found to influence important work outcomes such as job performance, organizational citizenship behaviour, and organizational performance. Thus, it is imperative to examine the effect of HR practices on job satisfaction and organizational commitment.

In terms of context, the present study is conducted within a large public hospital in Makurdi. The context of the research is significant in the sense that there is brain drain in Nigeria which has mostly affected the health sector, since healthcare professionals are leaving the country in droves in search for greener pastures. It is hoped that effective HR management will enhance retention of top talents in Nigerian hospitals. Additionally, previous studies on effect of HR practices and work outcomes have focused mainly on private sector organizations, therefore a study of this nature shall unravel the benefits of HR practices in engendering positive employee attitudes in a public sector organization.

## LITERATURE REVIEW

### Human Resource (HR) Practices

Three HR practices (training, employee benefits, and employee participation) are the focus of this research. These practices have been selected to reflect the ability-motivation-opportunity (AMO) framework. Each of these practices are discussed below.

#### Training

There is increased interest in training due to its importance in improving employees' knowledge and skills to perform the job (Tharenou *et al.*, 2007; Aguinis & Kraiger, 2009). This means that more training becomes relevant, as organizations continue to rely on skills of employees to function effectively, (Chen & Klimoski, 2007; Salas *et al.*, 2012). Such is the value of training that profit and non-profit organizations alike have realized the need to invest in training of staff (Carvalho *et al.*, 2016). Kraiger (2003) notes that investment in training sets apart successful organizations from others. This indicates that organizations must train their workforce if they must remain competitive (Salas *et al.*, 2012).

Due to the importance of training to economic growth of nations through improvement in human capital (Moreno-Galbis, 2012), many countries have instituted policies to ensure that employers provide training to employees (Ikyanyon *et al.*, 2020). Tharenou *et al.* (2007) provides that training is the systematic acquisition and development of knowledge, skills and attitudes of employees to enable them perform a task or job adequately, and improve organizational

performance. This suggests that training results in increase in skills and productivity, which effect competitiveness, and benefit employees, teams, firms and national economies (Aguinis & Kraiger, 2009).

More so, training helps in preparing employees for future jobs whilst guarding organizations against skill shortage (Ikyanyon et al., 2020). Consequently, where there is need to fill vacancies internally, organizations can easily do so when they have trained employees with the right amount of skills required (Grugulis, 2013). Training also signals to employees that the firm care about their development and well-being, which in turn engender positive attitudinal outcomes (Meyer & Smith, 2000; Yang et al., 2009). Additionally, in contexts where participation is promoted, training equips employees with capacity to contribute meaningfully to work processes with a resultant effect on their motivation and productivity (Tharenou et al., 2007; Aguinis & Kraiger, 2009; Grugulis, 2013).

### **Employee benefits**

Employee benefits represent a significant part of the total compensation offered by organizations (Dulebohn et al., 2009; Giancola, 2012; Lin et al., 2014). Organizations increasingly recognize the need to invest in employee benefits in order to attract, motivate and retain talented employees (Dulebohn et al., 2009; Adams & Artz, 2015; Blumen, 2015). The significance of benefits means that referring to them as “fringe” benefits as it were, is now a misnomer (Budd, 2004a). This would underscore the significant cost employers incur in providing employee benefits (Giancola, 2012).

Employee benefits are inducements and services employers provide to employees aside the pay they receive for performance of their work (Dulebohn et al., 2009; Yanadori, 2015). Compensation therefore comprised “all forms of financial returns, intangible services and benefits employees receive as part of the employment relationship” (Milkovich et al., 2011, as in cited in Yanadori, 2015). Taken together, compensation and non-monetary rewards such as autonomy, career development and recognition make up an organization’s total reward system (Yanadori, 2015).

Employee benefits can be broadly classified into traditional and non-traditional benefits (Muse & Wadsworth, 2012; Ko & Hur, 2014). The former comprise conventional benefits such as leave of absence, healthcare, and retirement benefits that employers provide for workers (Dulebohn et al., 2009; Muse & Wadsworth, 2012; Ko & Hur, 2014). Because of their relative popularity, these types of benefits, in many contexts, form part of employees’ psychological contract since employees expect employers to provide them (Muse & Wadsworth, 2012). In many contexts, employers are statutorily required to provide traditional benefits to employees (Dulebohn et al., 2009; Yanadori, 2015).

Non-traditional benefits on the other hand comprise benefits, whose provision is not required by legislation but determined by employers (Budd, 2004a; Muse & Wadsworth, 2012; Ko & Hur, 2014). This would include such benefits as childcare, flexible work, job sharing, work-at-home programmes, among others which employers provide to enable employees cope with work and family demands (Budd, 2004a; Freitag & Picherit-Duthler, 2004; Dulebohn et al., 2009; Blumen, 2015).

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**Employee participation**

Employee participation is an intricate concept that has received wide interest across diverse disciplines within the broad area of social sciences ( Knudsen et al., 2011; Budd et al., 2010; Wilkinson et al., 2010). The emergence of new forms of participation, coupled with the interchangeable use, and overlapping of participation, voice, involvement, autonomy, and empowerment have further complicated the meaning of participation (Budd, 2004b; Parkes et al., 2007; Johnson et al., 2009; Wilkinson & Dundon, 2010; Brewster et al., 2014).

According to Wilkinson et al. (2010), employee participation accommodate the array of instruments used by employers to involve employees in decisions at all levels of the firms. This definition acknowledges the existence of different forms of participation, which is an important step in understanding the meaning of participation. However, the definition is broad and does not explain why employees are involved in decision making. Moreover, the meaning of employee participation is field-specific, since different perspectives of participation exist in literature (Ackers, 2010; Boxall & Purcell, 2010; Mardsen & Cañibano, 2010).

Two forms of employee participation have been identified: indirect and direct participation. When participation is indirect, employees are collectively involved in decision making through their representatives whilst in direct participation, employees are individually involved in workplace decisions (Budd et al., 2010). It is the direct form of participation that is the focus of this research.

**Employee Attitude**

Employee attitudes are “evaluations of one’s job that express one’s feelings toward, beliefs about, and attachment to one’s job” (Judge & Kammeyer-Mueller, 2012). While there are many forms of employee attitudes, the focus of this research is on job satisfaction and organizational commitment. While the former is directed towards one’s job, the latter is directed towards the employing organization.

Job satisfaction is the “pleasurable or positive emotional state resulting from the appraisal of one’s job or job experiences” (Locke & Lathan, 1976, as cited in Amangala & Ateke, 2018). It describes how employees feel about their jobs or the extent to which workers like or dislike their jobs. Job satisfaction is viewed as an individual’s attitude towards job, such that individuals who are satisfied will generally express positive attitudes towards their jobs whilst dissatisfied ones are more likely to express negative attitudes (Brief, 1998). This explains why organizations strive to maintain a satisfied workforce (Saari & Judge, 2004). Thus, the core of job satisfaction is that, it enables individuals demonstrate positive attitudes towards their jobs, which makes them more productive (Saari & Judge, 2004; Judge & Kammeyer-Mueller, 2012).

Organizational commitment is “a strong belief in, and acceptance of the organization’s goals and values; a willingness to exert considerable effort on behalf of the organization; and a strong desire to maintain membership in the organization. Meyer et al. (2012) view organizational commitment as “a psychological state that characterize employee’s relationship with the organization, and has implication for decision to continue or discontinue membership in the organization.

Meyer et al. (2012) provide that organizational commitment has three dimensions, namely, affective commitment, normative commitment and continuance commitment. Employees with

affective commitment are emotionally “attached to,” “identify with” and are “involved” in the organization. Therefore, affectively committed employees maintain organizational membership because “they want to do so” (Allen & Meyer, 1996; Meyer et al., 2002; Meyer, et al., 2012). On the other hand, when employees remain with the organization as a result of the recognition of the accompanying cost of leaving the organization, such commitment is known as continuance commitment (Meyer, et al., 2012). Finally, normatively committed employees are those that feel obligated to remain with the organization (Meyer, et al., 2012).

### **Hypotheses Development**

This study is built on the ability, motivation, and opportunity (AMO) framework of Boxall and Purcell (2003), which suggests that HR practices contribute to organizational outcomes when they develop employees’ abilities, as well as motivate and provide employees opportunities to make workplace contributions (Jiang et al., 2012b; Katou & Budhwar, 2014). In this study, training is viewed as an ability-enhancing HR practice while employee benefits are considered as motivation-enhancing HR practice. Finally, employee participation is an opportunity-enhancing HR practice. Thus, it is expected that these practices will improve employees’ abilities, motivate them to put forth positive attitudes, and provide them with opportunities to contribute to workplace decisions.

When employees are provided with AMO-enhancing HR practices such training, employee benefits, and employee participation, they recognize that the organization is concerned for their wellbeing. Therefore, based on the notions of social exchange theory (Blau, 1964) and perceived organizational support (Rhoades & Eisenberger, 2002), employees feel obligated to respond with positive attitudes in the form of job satisfaction and organizational commitment.

Indeed, studies show that HR practices positively relates to several positive outcomes, including job satisfaction (Andreassi *et al.*, 2014; Mostafa & Gould-Williams, 2014; Shamsudin & Ramalu, 2014; Fabi *et al.*, 2015; Vermeeren, 2015; García-Chas *et al.*, 2016; Heffernan & Dundon, 2016; Ollo-López *et al.*, 2016) and organizational commitment (Nwulu & Ateke, 2018; Ateke & Akani, 2018; Boon & Kalshoven, 2014; Fabi *et al.*, 2015; Mostafa & Gould-Williams, 2015; Heffernan & Dundon, 2016). Thus, taking together arguments in theory and previous research findings, the following hypotheses are formulated.

H1: There is a positive effect of HR practices on job satisfaction

H2a: There is a positive effect of HR practices and affective commitment

H2b: There is a positive effect of HR practices and normative commitment

H2c: There is a positive effect of HR practices and continuance commitment

### **METHODOLOGY**

This study adopted an explanatory research design and collected data in a cross-sectional survey. Thus, questionnaire served as instrument of primary data collection. The population of the study comprise 673 medical workers (excluding doctors) in a large government hospital located in Makurdi, Benue state. Due to anonymity agreement reached between the researcher and the organization, the name of the hospital will not be disclosed in any publication. Although the sample size was large, the study took a census. The participants were contacted through the administrative unit of the hospital as well as through their respective union leaders. A cover letter was sent alongside a questionnaire explaining the aim of the study, as well as informing

respondents that participation was voluntary and that respondents could withdraw from the research at any point.

The questionnaire was designed to collect data on demographic profile of the respondents as well as the variables of interest in the study (training, employee benefits, employee participation, job satisfaction, affective commitment, normative commitment, and continuance commitment). In all cases, the scales used for measuring each variable was an existing one as this was necessary to ensure validity of the measurement instrument. All responses were measured on a 7-point Likert scale ranging from strongly disagree (1) to strongly agree (7). Research assistants were recruited to assist in the data collection process. Out of the 673 copies questionnaire administered, 521 (77.4%) useable copies were retrieved. Thus, data analysis for this research is based on the 521 valid responses.

### DATA ANALYSIS AND RESULTS

Data analysis for this study was done using SPSS and SPSS AMOS. Multiple regression was used for testing of hypotheses. The demographic profile of respondents indicate that 59.3% were male while 40.7% were female. Majority (51.1%) of the respondents were between the 30-39 years age bracket while majority (47.4%) worked in the organization between 11 to 15 years. In terms of profession, majority (51%) of the respondents were nurses.

As a first step in the analysis, there was need to check for validity and reliability so as to certify the measuring instrument. As shown in Table 1, the instrument was found reliable since the Cronbach alpha ( $\alpha$ ) for each construct is above 0.70 which is the acceptable threshold. In terms of validity, the convergent validity was checked. The condition for convergent validity is that the average variance explained (AVE) for each construct should be  $\geq 0.50$ . Again, as Table 1 indicates the AVE for each of the construct is  $\geq 0.50$ ., thereby signifying convergent validity.

**Table 1: Descriptive Statistics: Means, Standard Deviations, Reliabilities, and Validity**

Variables	<i>M</i>	<i>SD</i>	<i>AVE</i>	<i>CR</i>	$\alpha$
Training	6.06	.95	.64	.94	.93
Employee Benefits	5.73	.97	.54	.89	.89
Employee Participation	5.93	.72	.51	.81	.81
Job Satisfaction	5.17	.88	.50	.82	.82
Affective Commitment	5.95	.99	.61	.90	.90
Normative Commitment	5.15	.95	.57	.89	.87
Continuance Commitment	2.58	1.05	.50	.85	.85

Source: SPSS & SPSS AMOS Output.

Notes: N= 521; *M*= Mean; *SD*= Standard Deviation; *AVE* = Average Variance Extracted;  $\alpha$  = Cronbach's Alpha; *CR* = Composite Reliabilities.

Further, there was need to check for the overall model fit in order to ascertain the goodness of fit between the data and the constructs. As presented in Table 2, all the conditions for the goodness fit have been met as well.

**Table 2: Model Fit Indices**

Measure	Recommended Threshold	Fit Index
$\chi^2/df$	<3.0	1.46
CFI	>.90	.95
GFI	>.80	.86
AGFI	>.80	.85
SRMR	<.08	.04
RMSEA	<.08	.03

Source: SPSS AMOS Output. CFI = Comparative Fit Index; GFI = Goodness of Fit Index; AGFI = Adjusted Goodness of Fit Index; SRMR = Standardized Root Mean Square Residual; RMSEA = Root Mean Square Error of Approximation.

**Test of Hypotheses**

To test the effect of HR practices (training, employee benefits, and employee participation) and employee attitudes (job satisfaction and organizational commitment), multiple regression analysis was used. As a first step, the control variables were entered in the first model whilst the HR practices were entered in the second model. The effect was tested on each of job satisfaction, affective commitment, continuance commitment and normative commitment.

**Table 3: Multiple Regression Results of Effects of HR Practices on employee attitudes**

Variables	Model 1		Model 2		Model 1		Model 2	
	JS		JS		AC		AC	
	$\beta$	SE	$\beta$	SE	$\beta$	SE	$\beta$	SE
<b>Control Variables</b>								
Age	.068	.043	.070	.042	-.021	.034	-.023	.034
Sex	-.037	.050	-.054	.049	.047	.043	.033	.042
Tenure	-.014	.047	-.015	.046	.013	.036	.015	.035
Pay	-.026	.050	-.021	.049	.085*	.041	.090*	.041
Education	-.015	.043	-.021	.042	-.044	.037	-.045	.037
<b>HR Practices</b>								
Training			.075**	.028			.009	.022
Employee Benefits			.043	.028			.063**	.024
Employee Participation			.019	.044			.043	.035
$R^2$	.123		.144		.404		.416	
Adjusted $R^2$	.107	.550	.124		.393	.562	.403	.558
$\Delta R^2$				.545				
			.021**				.012*	
	.123**				.404**			
$F$ for $\Delta R^2$ (DF = 3, 508)			4.157**				3.614*	

Source: SPSS Output. Notes: N= 521. \* $p < .05$ ; \*\* $p < .01$ . Sex: Male=1, Female=2; JS = Job satisfaction; AC = Affective commitment. Bootstrap regression coefficients are reported.

The results in Table 3 indicate that after accounting for control variables, the model for job satisfaction was significant [ $F(3, 508) = R^2 = .144, p < .01$ ] which means that the HR practices significantly predict job satisfaction in line with hypothesis 1. Nevertheless, the change in job satisfaction explained by HR practices was low ( $\Delta R^2 = .021, F$  for  $\Delta R^2 = 4.157, p < .01$ ) and even less than the variance in job satisfaction explained by the control variables. Meanwhile, among

the HR practices, only training ( $\beta = .075$ ,  $SE = .028$ ) had a unique effect on job satisfaction thus indicating that training is a better predictor of job satisfaction than the other HR practices.

Table 3 further indicates that the overall model for affective commitment was also significant [ $F(3, 508) = R^2 = .403$ ,  $p < .05$ ] whilst the change statistics also indicate a minimal change in affective commitment that is accounted for by HR practices after accounting for the control variables ( $\Delta R^2 = .012$ ,  $F$  for  $\Delta R^2 = 3.614$ ,  $p < .01$ ), which is less than the change statistics reported for job satisfaction. In terms of individual contributions of HR practices on affective commitment, only employee benefits ( $\beta = .063$ ,  $SE = .024$ ,  $p < .01$ ) had a significant effect. Both training ( $\beta = .009$ ,  $SE = .022$ ,  $p > .05$ ) and employee participation ( $\beta = .043$ ,  $SE = .035$ ,  $p > .05$ ) had no significant effect on affective commitment. However, since the overall model for affective commitment was significant and positive, the hypothesized relationship in hypothesis 2a is supported.

The results of effects of HR practices on normative and continuance commitment are presented in Table 4. The results show significant overall model for normative commitment [ $F(3, 508) = R^2 = .062$ ,  $p < .01$ ]. The incremental level of normative commitment ( $\Delta R^2 = .041$ ,  $F$  for  $\Delta R^2 = 7.306$ ,  $p < .01$ ) after accounting for control variables was however above the change in normative commitment accounted for, by the control variables unlike the case with job satisfaction and affective commitment. On the individual effects of HR practices on normative commitment, only employee benefits ( $\beta = .161$ ,  $SE = .045$ ,  $p < .01$ ) had a significant effect on normative commitment. Both training ( $\beta = .097$ ,  $SE = .051$ ,  $p > .05$ ) and employee participation ( $\beta = .086$ ,  $SE = .058$ ,  $p > .05$ ) had positive but insignificant effects on normative commitment. Since the overall effects of HR practices on normative commitment was significant, hypothesis 2b is supported.

**Table 4: Multiple Regression Results Showing Effects of HR Practices on Normative and Continuance Commitment**

Variables	Model 1		Model 2		Model 1		Model 2	
	NC		NC		CC		CC	
	$\beta$	SE	$\beta$	SE	$\beta$	SE	$\beta$	SE
<b>Control Variables</b>								
Age	-.033	.066	-.035	.066	.083	.080	.078	.079
Sex	.035	.088	-.010	.087	.060	.091	.097	.088
Tenure	-.035	.071	-.033	.072	-.034	.080	-.031	.081
Pay	.141	.088	.155	.086	-.102	.086	-.110	.086
Education	-.110	.081	-.118	.079	.033	.075	.042	.074
<b>HR Practices</b>								
Training			.097	.051			-.130**	.055
Employee Benefits			.161**	.045			-.130**	.051
Employee Participation			.086	.058			.022	.067
$R^2$	.021		.062		.127		.156	
Adjusted $R^2$	.004	.952	.039	.935	.111	.993	.136	.980
$\Delta R^2$	.021		.041**		.127**		.029**	
$F$ for $\Delta R^2$ (DF = 3, 508)			7.306**				5.867**	

Source: SPSS Output. Notes: N= 521. \* $p < .05$ ; \*\* $p < .01$ . Sex: Male=1, Female=2; JS = Job satisfaction; AC = Affective commitment. Bootstrap regression coefficients are reported.



The relationship between HR practices and continuance commitment in Table 4 also indicates an overall significant effect [ $F(3, 508) = R^2 = .156, p < .01$ ]. The change in continuance commitment ascribable to HR practices ( $\Delta R^2 = .029, F$  for  $\Delta R^2 = 5.867, p < .01$ ) after taking accounting for the control variables was below the incremental effect of the control variables. On the individual contribution of HR practices, both training ( $\beta = -.130, SE = .055, p < .01$ ) and employee benefits ( $\beta = -.130, SE = .051, p < .01$ ) had a significant effect on continuance commitment whilst the effect of employee participation ( $\beta = .022, SE = .067, p > .05$ ) on continuance commitment was insignificant. Although the hypothesis relating to HR practices and continuance commitment indicated a positive relationship, the significant effects of both training and employee benefits on continuance commitment were negative. This indicates that employees of public hospitals have a social exchange relationship with their organizations rather than an economic exchange relationship (Blau, 1964; Rhoades & Eisenberger, 2002). Thus, hypothesis 2c is not supported.

### DISCUSSION, CONCLUSION AND RECOMMENDATIONS

Findings from the tests of relationships between HR practices and employee attitudes indicate that HR practices (training, employee benefits, and employee participation) had positive effects on job satisfaction, affective commitment and normative commitment. These findings align with findings from previous studies (e.g. Edgar & Geare, 2005; Petrescu & Simmons, 2008; Conway & Monks, 2009; Elele & Fields, 2010; Costen & Salazar, 2011; Mendelson et al., 2011; Mostafa & Gould-Williams, 2015; García-Chas et al., 2016).

Nevertheless, among the HR practices, only training had a significant effect on job satisfaction. This unique contribution of training to job satisfaction may be due to the fact that among the HR practices, training is directly related to the job since it equips employees with skills required to perform their job. The feeling of competence arising from improved ability to perform a job in turn results to job satisfaction (Costen & Salazar, 2011). On the other hand, only employee benefits had a unique significant effect on affective and normative commitment. This indicates the importance employees in Nigeria attach to employee benefits as a result of poor wages in the country (Ikyanyon, et al., 2020).

Contrary to expectation that the high level of unemployment in Nigeria and favours extended by employers will force employees to remain with their organizations, thereby result in positive effect of HR practices and continuance commitment. Our findings indicates a negative effect of HR practices on continuance commitment. This finding is however, consistent with findings from previous studies (Elele & Fields, 2010; Mendelson et al., 2011) but contrary to the findings of Takeuchi and Takeuchi (2013), Sinclair et al. (2005) and Gong et al. (2009). This means that the relationship between HR practices and continuance commitment is mixed and may depend on economic contexts.

Among the HR practices covered in this study, training and employee benefits each had a unique negative effect on continuance commitment which indicates that decision of employees to remain with their firm is not due to the favours they receive in the form of training or employee benefits. This indicates that within the context of the study, social exchange relationships exist between employees and their organizations rather than economic exchange relationships (Blau, 1964; Rhoades & Eisenberger, 2002).

Based on the findings of the study, we conclude that HR practices (training, employee benefits and employee participation) have significant association with employee attitudes (job satisfaction and organizational commitment). Whereas this relationship is positive for job satisfaction, affective commitment and normative commitment, it is negative for continuance commitment. This indicates the existence of social exchange relationship between employees and their firms.

Thus, the study recommends that managers of public hospitals should consider employees as important stakeholders and invest in HR practices that improves their skills and abilities, and motivate and provide them with opportunities to contribute to workplace decisions. This will engender positive attitudes of employees which are beneficial to both employees and employers.

As this study is conducted within a single organization, although with a large sample size, the findings should be generalized with caution. Thus, similar studies should be conducted across other public sector organizations in Nigeria.

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