

Presenteeism in Organizations: A Research on the Impact of Psychological Ownership in Healthcare Professionals

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Abstract

The purpose of this research is to examine the behaviors of presenteeism (PT) in employees and to determine whether psychological ownership (PO) effects on these behaviors. Accordingly, data has been obtained from 485 healthcare professionals in the public and private sectors by survey method and independent sample T Test and One-Way ANOVA Tests have been carried out with validity, reliability, normality, correlation, and multiple regression analyses for this data. As a result of the analyses carried out; a negatively significant relationship has been found between PO and PT and a 1-unit increase in PO has been found to cause a decrease of 0.410 units in PT. However, it has been concluded that the level of PT in single employees is higher than that of married employees, PT is higher in private sector workers than in public sector workers, and employees under 21, compared to those aged 21-40 and 41-60, and as the duration of work experience and monthly income level increases, PT decreases gradually.

Keywords: Psychological Ownership, Presenteeism, Health Problems, Health Management

JEL Code: M1, M12, J81

1. Introduction

Being human-oriented is of great importance in today's behavioral science approaches. Therefore, it is key for managements to understand the thoughts and feelings of the workers and to manage them well and to ensure organizational success.

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One of the factors that enables institutions and organizations to have a sustainable competitive advantage is the positive behavior of their members. Therefore, organizations have been trying to reduce the unproductive negative work behavior of employees such as social participation and laziness, which can harm the organization and its stakeholders in recent years. In this context, PT behavior within the scope of negative business behavior and PO within the scope of positive business behavior will be discussed in the study.

PO can be felt for many objects or phenomena such as professions organizations, employees and duty (Yıldız, 2016), and it has emerged in the form of a sense of ownership that individuals feel towards living or inanimate beings without legal rights. Elements in ownership can be abstract or tangible entities in the form of a new idea, a project, a strategic initiative, or ideas (Avey et al., 2012). The fact that employees feel ownership towards any object creates belonging and thus PO allows the employees to satisfy their feelings of commitment. PO behaviors are observed as a source that provides a competitive advantage for managers by affecting performance in institutions.

A person's health is their most important asset, and the basic life needs of an unhealthy person can be limited or completely impaired. One of the basic needs is to work. Undoubtedly, a person's ability to work is greatly affected by his health condition (Schultz and Edington, 2007). PT is that when workers experience several psychological or physical problems that require them not to go to work, they are at work for reasons such as fear of losing their jobs, and anxiety about not achieving their goals or career prospects. In addition, PT is a situation in which workers are at work but are not able to perform as expected by not being able to fully focus on their work (Lowe et al., 1996). PT is one of the topics that has been frequently emphasized in the literature on organizational life and management, especially in recent years. This concept, which can be considered one of the important factors determining the productivity of employees and organizations, is of high importance for employees and institutions. Therefore, in this research, the concept of PO, which is thought to affect this behavior together with PT behavior, has been examined and it has been emphasized whether PO affected PT.

Understanding how PO can influence PT is crucial for both academic research and practical applications in industrial firms. This study aims to contribute to research by uncovering underlying mechanisms and highlighting the significance of PO in relation to PT, thus expanding our knowledge base and providing insights for management practices. Additionally, this study lays groundwork for future research. In conclusion, this research adds a new dimension to studies on PT and offers a valuable contribution to improving human resource management practices in organizations. Therefore, it can be considered an important reference for business managers, human resource professionals, and academics.

2. Literature Review and Hypothesis Development

2.1. Presenteeism



When the first emergence of the concept of PT in the literature is examined; it is observed that it has been used in the same sense as the concept of absence in the 1970s. However, since the 1980s, differences between concepts have begun to emerge (Özmen, 2011) On the other hand, Cooper (1996), whose concept of PT stands out in the field of organizational management, clearly defined the concept of "PT Theory". Although the concept has been studied to date, it still needs to be corrected. However, the study by Cooper (1996) and subsequent studies and opinions have shown that the presentation has a different structure than the theory of absence (Cser, 2010). The emergence of the issue of absenteeism at work is based on the issues that occurred in the XXth century and which also affected the structure of society. Especially in the 1990s, the global recession, the downsizing of companies due to this economic downturn, and the resulting unemployment and the fact that people had to work without job security, became the main reason for not being in a job (Cooper, 1998).

PT concept is one of the issues that has been emphasized especially in social sciences in recent years. In this context, it is observed that numerous definitions have been made in the literature related to PT. According to Aronsson et al. (2000:503), the concept of PT is defined as "a phenomenon that indicates that employees are in the workplace and continue to work instead of resting despite health problems and illnesses". In another definition, Gosselin and Lauzier (2011) defined PT as the ability to work on their own, even if an employee's physical and psychological problems forced them to become unworkable. PT, on the other hand, is defined as workers working for various reasons despite complaints and illnesses that require rest and absence in the workplace (Aronsson et al., 2000; Çoban and Harman, 2012). As the definitions include, the health of employees may improve, and the cause of these problems may be physical or psychological. If this absence is caused by PT, there may be a loss of productivity (Çiftçi, 2010).

Many studies have been carried out to measure the effectiveness of workers in business life. Loss of work related to the disease is more expensive than absenteeism, according to research (D'Abate and Eddy, 2007; Goetzel et al., 2004). PT is defined as working while sick (Hansen and Andersen, 2008). Based on the meaning of the word, it is observed that PT conveys the occurrence of the situation in a concrete or abstract manner (Çiftçi, 2010). In different definitions, PT is the return to work despite complaints and health problems (Gustafsson et al., 2000). Economically, PT means a decrease in the density or quality of labor (Zhang et al., 2015). As a result, both quantity output (slower operation, more breaks or repetition of tasks) and output quality (errors) will be affected (Hemp, 2004). PT is when worker goes to work when they are not in good health (Aronsson and Gustafsson, 2005). For another use, it uses the word "surprésentéisme" (which also means a value judgment) to distinguish the term that exceeds the health limit from other forms of health. Similarly, other researchers often use the term "disease problem" (Garrow, 2016). Quasi (2013) divided PT types into 2. The first, PT due to illness, refers to the individual's continued work despite serious or

insignificant physical or mental illness. People go to work for many reasons, even if they are not in good health. The second, PT not due to the disease, has nothing to do with the disease. Living conditions force people to work, i.e., financial difficulties, stress, work stress and family problems. In this case, a decrease in workplace productivity is inevitable.

When the literature is examined; it has been determined that the causes of PT in employees are closely related to both the physical and mental conditions of the employees. On the other hand, there is a great deal of pressure on organizational and environmental factors that negatively affect health not to fully recruit yourself. As a result of the tests, it has been determined that the reasons why they could not do their best to work have been affected by each other and often had a causal connection with each other (Ciftci, 2010). For example, it is believed that an employee who feels some kind of obligation to go to work despite being sick cannot be productive due to allergies, stress, other diseases, depression, flu, and headaches (Elim, 2005). The disease situation that comes up after PT affects both the quantity and quality of the work. For example, people may work slower than usual, have to repeat tasks, and make increasingly serious mistakes (Hemp, 2004). In case of PT, those who are accustomed to it may be presented with physical and mental disorders they have or are experiencing (Koçoğlu, 2007). In addition, the causes of PT include personality, working habits, stress, burnout syndrome, age and seniority, fear of losing their job, employee economic situation, work-life and family balance, mental structure employee management, employee health perception, employee's career perception, job satisfaction and organizational presence commitment, role conflict and role uncertainty, problems such as occupational safety, initiatives and appointments, interchangeability and the number of employees, overtime, organizational culture, management and leadership styles, physical and psychological harassment, economic problems and political instability, environmental problems and transportation (Uçar, 2019).

When PT occurs, the employee agenda can be lower productivity, lower performance, poor employee morale and motivation, absenteeism and increased redundancy. Low productivity means that enterprise management cannot fully benefit its employees. In today's competitive environment, low productivity is observed by managers as a situation that needs unacceptable breeding. The extremely important factors that cause the decrease in productivity in the workforce are the mental and physical disorders of the workers (Koçoğlu, 2007). Due to the identified employee health problems, it is considered to use the presentation in the document, especially as a decrease in productivity. It would not be right to associate presentation results only with efficiency. Results other than effectiveness is in the form of poor performance, poor motivation, dissatisfaction and absence (Kessler, 2004).

Since there are many effects and reasons for an employee not leaving the workplace, the resulting results need to be well-known. These results can be defined as lower productivity rate due to PT, decreased performance and loss of motivation, absence after a while, job dissatisfaction, low workforce due to illness, stress,



depressive symptoms and work-life balance deterioration (Atilla, 2017). Due to lack of motivation, employees begin to think about activities that are not related to work, get bored with work and kill time. This causes PT (D'Abate, 2007).

A study of 3,801 workers in Switzerland reported that some of the workers who had to take sick leave due to muscle aches, fatigue and depressive symptoms had to go to work. As a result of this research, it has been determined that the increase in PT led to dismissals due to the disease (Aronsson et al., 2000). On the other hand, health and safety risks are expected to increase in facilities where incapacity is widespread. Because employees with reduced attention are naturally more prone to accidents. This will affect both the employee and his colleagues. Taking precautions in such facilities reduces the presence. With fewer incidents, workers' claims for compensation will decrease and job security will increase (Kessler, 2004).

The study of Dew et al., (2004) examined how workers at three different construction sites in New Zealand have been connected to the economic and social constraints of PT and workplace culture. As a result of these examinations, they participated in work two or more times despite feeling muscle and skeletal pain. In these employees, PT has been examined and the analysis concluded that legal regulations related to PT should be made. The study by Karanika-Murray et al. (2015) has examined the issue of not being at work through sensuality, even though the worker goes to work in case of illness. Since there is no research on behavioral outcomes as a result of these reviews and analyses, the findings offer hope for theorisation in this field. The study by Zhang et al. (2015) mabourentions the wage and productivity losses of disease. As a result of the investigations and research, PT is potentially more costly than absenteeism about to diseases. As a result of study carried out by Atilla (2017) focuses on the relationship of perceived organizational support with organizational silence and PT, a low negative correlation has been found between organizational silence and perceived organizational support. Organizational support according to the results of the study has significantly affected work stress and identification. According to the result, factors such as personal behavior and attitudes, financial situation, family and time pressure affect on PT. As with organizational silence and perceived organizational support, significant differences have been found in the education variable. The study by Yıldız et al. (2015) examines PT and disease absence have been examined in the Turkish health sector. Productivity demands are understood to reduce absenteeism by 66%. PT is understood to not affect on disease absence. In the study published by Oktay (2021), the relationship between PT and the tendency to make medical mistakes has been examined. As a result of the analysis and research, nurses who exhibit PT behavior can be expected to have a high tendency to make medical mistakes.

In the study, which has been introduced to the literature by Çelik (2018), the effect of PT on the level of job satisfaction and burnout has been investigated and examined that it has been determined that the income of 65.8% of the employees who

participated in the study is less than the expense, 35.4% of the employees have a tenure between 1-5 years, 77.1% of the employees cannot take a vacation, 53.3% had a stressful life, 34.2% encountered PT in the past month and 29.4% of employees experienced a decrease in motivation as a result of the PT and 43.4% of employees apply to the philosophy of working to live as a method of combating PT. One of the problems that causes PT are excessive workload, lack of job satisfaction and economic problems. It has been found that there is a corral between PT and job saturation and desensitization. The study conducted by Oruç (2015), on the relationship between PT and organizational silence. After the research and examination, have found the behavior of the managers/business owners is observed as the most important reason for the organisational silence, which is defined as the fact that the workers do not express freely their knowledge and opinions about organizational issues and intentionally withhold them.

2.2. Psychological Ownership

In addition to developing new products by following the technology order to succeed in the rapidly renewed global competition process, organizations should be able to keep up with the emerging changes (Hocaoğulları, 2020). Defined in the literature as "PO" and conceptualized in the form of individuals acting with a sense of ownership of monetary or non-monetary purposes or some of these purposes (Pierce et al., 2001), it can nurture in employees as the feeling of ownership of their workplaces and work without being legally owned (Akarca, 2020). Upon literature scan, it is accepted that the phenomenon of PO is first used in the context of economic ownership (Kalmaz, 2019). Efforts such as organizational participation and authorization of employees enable the members of the organization to develop a sense of belonging to the organization. A sense of belonging is a very important element for the organization as it will affect the organizational environment, organizational socialization, organizational citizenship behavior and organizational commitment (Alp, 2007). The fact that the element of PO has an adequate framework for organizational behavior research has caused the subject to attract attention in the literature (Ucar, 2017). Brown (1989) has pointed out that PO may be the key competitive factor of the 21st century.

As a result of research on the definition of ownership in different fields, it turns out that the sense of ownership is found in almost all societies, and that this feeling connects individuals with various concrete and abstract purposes (Pierce and Jussila, 2011). Turkish Language Association defines ownership as "the right to use something that belongs to it as it sees fit within the framework of law, dignity, and property". Property rights in companies refer to equity, which is called the difference between assets and liabilities. It is defined as the legal right to use the production elements of a workplace (Ayrıçay and Kalkan, 2013). A sense of ownership is a very important factor in the individual life of individuals and plays an important role in the lives of people such as objects, activities, purposes, goals and habits (Cram and Paton, 1993). James (1890) revealed that an individual's personality positions all of the things he owns into this concept and consists of the sum of the things he owns (status, wealth, knowledge) (Pierce et al., 2004). Dittmar (1992) argues that people have a sense of intimacy with



some abstract and concrete purposes as soon as they form. If people have a sense of belonging to material or intangible goods, this feeling is also linked to some material or spiritual, personal or institutional purposes (Jeswani and Dave, 2012).

For the first time, the research by Pierce et al. (1991) has included the definition of PO in the model developed by the organization's employees regarding ownership, and it has been discussed that PO is a condition caused by formal ownership (Ötken, 2015). Wagner (2003) and his colleagues have conducted a study examining the relationship between ownership and organizational activity, and as a result of this research, they found that employees' ownership of the organization led to beneficial behaviors towards the organization and that there has been a positive relationship between ownership and the economic performance of the organization (Karadal and Akyazı, 2015). PO has been revealed to be the answer to questions such as "Who am I? What do I believe in? Why and how I can elevate my status in my organization?" (Pratt, 1998). In another definition, Vandewalle et al. (1995:211) have defined PO as "revealing that employees have a sense of belonging to their institutions, even though they do not have legal or financial property." In some circumstances, PO is defined as the sense of belonging developed by individuals in the face of different factors in the organization they work for (Uçar, 2017). According to Rousseau (1996), a sense of psychological belonging, which includes individual assessments of individuals' organizations, can be found to be highly valuable for managing and understanding people's relationships. In many studies on PO in an organizational context, it has been stated that employees with a high sense of ownership present positive emotions, attitudes and behaviors, and these feelings will be a potential precursor of the behaviors and attitudes of employees. From this point, it can be observed that the feeling of PO is more focused on the behavior and attitudes of employees (Avey et al., 2009).

Pierce and Jussila (2011) stated that one's emotions and behaviors play an important role in shaping constructive and destructive behavior in nature. For the newcomer to a job in an institution to continue to exist in the organization, it is of great importance that he undertakes his/her loyalty to the organization, as well as the role and non-role behavior in the organization (Alp, 2007). Research on PO reveals that advanced PO leads to increased voluntary work, decreased absenteeism and turnover rates, decreased feelings of alienation and an increased sense of responsibility (Hsu, et al., 2003). Employees with advanced psychological affiliation to the institution they work for bear more responsibility than employees who do not believe they have the right to run the institution because they believe they are their own organization (Derin, 2018). According to Olckers and DuPlessis (2012), the phenomenon of PO consists of a multi-element structure consisting of seven dimensions that affect the degree of experience of the phenomenon of PO.

Self-Sufficiency: People's desire to change their environment leads them to attempt to own and have a sense of belonging. (Uçar, 2016). The self-sufficiency

dimension is exemplified as "I have to do this task, I can do it, so I have a responsibility to succeed" (Yıldız, 2016: 357).

Self-Identity: Pierce et al. (2001) have stated that ownership serves as a symbolic expression of personality because it closely relates to the identity and individuality of individuals. Psychological belonging of employees, such as an element of teamwork, brings out a sense of importance and ownership for people (Dirik and Erymaz, 2016).

Sense of Belonging: A sense of belonging in terms of PO in organizations reveals the stage at which those who work feel "in a home environment" in the working environment (Porteous, 1976).

Accountability: This dimension is expressed as a sense of responsibility and obligation on the objects in your possession when the situation of accountability to others occurs (Duran, 2019; Lerner and Tetlock 1999).

Autonomy: According to Ryan and Deci (2006), this dimension can be expressed as one's ability to govern and regulate themselves. If they are allowed to have control over important aspects of working habits, work-related attitudes (job satisfaction and organization-based self) and other behaviors, organization employees are also encouraged to develop a clear sense of belonging (Olckers, 2013)

Responsibility: Responsibility is defined by Lerner and Tetlock (1999) as in the form of hidden or clear expectations that individuals can resort to verify their beliefs, feelings and actions to other people. According to Rogers and Freundlich (1998), business owners who feel a sense of ownership of the organization believe that they have the right to influence the management of the organization and have more responsibility than those who do not belong.

Regionalism: PO carries the feeling of possessing and being able to hold and connect to an object, while the concept of territorialism refers to the behaviors and actions that arise from PO to connect and communicate with an object, maintain and protect it (Brown et al., 2005). According to Altman (1975), if people believe they are doing the right thing to protect their territory, this can lead to improved performance and protection of the territory (Avey et al., 2009).

According to the results of the research conducted by Uçar (2017), it is difficult to say that a solid theory has been formed regarding the conceptualization of the cases, developments in the organizational field and the results related to the organizational field. This study, which presents the phenomenon of psychological and personal responsibility in the organizational behavior field from a holistic point of view, is important in terms of providing the theoretical basis for empirical research aimed at theorizing the phenomenon. The relationship between demographic characteristics and spiritual ownership performed by Demirkaya and Şimşek-Kandemir (2014) has been controlled by probit analysis. According to the results of the analysis, while a relationship between labor time and age and spiritual ownership emerges, no relationship between gender and PO has been detected. As a result of the study carried



out by Akarca (2020), PO is linked to other structures covered in the field of organizational behavior, but employees with their professions and institutions have different aspects of the psychological relationship of organizational behavior. conceptually distinguishable from each of these structures.

The results of the study conducted by Ainsworth (2020) show that volunteers increase their awareness of personal responsibility, and this awareness of personal responsibility has positive consequences on voluntary behavior. However, temporal pressure is an important regulator of these relationships, and different voluntary behaviors can be observed in volunteers where temporal pressure is high and low. The study of Potdar et al. (2018), which focuses on the role of PO, reveals empirically constructed insights into how employee-based non-technological factors can be designed to prevent and deter retail crime through employee intervention behavior. With a factual approach, a semi-structured and detailed interview has been conducted with 26 employees in two supermarkets. The findings suggest that positive employeemanager relationships can trigger employee ownership and PO.

As a result of the study conducted by Kumar and Kaushal (2021), it has been found that both perceived brand identity and social exclusion revealed psychological brand ownership. The results also support positive reviews and purchasing intentions as a result of psychological brand ownership. As a result of the research carried out by Hocaoğulları (2020); it has been determined that the health of the organization has a positive and significant effect on PO. Similarly, it has been shown that emotional capital affects PO in a positive and significant way in the same study. As a result of a study conducted by Kalmaz (2019), a significant and moderate positive relationship has been found between PO and assistive behavior in terms of non-role behavior, and a significant and moderate positive relationship with PO and extra role behavior. A study published by Alp (2007) aims to measure the PO and organizational civic behavior of the organization, as well as to measure the purpose, behavior and attitude that can occur between members of an organization to measure role behavior and nonrole behavior. Research conducted by Yavuz and Akgemci (2021) has indicated that the adaptation of individual organizations has a positive effect on PO. With the research, it has been determined that motivational tools have a positive effect on PO and employee voice.

Due to its negative individual and organizational consequences, PT behavior, which is the subject of research in the writing of organizational behavior, has started to be associated with various factors. Öğe and Kurnaz (2017) have established a positive relationship between PT and social loafing behavior, Mostert et al. (2008) between PT and intention to leave, İşcan and Moç (2018) between PT and alienation, Kaygin et al. (2017) between PT and continuance dependence and Admasachew and Dawson (2011), De Beer (2014) and Burton et al. (2017) have established a negative relationship between PT and work commitment and Karanika-Murray et al. (2015) and Yücel (2020) between PT and job satisfaction. Based on studies in the literature, H_{1a}

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and H_{1b} have been created by considering a negative relationship between PO, which is positive business behavior, and PT.

H_{1a} : There is a significant relationship between PT and PO. H_{1b} : As PO increases, PT decreases.

 H_{1c} has been created by considering that single employees do not want to spend time at home when they do not show up for work even though they feel sick due to their desire to socialize, they go to work and go to work even if they are not sick because they want to spend time there and *want continuity of employment*.

H_{1c} : *PT* varies significantly according to marital status.

 H_{1d} has been created by considering that employees in the younger age group had a higher level of insecurity because they feared being punished if they did not show up for work, and because this age group experienced a perception of job insecurity with the idea that they would lose their jobs if they did not come to work.

H_{1d} : PT varies significantly by age.

 H_{1e} has been created because of the concern that employees with low levels of education would not be able to find new jobs when they lost their jobs, and that they tended to go to work even though they have been sick.

$H_{1e:}$ PT varies significantly depending on educational status.

 H_{1f} has been created because it is thought that employees with low monthly income levels continue to work even though they are sick due to inadequate health care benefits, financial difficulties and high work-life imbalance.

H_{lf} PT varies significantly by monthly income level.

 H_{1g} has been created because it is assumed that there will be a lot of perceived pressures and conflicts *regarding colleagues in* employees with low work experience, perceptions of injustice in the workplace and negative perceptions of the work environment will be high, so they continue their work even though they are sick.



 $H_{1g:}$ PT varies significantly from work experience.

Because factors such as high pressures from managers in the private sector, competition in the work environment, people taking on important tasks given to them by their colleagues when they do not show up for work and difficulty adapting during the implementation of new technologies cause the employees to continue their jobs despite being sick, H_{1h} has been created.

 H_{1h} : PT varies significantly by sector.

3. Research Methodology

3.1. The Population and Sample of The Research

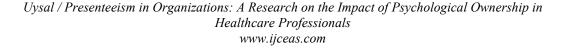
The population of the research is made up of healthcare professionals working in the public and private sectors. The sample of the study consists of 505 employees selected from the universe by snowball sampling method and providing successful feedback for the online survey. In this context, surveys without data integrity have been excluded from the evaluation and a sample volume of 485 people has been obtained at an analyzable level.

3.2. The Data Collection Method of The Research

The data used in the research have been obtained by applying the paper survey method. The survey used to obtain data consists of 2 scales in the 5-way Likert structure, PT and PO. A 6-point scale developed by Koopman et al. (2002) and adapted to Turkish by Çelik (2018) has been used for PT. For PO, a 7-point scale developed by Van Dyne and Pierce (2004) and adapted to Turkish by Bora and Aydın (2019) has been used.

3.3. The Research Model

PT is the dependent variable of the research using the screening model, and PO constitutes the independent variable.



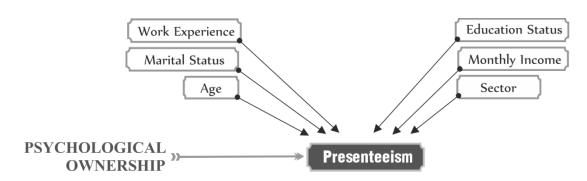


Figure 1. Conceptual Model of the Research Source: Authors' Drawing

3.4. The Research Data Analysis

The data required to test the hypotheses proposed within the scope of the research has been evaluated using SPSS 20.0 (Statistical Package for Social Sciences) and AMOS 24.0 (Analysis of Moment Structures) programs. Confirmatory Factor Analysis (CFA) has been used to determine the structural validity of the scales used in the study, reliability analysis in determining internal consistency, correlation analysis to determine the direction and severity of the relationship between variables, multiple regression analysis to examine the relationship between variables and MANOVA (Multivariate ANOVA) analysis, Independent Sample T Test and One-Way ANOVA Test have been used to determine differences.

3.5. Findings Obtained Through the Research

Descriptive statistics of the employees participating in the research are given in Table 1. According to this table, 61.6% of the sample consists of male and 38.4% female employees. When the age distribution is examined; it is observed that 49.9% of the employees between the ages of 21 and 40 are involved in the sample. It has been determined that 82.1% of the employees who participated in the study have been university graduates. When the monthly income level is examined; It is observed that the majority of 29.9% have a monthly income in the range of TRY 4001-6000, while 18.6% of the sample has a monthly income lower than the minimum wage. When the work experience time in the table is considered, it has been determined that 92% of the sample had more than 1 year of work experience. When examined from the sector point of view, it has been determined that 57.9% of the sample consisted of public sector employees.

Frequency Percentage					
Marital Status					
Married	299	61.6 %			
Single	186	38.4 %			

Table 1. Descriptive Statistics



	Age	
Younger than 21	43	8.9 %
21-40	242	49.9 %
41-60	184	37.9 %
Older than 61	16	3.3 %
	Education Status	
Primary School	18	3.7 %
High School	69	14.2 %
Associate	72	14.8 %
Undergraduate	175	36.1 %
Post-Graduate	119	24.5 %
Doctorate	32	6.6 %
	Monthly Income Level	
Less than TRY 2000	22	4.5 %
Between TRY 2001 - 3000	90	18.6 %
Between TRY 3001 - 4000	107	22.1 %
Between TRY 4001 - 6000	145	29.9 %
Between TRY 6001 - 8000	95	19.6 %
TRY 8001 or more	26	5.4 %
	Work Experience	
Less than 1 year	39	8.0 %
1-2 years	60	12.4 %
2-3 years	79	16.3 %
3-4 years	135	27.8 %
4 years and above	172	35.5 %
	Sector	
Public	281	57.9 %
Private	204	42.1 %

Confirmatory Factor Analysis (CFA) has been applied to determine the structural validity of the scales used in the research, and the fit values as a result of the factor analysis have been expressed for the PO scale consisting of single dimension and 7 substances in Table 2.

	Table 2. PO Scale / Fit Values								
Fit Criteria	χ2	df	χ^2 / df	RMSEA	CFI	SRMR	NFI	GFI	
Fit Values	30.384	11	2.771	0.06	0.975	0.032	0.962	0.983	

Source: Authors' Calculations

When the compliance values in Table 2 are examined; it has been determined that chi-square value is 30.384; ; RMSEA value is 0.06; GFI value is 0.983; chi-square/degree of freedom is 2.771; SRMR value is 0.032; CFI value is 0.975 and the NFI value is 0.962. Standardized solution values for the PO scale tested in Figure 2 are specified.

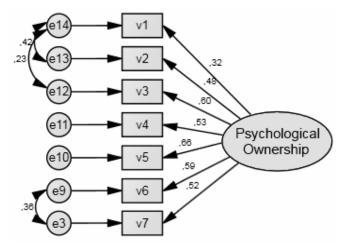


Figure 2. PO Scale / Standardized Analysis Values

After validating factor analysis, the results of reliability analysis for the PO scale, which has been preserved, are stated in Table 3. As a result of the analyses performed; Cronbach's Alpha coefficient has been determined to be 0.761 for the entire scale and it has been determined that the scale has internal consistency.

Table 3. PO	Scale -	Reliability	/ Anal	ysis

	Cronbach's Alpha	N of Items
Entirety of Scale	0.761	7
Source: Authors' Calculations		

Another scale used in the research is the PT scale. The compliance values obtained as a result of the Confirmatory Factor Analysis applied to this scale consisting of 6 items are presented in Table 4.

	Table 4. PT Scale / Fit Values							
Fit Criteria	χ2	df	χ^2 / df	RMSEA	CFI	SRMR	NFI	GFI
Fit Values	0.610	2	0.305	0.00	0.999	0.007	0.999	1.000

Source: Authors' Calculations



When the compliance values in Table 4 are examined; it has been determined that chi-square value is 0.610; RMSEA value is 0.00; GFI value is 1.000; chi-square/degree of freedom is 0.305; SRMR value is 0.007; CFI value is 0.999 and the NFI value is 0.999. Standardized solution values for the PO scale tested in Figure 3 are specified.

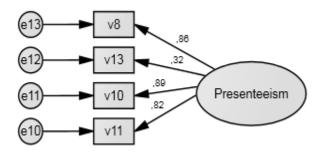


Figure 3. PT Scale / Standardized Analysis Values **Source:** Authors' Calculations

After the Confirmatory Factor Analysis, 2 items (v9, v12) have been removed from the PT scale and the results of the reliability analysis for the revised scale have been stated in Table 5. As a result of this analysis; Cronbach's Alpha coefficient is 0.819 for the entire scale and the scale has been determined to have internal consistency according to this resulting value.

Table 5.	. PT Scale - Reliability Analysis	5
	Cronbach's Alpha	N of Items
Entirety of Scale	0.819	4
Source: Authors' Calculations		

It has been determined that the proposed fit values of the PO scale expressed in Table 2 and the proposed fit values of the PT scale in Table 4 are in line with the goodness of fit statistics published by Schermelleh-Engel and others (2003) and that the structural validity of these scales is acceptable.

Kolmogorov-Smirnov and Shapiro-Wilk values determined as a result of the normality test conducted for the data obtained within the scope of the research are presented in Table 6. When interpreted by taking into account Shapiro-Wilk values due to sample dimension (n=485), it is observed that the data obtained from both scales and scale dimensions used in the research did not show normal distribution. Therefore, skewness and kurtosis values related to the relevant dimensions are also examined.

Table 6. Normality Test Results							
	Kolmogorov-Smirnov			Shap	oiro-Will	K	
	Statistics	df	Sig.	Statistics	df	Sig.	
РТ	0.230	485	0.000	0.893	485	0.000	
РО	0.166	485	0.000	0.848	485	0.000	

1. .

The skewness and kurtosis values of the data obtained from the scales used in the study are detailed in Table 7. Upon reviewing this table; according to the Shapiro-Wilk value, the skewness and kurtosis values of the data set of the PT scale that do not show the normal distribution are between -2 and +2, and according to the classification of George and Mallery (2003), this data set shows normal distribution. However, according to Shapiro-Wilk values, it has been determined that the distortion and pressure values of the data set of the PO scale, which did not show normal distribution, have been not between -2 and +2, and therefore this data set did not show normal distribution.

	Statistics		Std. Error
PT Scale	Skewness	0.575	0.111
	Kurtosis	-0.974	0.221
	Skewness	-1.746	0.111
PO Scale	Kurtosis	4.483	0.221

 Table 7. Normality Tests - Kurtosis and Skewness Values

Source: Authors' Calculations

Table 8 shows the results of the Pearson correlation analysis of the variables of the research. According to this table; a negative and moderately significant relationship has been found between independent PO and dependent variable PT.

Table 8. Correlation Analysis Results			
	Psychological Ownership		



DT	Correlation	-0.402
PI	Sig. (2-tailed)	0.000

Table 9 shows the ANOVA results of simple linear regression analysis for PT and PO. As a result of the regression analysis performed; the regression model is statistically significant because the p-value of the model created is less than 0.05.

Table 9. Regression - ANOVA								
	Sum of s	squares	Mean square	F	Sig.			
РТ	Regression	1190.832	1190.832					
11	Residual	6191.902	12.820	92.891	0.000			
	Total	7382.734						

Source: Authors' Calculations

The results of the regression analysis performed are stated in Table 10. When this table is examined; it has been determined that 16% of the change in PT has been explained by the change in PO. According to these results, the value that PT can receive is formulated as follows;

According to the formula obtained as a result of regression analysis; a 1-unit increase in PO has been found to cause a decrease of 0.410 units on PT.

	Tab	le 10. Regression	n - Mode	el		
		β	t	Sig.	R ²	Adjusted R ²
РТ	Constant	23.829	18.211	0.000	0.161	0.160
F 1	РО	-0.410	-9.638	0.000	0.101	0.100

Source: Authors' Calculations

Table 11 investigated the relationship between PT and the marital status of employees. When this table is examined; it has been determined that the value of significance obtained as a result of the test is less than 0.05 and PT varies significantly according to the marital status of the employees. Accordingly, single employees have been found to have a higher status of PT compared to married employees.

Inde	pendent-S	ample T	Test	for Equ	e's Test ality of ances		t-test	for Equ	ality of Me	ans
				F	Sig.	t	df	Sig. (2- tailed)		Std. Error Difference
	Status	Mean	Equal	0.546	0.460	-	483	0 039	-0.75281	0.36349
PT	Married	11.02 6	variances assumed	0.010	01100	2.07		0.0023	0.,0201	0.000
	Single	11.77 9	Equal variances not assumed			2.06	388.4	0.040	-0.75281	0.36465

Table 12 explores the relationship between PT and the sector in which data providers work. When this table is examined; it has been determined that the value of significance obtained as a result of the test is less than 0.05 and PT varies significantly according to the sector studied. Accordingly, it has been determined that PT has been higher in those working in the private sector than those working in the public sector.

			Tabl	e 12. P	T - Sec	ctor S	tudied			
Inder	oendent:	-Sample T	` Test	for Equ	e's Test 1ality of ances		t-test f	for Equa	lity of Me	ans
		•		F	Sig.	t	df	Sig. (2- tailed)	Mean Difference	Std. Error e Difference
	Sector	Mean	Equal	6.412	0.012	-	483	0.005	-1.0038	0.35670
PT	Public	10.8932	variances assumed			2.81				
11	Private	11.8971	Equal variances not assumed			_ 2.78	418.17	0.006	-1.0038	0.36088



Table 13 analyzes the relationship between PT and employee education status. When this table is examined; as a result of the analysis, it has been determined that the value of significance is greater than 0.05 and that the PT do not differ significantly according to the education status of the employees.

	Ta	able 1	3. PT - E	ducation Status		_	
	One-Way ANOVA	Ν	Mean	Std. Deviation	Std. Error	F	Sig.
	Primary School	18	10.7222	4.25379	1.00263		
	High School	69	10.7536	4.05624	0.48831		
PT	Associate	72	11.2639	3.65403	0.43063	1.824	0.107
r I	Undergraduate	175	11.5429	3.83977	0.29026		
	Post-Graduate	119	10.9832	3.87076	0.35483		
	Doctorate	32	12.9688	4.16192	0.73573		

Source: Authors' Calculations

Table 14 analyzes the relationship between PT and the age of employees. When this table is examined; the value of significance is found to be less than 0.05. Accordingly, it has been determined that the level of PT varies significantly by age. However, post-hoc analysis has been performed to determine which age groups these differences are significant.

			Table 14	. PT - Age			
Or	ne-Way ANOVA	Ν	Mean	Std. Deviation	Std. Error	F	Sig.
	Younger than 21	43	13.5349	3.84428	0.58625		
DT	21-40	242	11.3884	3.93067	0.25267	(0.20	0.000
РТ	41-60	184	10.6467	3.76353	0.27745	6.828	0.000
	Older than 61	16	11.9375	3.10846	0.77711		

Source: Authors' Calculations

The homogeneity test results performed to determine the technique to be selected in the post-hoc analysis are presented in Table 15.

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Table 15. Hom	ogeneity Test of	Variances	
Levene Statistic	df1	df2	Sig.
1.656	3	481	0.176

Source: Authors' Calculations

When the results in table 15 are examined; the variance is observed to be homogeneous. However, considering that the distributions in the groups are not equal, the Scheffe test has been preferred in post-hoc analysis. When examined in detail; it has been determined that the differences in PT according to the age of the employees are between employees under the age of 21 and employees between the ages of 21-40 and 41-60. PT is higher in employees under the age of 21 than in those aged 21-40 and 41-60.

Table 16 analyses the relationship between monthly income level and PT. When this table is examined; the value of significance is less than 0.05. Accordingly, it has been determined that the level of PT varies significantly according to the monthly income level. However, post-hoc analysis has been performed to determine between which income levels this variance exists.

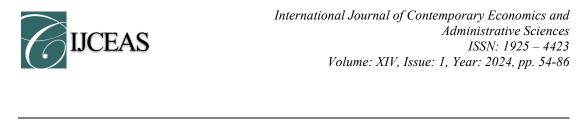
	One-Way ANOVA	Ν	Mean	Std. Deviation	Std. Error	F	Sig.
	Less than TRY 2000	22	15.5000	2.66815	0.56885		
	Between TRY 2001 - 3000	90	13.8111	4.38561	0.46228		
DT	Between TRY 3001 - 4000	107	11.5234	4.02667	0.38927	22.116	0.000
PT	Between TRY 4001 - 6000	145	10.2207	3.23709	0.26883	23.116	0.000
	Between TRY 6001 - 8000	95	9.5158	2.40506	0.24675		
	TRY 8001 or more	26	10.9615	3.54943	0.69610		

Table 16. PT - Monthly Income

Source: Authors' Calculations

The homogeneity test results performed to determine the technique to be selected in the post-hoc analysis are presented in Table 17.

	Table 17. Homogeneity 7	Test of Variances	
Levene Statistic	df1	df2	Sig.



15.617	5	479	0.000

When the results in table 17 are examined; the variance is not homogeneous. However, considering that the distributions in the groups have been not equal, Tamhane's T2 test has been preferred in the post-hoc analysis. When examined in detail; it has been determined that the differences in PT according to the monthly income level of the employees have been among all groups, and the PT decreases gradually as the monthly income level increases.

Table 18 analyses the relationship between PT and work experience and found that the value of significance is less than 0.05. Accordingly, the level of PT varies significantly according to work experience. However, Post-Hoc analysis has been performed to determine between which job experience durations this variance exists.

	One-Way ANOVA	Ν	Mean	Std. Deviation	Std. Error	F	Sig.
	Less than 1 year	39	14.3077	3.48043	0.55731		
	1-2 years	60	13.0500	3.91185	0.50502		
PT	2-3 years	79	12.1772	3.90187	0.43899	16.154	0.000
	3-4 years	135	10.1185	3.22780	0.27780		
	4 years and above	172	10.5756	3.86922	0.29503		

Source: Authors' Calculations

The homogeneity test results performed to determine the technique to be selected in post-hoc analysis are stated in Table 19.

Table 19. Homogeneity Test of Variances						
Levene Statistic	df1	df2	Sig.			
5.420	4	480	0.000			

Source: Authors' Calculations

When the results in table 19 are examined; the variance is not homogeneous. However, considering that the distributions in the groups have been not equal, Tamhane's T2 test has been preferred in the post-hoc analysis. As a result of this test, it has been determined that the differentiation of PT according to work experience has been between all groups, and PT decreases gradually as the duration of work experience increases.

4. Discussion

PO is defined as a factor that leads to low job productivity in institutions for employees due to PT, fatigue or disease while providing high productivity to institutions. This study of healthcare professionals has found an inverse relationship between PO and PT and examined the behavior of healthcare professionals. Previous studies have shown that healthcare professionals have higher PT behavior than other businesses (Aransson et al., 2000; Bracewell et al., 2010)

According to the findings of the study, it has been concluded that PT behaviors are higher in single employees compared to married employees, and PT behaviors are higher among employees in the private sector compared to those in the public sector. Baysal et al. (2014) also indicated high levels of PT behavior in the private sector in their study. It has been revealed that PT behaviors are higher among younger age groups compared to other age groups, and as monthly income and job experience increase, PT behavior decreases. Additionally, no significant difference has been found between PT and educational level. Similar conclusions were reached in the studies conducted by Kaygin et al. (2017) and Akyol and Evren (2022).

The reason for higher PT in the private sector is believed to be the greater job insecurity compared to the public sector, the possibility of downsizing in the workplace, heavier workloads, and higher levels of stress in the workplace. According to Ulutaş (2018), individuals prefer working in the public sector to ensure job security. Moreover, due to greater competition in the private sector compared to the public sector (Sığrı, 2017), it is believed that employees exhibit PT behavior because of their desire not to fall behind at work. Additionally, it is thought that single individuals exhibit PT behavior because they do not have many responsibilities in their social and personal lives, so they dedicate themselves to work and consider commuting to work as a social activity.

PT behavior is particularly prevalent among healthcare workers. This is due to organizational problems such as staff shortages, high turnover rates, excessive workload, and low job satisfaction in institutions. However, the results obtained from the study indicate that with an increase in PO, PT behavior decreases. In other words, strengthening healthcare workers' feelings of commitment to their work reduces their tendency to be less productive at work. These findings help us understand the relationship between job satisfaction and performance among healthcare workers. The initial problem addressed was the examination of PT behaviors among healthcare



workers and understanding their relationship with PO. This study has revealed a negative relationship between PO and PT. Therefore, strengthening healthcare workers' feelings of commitment to their work emerges as an important strategy to reduce PT behavior. There have been no studies examining the impact of PO on PT behavior, but the findings are consistent with the studies by Aransson (2000) and Bracewell (2010). These studies concluded that PT behavior is higher among healthcare workers compared to other professions.

5. Conclusions and Recommendations

The ceer prospects of employees in the younger age group or the anxiety of losing promotion when they don't go to work cause anxiety. In addition, they feel more obligated to come to work than those in the older age group to show their commitment to the job to the employer. The fear that young employees will have negative attitudes about themselves if they do not go to work is also among the reasons that drive them to PT. In addition, if the monthly income level is low, livelihood costs rise, and wages are cut on days when wages are not coming to work. The economic situation is closely related to PT, and the fear of losing performance-based incentive premiums or future raises for employees who do not go to work while sick also forces them to go to work. Due to financial difficulties, employees can work as hard as possible to increase their pensions.

It is thought that employees with little work experience come to work even if they are sick, as they may fear losing their jobs without getting enough experience due to the market's demands to work with experienced employees. High unemployment rates and the difficulty of changing jobs also force workers in this situation to go to work, even if they are sick. In addition, given that employees with little work experience have just entered the job and have not reached sufficient practicality related to the job, they tend to PT with the idea that the workload accumulated when they do not come to work due to illness and return to work.

Factors such as inadequate health care benefits, fear of punishment, negative attitudes towards work, perceived pressures and conflicts against managers and colleagues, work-life imbalance, job insecurity, unfairness, and financial difficulties can be counted among the reasons for unemployment (Patel et al., 2012: 216). Workers who continue their work even though they are sick negatively affect the productivity of themselves and their colleagues. In addition, unhealthy workers can continue their work, increase existing health problems, experience work accidents, fatigue, lack of concentration and decreased motivation.

Managerial implications: Workers with a sense of PO exhibit positive behaviors and make positive contributions to their institutions. Workers with a high sense of PO tend towards positive work behaviors, while those with a low sense of PO are more likely to show negative work behaviors such as PT. Therefore, PT behaviors

reduce outputs and negatively affect the productivity of the business group (Halbesleben et al., 2014). Therefore, institutions should create a positive organizational culture to improve the performance of the workers and provide them with organizational support in every sense by using motivation and communication channels effectively. Those who are provided with the right environment will have reduced behaviors of PT, which is defined as going to work and working at low productivity when they are sick. When institutions focus on managing PT, they can transform employee health from a cost burden to a competitive advantage. Institutions should make efforts to minimize health risks, reduce the occurrence of diseases, and increase productivity. As a result, the awareness of the problems that cause the problems that cause the PT of both institutions and employees can prevent future financial losses.

Practical implications: To reduce absenteeism and foster a healthier, more productive workforce, several actionable steps are recommended for organizations. Implementing supportive systems such as flexible work arrangements and comprehensive healthcare services can eliminate factors contributing to absenteeism effectively. It is important to foster a positive organizational culture, utilize effective communication channels, address concerns related to job security, promote psychological ownership, and prioritize the well-being of employees. Additionally, taking proactive measures such as implementing wellness programs and ergonomic assessments to minimize and prevent health risks is necessary. Furthermore, investing in employee development and continuing research on the relationship between psychological ownership and absenteeism can provide valuable insights for organizations aiming to enhance productivity and employee well-being.

Since this study is the first to examine the relationship between PO and PT, it is thought that it will make important contributions to the literature. In future studies, intermediary variables in the relationship between PT and PO can be examined. In addition, new studies can be carried out in different sectors with different sample groups.

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