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Coming to work with an illness: The role of high-involvement work systems and individual competence on presenteeism

Journal:	<i>Employee Relations</i>
Manuscript ID	ER-10-2022-0491.R2
Manuscript Type:	Research Paper
Keywords:	Presenteeism, High-involvement work systems, Competence, Job demands resources model

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3 **Coming to work with an illness: The role of high-involvement work systems and**
4 **individual competence on presenteeism**
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7 **Abstract**
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10 **Purpose** - This paper aims to examine the effect of high-involvement work systems (HIWS)
11 on completing work and avoiding distraction as two dimensions of presenteeism. It also
12 investigates competence as a mediator of the effect of HIWS on presenteeism.
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15 **Design/methodology/approach** - Data were collected from 343 Bangladeshi bank employees
16 using an online survey. The partial least squares structural equation modelling (PLS-SEM) was
17 employed to assess the abovementioned linkages.
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21 **Findings** - The findings demonstrate HIWS directly avoid distraction but do not significantly
22 impact the completing work dimension of presenteeism. The findings also indicate that
23 competence mediates the effect of HIWS on completing work but not on avoiding distraction.
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27 **Originality/value**- Drawing on the job demands-resources (JD-R) model, this study
28 empirically demonstrates the **contrasting** role of HIWS in completing work and avoiding
29 distraction related to presenteeism. It also provides a novel perspective on the unexplored
30 mediating mechanism of competence on the relationship between HIWS and presenteeism and
31 offers new directions for HIWS and presenteeism research.
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35 **Keywords** Presenteeism, High-involvement work systems, Competence, Job demands
36 resources model.
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40 **Paper type** Research paper
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Introduction

Presenteeism has become an important concern for practitioners and researchers in occupational health and human resource management because of its relevance to employee health and organizational performance (Cooper and Lu, 2016). Presenteeism is recognized as increasing financial costs to organizations and regarded as negative employee behaviour. The annual cost of presenteeism to the UK economy was recently estimated at £15.1 billion (Karanika-Murray *et al.*, 2021). However, concentrating presenteeism narrowly in terms of productivity loss restricts knowledge advancement in this area (Johns, 2010). Research has shown that attending work while unwell does not result in adverse outcomes when managed appropriately, with work roles and the work environment adapted to enable beneficial rather than harmful health effects (Whysall *et al.*, 2018; Wu and Lu, 2022). Therefore, the emphasis should not be on avoiding presenteeism but on ensuring that attending work is restorative, considering personal factors (like health status) and work environments (Johns, 2010).

Presenteeism is defined as “employees’ ability to focus on work without being distracted by health problems” (Koopman *et al.*, 2002, p. 19). Employees have a choice whether to attend work despite their illness, and the choice between presenteeism and sickness absenteeism is asymmetric (Karanika-Murray and Biron, 2020). The notion of functional presenteeism is positive because it can represent employees’ purposeful and adaptive behaviour (Karanika-Murray and Biron, 2020). However, the majority of research in this area has treated presenteeism as an unwelcome behaviour leading to neglect of its adaptive potential (Karanika-Murray and Biron, 2020). Furthermore, there remains a lack of uniformity in measuring presenteeism, where heavy reliance on frequency metrics limits our knowledge of presenteeism (Ruhle *et al.*, 2020). According to Cooper and Lu (2016), the extant literature on presenteeism has overlooked the underlying psychological process of why people attend work while sick. As a result, less emphasis is placed on work conditions (Whysall *et al.*, 2018) that may be necessary for presentees to recover from illness and return to work. Karanika-Murray and Biron (2020, p. 244) suggest “If managed well and supported with adequate resources, attending work during illness has the potential to benefit health and performance.” Little research conceptualizes presenteeism at the intersection of employees’ health and performance demands, and we know less about what organizational resources can be utilized in overcoming these challenges (Karanika-Murray *et al.*, 2021; Whysall *et al.*, 2018).

Studying the antecedents of presenteeism is essential for several reasons. First, research on the antecedents of presenteeism can provide insights into the factors that contribute to this phenomenon, such as job demands and individual characteristics (Collins and Cartwright,

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3 2012; Ruhle *et al.*, 2020). Second, by identifying the factors contributing to presenteeism,
4 practitioners can develop appropriate interventions and HR policies to support chronically ill
5 workers and manage workplace presenteeism effectively (Nazarov *et al.*, 2019). Third, a clear
6 understanding of the factors that contribute to presenteeism will further enhance the
7 development of measurement tools that accurately capture presenteeism as coping behaviour
8 under resourceful work environments (Gerich, 2019). Finally, research on the antecedents of
9 presenteeism can contribute to return to work and HRM literature by providing insights into
10 how work-related factors affect employee health and well-being (Karanika-Murray and Biron,
11 2020; Schloemer-Jarvis *et al.*, 2022).

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19 Job resources can include “a range of psychosocial (job control, social support, rewards,
20 etc.) and organizational characteristics.” (Karanika-Murray and Biron, 2020, p. 251).
21 Resourceful work environments can support to chronically ill employees who may encounter
22 variations in their symptoms or require regular medical appointments, by providing them with
23 flexible work arrangements, such as adaptable working hours. Such arrangements can enable
24 employees with chronic illnesses to manage their health challenges while also fulfilling job
25 responsibilities (Bergström *et al.*, 2020; Goto *et al.*, 2020; Nazarov *et al.*, 2019; Wu and Lu,
26 2022). The current study focuses on high-involvement working, which refers to “an ongoing
27 experience of high levels of influence over the decisions that affect the work process, identified
28 through worker perceptions of their jobs and their working environment” (Boxall and
29 Winterton, 2018, p. 30).

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37 High-involvement work processes (HIWPs) are associated with the ways people perform
38 their works in organizations (Boxall *et al.*, 2019) and lead to high-involvement work systems
39 (HIWS) “when implementations of HIWPs are accompanied by companion investments in
40 human capital – for example, in better information and training, higher pay and stronger
41 employee voice” (Boxall *et al.*, 2019, p. 1). Lawler (1986) coined the term ‘high-involvement’
42 to refer to a management style characterized by commitment and participation. High-
43 involvement work is diametrically opposed to Taylorism, “a process of centralising decision
44 making and problem solving in the hands of management” (Boxall and Macky, 2009, p. 9).
45 The high-involvement work model is an important pathway to improve job quality and
46 influence work processes such as control in designing work tasks (Boxall and Winterton, 2018).
47 A high degree of involvement at work benefits employees by increasing their decision-making
48 authority, facilitating skill development through training, and providing adequate remuneration
49 (Boxall *et al.*, 2019).
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3 The conceptual framework of the high-involvement model incorporates elements of the
4 PIRK model (Lawler, 1986) involving power, information sharing, rewards and knowledge.
5 Implementing greater employee involvement requires higher investment in human capital
6 synergistically, easing access to knowledge, information sharing, and competence
7 development, encouraging greater participation at work, and ensuring employees feel rewarded
8 for doing so (Boxall and Winterton, 2018). Based on the PIRK model, previous studies
9 included a list of practices that promote high levels of employee involvement (Boxall *et al.*,
10 2015; Riordan *et al.*, 2005; Vandenberg *et al.*, 1999). As suggested by Boxall *et al.* (2019), this
11 study comprehensively captures all four components of the HIWS construct
12 (power/empowerment, information sharing, rewards and knowledge/training).
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20 Working with a high level of involvement allows for more job autonomy, information
21 sharing, training and rewards, each of which represent job resources (Demerouti *et al.*, 2019).
22 Employees' experience of high-involvement working is associated with different employee
23 outcomes, such as job satisfaction, organizational commitment, citizenship behavior, job
24 insecurity and mental health (Boxall *et al.*, 2019). However, the association between HIWS
25 and employee presenteeism remains unexplored in the extant literature. Drawing on JD-R
26 model (Bakker and Demerouti, 2017), the present study aims to address this gap. Employees
27 with greater resources can better deal with work demands and health challenges, so HIWS
28 might equip employees to manage presenteeism more effectively. We further propose that the
29 relationship between HIWS and presenteeism is mediated by competence.
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38 Early versions of the JD-R model focussed on features of work environments (Demerouti *et*
39 *al.*, 2019). Later versions brought personal resources into the JD-R model, explicitly
40 recognizing the crucial connection between individual and environmental elements affecting
41 human behaviour (Schaufeli and Taris, 2014). According to the JD-R model, competence
42 represents personal resources and/or strength that can bolster job resources (Bakker and
43 Demerouti, 2017). The dynamic model of presenteeism offered by Johns (2010) highlights the
44 importance of individual factors (e.g., competence) related to presenteeism. Competent
45 employees can mobilize more resources and show greater resilience in the face of deteriorating
46 personal health to keep their health and productivity in a condition of functional presenteeism
47 (Karanika-Murray and Biron, 2020; Taris and Kompier, 2004). Individuals play a central role
48 in the decision-making of presenteeism (Collins and Cartwright, 2012). Individual competence
49 can promote advantageous conditions that allow employees to assess the existing work
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3 resources and thus determine whether they can continue working despite health problems
4 (Johns, 2010).
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6 Using personal resources (i.e., competence) as mediating factors in the association between
7 HIWS and presenteeism is consistent with the JD-R model (Xanthopoulou *et al.*, 2007). It
8 provides a theoretical basis for understanding how job resources can lead to positive work
9 outcomes through individual coping mechanisms (Karanika-Murray and Biron, 2020).
10 Personal competence can mediate the relationship between HIWS and presenteeism in several
11 ways. First, personal competence embodies the skills and knowledge employees need to
12 perform their duties effectively (Borst *et al.*, 2019; Le Deist and Winterton, 2005). As a result,
13 competent employees are less likely to experience stress and exhaustion, which are key
14 precursors of presenteeism (Johns, 2010; Lohaus and Habermann, 2019). Second, personal
15 competence can enable employees to adapt to new and changing job demands (Katou *et al.*,
16 2022). HIWS often require employees to take on new roles and responsibilities, which can be
17 stressful and overwhelming if they lack the requisite skills and knowledge (Kilroy *et al.*, 2020;
18 Oppenauer and Van De Voorde, 2018). However, employees with a strong sense of personal
19 competence are more likely to feel confident adapting to these changes (Borst *et al.*, 2019;
20 Riordan *et al.*, 2005; Xanthopoulou *et al.*, 2007). Third, personal competence can enable
21 employees to seek out and utilize social support from colleagues and supervisors (Anderson-
22 Butcher *et al.*, 2016). HIWS often involve collaborative decision-making and problem-solving,
23 which can be facilitated by strong social networks and supportive work relationships (Boxall
24 and Winterton, 2018). Employees' social competence enables them to establish and maintain
25 these relationships, reducing the likelihood of becoming distracted by health challenges
26 (Lorente *et al.*, 2008). By enhancing personal competence, HIWS can increase the likelihood
27 of completing work and avoiding distractions caused by presenteeism, enabling employees to
28 cope with job demands, adapt to new situations, and utilize social support.
29

30 Our study contributes to the existing literature in several ways. First, this study examines
31 presenteeism with two-dimensional components: accomplishing tasks and avoiding distraction
32 at work (Koopman *et al.*, 2002, p. 19). Such an approach contributes further to understanding
33 presenteeism at the interaction between health and performance demands (Karanika-Murray *et al.*
34 2021). Second, this study extends previous research on HIWS by recognizing the vital role
35 of job resources in performing tasks and overcoming health constraints. Third, this study
36 intends to broaden JD-R model of employee presenteeism (Figure 1) by incorporating job and
37 personal resources as potential mechanisms for effectively managing job demands and
38 addressing health-related challenges (Bakker and Demerouti, 2017; Karanika-Murray *et al.*,
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2021). Fourth, this study examines the mediating role of competence, thereby explicating how individual competence can serve as a coping mechanism to facilitate the availability of sufficient resources with HIWS to manage presenteeism effectively in the workplace.

In the remainder of this paper, we hypothesize the effect of HIWS on presenteeism. Following that, we make a case for competence as a critical mediator in this relationship. After presenting the methodology, analysis and findings, we provide a summary discussion, including implications for management, limitations and opportunities for future research.

Development of hypotheses

HIWS and presenteeism

Presenteeism is a deliberate and adaptive behaviour in the sense that whether employees continue to work despite their health concerns is more dependent on individual decisions (Karanika-Murray *et al.*, 2021). Existing research argues that continuing to attend work might be more beneficial when employees experience common health problems or non-contagious diseases (Chen *et al.*, 2021). First, common health issues may not be sufficiently severe to prevent individuals from working, and second, work can serve as an excellent vehicle for promoting an individual's health and well-being (Whysall *et al.*, 2018). Work characteristics, including social and physical work environments, may help sick employees strengthen their self-esteem, divert focus away from existing health difficulties and improve their employability (Lohaus and Habermann, 2019). Whysall *et al.* (2018) argue that individuals gain a sense of accomplishment through continuing work, whereas worklessness can reduce self-esteem, harming health and well-being.

Managing presenteeism in the workplace entails regular monitoring, identifying high-risk presentees and facilitating resources to maintain a functional state (Chen *et al.*, 2021; Collins and Cartwright, 2012). Biron and Saksvik (2010, p. 81) suggest that "employees with mental health problems who are exposed to a positive psychosocial work environment could find the routine provided by work and a supportive climate to be helpful even though their productivity is impaired while on the job with a mental illness." Continuing to work while ill can be beneficial when employees have a less severe illness, have adequate job resources and do not have excessive job demands (Bergström *et al.*, 2020).

Several previous studies analysed presenteeism using a single-item frequency measure (Ruhle *et al.*, 2020). For instance, respondents were asked how many times in the previous 12 months they continued to work while ill. This approach may underestimate the severity of

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3 presentees' illnesses and performance concerns. Some presentees might not consider that
4 mental illness is a legitimate reason for absence or that working exacerbates illness (Karanika-
5 Murray *et al.*, 2021). To cover presenteeism comprehensively, this study considered two
6 dimensions based on Koopman *et al.* (2002). First, completing work denotes the amount of
7 work completed despite some form of presenteeism impact (Martinez and Ferreira, 2012).
8 Second, avoiding distraction refers to the ability to concentrate on tasks in the face of
9 presenteeism (*ibid.*). Completing work focuses on output of the task, whereas avoiding
10 distraction indicates task processes (*ibid.*). Employees who score higher on completing work
11 and avoiding distraction are affected less by health and performance demands and can deal
12 with the presenteeism (*ibid.*).
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21 The meta-analysis by Miraglia and Johns (2016) shows that the degree of job control affects
22 an individual's health. Work groups with increased authority and responsibility establish norms
23 that encourage less withdrawal behaviour because co-workers will cover absence (Böckerman
24 *et al.*, 2012). When employees have greater resources and support to deploy discretion,
25 employee involvement will decrease absenteeism (Collins and Cartwright, 2012). Goto *et al.*
26 (2020) demonstrate that support from co-workers and supervisors, increased job control and
27 reduced job demands are all highly associated with lower presenteeism risks. Bakker *et al.*
28 (2005) show that job resources (i.e., autonomy, social support, good supervisory relationships
29 and performance feedback) can help to mitigate the effects of work overload on burnout. A job
30 featured with work overload, emotional and physical job demands, and work-home conflict
31 can increase individual exhaustion and cynicism. A higher level of job resources, on the other
32 hand, reduces the detrimental effects of job demands on employee burnout (Bakker *et al.*,
33 2005).
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43 Continuing to work while ill may have a detrimental effect on individual health if employees
44 are exposed to demanding work situations (i.e., high job demands and low job control).
45 However, resourceful and positive psychosocial work environments that provide adaptation
46 and rehabilitation at work may reduce the adverse health effects of presenteeism (Wu and Lu,
47 2022). Bergström *et al.* (2020, p. 4711) note that "employees with presenteeism who reported
48 more available job resources in terms of high job control and support or employees reporting
49 lower job demands showed better future general health than a reference group with the same
50 amount of presenteeism but with less job control/support or higher demands at work,
51 respectively."
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58 Jacobs *et al.* (2013, p. 1587) defined a psychosocial work environment as "interpersonal and
59 social interactions that influence behaviour and development in the workplace." (A supportive
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3 psychosocial work environment can help individuals cope with work-related stress and
4 improve their health (Jacobs *et al.*, 2013). Common mental disorders (CMDs) (i.e., anxiety and
5 depression) can result in extended periods of sickness absence (Lau *et al.*, 2016). Employees
6 with CMD can attend work as a coping technique to avoid deteriorating health problems and
7 long-term absences. Lau *et al.* (2016) found patients fully working reported work demands at
8 the same level as partially working patients and that employees with CMD found it easier to
9 adjust their work when it featured greater autonomy and less stringent requirements.
10 Schloemer-Jarvis *et al.* (2022, p. 36) similarly suggest that for people with disabilities, HIWP
11 can be considered a ‘necessity’.

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19 Bäckerman *et al.* (2012) showed high-involvement management practices could lower the
20 chances of workplace injury and sickness. HIWPs improve employees’ functional levels and
21 prepare them to cope with increased performance demands and job stress, so they experience
22 less burnout (Kilroy *et al.*, 2020). An organization’s positive psychosocial work factors have a
23 substantial impact on an individual’s decision to continue working despite illness (Janssens *et*
24 *al.*, 2016). Similarly, HIWS that function as resources may facilitate adjustment to health and
25 performance demands of presentees. Therefore, we propose:

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31 *H1*: High-involvement work systems are positively related (a) to completing work and (b)
32 to avoiding distraction as two dimensions of presenteeism.

33 34 35 36 **The mediating role of competence**

37 Competence is a multifaceted concept denoting an individual’s capacity to understand job
38 tasks, and to execute them successfully in a social context (Le Deist and Winterton, 2005).
39 Extant reviews (e.g., Salman *et al.*, 2020) confirm the multi-dimensional character of
40 competence. This study employs the holistic competence model comprising cognitive,
41 functional and social competence (Le Deist and Winterton, 2005). Cognitive competence refers
42 to underpinning theoretical and procedural knowledge contextualized in work practices.
43 Functional competence indicates task expertise and occupation-specific skills. Social
44 competence is related to behavioural characteristics required to execute tasks successfully
45 (Islam and Amin, 2022).

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HIWS may relate to employee outcomes through an indirect pathway. For example, the
cognitive mediating pathway derives from the principle that HIWS “allow organizations to take
greater advantage of the skills and abilities their employees already have” (Vandenberg *et al.*,
1999, p. 304). High-involvement employees are equipped with adequate competence because

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3 they have an opportunity to undertake tasks with discretion and utilize existing work
4 opportunities (Boxall *et al.*, 2015).

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6 Competence includes personal resources, individual attributes connected with resilience and
7 the capacity to be activated by the work environment (Miraglia and Johns, 2016;
8 Xanthopoulou *et al.*, 2007). Competence is related to employee presenteeism, which is “aimed
9 at facilitating adaptation to work in the face of compromised health” (Karanika-Murray and
10 Biron, 2020, p. 245). Employees are not just passive recipients of their health concerns, but
11 may proactively adapt work activities to balance job demands and address health concerns
12 (Collins and Cartwright, 2012; Taris and Kompier, 2004). To some extent, employees can
13 control their work settings via cognitive interpretation and deliberate behaviour (Demerouti *et*
14 *al.*, 2019).

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16 Presenteeism can vary depending on individual capability (Johns, 2010). For instance, an
17 individual’s competence to cope with stressful circumstances, and increased work demands is
18 crucial when assessing problematic situations such as job-related illness (Lu *et al.*, 2014).
19 According to the JD-R model, individuals with a high level of personal resources stay
20 optimistic in the face of unpredictable circumstances (Bakker and Demerouti, 2017). Personal
21 resources mitigate the negative effects of job demands on stress and amplify the positive
22 benefits of job demands on motivation (Taris and Kompier, 2004). For example, Lorente *et al.*
23 (2008) found that teachers’ emotional and mental competencies serve as personal resources
24 helping them avoid burnout and increasing job engagement.

25
26 Research has underlined a combination of individual competence and flexible work
27 resources to explain circumstances in which presentees can adjust to work and reduce health
28 and performance demands (Bergström *et al.*, 2020; Collins and Cartwright, 2012; Karanika-
29 Murray and Biron, 2020; Miraglia and Johns, 2016). Specifically, HIWS facilitate greater job
30 resources that improve employee competence. Accordingly, the acquired cognitive, functional
31 and social competence helps employees continue working and avoid distractions caused by
32 health problems. Therefore, we propose:

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34 *H2*: Competence will mediate the positive relationship between high-involvement work
35 systems and (a) completing work and (b) avoiding distraction as two dimensions of
36 presenteeism.

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Methodology

Participants and procedure

The banking sector in Bangladesh comprises 61 scheduled banks, classified into three categories: private commercial banks (PCBs); specialized banks (SBs); and state-owned commercial banks (SCBs). Either private entities or individuals own the 52 PCBs, while the Government of Bangladesh owns the SCBs. The Government also controls the three SBs catering for specific needs, such as agricultural or industrial development (Bangladesh Bank, 2021).

Data were collected from November 2020 to February 2021 through an online survey distributed via email. A sample of Bangladeshi bank employees was selected from a network of employees who had participated in education programmes of the Bangladesh Institute of Bank Management (BIBM). All Bangladeshi banks are affiliated to the BIBM, a national institute that conducts research and educates bankers (BIBM, 2021). The survey questionnaire was in English. A Bengali-translation of the questionnaire was also provided using back-translation techniques. The questionnaire was installed on Survey Monkey with an information page explaining the research purpose, survey participation, and possible benefits. Participation in the survey was voluntary and solely for academic purposes. After piloting with a sample of 45 individuals, the research instrument was slightly modified in both English and Bengali based on respondents' feedback. In the first phase of data collection (November-December 2020), 2,356 bank employees were contacted to participate in the online survey and a reminder message was sent in the second phase (January-February 2021). Of the total 426 responses received, after excluding incomplete responses, 343 remained for further analysis representing a response rate of 14.5%.

Measures

The study used valid and reliable measures drawn from existing literature. All scale items were measured using a five-point Likert scale (1 = strongly disagree, 5 = strongly agree).

HIWS: Four dimensions of HIWS were measured using the scale proposed by Riordan *et al.* (2005). This scale had three items focussing on empowerment (Cronbach alpha of 0.87), six items focussing on information sharing (Cronbach alpha of 0.86), five items relating to rewards (Cronbach alpha of 0.85), and four items relating to training (Cronbach alpha of 0.89). The sample items included "I have enough freedom over how I do my job" (empowerment), "The channels for employee communication with top management are effective" (information

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3 sharing), “Generally, this organization rewards employees who make an extra effort”
4 (rewards), and “I receive sufficient training to do my job” (training).
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6 *Competence:* Overall competence was classified into cognitive, functional, and social
7 competence. First, we measured cognitive competence using a four-item scale developed by
8 Colakoglu (2011). One sample item was “I know exactly what kinds of tasks or projects
9 motivate me”. The scale reported a Cronbach alpha of 0.76. Second, employees evaluated
10 functional competence by an adapted six-item scale developed by Colakoglu (2011), which
11 had a Cronbach alpha of 0.87. One sample item was “I have job-related knowledge and skills
12 that I can easily apply or transfer to other employment settings”. Third, we measured social
13 competence using an adapted five-item scale developed by Anderson-Butcher *et al.* (2016),
14 which had a Cronbach alpha of 0.90. One sample item was “I assist my colleagues working in
15 the bank”.

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24 *Presenteeism:* We measured two dimensions of presenteeism using Koopman *et al.* (2002).
25 The scale had three items relating to completing work and three focusing on avoiding
26 distraction. The reliability score (i.e., Cronbach alpha) ranged between 0.780 and 0.815
27 (Martinez and Ferreira, 2012). The sample item included, ‘Despite having my health problem,
28 I was able to finish hard tasks in my work’ (completing work), ‘My health problem distracted
29 me from taking pleasure in my work’ (avoiding distraction).
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34 Common method bias (CMB) can occur in survey research when researchers collect all data
35 using the same method at a single point in time (Podsakoff *et al.*, 2012). We performed
36 Harman’s single factor test to evaluate the proportion of the variance in our data explained by
37 one factor. The results show 23.06% total variance explained by one factor. As the single factor
38 explains less than 50% variance, the result suggests CMB is not a serious concern of this study.
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45 **Data analysis and Results**

46 Descriptive statistical analysis using SPSS v.24 showed approximately 67% of respondents
47 were affiliated to PCBs, approximately 29% of respondents were associated with SCBs, and
48 only 4% of participants were affiliated to SBs. Around 90% of respondents were male, which
49 reflects the demography of the Bangladeshi banking sector. Sobhani *et al.* (2021) found that
50 males represented about 85% of respondents in their study. Approximately 53% of respondents
51 were aged 25-34, and 39% were aged 35-44. Regarding job experience, 34% of respondents
52 had more than 10 years, followed by 24% with 1-3 years, 17% with 7-9 years, 14% with 4-6
53 years and 11% with less than 1 year. Finally, 87% of the participants in this study had a master’s
54 degree, compared to just 11% with a bachelor’s degree.
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3 The current study used partial least squares structural equation modelling (PLS-SEM) as the
4 primary data analysis tool (Ringle *et al.*, 2015). PLS-SEM is suitable for hierarchical
5 component models (HCM) with higher and lower order constructs (Hair *et al.*, 2019). To assess
6 HCM, we used the disjoint two-stage technique (Sarstedt *et al.*, 2019). The reliability and
7 validity of the first-order measurement model were examined in isolation from higher-order
8 constructs. Then latent scores of first-order components were saved to evaluate the
9 measurement model with higher-order constructs (Sarstedt *et al.*, 2019). Mihail and
10 Kloutsiniotis (2016) used a similar two-stage approach to establish HCM with reflective-
11 formative constructs. Our proposed model included reflective-formative hierarchical
12 constructs, so it was suitable to use the PLS-SEM composite factoring approach to assess the
13 model (Becker *et al.*, 2012; Sarstedt *et al.*, 2019).
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16 We used reflective and formative approaches to develop two multi-dimensional constructs,
17 HIWS and competence, based on theory. HIWS comprise four components (empowerment,
18 information sharing, rewards, and training) (Boxall *et al.*, 2019), while competence includes
19 cognitive, functional, and social dimensions (Le Deist and Winterton, 2005). To specify and
20 estimate second-order constructs, we used HCM, which allows us to match the level of
21 abstraction of the predictor and criterion variables in the conceptual model (Becker *et al.*,
22 2012). In the two-stage approach, we used a reflective-formative model II, which posits that
23 the first-order constructs do not share a common cause and are reflectively measured, meaning
24 they are measured by multiple indicators that reflect the underlying construct. We combined
25 these first-order constructs to form a more general, second-order construct that fully captures
26 the underlying construct being measured (Becker *et al.*, 2012).
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29 In our study, we used the reflective-formative HCM approach because the nature of the
30 second-order constructs is formative, which means they combine several dimensions into a
31 general concept. In contrast, the first-order constructs are reflectively measured. The second-
32 order constructs serve as mediators for subsequent endogenous variables. Using these methods,
33 we developed more accurate and nuanced constructs that allowed us better to understand the
34 relationships between variables in our model.
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37 *Evaluation of measurement model (first-order)*

38 Dimensions of HIWS (i.e., empowerment, information sharing, rewards and training),
39 competence (i.e., cognitive competence, functional competence and social competence) and
40 presenteeism (i.e., completing work and avoiding distraction) are presented as reflective first-
41 order constructs. The reflective measurement model is evaluated based on its reliability
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(internal consistency and indicator reliability) and validity (convergent and discriminant validity) (Hair *et al.*, 2019). The outer loadings of the items associated with each construct should be more than 0.7 to ensure indicator reliability. Composite reliability (CR) and Cronbach Alpha scores should be more than 0.7 to assure internal consistency reliability. If the average variance extracted (AVE) is more than 0.5, convergent validity is confirmed (Hair *et al.*, 2019). Loadings of all the items met the threshold. However, two items of information sharing had loadings less than 0.4; therefore, they were removed. Table 1 presents an assessment of the reflective measurement model in the first stage, showing CR and AVE values meeting the threshold. We used the Fornell-Larker criterion to determine discriminant validity (Hair *et al.*, 2014). The square root of the AVE for each construct should be greater than the correlation values for another construct in the measurement model (Hair *et al.*, 2014). Table 2 reveals that the measurement model has acceptable discriminant validity.

[Insert Table 1 about here]

[Insert Table 2 about here]

Evaluation of measurement model (second-order)

HIWS and competence formed reflective-formative second-order constructs. Four dimensions of HIWS were measured by respective reflective indicators, while their relationship with HIWS was considered formative. Likewise, three dimensions of competence were operationalized by reflective indicators, while their association with competence indicated formative. Therefore, the second-order measurement model included two formative (i.e., HIWS and competence) and two reflective (i.e., completing work and avoiding distraction) constructs. We used the latent variable scores of first-order constructs (empowerment, information sharing, rewards, training, cognitive competence, functional competence and social competence) obtained from stage one to create and evaluate the second-order measurement model. In the second stage of evaluation, multicollinearity, outer weights, and their level of significance were assessed (Hair *et al.*, 2014). Table 3 summarizes the second-order measurement model, demonstrating that variance inflation factors (VIFs) remained less than 3.3 and outer weights of second-order constructs were significant. Hair *et al.* (2014) suggested retaining all formative indicators regardless of their statistical significance “as formative measurement theory requires that the measures fully capture the entire domain of a construct” (p. 113). Excluding one dimension of a higher-order construct is equivalent to deleting one part of the construct.

[Insert Table 3 about here]

Evaluation of structural model

To evaluate the model's predictive capability, a blindfolding procedure was employed, resulting in cross-validated redundancy values (Q^2) greater than zero. This finding provides evidence in support of the predictive accuracy of the hypothesized model. The standardized root mean square residuals (SRMR) were calculated by computing the difference between the predicted correlation and the observed correlation. As suggested by Henseler *et al.* (2016), SRMR serves as a robust goodness-of-fit measure for PLS-SEM to identify potential errors in the model specification. The obtained SRMR values for the analysed models are 0.058, which fall within an acceptable range, indicating that the model fits the data well (Hu and Bentler, 1999). An acceptable measurement model in the first and second stages allowed to assess the structural model. Bootstrapping with 5,000 re-samples was performed to evaluate the significance of path coefficients. Bootstrapping is a nonparametric technique utilized in PLS-SEM to examine the statistical significance of various results such as path coefficients (Ringle *et al.*, 2015). Table 4 shows the results of the hypothesis test. First, HIWS do not significantly relate to completing work (H1a, $\beta = -0.064$, $P > 0.05$, $CI = [-0.166, 0.042]$); thus, H1a is not supported. HIWS are positively associated with avoiding distraction (H1b, $\beta = 0.180$, $P < 0.01$, $CI = [0.030, 0.190]$). Therefore, H1b is accepted. The mediation test was based on the product of co-efficient approach (Hayes and Scharkow 2013). We also checked the confidence intervals (CI) to determine the presence of a significant mediating effect. HIWS significantly enhance competence ($\beta = 0.370$, $P < 0.01$, $CI = [0.230, 0.521]$). Competence significantly relates to completing work ($\beta = 0.260$, $P < 0.01$, $CI = [0.077, 0.433]$) but does not significantly associate with avoiding distraction ($\beta = 0.048$, $P > 0.05$, $CI = [-0.075, 0.173]$). The results suggest competence mediates the relationship between HIWS and completing work (H2a, $\beta = 0.096$ [$0.370*0.260$], $P < 0.01$, $CI = [0.030, 0.190]$). However, the indirect effect of HIWS on avoiding distraction through competence remains insignificant (H2b, $\beta = 0.018$ [$0.370*0.048$], $P > 0.05$, $CI = [-0.029, 0.069]$). Therefore, H2a is supported, but H2b is not. Finally, the proposed model included age, gender, job experience and educational qualifications as control variables. The results showed that age has a significant impact on avoiding distraction ($\beta = 0.157$, $P < 0.05$, $CI = [0.016, 0.299]$) and gender has a significant influence on competence ($\beta = -0.116$, $P < 0.05$, $CI = [-0.202, -0.032]$). However, neither job experience nor educational qualifications are significantly related to outcome variables (competence, completing work and avoiding distraction).

[Insert Table 4 about here]

Discussion

Drawing on the JD-R model, the present study examined the effect of HIWS on completing work and avoiding distraction as two dimensions of presenteeism and the mediating role of competence in this relationship. The results demonstrate that HIWS are significantly related to avoiding distraction but not to completing work. The results also indicate that competence mediates the effect of HIWS on completing work but not on avoiding distraction. Van Esch et al. (2018) similarly found employees' competencies mediated the link between high performance work practices and firm performance.

The present study makes several contributions to the literature. First, by focusing on completing work and avoiding distraction dimensions of presenteeism, this study extends understanding of two-dimensional aspects of presenteeism, which is centred on an individual's health and performance demands (Karanika-Murray and Biron, 2020; Whysall *et al.*, 2018). Most previous studies relied on a single-item scale to assess presenteeism that may exclude key work-related characteristics (Ruhle *et al.*, 2020). We argue that a conducive psychosocial work environment fostering increased autonomy and decision-making control can assist employees in dealing with the consequences of health difficulties and performance demands, facilitating improved work adaptation. Specifically, our model emphasizes facilitating job resources through HIWS that might help presentees to adjust to work conditions and overcome health issues (Karanika-Murray *et al.*, 2021). Thus, the present study responds to Karanika-Murray and Biron's (2020) call to revisit presenteeism as adaptive behavior, particularly in the case of non-contagious health conditions.

Second, we contribute to the HIWS literature by demonstrating that HIWS, as job resources, are positively and significantly related to avoiding distraction. This is consistent with extant studies that facilitating job resources help presentees in adjusting to work conditions and overcome health issues (Bergström *et al.*, 2020; Goto *et al.*, 2020). This study also found that HIWS are not significantly related to completing work dimension of presenteeism. First, the insignificant relationship might be due to higher work demands of Bangladeshi bank employees that increase the possibility of working on days when they are sick (Islam *et al.*, 2021). Employees "will be inclined to do everything they can to meet these demands so that their performance remains at the desired level", when they are under pressure to finish their tasks by the deadline (Demerouti *et al.*, 2009, p. 52). Second, extant literature shows mixed relationships between job control and presenteeism (Gerich, 2019; Janssens *et al.*, 2016; Miraglia and Johns, 2016; Ruhle *et al.*, 2020). High-involvement employees may have the

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3 resources to deal with job stress and avoid distractions in the workplace. However, the job
4 resources may not provide sufficient arrangements to help employees complete workplace
5 tasks while overcoming their health concerns. Third, HIWS are designed to enhance employee
6 skills, knowledge, and motivation but do not directly address factors related to work
7 completion, such as time management, workload distribution, or task prioritization (Oppenauer
8 and Van De Voorde, 2018). Thus, HIWS may indirectly affect completing work by improving
9 employees' capacity to cope with these challenges.

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15 Third, this study provides a novel perspective on the relationship between HIWS and two
16 dimensions of presenteeism by identifying competence as a mediator using the JD-R model.
17 We found that competence mediates the effect of HIWS on completing work. As previously
18 mentioned, HIWS are directly related to avoiding distraction, but not to completing work
19 dimension of presenteeism. These findings contribute to the implications of JD-R model
20 (Bakker and Demerouti, 2017). Job resources help employees customize work practices and
21 concentrate at work, avoiding distractions caused by health issues (Taris and Kompier, 2004).
22 Our model presents competence as a personal resource that can be used similarly to job
23 resources to fulfil work tasks. The integration of personal resources (competence) to job
24 resources (HIWS) can considerably boost employees' ability to accomplish tasks despite health
25 concerns and performance demands (Bakker and Demerouti, 2017; Schaufeli and Taris, 2014).
26 This study comprehensively captures competence by encompassing cognitive, functional and
27 social dimensions that reflect individuals' capabilities closely connected with job performance
28 (Le Deist and Winterton, 2005). Thus, the present study contributes to presenteeism literature
29 by suggesting essential job and personal resources that help employees overcome health
30 challenges and deal with performance demands (Karanika-Murray and Biron, 2020).
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45 **Implications for management**

46 The current study offers several implications for managers. First, Boxall and Winterton (2018)
47 noted that implementing high-involvement work could systematically yield improved
48 employee outcomes more than individual involvement practices. Employees can experience
49 the shared consequences when organizations simultaneously invest in human capital in the
50 form of training and rewards, provide better access to information resources, and provide
51 employees with greater autonomy and decision-making control. As a result, managerial
52 commitment is required to deploy HIWS properly (Boxall *et al.*, 2019). Management should
53 create a conducive work environment and provide adequate facilities to enhance employees'
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3 feelings about active participation in their jobs. This suggests organizations should devote more
4 resources to creating and implementing HIWS.
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7 Second, managers should consider various types of presenteeism (i.e., functional and
8 dysfunctional), which rely on the severity of health problems and performance demands
9 (Whysall *et al.*, 2018). Dysfunctional presenteeism entails high hazards that organizations
10 should try to eradicate (Chen *et al.*, 2021). Extra attention should be paid to employees who
11 encounter ill-health conditions and are at risk of dysfunctional presenteeism. In functional
12 presenteeism, presentees can continue working without stressing health problems. Third,
13 management must create suitable psychosocial work environments that encourage presentees
14 to show up for work while reducing health and performance demands (Collins and Cartwright,
15 2012). Our findings suggest that the implementation of HIWS might be beneficial in
16 overcoming employees' health and performance demands (Karanika-Murray *et al.*, 2021).
17 Specifically, given the positive effect of HIWS on avoiding distraction, managers should
18 recognize that HIWS can enhance employees' ability to concentrate at work without being
19 distracted by health problems. This finding is important for the Bangladeshi context, where
20 employees suffer from presenteeism due to insufficient job resources and tend to leave their
21 organization (Haque, 2021).
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33 Fourth, our findings regarding the mediating role of competence suggest that management
34 should not depend on HIWS alone to provide employees with resources to cope with greater
35 job demands and minimize their feelings of unwellness. Rather, management should find ways
36 to increase employees' personal resources (i.e., competence). Organization should encourage
37 employees utilizing individual competence to support work adaptation and deal with work
38 demands. Three types of competence (i.e., cognitive, functional and social) can be used to guide
39 managers how to effectively balance employees' working and health limits. Finally, managers
40 should recognize individual competence and high-involvement work resources for an effective
41 management of presenteeism in the workplace.
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50 **Limitations and future research**

51 This study has several limitations and suggests directions for future researchers. First, this study
52 relied on self-reported and cross-sectional data. We initiated some measures (i.e., ensuring
53 confidentiality in survey response) to reduce the possibility of CMB in our data. The present
54 study emphasizes employees' perceptions of work practices, and their work demands and
55 health concerns, we believe that the use of self-reported measures of HIWS and presenteeism
56 is valid. Future studies could use triangulated measures and a longitudinal approach. Second,
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3 this study was conducted in the banking sector of Bangladesh and could usefully be replicated
4 in other contexts. Third, this study found the association between HIWS and completing work
5 dimension of presenteeism to be insignificant. Future research could examine the curvilinearity
6 of the relationship between HIWS and presenteeism. As Gerich (2019) noted that job control
7 can reduce presenteeism only to a degree, and sickness presenteeism is more visible among
8 employees with insufficient or excessive job control. In contrast, a moderate to low amount of
9 job control, defined as an employee's authority over scheduling decisions, location, or method,
10 is associated with decreased sickness presenteeism (Gerich, 2019). Therefore, additional
11 research is required to determine whether a low, moderate, or high level of HIWS relates to
12 presenteeism. Presenteeism should also be studied in terms of the environment under which
13 employees can function (i.e., continuing work without taxing personal health problems)
14 (Karanika-Murray and Biron, 2020).
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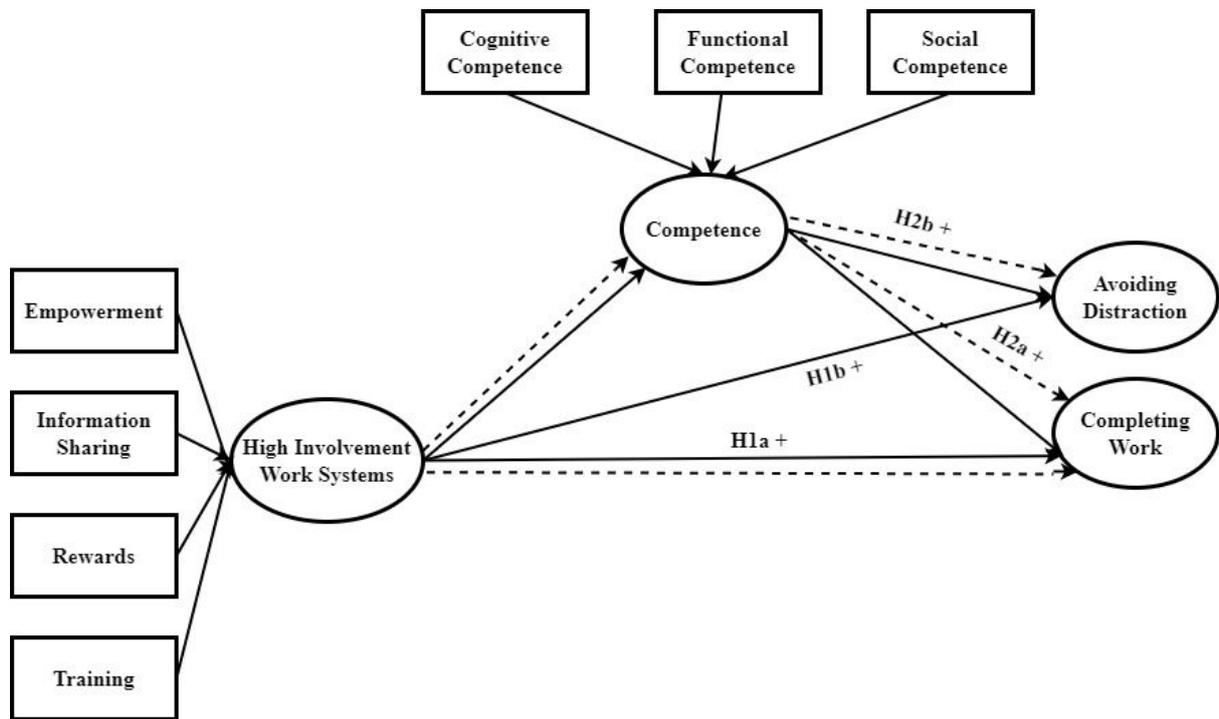


Figure 1: Research model proposing direct (solid lines) and indirect (dotted lines) relationships

Construct/item	Loading	Cronbach's Alpha	CR	AVE
Empowerment		0.828	0.897	0.743
Emp1	0.877			
Emp2	0.876			
Emp3	0.833			
Information Sharing		0.786	0.852	0.594
Info1	0.844			
Info2	0.636			
Info3	0.703			
Info4	0.875			
Rewards		0.866	0.899	0.641
Rew1	0.774			
Rew2	0.817			
Rew3	0.732			
Rew4	0.856			
Rew5	0.818			
Training		0.833	0.880	0.647
Tr1	0.814			
Tr2	0.720			
Tr3	0.888			
Tr4	0.788			
Cognitive Competence		0.850	0.899	0.690
CogC1	0.770			
CogC2	0.853			
CogC3	0.872			
CogC4	0.826			
Functional Competence		0.870	0.902	0.606
FunC1	0.781			
FunC2	0.813			
FunC3	0.766			
FunC4	0.826			
FunC5	0.774			
FunC6	0.704			
Social Competence		0.919	0.939	0.754
SocC1	0.838			
SocC2	0.865			
SocC3	0.864			
SocC4	0.908			
SocC5	0.865			
Completing Work		0.852	0.910	0.771
PR2	0.828			
PR5	0.887			
PR6	0.918			
Avoiding Distraction		0.795	0.878	0.706
PR1_R	0.769			
PR3_R	0.886			
PR4_R	0.862			

Table 1: Measurement model first-order Note: CR= Composite reliability, AVE= Average variance extracted

	1	2	3	4	5	6	7	8	9
1. Avoiding Distraction	0.840								
2. Cognitive Competence	0.101	0.831							
3. Completing Work	-0.142	0.192	0.878						
4. Empowerment	0.175	0.255	-0.036	0.862					
5. Functional Competence	0.144	0.812	0.244	0.247	0.778				
6. Information Sharing	0.176	0.38	0.068	0.474	0.38	0.771			
7. Rewards	0.026	0.184	0.003	0.361	0.193	0.533	0.801		
8. Social Competence	0.112	0.551	0.195	0.214	0.596	0.223	0.068	0.869	
9. Training	0.138	0.177	-0.009	0.415	0.235	0.516	0.567	0.004	0.805

Table 2: Fornell-Larcker criteria

Formative construct/ Dimensions	Weights	t-values	VIF
Competence			
Cognitive Competence	0.287	1.362	2.991
Functional Competence	0.674	2.965*	3.232
Social Competence	0.120	0.672	1.584
High-involvement work systems			
Empowerment	0.314	1.848*	1.364
Information Sharing	0.879	6.280*	1.692
Rewards	-0.235	1.315	1.675
Training	0.086	0.403	1.684

Table 3: Measurement model assessment second-order. Note: * $P < 0.05$, VIF: Variance inflation factor

Employee Relations

Hypothesis	Path coefficients	t-values	Confidence interval	Accepted
H1a: HIWS -> Completing Work	-0.064	1.004	[-0.166, 0.042]	No
H1b: HIWS -> Avoiding Distraction	0.180	2.427**	[0.004, 0.349]	Yes
H2a: HIWS -> Competence -> Completing Work	0.096	2.824**	[0.030, 0.190]	Yes
H2a: HIWS -> Competence -> Avoiding Distraction	0.018	0.595	[-0.029, 0.069]	No
<i>Control Variables</i>				
Age-> Completing Work	0.111	1.463	[-0.013, 0.235]	No
Age-> Avoiding Distraction	0.157	1.850*	[0.006, 0.290]	Yes
Age-> Competence	0.097	1.334	[-0.026, 0.213]	No
Education-> Completing Work	-0.060	0.918	[-0.166, 0.050]	No
Education-> Avoiding Distraction	0.013	0.199	[-0.093, 0.115]	No
Education -> Competence	-0.033	0.446	[-0.156, 0.089]	No
Gender-> Completing Work	0.054	1.025	[-0.038, 0.137]	No
Gender -> Avoiding Distraction	0.020	0.368	[-0.070, 0.107]	No
Gender -> Competence	-0.116	2.243*	[-0.202, -0.032]	Yes
Work Experience-> Completing Work	-0.050	0.609	[-0.184, 0.081]	No
Work Experience -> Avoiding Distraction	-0.086	1.045	[-0.221, 0.049]	No
Work Experience -> Competence	0.045	0.576	[-0.085, 0.171]	No

Table 4: Results of hypothesis testing. Note: * P< 0.05, ** P< 0.01