

Nexus between Employees Involvement in Decision Making and Industrial Harmony in the Devolved Public Health Sector in Kenya

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To Link this Article: <http://dx.doi.org/10.6007/IJAREMS/v12-i2/17289>

DOI:10.6007/IJAREMS/v12-i2/17289

Published Online: 11 June 2023

Abstract

The Sustainable Development Goal 3 (SDG 3) prioritizes health and well-being of the people. However, at least 3.9 billion of the world's population cannot obtain essential health services, according to the World Health Organization. WHO (2019), cited that disharmony at the work place particularly in the developing countries undermines the provision of quality healthcare. Industrial disharmony across 23 low-income countries for the period 2009 to 2018 averaged six industrial actions per year with the years 2014 and 2018 recording the highest number of episodes at 10 and 17 events respectively. A conducive working environment exhibiting harmony guarantees satisfaction of workers and employers' aspirations and is vital for effective services provision in the public health sector. Employees' industrial actions in health sector conflict with mandatory provision of health care services to guarantee right to live on patients. This study investigated the influence of employees' involvement on industrial harmony in the devolved public health sector in Kenya. The study used pragmatic research paradigm. The study research design was mixed methods research methodology. The study population was 3,355 health workers in level 5 county referral hospitals, in the Central Economic Regional Bloc (CEREB), 10 medical superintendents, 10 union officers from Kenya Medical Practitioners, Pharmacists and Dentists Union and 10 from Kenya National Union of Nurses. The study selected 351 respondents using stratified random sampling. In addition, 10 medical superintendents, 10 union officials from Kenya Medical Practitioners, Pharmacists and Dentists Union and 10 from Kenya National Union of Nurses were selected for participation in the study through purposive sampling. Data analysis involved both qualitative and quantitative analysis. Qualitative data collected through use of interview schedule was analyzed using content analysis technique. Quantitative data was analyzed using descriptive statistics such as means and standard deviation and presented in form of tables. Inferential analysis was also carried out using measures such as correlation and multiple regression analysis. Majority of the employees disagreed that the management was involving them in decision making as indicated by the average mean score of 2.37. The correlation coefficients between industrial harmony and employees' involvement in decision making was $r=0.322$, $p\text{-value}=0.000$ indicating moderate and significant correlation between employees'

involvement in decision making and industrial harmony. The model summary implies that employee involvement explains 10.3% of industrial harmony in the devolved public health sector in Kenya. The model coefficients results showed that employees' involvement had a positive and significant influence on industrial harmony in the devolved public health sector in Kenya ($\beta=.939$, $p\text{-value}=.000<0.05$). The study concluded that employees' involvement enhances industrial harmony. The study recommended the strengthening of suggestion schemes within the organization so that workers suggestions can inform policies. Further, the sector should implement collective bargaining agreement in its entirety within the stipulated time frame. Likewise, the study recommends that more involvement of employees in key decision-making processes as it enhances industrial harmony.

Keywords: Employees' Involvement in Decision Making, Industrial Harmony, Devolved Public Health Sector

Introduction

Industrial harmony in the public healthcare institutions is a core indicator of quality service delivery but many have struggled to operationalize it in practice (Bassey, *et al.*, 2017). Public healthcare institutions face a myriad of challenges in terms of service quality expectations and ability to create favorable working environment for the employees (Osaro & Teddy, 2014). Industrial disharmony occurs when there is disagreement between management and employees/employees' representatives and in the event, work is temporarily stopped to restore order.

Healthcare workers' industrial actions have become a global phenomenon with increasing incidences in many countries with the potential to impact on the quality of healthcare service delivery and the doctor-patient relationship which is based primarily on the fiduciary duty of trust (Chima, 2013). Striking health care workers may face loss of income, job insecurity, and emotional distress, plus long hours of work for those who choose not to participate in industrial action (Russo, *et al.*, 2019). Whether or not their demands are eventually met, health workers involved in industrial action usually end up disillusioned and demotivated and may end up emigrating overseas or relocating within the country thereby leading to either internal or external brain drain as well as an overwhelming feeling of complete lack of confidence and trust in management teams (Nnenna, 2013). Industrial actions also disturb the economic, social and political life of a country (Raj & Rajakrishnan, 2014).

With the emergence of devolved government in Kenya a decade ago, industrial action has been on the upward trajectory (Irimu *et al.*, 2018). One of the sectors that was hit most by industrial actions was the health sector in 2017. The health workers industrial actions lasted for 240 days on aggregate making the longest ever in the country's industrial action history. In a bid to streamline, the public health sector in Kenya, the 2010 constitution provided a legal framework that guarantees all-inclusive rights-based approach to health service delivery by devolving health care services to counties (Constitution of Kenya, 2010, County Governments Act No. 17 of 2012, Kenya Health Policy; 2012-2030). These measures however have not streamlined health care services with the issue of lack of industrial harmony and effective healthcare service delivery still featuring in the devolved public healthcare sector across Kenya (Waithaka, *et al.*, 2020). The streamlining has not addressed comprehensively the involvement of employees in key decision-making processes.

Employee involvement is one of the important aspects of organizational life to achieve increased organizational effectiveness and positive employee perceptions (Phipps *et al.*, 2013). In today's turbulent environment and intense competition, organizations are forced to

seek ways to be more flexible, adaptive and competitive as they are faced with competition pressures and rapidly changing markets (Irawanto, 2015). Through involvement in decision making, productivity is expected to increase, and overall organizational goals are achieved to help reduce agitations, misconceptions and lack of commitment on the part of employees. Employee participation in decision making (EPDM) is the extent to which employers allow or encourage employees to share or participate in organizational decision making. EPDM has been recognized as a managerial tool for improving organizational performance by striving to achieve shared goals among employees and managers (Dede, 2019). This is actualized by way of allowing employees input in developing the mission statement, establishing policies and procedures, promotion and determining perks.

Decision making in many organizations is done by top management teams without considering the input of the employees at the lower managerial levels (Ijeoma, 2020). Success depends on involving the workforce entire capacity to generate new ideas and ways of working to outsmart the competitors (Sharif, 2020). It sometimes becomes difficult for some of the decisions taken by top management to be implemented, especially when it seems not to be favorable to the staff who are mostly the implementers. In the context of this study, the inability to seek employees' views and opinions regarding issues related to human resource management, task management and delivery may result to lack of industrial harmony.

Employees play a critical role in organizational and decision-making processes to usher industrial and organizational efficiency. However, the extent to which employees should participate in organizational decision making is still a matter of debate (Irawanto, 2015). Sharif (2020) argued that participation of employees in decision-making processes has resulted in successful value creation in many organizations. It is argued that decision making regarding matters of an organization is traditionally seen as reserve for the management of the organization. However, the changing dynamics in business environment, has called for the need to consider the role of employees in matters related to decision making in organizations (Ijeoma, 2020).

Statement of the Problem

Health sector is the most critical asset, a nation can have as wealth. The wellbeing of citizens and the economy rely mostly on an effective and efficient health care system (Waithaka *et al.*, 2021). Industrial actions involving health workers have the potential to significantly disrupt operations, with potentially serious consequences on patients (Shitsinzi, 2015). The dilemma on the right of employees to industrial action and the citizens' right to health care are two delicate and conflicting constitutional provisions that continue to elude policy and legislative environment (Sitienei *et al.*, 2021). While there is consensus that the right to industrial action is an instrument for the exercise of workers' economic and social rights, there is need for a balance between the protection of these rights and the need to guarantee essential public services in order to safeguard citizens and their well-being (Kangasniemi *et al.*, 2010).

Industrial harmony in most organizations is in a way affected by the increased awareness on the part of employees about their rights and privileges' which reflects a state of organizational instability (Onyeizugbe, *et al.*, 2018). Kenya's health care system continues to experience many chronic challenges which include industrial actions, drug shortages, understaffing and underfunding, and challenges in the coordination of health in counties with workers' unions demanding that the health function be reverted back to the National Government (Agunga, 2018; Kubai, 2019). According to the Evaluation of the Human Resource for Health Strategic

Plan; 2009-2012 and the Human Resources for Health (HRH) Strategy 2014-2018, key HRH challenges facing the country include: staff shortages, inequitable distribution, high attrition especially in hard-to-reach areas, out-migration of health staff especially nurses and doctors, weak human resources management systems, weak leadership and management capacity, weak human resources information systems (HRIS), weaknesses in pre-service and in-service training, poor sectoral coordination of the HRH agenda and low compensation and benefits package (Miseda et al., 2017). The study sought to establish the relationship between employees' involvement in decision making and industrial harmony in the devolved public health sector in Kenya.

Theoretical and Empirical Review of the Study

This section reviews theoretical underpinning and empirical review relating to area of study.

Theoretical Literature

The study was guided by Social Exchange Theory. The theory as formulated by Blau (1964) is based on the prism that employees perceived organizational support creates a sense of indebtedness and an obligation within an individual to repay the organization. The theory explains the interaction of two parties that is based on cost-benefit analysis to determine risks and benefits. Social exchange reciprocity and indebtedness occurs at all levels of the organization and also with immediate supervisors through reciprocation. Employees' reciprocation is a way of giving back what they interpret to be a fair and kind consideration from the organization and associated with role behaviors, citizenship behavior and organization commitment (Zhang & Jia, 2010). Another key behavioural assumption of the theory is that of distributive justice, equity or fairness in non-economic relations. For instance, a prior relationship between parties can have an effect on the exchange, and the exchange can contribute to the development of continued relationships. This debate is yet to be re-solved as scholars use the terms; transaction and relations interchangeably (Moracortez & Johnson, 2020; Davlembayeva, *et al.*, 2020).

Social exchange builds trust among employees towards the organization that it will fulfill its exchange obligations (Ko & Hur, 2014). Molm (2010) describes the leader-member exchange to be the cordial relationship between the employee and the supervisor arising out of the perception that the supervisor represents the organization to which the employee is indebted to. Social exchange is more associated with role behavior with employee developing personal obligation to undertake extra duties, put in more time and minimize conflicts with the supervisors (Lloyd & Mertens, 2018). However, the Social Exchange Theory has been criticized that it lacks sufficient theoretical precision, and thus has limited utility (Cropanzano, *et al.*, 2017). Prominent scholars have questioned the degree to which humans are rational and thus make conscious, continuous cost-benefit analysis in their analysis (Redmond, 2015). The theory has also been criticized as it relies more on observations than on studying humans calculated decision making and reality as well as the variability of reward values.

Employees working at the health facilities need to be supported in terms of capacity building and mentorship with the aim of supporting the objectives of the organization. Social exchange has an effect on employees' involvement. According to the theory, concrete rewards and other benefits make employees spend extra effort and not to leave their organizations. The theory is helpful in understanding the relationship between employees' involvement and industrial harmony in the devolved public health sector.

Participation of workers in decision-making processes has resulted in successful value creation in many organizations; though the extent to which employees should participate in organizational decision making is still a matter of debate (Irawanto, 2015). Employee involvement is one of the important aspects of organizational life to achieve increased organizational effectiveness and positive employee perceptions (Phipps et al., 2013). In today's turbulent environment and intense competition, organizations are forced to seek ways to be more flexible, adaptive and competitive as they are faced with competition pressures and rapidly changing markets (Irawanto, 2015).

Employees must be involved if they are to understand the need for creativity and must be involved if they are to be committed to changing their behaviors at work, in new and improved ways (Kumar & Saha, 2017). Through involvement in decision making, productivity is expected to increase, attainment of overall organizational goals, helping in reducing agitations, misconceptions and lack of commitment on the part of employees. Employee participation in decision making is the extent to which employers allow or encourage employees to share or participate in organizational decision making (Yoerger et al., 2015). EPDM has been recognized as a managerial tool for improving organizational performance by striving to achieve shared goals of employees and managers (Dede, 2019). This is actualized by way of allowing employees input in developing the mission statement, establishing policies and procedures, promotion and determining perks.

Decision making in many organizations is done by top management teams without considering the input of the employees at the lower managerial levels (Ijeoma, 2020). Success depends on involving the workforce entire capacity to generate new ideas and ways of working to outsmart the competitors (Sharif, 2020). It sometimes becomes difficult for some of the decisions taken by top management to be implemented, especially when it seems not to be favorable to the staff who are mostly the implementers. In the context of this study, the inability to seek employees' views and opinions regarding issues related to human resource management, task management and delivery may result to lack of industrial harmony.

Empirical Review

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Employees play a critical role in organizational and decision-making processes to usher industrial and organizational efficiency. However, the extent to which employees should participate in organizational decision making is still a matter of debate (Irawanto, 2015). Sharif (2020) argued that participation of employees in decision-making processes has resulted in successful value creation in many organizations. It is argued that decision making regarding matters of an organization is traditionally seen as reserve for the management of the organization. However, the changing dynamics in business environment, has called for the need to consider the role of employees in matters related to decision making in organizations (Ijeoma, 2020).

Cheng (2014) carried out a study on the effects of employee involvement and participation on subjective well-being in urban China using data from the Chinese General Social Survey. The study established that employees' involvement and participation was in terms of participative and consultative management. It also consisted of freedom of expression and effective discussion between employees and their supervisors and participation in, workplace reforms. In the same line, Dixit and Sharma (2014) study on maintaining industrial harmony through employees' involvement established that proper implementation of employee involvement activities contributes positively in maintaining industrial harmony. However, the two studies did not address clarity of roles and tasks as crucial concepts for employee involvement in decision making. In addition, Cheng (2014); Dixit and Sharma (2014) argued that employee involvement in decision making is not an aspect of adaptive leadership which is contrary to Mulder (2017); Wong and Chan (2018) who defined involvement of team members as a crucial facet of adaptive leadership.

Nwokocha (2015) studied the role of employers in enhancing industrial harmony in private sector organizations in Nigeria. The study indicated that lack of effective communication, non-recognition of trade union as bargaining parties are barriers towards promotion of industrial harmony. Likewise, Brijesh and Pachauri (2017) employing desktop review method to study significance of workers' participation in management in an organization; noted that workers' participation in management reduces industrial unrest and promotes industrial peace by maintaining harmonious relations between the workers and the management. However, the two studies did not address the influence of employees' involvement in decision making on industrial harmony.

A study on employee involvement and workplace harmony in manufacturing companies in Port Harcourt, Nigeria by Tamunosiki and Sorbarikor (2018) established a positive significant relationship between employees' involvement and work place harmony. Onyeizugbe, *et al*

(2018) conducted a study on industrial harmony and employee performance in food and beverage firms in Anambra State of Nigeria and established that there was a strong significant positive relationship between joint consultation and employee engagement. The study also established that there is a very strong positive relationship between industrial harmony and employee performance. The study found out that industrial harmony is good for organizational performance, yet it did not exhaustively conceptualize the concept of industrial harmony limiting itself to only employees participating in decision making and suggestion schemes. The proposed study further expounds on industrial harmony to include employee loyalty, industrial democracy and shared vision.

Thondoo, *et al* (2020) in a study on framework for participatory quantitative health impact assessment in low-and middle-income countries established that involvement in decision making is useful in mitigating the escalation of industrial actions. However, the study did not highlight the key platforms for employee participation in decision making as there are numerous methods of involving employees in decision making.

Conceptual Framework

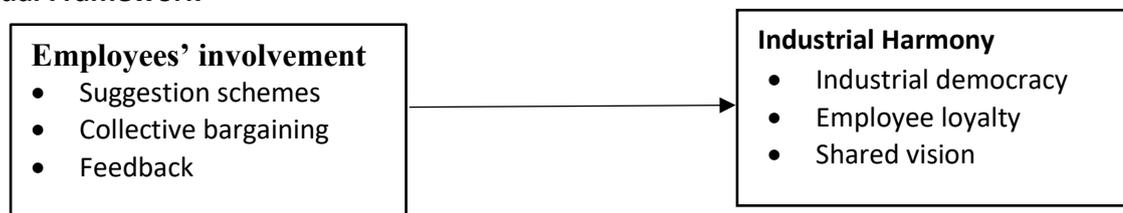


Figure 1: Conceptual framework

It is hypothesized that there is no statistically significant relationship between employees' involvement in decision making and industrial harmony in the devolved public health sector in Kenya. Participation of employees in decision-making processes has resulted in successful value creation in many organizations; though the extent to which employees should participate in organizational decision making is still a matter of debate (Irawanto, 2015). Employee involvement is one of the important aspects of organizational life to achieve increased organizational effectiveness and positive employee perceptions (Phipps et al., 2013).

Methodology

The study adopted a pragmatic research paradigm. This research paradigm influences the way knowledge is studied and interpreted (Yvonne-Feilzer, 2010). The pragmatism argues that knowledge arises from actions, situations, and consequences rather than antecedent conditions (Creswell & PlanoClark, 2011). The concern in this paradigm is the application of what works and solutions to problems. Instead of methods being the first priority, the problem is most important, and the researcher uses all approaches to understand the problem. This philosophy allowed the study to use both quantitative and qualitative methods of inquiry. This is because the nature of the constructs that were being investigated required interpretations to be derived from the subjects of the study in order to gain deeper and wider understanding (Creswell, 2013; Hall, 2013; Shannon-Baker, 2016). Pragmatic paradigm assisted in understanding the influence of affective commitment on the relationship between adaptive leadership and industrial harmony in the devolved public health sector in Kenya.

Concurrent mixed methods research design was employed combining qualitative and quantitative data in drawing conclusions. Concurrent mixed methods research design is a methodology that incorporates multiple methods to address research questions in an appropriate and principled manner (Creswell and Plano-clark, 2011; Bryman, 2012; Creswell, 2015). This method can be used to collect both quantitative and qualitative data. A concurrent mixed-methods design integrates and synergizes multiple data sources which assists in studying complex problems and allows researchers to seek a wide view of their study by enabling them to view a phenomenon from different perspectives and research lenses (Morgan, 2014; Maxwell, 2016; Shorten & Smith, 2017; Poth & Munce, 2020). The study employed concurrent mixed research method because it collected both quantitative and qualitative data in one phase. The data from interview guide and structured questionnaire were analyzed concurrently.

The study targeted respondents from the level 5 hospitals from the Central Region Economic Block (CEREB) which comprises of ten counties. The counties include Kiambu county, Murang'a county, Embu county, Nyeri county, Meru county, Tharaka Nithi county, Nakuru county, Laikipia county, Kirinyaga county and Nyandarua county. The selected counties were representative of the other counties as all counties are governed using the same structures as outlined in the Constitution of Kenya 2010 and the County Government Act of 2013. CEREB is the bloc that contributes the largest share of the Country's economy at over 26% of the total National GDP based on data from the Kenya National Bureau of Statistics (KNBS, 2020). There have also been major industrial actions in the health sector within the region resulting to dismissals and court cases where for instance in Laikipia and Kirinyaga counties there were stand offs and protracted court battles between the county governments and the trade unions. Some of the counties like Laikipia and Kirinyaga permanently sacked some of the medical personal because of industrial disharmony (Kenya Law, 2019; Kenya Law, 2020; Sitienei et al., 2021).

The unit of observation were the medical doctors, pharmacists, clinical officers, nurses, medical laboratory technologists and technicians, public health officers, radiologists, dieticians and nutritionists,' consultants, trade union leaders and Medical Superintendent. The Medical Superintendent (MS) are involved in day to day leadership and management of the level 5 county referral hospitals whereas the trade union leaders play a critical role of championing their members' rights. Thus, the target population for this study was 3,355 health workers, 10 MS, 10 union officers from Kenya Medical Practitioners, Pharmacists and Dentists Union (KMPDU) and 10 from Kenya National Union of Nurses (KNUN) represented by the secretary general and in absence; the chairman. The two unions hold the highest number of unionisable members in the devolved public health sector hence representative of the employees within the sector.

Using Bartlett, Kotrlik and Higgins table, the study sample size was 351 respondents and was selected using stratified random sampling. Stratified random sampling was appropriate as it ensured equal representation of participants in the study by eliminating any possible bias (Blumberg et al., 2014). 10 Medical Superintendent, 10 secretary generals from KMPDU and 10 from KNUN respectively were selected for participation in the study through purposive sampling. According to Saunders & Thornhill (2009) purposive sampling requires selecting participants who are knowledgeable about the issue in question, sheer involvement in and experience of the situation. Primary data was collected using questionnaires and interview guide. The questionnaires were distributed through drop and pick method by use of well-trained research assistants to the health workers at the county referral hospitals. Interview

guide was developed as per the objectives guiding the study and administered to MS of the hospitals and the KMPDU and KNUN union officials.

Data analysis involved both qualitative and quantitative analysis. Qualitative data collected through use of interview schedule was analyzed using content analysis technique. Content analysis categorizes phrases, describes the logical structure of expressions and ascertains associations, connotations, denotations, elocutionary forces and other interpretations (Mugenda and Mugenda, 2009). The data was analyzed thematically, presented in narrative and prose, compared and integrated with quantitative results to draw conclusions.

Quantitative data was analyzed using descriptive statistics such as means and standard deviation and presented in form of tables. Inferential analysis was also carried out using measures such as correlation and multiple regression analysis to establish the nature and magnitude of the relationships between the variables (Johson, 2012). Correlation analysis was carried out to determine the nature and strength of the relationship that exists among the study variables (Glesne, 2015). Regression analysis was conducted using linear regression models to establish the relationship between employees' involvement in decision making and industrial harmony in the devolved public health sector in Kenya. Normality tests, linearity tests, multi-collinearity and heteroscedasticity tests were conducted to ensure model test assumptions are considered before running the regression model.

Hypothesis testing was conducted using p calculated values. The acceptance/rejection criterion was that, if P-value is > than 0.05, we accept the H_0 but if it is <0.05, the H_0 is rejected. In testing the significance of the model, the study followed the recommendations of Blumberg, Cooper and Schidler (2014) by using the adjusted coefficient of determination R-squared (R^2) to indicate the extent to which the variation in industrial harmony is explained by the variations in affective commitment. F-statistic was computed at 95% confidence level to test whether there is any significant effect of affective commitment on the relationship between adaptive leadership and industrial harmony in the devolved public health sector in Kenya. If $p < 0.05$, the H_0 was rejected; while if $p > 0.05$ H_0 would be accepted.

Results

This chapter presents the findings of the study and further discussion.

Industrial Harmony

Industrial harmony demands that people in management comprehend their responsibilities and are adequately competent with authority to discharge their functions. Employees must understand their duties and responsibilities and be abreast with the organizational objectives and make progress towards achieving them. Industrial harmony was analyzed and presented in table 1.

Table 1

Industrial harmony

Statement	Mean	SD
1. Employees are involved in making crucial decisions pertaining issues in the hospital	2.48	1.34
2. Employees are ready to deliver on their obligations to this hospital because the management is conscious of their well being	2.40	1.36
3. Joint consultations are regularly held between the management and the workers representatives	2.46	1.37
4. Employees are committed to the strategic goals and objectives of the hospital to diligently offer health services guided by morals, competency and professionalism	2.45	1.39
5. Performance appraisals are carried out jointly and matters arising addressed amicably.	2.43	1.32
6. Employees are willing to stay longer in this hospital because remuneration and other employees benefits address their needs	2.42	1.33
7. Work committees comprise of management and workers representatives	2.41	1.44
8. Employees are well equipped with resources, information and support to cope with difficult situations and setbacks at work.	2.43	1.38
9. Both management and employees focus at delivering quality service in serving clients in this hospital	2.35	1.30
Aggregate Score	2.43	1.36

Item 1 sought to assess whether employees are involved when the sector is making crucial decisions. The results indicate that the sector did not involve employees in decision making, as depicted by the mean score of 2.48 and a standard deviation of 1.34. The study also established that employees were ready to deliver on their obligations but the management was not conscious of their well-being as shown by the mean score of 2.4 and a standard deviation of 1.36. This suggests that the employees feel that their well-being is not a priority of the management. Item 3 shows that the majority of the respondents disagreed that industrial democracy, joint consultations are regularly held between the management and the workers' representatives as depicted by the mean of 2.46 and standard deviation 1.37. The results suggest that dialogue between employees and management is not prioritized. When respondents were asked about their commitment to organizational strategic goals and objectives, majority disagreed that employees are committed to the strategic goals and objectives of the sector to diligently offer health services guided by morals, competency and professionalism as depicted by mean of 2.45 and standard deviation of 1.39 as shown in item 4. On the other hand, the respondents disagreed that performance appraisals are carried out jointly and matters arising addressed amicably as indicated by the mean of 2.43 and a standard deviation of 1.32.

Majority of the respondents did not agree that employees are well equipped with resources, information and support to cope with difficult situations and setbacks at work as deduced by the mean score of 2.43 and standard deviation of 1.38. On the other hand, most of the respondents disagreed that employees are willing to stay longer in the sector because

remuneration and other employees' benefits address their needs as depicted by the mean of 2.42 and standard deviation of 1.33.

When asked concerning the composition of work committees, majority of the respondents disagreed that work committees comprise of management and employees' representatives as depicted by a mean score of 2.41 and a standard deviation of 1.44. On the other hand, most of the respondents disagreed that employees are ready to deliver on their obligations in the sector because the management is conscious of their well-being as shown by the mean score of 2.40 and standard deviation of 1.36. On the statement on whether employees are well equipped with resources, information and support to cope with difficult situations and setbacks at work, majority of the employees disagreed as shown by the mean score of 2.35 and a standard deviation of 1.30.

Item 9 sought to establish whether both management and employees focus at delivering quality service in serving clients in the sector. The results recorded a mean score of 2.35 and a standard deviation of 1.30. The results showed that the respondents disagreed that there was cooperation between management and employees focusing on delivery of quality service to the clients. From the aggregate mean score of 1.43 and a standard deviation of 1.36; it is clear that most of the employees are not satisfied with the interventions undertaken by management towards achieving industrial harmony.

The results in table 4.3 revealed that the sector scored relatively low as depicted by the mean score of 2.43. The highest mean score was on employees not being involved in crucial decision-making processes (mean score=2.48; SD= 1.34). The statement implies that there is little involvement of employees in decision making across the sector. This can be explained by the high number of industrial actions witnessed in the sector (Waithaka, *et al.*, 2020).

Employees' Involvement

Participation of employees in decision-making processes has resulted in robust decisions that significantly enhance organizational values; though the extent to which employees should participate in organizational decision making is still a matter that there is no consensus and under what terms and conditions of engagement. Employee involvement is one of the important aspects of organizational life to achieve increased organizational effectiveness and positive employee perceptions. The descriptive finding of employees' involvement in decision making is presented in the table 2.

Table 2

Descriptive results

Statement	Mean	SD
1. Both the supervisors and employees agree on performance targets and regularly review the agreed targets	2.30	1.26
2. In this hospital, the exchange of ideas between the management and employees has helped promote a friendly working environment	2.33	1.25
3. Employees are actively involved during performance appraisal	2.36	1.31
4. The working schedules for workers in the hospital are agreed upon through consultation between employees and hospital management	2.38	1.33
5. Employees input and ideas are sought before major decisions that affect them are made	2.33	1.31
6. Collective bargaining mechanisms focusing on safety and welfare of employees in this hospital are regarded so as to enhance favorable work environment	2.35	1.34
7. There is a well-structured mechanism to recognize the input of employees in this hospital	2.44	1.34
8. During pay review processes consideration is given to the suggestions of the health care workers	2.49	1.37
9. There is a suggestion scheme where employees can present their views for consideration in decision making	2.39	1.32
Aggregate Score	2.37	1.31

N=255

Item 1 sought to assess whether the supervisors and employees agree on performance targets and regularly review the agreed targets. The results recorded a mean score of 2.30 and a standard deviation of 1.26. Lack of agreement on performance targets can adversely affect industrial harmony. Item 2 assessed whether exchange of ideas between the management and employees has helped promote a friendly working environment. The results recorded a mean score of 2.33 and a standard deviation of 1.25. These findings signified that there is a challenge of having a conducive work environment. Item 3, 4 and 5 sought to assess whether employees are actively involved during performance appraisal exercises, whether working schedules for workers are agreed upon through consultation between employees and management and whether employees input and ideas are sought before major decisions that affect them are made. The results produced mean scores of 2.36, 2.38 and 2.33 respectively and standard deviations of 1.31, 1.33 and 1.31 respectively.

These findings showed that the respondents disagreed that there were healthy consultations and this could lead to apathy and disorientation. Item 6 sought to assess whether collective bargaining mechanisms focusing on safety and welfare of employees are regarded so as to enhance a favorable work environment. The results recorded a mean score of 2.35 and a standard deviation of 1.34. These findings revealed that there was a challenge of a favorable work environment. Item 7 and 8 assessed on whether there are well-structured mechanisms to recognize the input of employees and whether during pay review processes consideration is given to the suggestions of the healthcare workers. The results recorded mean scores of 2.44 and 2.49 and standard deviation of 1.34 and 1.37 respectively. The results projected that the respondents were neutral signifying that employees' suggestions are not prioritized in the sector.

Item 9 sought to assess whether there was a suggestion scheme where employees could present their views for consideration in decision making. The results recorded a mean score of 2.39 and a standard deviation of 1.32. The results signified a situation whereby the respondents had no trust with the suggestion scheme system. On aggregate, the results showed an average mean score of 2.37 indicating that majority of the employees disagreed that the management was involving them in decision making.

Relationship between Employees' Involvement and Industrial Harmony in the Devolved Public Health Sector in Kenya

The study first undertook tests to determine whether data was fit for further analysis. Some the tests done included normality test, linearity test, correlation test, homogeneity test and collinearity test.

Test for Normality

The study conducted analysis of the Kolmogorov test. Kolmogorov was employed to determine if the data was fit for regression analysis. According to Ahad, *et al.*, (2011) a P-value greater than 0.05 implies that the data is normally distributed and is fit to carry out regression analysis. A P-value of less than 0.05 implies that the data is not normally distributed and hence not stable for regression model estimation. The results are as shown in Table 3.

Table 3

Normality Test

Variable	Kolmogorov-Smirnov Statistic	df	Sig.
Employees' Involvement	0.070	255	1.02

The findings in Table 3, show that estimate P-value >0.05 for employees' involvement in decision making, indicating that the data set in the study was normally distributed and subsequent inferential analysis could be carried out.

Linearity Test

Compare means were used to test for linearity and to visually show whether there was a linear or curvilinear relationship between two continuous variables before carrying out regression analysis. Regression models can only accurately estimate the relationship between dependent and independent variables if the relationship is linear (Osborne & Waters, 2002). The linearity results of the relationship between industrial harmony and collaborative stakeholder engagement, employee involvement, continuous organizational learning, leaders' relational authenticity, affective commitment and industrial harmony is presented in Table 4.

Table 4

Linearity Test Results

Variable		Sig.
Industrial Harmony * Employee Involvement	Between Groups	0.000
	(Combined) Linearity	0.008
	Deviation from Linearity	0.845

As shown in Table 4, the sig. deviation from linearity for employee involvement $0.845 > 0.05$. The linearity test results indicated that the data set was exhibiting a linear pattern hence linear regression modeling could be conducted since linearity test for the variable is > 0.05 and regression analysis could be done.

Collinearity Test

Collinearity test was conducted to ascertain whether the data suffered from severe multicollinearity. Collinearity is determined based on the nature of correlation between study variables. Variance inflation factor (VIF) is the ratio of the variance of estimating some parameter in a model that includes multiple other terms by the variance of a model constructed using only one term. It quantifies the severity of multicollinearity in an ordinary least squares regression analysis. (VIF) value > 5 implies presence of severe multicollinearity (Kock & Lynn, 2012). Collinearity test results are presented in Table 5.

Table 5

Collinearity Test Findings

Model	Collinearity Statistics	
	Probability Statistics	VIF Statistics
Employee Involvement	.528	1.893
Industrial Harmony	.497	1.821

The VIF statistic for employee involvement in decision making was .528 and for industrial harmony was .497. The results indicated that all the VIF values were > 0.05 for all the variables which signify that the data did not suffer from severe multicollinearity.

Test for Homogeneity

In order to meet the assumption of homogeneity of variance, Levene's Test was conducted. According to Nordstokke and Zumbo (2010), P-value above 0.05 is considered that error variance is uniform across the data set. If Levene's Test yields a P-value below 0.05, then the assumption of homogeneity of variance has been violated.

Table 6

Homogeneity Test Findings

Variable	Levene Statistic	Significance
Employee Involvement	1.423	0.100

From the results presented, the variance of the data set is homogeneous. The Levene statistic ranged from 1.423 and the P value of 0.100. The Levene statistic of the variable is above 0.05 thus variance of the error distribution was homogenous across the data set.

Correlation Analysis

Pearson's correlation (r) was applied to explore association between the factors, particularly in terms of direction and strength ranging ± 1 . Pearson conducted before carrying out further regression analysis; $r = +0.7$ and above indicates very strong association, $r = +0.5$ to 0.69 is a strong association, $r = 0.3$ to 0.49 moderate association whereas $r < 0.29$ is weak association

(Danacica, 2017). Where $r=0$ it indicates that there is no association. Table 7 shows correlation results.

Table 7
Correlation results

		Industrial Harmony
Employee Involvement	Pearson Correlation	.326**
	Sig. (2-tailed)	0.000

Table 7 shows the correlation coefficients between industrial harmony and employees' involvement in decision making ($r=.326$, $p\text{-value}=0.000$). These results indicate that there was a moderate and significant correlation between employees' involvement in decision making and industrial harmony.

Test of Hypothesis

The objective of the study was to determine the relationship between employee involvement in decision making and industrial harmony. Based on literature review, it was predicted that employee involvement in decision making (suggestion schemes, collective bargaining and work progress feedback) had no statistically significant relationship with industrial harmony. It was hypothesized that

H_01 : There is no statistically significant relationship between employees' involvement in decision making and industrial harmony in the devolved public health sector in Kenya.

Simple regression analysis was used to test the hypothesis as presented in Table 8.

Table 8
Regression relationship between employees' involvement in decision making and industrial harmony

Model summary										
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change in R Square	F Change	df1	df2	Sig.	F Change
1	.322 ^a	.103	.100	4.79923	.103	29.052	1	252	.000	

ANOVA						
Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	669.146	1	669.146	29.052	.000 ^b
	Residual	5804.228	252	23.033		
	Total	6473.374	253			

Coefficients	
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Model	Unstandardized Coefficients		Standardized Coefficient	t	Sig.	Collinearity Statistics	
	B	Std. Error				Tolerance	VIF
1	(Constant)	35.248	.301	117.052	.000		
	Employee Involvement	.939	.174	.322	5.390	.000	1.000

a. *Dependent Variable: Industrial Harmony Score*

b. *Predictors: (Constant), Employee involvement in decision making*

The findings shown in Table 8, revealed an R square of .103. This implied that employee involvement in decision making explains 10.3% of industrial harmony in the devolved public health sector in Kenya. The R square is quite low because the model focused on a single predictor leaving out other predictors that would assert more influence on the outcome of the model. According to Bala (2018), a low R square does not necessarily mean the model is bad as long as the predictors are significant and can offer unique contributions to the outcome of the model. Thus, the findings signified that there are other factors other than employee involvement that influence industrial harmony. The Analysis of Variance (ANOVA) was also done to determine if the model was fit to predict industrial harmony. The result shows an F value of 29.052 and P-value of .000. The calculated P-value of $.000 < 0.05$ is an indication that combined effect of collective bargaining, feedback mechanism and suggestion schemes is a significant predictor of industrial harmony in the devolved public health sector in Kenya. The ANOVA table results confirm that the overall model is statistically significant in explaining the relationship between employee involvement in decision making and industrial harmony in the devolved public health sector in Kenya.

The findings also show that the constant had an unstandardized coefficient of 35.248 which means that holding all other factors constant and employee involvement at zero (0), industrial harmony level would be equal to 35.248. The t-statistic for the constant was found to be 117.052 which was greater than the t-critical value (at 152 df and 0.05 significance level= 1.655). The results also show that the standardized beta coefficient for employee involvement was 0.322. This means that if all the factors are held constant, a rise in employee involvement by a single unit leads to a 0.322 rise in industrial harmony in the devolved public health sector in Kenya.

The t-test statistic for this coefficient was found to be 5.390 which was greater than the t-test critical value (t-critical at 152 df and 0.05 significance level= 1.655). The P-value for employee involvement coefficient was 0.000 which was lower than the 0.05 significance level which led to the rejection of the null hypothesis that employee involvement has no significant influence on industrial harmony in the devolved public health sector in Kenya and concluded that employee involvement has a significant influence on industrial harmony in the devolved public health sector in Kenya.

The model summary implies that employee involvement explains 10.0% of industrial harmony in the devolved public health sector in Kenya. This implied that employee involvement was only able to influence 10.0% of industrial harmony. The low R square is attributed to the singularity test of the variable which was undertaken while other variables that form the

predictor variable were not included. Employees' involvement in decision making gives them an opportunity to express their opinions regarding certain issues. On interviews; the MS argued that the management and workers' unions hold joint meetings which promotes cooperation and increases productivity. However, union officials reported that not all decisions have been implemented fully, that the feedback mechanisms are bureaucratic which take long to get responses from management and this hampers harmonious relationships. The MS reported that the anonymous nature of suggestion schemes helps in bringing out issues that some employees cannot openly speak about. The KNUN representatives however, were of the view that suggestion schemes are meant to fulfill government policy but not for employees benefit.

Dede (2019) noted that allowing employees' input in developing the mission statement, establishing policies and procedures, promotion and determining perks is very important in increasing both productivity and enhancing peaceful co-existence within the workplace. Collective bargaining is very vital when it comes to negotiation of employees' remunerations and every employer should implement it fully to avoid industrial disharmony. Suggestion schemes are essential in improving any related employees' welfare and forms a major component of feedback mechanisms in institutions. Organizations should involve employees' in decision making through platforms such as engaging them through collective bargaining, setting up feedback mechanisms and establishing suggestions schemes.

The union representative's opinion was that not all CBAs have been implemented and that feedback mechanisms are not comprehensive. They also felt that the suggestion schemes are only meant to fulfill government policies but not for employees' benefit. They proposed that there should be timelines to handle CBAs, suggestions and feedback offered and that the processes should be inclusive.

Ijeoma (2020) opined that success of an organization majorly relies on involving the entire workforce to generate new ideas and ways of working to outsmart the competitors. However, Sharif (2020) noted that sometimes some decisions are difficult to be implemented if originated from management without the input of the employees' specifically those ones that are not favoring ordinary employees. Collective bargaining tends to establish better welfare for employees starting from the working environment, reasonable remuneration and equality, improving employee satisfaction and also work performance. This enhances industrial harmony within the workplace. Enhanced employee performance through collective bargaining is an ingredient to industrial harmony (Onyeizugbe, *et al.*, 2018).

Feedback is one of the most critical communication channels in realizing industrial harmony at the workplace. Feedback will help management to link the current actions of employees with future outcomes and try to resolve issues based on the current situation. Suggestions schemes enable organizations to leverage on creative and innovative ideas from their employees' which may not be expressed during formal meetings. Through the suggestion schemes the organization will be able to utilize the untapped talents and ideas from their employees and this will boost industrial harmony if employees' suggestions are handled effectively. Management discretion on whether to implement suggestions from employees can derail industrial harmony.

The research findings agree with Auvinen (2017) whose research study on stakeholders' engagement as a success factor for effective occupational health care, established that stakeholders serve an organization and its various actors as guides in identifying, planning and implementing strategies for managing stakeholder relationships to develop occupational health care. The findings also concurred with Thuku, *et al* (2020) in a study on the

coordination of health workforce management in the devolved healthcare in Kenya. The study established that strengthening coordination mechanisms at the national and county levels, through stakeholder coordination forums, capacity building, policy formulation, HRH regulation, and provision of standards and stakeholder collaborative platforms helped harmonize HR practices. However, employee involvement in decision making may not enhance industrial harmony. According to Cheng (2014); Dixit and Sharma (2014) employee involvement in decision making will not necessarily bring about industrial harmony especially when the issues under consideration are not in tandem with organization strategic goals and objectives.

Conclusions and Implications

The study established that employees' involvement in decision making had a positive and significant effect on industrial harmony in the devolved public health sector in Kenya. Employees' involvement was positively collated with industrial harmony in the devolved public health sector in Kenya. Hypothesis testing also showed that employee involvement has a significant influence on industrial harmony in the devolved public health sector in Kenya. The results were consistent with propositions of social exchange theory which outlines that employees develop personal obligations to undertake extra duties, put in more time and minimize conflicts with the managers based on how well they are involved in managing the affairs of the organization. The results were also in line with existing empirical literature which shows that employees must be involved if they are to understand the need for creativity and if they are to be committed to changing their behaviors at work, in new and improved ways. Through involvement in decision making, productivity increases, overall organizational goals are achieved which help reduce agitations, misconceptions and lack of commitment on the part of employees. Literature also shows that employees' involvement in decision making can make or break relationships at the workplace.

The results were consistent with the theoretical foundations of Social Exchange Theory which emphasizes that individuals become intrinsically motivated or involved in a course of action that develops from an identification, association, and attachment with the larger organizations' values and objectives. Employees must be involved if they are to understand the need for creativity and must be involved if they are to be committed to changing their behaviors at work, in new and improved ways (Kumar & Saha, 2017). Through involvement in decision making, productivity is expected to increase, attainment of overall organizational goals, helping in reducing agitations, misconceptions and lack of commitment on the part of employees.

Success depends on involving the workforce entire capacity to generate new ideas and ways of working to outsmart the competitors (Sharif, 2020). It sometimes becomes difficult for some of the decisions taken by top management to be implemented, especially when it seems not to be favorable to the staff who are mostly the implementers. In the context of this study, the inability to seek employees' views and opinions regarding issues related to human resource management, task management and delivery may result to lack of industrial harmony.

Involvement of employees in decision making raises their self-esteem, gives them a sense of belonging and enhances positive reciprocation. Employees' reciprocation is a way of giving back what they interpret to be a fair and kind consideration from the organization and associated with role behaviors, citizenship behavior and organizational commitment. The social exchange theory emphasizes on distributive justice, equity and fairness in non-

economic relations. Social exchange builds trust among employees making them to have personal obligation to undertake extra duties, put in more time and minimize conflicts with the supervisors. This in turn makes the organization more robust, competitive and productive. Employees' involvement in decision making is an important aspect of organizational life to achieve increased organizational effectiveness and positive employee perceptions. Policies are normally implemented by employees with the guidance of managers. The study recommends the strengthening of suggestion schemes within the sector so that employee's suggestions can inform policies. Policies that do not reflect the wishes of employees or those that are not taking care of their interest are likely to face resistance and to some extent jeopardize industrial harmony. Employees also need to be part of the decision-making processes as involving them will bring in innovative ideas that can enable the sector to thrive and enhance competitiveness. Talented employees can incorporate their creative ideas which will in turn inform the decision-making process.

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