



Resilience and Organizational Citizenship Behavior (OCB): The Moderating Role of Leadership and Interpersonal Trust

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ABSTRACT

Research shows that resilience exerts a significant impact on organizational citizenship behavior. This linkage may be partly due to prevailing organizational circumstances. This study assessed the moderating effect of leadership and interpersonal trusts in the correlation between resilience and organizational citizenship behavior (OCB). Responses were obtained from 236 healthcare employees in Ghana's public and private hospitals. This study used regression to analyze the predictions. Findings of the study indicated that resilience, interpersonal (employee), and leadership trust positively and significantly predicted OCB. The hierarchical regression indicated that leadership trust moderated the linkage between resilience and organizational citizenship behavior. However, interpersonal trust moderates the linkage between resilience and organizational citizenship behavior. Unequivocally, resilience produces the highest organizational citizenship behavior when leaders trust their subordinates. This study, therefore, pinpoints the significant role of leadership trust in alleviating the impact of resilience on organizational citizenship behavior.

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Introduction

The study of Organizational Citizenship Behavior (OCB) has attracted considerable attention, which is evident from the literature on OCB over the past decade (Amalia et al., 2021; Solikhin et al., 2021). This is because engaging in OCB can have a positive and significant influence on the organization's total performance (Addai et al., 2019). OCB is an ideal behavior that does not form part of an employee's formal responsibilities but supports the efficient operationalization of the organization (Vella & Pai, 2019). Such behaviors are not required as specific job descriptions but based on personal choice (Addai et al., 2019). Organizations cannot survive without employees behaving as good citizens by engaging in positive behaviors. A review of extant studies on OCB has revealed that researchers mainly focus on understanding some of the antecedents of OCB (Alshaabani et al., 2021; Sari & Wahyuni, 2019) to ensure organizational effectiveness (Sadeghi et al. 2016).

Researchers have concentrated on examining positive constructs as a significant factor affecting OCB (Das, 2021; Solikhin et al., 2021). One of such positive constructs which have attracted attention in recent times is resilience. Resilience in the organizational context is an emerging concept that has influenced most

employee attitudes and behavior (Chamisa et al., 2020). However, it has not attracted much attention as it deserves. Resilience is often considered an individuals' emergency management issue, which helps them withstand privation while facing adversity for a healthy life. It also provides the strength to tackle routine and unexpected challenges confronting employees (Paul et al., 2019). Any problem at an individual level linked to the family or place of work poses an emergency or hardship that needs to be dealt with (Mallén, et al., 2019). These problems may be an unaccommodating leader, unpleasant and unsafe work context, and many more. These problems may not only influence the effectiveness of the employee but also change the employee's attitude to the organization, such as engaging in OCB (Das, 2021).

Studies have also examined resilience as a significant predictor of OCB (Paul et al., 2016; Sari & Wahyuni, 2019). While the arguments supporting the linkage between resilience and OCB in European countries seem encouraging, empirical evidence linking resilience and OCB in the Ghanaian setting is scanty (Suratman et al., 2021). Additionally, with the onset of COVID-19, employees' work environment seems unsafe but still requires these employees to get involved in OCB (Das, 2021). Given the lack of studies on the nexus between resilience and OCB, it is imperative to examine these two variables' linkage. Discovering the nexus between resilience and OCB is imperative given the significant impact of OCB on organizational effectiveness (Sadeghi et al., 2016). Additionally, understanding the relationship between resilience and OCB may also shed more light on maintaining employees' motivational levels to engage in extra-role activities even in the face of harsh conditions (Han et al., 2020). Therefore, this study is embarked on to fulfill this gap in extant research.

Moreover, most empirical studies on resilience have concentrated predominantly on a direct approach in discovering the correlation between resilience and OCB (Chamisa et al., 2020; Saad & Elshaer, 2020) and not focused on the numerous contextual factors which can hamper the positive impact of resilience on OCB (Putra, 2019). While minimal studies have demonstrated the relevance of resilience on OCB in the Ghanaian context, there is the need to examine the mechanism which facilitates the direct relationship between resilience and OCB to extend the debate further. This study has taken leadership trust in employees and interpersonal trust as moderating factors to comprehend the linkage between resilience and OCB better.

Based on this, the objectives of this study are two-fold.

1. To assess the influence of employee resilience on OCB.
2. To examine leadership and interpersonal trusts as moderating factors in the relationship between resilience and OCB.

Literature Review

Employee Resilience

Employee resilience is gaining much attention in the current management literature. Resilience is generally explained as “the process of adapting well in the face of adversity, trauma, tragedy, threats or even significant sources of stress” (American Psychological Association, 2014, p.2). The ability to adapt and deal with the challenges is because resilience is a trait, a process, capacity, and an outcome (Vella & Pai, 2019). Resilience has been explained in terms of individual and organizational levels. Organizational resilience describes an organization's ability to brace through unexpected disorders because of its strategic awareness and the operational management connected to internal and external shocks (Kim et al., 2018). On the other hand, individual resilience refers to the “positive psychological capacity to ‘bounce back from adversity, uncertainty, conflict, failure, or even positive change, progress and increased responsibility’” (Luthans, 2002 p. 702). These personal capacities and traits like self-esteem, self-confidence, self-understanding, and the ability to regulate negative behavior and emotions enable individuals to deal with and adjust to difficulties (Das, 2021).

Resilience is, however, characterized by five main qualities; equanimity, existential aloneness, meaningfulness, perseverance, and self-reliance (Putra, 2019). Equanimity is being open and receptive to all

experiences (Amalia et al., 2021). This quality enables the individual to moderately manage and respond to challenges and difficulties because such persons see a balanced perception of life and experiences. Perseverance reflects an individual's readiness to work hard and continue work notwithstanding setbacks and challenging context (Caza, et al., 2020). This dimension of resilience enables an individual to persist despite difficulties or discouragement and result in greater satisfaction (Amalia et al., 2021).

Self-reliance is about the belief in one-self and capabilities (Putra, 2019). This belief in oneself results from knowing and understanding one's capabilities and limitations. Meaningfulness describes how significant an individual perceives their work, and it is made up of the relationship between their sense of belonging, roles, and significant positive work experiences (Vella & Pai, 2019). Employees who benefit from work meaningfulness tend to enjoy greater job satisfaction, are motivated, and have lower absenteeism and turnover intentions (Vella & Pai, 2019). Existential aloneness also reflects the belief that each person's path is unique. Where existential loneliness exists, the individual becomes aware of themselves in solitude and isolation (Chamisa et al., 2020) and thus can work independently. This realization and acceptance by individuals that each person is unique and alone cause them to accept that some incidents can be shared while others are taken and handled alone. These five qualities form employee resilience and would be considered in this study as a single entity.

Organizational Citizenship Behavior

Organizational Citizenship Behavior (OCB) is defined as "individuals' extra-role behaviors that are beneficial to the organization and are discretionary, not directly or explicitly recognized by the formal rewards system" (Paul, et al., 2016, p. 311). Podsakoff et al. (2009) indicated that OCB is considered employees' extra-role behaviors that are optional and not officially recognized by any formal reward system. These positive voluntary behaviors have a significant positive impact on the organization (Hemakumara, 2020; Mi, et al., 2019).

OCB has been categorized into different dimensions. However, the classification by Organ (1988) has received numerous supports from various researchers (Chamisa et al., 2020; Solikhin et al., 2021) as significant determinants of OCB. These include altruism, courtesy, civic virtue, conscientiousness, and sportsmanship. Altruism is a voluntary act that describes a person's willingness to help others without considering the effects this action may have on oneself (Mallén, et al., 2019). These voluntary actions lead to individuals' readiness to help colleagues to address work problems, as well as helping them to catch up with backlogs. Courtesy deals with the gestures of employees to live in harmony and assists others in preventing interpersonal problems from occurring. Conscientiousness also encompasses behaviors that outstrip enforceable work standards.

Sportsmanship includes sacrificing to work extra hours with no rewards for organizational success. On the other hand, civic virtues deal with employees actively taking part in organizational affairs, and sportsmanship involves the tolerance of nuisances and inconvenience at the workplace without complaint (Das, 2021). All these dimensions, considered a single entity in this study, are necessary for enhancing organizational effectiveness.

Organizational Trust

The need for organizational trust is an essential building block of every organization (Fard & Karimi, 2015). Trust is positive anticipation that a person will not act unscrupulously at the expense. Organizational trust is the confidence bestowed on an employee through the company's actions. Trust in the organization helps employees to feel secure in their jobs and, in turn, promotes positive, constructive behaviors among them (Mi et al., 2019). Organizational trust includes confidence not only from the leaders but also from individual employees. This means that employees' trust may come from their leaders and colleagues in the workplace (Fard & Karimi, 2015). Employees who trust in their leaders and their fellow employees enjoy a culture of mutual respect, decency, and psychological safety (Mi et al., 2019).

Leadership trust in employees is more likely to empower employees to make their own decisions (Fard & Karimi, 2015). When leaders trust in their subordinates, they treat them well and, consequently, are comfortable being open with them. Aside from leaders' trust in employees, trust between employees (interpersonal trust) also creates a more positive employee experience (Brown et al., 2015). When employees trust and confide in others rather than combat them, they become more inclined to speak honestly and feel safe and respected, promoting positive, productive behaviors such as OCB (Lay et al., 2020). The prominence of developing and encouraging organizational (leadership and interpersonal) trust to ensure organizational success makes it prudent to delve into how it influences productive employee behaviors such as OCB.

Relationship between Resilience, Organizational Trust and Organizational Citizenship Behaviors

Extant studies have indicated a positive and significant relationship between resilience, organizational trust, and OCB (Alshaabani et al., 2021; Paul, et al., 2016). The possible link between resilience, organizational trust, and OCB can be explained from the perspective of the JD-R model. This model offers a two-way pathway. According to the model, every job includes demands and resources (Schaufeli, 2017). Job demands are the organizational facets of the job that require constant mental and physical effort and are related to psychological and physiological costs (Demerouti et al., 2001). On the other hand, job resources are the organizational and social facets of the job that help reduce job demands, achieve work goals and related psychological costs, and stimulate individual development (Schaufeli, 2017).

Again, individuals with high resilience can bounce back from adversity by building and using their capability endowment to interact with the environment in a way that positively adjusts and maintains functioning before, during, and following any adversity (Alshaabani et al., 2021). These capability endowments, that is, the ability to adjust positively under challenging conditions, put up the helping behavior, ensure organizational loyalty, take the initiative and exhibit sportsmanship, enable them to be open to all experiences (Das, 2021). These employees can use their mental and physical efforts to overcome these adversities and persevere and therefore work hard irrespective of setbacks and challenging contexts (Das, 2021). Trust from leaders and employees acts as a job resource for employees to bounce back in times of adversity, which helps stimulate positive, constructive behavior such as OCB.

Prior studies have found a positive relationship between resilience and OCB (Sadeghi, et al., 2016). These researchers argue that resilience helps promote a positive approach to work. They contend that resilience is a reactive skill that helps an individual face challenging situations and allows a proactive approach to job responsibilities. A study by Paul et al. (2016) revealed a positive and significant relationship between resilience and OCB. Similarly, Suratman et al. (2021) found a positive and significant association between resilience and OCB. Consequently, it is hypothesized in this study that:

H₁. Resilience has a significant positive relationship with OCB

The existence of trust from leaders and their fellow employees significantly and positively affects productive employee behavior (Su, et al., 2020). When leaders do not trust their subordinates, such subordinates tend to perform only official duties assigned to them (Ohemeng et al., 2020). However, suppose these leaders show that they trust their subordinates, by being credible, fair, and respectful. In that case, it motivates the subordinates to be engaged (Obuobisa-Darko & Ameyaw-Domfeh, 2019) and help each other (Kim, et al., 2018), offer personal support (Fischer, et al., 2020), and become conscientious to the goals of the organization (Mallén, et al., 2019). Consequently, trust has been described as a fundamental component in a relationship because it will be difficult to ensure cooperation among employees (Ferrin et al., 2007). Even though much of the existing body of literature has confirmed a positive relationship between leaders trust in their subordinates and OCB (Al-Rwajfeh, 2019; Asthana, 2021), other studies have, however, indicated no relationship between leadership trust and OCB (Hemakumara, 2020; Petrella, 2013). Based on the inconsistencies in findings, it is

prudent to conduct further research on the association between leadership trust in employees and OCB. It is expected that leadership trust will have a positive impact on OCB, and therefore it can be predicted that:

H₂. Leadership trust has a positive relationship with OCB

For employees to mutually coexist in an organization, there is the need to trust each other (Podsakoff, et al., 2009). Employees will exhibit a positive attitude, respect, and positive relationships if interpersonal trust. Trust among employees (interpersonal trust) positively impacts shaping their attitude and interpersonal relationship (Al-Rwajfeh, 2019). When there exists trust among employees, they become willing to help others without considering its effect on themselves (Obuobisa-Darko & Ameyaw Domfeh, 2019; Srivastava & Madan, 2016) and promote OCB (Asencio & Mujkic, 2016). Numerous studies have confirmed a positive relationship between interpersonal trust and OCB among employees (Singh & Srivastava, 2016; Solikhin et al., 2021). Therefore, it is hypothesized that:

H₃. There is a positive relationship between interpersonal trust and OCB

Organizational Trust as Moderator in the nexus between Resilience and OCB

Trust (leadership and interpersonal) is a form of support employees enjoy from their leaders and coworkers. Organizational trust is considered a substantial contributor to employee resilience, which augments extra-role behaviors (Saad, & Elshaer, 2020). Employees are embedded within an organizational context where the structure and support received influence how they would be motivated and how they perform their roles in the organization. As indicated by the Organizational Support Theory, perceived organizational support (POS) meets the social emotional needs and is used by employees to infer the disposal of their organization to reward their efforts (Eisenberger et al., 2001). The feeling that the organization offers care, recognition, and respect for its employees may boost employees' morale, which will cause them to perform extra roles (Zeinabadi & Salehi, 2011). The theory also professes that an employee derived a lot of positive states, including being resilient to reciprocate favorably. This means that the sort of trust that employees receive from the organizations serves as a form of support that strengthens employees' resilience to elicit OCB. If leaders trust their employees, they involve them in decision-making (Larbi, 2014). This gesture by leaders causes their subordinates to be willing to adapt in challenging times, that is, be resilient, which helps them engage in extra-role activities.

Existing literature suggests that organizational trust (interpersonal and leadership trusts) ameliorates the positive relationship between resilience and OCB (Britt, & Sawhney, 2020; Lhalloubi & Ibnchahid, 2020). A study by Asthana (2021) revealed that interpersonal and leadership trust moderated the positive relationship between resilience and OCB. Zeinabadi and Salehi (2011) also indicated that interpersonal and leadership trusts influence the relationship between resilience and extra role behaviors. However, Larbi (2014) conducted a study that assessed organizational trust as a single entity revealed that organizational trust does not moderate the positive relationship between resilience and OCB. Based on the above discussion, it is hypothesized that:

H₄. The relationship between resilience and OCB will be moderated by leadership trust

H₅. Interpersonal trust will moderate the relationship between resilience and OCB

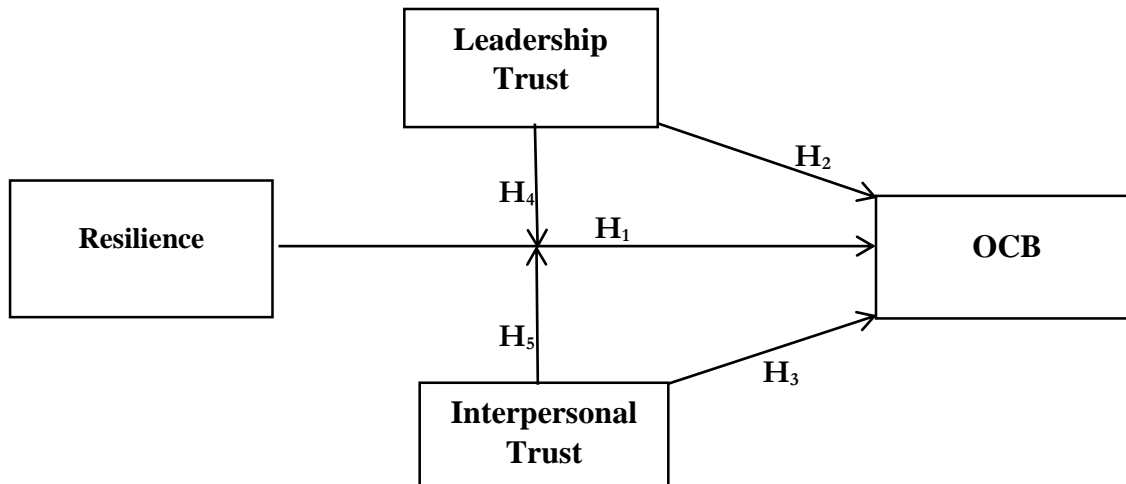


Figure 1: Conceptual model showing the relationship between the predicted variables

Methodology

Research Design

The study adopted the quantitative survey, specifically a cross-sectional survey, to analyze organizational trust as a moderator in the relationship between resilience and OCB. Thus, data was gathered from employees on resilience, organizational trust, and OCB among healthcare professionals within a specific time.

Population and Sample Size

The population comprised healthcare professionals within the Greater Accra region of Ghana. The interest to focus on the health care professionals was very significant in several ways. For instance, in this era of COVID-19, hospitals need to support healthcare professionals to promote extra-role activities. Again, focus on this group was very significant because of healthcare professionals' emergencies, which require the strength to withstand the unexpected challenges that confront them. Therefore, identifying what will motivate them to be resilient during this time exhibit OCB is very significant.

Three hundred (300) respondents were targeted for the study. The number of targeted respondents was based on the sample size calculation proposed by Tabachnick and Fidell's (1996). The formula proposes that for a sample size to represent the total population, $N > 50 + 8(m)$, where m depicts the number of predictions analyzed. Since there are five hypotheses in this study, the sample size expected was more than 90. Based on this, 300 respondents, more than 90, were targeted to respond to the questionnaires.

Convenient sampling was used in distributing the questionnaires to the respondents. Therefore a request was made, and only the healthcare professionals who volunteered to respond to the questionnaires were used. This technique was appropriate because only healthcare professionals who were accessible and willing to participate in the study were selected. This technique is easy and quick in delivering results. The few rules governing the selection process also made the sampling technique preferable.

Measures

Data were gathered using self-administered questionnaires. Questionnaires for this study were developed from published scales. The questionnaires used for measuring the various variables are detailed below.

Resilience

Resilience was measured with the 14-item Resilience Scale (RS-14) developed by Wagnild and Young (2009). Each item of the RS-14 is measured on a 5-point Likert scale which ranges from 1 (strongly disagree) to 5 (strongly agree). The reliability of the scale was reported to be .91 (Wagnild & Young, 2009). The reliability alpha of the scale in the present study was found to be .86. The total scores of the RS-14 ranged from 0 – 70. Sample statements are “I continuously re-evaluate my performance and strive to improve the way I do my work” and “I monitor the market and get an early warning of emerging issues.”

Organizational Trust

Organizational trust was assessed using the Organizational Trust Scale (OTS) (Sitkin & Roth, 1993). The Organizational Trust Scale (OTS) is a 16-item measure of two sub-scales. The OTS's two aspects of organizational trust are leadership trust and interpersonal trust. The leadership trust consists of 10-items, and the interpersonal trust consists of 6-items. The total scale has a reliability of .89. The Cronbach alpha of the leadership trust and the interpersonal trust sub-scales are .86 and .79 (Sitkin & Roth, 1993). The alpha coefficient for the present study was .82 for the leadership trust subscale and .74 for the interpersonal trust subscale. Sample of the leadership sub-scale includes; “I can count on my leaders to help me if I have difficulties with my job,” and interpersonal trust sub-scale is; “The actions and behaviors of my colleagues are not consistent towards me.” Respondents respond to the OTS using a 5-point response format ranging from ‘strongly agree’ (5) to ‘strongly disagree’ (1). Total scores of the leadership trust sub-scale ranged from 10 – 50, while that of interpersonal trust ranged from 6 - 30, with higher scores indicating higher levels of trust

Organizational Citizenship Behavior

To measure OCB, Organizational Citizenship Behavior Checklist (OCB-C) developed by Fox et al. (2012) was used. The 20-item OCB-C scale was designed to measure the five dimensions of OCB (altruism, civic virtue, conscientiousness, courtesy, and sportsmanship) as a single entity with an alpha coefficient of .97 (Fox et al., 2012). The coefficient alpha found in the present study was .86. An item on the OCB-C is “I offer suggestions for improving the work environment.” The OCB-C are rated on a 5-point Likert ranging from 1 (Never) to 5 (Everyday), with a total score ranging from 20 – 100.

Procedure

In collecting the data, approval was sought from the administrators of the various hospitals. A total of two months was used to collect responses from the healthcare professionals in the hospitals. Informed consent was first sought before the respondents completed the questionnaires. All applicable ethical guiding principles were observed. The questionnaires were then administered to the respondents in an envelope through the administrators. These were collected from the administrators within one week. Some respondents agreed that the questionnaires should be sent to them by mail. These respondents completed the questionnaires and mailed them back within three days.

Data Analysis

The predictions were analyzed using Pearson correlation coefficient and hierarchical regression. Pearson correlation was used in establishing relationships among the underlying variables, which allowed conducting the multiple regression. In analyzing the hypotheses, a series of hierarchical regression was conducted. In the first step of the hierarchical regression, age, gender, and work tenure were controlled. These demographic variables were controlled because they are the most significant demographic predictors of organizational behaviors, such as OCB (Das, 2021).

Results and Discussion

Descriptive Statistics

From the distributed 300 questionnaires, two hundred and thirty-six (236) responses were obtained, representing approximately 79% return rate which was adequate. The demographic characteristics of respondents can be found in Table 1.

Table 1: Demographic characteristics of the respondents (n=236)

	Characteristics	Frequency	Percentage
Gender	• Male	74	31.4
	• Female	162	68.6
Hospital Category	• Private	58	24.6
	• Public	178	75.4
Age Range	• At most 25 years	42	17.8
	• 26 – 30 years	57	24.2
	• 31 – 40 years	88	37.3
	• At last 41 years	49	20.8
Work Tenure	• At most 4 years	44	18.6
	• 5 – 10 years	60	25.4
	• 11 – 15 years	74	31.4
	• Above 15 years	58	24.6
Educational Qualification	• Diploma	60	25.4
	• Degree	139	58.9
	• Post Degree	37	15.7

Of the 236 completed questionnaires, female respondents (162) were more than male respondents (74). This is not surprising as the healthcare industry in Ghana has more females than males (Odonkor & Frimpong, 2020). There were 178 employees from public hospitals and 58 employees from private hospitals. The average age range of the respondents was between 31 – 40 years. The majority of the respondents (73.3%) had worked as health professionals between 11 – 15 years. The educational qualifications of respondents included diplomas (60), degrees (139), and post-degree (37).

Table 2: Descriptive statistics and inter-correlations among the underlying variables

Variable	Mean	SD	1	2	3	4	5	6	7
1. Gender	-	-	-						
2. Age	-	-	-.07	-					
3. Tenure	-	-	-.09	.09	-				
4. Resilience	32.26	6.40	.10	-.13*	-.13*	-			
5. Leadership Trust	33.50	6.58	.13*	-.09	-.27**	.16**	-		
6. Interpersonal trust	19.39	4.18	.14*	-.06	-.24**	.19**	.68**	-	
7. OCB	74.94	12.80	.08	-.08	-.41**	.45**	.50**	.49**	-

*p <.05, **p <.01

The descriptive statistics and inter-correlations among the underlying variables are delineated in Table 2. As presented in the table, the relationship between resilience, leadership trust, interpersonal trust and OCB are all positive and significant. Resilience has shown to be significantly correlated with leadership trust ($r = .16, p < .01$), interpersonal trust ($r = .19, p < .01$), and OCB ($r = .45, p < .01$). Leadership trust also demonstrated to be significantly correlated with interpersonal trust ($r = .68, p < .01$) and OCB ($r = .50, p < .01$). Moreover, the correlation between interpersonal trust and OCB is also significantly positive ($r = .49, p < .01$).

Hypotheses Testing

Hypotheses 1, 2, and 3 portended a significant influence on OCB of resilience, leadership trust, and interpersonal trust. Multiple regression was used to test these predictions by controlling demographic characteristics such as gender, age, and work tenure (Table 3).

Table 3: Multiple regressions showing resilience and organizational trust predicting OCB

		β	t	R ²	ΔR^2	F	Sig.
Step 1	Gender	1.654	.686	.175	.175	16.387	.493
	Age	.764	-.773				.440
	Tenure	.733	-6.728				.000
							.000
Step 2	Gender	1.344	-.692	.472	.296	34.184	.490
	Age	.620	.298				.766
	Tenure	.614	-5.115				.000
	Resilience	.099	6.800				.000
	Leaders trust	.130	3.714				.000
	Interpersonal trust	.193	2.902				.004
							.000

From Step 1 of the results illustrated in Table 3, the demographic characteristics (gender, age and tenure) significantly explicated 17.5% ($\Delta R^2 = .175, p < .01$) of the variance in OCB. When resilience, leadership trust, and employee (interpersonal) trust were added in Step 2, they accounted for 29.6% ($\Delta R^2 = .296, p < .01$) of the variance in explaining OCB. Considering the individual predictors, resilience predicted positively in explaining OCB ($\beta = .099, p < .01$). This supported the first prediction, which stated that “resilience has a significant positive relationship with OCB.”

Leadership trust also predicted significantly in foretelling OCB ($\beta = .130, p < .01$). This also supported the second prediction, which stated that “leadership trust has a positive relationship with OCB.” Moreover, employee (interpersonal) trust accounted for a significant variance in explaining OCB ($\beta = .193, p < .01$). This also supported the third prediction, which projected that “there is a positive relationship between interpersonal trust and OCB.”

Hypotheses 4 and 5 also presaged that “the relationship between resilience and OCB will be moderated by leadership trust” and “interpersonal trust will moderate the relationship between resilience and OCB,” respectively. The first step analyzed these predictions using the hierarchical regression model (Baron & Kenney, 1986) for testing moderating role by controlling age, gender, and work tenure. Resilience and organizational (leadership and employee) trust were entered in the second and third steps, respectively (Table 4 and 5). The interaction term between resilience and organizational (leadership and employee) trust was entered in the fourth step. Results are demonstrated in Tables 4 and 5.

Table 4: Hierarchical Regression analysis showing leadership trust as a moderator in the relationship between resilience and OCB

	β	t	R ²	ΔR^2	F	p
Step 1						
Gender	.041	.686				.493
Age	-.046	-.773				.440
Tenure	-.405	-6.728				.000
			.175	.175	16.387	.000
Step 2						
Resilience	.398	7.227	.327	.152	28.064	.000
Step 3						
Leadership Trust	.375	7.281	.441	.114	38.107	.000
Step 4						
Resilience*	1.560	4.237	.493	.052	37.089	.000
Leadership Trust						

Examining the results demonstrated in Table 4, the second and third steps indicate that resilience and leadership trust respectively predicted OCB ($\beta = .398, p < .01$) ($\beta = .375, p < .01$). From the fourth step, the interaction term of resilience and leadership trust significantly predicted OCB ($\beta = 1.560, p < .01$) by contributing 5.2% of the variance in OCB ($\Delta R^2 = .052$). This indicates that leadership trust moderated the relationship between resilience and OCB, supporting the third prediction.

Table 5: Hierarchical Regression analysis showing interpersonal trust as a moderator in the nexus between resilience and OCB

	β	t	R ²	ΔR^2	F	p
Step 1						
Gender	.041	.686				.493
Age	-.046	-.773				.440
Tenure	-.405	-6.728				.000
			.175	.175	16.387	.000
Step 2						
Resilience	.398	7.227	.327	.152	28.064	.000
Step 3						
Interpersonal trust	.355	6.837	.441	.114	36.245	.000
Step 4						
Resilience*	.570	1.551	.447	.006	30.789	.122
Interpersonal trust						

The second and third steps of the results in Table 5 illustrate that resilience ($\beta = .398, p < .01$) and employee (interpersonal) trust ($\beta = .355, p < .01$) respectively predicted OCB. The fourth step of the model shows that the interaction between resilience and interpersonal trust did not account for significant variance in OCB ($\beta = .570, p = .122$). The interaction term accounted for an insignificant .6% variance in explaining OCB ($\Delta R^2 = .006$). This means that interpersonal trust moderated the linkage between resilience and OCB, thus supporting the fifth prediction.

Discussion

The study aimed to achieve two main objectives; to examine the influence of employee resilience and organizational trust on OCB and assess if organizational trust (employee and leadership) moderate the linkage between resilience and OCB.

Based on the first objective, three predictions were formulated. The first prediction was that resilience has a significant positive relationship with OCB. This prediction was supported, indicating that resilience positively accounts for OCB. This means that resilience is a vital employee trait that nurtures OCB. This finding corroborates the findings of extant studies (Paul et al., 2016; Suratman et al., 2021). Few propositions can account for the significant relationship between resilience and OCB. First, resilient employees perceive their lives as significant to them and consider having a purpose, which gives them a sense of ownership and responsibility in what they do. They feel like citizens of the organization since their trait makes them own their work. Therefore, such employees perceive OCBs as part of their responsibility and not an obligation. Moreover, resilient employees can build and use their endowed competence to interact with the environment in a way that adjusts and maintains prior functioning to, during, and after difficulty (Alshaabani et al., 2021). These capability endowments are the ability to adjust positively under challenging conditions, ensure organizational loyalty, and exhibit OCB (Caza, et al., 2020).

The second prediction was that leadership trust has a positive relationship with OCB. This result showed that leadership trust in employees encourages employees' OCB. The finding, thus, supported the prediction. This means that when employees perceive that their leaders trust them, it encourages them to engage in OCB. The result validates the findings of other studies, which found that leadership trust in employees positively correlates with OCB ((Al-Rwajfeh, 2019; Asthana, 2021). This finding, however, contradicts the finding by Petrella (2013), which revealed no significant relationship between leadership trust and OCB. The contradiction in the finding can be due to what data was collected. In the study by Petrella (2013), leaders responded to how they trust the employees, which is different from employees' perception of how leaders trust them as utilized in this study. One reason for the significant association between leadership trust and OCB is that leadership trust for employees is more likely to empower employees to make their own decisions (Fard & Karimi, 2015). Leaders who trust in their employees will treat them well. Consequently, it will boost their confidence and courage to make significant decisions either about their job responsibilities or different roles and encourage employees to engage in OCB.

The third prediction from the first objective was a positive association between interpersonal trust and OCB. The finding supported this hypothesis, indicating that interpersonal trust significantly accounted for OCB. Thus, interpersonal trust is an imperative attribute in fostering OCB among subordinates. This finding supports the results of other researchers, which demonstrated that interpersonal trust positively relates to OCB (Asencio & Mujkic, 2016; Srivastava & Madan, 2016). This finding can be because trust creates a more positive employee experience (Brown et al., 2015). When employees trust each other, they believe that they will be there for each other and could be relied upon. Therefore, even if they go wrong in trying to engage in positive, productive behavior, such as OCB, they will be there to defend each other (Lay et al., 2020).

The results demonstrated that leadership trust in employees moderated the nexus between resilience and OCB with the accompanying objective. However, the link between resilience and OCB was not moderated by the interpersonal trust. These results have established that employees need the trust of their leaders to moderate the linkage existing between resilience and OCB, but not the trust of their fellow employees. Thus, for resilient employees to be involved in OCB depends mainly on leadership trust. This moderating effect of leadership trust in the resilience and OCB relationship is consistent with previous studies (Britt, & Sawhney, 2020; Zeinabadi & Salehi, 2011). Employees who enjoy a high level of trust from their leaders see themselves as having the capacity to cope in times of adversity. This perception essentially reflects in employees when it comes to exhibiting extra-role behaviors.

The insignificant moderating effect of employee (interpersonal) trust in the correlation between resilience and OCB agrees with Asthana's (2021) findings. The finding, however, contradicts the findings of other studies (Larbi, 2014). The insignificant moderating role of employee (interpersonal) trust is because employees are not employed by their colleagues, so they are not evaluated by their colleagues. Their leaders will

judge their behavior as good or bad and not their colleagues. They do not need the approval of other employees to engage in certain activities which are not part of their job descriptions but lead to organizational growth.

Limitation and Future Direction

This present study, like other studies, is not devoid of weaknesses. Despite the critical revelations made by this study, certain limitations need mentioning. The study is limited regarding the extent to which the findings may be generalized. With a sample of 236 respondents, the study findings cannot be generalized across the entire health professionals in Ghana since it is relatively small. It would have been better if this could be done so that policy and intervention could benefit the larger population of health professionals across Ghana's hospitals. However, the limited sample was due to COVID-19 pandemic, as well as the unwillingness of some health professionals to respond to the questionnaires distributed. Secondly, the causality of the findings cannot be established since the study was a correlational survey that does not allow inferring causality. Although the study found significant correlations between study variables, the direction of causality cannot be confidently established. The use of a longitudinal survey would have helped in explaining the causal relationship between the underlying variables.

Moreover, data was gathered using self-report measures, which produced a desirable response. It is possible that the self-report of perceived resilience and OCB may confound the current results. Suggestions are made for future researchers to expand this work by fulfilling the limitations and assessing the various components of employee resilience and OCB.

Theoretical and Practical Implications

The current research offers significant advancement for the literature on resilience and organizational citizenship behavior. Resilience is considered a positive psychological construct that leads to OCB. The findings extend the literature by signifying that leaders trusting their employees can increase the relationship between resilience and OCB. Though employee trust positively influences OCB, it does not influence resilience to predict OCB. Therefore, leaders must trust their subordinates to increase the extent to which resilience can increase OCB. This study is significant as it was conducted in the developing country context where there is a significant special need for resilient employees (Suratman et al., 2021). It also extends the literature that promotes the effect of culture on the advancement of positive personal characteristics and other positive constructs interspersed in the Ghanaian context.

The positive correlations between the underlying variables add to the growing support for the linkage between resilience and extra-role behaviors and offer direction to encourage and sustain employees' behaviors specific to the organization. Measures of resilience need to be incorporated into selection and recruitment processes to get resilient employees on board. Due to the nature of the work within the health sector, burnout among health professionals is high. Issues of occupational accident and safety also add up to the turnover rate of health professionals. Resilience helps employees cope and better face challenges associated with healthcare delivery (Paul et al., 2016). Thus, knowledge about what leaders can do to ensure resilient employees is very significant.

Conclusion

The study set out to examine the influence of employee resilience on OCB and examine organizational trust (employee and leadership) as a moderating variable that influences the relationship between resilience and OCB. Using a qualitative approach, respondents were sorted from public and private hospitals. Data gathered was analyzed using Pearson correlation coefficient and hierarchical regression. The study concluded that a positive correlation exists between resilience and OCB. Also, leadership trust moderated the linkage between

resilience and OCB. However, employee (interpersonal) trust failed to moderate the positive correlation between resilience and OCB. This study pinpoints the significance of employee resilience and emphasizes the role of organizational trust in moderating the association between resilience and OCB. Though few studies have been conducted on employees' resilience, this study provides better insights into the importance of leadership trust in the resilience of healthcare professionals in predicting OCB.

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