Gender, diversity management perceptions, workplace happiness and organizational citizenship behaviour

Abstract

Purpose/ Aim: The purpose of this paper is to investigate whether females have different perceptions of diversity management and workplace happiness compared to their male colleagues. Furthermore, the paper explores whether diversity management perceptions mediates the relationship between workplace happiness and organisational citizenship behaviour.

Design/Methodology/Approach: A total of 260 questionnaire from a number of public hospitals in Egypt were analysed using both t-test and Structural Equation Modelling.

Findings/ Results: We found that female physicians perceive diversity management policies/protocols more positively than their male colleagues. Moreover, gender has no or little effect on physicians' perceptions of workplace happiness. We also found that workplace happiness positively affects physicians' organisational citizenship behaviour, and finally, diversity management practices can mediate the relationship between workplace happiness and physicians' organisational citizenship behaviour.

Social and practical implications: We believe that managers can raise the feeling of workplace happiness among their staff if they maintain some personal relationships with physicians, care about the physicians' work/life balance, promote after work gatherings, initiate coffee time talks, encourage open communication practices and more.

Originality: The paper is based on the argument that although employees might be happy in the workplace through (engagement, job satisfaction, affective commitment), however their happiness will be unlikely reflected into a positive organizational citizenship behaviour towards their

organisation, except (social exchange theory) they feel or perceive (equity theory) the overall practices of diversity management in that organization positively. Thus, studying the mediating effect of perceptions towards diversity management is mainly our contribution.

Key words: Gender, diversity management, workplace happiness, organizational citizenship behaviour.

Paper type: Research paper.

Introduction

Over the past two decades, the concept of diversity management has gained momentum in management literature (Pitts, 2009; Mousa & Puhakka, 2019). Diversity management as a concept emerged in the USA in the 1960s, where its aim was to ensure greater representation for minorities and disabled people in the labour market (Wrench, 2005; Ylostalo, 2016). The concept has been described as the voluntary positive practices institutions and societies undertake to deal with the dilemma of the marginalization, exclusion and under-representation of minority members (Kersten, 2000; Borchorst et al., 2012). Cho and Mor Barak (2008) consider that developing an inclusive organizational climate which appreciates individual differences and respects intergroup dissimilarities as the main purpose of diversity management policies.

On another perspective, organisational citizenship behaviour is now seen as vital for organizational effectiveness. Gyekye and Haybotallahi (2015) indicate that organisational citizenship behaviour shapes the social, operational and psychological components of organizational processes including workplace happiness. The conceptual framework of organisational citizenship behaviour originates from social exchange theory developed by Blau (1964), which entails that employees

care about their employer and do their best for the betterment of the organization only if they experience financial and socio-psychological appreciation from their employer.

In this paper, we mainly aim to study how the feelings of workplace happiness will be reflected in positive organisational behaviour when employees have positive perceptions towards diversity management practices, based on quantitative study from a number of public hospitals in Egypt.

The paper is based on the argument that although employees might be happy in the workplace through (engagement, job satisfaction, affective commitment), however their happiness will be unlikely reflected into a positive organizational citizenship behaviour towards their organisation, except (Social exchange theory) they feel or perceive (Equity theory) the overall practices of diversity management in that organization positively. Thus, studying the mediating effect of perceptions towards diversity management is mainly our contribution.

Our argument is based on the overlapped relationship between Adam's equity theory and social exchange theory. While, on the first hand, equity theory explains the thought process an employee uses to determine the fairness of management decision making (perception on diversity management practices), and that individuals judge the fairness of their treatment based on how others like them are treated, and employees make social comparisons to others who are similarly situated in the organization (Adams, 1963); it is on the other hand, that social exchange theory explains the argument that employees care about their organization when they perceive that it cares (Gouldner, 1960; Blau, 1964; Aryee et al., 2002), as organizations can expect a high level of commitment, performance and other positive outcomes behaviour from employees only when they are fairly treated (perception on diversity management practices) regardless of their gender, age, race and so on (Gilbert et al., 1999), and both employees and employer can build and maintain

mutually beneficial relationships that subsequently and continuously lead to a climate of organizational stability, psychological safety and institutional peace (Gouldner, 1960).

In the following two sections, we highlighted the main issues around diversity management and perceptions of diversity management practices, and also the cultural context of diversity management from Western and Middle-Eastern and African perspectives.

1. Diversity management and perceptions of diversity management practices

According to Thomas (1990), Gao and He (2017), Valentine and Godkin (2017) and Bizri (2018), diversity management can be perceived as managerial practices that secure equality, respect, appreciation and engagement among majority-minority affiliated members in a way that contributes to the achievement of their organization's set of strategic and tactical objectives. Muhr et al. (2012) and Knoppers et al. (2015) demonstrate that diversity management supports not only justice and productivity but also a majority-minority balance through securing workplace fairness and trust. Alas and Mousa (2016) indicate that accepting people as they are and securing fair treatment for them is constantly perceived as a motive for a set of positive organizational outcomes such as job satisfaction, organisational citizenship behaviour, loyalty, trust and performance. Mor Barak and Levin (2002) address the effect of diversity management on employee well-being, Mor Barak and Cherin (1998) explore the relationship between diversity management and employee turnover. Light (2008) has focused on its correlation with financial rewards employees attain, and Mousa (2017b) elaborates its relationship with responsible leadership and organizational commitment, while also demonstrating its effect on the level of organizational cynicism among employees (Mousa, 2018a).

However, the concept of diversity management has been widely criticized because of its focus on minority members and the simple practices (e.g. training, communication, coaching, mentoring) it calls for when attempting to alleviate cultural clashes, institutional marginalization and workplace discrimination originating from differences in religion, gender, age, political ideologies and so on (Knights and Omanovic, 2016). Lorbiecki and Jack (2000) and Ylostalo (2016) indicate that diversity management is sometimes seen as a driver of division, prejudice, stereotyping and in-out-group classifications. Holck et al. (2016) elaborate that diversity scholarship focuses on addressing, discussing and prescribing the way individuals understand and deal with tangible and intangible differences among them.

In studying the perceptions of diversity management practices among first and second-generation migrants to France, Hennekam et al (2019) pointed out that first- and second-generation migrants have different social expectations, which, in turn, influence their self-image, as well as their perception of organisational justice, and the interaction between their social identity and their perception of justice affects how they appraise diversity management practices in their organisation. Bacouel-Jentjens and Yang (2019) affirm the importance of contexts, such as workforce composition and power, in the study of diversity management, and the sense-making process, resulting in different diversity perceptions by different employees according to their work and social environments or contexts.

2. The cultural context of diversity management

Kim et al. (2015) highlight that diversity management has been perceived as only attracting considerable attention in western countries in which management scholars have shown interest in exploring employee perceptions of diversity management procedures on the one hand, and the

association between diversity management and some work-related attitudes/behaviours (e.g. employee commitment, cynicism, intentions to quit, presenteeism and performance) on the other. Choi and Rainey (2010) highlight that the rapid growth of diverse workforce in western labour markets has fostered different organizations to consider diversity management as a part of their HRM strategies. Some western organizations have established specific units for managing diversity and inclusion within their work settings.

Unfortunately, diversity management concepts are still underdeveloped in the majority of African and Asian countries despite the socio-cultural and economic amendments these countries have witnessed over the past two decades (Kim et al., 2015; Mousa, 2018b; Mousa and Ayoubi, 2019). For example, Park (2006) articulates that the majority of African and Asian countries are still male-dominated and any change in power structures and/or socio-cultural orientation may take years if not decades. Therefore, it is believed that diversity management has not been seen at the forefront of the academic research agenda prioritized by management researchers there.

Unlike many Western and some Middle-Eastern countries, Egypt has never been described as a country with an inclusive culture (Alas & Mousa, 2016). This country has never undertaken and/or implemented a responsible equality policy. Moreover, Egypt never takes pride in being one of the religion-equal, gender-equal and age-equal countries (Mousa, 2017b; Mousa, 2018a); however, the authors cannot neglect that the government there has started to realize some progress in recently securing women some political and socio-cultural rights. For example, Egypt has recently decreed constitutional amendments to include a 25-per-cent quota of women members in parliament (https://timep.org/reports-briefings/timep-brief-2019-constitutional-amendments/).   Moreover, more initiatives have been recently launched to ensure more socio-cultural and economic rights for women. One such initiative penalizes husbands who fail to financially support their ex-spouses

and children (after a divorce) with financial penalties and jail for up to a year. Apparently, the country has started to activate the participation of women in politics and the labour market in order to use such activation to counter the low reputation Egypt records in terms of human rights, political freedom, economic transparency and social justice.

Buttner et al. (2010) and Mousa (2017a) identify that diversity management comes to ensure that all employees have the same equal chance of accessing their organization's resources (e.g. pay, promotion, development opportunities, information). Moreover, authors like Mor Barak and Levin (2002) and Jin et al. (2017) emphasize the difficulty of designing and implementing a generally accepted diversity-related programme for all organizations as every organization has its own culture, values and employee demographic profile. Therefore, Andrews et al. (2005) and Pitts (2005) point out the risk of implementing any diversity management protocol/policy without having different scenarios for dealing with the dominant culture and its personnel. In this context, Hennekam et al. (2017) show three strategies to deal with the perceived clash: forcing a Western approach upon the local country, a reframing strategy where existing policies are reformulated to fit the Western requirements, and a sensitive approach in which the local context is considered, which suggests that organisations have to adapt diversity policies to local cultural factors of the country in which they operate. This is also because attitudes toward diversity are changing and evolving in the light of the changing environment and cultural context and that other cultural factors also play an important role (Hennekam and Tahssain-Gay, 2015).

Therefore, the authors sought to raise awareness regarding the significance of diversity management in the Egyptian health care sector. It is the authors' belief that this paper makes additional contributions in exploring the relationship between not only gender, diversity management perceptions but also gender and workplace happiness. To the best of the authors'

knowledge, both of the aforementioned relationships have not been identified in the Egyptian and Mideastern context. Upon assessing the psychometric properties of reliability and ensuring their maximum strength, the authors affirmed that the four measurement scales – gender, diversity management perception, workplace happiness and organisational citizenship behaviour, explained in the methodology section, can be applied in the health sector in Egypt.

The paper also investigates how workplace happiness is a predictor of organisational citizenship behaviour. While the study by Mousa and Puhakka (2019) addressed physicians in the Egyptian health care sector and highlighted that organizational inclusion stimulates physician's organizational commitment, this paper has paid attention to another variable– organisational citizenship behaviour – which has not been touched upon before in the Egyptian health care context despite its role in enhancing the effective functioning of organizations (Podsakoff et al., 2009; Chun et al., 2013). The use of workplace happiness as a predictor clarifies the significance this attitudinal construct has in shaping employee behaviour. More importantly, adding diversity management perceptions as a moderator maximizes the importance of this research particularly in organizational settings that are described suffering from minority-majority classifications and gender discrimination like those found in the Egyptian healthcare sector.

Given the fact that diversity management is new to a range of Egyptian organizational settings and that studies on diversity are still at an embryonic stage in the Egyptian health care sector, the authors of this paper address physicians in four public hospitals in an attempt to, first, explore how gender may affect perceptions of diversity management and workplace happiness. Second, to examine the relationship between workplace happiness and organisational citizenship behaviour, and lastly, to find out whether diversity management mediates the relationship between workplace happiness and organisational citizenship behaviour. The impetus for this study lies in addressing

diversity management and workplace happiness in an unstable organizational setting such as Egypt. The remainder of this paper is structured as follows: the authors start first with hypotheses formation, followed by the study design, then the results, and lastly discussion, implications, conclusion, and limitations and potential for future research.

3. Theoretical background and hypotheses development

3.1 Gender and diversity management perceptions

A growing body of studies have addressed the positive relationship between gender and firm performance (Oxelheim, 2006; Ben-Amar et al., 2013; Zhuwao et al., 2019), innovation (Miller and Triana, 2009), corporate reputation (Brammer et al., 2009) and CSR orientation (Zhang et al., 2013). Tanova (2009) indicates that gender management differs from one organization to the next because of the differences in every organization's culture, HRM policies, leadership style and internal values. Kanter (1977) and Ibarra (1993) elaborate that the existence of gender diverse teams may be a hurdle to intra-organization communication, as men may prefer to deal with men and women may also interact only with women – a situation that can create serious workplace conflict.

In the Middle Eastern context, such as Saudi context (Syed et al., 2018), and Egyptian context, organizations are still shaped through social discrimination, cultural inequality and majority-minority classifications (Bauer, 2011; Alas and Mousa, 2016). Unfortunately, the Egyptian public health care sector does not fully secure justice and equal employment opportunities (Pande et al. 2017; Mousa, 2018a). Many studies have reported on the in-out group differentiations, heavy workloads, organizational exclusion in addition to workplace discrimination females face in this Egyptian sector (Pande et al. 2017; Mousa, 2017b; Mousa, 2018a; Mousa, 2018b). Consequently,

in such cultural context, it would be predicted that female physicians will be welcoming diversity policies more positively than male. Accordingly, the first hypothesis is the following,

H1: Female physicians perceive diversity management practices more positively than their male colleagues. I.e., there is a significant difference between the means of diversity management for males and females with diversity management mean of females is significantly higher than diversity management mean for males.

3.2 Gender and workplace happiness

According to Fisher (2010), workplace happiness constantly derives from the direct employee experience of dealing with his or her employer. Accordingly, this attitudinal construct shapes employee behaviour and positive feelings towards work atmosphere, colleagues and employer. Erdogan et al. (2012) affirm that workplace happiness can be seen as a result of employee satisfaction with their leadership, work atmosphere, job description, job specification, career development and more. This view is shared also by other authors such as (Kahn, 1990; Harter et al. 2002; Helsin et al., 2001; Wu et al., 2017; Brunetto et al., 2014). Affective organizational commitment refers to the emotional feelings an employee maintains towards his employer (Mousa and Puhakka, 2019) and denoted a sense of belonging to the organization and continuance commitment emphasized the perceived costs of leaving the organization (Allen and Meyer, 1993). Individuals can be seen and/or described as doing well if they have wealth, health, stable employment and emotional stability (Joo and Lee, 2017; Diener, 1984; Carmeli et al., 2009). Despite the fact that Warr (2007) has worked towards proving the association between workplace happiness and employee performance, and Harrison et al. (2006) have addressed the relationship between employee job satisfaction and levels of organizational commitment, other scholars such as (Erdogan et al., 2012; Fisher, 2010) assert the need for further studies on workplace happiness

and its antecedents, particularly most studies have been conducted in Western organisational context (Chin, 2015). Previous studies assert the difficulty of creating workplace happiness in developing countries (Chin and Liu, 2017; Wu et al., 2017).

In the context of Egyptian health care sector, religion differences are the main motive for workplace discrimination and both male and female employees are not feeling happy (Mousa, 2017a). Similarly, Ellison and Mullin (2014) found that more gender is not found to be associated with workplace happiness. Accordingly, the second hypothesis could be formulated as follows,

H2: There is no significant difference between the means of workplace happiness perceptions for males and females.

3.3 Diversity management, workplace happiness and organisational citizenship behaviour

Organisational citizenship behaviour has become a tool for assessing proactiveness, passion, persistence and commitment to organizational performance (Organ, 1997; Salas-Vallina et al., 2017; Organ, 1988; Jha and Jha, 2010; Jo and Joo, 2011; Dalal, 2005; Gyekye and Haybotallahi, 2015).

Previous studies examined organisational citizenship behaviour from different angles, for example organisational citizenship behaviour is voluntary and not considered a part of any organization's formal system activated by an organization's culture and affects employee turnover (Podsakoff et al., 2009), financial performance (Chun et al., 2013), organizational commitment (Coyle-shapiro et al., 2006), workgroup task performance (Mackenzie et al., 2011), happiness at work (Salas-Vallina et al., 2017) and perceptions of organizational justice (Gupta & Singh, 2013). Organisational citizenship behaviour originates from social exchange theory developed by Blau (1964), which entails that employees care about their employer and do their best for the betterment of the organization only if they experience financial and socio-psychological appreciation from

their employer (Deluga, 1994; Spence et al., 2014; Elamin and Tlaiss, 2015). Luria and Yagil (2008) elaborate that employees who experience feelings of belongingness and respect tend constantly to maintain desirable and beneficial behaviours with their employer. Moreover, attitudinal theory, which entails that positive employee behaviour is mainly shaped by and/or derived from the positive attitudes perceived from the employer, also plays a role in constituting organisational citizenship behaviour (Ziegler et al., 2012).

As no previous studies have explored the different relationships between gender, diversity management, workplace happiness and organisational citizenship behaviour, the authors believe that workplace happiness and its positive attitudinal dimensions (work engagement, job satisfaction and affective organizational commitment) may enhance employee belonging to the institution through the mediating role of managing diversity effectively within the institution. Accordingly, the authors propose the following two hypotheses

H3: Workplace happiness positively affects a physician's organisational citizenship behaviour.

H4: Diversity management mediates the relationship between workplace happiness and organisational citizenship behaviour.

4. Methodology

4.1 Sample

The study was conducted among the physicians working in four public hospitals located in October Province, which is one of 26 provinces in Egypt. According to the latest statistics published in 2017, there are 676 public and 1,094 private hospitals around the country. The total number of physicians reached 122,850 where 40.1% of them were females (Central Agency for public Mobilization and Statistics, capmas.gov.eg, 2020). No breakdown is available by religion or by

province for gender. Physicians in Egypt, like those in other countries are perceived as golden workers and elite personnel. However, a study done by Mousa and Puhakka (2019) has indicated that most of them are not satisfied with the economic incentives, working conditions, work schedule and treatment they perceive. The authors decided to focus on public hospitals because they are the main destination for Egyptian low and middle-income families. However, the authors admit that their personal relationships with a number of physicians, mainly men, working in these hospitals were the main reason why these hospitals agreed to collaborate with the authors of the present paper, so the authors have chosen the convenience sampling method, which is a type of the non-probability technique, which refers to the collection of information from members of the population who are conveniently available to provide it (Sekaran and Bougie, 2013).

4.2 Procedures

The conceptual framework of the present quantitative study was drawn from previous studies conducted separately on gender, diversity management, workplace happiness and organisational citizenship behaviour. To the best of the authors' knowledge, the relationship between gender, diversity management perception, workplace happiness and organisational citizenship behaviour has not been addressed before, particularly within the context of public hospitals.

Upon obtaining the necessary approvals, the authors contacted all physicians working in the four public hospitals. Targeting all physicians meant adopting comprehensive count sampling, which reduces the possibility of a research bias and contributes to the potential to generalize the results obtained. Accordingly, 360 questionnaire forms were distributed via email and by hand with the kind assistance of the managers of the partner hospitals. The participants also received a cover letter that described the aims of the research and brief information about the authors. Moreover, the cover letter contained confirmation that all participants would receive a general report about

the results of the study upon analysing the collected data. The process of collecting the data consumed about four months, as the authors started in January 2019 and analysed the collected data in May 2019. After two follow ups, the authors could collect 270 completed questionnaires (which counts 75% response rate), only 260 (200 males and 60 females) of the collected questionnaires were valid for analysis. The following table (Table 1) shows more information about the participants.

Table 1. Demographic information about the respondents

Demographic Variables	Items	Count
Gender	Male	200
	Female	60
Age	below 25 years	25
	26–30 years	100
	31–35 years	75
	36–40 years	25
	41–45 years	20
	46–50 years	10
	More than 50 years	5
Level of Education	Bachelor	60
	Bachelor + Master	180
	PhD	20
Religion	Muslim	230
	Christian	30
Work Bases	Full time	260
	Part time	0

4.3. Measures

First, to measure diversity management, the authors of this paper used six items describing workplace diversity management developed by Mor Barak et al. (1998) after updating them to fit the organizational setting of Egyptian public health care. Second, for the organisational citizenship behaviour, the authors used the 16-item Likert scale developed by Lee and Allen (2002) after updating them to fit the Egyptian health care sector. Third, for the workplace happiness, based on the study by Fisher (2010), who elaborates that workplace happiness is a construct of three

dimensions – engagement, job satisfaction and affective organizational commitment – the authors of the present paper used the following measures: For engagement, the authors used the 17-item Likert scale developed by Schaufeli et al. (2002). For job satisfaction, the authors used the six-item Likert scale developed by Schriesheim and Tsui (1980). For affective organizational commitment, the authors used the eight-item Likert scale developed by Allen and Meyer (1990). All questionnaire items for all study variables adopted/modified from the above authors are presented in Appendix 1.

5. Findings

Table 2 presents the reliability analysis for diversity management (DM), workplace happiness measured by three variables: engagement (ENG), job satisfaction (JSAT) and affective organizational commitment (AOC); and organisational citizenship behaviour (OCB). The reliability analysis aims to assess the quality of the model. The authors have adopted and confirm that potential deviations occurring as a result of causal errors have little or no effect on the variables included within the scale used (Hair et al., 2006). The authors checked both Cronbach's Alpha (the most popular estimator of the internal consistency of scales) and the composite reliability (calculated in conjunction with SEM) values and affirmed the reliability of all items included within the scale. All Cronbach's Alpha values exceed the threshold of 70% and composite reliability values were higher than 0.8 and exceeded the minimum of 0.7 in the SEM analysis (Hair et al, 2014).

Table 2. Composite reliabilities, factor correlations, means and standard deviations*

Items	Mean	SD	Cronbach's Alpha	Composite Reliability	ENG	JSAT	AOC	DM	OCB
ENG	3.65	1.13	0.85	0.901	1				
JSAT	3.66	1.46	0.71	0.811	0.681	1			
AOC	3.42	1.47	0.72	0.821	0.649	0.712	1		
DM	3.75	1.52	0.78	0.864	0.411	0.461	0.411	1	
OCB	3.11	1.50	0.81	0.868	0.419	0.398	0.352	0.611	1

For hypothesis 1 (H1) and hypothesis 2 (H2), the authors used t-test to examine whether the means of diversity management and workplace happiness differ significantly amongst the two gender groups. As shown in Table 3, the results show a significant difference in diversity management means for males and females (t = -311, $P < 0.05$). For female physicians, the mean is 3.74 while the standard deviation is 0.82; meanwhile, the mean for male physicians is 3.15 and the standard deviation is 0.61. The results indicate that female physicians perceived (appreciate and respect) the diversity policies at their hospitals more positively than their male colleagues. Therefore, H1 is supported. Table 3 also shows that no considerable difference existed between male and female physicians regarding their perceived level of workplace happiness. As shown below in Table 3, M=3.59 while SD=0.66 for female physicians, while M=3.58 and SD=0.67 for their male colleagues. Accordingly, H2 is also supported.

Table 3. Diversity management and workplace happiness according to gender

	N	diversity management Mean (SD)	(workplace happiness)
Gender		T= -3.11 (df=279)	T= -0.55 (df=279)
Male	240	3.15 (0.61)	3.58 (0.67)
Female	80	3.74 (0.82)	3.59 (0.66)
Total	320	3.52 (0.73)	3.485 (0.672)
Note: $P < 0.05$			

In line with Hair et al. (2006), and to check that the estimated parameters were statistically significant and that responses were not affected by social desirability, the authors checked the

factorial loads of the measurement scales and found that all loads of the variables included within

the used scale were sufficiently high and above the recommended range (see Table 4).

Table 4. Factorial loads of the used scale

Factor	Factor loading	t-value	Factor	Factor loading	t-value
(Workplace happiness)			(Organisational Citizenship Behaviour)		
Engagement			OCB1	0.823	
ENG1	0.911		OCB2	0.928	7.112
ENG2	0.918	50.237	OCB3	0.943	9.009
ENG3	0.917	49.118	OCB4	0.723	6.213
Job satisfaction			OCB5	0.788	7.119
JSAT1	0.913		OCB6	0.832	7.760
JSAT2	0.909	37.517	OCB7	0.815	7.982
JSAT3	0.910	39.189	OCB8	0.798	7.112
JSAT4	0.905	49.114	OCB9	0.809	5.723
JSAT5	0.910	49.114	OCB10	0.796	4.223
JSAT6	0.903	38.243	OCB11	0.806	7.116
Affective organizational commitment			OCB12	0.907	6.577
AOC1	0.901		OCB13	0.819	8.998
AOC2	0.911	36.119	OCB14	0.912	7.985
AOC3	0.923	38.709	OCB15	0.907	8.902
AOC4	0.918	42.503	OCB16	0.921	6.105
AOC5	0.931	37.112			
AOC6	0.934	44.116			
AOC7	0.912	50.118			
AOC8	0.904	49.106			
(Diversity management)					
DM1	0.952				
DM2	0.911	13.114			
DM3	0.919	11.981			
DM4	0.923	11.124			
DM5	0.875	11.321			
DM6	0.977	11.229			
Note: All the estimated parameters are significant, with a 95% confidence level.					

The authors adopted the direct effect model (see Figure 1), which showed a positive relationship

between (workplace happiness) and (organisational citizenship behaviour) ($\varphi = 0.351$, t = 6.21, p

< 0.01). This supports the fit of the structural model and confirms that workplace happiness is

positively related to organisational citizenship behaviour. Consequently, H3 is fully supported.

Figure 1. The direct effect model
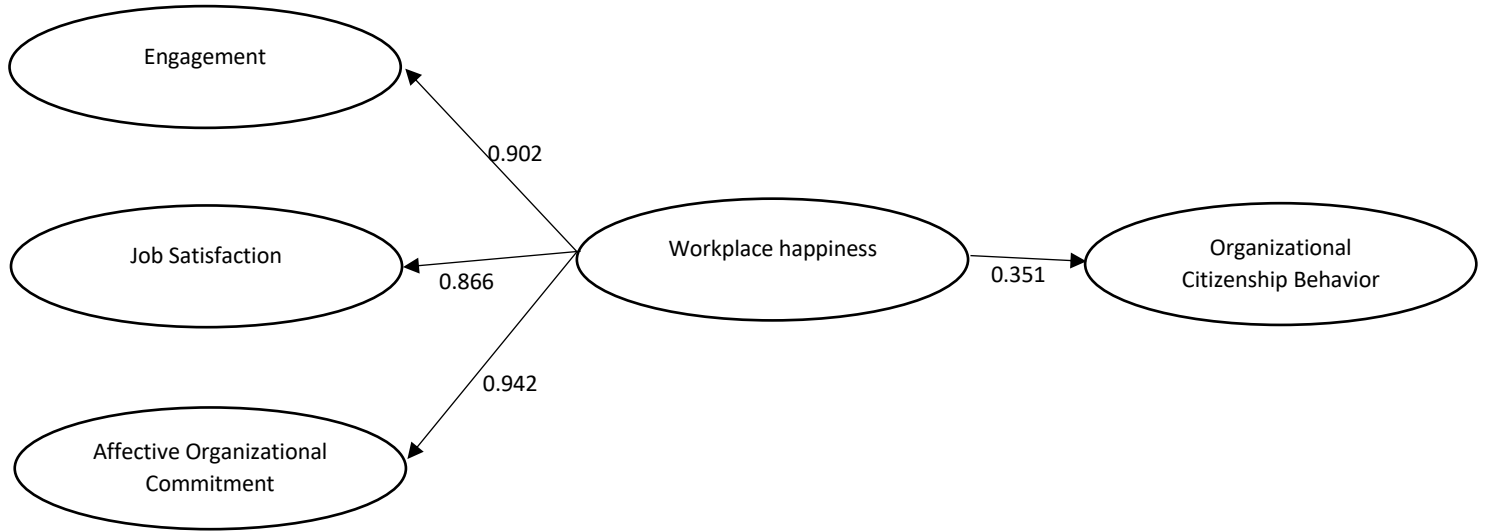
Structured equation:
Organisational citizenship behaviour = 0.351 × Workplace happiness
$R^2 = 0.261$
(t = 6.21)
Goodness-of-fit statistics
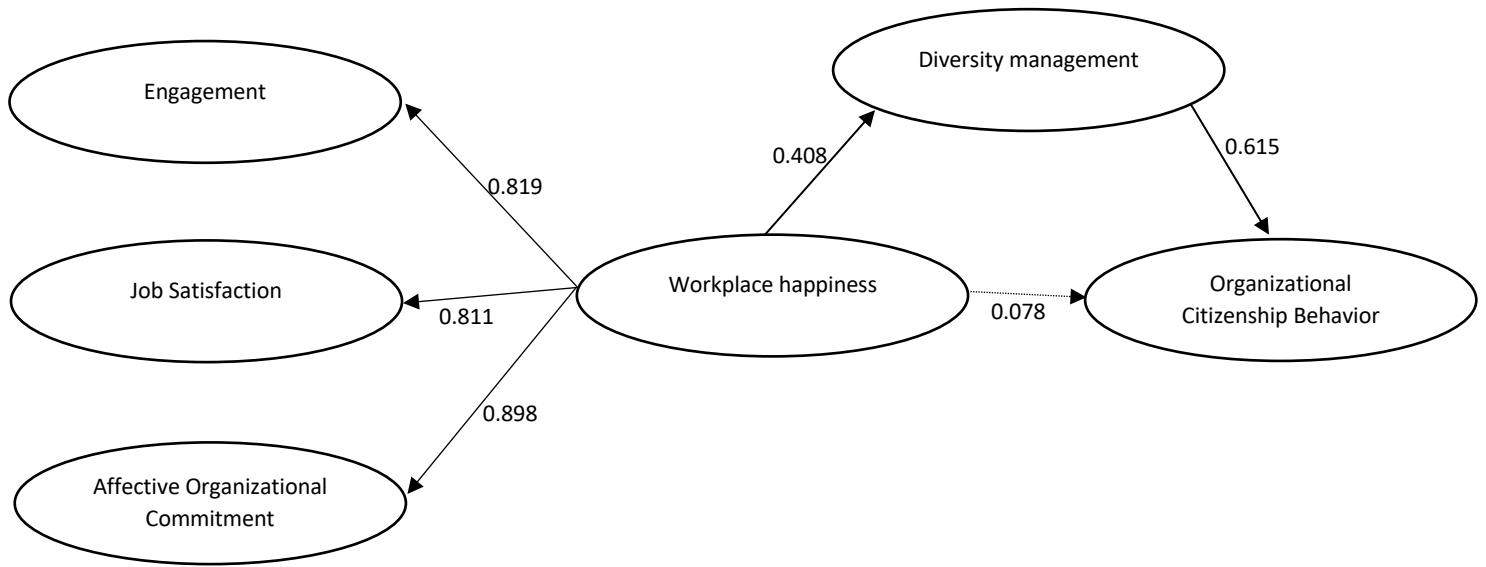$X^2 = 0.825$ (P < 0.01); df = 428
Normed $X^2 = 2.009$
Bentler – Bonnet normed fit index (NFI) = 0.925
Bentler – Bonnet non-normed fit index (NNFI) – 0.925
Comparative fit index (CFI) = 0.910
Root mean square error of approximation (RMSEA) = 0.049

Based on Hair et al. (2006), the authors examined the relationship between workplace happiness and organisational citizenship behaviour within the mediating role of diversity management (see Figure 2). The model showed a greater proportion of variance in organisational citizenship behaviour (0.871) than the direct effect model (0.261). This confirms the positive significant effect of diversity management in mediating the relationship between workplace happiness and organisational citizenship behaviour. Consequently, H4 is also fully supported.

Figure 2. The mediating model

Structured equation:
Organisationnel Citizenship behaviour = 0.078 × workplace happiness + 0.615 × diversity management
$R^2 = 0.871$
(t = 0.201) (t = 4.226)
Diversity management = 0.408 × Workplace happiness
$R^2 = 0.325$
(t = 4.108)
Goodness-of-fit statistics
$X^2 = 2.511$ (P < 0.01); df = 889
Normed $X^2 = 2.338$
Bentler – Bonnet normed fit index (NFI) = 0.912
Bentler – Bonnet non-normed fit index (NNFI) – 0.926
Comparative fit index (CFI) = 0.910
Root mean square error of approximation (RMSEA) = 0.028

6. Discussion and implications

6.1Theoretical contribution

While other researchers such Hewstone et al. (2002) highlight that diversity management can be traced back to social identity theory, where people tend to affiliate themselves to some groups based on factors such as gender, age, race, religion, nationality and so on, with the aim of

developing and maintaining personal and social respect (Tajfel and Turner, 1979), our study affirms social exchange theory, when employees care about their organization when they perceive that it cares (Gouldner, 1960; Blau, 1964; Aryee et al., 2002). While also diversity management could also be traced to theory of organizational justice (Greenberg, 1987; Colquitt et al., 2001; Yamaguchi, 2005), our study affirms equity theory or Adam's Equity, which explains that individuals judge the fairness of their treatment based on how others like them are treated, and employees make social comparisons to others who are similarly situated in the organization (Adams, 1963). Our paper is based on the argument that although employees might be happy in the workplace through (engagement, job satisfaction, affective commitment), however their happiness will be unlikely reflected into a positive organizational citizenship behaviour towards their organisation, except (Social exchange theory) they feel or perceive (Equity theory) the overall practices of diversity management in that organization positively. Thus, studying the mediating effect of perceptions towards diversity management is mainly our contribution.

6.2 Theoretical discussion

Gender and diversity management have become essential when considering individuals in the workplace (e.g. level of commitment, loyalty, job satisfaction, organisational citizenship behaviour). One of the purposes of this research was to pay more attention to gender in the Egyptian public health care sector by focusing on physicians who work there.

What is also particularly important and interesting in discussing these concepts in the context of Egypt are the cross-cultural differences between Egypt and other countries which are most likely contributing to the daily organisational context. Hofstede et al (2010) categorized the Egyptian culture as male oriented. Pertinent to the topic of cross-cultural communications presentation, and confirmed that managers within cultures like the Egyptian are moderately human oriented,

possessing an autonomous style of leadership that operate in male dominated society (Graen, 2006, Shi and Wang, 2011). There is evidence of high levels of personal attachment (Elsaid and Elsaid, 2012) which accords with Trompenaars and Hampden-Turner's (2000) classification of Egyptians as an emotional (Ali et al., 2006) as opposed to a neutral society. Dobbin and Jung (2012) highlight that most empirical studies on both gender and diversity management have been conducted in Western countries particularly in large profit-seeking organizations. According to Welzel (2014), in non-Western societies, women are mainly responsible for their family duties with some access to the labour market, whereas in Western societies, women are active partners in different organizational settings, competent in leadership positions and contributors to research and development. This could be considered a clarification for Welzel's theory of emancipation from 2013 which entails that human empowerment (female in this case) is mainly based on: action resources (socio-economic capabilities), emancipative values (psychological stimulation) and civic entitlements (removal of institutional boundaries such as workplace discrimination, bias and negative prejudice). The existence and/or availability of these three factors of human empowerment guarantees women an effective share in leading societal and organizational positions (Kakabadse et al., 2015; Brieger et al., 2019).

The results of this study showed that female physicians perceive diversity management policies/practices more positively better than their male colleagues. According to Cho and Mor Barak (2008), Pitts (2009), Holck et al. (2016), and Mousa and Puhakka (2019), diversity management policies/practices seek to develop an inclusive organizational climate in which individual differences (gender in this case) are respected, all employees are fairly treated and subsequently assessed based on their credentials and level of performance. Consequently, the effective management of diversity ensures that female physicians are highly empowered without

being presented with hurdles and/or concerns based on gender, which is why female physicians perceive diversity management practices more positively than their male colleagues. Furthermore, the fact that diversity management constantly designs/initiates managerial actions that secure respect, equality and engagement among majority and minority affiliated members contributes to the achievement of both organizational and personal goals – as highlighted by Gao and He (2017) and Bizri (2018) – may explain this high appreciation of diversity management policies among female physicians.

The results also showed that there is no difference among female and male physicians in their perception of workplace happiness; or in other words, gender has no or little effect on perceptions of workplace happiness among physicians. The authors think that this is another logical result, as workplace happiness is often derived from the direct experiences the employee has had with his or her employer (Fisher, 2010). This is in line with Erdogan et al. (2012), who affirm that the level of workplace happiness results from employee satisfaction with the leadership, working conditions, job description, career development and more. This confirms the absence of any gender-based effect on the employee's perception of workplace happiness.

The results showed that workplace happiness positively relates to a physician's organisational citizenship behaviour. The authors think that this result is in line with attitudinal theory which says that an employee's (physicians in this case) positive behaviour is mainly formed by the positive attitude he/she perceives from his employer (hospital in this case). Moreover, the result obviously reflects social exchange theory, which says that an employee cares about his or her organization only if he or she experiences economic and socio-psychological appreciation (Blau, 1964; Deluga, 1994; Spence et al., 2014). Accordingly, a physician's sense of engagement, job satisfaction and

emotional attachment to his or her hospital are often translated as behaviours of passion, proactivity, persistence and affiliation for the betterment of the hospital.

This also explains why the results showed that diversity management mediates the relationship between workplace happiness and the physician's organisational citizenship behaviour. The physicians not only feel satisfied with their leaders, work atmosphere and job description, but also feel respected, fairly treated and included despite their tangible and intangible dissimilarities and/or differences. This encourages and stimulates their voluntary efforts in assisting their colleagues, accepting their working conditions, doing their best to fulfil their job requirements, alleviating any work-related conflicts and feeling affiliated with the hospital they work in.

6.3 Practical implications

Although the health public system in Egypt provides basic universal coverage, it is plagued by chronic underfunding, low service quality, and high out-of-pocket payments. With only 4.75% of GDP spent on health, total health expenditure in Egypt is low compared to other lower-middle-income countries (Gericke et al., 2018). According to Egyptian Medical Syndicate, half the country's doctors, or 110,000 out of 220,000 registered doctors, have left the country (Alfanar Media. July, 2019). This explains a country low level of organisational citizenship behaviour in a critical sector such as the health sector. This will require more efforts from the government to retain physicians and reduce turnover rate which justifies the importance of conducting this study. Based on the results obtained from this study, the authors of this paper suggest the administration of the hospitals in the study pay more attention to workplace happiness and its causes in order to build and then support the level of organisational citizenship behaviour among physicians. The authors believe that managers can raise workplace happiness among their staff if they maintain personal relationships with physicians, care about the physicians' work/life balance, promote after-

work gatherings, initiate coffee machine talks, encourage open communication practices and more. These simple actions recharge personal energy and enhance emotional ties with the hospitals they work in. It is also fundamental for the administrations of the hospitals to regularly measure their physicians' level of happiness at work. This is possible by observing their behaviour, asking them direct open questions or urging them to write monthly reports about what they like, dislike and worry about, and what they suggest.

The administration should also care about diversity management and majority-minority comparisons. This can be efficiently handled if the managers of the hospitals consider justice as a paradigm for encouraging internal peace at their hospital. Physicians should be recruited, hired, developed and retained based on their educational credentials and level of performance. Such fair treatment contributes to feelings of inclusion and supports the sense of affiliation and commitment.

6.3. Limitations and suggestion for future research

The first limitation of this study was its focus on physicians, even if they are often considered golden workers, without giving any attention to other categories of employees (nurses, administrators etc.) working in the same health care sector. This limits the authors' ability to generalize the results of their research. The second limitation was the authors' decision to address only public hospitals while neglecting private ones. Needless to say that in Egypt and the majority of Middle-Eastern countries, aspects such as organizational culture, working conditions, development opportunities and economic incentives vary from one setting to another. This limitation may also hinder the authors' ability to generalize the results of the research. A third limitation is that the current study does not provide enough data on religious diversity which could have been used to enrich the analysis. This limitation opens the door for future research in the religious difference importance for diversity management in a country like Egypt which deserves

additional future investigations. Religion is a deep-level and understudied aspect of diversity management that deserves more attention given the increase in religious diversity in the workplace (Hennekam et al., 2018).

By employing only quantitative analysis, the paper has pointed out that there is no difference between men and women in their perception of workplace happiness. However, the answer to this question can be the subject of a qualitative study, which will make it possible to obtain more information on this subject. In this perspective, the authors strongly believe that carrying out a qualitative study to explore elements explaining in detail this perception, particularly in a cultural context marked by a strong masculinity is essential to have more explanations on the relationship between workplace happiness, organisational citizenship behaviour and diversity management.

Furthermore, the authors of this paper suggest other human resources management researchers test the same research hypotheses in private hospitals in order to gain more in-depth knowledge about the four variables addressed in this study. It is also advisable to test the hypotheses in other organizational contexts such as universities, SMEs and non-profit organizations. Finally, the authors suggest human resources management researchers collaborate with researchers from the disciplines of public policy, organizational psychology, politics and sociology in producing more interdisciplinary studies about the relationship between workplace happiness and organisational citizenship behaviour in different public and private organizational settings.

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Appendix 1

Diversity management

1. I feel that I have been treated differently here because of my race, sex, religion, or age.
2. My managers have a track record of hiring and promoting physicians objectively regardless of their race, sex, religion or age.
3. My managers here give feedback and evaluate physicians fairly, regardless of such factors as the faculty member's race, sex, age, or social background.
4. My managers here make promotion and tenure decisions fairly, regardless of such factors as the physician's race, sex, age, or social background.
5. My managers interpret human resource policies (such as sabbaticals) fairly for all physicians.
6. My managers give assignments based on the skills and abilities of physicians.

Organizational citizenship behavior

1. Show pride when representing the organization in public.
2. Express loyalty toward the organization.
3. Willingly give your time to help others who have work-related problems.
4. Defend the organization when other employees criticize it.
5. Help others who have been absent.
6. Share personal property with others to help their work.
7. Assist others with their duties.
8. Show genuine concern and courtesy toward co-workers, even under the most trying business or personal situations.
9. Keep up with developments in the organization.
10. Take action to protect the organization from potential problems.
11. Demonstrate concern about the image of the organization.
12. Adjust your work schedule to accommodate other employees' requests for time off.
13. Attend functions that are not required but that help the organizational image.
14. Go out of the way to make newer employees feel welcome in the work group.
15. Offer ideas to improve the functioning of the organization.
16. Give up time to help others who have work or nonwork problems.

Workplace happiness

Work engagement

1. At my work, I feel bursting with energy.
2. I find the work that I do full of meaning and purpose.
3. Time flies when I am working.
4. At my job, I feel strong and vigorous.

5. I am enthusiastic about my job.
6. When I am working, I forget everything else around me.
7. My job inspires me.
8. When I get up in the morning, I feel like going to work.
9. I feel happy when I am working intensely.
10. I am proud of the work that I do.
11. I am immersed in my work.
12. I can continue working for very long periods at a time.
13. To me, my job is challenging.
14. I get carried away when I am working.
15. At my job, I am very resilient, mentally.
16. It is difficult to detach myself from my job.
17. At my work I always persevere, even when things do not go well.

Job satisfaction

1. I am satisfied with the work I do.
2. I am satisfied with my supervisor.
3. I am satisfied with the relations I have with my co-workers.
4. I am satisfied with the pay I receive for my job.
5. I am satisfied with the opportunities which exist in this organisation for advancement (promotion).
6. All things considered, I am satisfied with my current job situation.

Affective organisational commitment

1. I would be very happy to spend the rest of my career with this organization.
2. I enjoy discussing my organisation with external people.
3. I really feel as if this organisation's problems are my own.
4. I think that I could easily become as attached to another organisation as I am to this one.
5. I feel like part of the family at my organization.
6. I feel emotionally attached to this organization.
7. This organisation has a great deal of personal meaning for me.
8. I feel a strong sense of belonging to my organization.