

# Meritocracy Moderating the Influence of Person Job Fit and Career Development on Affective Commitment

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**Abstract:** Background: In the competitive healthcare landscape, where human resources are pivotal to organizational success, affective commitment defined as emotional attachment to the workplace is essential for nurse retention and service quality. Satya Negara Hospital in North Jakarta exemplifies the challenges faced by Indonesian healthcare institutions, with a notably high nurse turnover intention of 30% in 2024, signaling low affective commitment and underscoring the urgency to identify its drivers. While person-job fit and career development are established antecedents of commitment, their combined influence within Indonesia's nursing context, along with the potential moderating role of meritocracy, remains underexplored.. Methods: Using a quantitative, cross sectional design, data were collected via a validated questionnaire from all 108 nurses at the hospital and analyzed using multiple regression.. Results: The results revealed that person-job fit, career development, and meritocracy collectively explain 96.6% of the variance in affective commitment. Furthermore, when meritocracy was tested as a moderating variable, the explanatory power of the model increased significantly, with the adjusted R<sup>2</sup> value rising from 96.6% to 98.5%. This indicates that the presence of a meritocratic system substantially amplifies the positive effects of both person-job fit and career development on commitment.. Conclusion: The study concludes that a synergistic combination of job fit, growth opportunities, and a merit-based system is fundamental to fostering nurses' emotional attachment. These findings contribute to organizational and psychological theory integration and offer practical human resource strategies for enhancing nurse commitment and reducing turnover in healthcare settings.

**Keywords:** Affective Commitment; Career Development; Hospital Management; Meritocracy; Person Job

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## 1. Introduction

The contemporary healthcare sector is characterized by intense competition, compelling hospitals to strive for service excellence to maintain a competitive advantage (Chong et al., 2024; Singh et al., 2020). A critical determinant of a hospital's success in this landscape is its human resources, including doctors, nurses, and support staff, whose quality is often epitomized by a high degree of affective commitment the emotional attachment (Meyer & Allen, 1997), identification, and involvement an employee has with their organization (Bani-Melhem et al., 2022; Goh & Marimuthu, 2016; Gün et al., 2021). Empirical evidence consistently indicates that the congruence between an individual and their job (person job fit) and their alignment with the organization's values significantly influences both employee well being and performance (Kristof-brown & Billsberry, 2013; Nurhayati et al., 2024). For nurses, who constitute the frontline of healthcare delivery, this fit is paramount (Cao et al., 2025). The high demands and dynamic nature of healthcare environments necessitate a strong alignment between personal characteristics and job requirements to optimize performance and job satisfaction (Gündüz Çekmecelioğlu et al., 2025; Junça-Silva & Menino, 2022; Liu et

al., 2025), as misalignment often leads to work related stress and diminished affective commitment (Edwards, 1991; Kristof-Brown et al., 2005).

Despite its recognized importance, many healthcare institutions in Indonesia face significant challenges in fostering a stable and committed workforce, as mandated by Law No. 44 of 2009 concerning hospitals (Prayogi et al., 2024; Raharjanto, 2022). A stark illustration of this problem is found at Satya Negara Hospital in North Jakarta, which is grappling with a persistently high turnover intention rate, reaching 30% by the end of 2024, including the resignation of the hospital director. This phenomenon is a clear indicator of a critical deficiency in affective commitment among its staff, as high turnover intention is a recognized consequence of its lack (Akinyemi et al., 2022; Muchtadin & Sundry, 2023). Preliminary survey data at the hospital reveals that 20% of nurses feel their personal values misalign with the hospital's, 30% lack a strong intention to remain employed there, and 20% feel no attachment to their colleagues. This internal disengagement is externally reflected in negative patient reviews criticizing staff attitudes, threatening the hospital's reputation and community trust (Mahadewi & Muchtadin, 2024). Consequently, identifying the factors that can enhance affective commitment is not merely an academic exercise but a pressing operational imperative for the hospital's sustainability and quality of care (Ahmed et al., 2017).

Previous research has established the individual significance of person job fit and career development as antecedents of affective commitment. Studies conceptualize person job fit as the alignment between an employee's abilities and desires and their job's demands and supplies, linking a strong fit to increased loyalty and reduced turnover (Cable & DeRue, 2002; Chou et al., 2022; Edwards, 1991). Concurrently, career development defined as the ongoing process of managing skill, competency, and goal development in line with organizational needs (Noe, 2023) has been shown to foster affective commitment by making employees feel valued and providing a clear future within the organization (Al Balushi et al., 2022; Rehman, 2017; Wu et al., 2025). Furthermore, the principles of meritocracy, where rewards are based on objective assessments of ability and effort (Young, 1958), are theorized to create a fair environment that supports organizational commitment

## 2. Preliminaries or Related Work or Literature Review

Affective commitment refers to an employee's emotional attachment to, identification with, and involvement in an organization. According to Meyer and Allen (1997), affective commitment develops when employees genuinely want to remain members of the organization because they feel emotionally connected to it. In healthcare settings, particularly hospitals, affective commitment plays a crucial role in maintaining nurses' loyalty, improving service quality, and ensuring organizational sustainability.

Affective commitment is influenced by various organizational and psychological factors. Mowday, Steers, and Porter (1982) explain that organizational commitment is strengthened when employees feel valued and aligned with organizational goals. Low levels of affective commitment are often associated with increased turnover intention, decreased job performance, and reduced engagement, particularly in high-pressure environments such as hospitals.

One significant predictor of affective commitment is person-job fit. Edwards (1991) defines person-job fit as the compatibility between an individual's abilities and the demands of a job, as well as the alignment between individual needs and job supplies. When nurses perceive that their skills, education, and competencies match their job requirements, they are more likely to experience satisfaction and emotional attachment to the organization.

The broader Person-Environment Fit theory further supports this relationship by emphasizing that congruence between individual characteristics and work environment leads to positive outcomes, including job satisfaction, organizational commitment, and improved performance (Kristof-Brown, Zimmerman, & Johnson, 2005). In hospital settings, appropriate placement of nurses according to their competencies strengthens their emotional connection to the organization.

Career development is another critical factor influencing affective commitment. Career development refers to a continuous process in which individuals improve their skills, competencies, and professional opportunities over time (Noe, 2023). Employees who

perceive clear career paths and growth opportunities within the organization tend to demonstrate stronger loyalty and long-term commitment.

Career development is closely linked to Herzberg's Two-Factor Theory, which distinguishes between hygiene factors and motivator factors. Herzberg, Mausner, and Snyderman (1959) argue that advancement, recognition, and achievement are intrinsic motivators that significantly enhance job satisfaction and commitment. Therefore, structured and transparent career development programs can strengthen nurses' affective commitment.

Perceived organizational justice also contributes to affective commitment. According to Adams' (1965) Equity Theory, employees evaluate fairness by comparing their inputs and outcomes with those of others. When employees perceive fairness in rewards, promotions, and performance evaluations, they are more likely to develop trust and emotional attachment to the organization.

In this context, meritocracy becomes an important organizational principle. Young (1958) introduced meritocracy as a system in which status and rewards are determined by ability and effort rather than social connections or favoritism. A merit-based system ensures that promotions and career advancement are grounded in competence and measurable performance.

Modern human resource management emphasizes meritocracy as a strategic approach to talent management. Dessler (2020) states that objective performance evaluation and competency-based promotion systems increase employees' trust in organizational processes. Such systems create transparency and reduce perceptions of bias, which ultimately enhance organizational commitment.

Theoretically, meritocracy can function as a moderating variable that strengthens the relationship between person-job fit and affective commitment. When employees perceive both compatibility with their jobs and fairness in organizational systems, their emotional attachment to the organization becomes stronger (Cable & DeRue, 2002). Without fairness, job compatibility alone may not sustain long-term commitment.

Similarly, meritocracy strengthens the relationship between career development and affective commitment. Lawler (2017) explains that performance-based reward systems enhance motivation and reinforce employees' belief that their development efforts will be recognized. In the absence of merit-based systems, career development initiatives may fail to increase commitment due to perceptions of injustice.

In conclusion, previous literature indicates that person-job fit and career development are significant determinants of affective commitment, while meritocracy serves as a reinforcing mechanism that enhances the positive effects of these variables. Integrating job compatibility, structured career growth, and merit-based systems provides a comprehensive human resource strategy to improve nurses' emotional attachment and organizational performance (Meyer & Allen, 1997; Edwards, 1991; Young, 1958)

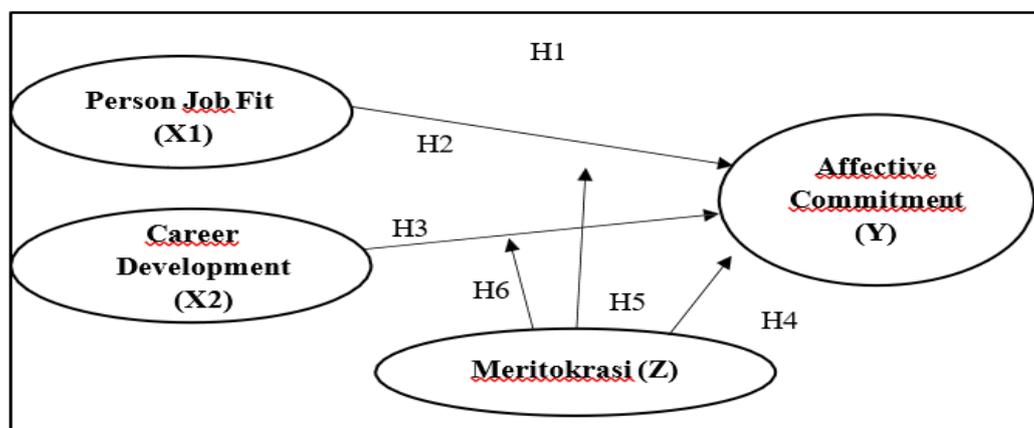


Figure 1. Research Hypothesis.

### 3. Proposed Method

This study employed a quantitative research approach utilizing a causal-associative design to examine the hypothesized relationships between variables (Bloomfield & Fisher, 2019). The research adopted an explanatory cross-sectional survey method, which allows for the direct observation and data collection from a population at a single point in time, thereby facilitating the analysis of variable interactions without researcher intervention (Creswell & Creswell, 2018). A cross-sectional design was deemed appropriate as it enables the efficient collection of data for testing theoretical models and examining the moderating effects within the proposed framework (Creswell & Creswell, 2018).

The primary data for this study were collected directly from the target population, which consisted of all 108 nurses at Satya Negara Hospital in North Jakarta. Given the relatively small and finite size of the population, a saturated sampling technique was employed, wherein the entire population was included as respondents (Sekaran & Bougie, 2019). This approach, also referred to as a census, ensures full representation and eliminates sampling error, as every member of the population is observed, making it highly suitable for studies with limited populations (Sugiyono, 2020).

Data were gathered using a structured self-administered questionnaire as the primary research instrument. The questionnaire was designed to measure four key constructs: Person-Job Fit (X1), Career Development (X2), Meritocracy (Z) as a moderating variable, and Affective Commitment (Y) as the dependent variable. All items were measured using a four-point Likert scale, ranging from 1 (Strongly Disagree) to 4 (Strongly Agree), to mitigate central tendency bias and force a directional response (Sugiyono, 2020). The instrument's development was grounded in established theoretical frameworks, with items adapted from prior literature to ensure content validity. Furthermore, the questionnaire underwent rigorous tests for validity and reliability prior to its deployment.

The data collection procedure was systematically conducted over a one-month period, from May to June 2025. Questionnaires were distributed in hard copy directly to nurses who met the inclusion criteria at the hospital. A cover letter accompanied each questionnaire, explaining the purpose of the research, ensuring anonymity, and securing informed consent from all participants. The completed questionnaires were collected on-site, reviewed for completeness by the researchers, and subsequently verified before being processed for analysis, ensuring the integrity and accuracy of the data entered.

For data analysis, Multiple Regression Analysis (MRA) was employed to test the proposed hypotheses and examine the moderating effect of Meritocracy. MRA is a robust statistical technique capable of assessing the influence of multiple independent variables on a dependent variable while simultaneously testing for interaction effects (Field, 2018; Hayes & Rockwood, 2017). The analysis involved creating a product term between the independent and moderating variables to assess the significance of the interaction effect, consistent with the procedures for moderation analysis outlined by (Baron & Kenny, 1986). The use of MRA allowed for a comprehensive examination of the direct relationships and the moderating role, controlling for potential confounding factors and thereby enhancing the validity of the finding (Ghozali, 2021). All statistical analyses were performed using SPSS software to ensure precision.

### 4. Results and Discussion

#### Respondent Characteristic

The study collected data from 108 nurses at Satya Negara Hospital. The majority of respondents were female (88%), aged between 26–35 years (37%), held a Diploma qualification (70%), and had more than ten years of work experience (49%).

#### Analisis Data

##### *Validitas Test*

A validity test was conducted as a pre-test to verify the accuracy of the research instrument. This test was conducted in the first week of February 2025, with questionnaires distributed to 30 nurses at Satya Negara Hospital who met the inclusion criteria.

The validity test used SPSS software with the product-moment correlation technique. The r-table value for  $N = 30$  and  $\alpha = 0.05$  yielded an r-table value of 0.361.

For all indicators, the calculated R-values were all greater than the R-table value, indicating that all indicators were valid.

**Reability Test**

**Table 1.** Reability Test.

Variabel	Cronbach's Alpha	Critical Value	Description
PJF	0,953	0,60	Reliabel
CM	0,960	0,60	Reliabel
MK	0,973	0,60	Reliabel
AC	0,955	0,60	Reliabel

The table above shows that all variables in this study, namely person-job fit, career development, meritocracy, and affective commitment, are reliable, as the Cronbach's Alpha value is greater than the critical value of 0.60. This indicates that the measuring instrument used is reliable and provides relatively consistent measurement results.

**Hypothesis Testing**

**Analisis Regresi MRA model I**

Hypothesis testing was conducted after validity, reliability, and classical assumptions had been met. Direct multiple linear regression analysis was conducted to examine the influence of person-job fit, career development, and meritocracy on affective commitment, with the following results

**Table 2.** Analisis Regresi MRA Model 1.

Variabel	Konstanta	Koefisien	Uji Signifikansi		Adj R Square
			ttest	ftest	
Person Job Fit (X <sub>1</sub> )		0,343	0,000		0,966
Pengembangan Karier (X <sub>2</sub> )	0,014	0,441	0,000	0,000	
Meritokrasi (X <sub>3</sub> )		0,641	0,000		

Based on the table above, the coefficient of determination shows 0.966. From these results, it can be concluded that person job fit, career development and meritocracy contribute 96.6% to affective commitment, while the difference of 0.04% is influenced by other factors that were not studied.

**Analisis Regresi MRA model II**

In this section, the ability of the meritocracy variable to moderate the influence of person-job fit and career development on affective commitment is tested, with the following results:

**Tabel 3.** Moderate Regretion Analysis.

Variabel	Constanta	Coefisien	Significance Test		Adj R Square
			<i>ttest</i>	<i>ftest</i>	
<i>Person Job Fit (X1)</i>		1,030	0,000		
<i>Career Development (X2)</i>		0,635	0,000		
Meritokrasi (X3)	7,693	0,360	0,029		
<i>Person Job Fit* Meritokrasi</i>		1,040	0,000	0,000	0,984
<i>Career Development*</i>		1,615	0,000		
Meritokrasi					

Based on the table above person job fit, career development and meritocracy are increased by 1 unit, then affective commitment will increase by 103% through person job fit, through career development by 63.5% and through meritocracy by 36.0%, then meritocracy positively interacts the influence of person job fit and career development on affective commitment, so that the moderating role of meritocracy, affective commitment can increase by 104% through person job fit, and 161.5% through career development. This is reinforced by the coefficient of determination value increasing by 98.4% greater than without the role of meritocracy as a moderating variable, and these results strengthen that meritocracy is a moderating variable.

### Hypothesis Test Results

**Tabel 4.** Hypothesis Test Results.

Simultaneous hypothesis	<i>ftest</i>	Description
Person job fit and Career Development*meritokrasi → <i>affective commitment</i>	0,000	H1 Accepted
Partial hypothesis	<i>ttest</i>	Description
<i>Person job fit</i> → <i>affective commitment</i>	0,000	H2 Accepted
Career Development → <i>affective commitment</i>	0,000	H3 Accepted
Meritokrasi → <i>affective commitment</i>	0,029	H4 Accepted
<i>Person job fit*meritokrasi</i> → <i>affective commitment</i>	0,000	H5 Accepted
<i>Career Development*meritokrasi</i> → <i>affective commitment</i>	0,000	H6 Accepted

The results indicate that simultaneously, person–job fit and career development have a significant effect on affective commitment with meritocracy as a moderating variable (F-test  $0.000 < 0.05$ ), thus H1 is accepted. Partially, person–job fit (t-test  $0.000 < 0.05$ ) and career development (t-test  $0.000 < 0.05$ ) each have a significant effect on affective commitment, supporting H2 and H3. In addition, meritocracy has a direct and significant effect on affective commitment (t-test  $0.029 < 0.05$ ), confirming H4. Furthermore, meritocracy significantly strengthens the effect of person–job fit on affective commitment (t-test  $0.000 < 0.05$ ) as well as the effect of career development on affective commitment (t-test  $0.000 < 0.05$ ), supporting H5 and H6. These findings suggest that stronger implementation of meritocratic principles enhances the positive influence of person–job fit and career development on employees’ affective commitment.

### Discussion

#### *The Simultaneous Effect of Person-Job Fit, Career Development, and Meritocracy on Affective Commitment*

The multiple regression analysis Model I resulted in the equation:  $Y = 0.014 + 0.343(X_1) + 0.441(X_2) + 0.641(X_3)$ . The analysis confirms that PJF, CD, and M simultaneously have a significant positive effect on AC F-test sig. 0.000. The adjusted R<sup>2</sup> value of 0.966 indicates

that these three variables collectively explain 96.6% of the variance in AC, a remarkably high proportion that underscores their paramount importance.

This finding demonstrates that when nurses experience a strong fit with their job, have access to career growth opportunities, and operate within a merit-based system, they are exceedingly likely to develop a powerful emotional attachment to the organization. This aligns with the foundational theories underpinning each construct. Person-Job Fit, defined as the congruence between an individual's characteristics abilities and desires and the job's characteristics demands and supplies (Edwards, 1991), fulfills intrinsic motivational needs. Career Development, as a continuous process of managing skill and competency growth aligned with organizational needs (Noe, 2023), provides a pathway for achievement and growth. Meritocracy, a system where status and rewards are based on ability and effort (Young, 1958), establishes perceived organizational justice. Together, they create an environment where employees feel competent, supported in their growth, and fairly treated, which naturally fosters a strong desire to remain committed to the organization (Meyer & Allen, 1997). This result synthesizes previous findings that have often examined these relationships in isolation, confirming their powerful combined effect (Behery, 2009; Muleya et al., 2022; Rehman, 2017).

#### ***The Partial Effect of Person-Job Fit on Affective Commitment***

The analysis shows that Person-Job Fit has a significant positive partial effect on Affective Commitment ( $\beta = 0.343$ , t-test sig. 0.000). This supports hypothesis H2, indicating that a productive fit between a nurse's characteristics and their job leads to higher loyalty toward the hospital.

This result strongly corroborates existing literature. The congruence between an individual and their job role is a critical antecedent of positive work attitudes (Behery, 2009). When nurses' skills are well-utilized *abilities-demand fit* and their needs are met by the organization *desires-supplies fit*, it generates positive affective states. This finding is consistent with studies by (Nisa et al., 2018; Soelton et al., 2020), who found significant positive impacts of PJF on organizational commitment. Furthermore, as suggested by (Abdulmalik & Pangandaman, 2024; Yulianti & Fitdiarini, 2022), PJF likely enhances affective commitment indirectly by boosting self-efficacy and job satisfaction. The nurse who feels competent and valued in their role is more likely to develop an emotional bond with the institution that provides that role.

#### ***The Partial Effect of Career Development on Affective Commitment***

Career Development was found to have a significant positive partial effect on Affective Commitment ( $\beta = 0.441$ , t-test sig. 0.000). Thus, hypothesis H3 is accepted. This suggests that a proactive attitude fostered by career development opportunities significantly enhances nurses' loyalty.

This finding emphasizes the critical role organizations play in fostering commitment through investment in their employees' futures. When a hospital provides clear paths for advancement, training, and skill development (Noe, 2023), it signals to nurses that they are valued and that the organization is invested in their long-term growth. This perception fosters a reciprocal relationship where employees become more emotionally attached. This result directly supports the work of (Muleya et al., 2022), who found a significant positive correlation between career development opportunities and AC. It also reinforces conclusions by (Rehman, 2017) and (Bastian & Amdanata, 2023) that career development practices are a powerful direct predictor of affective commitment. The high score on *organizational career management* underscores that institutional support is a more potent driver of commitment than individual career planning alone.

#### ***The Partial Effect of Meritocracy on Affective Commitment***

The analysis confirms that Meritocracy has a significant positive partial effect on Affective Commitment ( $\beta = 0.641$ , t-test sig. 0.029). Therefore, hypothesis H4 is accepted. This indicates that a dedication to a merit-based system, where rewards are perceived as fair and based on competence, heightens nurses' loyalty.

This result is grounded in organizational justice theory. Meritocracy creates perceptions of distributive and procedural justice (Abou Hashish, 2017; She et al., 2023). When nurses believe that recognition, promotion, and rewards are based on their ability and effort rather than favoritism or connections, they perceive the organization as fair and just. This perception is a fundamental driver of emotional attachment. As (Alruwaili, 2025; Sharma & Dhar, 2016) argued, competence and fair workload recognition positively impact AC. Furthermore, a meritocratic system likely empowers employees and enhances their self-worth (Joy et al., 2025), further strengthening their desire to stay with an organization that recognizes their true value. The fact that meritocracy had the highest beta coefficient 0.641 in the direct effects

model highlights its profound importance as a foundational element for building commitment.

### ***The Moderating Effect of Meritocracy on the Influence of Person-Job Fit on Affective Commitment***

The Moderate Regression Analysis (MRA Model II) revealed that Meritocracy significantly and positively moderates the relationship between Person-Job Fit and Affective Commitment ( $\beta$  for interaction term = 1.040, t-test sig. 0.000). Hypothesis H5 is therefore accepted. The inclusion of this interaction effect increased the explanatory power of the model to an adjusted  $R^2$  of 0.984.

This finding is crucial. It demonstrates that the positive impact of a good person-job fit on emotional commitment is not automatic; it is significantly amplified in an environment perceived as meritocratic. This can be explained through the lens of Equity Theory (Adams, 1965). A good fit means the nurse is contributing high inputs skills, effort. In a meritocratic system, they are confident these inputs will be justly rewarded outputs. This fairness perception strengthens the positive emotions derived from the fit itself. Conversely, even with a good fit, if the system is perceived as nepotistic or unfair, the employee may feel their inputs are undervalued, dampening their affective commitment. This result aligns with research by Siwela and Van der Bank (2021), who found that reward unfairness can reduce the impact of PJF, and by Kismono and Wulandari (2022), who confirmed that meritocracy strengthens the PJF-AC relationship through fair performance-based rewards.

### ***The Moderating Effect of Meritocracy on the Influence of Career Development on Affective Commitment***

The analysis also found that Meritocracy significantly and positively moderates the relationship between Career Development and Affective Commitment ( $\beta$  for interaction term = 1.615, t-test sig. 0.000). Thus, hypothesis H6 is accepted. This was the strongest interaction effect observed.

This result underscores that the effectiveness of career development programs is contingent upon the perceived fairness of the system. Providing training and promotion opportunities is beneficial, but its impact on loyalty is maximized when employees believe these opportunities are allocated meritocratically. If career advancements are seen to be based on connections rather than competence, development programs could even breed cynicism and reduce commitment. As Muleya et al. (2022) suggested, the effectiveness of career development depends on employees' perception of fairness in promotion systems. Bastian and Amdanata (2023) further identified a significant increase in AC when career opportunities were perceived to be distributed based on competency. Therefore, meritocracy acts as a crucial reinforcing mechanism, ensuring that investments in career development translate directly into heightened emotional commitment by validating the principle that hard work and ability lead to growth.

## **5. Comparison**

A key finding of this study is the powerful role of meritocracy as a moderator. The influence of PJF on AC increased from 34.3% to 104%, and the influence of CD on AC surged from 44.1% to 161.5% when meritocracy was introduced as a moderating variable. This transformative effect can be explained by the integration of Herzberg's Two-Factor Theory. Meritocracy acts as a potent *hygiene factor*; it may not motivate in itself, but its absence or perceived unfairness can cause significant dissatisfaction and nullify the effects of motivators. PJF and CD are *motivator factors*. The presence of a strong meritocratic system removes dissatisfaction and creates a fertile ground for these motivators to flourish and exert their full positive influence on affective commitment.

It is noteworthy that this highly positive outcome emerged despite initial pre-survey signals of some dissatisfaction. This discrepancy may be attributed to a limited pre-survey sample, a natural tendency to voice complaints in informal checks, and potential positive organizational changes e.g., new performance-based policies implemented between the pre-survey and main study periods. This shift highlights that robust and transparent organizational systems like meritocracy can effectively transform initial perceptions and build strong commitment.

This study has limitations. First, its focus on a single hospital in Jakarta limits the generalizability of the findings. Future research should replicate this study in different healthcare settings and cultural contexts. Second, the use of self-report questionnaires introduces the

potential for common method bias and social desirability bias, where respondents might provide overly positive answers. Future studies could employ mixed-methods approaches, integrating qualitative interviews to gain deeper, nuanced insights into the relationships explored here and to triangulate the quantitative findings. Finally, longitudinal research would be valuable to assess the causal relationships between these variables over time, especially following organizational changes.

## 6. Conclusions

This study conclusively demonstrates that person-job fit, career development, and meritocracy collectively form a robust framework for fostering affective commitment among nurses at Satya Negara Hospital. The simultaneous positive influence of these factors confirms that nurses' emotional attachment to the organization is not driven by a single element but by a synergistic interplay where competence alignment, growth opportunities, and a fair reward system reinforce one another. This finding aligns with established organizational theories, which posit that intrinsic motivators like fit and development, coupled with extrinsic systemic fairness, are critical for building voluntary emotional bonds (Herzberg et al., 1959; Meyer & Allen, 1997). The research thereby provides a clear answer to its core inquiry, affirming that the combination of a productive workforce via person job fit, a proactive workforce via career development, and a dedicated workforce via meritocracy is instrumental in cultivating loyalty.

Furthermore, the moderating role of meritocracy emerged as a pivotal insight, revealing that a transparent performance-based system amplifies the positive effects of both person-job fit and career development on affective commitment. This underscores the principle that perceived organizational justice is a fundamental mechanism through which individual experiences are translated into stronger emotional ties (Adams, 1965; Lawler, 2017). The findings suggest that without a meritocratic structure, the motivational potential of job fit and career opportunities may not be fully realized, highlighting the system's role in enhancing instrumentality and valence the belief that effort leads to performance and that performance leads to valued rewards (Vroom, 1964).

The theoretical implications of this study are significant, as it integrates and validates several psychological and organizational frameworks within the healthcare context. It strengthens the propositions of Maslow (1943) and (Schein, 1978) by empirically showing how the fulfillment of higher-order needs for self-actualization and career growth through structured organizational practices directly fortifies affective commitment. From a practical standpoint, the study achieves its objective of providing actionable managerial strategies, advocating for a holistic approach that combines credentialing, leadership development, optimized remuneration, and participatory mechanisms to address specific gaps identified in the nurses' workplace experience, thereby directly enhancing their emotional engagement and, ultimately, organizational performance.

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