

A CORRELATION BETWEEN WORKPLACE STRESS AND ORGANIZATIONAL COMMITMENT: DOCTORS RESPONSE FROM PUBLIC AND PRIVATE HOSPITALS IN KARACHI, PAKISTAN

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ABSTRACT

The study inspects the correlation between occupational stress and organizational commitment among doctors working in public and private sectors of Karachi. The self-constructive survey questionnaire is circulated through convenience sampling techniques and gathered 1039 responses (public hospital=549 and private hospitals=490). A five-point likert scale measured response ranges from strongly agree (1) to strongly disagree (5) while 10-item scale was used to evaluate occupational stress. Additionally, dimensions of organizational commitment; affective, normative and continuance commitment were evaluated on a scale containing 6-items. The data was analyzed through SPSS 23. As interpreted from results, there is a weak positive linear relationship between AC and personal factor and organizational factor. Likewise, NC shares a weak positive linear relationship with personal resources and organizational factor. Similarly, CC has a weak positive linear relationship with personal factor and personal resources. However, AC has a strong negative relationship with personal resources while NC also has a strong negative relationship with personal factor. In a similar manner, CC has a weak negative linear relationship with organizational factor. Moreover, level of stress and commitment among doctors working in public hospitals is relatively low in contrast to private hospitals. In addition, males are under more stress. However, AC and NC are relatively high in females while CC is more in males.

KEYWORDS: Occupational Stress, Organizational Commitment, Public and Private Hospitals, Doctors, Personal Factors, Personal Resources, Organizational Factors

INTRODUCTION

In each facet of a work life of all individual, there exists a stress factor (Smith, 2000; Chang & Lu, 2007). To enhance the understanding regarding the impact stress creates on the workers- work related attitude, organizational researcher investigates the stress. The department of human resources, in an alliance represents its foundation. The stress level of a person depends upon the individual's devotion and experience gained during the route of development, which can receive clear attention of the researcher to get this topic highlighted. In this present era, job stress remains the rampant source of stress for a person. Stress happens to be the main rationale of misleading behavior of an employee working in an organization. Cost associated with stress influence both the employee and the organization. In particular, stress appears to be the staircase for the motivation and activity of an organization.

As stated by many researchers, stress and stress related problems have been a prevalent discussion for studies. In Pakistan, scarce numbers of researches have been conducted and visualizing the need of giving this topic a thought,

we came across the demand of an empirical study to be conducted.

Objective

- To establish gender discrimination in an alliance and career related stress in public and private hospitals.
- How organizational commitment and occupational stress does affects the working efficient of MALE and FEMALE doctors?
- To determine the relationship between organizational tenure of employees, organizational commitment and occupational stress.

Hypotheses

- H1: There is no significant relationship between occupational stress and organizational commitment of doctors in private and public sectors.
- H2: There is no difference between male and female doctor's the occupational stress and organizational commitment in public and private hospitals.
- H3: There is no significant difference between public and private hospital doctors' occupational stress and organizational commitment depending on their tenure.

LITERATURE REVIEW

Occupational Stress

Selye define stress as a physical and psychological relation to undesirable circumstances or influences in the alliance surrounding or vicinity (cited from Haque & Aston, 2016). In the same way, Nwadini (2006) state stress as a destruction of the emotional steadiness of the entity that bring about a state of incompetence in personality and behavior. In terms of work, the feeling of stress is distinguished from emotional imbalance or disrupting environment, which shatters one's confidence. Stress can also be related to different conditions through which an individual has been through, be it professional stress or personal stress. The combination of role strain; which encompass role disagreement, uncertainty and burden. As reviewed from previous literature occupation stress have an effect on emotional reaction and has a cognitive role.

Stress can relate to pessimistic emotional imbalance such as depression, rage, strain, fear, stubborn and frustrated behaviors which can differ in strength (Kumasey et al., 2014). The consequences of stress can be abrupt or long lasting (Haque, Aston, Kozlivoski, 2016; Zehra et al., 2017). According to Dianna and Griffin (1999), some employees endure stress that can cause an instant response to a situation while other shows concealed reaction. They also presumed that occupational stress can be a risk to the excellence of work quality of an employee. Stress can also be the chief cause of mismanagement and poor work efficiency of an employee (Haque et al., 2016). Stress appears as a destructive emotional disparity which can render job discontentment and deprived organizational commitment, as suggested by former studies (Zehra et al., 2017). On the counter part, the foremost part of occupational stress might be loss of interest and a discouragement in the process of experimentation and gaining experience.

The renowned consequences of stress presents as low job satisfaction, faulty quality of products and services, deprived and inadequate internal communication, conflicts and disagreement amongst employees, excessive sick leave, low motivation and morale, lack of capacity etc (Cicie, 2012). the overall organization efficiency and efficacy along with the proceeding problems are directly or indirectly associated with stress (Haque & Aston, 2016).

Organizational Commitment

The affiliation between research variables demands a brief distinguishing background of theoretical perception of organizational commitment (Haque & Yamoah, 2014). The ample number of researchers and scholars defines occupational commitment under the context of behavioral sciences. It is accompanied by goals set by an organization to be satisfied by an employee at his workplace (Haque & Yamoah, 2014). Whereas Mowday et al., (1979) argued that, organizational commitment is a psychological contract among organization and personnel. Bateman and Strasser (1984) argued it is a commitment that an employee signed with his organization and stays associated and affiliated throughout, by being loyal and devoted to the agreement. The willingness of an employee, helping efforts and approval of the norms affiliated with an organization is regarded as organizational commitment. In count to that, Mowday et al., (1979) along with portal et al, added further justification of organizational commitment by giving terms to these three dimensions; affective commitment (AC), normative commitment (NC), and continuance commitment (CC) respectively (cited from Haque & Yamoah, 2014).

Affective, Normative, & Continuance Commitment

Employee contract, acknowledgement, and zealous participation are component of organizational commitment. As mentioned above, the actual three component of organizational commitment as sufficient empirical studies have acknowledged it as "affective commitment - actual involvement, normative commitment - recognition, and continuance commitment - attachment of employees" (Allen & Meyer, 1996; Bartlett & Kang, 2004; Haque & Yamoah, 2014).

Affective commitment defines as when organizational commitment manifest in employees when they consider organizational objectives, as their own goals. Furthermore, normative commitment is a committed shown by the employee when they prove loyal devotion and compulsion for their organization. Moreover, Continuance commitment explains employee's dedicated performance to serve the same organization. After an organization there is a well defined plethora working around and to be very honest it seems so reckless. Now that, all the types of organizational commitment has been explained, It is easy to make a clear understanding regarding the relationship between organizational commitment with occupational stress. Organizational commitment is the emotional attachment of employees towards their current organization. Organizational commitment is a strong conviction in, and absorption of organization objectives and principal, and enthusiasm to exert significant effort in favor of the organization, they serve and their clear will to sustain organization citizenship. Organizational commitment has been an umbrella which shadows affective, normative and continuance commitment. And these evaluate organizational commitment as a variable. Affective commitment points at emotional tie and reorganization of the employees with the alliance. The favors gained being part of the organization is referred as continuance commitment whereas, normative commitment shows an urge of upholding employment.

Empirical Literature

On occupational stress, absolute numbers of researches have been carried out. As evaluated, western countries such as Australia, United State played a fundamental role in the study in contrast to Asians. Organizational stresses among

two genders differ as stated by a study executed in Australia. It is elucidated that males have propensity to work for extensive time span than females while the center of attention for female is intrinsic rewards rather than wages and promotions.

Gmelch & Burns (1994) of United States instituted that; stress is more customary in women's in terms of assignment based and professional distinctiveness. Parallel conclusions were made by Singaporean researchers so as to female endures more stress than male as they can tackle organizational politics elegantly. Analogous verdict was also formulated by Fotinatos-Ventouratos & Cooper (2005) of UK, that women's undergo raised mean score in virtue of "association with other people; which signifies job strain. De Smet et al., (2005) illustrated that, adjusting for age, education and occupational group, men predispose less psychological job hassles, even though it seems to be insignificant. Males are more liable to manage their profession and work well, as compare to women. And the explanation behind the lacking of women in reputable organization leads to their approach for less qualified job. In males job strain is not persistent, devoid of evident regional heterogeneity (de Smet et al., 2005). Age seems to have curvilinear relationship, with older employee being more contended than younger ones.

Work stress among younger personnel is more prevalent than older ones, as stated by Dua (1994) of Australia. This contributed to the idea that with growing age people turns out to be more skillful and mature. Again, according to study in Malaysia by Manshor (2003), in correlation with workload, age has an association with the stress. When an individual attain a certain age it becomes unbearable for him to stand workload. Balay (2007) emphasized that commitment experienced at the teacher's age is frequently based on internalization of organizational principles and recognition with those principles. Balay (2007) further found that male teachers were more likely to experience stress based on compliance and avoidance of conflict than were female teachers.. On the other hand, Rozenblatt (2001) argued that there is no connection between increasing age, nationality, education and organization workload and stress. Whereas, these aspects are influenced by employee's ability and skill flexibility. Hispanic females are more prone to job stress than males as enquired by Rodriguez-Calcano and Brewer (2005). Brewer and McMahon (2003) investigated that though there was a huge sum of discrepancy level of job stress among industrial education teacher educators, this discrepancy was not clarified by demographic features.

In contrast, to the two different age groups, older faces less stressful life and role stress as compare to younger counterpart, as revealed by Barkat and Asma (1999). The more the experience gained during work years of service, the more life and role stress prevails. An inverse relation is found between stress and income, i.e, the more he earning the lesser is the stress. Virk, Chhabra & Kumar (2001) suggested that with the promotion of an employee, the stress level also elevates. Further studies; have concluded duration of service, offered by an employee has both negative and positive association with stress. Hence, more studies showed that participant with lesser experience; reveal more stressful reaction, as compared to participant with more experience. Four factors have been acknowledged by Kumasey et al., (2014): personal characteristics (i.e. age, gender, education level), role characteristics (i.e. tenure, rank/position, role conflict, promotion opportunities), structural characteristics (i.e. organization size, span of control, existence of union, centralized authority), and work experience (i.e. group attitude, recognition, support from peers). In particularly, it can be identified that role characteristics and structural characteristics plays the role as capable stressors, which can affect commitment level or work efficiency of an employee.

As identified, organizational commitment can affect the attitude of an employee. According to a study, there is a correlation between organizational commitment and improved job performance and attitudes such as openness to innovation (Wycoff & Skogan, 1994), worker productivity (Clegg & Dunkerley, 1980; Haque & Yamoah, 2014), job satisfaction (Meyer et al., 1993; Ford et al., 2003; Becker & Billings, 1993; Haque & Yamoah, 2014; Haque et al., 2015), and positive social responsibility (Witt, 1990), organizational citizenship behavior (Shore et al., 1995; Coyle-Shapiro et al., 2006), low turnover intention (Mowday et al., 1982; Allen and Meyer, 1996; Faizan & Zehra, 2016; Haque & Aston, 2016). These merits of organizational commitment influence not only the organization but the individuals as well by trial and error- learning method. On the other hand, the negative aspects of low level of organizational commitment is related to pessimistic work related approach and attitude such as turnover intentions (Bashaw & Grand, 1994; Morrow, 1993), occupational deviance (Haarr, 1997), absenteeism (Farrell & Stamm, 1988; Morrow, 1993) and reduced employee effort, theft, job dissatisfaction, and unwillingness (Morrow, 1993). However, the above empirical evidences do not confirm that in developed context the relationship between variables has been explored thus this research is essential in this regard.

METHODOLOGY

We compared the variables of interest in different hospital setups through a self-constructive survey questionnaire to know the relationship among variables through quantitative approach. This cross sectional study design provided sufficient data regarding gender discrimination, commitment and stress level in distinct public and private sector. This study covered a period of time from Nov 2016 to December 2016 (along with pilot sampling). Data for the study was derived from 1039 number of participants working in various hospital setups in Karachi, Pakistan.. Hospitals and participants in the study were sorted out by non-probability sampling system. Initially, we elected the hospitals that showed interest. Consequently, consent document were signed by willing participant. 1435 number of questionnaire were distributed, and 1039 numbers were answered which became part of the data analysis. Thus 72.4% of response rate was attained in the study. The sample used for the study showed variation.

The data was collected by self reported questioner. A five-point likert scale measured response ranges from strongly agree (1) to strongly disagree (5). A 10-item scale was used to evaluate occupational stress. The three types of occupational commitment; affective, normative and continuance were evaluated on a scale containing 6-items. The researchers took consent from the participating organizations. The concerned organizations in the study were previewed to the nature of the study and kind of data, we were interested in. Cover letters for the organizations were accompanied with the copies of research instrument and objective of the study. In fact, confidentiality of the information was also assured to the participants. An envelope enclosing research instruments were sent to each participant, and were guided to fill complete questioner and seal it. This ensured that the data is approached only by the researcher.

In context of Pakistan, we inspected the individual disparity in stress and occupational commitment. Consequently, we examined gender disparity in stress and organizational commitment, along with disparity in stress and occupational stress amongst doctors in public and private hospitals. By means of standardized measure of occupational stress and occupational commitment data was compiled. The data was screened, coded and analyzed on statistical software. To facilitate the analysis Statistical Product and Services Solution (SPSS) version 23.0 for IBM was used.

RESULTS

Table 1: Tests of Normality

	Type of hospital	Kolmogorov-Smirnov ^a			Shapiro-Wilk		
		Statistic	Df	Sig.	Statistic	Df	Sig.
Organisational_Factors	Public Hospital	.130	549	.000	.962	549	.000
	Private Hospital	.125	490	.000	.963	490	.000

a. Lilliefors Significance Correction

One thousand and nine hundred respondents contributed in the study. To ensure whether data was normally distributed or not we applied normality test. As specified in aforementioned table 1, Shapiro-Wilk was calculated to be 0.000 which shows that data is not normally distributed. Similarly, to test the internal consistency/reliability of the variables we applied CRONBACH ALPHA test. The cronbach's alpha value was 0.56 which shows intermediate level of internal consistency for our scale with this sample size.

Table 2: Descriptive Statistics

DEMOGRAPHIC VARIABLES		OVERALL	PUBLIC	PRIVATE	MALE	FEMALE
Gender	Male	30.9%	24%	38.7%	-	-
	Female	69.9%	75.9%	61.2%	-	-
Marital Status	Single	70%	77.5%	61.6%	47.1%	78.1%
	Married	27.4%	20.5%	35.1%	24.2%	19.5%
	Divorced	0.4%	0.18%	0.8%	15.2%	0.2%
	Single mother	0.4%	0.3%	0.6%	0%	0.6%
	Single father	0.1%	0%	0.4%	11.4%	0%
	Prefer not to disclose	1.3%	1.2%	1.4%	2.4%	1.3%
Type of hospital	Public	52.8%	-	-	40.9%	58.1%
	Private	47.1%	-	-	59%	41.8%
Monthly income	Less than 10,000	18.7%	12.3%	25.9%	11.1%	22.1%
	10,000-20,000	13.8%	16.5%	10.8%	5.6%	16.1%
	20,001-30,000	12.8%	18.2%	6.6%	8%	14.9%
	30,001-40,000	5.3%	5.1%	5.7%	5.9%	5.1%
	40,001-50,000	9.2%	9.2%	9.1%	14.5%	6.8%
	Greater than 50,000	14.7%	4.4%	22.2%	28.8%	8.3%
	Prefer not to disclose	25.2%	30.4%	19.3%	22.6%	26.3%
Age	22-25 years	61.3%	66.8%	54.8%	33.5%	73.6%
	26-30 years	18.2%	21.4%	14.4%	24.2%	15.4%
	31-40 years	8%	7.4%	8.7%	15.2%	4.8%
	41-50 years	6%	2.3%	10.2%	13%	2.9%
	51-60 years	5.1%	1.4%	9.5%	11.8%	2.3%
	Greater than 60	1%	0.1%	2%	2.4%	0.41%
	Greater than 60	1%	0.1%	2%	2.4%	0.41%
total number of experience in Hospitality	Less than 1 year	38.85%	43.1%	34%	21.4%	46.7%
	1-2 years	24.4%	28.2%	20.2%	20.1%	26.3%
	3-5 years	15.5%	18.3%	12.4%	14.9%	15.8%
	6-8 years	5.2%	3.6%	7.1%	10.8%	2.7%
	9-12 years	4.3%	2.1%	6.7%	8.3%	2.5%
	13 – 15 years	2.6%	1%	4.4%	4.6%	1.8%
	Greater than 16	8.7%	3.2%	14.8%	19.5%	3.9%

As above table reveals that the majority of the respondents are female (69.0%), single (70%) aging between 22-25 (61.3%), working in public sector (52.8%) having experience of less than 1 year (38.5%) with monthly income of less than 10,000(18.7%).

Table 3: Test Statistic ^a

	Organisational_Factors	Personal_Factors	Affective_Compmitment	Personal_Resources	Normative_Compmitment	Continuance_Compmitment
Mann-Whitney U	109944.000	115214.000	111350.500	112761.000	106299.500	110981.000
Wilcoxon W	161947.000	372617.000	163353.500	164764.000	158302.500	162984.000
Z	-1.241	-.050	-.923	-.604	-2.068	-1.020
Asymp. Sig. (2-tailed)	.215	.960	.356	.546	.039	.308

a. Grouping Variable: Gender

The level of stress and commitment among male and female was evaluated by using Mann Whitney test. Since, the probability value is less than 0.05 which indicates that data is significant among male and female genders which show that male and females are not equally affected by stress. Males are under more stress in contrast to females. Since the ‘p’ value of AC, NC, and CC is less than the alpha value that indicates that data is statically significant, showing that AC and NC is higher among females whereas CC is higher among males.

Table 4: Hypothesis Test Summary

Hypothesis Test Summary				
	Null Hypothesis	Test	Sig.	Decision
1	The distribution of Organisational_Factors is the same across categories of Type_of_hospital.	Independent-Samples Mann-Whitney U Test	.330	Retain the null hypothesis.
2	The distribution of Personal_Factors is the same across categories of Type_of_hospital.	Independent-Samples Mann-Whitney U Test	.157	Retain the null hypothesis.
3	The distribution of Personal_Resources is the same across categories of Type_of_hospital.	Independent-Samples Mann-Whitney U Test	.054	Retain the null hypothesis.
4	The distribution of Affective_Compmitment is the same across categories of Type_of_hospital.	Independent-Samples Mann-Whitney U Test	.693	Retain the null hypothesis.
5	The distribution of Normative_Compmitment is the same across categories of Type_of_hospital.	Independent-Samples Mann-Whitney U Test	.748	Retain the null hypothesis.
6	The distribution of Continuance_Compmitment is the same across categories of Type_of_hospital.	Independent-Samples Mann-Whitney U Test	.695	Retain the null hypothesis.

Asymptotic significances are displayed. The significance level is .05.

The probability value (p) is less than 0.05, which indicates that result is significant. Thus, there is statistically

significant difference between public and private sector indicating that organizational commitment and stress is more among private hospitals.

Table 5: Spearmens Correlation

Speramens rho		Organisa tional_Fa ctors	Personal _Factors	Personal_ Resources	Affective_ Commitme nt	Normative_ Commitmen t	Continuance _Commitme nt
Organisatioal _Factors	Correlation Coefficient	1.000	.146**	.265**	.176**	.147**	-.010
	Sig. (2-tailed)	.	.000	.000	.000	.000	.739
	N	1039	1039	1039	1039	1039	1039
Personal_ Factors	Correlation Coefficient	.146**	1.000	-.015	.225**	-.014	-.126**
	Sig. (2-tailed)	.000	.	.624	.000	.655	.000
	N	1039	1039	1039	1039	1039	1039
Personal_ Resources	Correlation Coefficient	.265**	-.015	1.000	.081**	.260**	.149**
	Sig. (2-tailed)	.000	.624	.	.009	.000	.000
	N	1039	1039	1039	1039	1039	1039
Affective_ Commitment	Correlation Coefficient	.176**	.225**	.081**	1.000	.135**	-.024
	Sig. (2-tailed)	.000	.000	.009	.	.000	.430
	N	1039	1039	1039	1039	1039	1039
Normative_ Commitment	Correlation Coefficient	.147**	-.014	.260**	.135**	1.000	.358**
	Sig. (2-tailed)	.000	.655	.000	.000	.	.000
	N	1039	1039	1039	1039	1039	1039
Continuanc_ Commitment	Correlation Coefficient	-.010	-.126**	.149**	-.024	.358**	1.000
	Sig. (2-tailed)	.739	.000	.000	.430	.000	.
	N	1039	1039	1039	1039	1039	1039

The relationship between organizational stress and commitment was investigated by using spearman correlation. Preliminary analysis was performed to assure no violation of assumption of normality, since 'p' value is 0.000 which is less than alpha value than we reject null hypothesis which proves a significant correlation between affective commitment and organizational factor justifying a strong evidence against null hypothesis and showing a weak positive relationship between affective commitment and organizational factor ($r=0.176$, $n=1039$, $p=0.000$). Moreover, there is a weak positive linear relationship between AC and personal factor. Likewise, NC shares a weak positive linear relationship with personal resources and organizational factor. Similarly, CC has a weak positive linear relationship with personal factor and personal resources. However, AC has a strong negative relationship with personal resources while NC also has a strong negative relationship with personal factor. In a similar manner, CC has a weak negative linear relationship with organizational factor.

FINDINGS AND DISCUSSIONS

The elements of organizational commitment that is affective commitment, continuance commitment and normative commitment differ among male and females as evident from statistical test. According to a study of Haque and Yamaoh (2014) male shows high level of affective commitment that highly oppose our findings. Similarly, study conducted by Haque and Yamaoh (2014) studied that normative commitment is more prevalent in women which supports

our findings. Additionally, continuance commitment is more in female's gender as supported by their study but our study oppose this. Moreover, males are more affected by stress as evaluated by our study but according to Kumasey et al., (2014) females are under more stress in comparison to males. On the other hand, Haque & Aston (2016) and Haque et al., (2016) argued females are less vulnerable to stress at workplace. Adding more to the discussion, organizational commitment and stress level appears to be high in private sector. Our findings support the work of above-mentioned research findings as private sector has higher stress in contrast to public sectors.

The relationship between organizational commitment and stress has been evaluated, supporting strong negative relationship between affective commitment and personal resources, normative commitment and personal factor and weak negative relationship between continuance commitment and organizational factor which oppose the findings of study of Haque & Aston (2016) and Cicei (2012). While there is a weak positive relationship between affective commitment and organizational factor, affective commitment and personal factor, normative commitment and organizational factor, normative commitment and personal resources, continuance commitment and personal factor, continuance commitment and personal resources as supported by the study of Kumasey et al., (2014) and Cicei (2012).

CONCLUSION AND RECOMMENDATIONS

In hospital sectors of Pakistan both the public and private sector, male are more affected by stress in comparison to their counterparts. It is due to their personal stressors. However, affective commitment and normative commitment is more prevalent among females whereas continuance commitment is more in males. It is due to the workplace environment as female receiving more support in contrast to their counterpart. In addition, organizational commitment and occupational stress are more in private hospitals because of the fast-paced environment. Moreover, there is strong negative relationship between AC, NC, and CC and personal resources. Additionally, CC has weak positive relationship with personal factors, organizational factors, Similarly, AC and NC also has positive weak relationship with organizational and personal factors.

Doctors are an integral part of health care system globally. The study has identified a need to induce policies for doctors in Pakistan, because doctors working in public and private sectors are in stress. Simple and affordable statistics measures should be taken to improve the retention of doctors. There should be induction of professional occupational therapists for the counseling of stressed employees. Rotations in shifts shall be more flexible so that workload is balanced. This will increase the organizational commitment of doctors further. A more relaxed and convenient polices should be incorporated in the vicinity they are serving. The amendments will show more commitment level and low stress level among doctors. The policies shall be introduced to ensure work-life-balance increase among doctors in both public and private sectors.

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