



## Role of Meritocracy in Strengthening Organizational Commitment among Medical Personnel at Brebes District Hospital

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**Abstract.** Organizational commitment is essential for maintaining hospital performance, service quality, and healthcare continuity. Preliminary data from Brebes Regional General Hospital shows that 35% of medical doctors face issues with low organizational commitment, which may negatively impact the institution's effectiveness. This study examines how meritocracy strengthens the effects of transformational leadership and work motivation on medical personnel's organizational commitment. A quantitative approach with causal research design was used to analyze the relationships among these variables. The sample included 72 doctors, selected through purposive sampling. Data were collected via structured questionnaires and analyzed using Moderated Regression Analysis (MRA) to assess both direct and moderating effects. The findings show that transformational leadership, work motivation, and meritocracy together significantly influence organizational commitment. Transformational leadership and work motivation each have a positive impact on organizational commitment. Additionally, meritocracy serves as a moderating factor, enhancing the connection between leadership and commitment, as well as work motivation and commitment. These results suggest that meritocratic systems based on competence, performance, and achievement improve leadership effectiveness and motivation, fostering greater commitment among medical staff. The study suggests that hospital management should implement meritocratic principles consistently in leadership and human resource practices, alongside developing transformational leadership and motivation strategies, to maintain high levels of organizational commitment among medical personnel.

**Keywords:** Hospital Management; Meritocracy; Organizational Commitment; Transformational Leadership; Work Motivation.

### 1. INTRODUCTION

Hospitals are health care facilities that provide comprehensive promotive, preventive, curative, rehabilitative, and palliative services, as well as having educational and research functions in the field of health (Government Regulation No. 28 of 2024 concerning the implementing regulations of Law No. 17 of 2023 concerning Health). In the context of the transformation of the national health system, the Indonesian Ministry of Health emphasizes the strengthening of the national referral network for priority diseases. Brebes Regional General Hospital has been designated as a Class B General Hospital in accordance with the Decree of the Indonesian Minister of Health number HK.03.05/I/2231/12 dated September 10, 2012. Brebes Regional General Hospital serves as a referral hospital for stroke, cancer, cardiovascular diseases, urology and nephrology, diabetes mellitus, mental health, maternal and child health, respiratory and tuberculosis, gastroenterology and hepatology, and emerging infectious diseases. These changes require solid collaboration between leadership and medical staff to enhance performance and commitment to organizational goals.

Organizational commitment is one of the determining factors for a hospital's success in achieving optimal performance (Fantahun et al., 2023). Individuals with high commitment

show loyalty and dedication in supporting the achievement of organizational goals (Shaikh et al., 2024; Kromah et al., 2024). Organizational commitment consists of three main components: affective, continuance, and normative (Meyer & Allen, 1997). This commitment can be strengthened through transformational leadership that unifies the vision of organizational members (Peng, Liao, & Sun, 2020) and work motivation that drives the achievement of goals (Moynihan & Pandey, 2019). Public organizations such as hospitals need a fair and performance-based reward system. In this context, meritocracy plays an important role because it upholds the principle of fairness in determining compensation, promotions, and career development opportunities (Adams et al., 2021).

Meritocracy refers to the implementation of a system in which promotions, rewards, and career development are based on an individual's achievements, competencies, and actual contributions to the organization, rather than solely on proximity, seniority, or favoritism. A recent field study in the public health sector in Sierra Leone shows that the implementation of a performance-based promotion system accompanied by incentives and transparent communication can increase the productivity of public health workers by up to 22% and strengthen their work motivation (Deserranno et al., 2025). Meritocracy assesses performance based on objective achievements (Maulidan, et al., 2020), influences the job satisfaction and loyalty of medical personnel (Hu et al., 2020), and is related to distributive, procedural, and interactional justice (Young, 1959; Li et al., 2023). Conversely, injustice in the merit system hinders the formation of organizational commitment (Oliveira, 2023).

Preliminary survey results at Brebes Regional General Hospital indicate that the implementation of meritocracy is still weak. As many as 70% of doctors reported problems with distributive justice, 60% with procedural justice, and 70% with interactional justice. In addition, 30% of doctors faced problems with sustained commitment, particularly related to transparency in promotion and performance-based rewards. This indicates the need for a strong meritocracy system to strengthen the relationship between transformational leadership, work motivation, and commitment to the organization.

Transformational leadership plays an important role in inspiring work enthusiasm and fostering commitment through ideal influence, inspirational motivation, intellectual stimulation, and individual attention (Bass & Avolio, 1994; Nurjanah et al., 2020). Previous studies have shown a positive relationship between transformational leadership and organizational commitment (Jiatong et al., 2022; Welty et al., 2019; Eliyana, & Muzakki, 2019), but different results have also been found (Hussain & Khayat, 2021). Similarly, work motivation has been shown to encourage organizational commitment (Çivit & Göncü-Köse,

2024; Park & Lee, 2023; Conceição, 2023), but it can weaken when organizational support is low (Apridar & Adamy, 2019).

Based on this, this study aims to analyze the role of meritocracy in strengthening the organizational commitment of medical personnel at Brebes Regional General Hospital, considering the influence of transformational leadership and work motivation. This study is expected to provide empirical contributions to the development of a fair, transparent, and performance-based meritocracy system as a foundation for increasing the commitment of medical personnel to the quality of hospital services.

## **2. RESEARCH METHODOLOGY**

This study uses a quantitative approach with a causality design to analyze the influence of transformational leadership and work motivation on organizational commitment, with meritocracy as a moderating variable. The study was conducted at Brebes Regional General Hospital, Central Java, in January–February 2025. The research respondents were 72 doctors selected through purposive sampling based on the criteria of a minimum of one year of service and direct involvement in hospital services.

Primary data were obtained through a closed-ended questionnaire using a four-point Likert scale developed from the theories of Bass and Avolio (1994), Herzberg (1959), Meyer and Allen (1997), and Young (1959). Before use, the instrument was tested for validity and reliability with criteria of  $r > 0.361$  and Cronbach's Alpha  $> 0.60$  to ensure measurement accuracy and consistency.

Data analysis was performed using the Statistical Package for the Social Sciences (SPSS) in two stages. The first stage was descriptive analysis to describe the characteristics of the respondents and their perceptions of the variables. The second stage used Moderated Regression Analysis (MRA) to test the role of meritocracy in strengthening the influence of transformational leadership and work motivation on organizational commitment, with a significance level of 5%.

## **3. RESULTS AND DISCUSSION**

### **Results**

The characteristics of the respondents in this study were doctors at Brebes Regional General Hospital with the criteria of specialist doctors, general practitioners, and dentists, in addition to directors and structural staff, as well as internship doctors. The results of the questionnaire distribution according to the criteria obtained 72 respondents who became

participants. The following are the characteristics of the respondents in this study.

**Table 1** Respondent Characteristics Distribution.

No.	Demographic	Category	Frequency	Percentage
1	Age	≤ 25 - 30 years	14	19.4
		31 - 35 years	17	23.6
		36 - 40 years old	15	20.8
		> 40 years old	26	36.1
		<b>Total</b>	<b>72</b>	<b>100</b>
2	Gender	Male	43	59.7
		Female	29	40.3
		<b>Total</b>	<b>72</b>	<b>100</b>
3	Education	Bachelor of Medicine	27	37.5
		Specialist	43	59.7
		Master	2	2.8
		<b>Total</b>	<b>72</b>	<b>100</b>
4	Years of Service	1 - 5 years	38	52.8
		6 - 10 years	10	13.9
		11 - 15 years	6	8.3
		> 15 years	18	25.0
		<b>Total</b>	<b>72</b>	<b>100</b>

The validity test was conducted by distributing questionnaires to 30 doctor respondents working at Brebes Regional General Hospital who met the participation criteria. The validity test used product moment correlation with the help of the SPSS program. Items were declared valid if they had a calculated  $r >$  table  $r$  (0.361) with a 5% probability level. The following are the validity test results for each variable using SPSS 25 software:

**Table 2** Validity Test Results.

Variable	Calculated R	Table R	Description
Meritocracy	.848** – .677**	0.361	Valid
Transformational Leadership	.821** – .586**	0.361	Valid
Work Motivation	.823** – .412**	0.361	Valid
Organizational Commitment	.802** – .585**	0.361	Valid

Based on the validity test results presented in the table, all research variables have a calculated  $r$  value above the table  $r$ , ranging from 0.586 to 0.848 with a significance level of  $p < 0.01$ . In detail, the Meritocracy variable ranges from 0.848 to 0.677, Transformational Leadership has a calculated  $r$  value between 0.821 and 0.586, Work Motivation between 0.823 and 0.412, and Organizational Commitment between 0.802 and 0.585. Since all calculated  $r$  values are greater than the table  $r$  (0.361), all items in these variables are declared valid. Thus, all statements in the research instrument are suitable for use in the next stage of analysis.

**Table 3** Reliability Test Results.

Variable	Cronbach's Alpha Value	Critical Value	Description
Meritocracy	0.857	0.60	Reliable
Transformational Leadership	0.868	0.6	Reliable
Work Motivation	0.79	0.60	Reliable
Organizational Commitment	0.872	0.6	Reliable

The table above shows the results of the reliability analysis for the variables in this study, which were measured using Cronbach's Alpha values. All variables show Cronbach's Alpha values higher than the critical value of 0.60, with Meritocracy at 0.857, and Transformational Leadership having the highest value at 0.868, followed by Organizational Commitment at 0.872 and Work Motivation at 0.790. All variables were declared reliable, meaning that the measurement instruments used in this study were trustworthy and consistent in measuring the intended aspects. These results support the validity of the study and show that the data obtained from the respondents was reliable.

### ***Descriptive Analysis***

Descriptive statistics were used to describe the characteristics of the respondents and research variables using the Three Box Method to obtain a descriptive overview of the respondents in relation to the variables studied.

**Table 4** *Three Box Method* Average Matrix.

No	Variable	Category			Behavior
		Low	Moderate	High	
1	Meritocracy		✓		Fair
2	Transformational Leadership			✓	Caring
3	Work Motivation			✓	Motivated
4	Organizational Commitment			✓	Commitment

Based on the results of the categorization analysis of each research variable, it was found that most respondents scored in the high category. Meritocracy was in the moderate category, reflecting that the application of fair principles in rewards and performance appraisals was quite good, although there was still room for improvement. The Transformational Leadership variable was in the high category, which describes caring behavior towards subordinates and the work environment. The Work Motivation variable was also in the high category, indicating that respondents had a strong drive to achieve and were motivated in carrying out their duties. Meanwhile, the Organizational Commitment variable is in the high category, indicating a strong sense of commitment and loyalty to the organization. Overall, these results indicate that respondents have a positive tendency toward aspects of leadership, motivation, meritocracy, and commitment in the work environment.

### ***Data Analysis***

Classical assumption tests were conducted to ensure the validity of the regression model, which included tests of normality, multicollinearity, heteroscedasticity, and significance (Ghozali, 2016). The results of the normality test using the Kolmogorov-Smirnov method showed an Asymptotic Significance (2-tailed) value of 0.200, which is greater than 0.05. This indicates that the residual data is normally distributed. In the multicollinearity test, all independent variables had tolerance values greater than 0.10 and Variance Inflation Factor (VIF) values less than 10, so it can be concluded that there was no multicollinearity. Furthermore, the heteroscedasticity test shows a significance value of 0.071, which is greater than 0.05, indicating no heteroscedasticity in the regression model.

The significance test used the F test and was followed by the t test. Based on the F test results, a calculated F value of 125.020 was obtained with a significance value of less than 0.001. This value is greater than the F table value of 2.35, so it can be concluded that the regression model is simultaneously significant. The F test results show that the regression model is simultaneously significant, meaning that transformational leadership, work motivation, and meritocracy together influence organizational commitment. The t test was conducted to determine the partial influence of each independent variable on the dependent variable.

**Table 5** Regression and Moderation Test Results.

<b>Variable</b>	<b>t-count</b>	<b>Sig.</b>	<b>Description</b>
Meritocracy	8.401	< 0.001	Significant
Transformational Leadership	3,895	< 0.001	Significant
Work Motivation	3.238	0.002	Significant
Meritocracy x Transformational Leadership	2.119	0.038	Significant moderation
Meritocracy x Work Motivation	2.873	0.005	Significant moderation

The test results show that meritocracy has a significant effect on organizational commitment with a *t-value* of 8.401 and significance < 0.001. These results indicate that meritocracy plays an important role in increasing the organizational commitment of doctors at Brebes Regional General Hospital. Meanwhile, transformational leadership has a *t-value* of 3.895 ( $p < 0.001$ ), indicating a significant effect on organizational commitment. This shows that transformational leadership has a significant effect on the organizational commitment of doctors at Brebes Regional General Hospital. This means that the higher the transformational leadership, the higher the organizational commitment. Furthermore, work motivation obtained a *t-value* of 3.238 with a significance value of 0.002 ( $< 0.05$ ), indicating a significant positive relationship with organizational commitment. The higher the work motivation, the higher the organizational commitment of doctors. Additionally, the moderation test results show that meritocracy moderates the relationship between transformational leadership and organizational commitment with a *t-value* of 2.119 and a significance value of 0.038 ( $< 0.05$ ). These findings indicate that the implementation of fair and performance-based meritocracy strengthens the relationship between transformational leadership and organizational commitment. Similarly, meritocracy strengthens the influence of work motivation on the commitment of doctors at Brebes Regional General Hospital, indicating that a merit-based reward system can increase loyalty and organizational attachment. Similarly, the interaction between work motivation and meritocracy has a *t-value* of 2.873 with a significance of 0.005 ( $< 0.05$ ), which means that meritocracy also strengthens the influence of work motivation on the organizational commitment of doctors at Brebes Regional General Hospital.

## Discussion

### ***The Role of Meritocracy in the Relationship between Transformational Leadership and Work Motivation on Organizational Commitment***

The results show that transformational leadership and work motivation simultaneously influence organizational commitment with meritocracy as a moderating variable among doctors at Brebes Regional General Hospital. Transformational leadership is categorized as high with "caring" behavior, indicating the leadership's attention to the needs and development of subordinates, in accordance with Bass & Avolio's (1994) theory. Work motivation was also categorized as high with "motivated" behavior, in line with Herzberg's (1959) theory that motivation drives individuals to achieve work goals. Meanwhile, meritocracy was categorized as moderate with "fair" behavior, indicating a perception of fairness but still needing improvement, as per Young's (1959) theory that a meritocracy system assesses individuals based on their achievements and efforts. Organizational commitment is in the high category, indicating doctors' attachment to the organization, in line with Meyer & Allen's (1997) theory, which emphasizes loyalty and concern for the organization's progress.

This study reinforces the findings of Peng et al. (2020) that transformational leadership unifies the vision between leaders and members, as well as Moynihan & Pandey (2019), which shows that strong work motivation increases commitment to the organization. Additionally, Adams et al. (2021) assert that fair and merit-based systems increase member attachment, in line with the findings of Shaikh et al. (2024) and Kromah et al. (2024) that individuals with high commitment tend to be loyal and actively contribute to organizational progress. Thus, increasing doctors' organizational commitment requires synergy between inspirational leadership, strong work motivation, and the implementation of a fair meritocracy system to create a productive, fair, and sustainable work environment.

### ***The influence of transformational leadership on organizational commitment***

The results of the study indicate that transformational leadership has a significant effect on the organizational commitment of doctors at Brebes Regional General Hospital. Inspirational and visionary leadership has been proven to increase doctors' attachment to the organization. Based on the Three-box Method analysis ( ), the transformational leadership variable is in the high category, indicating a positive perception of leadership style in the hospital environment. The highest dimension is *Individualized Consideration*, which shows the leadership's attention to employee needs and development, while the *Inspirational Motivation* dimension received the lowest score, although it remained in the high category. This indicates the need to improve the leadership's ability to set high standards and provide

stronger motivation to the medical team to create a productive and patient-satisfaction-oriented work environment.

These findings are in line with Bass & Avolio's (1994) theory that transformational leadership can change members' behavior towards a more motivated and enthusiastic work pattern. Robbins & Judge (2017) also emphasize that inspirational leadership encourages team members to prioritize organizational interests over personal interests. Furthermore, the results of this study support the findings of Jiatong et al. (2022), Welty Peachey et al. (2019), and Eliyana et al. (2019), which state that transformational leadership plays an important role in shaping organizational commitment. Therefore, enhancing the aspect of *Inspirational Motivation* is key to strengthening doctors' commitment to the organization, as leadership that can inspire will encourage loyalty, innovation, and better quality of healthcare services in hospitals.

#### ***The influence of work motivation on organizational commitment***

Statistical test results show that work motivation has a significant effect on the organizational commitment of doctors at Brebes Regional General Hospital. High work motivation encourages doctors to feel attached to the organization, because they feel valued and recognized for their contributions. The Three-box Method analysis reveals that doctors' work motivation is relatively high, especially in terms of intrinsic factors, as demonstrated by a strong desire to provide quality service as a form of professional responsibility. However, motivation derived from the desire for praise and promotion is relatively low, so more attention is needed to maintain a balance between intrinsic and extrinsic factors to maintain organizational commitment.

These results are in line with the motivation theories of Herzberg (1959), Robbins & Judge (2017), and Meyer & Allen (1997), which emphasize that work motivation is the main driver in building commitment to the organization. Previous studies such as Park & Lee (2023), Erdurmazlı (2019), and Conceição (2023) also support the view that work motivation plays an important role in shaping individuals' loyalty and consistency towards organizational goals. Therefore, to strengthen doctors' organizational commitment, Brebes Regional General Hospital needs to improve aspects of recognition, rewards, and career development opportunities that can strengthen overall work motivation and create a positive and productive work culture.

#### ***The influence of meritocracy on organizational commitment***

The results of the study indicate that meritocracy has a significant effect on the organizational commitment of doctors at Brebes Regional General Hospital. The

implementation of a fair meritocracy system, where rewards and promotions are given based on achievements and performance, can increase doctors' loyalty to the organization. The Three-box Method analysis shows that the level of meritocracy is in the moderate category, with the highest dimension in distributive justice, reflecting a positive perception of performance-based promotions. However, interactional justice is still low, indicating the need for improvement in how management treats high-performing doctors. Improvements in interpersonal recognition and rewards can strengthen perceptions of justice and ultimately increase doctors' organizational commitment.

These findings are in line with Young's (1959) meritocracy theory and McNamee & Miller's (2009) view, which emphasizes the importance of fairness and competency-based assessment in increasing work motivation and commitment. In this context, when doctors feel recognized based on their abilities and achievements, they are more enthusiastic, professional, and committed to the organization's goals. Previous research by Maulidan et al. (2020), Castilla & Benard (2020), and Hu et al. (2020) also supports that an objective meritocracy system increases the satisfaction, motivation, and loyalty of organizational members. Therefore, Brebes Regional General Hospital needs to strengthen the comprehensive implementation of meritocracy to create a fair, competitive, and performance-oriented work environment to achieve organizational goals.

### ***The role of meritocracy strengthens the influence of transformational leadership on organizational commitment***

The results of the study show that meritocracy positively moderates the relationship between transformational leadership and the organizational commitment of Brebes Regional General Hospital doctors. This means that the implementation of a fair meritocracy system strengthens the influence of transformational leadership on doctors' commitment to the organization. When meritocracy is effective, doctors led by transformational leaders will be more committed because they feel that their achievements and contributions are objectively valued. Meritocracy creates a transparent and fair environment, where doctors are more motivated to follow the vision and mission of the organization as conveyed by the leader. The synergy between transformational leadership and meritocracy makes doctors not only inspired by visionary leadership, but also confident that their hard work will be recognized, thereby increasing their attachment and loyalty to the organization.

These findings are in line with Bass & Avolio's (1994) theory, which explains that transformational leadership changes followers' behavior towards a more motivated work pattern, as well as Young's (1959) theory, which emphasizes that meritocracy is based on

fairness and achievement. When meritocracy is implemented, transformational leaders become more effective at inspiring because members feel fairly valued, as confirmed by Robbins & Judge (2017) that transformational leadership encourages members to prioritize the interests of the organization over personal interests. This study also supports the findings of Jiatong et al. (2022), Welty Peachey et al. (2019), and Maulidan et al. (2020), which show that meritocracy strengthens the influence of leadership on the commitment and satisfaction of organizational members. Thus, strengthening a transparent meritocracy system and inspirational leadership will create a fair, productive, and sustainable work culture, thereby increasing the commitment and performance of doctors at Brebes Regional General Hospital.

***The role of meritocracy in strengthening the influence of work motivation on organizational commitment***

The results of the study indicate that meritocracy positively moderates the relationship between work motivation and the organizational commitment of doctors at Brebes Regional General Hospital. This means that the implementation of a fair and performance-based meritocracy system strengthens the influence of work motivation on doctors' commitment to the organization. When doctors feel that their efforts and contributions are objectively recognized, their motivation to excel increases and results in a stronger commitment to the hospital's goals. Meritocracy creates an environment that values performance and fosters a sense of fairness, so that doctors are not only intrinsically motivated but also extrinsically driven to deliver the best results. The integration of work motivation and meritocracy is key to creating a productive, fair, and goal-oriented work culture.

These findings are in line with the theories of Young (1959) and McNamee & Miller (2009), which emphasize that meritocracy is based on fairness and rewards based on achievement, as well as Lewis' (2005) research, which shows that this system increases members' sense of achievement and recognition. Empirical support also comes from Erdurmazlı (2019) and Conceição (2023), who state that work motivation drives loyalty and commitment to the organization, as well as Hu et al. (2020) and Maulidan et al. (2020), who affirm the role of meritocracy in increasing satisfaction and commitment through objective fairness. Thus, strong work motivation, if supported by a transparent and fair meritocracy system, will encourage doctors to compete healthily, improve performance, and strengthen commitment to achieving the goals of the Brebes Regional General Hospital.

#### 4. CONCLUSION

Based on the results of this study, it can be concluded that transformational leadership and work motivation significantly influence the organizational commitment of medical personnel at Brebes Regional General Hospital, both individually and simultaneously, with meritocracy playing a meaningful moderating role. The hypothesis testing confirms that meritocracy strengthens the effect of transformational leadership and work motivation on organizational commitment, indicating that leadership and motivational efforts are more effective when supported by fair, transparent, and performance-based human resource systems. These findings suggest that organizational commitment among doctors is not solely shaped by leadership style or individual motivation, but also by the extent to which the organization consistently applies merit-based principles in rewards, promotions, and career development. Therefore, hospital management is encouraged to institutionalize meritocracy alongside the development of transformational leadership practices and motivational strategies to sustain and enhance doctors' commitment. Nevertheless, this study is limited by its cross-sectional design, single-institution focus, and relatively small sample size, which call for caution in generalizing the findings to other hospital settings. Future research is recommended to involve multiple hospitals, larger samples, and longitudinal designs, as well as to explore additional variables such as organizational culture, job satisfaction, or perceived organizational support to provide a more comprehensive understanding of factors influencing organizational commitment in the healthcare sector.

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