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# Employees perceptions of non-monetary recognition practice and turnover: Does recognition source alignment and contrast matter?

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## Abstract

Nonmonetary recognition originates from various sources (distal and proximal) and research has yet to examine the interplay among them. Results of a 2-year time-lagged study ( $N = 221$ ), employing polynomial regression and response surface analysis, revealed that when distal organisational nonmonetary recognition is aligned with recognition from proximal sources, employees had lower turnover intentions and, indirectly, were less likely to quit 2 years later. For the most part, these relationships do not differ significantly based on the level at which alignment of distal and proximal recognition occurs. In terms of contrasts, when distal recognition exceeds the level of proximal recognition from the supervisor, turnover intentions are higher. For other proximal sources (co-workers, physicians and patients), turnover intentions were higher irrespective of the type of contrast. This study adds to the strategic HRM literature by showing that contrasts between

**Abbreviations:** CFA, confirmatory factor analysis; HR, human resource; HRM, human resource management.

All authors contributed equally and names appear in alphabetical order.

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distal and proximal recognition undermine HR practice perception and employees' organisational attachment.

**KEYWORDS**

consistent signals, healthcare sector, HR practices, nonmonetary recognition, turnover

**Practitioner Notes****What is currently known?**

- Hospitals are struggling to retain caregivers and deficient recognition is a pervasive issue
- Recognition practices increase employee motivation
- The interplay between nonmonetary recognition from distal and proximal sources is unclear

**What this paper adds?**

- Deeper insights into what happens to turnover when recognition types align and contrast
- Identifies the organisation as a distal source of recognition and supervisors, co-workers, physicians and patients, as crucial proximal sources for caregivers
- Expands the nomological network of turnover intentions

**The implications for practitioners**

- Supervisor recognition is the most important proximal source of recognition and may compensate for deficient organisational nonmonetary recognition
- Receiving relatively more proximal recognition may cast the organisation in a negative light when distal recognition is lacking, prompting turnover intentions
- Negativity bias surrounds nonmonetary recognition perception.

## 1 | INTRODUCTION

Healthcare organisations are experiencing unparalleled shortages of caregivers, attributed to poor-quality working conditions and the subsequent chronically high turnover that persists (e.g., Currie & Carr Hill, 2012). Related increases in healthcare costs have prompted cutbacks and restructuring, which pose a threat to the quality of care provided (Townsend & Wilkinson, 2010).

Research suggests that HR practices are a pivotal tool for curtailing employee withdrawal (McAlearney & Robbins, 2014), which can be explained by Blau's (1964) social exchange theory. Through HRM practices, organisations are able to signal their commitment towards employees, which in turn fosters reciprocal levels of loyalty to the organisation (Paré & Tremblay, 2007). While existing evidence along these lines is encouraging, how specific HR practices can be designed and implemented to reduce employee withdrawal requires a greater understanding (e.g., Heavey et al., 2013).

From the variety of HR practices available, we focus on nonmonetary recognition, an underutilised inducement, which costs little to provide but which has been found to have motivational effects comparable to those of monetary recognition (Stajkovic & Luthans, 2001). Moreover, monetary pay, which is typically based on performance in other private sector contexts, is deemed irrelevant in many hospital contexts,

including that of the present investigation, where the pay of caregivers is governed by a centralised collective agreement with trade unions and is not within the control of hospitals and supervisors (Government of Canada, 2020).

Drawing upon social information processing theory (Salancik & Pfeffer, 1978) and the theory of HRM system strength (Bowen & Ostroff, 2004), our study contributes to the existing literature on nonmonetary recognition in the following ways. First, prior research has explored the direct impact of nonmonetary recognition on withdrawal cognitions along two lines, either with respect to (1) the awareness of the distal practice of nonmonetary recognition from the organisation (Paré & Tremblay, 2007) or (2) as a resource that is personally provided by specific sources (Jourdain & Chênevert, 2010). In the present study, however, we address a novel research question, related to the growing empirical evidence on the factors that shape employees' perceptions of various HR practices (Jiang et al., 2017), by uncovering how employees make sense of nonmonetary recognition when these two 'recognition types' actually align or contrast with each other. We propose that the alignment between distal nonmonetary recognition from the organisation and proximal nonmonetary recognition from specific sources in hospital settings is paramount to circumvent the turnover intentions of caregivers and test our propositions through advanced polynomial regression and response surface analysis techniques.

Second, by investigating the interplay between distal organisational recognition and recognition from the proximal sources of supervisors, co-workers, physicians and patients, we contribute to the nomological network surrounding turnover intentions by investigating if distal and proximal recognition operate jointly, in a complex but theoretically coherent way, to predict turnover intentions (Maertz et al., 2007) and, indirectly, actual turnover over a period of two years. By doing so, we demonstrate the construct validity of our measure of turnover intentions and contribute to the mixed empirical evidence on the association between turnover intentions and turnover (Maertz & Griffeth, 2004).

## 1.1 | Literature review and research hypotheses

Research has used social exchange theory (Blau, 1964) as a framework for explaining employee withdrawal (Paré & Tremblay, 2007), which postulates that employees draw inferences regarding the nature of the employment exchange relationship on the basis of the types of signals or resources they have received from the organisation, for example, through its HR practices. Through nonmonetary recognition practices, for instance, it is presumed that employees will perceive that they are part of a social exchange relationship and reciprocate in kind with greater loyalty to the organisation (Maertz & Griffeth, 2004). This prior research stream has proceeded along two main lines to examine the effects of nonmonetary recognition. In this paper, we make individual predictions regarding the main effects of these two types, which we label as distal and proximal nonmonetary recognition.

## 1.2 | Distal nonmonetary recognition

In one line of prior research, the perceived presence of nonmonetary recognition practices has been examined as a predictor of employee motivation (Paré & Tremblay, 2007). As an organisation is an abstract entity, we refer to these employee perceptions of organisational nonmonetary recognition practice as distal nonmonetary recognition in this paper. On the basis of social exchange theory, perceiving that recognition is available from the organisation should engender some experience of obligation to remain in the organisation thereby lowering turnover cognitions (e.g., Rhoades & Eisenberger, 2002).

Consistent with this argument, Paré and Tremblay (2007) found lower turnover intentions among employees who perceived that their organisation recognised employee performance through specific practices such as verbal congratulations, special mentions or written memos. Studies have also found that employees tend to perceive that

their organisation's performance management system is more effective when it incorporates nonmonetary forms of recognition (Haines & St-Onge, 2012). Thus, we expect that the more employees perceive a distal nonmonetary recognition practice in their organisation, the less likely they will be to entertain thoughts of quitting.

**Hypothesis 1** *The perception of a distal nonmonetary recognition practice will be negatively related to turnover intentions.*

### 1.3 | Proximal nonmonetary recognition: A multi-source view

Another line of prior research has examined nonmonetary recognition by focussing on the extent to which employees report directly receiving recognition from various sources (Jourdain & Chênevert, 2010). The underlying assumption of this literature stream is that recognition must be tangibly received by members of the employee's social environment to have its purported effects. We refer to the direct provision of such recognition as proximal nonmonetary recognition.

Applied to the study of nonmonetary recognition, researchers have identified various potential sources, both internal and external to the organisation (Brun & Dugas, 2008). As is the case in most organisations, supervisors in the healthcare context are well positioned, and are expected, to provide recognition to employees (Hutchinson & Purcell, 2010). Yet, beyond recognition from supervisors, recognition from physicians is also particularly important for caregivers, albeit frequently lacking (Cangelosi et al., 1998). Recognition from physicians can reduce feelings of depersonalisation among nurses and enhance their professional commitment (Jourdain & Chênevert, 2010). Moreover, co-worker recognition is important for caregivers to feel valued and appreciated for their work (Gilbert et al., 2010) and can enhance workers' social identity as a cohesive group. Groups with high levels of cohesiveness tend to have lower turnover rates because individuals value and enjoy group membership (George & Bettenhausen, 1990). Lastly, patient recognition, since it corresponds to the aim, objective and values of the caregiver profession (McCabe & Garavan, 2008), can also serve as an important motivator of turnover decisions. While the provision of recognition from patients is not necessarily an expectation of caregivers, it still constitutes an important signal about the quality of the care they deliver, thereby improving work-related attitudes (Ashley et al., 1999) and, thus, may also circumvent turnover intentions.

Supervisors have regular contact with employees and more opportunities (compared to the organisation) to provide nonmonetary recognition (Maertz et al., 2007). In accordance with an expansive view of the social motivations that bear on turnover decisions (Maertz & Griffeth, 2004), nonmonetary recognition provided by various proximal sources can strengthen employees' overall assessment of the quality of workplace relations, thereby increasing the attractiveness of remaining in the employment context rather than leaving it.

**Hypothesis 2** *Perceived proximal nonmonetary recognition from (a) the supervisor, (b) physicians, (c) co-workers and (d) patients will be negatively related to turnover intentions.*

While each of the above lines of inquiry can inform organisational efforts to reduce turnover, a question that remains concerns the implications when distal nonmonetary recognition is either aligned with or contrasts with proximal nonmonetary recognition.

### 1.4 | The alignment of distal and proximal recognition

Theoretical frameworks regarding HR practices assign an important role to the signals that are conveyed to employees and, particularly, to the consistency of these signals in influencing employee attitudes and behaviour (Bowen & Ostroff, 2004). Social information processing theory (Salancik & Pfeffer, 1978) and the theory of HRM

system strength (Bowen & Ostroff, 2004) offer particularly useful theoretical insights to help understand the importance of alignment between distal and proximal recognition and how this influences organisational outcomes.

Social information processing theory highlights that people tend to make use of cues in their social environment to interpret certain situations or events (Salancik & Pfeffer, 1978). Supervisors, co-workers, physicians and patients represent the primary actors within the immediate social environment of caregivers, thereby playing an important role in how they form or adapt their own interpretations and beliefs about certain HR practices (c.f. Jiang et al., 2017). In line with HRM system strength theory (Bowen & Ostroff, 2004), to the extent that communication from supervisors and other organisational constituents about HR practices is in alignment with employees' general perceptions regarding these practices from the organisation, the 'strength' of the HRM system should increase, thereby enabling employees to unambiguously understand and respond to it.

When proximal and distal recognition are in alignment, the messages they convey to employees are consistent and, therefore, are less likely to provoke employees to engage in more systematic information processing or deliberation over the meaning of the HR practice or its personal implications (Weick et al., 2005). Under such circumstances, research suggests that employees are less likely to engage in the deliberate reassessment of the nature of their employment relationship or their organisational attachment and, thus, turnover intentions are less likely (Mitchell & Lee, 2001). However, it is likely that the alignment or contrast is not the only thing of importance but also the actual levels at which the recognition is provided. In this respect, we further argue that turnover intentions will be at their lowest when the alignment of nonmonetary recognition (provided by both distal and proximal sources) occurs at higher rather than lower levels.

**Hypothesis 3** *Turnover intentions are higher when employees' perceptions of distal and proximal recognition from (a) the supervisor, (b) physicians, (c) co-workers and (d) patients, contrast compared to when they are aligned.*

**Hypothesis 4** *Turnover intentions are lower when perceptions of distal and proximal recognition from (a) the supervisor, (b) physicians, (c) co-workers and (d) patients, are aligned at higher levels, rather than aligned at lower levels.*

## 1.5 | Relative contrast between distal and proximal sources of recognition

A contrast between perceptions of distal nonmonetary recognition and proximal nonmonetary recognition places employees in a situation in which they must reconcile inconsistent messages. As employees share the same work environment with their supervisors, co-workers, physicians and patients, social information processing theory (Salancik & Pfeffer, 1978) would postulate that the information received from these sources is more salient and relevant for them compared with what is conveyed through distal organisational practice (Jiang et al., 2017). For these reasons, we posit that, when faced with a contrast between distal and proximal sources of recognition, employees will be particularly sensitive to how the amount of proximal recognition they have personally received compares to the amount of distal recognition perceived to be available from the organisation. In other words, the potential impact of the extent of contrast on turnover intentions will vary depending on which of the two specific types of contrast occurs.

The first type of contrast holds when perceptions of distal nonmonetary recognition exceed perceptions of proximal nonmonetary recognition. In such a situation, employees are forced to come to terms with a potentially disconcerting realisation—that they receive relatively less direct proximal recognition than the amount that they perceive is available and provided by the organisation to employees more generally. When employees perceive that recognition practices are widely available, but do not experience them personally from more proximal sources, the credibility and relevance of the signal provided through such distal recognition practice may be undermined (Bowen & Ostroff, 2004). Moreover, when heightened awareness of organisational inducements creates

expectations that ultimately go unmet, employees are more likely to question and negatively reassess their current level of attachment to the organisation (Mitchell & Lee, 2001).

The second type of contrast occurs when perceptions of proximal recognition exceed those of distal recognition. In such circumstances, although the relative deficiency of distal recognition may still cast the employer in a negative light, the fact that employees perceive relatively greater amounts of proximal recognition may serve to offset what would otherwise be a reduction in their attachment. Indeed, proximal sources such as supervisors serve as conduits of HR messages in any case, and because of their proximity to employees, their level of recognition is deemed more authentic and more relevant for driving their motivation (Brun & Dugas, 2008). In addition, and more generally, nonmonetary recognition provided by multiple proximal sources has the potential to strengthen the constituent force (see Maertz & Griffeth, 2004), which is a function of the quality of the various social ties that serve to maintain employee attachment to the organisation. The feeling of being recognised and appreciated by other actors in the immediate social environment of employees would likely help compensate for whatever reduction in their attachment might be occasioned by deficient levels of distal organisational recognition.

In sum, while any type of contrast is likely to confuse employees, undermining the credibility of organisational practices, and calling into question the exchange relationship (see Hypothesis 3), we posit that the contrast is especially damaging when employees perceive the practice is available more generally, but do not receive it from those in their proximal work environment.

**Hypothesis 5** *When perceptions of distal and proximal recognition from (a) the supervisor, (b) physicians, (c) co-workers and (d) patients, contrast, turnover intentions are higher when distal recognition exceeds proximal recognition, compared to when proximal recognition exceeds distal recognition.*

## 1.6 | Indirect effects of nonmonetary recognition on turnover

In postulating the aforementioned hypotheses involving the complex interplay of distal and proximal nonmonetary recognition, we focus our attention on turnover intentions. However, to ascertain the predictive validity of our turnover intentions measure, we link this outcome to actual voluntary turnover 2 years later. In

TABLE 1 Confirmatory factor analysis of measurement model

Model	$\chi^2$	df	$\Delta\chi^2$	$\Delta df$	TLI	CFI	RMSEA	SRMR
1. Hypothesized six-factor model	139.73	120	-	-	0.99	0.99	0.027	0.029
2. Combining distal and supervisor recognition	549.11***	125	409.38***	5	0.87	0.89	0.124	0.100
3. Combining distal, supervisor, and co-worker recognition	1154.02***	129	1014.29***	9	0.69	0.74	0.190	0.142
4. Combining distal, supervisor, co-worker and physician recognition	1845.12***	132	1705.39***	12	0.49	0.56	0.242	0.171
5. Combining distal, supervisor, co-worker, physician and patient recognition	2640.52***	134	2500.79***	14	0.27	0.36	0.291	0.202
6. One-factor model	2899.38***	135	2759.65***	15	0.20	0.30	0.304	0.213

Note:  $n = 221$ .

Abbreviations: CFI, Comparative Fit Index; RMSEA, root mean square error of approximation; SRMR, standardised root mean square residual; TLI, Tucker Lewis Index.

\*\*\* $p < 0.001$ .

doing so, we adhere to the recommendation of Mowday et al. (1982, p. 122) to include turnover intentions in models of turnover, as they criticised researchers for assuming that, once expressions of turnover intentions are made, that 'the wheels are set in motion for subsequent termination'. Such an assumption fails to recognise that employees have the potential to change their current work situation and assumes that employees have a viable alternative. In line with the general notion that intentions proceed behaviour, we advance the following hypothesis:

**Hypothesis 6** *The effects of recognition as described in Hypotheses 3, 4, and 5 (a-d) will be indirectly related to turnover via turnover intentions.*

## 2 | METHOD

### 2.1 | Research setting and sample

The study was conducted in a Canadian hospital. Questionnaires were mailed directly to 1055 caregivers who had direct contact with physicians, co-workers and patients. Each questionnaire was accompanied by a stamped return envelope. Two hundred and twenty-one questionnaires were returned (response rate of 20.9%). See Table 2 for the demographics of the sample.

### 2.2 | Measurement

Apart from voluntary turnover and the control variables (gender, age and tenure), variables were measured on a seven-point Likert rating scale ranging from 1 (strongly disagree) to 7 (strongly agree).

#### 2.2.1 | Distal nonmonetary recognition

We used Tremblay et al.'s (2000) three-item scale. A sample item is 'Exceptional contributions of employees are formally recognised by the organisation (e.g., during ceremonies or meetings, through the organisation's newsletter, by congratulatory letters, with gifts)' ( $\alpha = 0.89$ ).

#### 2.2.2 | Proximal nonmonetary recognition

These three-item scales (one for each of the four proximal sources) were adopted from Jourdain and Chênevert (2010). A sample item is 'My direct supervisor notices the effort I put into my work'. ( $\alpha = 0.96$ ; supervisor), ( $\alpha = 0.96$ ; physicians), ( $\alpha = 0.95$ ; co-workers) and ( $\alpha = 0.96$ ; patients).

#### 2.2.3 | Turnover intentions

A shortened three-item version of the scale developed by Meyer and Allen (1991) was used to assess turnover intentions. A sample item is 'I often consider leaving my organisation' ( $\alpha = 0.86$ ).



TABLE 2 Descriptive statistics, correlation matrix and reliability coefficients

	M	SD	1	2	3	4	5	6	7	8	9	10
1. Gender <sup>a</sup>	0.90	0.30	-	-	-	-	-	-	-	-	-	-
2. Age	45.63	9.16	0.04	-	-	-	-	-	-	-	-	-
3. Tenure	12.89	8.89	0.05	0.44***	-	-	-	-	-	-	-	-
4. Distal recognition	3.21	1.37	-0.06	0.08	0.09	<b>(0.89)</b>	-	-	-	-	-	-
5. Supervisor recognition	4.68	1.74	0.02	0.01	0.03	0.37***	<b>(0.96)</b>	-	-	-	-	-
6. Physician recognition	3.56	1.68	0.05	0.15*	0.14*	0.35***	0.34***	<b>(0.96)</b>	-	-	-	-
7. Co-worker recognition	4.98	1.41	0.03	0.06	0.05	0.23**	0.43***	0.41***	<b>(0.95)</b>	-	-	-
8. Patient recognition	5.39	1.37	0.05	0.06	0.06	0.04	0.13	0.22**	0.29***	<b>(0.96)</b>	-	-
9. Turnover intentions	3.49	1.60	0.06	-0.29***	-0.26***	-0.29***	-0.35***	-0.25***	-0.13	-0.05	<b>(0.86)</b>	-
10. Turnover	0.10	0.29	-0.14*	-0.18*	-0.15*	-0.06	-0.06	-0.07	-0.06	-0.05	0.26***	-

Note:  $n = 221$ . Reliabilities (Cronbach alpha) are reported in bold along the diagonal.

<sup>a</sup>Gender was coded 0 for male, 1 for female.

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\* $p < 0.001$ .

TABLE 3 Multiple regression of turnover intentions on distal and proximal recognition

Variable(s) entered	Model 1.1 Controls	Model 1.2 Main effects
Constant	3.16	3.10
1 Controls		
Gender	0.37	0.36
Age	-0.04**	-0.04**
Organisational tenure	-0.03*	-0.03*
2 Main effects		
Distal recognition	-	-0.15*
Supervisor recognition	-	-0.28***
Physician recognition	-	-0.08
Co-worker recognition	-	0.10
Patient recognition	-	0.01
$R^2$	0.11***	0.26***
$\Delta R^2$	-	0.15***

Note:  $n = 221$ . Unstandardised regression coefficients are reported.

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\* $p < 0.001$ .

## 2.2.4 | Turnover

Voluntary turnover was assessed using hospital records for the period between the first and second year after the administration of the questionnaire. Turnover due to terminations, death, retirement or transfer was excluded from the analysis in order to ensure tests pertained to voluntary turnover decisions.

## 2.2.5 | Control variables

Hypotheses were tested in models that controlled for gender, age and tenure, since prior meta-analytic research has found turnover intentions and turnover behaviour are lower for those who are older and have higher organisational tenure while the results regarding gender are inconclusive (Griffeth et al., 2000).

## 3 | RESULTS

To handle missing data, multiple imputation was applied to the data set (generating 25 data sets containing imputed missing values) and results are pooled across these data sets ( $N = 221$ ). Results presented in the following section and in all tables were derived based on analyses conducted in Mplus, except for the tests of the statistical significance of  $\Delta R^2$  for blocks of variables (see Tables 3 and 4), which were derived based on an inspection of the results for each multiple imputation data set in SPSS (each imputation achieved the level of statistical significance indicated for  $\Delta R^2$  or better). Figure 1 was created in R.

Before testing the hypotheses, we performed a confirmatory factor analysis (CFA) to validate the measurement model. The theoretically specified six-factor model was compared to a series of more parsimonious models that

**TABLE 4** Multiple regression of turnover intentions on polynomial equations of distal and proximal<sup>a</sup> recognition

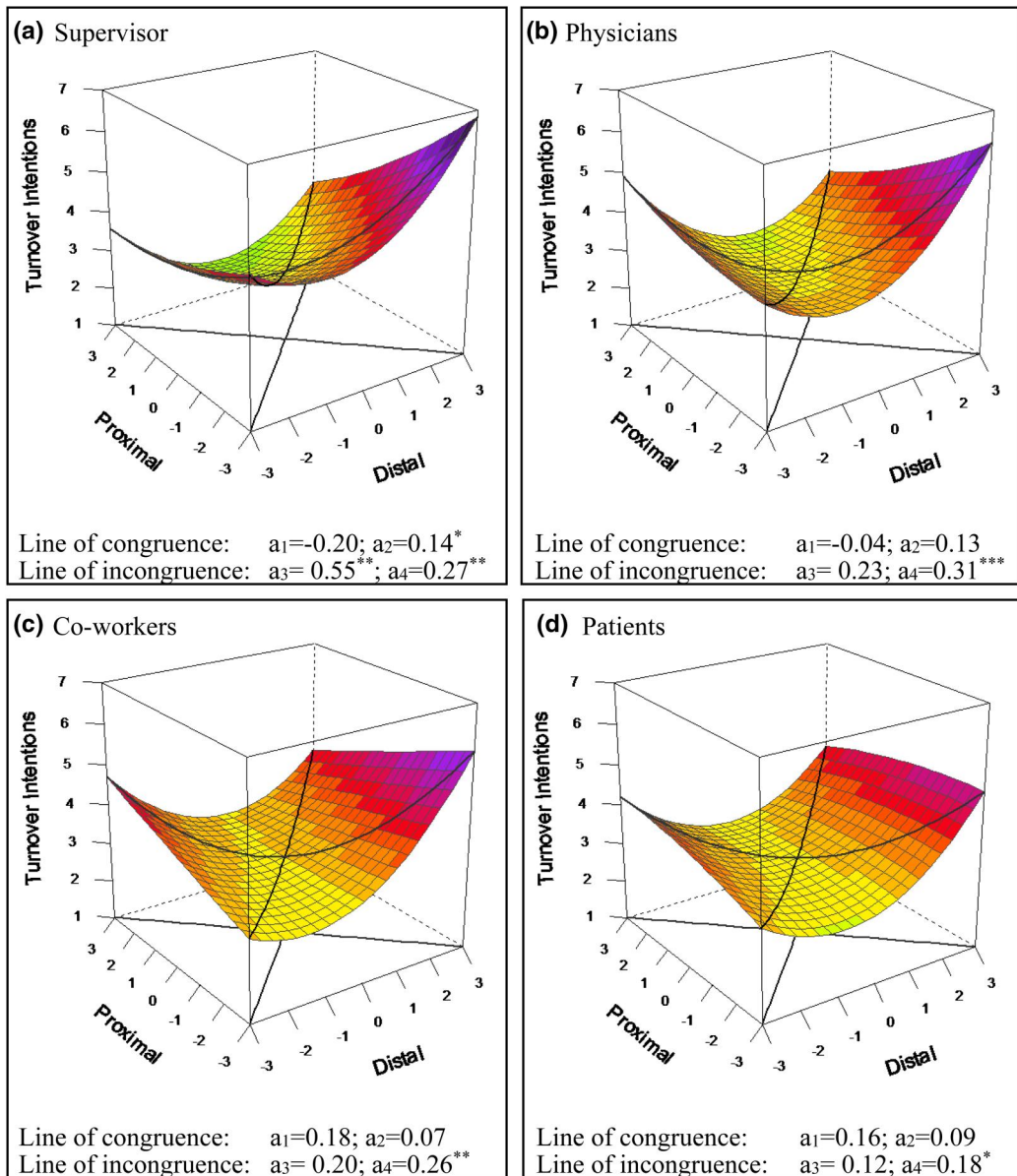
Variables entered	Model 2.1 Controls	Model 2.2 Supervisor recognition	Model 3.1 Controls	Model 3.2 Physician recognition	Model 4.1 Controls	Model 4.2 Co-worker recognition	Model 5.1 Controls	Model 5 Patient recognition
Constant	3.05	2.80	3.30	2.80	3.22	2.99	3.19	2.95
<b>1 Controls</b>								
Gender	0.41	0.44	0.40	0.37	0.42	0.40	0.42	0.40
Age	-0.03**	-0.04**	-0.04**	-0.04**	-0.04**	-0.04**	-0.04**	-0.04**
Organisational tenure	-0.03*	-0.02	-0.03*	-0.03*	-0.03*	-0.03*	-0.03*	-0.02*
Supervisor recognition	-	-	-0.34***	-0.27***	-0.29***	-0.28	-0.32***	-0.29***
Physician recognition	-0.18**	-0.08	-	-	-0.10	-0.09	-0.11	-0.08
Co-worker recognition	-0.05	0.09	0.05	0.07	-	-	0.10	0.08
Patient recognition	0.02	0.04	0.00	0.04	0.04	0.02	-	-
<b>2 Polynomial terms</b>								
b <sub>1</sub> distal recognition		0.17		0.10		0.19		0.14
b <sub>2</sub> proximal recognition		-0.37***		-0.13		-0.01		0.02
b <sub>3</sub> distal recognition <sup>2</sup>		0.17**		0.19***		0.16**		0.15**
b <sub>4</sub> distal rec.* Proximal <sup>a</sup> rec.		-0.06		-0.09		-0.09		-0.04
b <sub>5</sub> Proximal <sup>a</sup> recognition <sup>2</sup>		0.03		0.03		0.00		-0.02
Model R <sup>2</sup>	0.15***	0.29***	0.23***	0.30***	0.24***	0.30***	0.24***	0.29***
ΔR <sup>2</sup>		0.14***		0.07**		0.06**		0.05*
ΔR <sup>2</sup> for the three quadratic terms		0.04*		0.04*		0.05*		0.03*
<b>Line of congruence</b>								
a <sub>1</sub> slope (b <sub>1</sub> + b <sub>2</sub> )		-0.20		-0.04		0.18		0.16
a <sub>2</sub> curvature (b <sub>3</sub> + b <sub>4</sub> + b <sub>5</sub> )		0.14*		0.13		0.07		0.09
<b>Line of incongruence</b>								
a <sub>3</sub> slope (b <sub>1</sub> -b <sub>2</sub> )		0.55**		0.23		0.20		0.12
a <sub>4</sub> curvature (b <sub>3</sub> -b <sub>4</sub> +b <sub>5</sub> )		0.27**		0.31***		0.26**		0.18*

Note: n = 221. Unstandardised regression coefficients are reported.

<sup>a</sup>Proximal recognition source entered in Step 2 is supervisor (Model 2), physicians (Model 3), co-workers (Model 4) and patients (Model 5).

\*p < 0.05; \*\*p < 0.01; \*\*\*p < 0.001.

merged two or more of the constructs. The difference among these (nested) models was examined using standard indicators of absolute and relative fit. The six-factor model (see Table 1) yielded the best fit to the data, outperforming any of the other more parsimonious models.



**FIGURE 1** Response surface plots of the relationships between distal and proximal nonmonetary recognition and turnover intentions. In all 3-dimensional plots, 'Distal' refers to the perceived level of distal organisational recognition. 'Proximal' refers to the level of proximal recognition received from a specific source. Panels are arranged by the specific source of proximal recognition examined: supervisors (Panel A), physicians (Panel B), co-workers (Panel C) and patients (Panel D). \* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\* $p < 0.001$  [Colour figure can be viewed at [wileyonlinelibrary.com](http://wileyonlinelibrary.com)]

The measurement of the focal variables at Time 1 (although obtained from the appropriate source) raises questions about the potential threat of common method variance. Therefore, we examined the possible influence of common method variance using the unmeasured latent method construct approach (Williams & McGonagle, 2016). Results revealed that construct factor loadings did not vary considerably once the common non-theoretically specified variance was removed (average difference in estimates is 0.025; no difference in estimates is greater

TABLE 5 Indirect relationships between polynomial equations of distal and proximal recognition and turnover

	First stage (Block → TI)	Second stage (TI → Turnover)	Indirect effect	95% confidence interval	
				Lower limit	Upper limit
Distal-supervisor	0.43***	0.43**	0.18	0.06	0.31
Distal-physician	0.28***	0.40**	0.11	0.02	0.20
Distal-co-worker	0.25***	0.43**	0.11	0.02	0.19
Distal-patient	0.23***	0.45***	0.10	0.02	0.18

Note:  $n = 221$ ; Standardised regression coefficients are reported. Block = Weighted linear combination of the five coefficients making up the polynomial equation relating distal and proximal recognition source to turnover intentions. While not hypothesised, the estimated total effects of the polynomial equation blocks on turnover are as follows: Distal-Supervisor ( $b = 0.13$ , *ns*), Distal-Physician ( $b = 0.28$ ,  $p < 0.05$ ), Distal-Co-worker ( $b = 0.18$ , *ns*) and Distal-Patient ( $b = 0.14$ , *ns*).

Abbreviation: TI, turnover intentions.

\*\* $p < 0.01$ ; \*\*\* $p < 0.001$ .

than 0.034). Moreover, a chi-square difference test indicated that the fit of a latent factor model in which items cross-loaded on an orthogonal unmeasured latent method construct, as well as on their respective theoretical constructs, did not differ significantly from a more parsimonious model, in which these cross-loadings were fixed at zero. This suggests that method variance is non-significant in our data.

Descriptive statistics, reliabilities and intercorrelations for the study variables are presented in Table 2.

To test our research hypotheses, we conducted a combination of multiple regression (for hypotheses predicting turnover intentions) and probit regression (for hypotheses predicting turnover, since turnover is a dichotomous outcome variable). For Hypotheses 3 through 5, we employed polynomial regression and response surface analysis (see Edwards, 2007; Shanock et al., 2010). To facilitate the interpretation of the polynomial regression and response surface results, we scale-centred all predictors used to conduct these tests by subtracting the mid-point of the scales upon which they were measured. All other variables other than gender were centred at the mean of the sample to facilitate interpretation of the models' intercepts. To estimate indirect effects, we employed the product-of-coefficients approach (using block coefficients to represent the first-stage effect; cf. Edwards & Cable, 2009) and bootstrapped 95% confidence intervals (MacKinnon et al., 2002).

### 3.1 | Hypothesis tests

Consistent with Hypothesis 1, multiple regression parameters (See Table 3, Model 1.2) indicate that perceived distal nonmonetary recognition is negatively and significantly associated with turnover intentions ( $B = -0.15$ ,  $p < 0.05$ ). Regarding proximal recognition from specific sources, only recognition from the supervisor was found to negatively predict turnover intentions ( $B = -0.28$ ,  $p < 0.001$ ), thereby only supporting Hypothesis 2a and rejecting Hypothesis 2b–2d.

Hypotheses 3 through 5 pertain to specific features of the 3-d response surfaces relating the distal and proximal sources of recognition with turnover intentions, which are derived based on five regression coefficients of a polynomial equation: the main effects of distal and proximal recognition, their squared terms and their interaction. However, in order to conduct meaningful tests of response surfaces, the variance in turnover intentions explained by the inclusion of this polynomial equation must be statistically significant (Shanock et al., 2010). Table 4 provides the results of the multiple regression analyses, in which it can be seen that the inclusion of the polynomial equation for each model (reflecting the surface between distal organisational recognition and a specific source of

proximal recognition) explains significant variance in turnover intentions over and above the variance explained by demographic control variables and the main effects of the other sources of proximal recognition (the latter were included to isolate the variance unique to the focal source of proximal recognition of each model). The key features of the 3-d surfaces are the slope and/or curvature of the line of congruence (which runs diagonally along the response surface, from the front where distal and proximal recognition are both low, to the back where they are both high) and the line of incongruence, which runs from the back left (high proximal, low distal) to the front right (low proximal, high distal). These features appear in Table 4 and directly underneath the response surface plots presented in the four panels of Figure 1.

Hypothesis 3a–3d predict that turnover intentions should be lower when distal and proximal recognition are aligned versus when they contrast, which amounts to a test of whether the line of incongruence demonstrates significant upward curvature (a convex surface), that is, a significantly positive  $a_4$  coefficient (Barranti et al., 2017). As indicated in Figure 1, the  $a_4$  coefficient was positive and statistically significant in each comparison, providing evidence that is very consistent with Hypothesis 3.

Hypothesis 4a–4d predict that turnover intentions will be lower when the alignment between distal and proximal recognition occurs at higher levels compared to lower levels, which amounts to a test of whether the line of congruence is significantly downward sloping, that is, a significant negative  $a_1$  coefficient. As depicted in Figure 1, the slope estimates of the line of congruence ( $a_1$ ) are not statistically significant. Interestingly, although the curvature of the line of congruence,  $a_2$ , is not directly related to the test of Hypothesis 4, it is notable that it is significant here with respect to the alignment of distal and proximal recognition from the supervisor and that the specific shape of this curve evidences a steep significant drop when moving from low levels of recognition to moderate levels and a non-significant rise beyond that point. More specifically, although the difference between the predicted turnover intentions of respondents whose perceived distal and proximal recognition (from the supervisor) are both at the minimum of the scale is statistically greater than those of respondents whose alignment occurs at the mid-point of the scale (4.66 vs. 2.8; difference = 1.86, SE = 0.50,  $p < 0.001$ ), this latter level of turnover intentions is not statistically different from that of respondents whose levels of proximal and distal recognition were both at the maximum point on the scale (2.8 vs. 3.47; difference = -0.67, SE = 0.79,  $p = 0.396$ ). Put another way, one could interpret this relationship as exhibiting a negative sloping relationship that reaches a threshold at moderate levels, such that alignment that occurs beyond moderate levels of recognition is associated with comparable levels of turnover intentions. This unexpected finding will be taken up in the discussion.

All other lines of congruence in Figure 1 (panels B through D) are not significantly different from a flat line, that is, neither the slope nor the curvature of any of these lines of congruence differs significantly from zero). This suggests that turnover intentions do not differ significantly based on the level at which alignment of distal and proximal recognition from these three sources occurs. Thus, Hypothesis 4a is partly supported although Hypothesis 4b–4d are rejected.

Hypotheses 5(a-d) predict that turnover intentions are higher when the contrast is such that distal recognition exceeds proximal recognition rather than the inverse, as evidenced by a significantly positive  $a_3$  value. In these response surfaces, only the slope of the line of incongruence for supervisor recognition (Panel A) was significantly positive ( $a_3 = 0.55$ ,  $p < 0.01$ ). Turnover intentions increase more significantly as the level of distal organisational recognition increases (rather than decreases) relative to the level of proximal recognition provided by the supervisor. This evidence is consistent with Hypothesis 5a, yet our prediction was borne out only in relation to proximal recognition from the supervisor. For the other three sources of proximal recognition (Hypothesis 5b–5d), turnover intentions increased comparably with any type of contrast. This unexpected finding will also be taken up in the discussion.

Hypothesis 6 predicts that the effects outlined above regarding the alignment and contrast of distal and proximal sources of nonmonetary recognition indirectly predict turnover via turnover intentions. Indirect effects were thus calculated through a product-of-coefficients approach (MacKinnon et al., 2002), by multiplying the

coefficient representing the first-stage effect (of proximal and distal recognition on turnover intentions) by the coefficient of the second-stage effect (of turnover intentions on turnover). These estimates and bootstrapped confidence intervals for each indirect effect are provided in Table 5.

The single standardised estimates of the first-stage effects for each source in Table 5 were derived using block variables, as is the recommended practice when calculating indirect effects using polynomial regression and response surface analysis (see Edwards & Cable, 2009). These values are comparable to path coefficients and appear for each model under the first-stage column in Table 5. It is worth noting that the standardised value of a block variable is always positive. Therefore, it is not interpreted directionally but, rather, as an indicator of the absolute size of the combined influence of the complete block of variables (see Edwards & Cable, 2009). The estimates of the second-stage effects were derived from standardised probit regression parameters of the relationship between turnover intentions and turnover, controlling for the respective block variable and the respective control variables as in Table 4. The indirect effects in Table 5, each of which is statistically significant, provide support for Hypothesis 6.

## 4 | DISCUSSION

This research makes a number of contributions. First, we have proposed a model integrating a fragmented literature on nonmonetary recognition. Had we restricted our analysis to main effects, our results would suggest that turnover intentions are lower among caregivers who perceive distal nonmonetary recognition from the organisation and proximal recognition from supervisors. These results are consistent with the notion that recognition is part of a social exchange mechanism, which can curtail turnover intentions and actual turnover (Paré & Tremblay, 2007). There were no direct relationships established between the other proximal sources of recognition and turnover intentions, suggesting that, much like patient recognition (Ashley et al., 1999), recognition from co-workers and physicians may not be an expectation of caregivers and, thus, while it may influence positive experiences at work more generally, it is insufficient on its own to influence turnover cognitions.

Our study contributes new insights by showing how the aforementioned main effects provide an incomplete picture, since we found the effects of distal and proximal recognition (from multiple sources) on turnover intentions vary by the way that they align or contrast with each other. Specifically, employees whose perceptions of distal and proximal recognition are more aligned have lower thoughts of quitting and, indirectly, are actually less likely to voluntarily quit, compared to employees whose perceptions of distal and proximal recognition contrast. This importance of aligned perceptions of distal and proximal recognition applies to all sources of proximal recognition examined, including supervisors, physicians, co-workers and patients. For the latter three sources of proximal recognition, alignment itself—irrespective of the level of recognition at which this alignment occurs—is associated with lower levels of turnover intentions than contrasts. A social exchange theory argument, which would hold that receiving more recognition should be associated with lower turnover intentions than receiving less, is insufficient to explain this result. As such, we suggest that our findings help extend existing thinking about nonmonetary recognition, away from a pure social exchange explanation toward an improved understanding that integrates sense-making mechanisms involved in the turnover process, particularly pertaining to how contrasts can prompt employees to reconsider their organisational attachment. Our results are consistent with the notion that contrasts between distal and proximal recognition are more likely to be noticed and prompt thoughts of quitting whereas alignment, even when denoting a general lack of recognition, is less likely to provoke active questioning of the employment relationship such that the status quo (staying in one's job) remains the default intention (Mitchell & Lee, 2001). Future research should pursue this line of inquiry further.

Our results also suggest that proximal recognition provided by the supervisor (compared to the other sources) exhibits unique relationships with turnover intentions when it combines in two specific ways with distal

organisational recognition. First, regarding alignment, when proximal supervisory recognition and distal organisational recognition were both perceived to be low, caregivers held higher turnover intentions as compared to when both types of recognition were perceived to be moderate-to-high. Second, nonmonetary recognition from the supervisor was the only source of proximal recognition for which the effects of contrast differed depending on the way such recognition compared with distal organisational recognition. More specifically, turnover intentions increased more rapidly when proximal supervisory recognition was deficient relative to distal organisational recognition compared to when it exceeded distal organisational recognition. This pattern did not hold for the other sources of recognition, for which the positive associations between turnover intentions and increased contrast with distal organisational recognition were comparable regardless of whether proximal recognition was higher or lower than distal recognition. This suggests that only proximal supervisory recognition can succeed in keeping turnover intentions relatively low despite low levels of distal recognition. Proximal recognition from the other three sources not only fails to compensate for low distal organisational recognition but, on the contrary, appears to cast the employing organisation in an even more negative light by highlighting the very deficiency of the HR practice.

A potential explanation for the fact that both these effects were unique to supervisors is that employees are particularly sensitive to their treatment by supervisors and especially yearn for their recognition, perhaps not surprising since supervisors represent an embodiment of the organisation (Eisenberg et al., 2010). Thus, when supervisory recognition and distal organisational recognition are both deficient, this pattern of alignment sends a strong albeit a negative signal—that employees' contributions are generally not valued by the organisation—which appears impossible to ignore.

Moreover, these findings are also consistent with the general notion that 'bad' (negative) information is stronger than 'good' (positive) information in shaping people's beliefs (Baumeister et al., 2001). First, the unexpected curvilinear effect along the line of congruence between distal recognition and proximal recognition from the supervisor suggests that it is much more important for hospitals to ensure that distal recognition practice is provided, and supported by front-line supervisors' specific acts of recognition, at moderate levels than it is necessary to offer very high levels of such aligned recognition. Indeed, it is only when these forms of recognition were jointly deficient that we noted an increased level of turnover intentions. This suggests that employees are more sensitive to the lack of recognition than they are to the provision of recognition beyond moderate levels. Second, faced with a contrast between distal and proximal recognition, the caregivers in our sample appear to assign more weight to the part of the contrast that is sending them a negative signal. When distal recognition is perceived to be widely available from the organisation (good), caregivers' turnover intentions rise due to their relatively deficient perceptions of proximal recognition (bad). When the contrast is such that they actually do receive high levels of proximal recognition from those in their social environment (good), caregivers' turnover intentions increase, apparently due to the relative lack of distal organisational recognition (bad). In other words, regardless of the nature of the contrast, a negativity bias appears to be overriding their interpretations. These findings also underscore the utility of social information processing theory in understanding HR practice perception and, in particular, support the idea that proximal organisational constituents can affect perceptions of nonmonetary recognition by structuring employees' attentional processes (Jiang et al., 2017). Indeed, by virtue of proximal sources actually providing employees with nonmonetary recognition and/or talking about it, this can make the practice provided by the organisation more salient to employees and direct their attention to it (especially the lack thereof), which ultimately undermines HR practice effectiveness and transpires into negative behavioural consequences.

Beyond the core contributions elucidating the effects of alignment and contrasts in nonmonetary recognition on turnover intentions, the present study also shows how these effects are indirectly linked to actual turnover two years later. This indicates the predictive validity of the focal variable, turnover intentions. In so doing, it highlights the importance of intentions in existing conceptual models of recognition (Brun & Dugas, 2008).



## 4.1 | Practical implications

Our study provides unique practical insights for human resource practitioners and hospital administrators. It has been advised in prior research that instilling recognition practices can alleviate withdrawal behaviour. However, our results suggest two important refinements of this advice. First, our results suggest that it is much more important for the organisation to avoid the error of not providing recognition, both distally through organisational practices and proximally through supervisory support of these practices, than it is for it to provide high levels of recognition. This is important for human resource managers to realise to the extent that time, attention and other resources that would need to be spent on providing high levels of recognition could be marshalled toward other initiatives.

Second, while our results highlight that supervisor recognition can somewhat compensate or substitute for distal recognition practice that is lacking, they also suggest that recognition from physicians, co-workers and patients does not have the same compensating role. Rather, when caregivers perceive that these constituencies provide them with recognition, but the organisation does not, this can cast the organisation in a negative light, as it amplifies the message that the organisation does not value their special status impression, with consequent decreases in their loyalty to remain. For this reason, human resource managers must be attuned to the degree to which caregivers receive recognition from various sources. To the extent that caregivers receive ample amounts of recognition from proximal sources, human resource managers would be well advised to ensure that their implementation of distal recognition practice is aligned with such levels of recognition to avoid being seen as relatively deficient in this regard. On the other hand, to the extent that recognition from such sources is seen as relatively lacking compared to what the organisation provides distally, an important and practical measure to retain caregivers would be for human resource managers to find ways to involve various internal constituencies (including supervisors, physicians and co-workers) to formally and spontaneously congratulate employees who tackle work-related challenges, and to encourage patients to devise thank-you letters to show gratitude for high-quality patient care (Brun & Dugas, 2008).

## 4.2 | Limitations and directions for future research

This study is not without its limitations. Our model is admittedly underspecified with respect to the prediction of turnover intentions since we have not statistically controlled for the possible influence of other aspects of the working environment—such as HR practices (including pay) or social resources (e.g., social support). Another potential limitation of our study concerns the possible interdependency that exists between our sample participants who may be nested within the same department and/or have the same supervisor. While the robustness of these effects should be tested in future research that examines them alongside the effects of other established predictors of turnover intentions and behaviour, it is our hope that our novel approach to studying the interplay between distal and proximal sources of recognition will help integrate the two fragmented streams represented in prior research on nonmonetary recognition and move this and other research on the impact of HR practices on turnover processes in new directions. Future research should also seek to generalise our findings to other contexts beyond healthcare and uncover additional intermediary variables such as impaired well-being and motivation arising from deficient recognition which could also kick-start the withdrawal process.

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## CONFLICT OF INTEREST

There is no conflict of interest and funding associated with this manuscript.

## DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available from the corresponding author upon reasonable request.

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