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Global Post-epidemic Recovery: The Impact of Role Modeling on Employees' Proactive Behavior

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Abstract

With the end of global COVID-19 epidemic, hospital staff are likely to be "physically and mentally exhausted" after three years of grueling work in the fight against the epidemic. At this point, it is especially important to enable them to continue to maintain their previous proactive work behavior. This study focuses on 400 employees of various types in three-A grade hospitals in Zhanjiang, Guangdong Province, through the proactive motivation model. Statistical software SPSS 25.0 and AOMS 22.0 were used to analyze the survey data to test whether role modeling in hospital management can have an impact on employees' proactive behaviors, in addition to verifying the mediating role of transactional psychological contract. The results of this study show that: First, role modeling of hospital leaders has a positive effect on employees' proactive behavior and a negative effect on their transactional psychological contract; Second, transactional psychological contract has a negative effect on employees' proactive behavior; Third, the transactional psychological contract mediates the effect between role modeling of leaders and employees' proactive behavior. The results of this research add to the F-path of proactive motivation model, and provide enlightenments and implications for hospital management.

Keywords: Role Modeling, Transactional Psychological Contract, Proactive Behavior, Proactive Motivational Model

1. INTRODUCTION

In the past three years, in order to combat COVID-19, hospitals have been more than three years of "hard work", from the top to the managers, down to the front-line medical and nursing staff have made huge "sacrifices". Nowadays, in the post-epidemic era, while restoring the normal order of diagnosis and treatment, the hospital should also take effective measures to let the hospital staff come out of the "hard work" of the epidemic as soon as possible and maintain the original psychological contract spirit with the hospital, so as to integrate into the routine work as soon as possible, and create good social and economic benefits for the hospital with high-quality service and superb technology. However, in reality, role modeling in hospital management mainly refers to the fact that excellent "mentors" (upper level) teach humanistic care and future

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development to "apprentices" (lower level) through unique styles and strategies in a subtle way [1]. In short, it means that upper management should give employees more influence of role modeling in their words and behaviors. However, if hospitals want to achieve the common development of economic and social benefits, it is necessary to find ways to make hospital employees take active behavior to "pay". Proactive behavior refers to the work of employees in order to achieve their own as well as the organization's favorable factors, so as to purposefully change the current unfavorable to their own and the organization's impact of spontaneous behavior [2]. In other words, proactive behavior is the individual in the face of current work environment to actively choose to improve the current state, is a kind of active to adapt to the "survival" behavior. From the definition of proactive behavior, it can be seen that in reality, proactive behavior has a certain degree of "risk", because the consequences of this behavior in the psychological or career are unpredictable. Role modeling, on the other hand, influences others appropriately and encourages proper behaviors in times of crisis to reduce the "risk" that may arise [3]. Therefore, it is worth exploring how role modeling at the hospital management level can have an impact on proactive behavior of employees. Therefore, this study focuses on the impact of role modeling on employee proactive behaviors through the proactive motivation model.

2. THEORETICAL BASIS AND RESEARCH HYPOTHESES

2.1 Theoretical basis

The proactive motivation model suggests that proactive behaviors are flawed by the individual being singularly motivated because individuals establish proactive behaviors through explicit goals [4]. The three main paths that can motivate an individual's proactive behavior are can do, reason to, and energized to (can do is an indication that the individual has the ability to do it, reason to is an indication that the individual has a reason to do it, and energized to is an indication that the individual is enthusiastic about doing it) [4]. It can be seen that the path of "energized to" in these three paths is by energizing the emotional aspects of the individual so that the individual will exhibit proactive behaviors. Although previous studies have explored the possibility that negative emotions may affect individuals' proactive behaviors, there are fewer existing studies in general [5]. At the same time, some scholars have mentioned that current research has not adequately explored employee proactive behavior in terms of psychological climate factors [6]. In addition, due to the reform of "de-establishment" in public hospitals, the proportion of contractual employees in hospitals now accounts for the majority, except for the introduction of high-level talents. Therefore, we can choose to introduce the transactional psychological contract into this study, as a mediating variable to stimulate the active behavior of employees. Not only can we understand the antecedents of reducing the transactional psychological contract, but also enhance the proactive behavior of employees, thus bringing better benefits to the hospital. Therefore, the model of this study is shown in Figure 1.

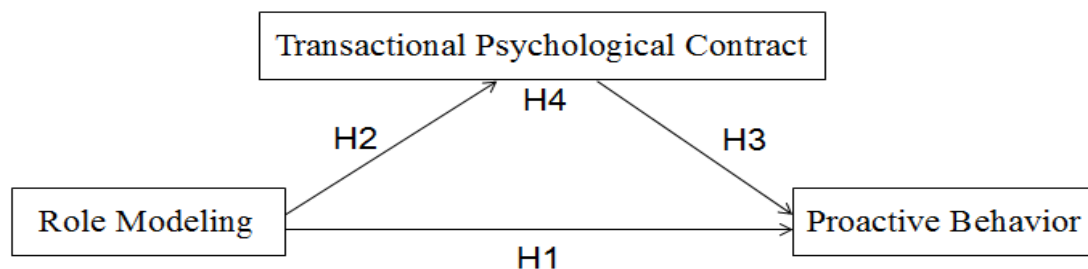


Figure 1. Research Model

2.2 Role modeling and proactive behavior

The definition of role modeling reveals that it represents the power of a role model, and coupled with the fact that hospitals are institutions, the power of role modeling from their leaders may exist to passively increase

the self-esteem of employees. However, higher self-esteem is a necessary factor for proactive behavior of employees [7], because when employees are feeling the role model from their leaders, they are able to make their own role position in organization clearer [8]. This is the imprinting effect that comes from the power of role modeling, and the effect enables the perceived person to imitate and identify with it, which leads to the behavior of positive adaptation to work [9]. At the same time, the style of leadership enables employees to put aside the uncertainties associated with proactive behavior and maximize the incentives for proactive behavior [10]. Therefore, excellent role modeling serves as a role model that can make the felt person show a motivation for proactive behavior. In summary, there may be imperative factors on role modeling that are needed to improve proactive behavior of employees. Therefore, hypothesis H1 is proposed:

Hypothesis H1: Role modeling of leaders has a positive effect on proactive behavior of hospital employees

2.3 The mediating role of transactional psychological contract

The psychological contract is a relatively long-lasting and stable state, mainly when the employee is observed, or based on the information feedback from the organization to which he or she belongs, and thus shows different psychological patterns [11]. In other words, employees may change the type of psychological contract they perform when the information they receive from the organization is "good or bad". Therefore, in order for employees to express their true psychological feelings at work, it is necessary for them to see hope for their own development [12], and this is where the role modeling power of role modeling becomes obvious. When employees can see that the role model's "journey" is feasible, they will show higher positive emotions at work, thus eliminating the original negative emotions. Thus, role modeling, as the power of example, is powerful enough to influence the different psychological contracts that employees have with their organizations [13]. The transactional psychological contract is exactly the current employment of both parties to the existence of implicit work agreement is relatively small in scope, the employer to the employed to show a clear salary and work period, the employed to the organization does not have the so-called emotional coloring exists [14]. Therefore, when the power of role models in role modeling is low for employees to feel, their negative emotions are likely to show higher, and the more likely the transactional psychological contract will appear. Therefore, hypothesis H2 is proposed:

Hypothesis H2: Role modeling of leaders has a negative effect on transactional psychological contracts of hospital employees

The reason why there are changes between the different types of psychological contracts that exist in the individual, which is mainly how the organization where the employee is treated by the employee's paid behavior, the organization's behavior is good or bad will directly affect the employee's attitudes and behaviors towards the organization in turn [12]. Therefore, when the organization's behavior towards the employee's performance at work if the employee feels dissatisfied, the employee's inner negative emotions will appear, which will naturally reduce his or her active behavior at work [15]. Therefore, employees' negative emotions and feelings are likely to influence employees' proactive behavior [5,16], and when employees' negative emotions or feelings are in a higher state, leading to the emergence of transactional psychological contract, their proactive behavior in the workplace may be reduced. Therefore, hypothesis H3 is proposed:

Hypothesis H3: Transactional psychological contract has a negative effect on proactive behavior of hospital employees

To sum up, this study starts from the F route in the mechanism of proactive modeling - i.e., through (energized to) [4]. That is, when employees may show transactional psychological contract, through role modeling to make them feel the power of higher role models, alleviate their negative emotional state, reduce their transactional psychological contract "realization", so that they can still maintain a high level of proactive behavior in the organization's work. Based on this, hypothesis H4 is proposed:

Hypothesis H4: Role modeling of leaders positively influences the proactive behavior of hospital employees through a transactional psychological contract

3. RESEARCH METHODOLOGY

3.1 Questionnaire design

In order to make the research data have better reliability and validity. Firstly, make a specific program for the selection of the research object, the distribution time of the questionnaire, and the way and method of collecting the questionnaire. Secondly, the content of the questionnaire is scientifically organized, and a mature research scale is selected by reviewing relevant literature. Finally, the questionnaires for the investigated variables: role modeling, transactional psychological contract, proactive behavior, and basic information are appropriately adjusted so that the respondents can better understand the contents.

3.2 Measured variables

For role modeling, Castro et al.(2004)'s scale [17] was used, which has high reliability and validity in cross-cultural contexts [18]. In this study, the role modeling dimension was chosen for the study, with 3 questions, using a 5-point Likert scale from "completely disagree" to "completely agree". For the **transactional psychological contract**, Rousseau(2000)'s psychological contracts [14] was used. The transactional psychological contract consists of four questions on a 5-point Likert scale from "not at all" to "to a great extent". For **proactive behavior**, Griffin et al.(2007)'s scale [19] was used, using a 5-point Likert scale from "not at all" to "very much". Also, four control variables were included in this study: gender, age, tenure and educational background.

3.3 Data collection

The data collection for this study was prepared from March 2023, and the samples came from the employees of three-A grade hospitals in Zhanjiang City, Guangdong Province. In order to be able to collect data in a better way, the hospital employees were surveyed with the following instructions: the data obtained will only be used for scientific research, and the information that may be involved is absolutely confidential. Finally, a total of 435 questionnaires were obtained in July 2023, with 400 valid questionnaires after screening, and the effective rate of questionnaire recovery was 91.95%. The basic situation of participants in the survey is shown in Table 1: in terms of gender, 49.3% are male and 50.7% are female, with a similar proportion of men and women. In terms of age, 39%, 35.3% and 15.8% were under 25, 31-35 and over 45 years old respectively, with a relatively reasonable age structure layer. In terms of tenure, 55.8% and 31.5% were within 5 years and 6-10 years respectively, with most of them working for less than 10 years. In terms of educational background, specialties and below, bachelor's degree and master's degree accounted for 18.3%, 48.8% and 32.8% respectively, with bachelor's degree and master's degree mainly dominating.

Table 1. Analysis of descriptive statistics (N=400)

	Form	number	percentage (%)
Gender	Men	197	49.3
	Women	203	50.7
Age	Less than 25	156	39
	26-30	23	5.8
	31-35	141	35.3
	36-40	5	1.3

	41-45	12	3.0
	45 or more	63	15.8
Tenure	Within 5 years	223	55.8
	6-10 years	126	31.5
	11-15 years	37	9.3
	16 years or more	14	3.5
	Educational background	Specialized and below	73
	Bachelor's degree	195	48.8
	Master's degree	131	32.8
	Doctor's degree	1	0.3
	add up the total	400	100

4. DATA RESULTS

4.1 Reliability and validity analysis

Cronbach's α coefficient was used in this study to test the internal consistency of the questionnaire. The reliability of role modeling in Table 2 is 0.913, the reliability of proactive behavior is 0.877 as shown in Table 1, and the reliability of transactional psychological contract is 0.834 as shown in Table 1, and all the variables under study are greater than 0.7. Therefore, there is good consistency for all the variables in this questionnaire.

Table 2. Results of reliability and validity

variable	CR	AVE	Cronbach's α	Scale source
role modeling	0.920	0.792	0.913	Castro et al. (2004)
transactional psychological contract	0.837	0.563	0.834	Rousseau (2000)
proactive behavior	0.878	0.707	0.877	Griffin et al. (2007)

From Table 2, we know that three latent variables in this study (role modeling, transactional psychology and proactive behavior) have good reliability (>0.7). Therefore, the AVE of all latent variables is higher than 0.5, and their CR are all higher than 0.7, with good validity [20]. Meanwhile, the three-factor fit also met the requirements: $\chi^2 = 91.452$, $\chi^2 / DF = 2.472$, CFI=0.977, NFI=0.962, IFI=0.977, RMSEA=0.061, and SRMR=0.033. In addition, this study used confirmative factor analysis (CFA) to test the common method bias of all variables [21]. The results of one-way model are as follows: $\chi^2 = 1711.782$, $\chi^2 / DF = 48.908$, CFI=0.285, NFI=0.283, IFI=0.288, RMSEA=0.347, and SRMR=0.247. It is thus clear that there is no problem of common method bias in the research data obtained from the present study. In conclusion, the research model possesses a reasonable model fit.

4.2 Hypothesis testing

In this study, the means, standard deviations, and correlations of variables were analyzed, and the results are

shown in Table 3: there was a significant negative relationship between role modeling and transactional psychological contract ($r=-0.131, p<0.01$), a significant positive relationship with proactive behavior ($r=0.272, p<0.01$), and a significant negative relationship between transactional psychological contract and proactive behavior ($r=-0.162, p<0.01$). In addition, there was a significant positive relationship between the age(control variables) and transactional psychological contract ($r=0.171, p<0.01$), and a significant negative relationship with proactive behavior ($r=-0.103, p<0.05$), and a significant positive relationship between tenure(control variables) and transactional psychological contract ($r=0.126, p<0.05$). There is a significant correlation between all variables, which can provide a better basis for hypothesis testing in the next step of this study.

Table 3. Correlation of variables

	average value	standard deviation	Gender	Age	Tenure	RM	TPC	PB
Gender	1.508	0.501	1					
Age	2.708	1.758	0.041	1				
Tenure	1.605	0.797	0.020	0.704**	1			
RM	3.736	1.007	0.030	-0.047	0.003	1		
TPC	2.478	0.919	-0.049	0.171**	0.126*	-0.131**	1	
PB	3.748	0.552	0.075	-0.103*	-0.072	0.272**	-0.162**	1

Note: N=400; * $p<0.05$; ** $p<0.01$; RM=Role Modeling, TPC=Transactional Psychological Contract; PB=Proactive Behavior

In this study, while conducting the validation factor analysis of research variables, the results were also analyzed as shown in Table 3. Role modeling had a significant positive effect on proactive behavior ($B=0.148, SE=0.027$), role modeling had a significant negative effect on transactional psychological contract ($B=-0.137, SE=0.047$), and transactional psychological contract had a significant negative effect on proactive behavior ($B=-0.079, SE=0.033$). Therefore, Hypothesis H1, Hypothesis H2 and Hypothesis H3 are supported by the research data and the results are shown in Table 4.

Table 4. Path analysis

Path	Estimate value	S.E.	C.R.	P
Role Modeling → Proactive Behavior	0.148	0.027	5.466	0.000
Role Modeling → Transactional Psychological Contract	-0.137	0.047	-2.916	0.004
Transactional Psychological Contract → Proactive Behavior	-0.079	0.033	-2.352	0.019

Meanwhile, in testing the mediating effect of transactional psychological contract, 5000 Bootstrap tests were used. Through Table 5, it can be learned that the mediating effect value of transactional psychological contract between role modeling and proactive behavior is 0.011, and the effect share is 6.92%, and the upper and lower intervals do not contain 0. Therefore, the Hypothesis H4 is supported.

Table 5 Transactional psychological contract mediation test analysis

Parameters	Estimate value	Product of coef.		Bias-corrected		Percentile		Effect percentage
		SE	Z	Lower	Upper	Lower	Upper	
total effect	0.159	0.028	5.679	0.107	0.215	0.106	0.215	

direct effect	0.148	0.028	5.286	0.093	0.204	0.093	0.204	93.08%
indirect effect	0.011	0.005	2.200	0.002	0.028	0.001	0.024	6.92%

A total of four research hypotheses were supported by the research data and better achieved the research objectives. Among them, hypotheses H1 and H2(the effect of role modeling on transactional psychological contract and proactive behavior) were effectively supported. Hypothesis H3(the effect of transactional psychological contract on proactive behavior) was also supported. Finally, the mediation model hypothesis H4 (role modeling positively influences employees' proactive behavior through transactional psychological contract) is also effectively supported.

5. DISCUSSION

First of all, role modeling can positively influence the active behavior of hospital employees, is the role modeling power can bring a certain "sense of security" for hospital employees, which is a prerequisite for them to reduce the possible negative impact of active behavior. The "distance" of role models allows hospital employees to plan their own careers, which in turn allows them to demonstrate more meaningful behavioral attitudes towards themselves and hospital. Furthermore, role modeling negatively affects the transactional psychological contract, which suggests that under the influence of role modeling, employees will obtain different information in the organization, especially the ones that are beneficial to them, which leads to a gradual decrease in the transactional psychological contract that they might have fulfilled. It also suggests that lower transactional psychological contract helps to increase the proactive behavior of hospital employees and conversely, higher transactional psychological contract diminishes the proactive behavior of hospital employees [15]. The data of this study once again verified to be consistent with the findings of previous studies.

Finally, the mediating effect of the transactional psychological contract is supported by the data. Because competition for employment was "unprecedented" during the three years of the new epidemic, and because role modeling provided hospital employees with a sense of security, employees had expectations and hopes for their future career development or advancement. As a result, hospital employees may not only take their temporary contract with the organization seriously, but also show a higher level of initiative at work in order to bring about beneficial development for themselves and the hospital.

6. CONCLUSION

This study focuses on the mechanisms of role modeling on employees' proactive behavior through the F-emotional route "energized to" in the proactive motivation model, citing the transactional psychological contract as mediating variable. First of all, role modeling of hospital leaders can increase the proactive behavior of employees and also reduce the state of transactional psychological contract of employees; Second, the higher state of transactional psychological contract is one of the factors hindering the proactive behavior of employees; furthermore, through higher role modeling, the transactional psychological contract of employees can be reduced, which can increase the proactive behavior of hospital employees.

Finally, hospitals should plan and organize to set the good example of role modeling and improve role modeling at the leadership level so that employees can deeply empathize with them. In the future, hospital management can also consider starting with occupational and psychological aspects to study the impact on employees' proactive behavior. And it is can also be considered to start with different types of personality variables as moderating variables to study the changes in personality on factors affecting proactive behavior.

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