Presenteeism of Restaurants Employees: Interaction Effects of Responsible Leadership, Organizational Commitment and Turnover Intentions

Mohamed F. Agina   **Ahmed E. Abuelnasr**

Higher Institute for Specific Studies, Heliopolis Future Academy.

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ABSTRACT

Contemporary leaders are often under growing pressure to carry out their responsibilities with a greater sense of urgency. Responsible leadership (RL) represents an interesting and significant integration for organizational responsibility. Social responsibility has gained great interest but, there hasn't been much focus on the impact of RL on employees' outcomes such as presenteeism (PT), organizational commitment (OC), and turnover intentions (TI). PT or going to work while sick and can't perform at full capacity causes a loss of production and a severe financial impact on organizations. The objective of the current research was to assess how the PT of restaurant employees interacts with RL, OC, and TI. Data were obtained from 35 fine dining restaurants in Egypt, Greater Cairo area. A total of 440 questionnaires were gathered in all. For the final analysis of data, only 385 surveys were acceptable. The findings showed that PT, RL, TI all had a significant positive correlation. Furthermore, a significant negative correlation between PT and OC was also stated.

1. Introduction

Employee productivity became a vital success factor in ensuring an organization's long-term competitiveness. Management is aware of the negative effects of absenteeism, but presenteeism (PT) has recently gained attention due to its major effects on employee performance and productivity (Merrill et al., 2012). Organizations mainly focus on the direct healthcare expenses of absenteeism; therefore, the cost of PT is hidden (Wright et al., 2002). PT refers to working while sick, which means being physically present but mentally absent (John, 2010). PT charges businesses in the USA roughly $150 billion per year, PT also accounted for 74% of missed time due to illness but absenteeism is responsible for only 26% (Willingham, 2008).

According to the Fifth European Working Conditions Survey 39% of employees work while ill (men: 38%, women: 41%) (Brouwer, Koopmanschap and Rutten, 1999). If it is not treated properly, PT will promote absence and accounts for two-thirds of the employees' illness charge (Merrill et al., 2012).

PT is one of the concerns for leadership behaviors in boosting workers' productivity (Haque, 2021). Leadership is significant since it is not only linked to individuals' attitudes, effectiveness, and engagement but also their social and personal well-being (Nyberg et al., 2008). Managers face problems in today's business world in terms of being responsible leaders and maintaining a productive staff (Sharma and Singh, 2019; Haque et al., 2020). Managerial leadership in which leaders motivate, encourage, and inspire their staff is one important technique to promote a productive workforce (DeArmond et al., 2018). Growing worldwide competitiveness, organizational commitment (OC), and the absence of responsible leadership (RL) are all becoming major stresses in businesses (Voegtlin, 2016). Managerial activities have been used to apply RL to produce organizational value that benefits workers and the community (Maak et al., 2016; Miska and Mendenhall, 2018).

Nyberg et al. (2008) suggested that leadership has an impact on the structure of PT. Leaders build and maintain trusting connections with all stakeholders (Pless and Maak, 2011). Identifying and improving human resources by competent leaders can result in increased potential for competitive advantage (Haque et al., 2019). As a result of the requirement for management accountability, scholars are giving more attention to OC (Haque et al., 2019; Karia and Abu, 2019). Earlier studies have attempted to describe why personnel are still committed to their enterprises, and certain critical determinants such as turnover intentions (TI) and RL have been highlighted (Ribeiro et al., 2018; Haque et al., 2019). However, more studies on the notion of RL and its influence on businesses effectiveness are essential.

Individuals' institutional accomplishments are affected by irresponsible leaders (Mariappanadar, 2018; Haque et al., 2019). Although leadership may promote workers' motivation to improve OC and retention (Hashim et al., 2017; Mariappanadar, 2018), studies to support the link between institutional outcomes and RL are limited (Haque et al., 2019). The variable cost of employee turnover includes lower productivity and a decline in satisfaction for remaining staff so managing the determinants of employee turnover intentions is a good way to minimize actual turnover (Jacobs & Roodt, 2007). The notion of PT and its implications on workers performance was rarely mentioned (Haque et al., 2019).

2. Literature Review
2.1 Presenteeism (PT)
The first use of the concept PT was by Soash (1955), which was described as a positive attitude for an employee to move away from absence toward PT. Vieira (2018) described PT as working while you must be at home due to sickness or other medical issues. As indicated by Juniper (2012) PT involves healthy workers who are unproductive as they spend a large amount of time at work on non-work tasks including making phone calls or browsing the internet. Individuals were more inclined to go to work sick through downturns of economic for financial considerations, job security, and working condition (Johns, 2010; Quazi, 2013). Worrall and Cooper (2007) proposed that individuals may work longer hours to seem conscientious when they are insecure in their jobs which increases the likelihood of

PT. Likewise; Patton (2012) argued that half of those ready to go to work ill claimed that job stability was the most significant factor in their decision.

Individuals who are sick but continue to work may exhibit poor quality and productivity (Haque et al., 2020). Cooper et al. (2013) also demonstrated that workers that are exhausted or depressed are less productive. Long durations of PT can contribute to more significant health risks, which can have an impact on employees' effectiveness (Ferreira et al., 2019). PT has a significant influence on people's health and quality of life by causing an economic loss in the workplace which results in large expenses for organizations (Yildiz et al., 2015). Researchers reported that going to work when ill is much more costly and harmful to performance and productivity than staying at home (Wang, 2015; Zhou et al., 2016). The cost of PT associated with productivity loss was estimated to be 11.5 times greater than the number of sick days (Lui and Johnston, 2019). According to Demerouti et al. (2008), PT will not only reduce productivity and increase the possibility of human mistakes but will also promote employee weariness and depersonalization. The risk of PT according to Zhou et al. (2016) is the higher possibility of errors due to the extreme of working, which could result in financial consequences.

Quazi (2013) argued that employees who participate in non-sickness PT come to work while dealing with life situations that are not linked to illness Casale (2008) stated that employees spent 2.5 to 5 hours a week at the job dealing with personal issues. Employees in a fully functioning PT are well and never take sick leave; they are motivated and actively engage in their tasks (Cooper, 2011).

2.2 Responsible leadership (RL)

RL encourages leaders to control their values and maintain a business culture that maximizes financial results, ethical agreements, and social implications (Tastan and Davoudi, 2019). Responsible leaders attempt to have good relationships with key stakeholders (Waldman et al., 2020). Leaders give importance to issues like the moral decisions, partnership, and long-term advancement (Pless and Maak, 2011). It has been empirically proven that the key purpose of RL is to increase worker satisfaction, reduce staff turnover and create an ethical basis (Voegtlin, 2016). The continuous high-profile corporate and other organizational crises prompted the demand for responsible leaders (Fernando, 2016). Responsible leaders view their followers as important stakeholders who can help them maintain their creativity and productivity by utilising their different perspectives (Doh & Quigley, 2014). RL literature has focused on the antecedent variables and organizational outcomes for appropriate ethical (Voegtlin et al., 2012). RL focuses on building a long-term relationship between organization leaders and stakeholders that will benefit the community (Cameron, 2011).

Responsible leaders establish the organization's basic principles and goals, as well as a broad outline of ideal social, human, and sustainable characteristics (Kets de Vries et al., 2004). As a result, the employee is concerned about the organization's long-term sustainability (Zhao and Zhou, 2019). Responsible leaders set an example and increase employee knowledge of responsibility; it sends a message to employees that

long-term values seem to be the most important (Yaffe and Kark, 2011). Workers spend their effort and time for the adoption of sustainable strategies since responsible leaders take care of them, understand their requirements, focus on their personal and career advancement which helps in increasing their emotional commitment to the organization (Boiral et al., 2014). There is a lack of research supporting the link between organizational outcomes and RL (Maak and Pless, 2016; Haque et al., 2019). However, scholars investigated employee effectiveness from the standpoint of leadership which includes leadership style (Pradhan et al., 2018) and moral leadership (Kalshoven et al., 2016).

2.3 Organizational Commitment (OC)

OC focuses on the mental link that exists between workers and their organizations and describes the probability that individuals will not willingly quit their organizations (Chidi et al. 2020). Employee commitment has been identified as one of the most important contributors to organizational success (Hartog and Verburg, 2004). OC in the hospitality industry established a clear link between committed workers and their outputs as well as service quality (Kim & Brymer, 2011). In this case, Bedi et al. (2016) indicated that employees with a high level of commitment to the businesses are more likely to provide high-quality service as a result improves guest loyalty.

The concept of OC is regarded to be a multidimensional process that may affect organizational performance (Agina, 2020). OC includes identification, compliance, and internalization commitment (Ng, 2017). Employees who are committed perform much better and OC has been linked to a variety of organizational outcomes, it has been noticed to impact absenteeism, performance, and turnover (Vizano et al.,2020). High commitment is related to positive outcomes such as lower turnover, absenteeism, and higher productivity and recognizing individuals' personal attributes improve their level of commitment (Allen et al., 2010).

2.4 Turnover intention (TI)

TI has an impact on organizational strategies and encourages top leaders to investigate the causes of employees' turnover (Zhang et al., 2015). Employee turnover is a real cost to businesses that is not simply related to the costs of hiring, training, and advancement (Allen et al., 2010), but also associated with the cost of losing well-trained and skilled workers (Nyberg and Ployhart, 2013). It also indicates individuals' assessed possibility that they will leave their work at some point shortly (Rahman & Nas, 2013). Employee final choice to leave the work is a negative outcome for both employee and the organization since it impacts both parties. Hence, it is necessary to identify employee TI to reduce the undesirable effect on both organizational performance and employees (Agina, 2020).

2.5. Conceptual framework and hypotheses

Based on Yukl (2013) leaders affect workers by possessing a formal supervisory or management position. Employees' psychological and physical health may be affected by these leadership positions, which in turn may affect employees' productivity and PT. Hence, RL can play a necessary role in employees' PT to maintain a productive

workforce (Ng, 2017; Haque et al., 2020). Scholars presented analytical indications for a positive relationship between PT and leadership (Nielsen and Daniels, 2016; Kudret and Melike 2016). Moreover, many scholars proposed that leadership positively impacts employees' health in terms of both psychological and physical wellbeing and that employees' health negatively influences PT (Dietz and Scheel, 2017). Thus, it is necessary to investigate how RL in organizations associates with employees' PT. As a result, the following H1 was recommended: There is a positive correlation between RL and PT.

Leaders who exhibit higher levels or more RL characteristics may help to improve organizational commitment, as RL is likely to enhance employees' connection and feelings of engagement to their businesses (Ng, 2017). Researchers proposed that managerial leadership enhances OC and increases individuals' willingness to be more involved (Haque et al., 2019). Individuals' cognitions of personal identity may influence their commitment to their businesses (Haque et al., 2021). There is clear evidence for a significant relation between RL and OC (Bedi et al. 2016). So, the following H2 was recommended: There is a positive correlation between RL and OC.

According to Laschinger and Fida (2014), RL influences employee retention significantly and reduces TI. Kiersch (2012) also suggested that RL is a significant predictor of TI, finding a significant relationship with employee turnover. Employee turnover is costly However, a leadership position that will be able to minimize employee TI has yet to be revealed (Anthony et al., 2016). So, the following H3 was recommended: There is a positive correlation between RL and TI.

Highly dedicated personnel seem to be more inspired and effective while OC raises job performance (Phipps et al., 2013). OC was shown to be a good indicator of TI (Brien et al. 2015). Many scholars highlighted the inverse relation between OC and TI (Lee et al. 2012; Haque et al., 2020). Faloye (2014) found a negative correlation between OC and TI. On the other hand, TI has been revealed to be a driver for workers' performance outcomes. As a result, the following H4 was recommended: There is a positive correlation between OC and TI.

Although OC is linked to lower absenteeism, it is also linked to higher levels of PT and may result in over-commitment outcomes (Johns, 2010; Taifor et al., 2011). Likewise, Bierla et al. (2013) investigated the direct impact of OC on PT and discovered that higher OC is linked to lower PT. On the other hand, several studies have investigated the relations between employee well-being and TI (Zhang et al., 2015; Haque et al., 2020). Accordingly, the following H5 was recommended: There is a negative correlation between PT and OC. H6: There is a positive correlation between PT and TI.
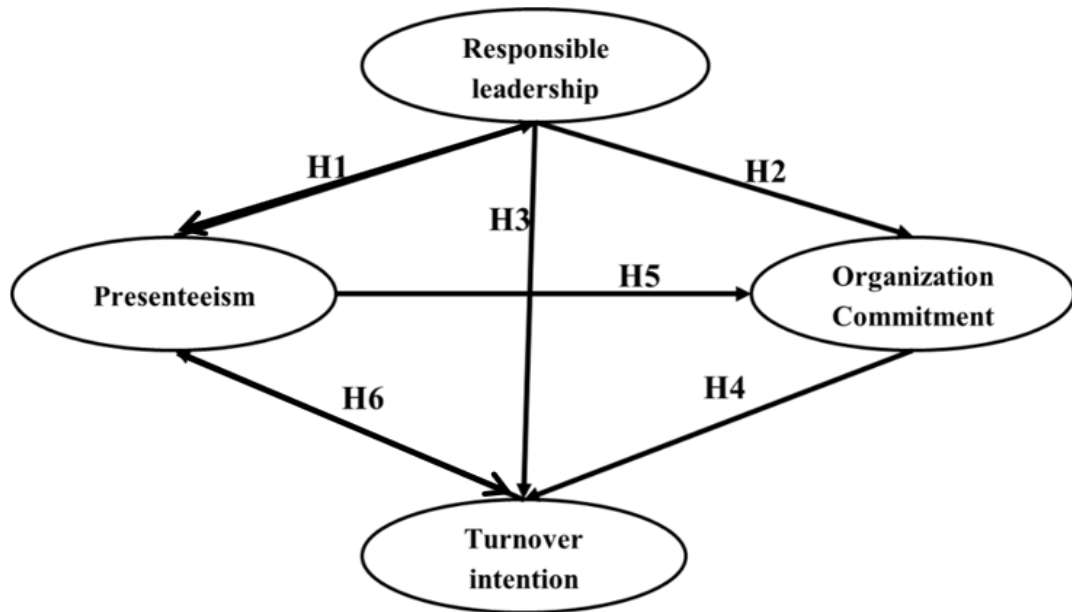
Fig.1. Theoretical framework for the study

3. Methodology
3.1. Survey instrument development
In the current study, PT was assessed by Stanford Scale (Koopman et al. 2002). McClain (2013) recommends SPS that can be used in employee fitness and wellbeing interventions. RL was measured using a scale created by Doh et al., (2011). OC was measured by the scales developed by Meyer et al., (1993), this measure is composed of three parts: normative, continuance, and affective. TI was assessed using a measure established by Donnelly and Ivancevich (1975).

3.2. Sample
According to data derived by Trip Advisor (2021) revealed that there are 81 fine dining restaurant in Cairo. A Convenience sample of 35 fine dining restaurants in Egypt, the Greater Cairo area was examined. A well-structured questionnaire was designed and answered by restaurants employees. A total of 440 forms were collected. For the analysis of responses, only 385questionnaire were acceptable reflecting 87.5 %.

3.3. Reliability and Validity test
Reliability was calculated using Cronbach Alpha and found to be .812 for PT,.774 for RL,.751 for OC, and.711 for TI. Indicating that the measures were trustworthy. The validity also calculated using the square root of the reliability coefficient indicating that the measures are valid, 706 for PT, .801 for RL,.709 for OC, and.711 for TI (Salkind & Frey 2021).

4. Results

Table 1

Descriptions of participants

Items		Frequency	Percent
Gender	Male	305	79.2
	Female	80	20.8
Age	From 17 to 25 years	105	27.3
	From 25 to 45 years	210	54.5
	45 years and above	70	18.1
Educational level	Doctoral degree	0	0
	Master's degree	3	0.8
	Bachelor's degree	127	33
	High school	255	66.2
Marital Status	Married	151	39.2
	Single	205	53.2
	Divorced	24	6.2
Years of experience	Less than 5 years	106	27.5
	Between 5 to 10 year	210	54.5
	10 year and above	69	18
Job level	Managers	155	40.2
	Operative workers	230	59.7
Have a sickness that kept employees from working	Yes	322	83.6
	No	63	16.4
Attending at work while being sick	Yes	347	90.1
	No	38	9.9
Disability	Don't have a disability	375	97.4
	Have a disability that is not related to your job	4	1
	Have a job-related disability	6	1.6

Out of 385 respondents, a majority 79.2% (n = 305) were male and 20.8. %(n= 80) were female; about 27.3%(n =105) of respondents from 17 to 25 years ,54.5% (n=210)were from 25 to 45 years old and 18.1%(n =70) more than 45 years; about two-thirds of respondents 66.2 % (n= 255) had a high school and a minority 0.8% (n=3) had master degree; about 40.2% (n= 155) belong to a managers' job class, and 230 (59.7 %) belong to operative workers. in terms of years of experience, the majority 54.5%(n=210) were between 5 to 10 years, 27.5% (n=106) less than 5 years and 69(18%) were more than 10 years' experience. Almost, a majority 97.4% (n = 375) do not have either work or non-work-related disability. Most of the respondents 90.1% (n = 347) attending at work while being sick, a majority 83.6% (n = 322) have sickness that kept them from working.

Table 2

Descriptive and measures of association between PT and personal –work-related informations

Presenteeism	Mean	SD	F	Sig.	Eta2		Mean	SD	F	Sig.	Eta2
Health conditions made it difficult for me to enjoy my work.	3.07	1.159	7.52	.004	.112	**Age**			11.34	.011	.023
						17 to 25 years	3.78	1.98			
						25 to 45 years	2.39	1.19			
						More than 45 years	2.45	1.30			
I was able to be concerned about achieving my objectives although my health conditions.	3.52	.949				**Gender**			14.23	.000	.170
						Male	3.72	1.99			
						Female	2.12	1.12			
Due to my health conditions, I felt hopeless about completing certain work duties conditions.	3.41	1.129				**Marital Status**			3.67	.811	.056
						Married	2.76	1.24			
						Single	2.99	1.88			
						Divorced	2.03	1.10			
The pressures of my work were much more difficult to handle because of my health condition.	3.46	1.188				**Education Level**			3.96	.000	.049
						Doctoral degree	2.15	1.12			
						Master's degree	2.53	1.25			
						Bachelor's degree	2.60	1.21			
						High school	2.29	1.19			
Attending at work while being sick			13.12	.000	.048	**Years of experience**			.842	.652	.187
						Less than 5 years	2.64	1.24			
Yes	3.71	.82									
No	2.13	.75				5 to 10 years	2.82	1.29			
Reasons for attending at work despite illness			7.42	.002	.063	More than 10 years	2.94	1.21			
Personal concern	2.88	1.45				**Job level**			3.84	.000	.032
						Managers	2.21	1.16			
Passion for Work	3.01	1.47				Operative workers	2.29	1.12			
Work Pressure	3.07	1.45									

The current study used Eta-squared to measure the strength of the relationship among PT, RL, OC, and TI with personal -work-related information. The following principles developed from Cohen (1988) are being used to determine the eta squared values: 0.14 indicates a large impact, 0.06 indicates a moderate impact, and 0.01 indicates a small impact.

The results presented in table (2) indicated that there was no substantial difference in PT based on marital status and years of experience with P-values.811, .652 respectively. When the mean scores are compared, it seems that males, single and younger were more inclined to think about PT. Furthermore, there is also a significant difference in PT based on differences in their age, level of education, gender, employment level, going to work when unwell with a P-value of.011, .000, .000,.000, 000 respectively. Therefore, changes in employees' PT due to their age, level of education, marital status, employment level, and going to work while unwell have a small influence with Eta2 values of .023, .049, .056, .032, and .048 respectively. On the other hand, differences in experience years and gender have a great impact on PT with Eta2 values of.187 and .170.

Table 3

Descriptive and measures of association between RL and personal –work-related information

Responsible leadership	Mean	SD	F	Sig.	Eta2		Mean	SD	F	Sig.	Eta2
This restaurant takes corporate social responsibility seriously.	3.29	1.131	1.631	.011	.54	**Age**			15.33	.001	.141
						17 to 25 years	2.79	1.27			
						25 to 45 years	2.55	1.23			
						More than 45 years	2.59	1.32			
This restaurant takes an active role in its Community.	3.39	1.131				**Gender**			16.87	.000	.159
						Male	2.39	1.29			
						Female	2.70	1.60			
Our incentive programs have proven to be effective in retaining top talent.	3.13	1.155				**Marital Status**			11.47	.000	.051
						Married	2.78	1.27			
						Single	3.39	2.19			
						Divorced	2.45	1.30			
The stresses of my work were much harder to handle due to my health problems.	3.18	1.155				**Education Level**			8.19	.931	.046
						Doctoral degree	2.89	1.25			
						Master's degree	2.94	1.21			
						Bachelor's degree	2.68	1.27			
My immediate supervisors are good at developing employees.	3.36	1.098					2.42	1.20			
						High school	2.00	1.11			
Attending at work while being sick			14.65	.032	.191	**Years of experience**			19.25	.002	.098
						Less than 5 years	2.66	1.26			
						5 to 10 years	2.93	1.25			
Yes	3.60	1.38				More than 10 years	2.98	1.20			
No	3.50	1.42									
Reasons for attending at work despite illness			11.33	.011	.070	**Job level**			18.98	.004	.062
						Managers	1.46	0.59			
Personal concern	3.45	1.40				Operative workers	1.79	0.79			
Passion for Work	3.56	1.39									
Work Pressure	3.50	1.47									

The results in a table (3) demonstrated no significant difference in individuals' perceptions of RL based on their educational degree with a P-value of .931. Nevertheless, there's also a significant difference in how workers experience RL depending on their age, job level, gender, marital status, experience years, and going to work when unwell with P-values .001, 004, .000, .000, .002, .032 respectively. On the other hand, variations in age, gender, experience years, and going to work when unwell have a great influence on workers RL with Eta2 values of .141, .159, .098 and .191 respectively. In addition, changes in marital status, level of education, and work level had a minor influence on employees' RL with Eta2 values of .051, .046, and .062. When the mean scores are compared, it seems that females, single, low level of education, and operative workers were more likely to perceive RL.

Table 4

Descriptive and measures of association between OC and personal –work-related information

Organizational Commitment	Mean	SD	F	Sig.	Eta2		Mean	SD	F	Sig.	Eta2
I'd be pleased to work for this restaurant for the rest of my career.	3.56	1.180	11.13	.002	.331	**Age**					.029
						17 to 25 years	2.01	1.04	22.12	.001	
						25 to 45 years	2.42	1.23			
						More than 45 years	2.88	1.48			
I have no emotional value to the restaurant.	3.36	1.175				**Gender**					.323
						Male	2.86	1.26	32.41	.000	
						Female	2.97	1.44			
Even if I hoped to, leaving my restaurant right now would be extremely difficult.	3.46	1.123				**Marital Status**					.033
						Married	3.02	1.66	12.25	.002	
						Single	2.90	1.25			
						Divorced	2.95	1.21			
I might feel guilty if I left this restaurant right now.	3.35	1.151				**Education Level**					.181
						Doctoral degree	2.96	1.88			
						Master's degree	2.25	1.47			
I would not quit my restaurant right now because I deserve the people who work there.	3.50	1.080				Bachelor's degree	2.13	1.29	14.52	.000	
This restaurant is deserving of my loyalty.	3.50	1.043				High school	2.11	1.21			
Attending at work while being sick			6.302	.003	.363	**Years of experience**					.160
						Less than 5 years	2.67	1.27	13.89	.001	
YES	2.51	1.47				5 to 10 years	2.41	1.20			
NO	2.94	1.55				More than 10 years	2.45	1.30			
Reasons for attending at work despite illness			9.403	.000	.151	**Job level**					.027
						Managers	2.03	1.12			
Personal concern	3.02	1.48				Operative workers	2.22	1.08	19.23	.675	
Passion for Work	3.14	1.46									
Work Pressure	3.01	1.47									

The results in table (4) revealed no significant difference in staff perceptions of OC depending on their level of employment, with a P-value of.675. On the other hand, Workers' perceptions of OC significantly varied according to their gender, marital status, education level, age, going to work when unwell, and experience years with a P-value of .000,.002, .000, .001, 001,.003,.001 respectively. Therefore, changes in employees' OC due to their gender and education level, years of experience, and going to work while unwell have a large influence with Eta2 values of .323, .181, .160, and .363, respectively. On the other hand, changes in employees' OC due to their age, marital status, and job level have a small influence on Eta2 value.029, .033 and .027. When the mean scores are compared it seems that females, high level of education, married and older are more likely to perceive OC.

Table 5

Descriptive and measures of association between TI and personal –work-related information

Turnover intention	Mean	SD	F	Sig.	Eta2		Mean	SD	F	Sig.	Eta2
I'm likely to start looking for a new job in the near future.	3.32	1.092	2.654	.211	.081	**Age**			16.77	.001	.052
						17 to 25 years	2.76	1.24			
						25 to 45 years	2.92	1.28			
						More than 45 years	3.03	2.19			
						Gender			15.32	.662	.096
						Male	2.73	1.27			
						Female	3.03	2.11			
I regularly think about leaving my present work.	3.42	1.153				**Marital Status**			10.68	.001	.141
						Married	3.59	2.32			
						Single	2.76	1.24			
						Divorced	2.92	1.28			
In a different career, I am willing to accept lower pay and benefits.	3.60	1.161				**Education Level**			11.12	.000	.051
						Doctoral degree	2.96	1.88			
						Master's degree	2.37	1.19			
						Bachelor's degree	2.43	1.30			
						High school	2.60	1.26			
Attending at work while being sick			22.65	.002	.046	**Years of experience**			9.13	.002	.097
						Less than 5 years	2.81	1.26			
						5 to 10 years	2.44	1.21			
Yes	3.58	1.46				More than 10 years	2.50	1.31			
No	3.38	1.39									
Reasons for attending at work despite illness			23.28	.000	.069	**Job level**			11.87	.001	.106
Personal concern	3.49	1.39				Managers	1.78	0.84			
Passion for Work	2.57	1.46				Operative workers	1.52	0.50			
Work Pressure	2.66	1.46									

The results in table (5) revealed no significant difference in workers' perceptions of TI based on gender with a P-value of.662. Moreover, there's also a substantial variation in workers' perceptions of TI based on age, marital status, level of education, experience years, job level, and going to work when unwell with P-values of.001,.000,.002,001,.002 and.002 respectively. It was revealed that differences in gender, marital status, and experience years have a strong influence on TI with Eta 2 scores of .096, .141, .097, and.106 respectively. Furthermore, changes in workers' TI according to their age, level of education, and going to work when unwell had a limited influence with Eta 2 score of.052, .051, and.046. When the mean scores are compared, it seems that older employees, females, married, and with high educational levels were more likely to perceive OC.

Table 6
Correlation matrix among Study Variables

		Presenteeism	Responsible leadership	Organizational Commitment	Turnover intention
Presenteeism	Correlation	1	.233**	-.421**	.148**
	Sig.		.000	.000	.002
	N	385	385	385	385
Responsible leadership	Correlation	.233**	1	.407**	.327**
	Sig.	.000		.001	.003
	N	385	385	385	385
Organizational Commitment	Correlation	-.421**	.407**	1	.276**
	Sig.	.000	.000		.000
	N	385	385	385	385
Turnover intention	Correlation	.148**	.327**	.276**	1
	Sig.	.002	.000	.000	
	N	385	385	385	385
**. Correlation is significant at the 0.01 level (1-tailed).					

Table (6) exhibited a significant positive correlation among PT and RL (r=.233, p=.002), as well as PT and TI (r=.148, p=.002). Interestingly, there is a significant negative correlation among PT and OC (r=-.421, p=.000). In addition, there is indeed a strong correlation among RL and TI (r=.327, p = .003), as well as RL and OC (r=.407, p = .001), and between OC and TI (r=.276, p = .000).

5. Discussion and implications
The main purpose of the current research was to examine the relationships between PT, RL, OC, and employee TI. The study reported a significant negative relationship between PT and RL. Previous leadership and PT studies have investigated the impact of various leadership practices on PT (Nyberg et al., 2008; Gilbreath & Karimi, 2012). When employees perceive their managers as leaders who care for workers through managerial support, there is a higher probability that workers will create less PT. These findings come to be consistent with the results of (Nyberg et al., 2008) who suggest that RL in workplaces directly impacts employees' work processes of PT.

Furthermore, RL and OC have a strong positive correlation. Workers who experience a greater degree of RL from their supervisors are more committed. These results were like those of (Suk Bong et al., 2015) which indicated that when workers feel more RL traits they react to a greater level of OC. RL was positively related to TI as predicted in H3. When viewed from the perspective of workers the positive link between RL and TI explains the value of RL. It indicates leaders' capability to build strong relations with their staff. As a result, engage and attract employees to the point where TI is unlikely to emerge. These results supported those of (Liu et al., 2013; Harris et al., 2014; Agina& Abdelhakim,.2021), which reported that RL increases worker retention by changing workers' views of effective management. Current research also revealed a significant correlation between OC and employee TI. OC reduces employees' TI in workplaces as less committed employees are more inclined to resign from their positions (Meyer et al., 2002). As a result, OC is a great predictor of job behaviour, which is related to real turnover. Prior investigations have demonstrated that a broken psychological contract reflects poor commitment and withdrawal behaviors (Lee et al., 2012; Abuelnasr, 2020; Agina& Abdelhakim,.2021).

In other words, the findings confirmed H5, which showed a negative correlation between PT and OC (r= -.421, p< 0.005). Employees' higher levels of OC did not influence PT which employees' normative commitment may encourage an employee to come to work when they are unwell and may need support from their leaders to take sick leave. These results were like those of (Johns, 2010). Finally, the findings revealed that PT was with favorably associated to TI. Workers who are thinking TI but are required to work despite their illnesses progressively experience higher PT levels. These findings appear to agree with those of (Ruez,2004; Taifor et al., 2011) which suggests that PT positively influences TI.

5.1 Practical implications

The findings of current research provide necessary insights on the relationship between RL and specific employee outcomes (PT, OC, and employee TI). These findings can be utilized by businesses to design workers' wellbeing strategies and administrative initiatives to reduce PT. Businesses may hire healthcare professionals to examine their personnel's health to recognize and prevent PT. This will not only assist management in preventing PT, but it may also enhance employees' job satisfaction (Crane & Matten, 2007). Hence, management needs to examine and identify PT by promoting a culture of open communication among all workers so that they can share and identify their health issues.

Additionally, developing RL for institutional leadership through training activities. Stahl and De Luque (2014) are concerned about responsible behavior progress through additional training and development initiatives to obtain higher leadership outcomes. Moreover, businesses should develop managers' abilities to practice RL to enhance OC, reduce employee TI and PT. Leaders should keep an eye on employees who come to work sick and raise awareness about PT. Organizations should provide paid leave for PT and motivate employees not to come to the job if they have been diagnosed with a health problem, this practice encourages employees to work under medical supervision which reduces productivity losses (Lyons, 2008).

5.2 Theoretical implications

The concept of RL is relatively unexplored in the literature of organizational studies and there is little evidence for it. Researchers proposed that there are numerous problems in adopting RL due to the constant changes in organizations and increasing needs of business contexts (Pless and Maak, 2011). While many studies have proved the association between PT and various leadership behaviors (Nyberg et al., 2008). The findings of current research extend the study of Brown and Trevino (2006) and Spreitzer's (2007) value-centered leadership behaviors. The current research has conceptualized RL as a value-based leadership approach to investigate its relationship with PT, OC, and TI.

6. Conclusion and Recommendations

PT, RL, and OC are major workplace challenges that could lead to physical illness and encourage harmful behaviors. The current research presented evidence that individuals' perceptions of their superiors' RL responses are related to the other three variables PT, OC, and TI. The findings revealed that employees' TI and OC are influenced by perceived RL. The findings of the current research also revealed how RL can improve OC and decrease the negative effects of employee TI by promoting employee engagement to their manager and organization. These findings helped to fill a substantial gap in earlier research (Nyberg et al., 2008; Yukl, 2013), understanding why and how RL affects employees in workplaces for PT, OC, and TI was one of the research major contributions.

Restaurant management should improve its capabilities by implementing effective development and training programs to build strong leader-members relationships which reduce PT and increase OC and enhance employees' retention. When dealing with PT the significance of implementing wellness programs that promote employee health should be highlighted. Another factor to consider when dealing with PT is culture. Restaurants management must attempt to ensure that workers are aware of the most major lifestyle variables and chronic illnesses that cause disability and illness. Moreover, Restaurants should implement absence rules that would not subject employees with infectious conditions to disciplinary proceedings. Restaurant management must understand when bringing workers to come into work even if they are unwell, they are shifting the issue from absenteeism to PT.

7. Limitations and Future Research

The current research focused only on the staff working in the Egyptian fine dining restaurants, so the findings may be limited and could not apply to other industries due to the nature of the foodservice sectors. It is, therefore, suggested that these results could be examined in other restaurants in different countries; the findings were derived from data collected within a specific period 'August 2021'. So, extensive experimental prospective studies need to be done to get much more conclusive results. Restaurants employees' PT was solely investigated in respect of RL, OC, and TI. Other hospitality establishments might be conducted in future research.

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حضورية موظفي المطاعم: تأثيرات التفاعل مع القيادة المسؤولة والالتزام التنظيمي ونيات ترك العمل

محمد عجينة   أحمد أبو النصر

المعهد العالي للدراسات النوعية، مصر الجديدة، أكاديمية المستقبل.

معلومات المقالة	الملخص
الكلمات المفتاحية	غالبًا ما يتعرض القادة المعاصرون لضغوط متزايدة وملحة للقيام بمسؤولياتهم، تمثل القيادة المسؤولة تكاملاً مثيرًا للاهتمام للمسؤولية التنظيمية. اكتسبت المسؤولية الاجتماعية اهتماما كبيرًا، لكن لم يكن هناك تركيز كبير على تأثيرها على مخرجات الموظفين مثل الحضورية، الالتزام التنظيمي ونيات ترك العمل. الحضورية أو الذهاب إلى العمل أثناء المرض وعدم القدرة على الأداء بكامل الطاقة يؤدي إلى انخفاض الإنتاج وتأثير مالي كبير على المنظمات. تهدف الدراسة الحالية الى معرفة كيفية تأثر حضورية موظفي المطاعم بالقيادة المسؤولة والالتزام التنظيمي. اعتمد التحليل الإحصائي لهذه الدراسة إلى بيانات تم جمعها من عدد 35 مطعم في منطقة القاهرة الكبرى. تم تجميع عدد 440 استبانة، بلغ عدد الاستبيانات الصالحة للتحليل الإحصائي النهائي الى 385 استبانة. أظهرت النتائج أن الحضورية والقيادة المسؤولة ونيات ترك العمل جميعها لها علاقة إيجابية ذات دلالة إحصائية. كما أوضحت النتائج الى وجود علاقة سلبية ذات دلالة إحصائية بين الحضورية والالتزام التنظيمي.
الحضورية؛ القيادة المسؤولة؛ الالتزام التنظيمي.	
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