Introduction

The Helping and Voice Behaviours Scale (Van Dyne & LePine, 1998) is meant to evaluate the extra-role organizational citizenship behaviour in individuals. Although it can be used in any organizational context, this study focuses in a sample of Portuguese Hospital Healthcare workers.

• This study has as its OBJECTIVE conducting a Confirmatory Factor Analysis for the Helping and Voice Behaviours Scale (Van Dyne & LePine, 1998) in a sample of Portuguese Healthcare workers, including reliability..

• The items are presented in a seven point Likert type scale, where subjects respond indicating their level of agreement with each statement. The answers can vary from 1 - I totally disagree and 7 – I totally agree.

• This scale allows researchers to avoid the discussion between what employees could consider in-role or extra-role. Helping Behavior is defined as the proactive behavior that emphasizes small acts of consideration towards other co-workers, and Voice Behaviors are the proactive behaviors that challenge the status quo in order to improve Organizational Performance. Both are seen as extra role behaviors that the employees may undertake at their own time (Fields, 2002).

• This study INTENDS to establish the best fit model for the referred population in an effort to adapt and validate the referred Scales to the Population in question.

Method

Instrument

The instrument had been previously adapted to the Portuguese population by Martins (2008), involving:

• Translation of the instrument to Portuguese, followed by a backtranslation, done by an Englishman with domain of the Portuguese culture.

• Pilot study with a small group of workers of an industrial company plus talked reflection.

Sample

The present study is thus based on a 140 sample of individuals, pertaining to a Hospital of small dimension in Portugal.

Data was collected by the researcher on the premises of the Hospital, passing the questionnaires to all the workers listed in the hospital’s sheet that were during June of 2011 present in the one Hospital that enrolled the study.

PROCEDURES

The present study is thus based on a 140 sample of individuals, pertaining to a Hospital of small dimension in Portugal. Alternately, a sealed box was available at the facilities for depositing answered surveys.

Data Analysis

A confirmatory factor analysis (CFA) was conducted with AMOS 19 software using Maximum Likelihood (ML) estimation. For inputting the data we used asymptotic covariance and psychometric correlation matrices. It was decided in the present sample to test the original model of the authors of the scale and the factorial solution that emerged from the study by Martins (2008).

This scale is more parsimonious than most (13 items) and had reported coefficient alpha values by other researchers of .85-.90 for helping behaviors and .82-.96 for voice behaviors (Fields, 2002).

Results

As can be seen in Figure 1 – representing Proença and Martins (2011) factor structure – items present satisfactory factor loadings that vary between .73 and .89, thus indicating the model’s convergent validity (Kline, 2005).

• The outcomes of the analyses revealed that the goodness of fit indices values obtained for the other models were lower than the values obtained for the Martins & Proença (2011) model, bearing statistically significant differences among the Chi-Square test statistic, and a decrement in the CFI value larger than .01 (Cheung & Rensvold (2002) for this model versus the other two models.

Figure 1 - Factor structure.

Reliability

• Internal consistency was estimated using Cronbach’s alpha. The two factors that we found showed a good internal consistency, with alpha values above 0.70 (Nunnally, 1978): α = .95 for factor 1 (Helping Behaviours, 9 items), α = .83 for factor 2 (Voice Behaviours, 3 items).

Conclusions

• These results validate the instrument’s psychometric properties in the population of Portuguese Hospital Workers.

• However, results can be improved and the factor structure does need to be tested in another similar sample, preferably larger.

• Authors also suggest that results might benefit from the usage of other softwares different from AMOS, where different tools are available to correct disturbances in the normality of the data, which might be affecting goodness of fit results.

• The present work innovates in the sense that it studies the whole of workers in a hospital without making job distinctions, as it is done in the greater body of literature. This uncommon approach intends to be a preliminary study towards a better comprehension of the globality of healthcare workers, stressing their common work identity, focusing on the systemic side of the Hospital body of workers and their common conceptualization of psychometric constructs, instead of the more common job/sector approach.