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## Antecedents of individuals' participation in the community of practice

### العوامل المسببة لإشترك الأفراد في مجتمع المعرفة

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#### Abstract

#### المخلص

The aim of this study is to explore the impact of outcome expectations on individuals' participation in the community of practice. It examines the impact of expected association, expected contribution and expected support on individuals' participation in community of practice. Data collected through questionnaire from 216 participants working in healthcare sector in Saudi Arabia to test the research hypotheses. The results of this study indicate that expected association and expected support have significant positive impact on individuals' participation in community of practice. Whereas, expect contribution found to have a negative impact on individuals' participation in community of practice. This research offer empirical evidence on the impact of individual factors such as outcome expectations on the involvement of individuals in the community of practice in their organizations. Moreover, the results shed new light on the impact of the contextual factors that may diminish the impact of outcome expectations factors such as job localization.

تسعى هذه الدراسة إلى استكشاف تأثير عدد من العوامل الخاصة بالنتائج المتوقعة على مشاركة الأفراد في مجتمع المعرفة. حيث تقوم هذه الدراسة بقياس تأثير توقع الأفراد بأنتمائهم لمجتمع المعرفة، توقع الأفراد بقدرتهم على الاثراء المعرفي و توقع الأفراد بتلقي الدعم على مشاركة الأفراد في مجتمع المعرفة. تم جمع البيانات من خلال الاستبيان من 216 مشاركًا يعملون في قطاع الرعاية الصحية في المملكة العربية السعودية لاختبار فرضيات البحث. تشير نتائج هذه الدراسة إلى أن علاقات الأفراد في المجتمع لدعم المتوقع من قبل المجتمع لهما تأثير إيجابي كبير على مشاركة الأفراد في مجتمع المعرفة. بينما اوضحت النتائج بأن قدرة الأفراد على الاثراء المعرفي له تأثير سلبي على مشاركة الأفراد في مجتمع المعرفة. يقدم هذا البحث أدلة تجريبية على تأثير العوامل الفردية الخاصة بتوقعات النتائج على مشاركة الأفراد في مجتمع المعرفة في مؤسساتهم. علاوة على ذلك، اوضحت النتائج بأن العوال التنظيمية قد يكون لها تأثير على سلبي على اشترك الأفراد في مجتمع المعرفة.


مصطلحات الدراسة: مجتمع المعرفة، مشاركة المعرفة، المصلحة الخاصة، العوائد الغير مادية، توقع الأفراد بأنتمائهم لمجتمع المعرفة، توقع الأفراد بقدرتهم على الاثراء المعرفي و توقع الأفراد بتلقي الدعم.

**Keywords:** Community of practice, knowledge sharing, self-interest, intangible return, expected association, expected contribution and expected support.

#### Introduction

The evolution of knowledge economy has urged organizations to strive to sustain their competitive advantage to remain competitive in the market. As consequence of that, organizations seeks different approaches to accumulate knowledge through capturing individuals' knowledge and creating new

knowledge. Thus, community of practice has emerged as strategic approach to foster individuals' learning and knowledge sharing in the organization through informal networks. The concept of community of practice has gained popularity and its implementation increased across different sectors such as education and

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healthcare. However, managing individuals' participation in the community of practice is difficult process because community of practice evolved informally based on individuals' needs. Meanwhile, the disparity of participation among members may have a great effect on organizational knowledge. Despite the extensive research that have been conducted in the community of practice, still we have not come to complete understanding of the factors that have impact on individuals' participation in the community of practice. By the means of reviewing relevant literature of community of practice this paper aims to identify the antecedents that drive individuals' participate in the community of practice

### Literature Review

Community of practice is self-organized groups that cut across organizational units, geographical dispersion and professional frontiers to enable individuals that have same interest and tasks to communicate (Cabrera & Cabrera, 2005). It was first coined by Lave and Wenger 1991 when they introduced their book "*Situated Learning*". Wenger et al., (2002, p. 4) have defined community of practice as "groups of people who share a concern, a set of problems, or a passion about a topic, and who deepen their knowledge and expertise in this area by interacting on an ongoing basis". They added, individuals joining the communities of practice as they find benefits resulted from their interactions, as they share their knowledge, developing their skills and helping each other to solve problems. Participants in the community of practice are the ones that determined the issues of interactions, how they interact and the length of interaction (Agrifoglio, 2015). In fact, they are informally bounded by the benefits that they find in their learning from each other (Wenger et al., 2002).

According to Wasko and Faraj (2005 p. 37) "A community of practice consists of a tight knit group of members engage in a shared practice who know each other and work together, typically meet face-to-face, and continually negotiate, communicate, and coordinate with each other directly". Li et al., (2009) mentioned that there are three key characteristics that recognize a group of employees as community of practice. First, knowledge domain that employees share interest in, where membership requires minimum level of knowledge of that domain. Second, strong ties between the group members that enable them to cooperate and learn from each other. Third, the development of shared practice that lead to shared resources,

knowledge, stories and tools. Communities of Practice is viewed as it is stemmed from the concept of teams (Wenger et al. 2002). However, it is different from network of practice that consists of large group of individuals that are distinguished to have loose knit, geographically dispersed, doing the same work and not necessarily know each other and not expecting to meet each other face-to-face. In network of practice knowledge is shared through different entities such as conferences, specialized newsletters and professional association (Wasko & Faraj, 2005; Orders, 2013).

Thus, Wenger et al. (2002) in their book stated that not all communities are community of practice. They identified three characteristics of community of practice, they are; domain, community and practice. They consider them as fundamental elements to distinguish community of practice from other types of communities (Agrifoglio, 2015) and a framework for all types of community of practice (Langley et al., 2017). Domain, according to Wenger et al., (2002), represent the area of knowledge that members of community have shared interest in and outlines their concerns that need to be addressed. The shared issues in the domain can range from simple knowledge, like eating healthy, to highly specialized knowledge of a profession, like designing an equipment. Community refers to the social fabric that allow individuals to interact on issues that were defined in the domain (Wenger et al., 2002). It is considered a strong entity that has a structure and consistent interaction that allow members continuously meet and discuss shared topics (Brown and Stokes, 2021). Practice, on the other hand, indicates the knowledge that community members are interested in (Brown and Stokes, 2021). As when they share, develop and maintain these knowledge, it will be embedded in documents, ideas, experiences, and methods used to address recurring problems (Li et al. 2009). In fact, through practice and by the use of dialogue, tacit knowledge can be easily articulated and converted into explicit knowledge (Hafeez and Alghatas, 2007).

Li et al., (2009) assume that when domain, community and practice integrated and work well together, they will be key structures to support knowledge management initiatives in the organization (Venkatraman & Venkatraman, 2018). Therefore, community of practice is seen as knowledge management framework (Brown & Stokes, 2021) and a way of managing knowledge in the organization (Blankenship & Ruona, 2008; Orders, 2013). Thus, to explore how community

of practice is evolved previous research has considered three levels of analysis to identify the antecedents of members' participation in the community of practice. They are: individual level, concerning human factors that impact their involvement to their community of practice, community level, concerning the nature of the community and organizational level, concerning organizational culture (Zboralski, 2009). Since, most of knowledge sharing occurs at individual level in informal meetings, hence, individuals are the ones who build their community of practice through the development of their personal relationships and ongoing dyadic interactions that foster collective learning (Wasko & Faraj, 2000). According to Zboralski (2009) individuals are rational in their thinking when participating in their community of practice, as their decision will be primarily based upon their self-interest. Researchers indicate that when knowledge is considered to be owned by individuals they will share it for intangible return that satisfy their intrinsic motivation such as reputation, self-esteem, status, respect and self-efficacy (Wasko & Faraj, 2000; Chen et al., 2012). In fact, these factors are generated inside the individual and satisfied by the individual. Hence, the main aim of this research is to identify the intrinsic factors that have impact on individuals' participation in their communities of practice.

The literature search has revealed several studies have been conducted on communities of practice from deferent perspectives. Some of these studies have explored community of practice at organizational level and they investigated the impact of knowledge networks (Burt, 1999; Allee, 2000) learning (Soekijad et al 2011; Boud & Middleton, 2003), leadership (Chua, 2006; Zboralski, 2009), the use of IT (Van Beynen T Fleury, 2010; Hara, 2007; Bhatt, 2001) and innovation (Brown and Duguid, 1991; Kahan, 2004) on members participation. Other studies have focused on individual level factors and they investigated the effect of norms (Brown & Duguid, 1991), commitments (Corso et al., 2006; Gibson and Meacham, 2009; Hemmasi & Csanda, 2009), engagement (Corso et al., 2006; Probst and Borzillo, 2008; Cadiz et al., 2009) power of relations (Contu and Willmott, 2003; Hong & O, 2009), trust (Pastoors, 2007; Hemmasi & Csanda, 2009), behavior (Garavan et al., 2007), collaborative capabilities (Schreiner and Corsten, 2004). Others, have explored the effect of an unequal distribution of work among participants (Cook and Buck, 2014), tensions between members (Mak & Pun, 2015) and lack of time to participate in the community of practice (Mak & Pun, 2015).

While the previous research provide insight into the subject of community of practice, which, allowed us to understand the organizational, social, environmental and technological factors that have direct or indirect impact on individuals' involvement in the community of practice. However, not much is known about the factors that affect individuals' participation in the community of practice, especially, personal cognition as an outcome expectation based on their participation in the community of practice. Outcome expectation refers to "beliefs about the likelihood of various outcomes that might result from the behaviors that a person might choose to perform" (McAlister et al., 2015, p. 172). Hence, it concerns about the results of individuals activities, which may guide individuals' behaviors and have impact on their experiences and perceptions. According to Wasko and Faraj (2005) the expectation of personal benefits have a significant impact on individuals' motivation to contribute their knowledge to others. Further, Zboralski (2009) assumes that individuals' intentions to participate in the community of practice stem from their internal needs that associated with expected benefits. According to social cognitive theory individuals are inclined to engage in a behavior when they expect a results that have favorable consequences. This implying that individuals will place judgement on the consequences of their knowledge contribution behaviors as what will provide to them (Chiu & Wang, 2007). Since, the participation in the community of practice is informal, where the management of the organization cannot evaluate that behavior and reward it accordingly. Hence, it can be argued that members of the community of practice will participate only to satisfy their intrinsic needs. Such as through sharing knowledge with other members in their community individuals can enhance their competence or their confidence in their ability (Olatokun & Nwafor, 2012), feelings of belongings to community (Ergun & Avci, 2018) and gain support from their peers (Cabrera et al., 2006). Therefore, this research assumes that the expected benefits of association, contribution and social support will encourage individuals to actively participate in the community of the practice.

### **Expected association**

Expected association refers to individuals' sense of belonging and the feeling of intimacy that develop a positive emotions towards their community (Chiu & Wang, 2007). It is defined as "a feeling that members have of belonging, a feeling that members matter to one another and

to the group, and a shared faith the members' needs will be met through their commitment to be together" (McMillan & Chavis, 1986, p. 9). Being part of the community is actually derived by the needs of belonging and love that illustrated by Maslow. It denotes that the expectation of an individual to fit into a group which is based on the intrinsic benefits that he will gain from his membership such as feelings of value and recognition. Hence, individuals will exert great effort, as investment, in their contribution to the discussion of the group to obtain a place within a group. As result of that, members will receive social enhancement that is derived from gaining acceptance and approval from others, also the enhancement of individual status within the community based on what the individual can provide to the community. Hence, the membership of the community will be meaningful and valuable to the individuals as that will help them to disperse their loneliness, meet like-minded, and receive companionship (McMillan & Chavis, 1986). Consequently, individuals will develop a positive attitude towards their involvement in the knowledge sharing processes as that can strength their relationship with others in the group. Based on that, it can be said that expected association is the driving force behind individuals' integration with their peers in their community of practice (Watkins et al., 2018, Javaid &vAbdullah, 2020). This will lead us to the following research hypotheses:

**H1: Expected association significantly impact individuals' participation in the community of practice.**

#### **Expected contribution**

Expected contribution refers to individuals' confidence in their knowledge that through their contribution to the collective it will improve organization's performance (Kuo, 2013). Hardin (1982) assumed that individuals will contribute their knowledge to the community when they perceive a gain from their contribution in the form of acknowledgement. As individuals can gain recognition of being an expert that comes from other individuals in the form of feedback, which indicates that others are using their knowledge. Also, knowledge contribution is considered as self-evaluation of an individual's skills and capabilities in answering questions posted by others (Widyani et al., 2017). Kankanhalli et al., (2005) illustrate that confidence in ability is typically evident in the form of individual believing that his knowledge can help in solving work related problems,

improve work or make an add to the organization. They added that it serves as motivational driver to individuals' contribution to their communities. Moreover, contribution to the community of practice can be caused by altruistic behavior that is derived from individuals' intrinsic enjoyment in helping other without expecting return (Kankanhalli et al., 2005). Previous research has approved that altruism has significant impact on members' knowledge contribution to their groups in both quantity and quality (Wasko & Faraj 2005) and frequency (Taylor & Murthy, 2009). Hence, altruistic behavior is considered to be important in facilitating knowledge contribution intention in the communities (Fang & Chiu, 2010) and fostering collectivistic orientation (Eddleston & Kellermanns, 2007). It is also has been found to strengthen the relationships between members by increasing their loyalty, interdependence and commitment (Ma & Chan, 2014). Based on that, the following hypotheses proposed:

**H2: Expected contribution has significantly impact individuals to participate in the community of practice.**

#### **Expected Support**

Social support has an affective role in individuals' assimilation in social setting, and the interdependence of workgroup members (Ducharme & Martine, 2000). At work, social support defines the interpersonal relationships that mingle individuals in order to extend their capabilities at work place (Tufail et al., 2016). According to Carver et al., (1989) individuals seeking social support for three reasons; when individual is seeking feedback, knowledge and substantial assistance. It satisfies the belongingness needs and increase the chances of being effective in achieving work related goals (Schaufeli & Bakker, 2004). Rousseau & Aube (2010) contend that social support that come from social network (i.e. coworkers) is conducive to community building, where individuals are attracted to interact with each other as they perform similar types of work or complementary tasks. They added, in community of practice social support can come in the form of information and feedback, which is beneficial to newcomers for adjustment and learning. Also, it provides empathy, caring and encouragement that promote social integration among the members of the community. Hence, social support is considered to be one of the motivational factors that encourage individuals to participate in the community of practice (Yang et al., 2020), and tied individuals to their

organizations (Rousseau & Aube, 2010). This provides the third hypotheses of this study:

**H3: Expected support has significant impact individuals to participate in the community of practice.**

**Methodology**

This study conducted a survey in the form of questionnaire to validate the research hypotheses. The questionnaire was selected because it is the most effective method to gather data about individuals' intentions toward community of practice and its related factors. The questionnaire items were adopted from related literature. The items measuring the impact of independent variables: expected association items adopted from Bock and Kim (2002), expected contribution items adopted from Bock et al., (2005) and expected support items adopted from Kankanhalli et al., (2005). The items of dependent variable were adopted from Bock and Kim (2002). The items are measured by using 5-point likert scale where 1 means strongly agree and 5 means strongly disagree. All items adopted in this research have been validated in the mentioned previous studies. To assess the reliability of the research measures, we used Cronbach's alpha to test for reliability. The questionnaire prior to be administrated for data collection it was given to a group of thirty participants of the same research sample. The test results show that Cronbach's alpha is above the threshold of 0.7 recommended by Hair et al., (1998), as reliability statistics indicate that the overall level is .75 meaning that the measurement items in this study are reliable.

The questionnaire was administrated in SG hospital in Saudi Arabia, which employs more than 800 employees. The healthcare sector was chosen because hospitals are considered knowledge based organizations (Kelder et al., 2015). They rely heavily on individuals' knowledge, since the delivery of the service requires collaboration among groups' members to provide high quality clinical outcomes. The participants in this study are the medical staff that

working in different locations and under different specialties. A total of 450 questionnaires were randomly distributed to the study sample, where 216 completed questionnaires were returned. Yielding 48% response rate, where, 52.9% of the respondents are males while 45.4% of the respondents are females. To examine the impact of outcome expectations on the individuals' participation in community of practice. Regression analysis was conducted to identify the impact of expected association, expected contribution and expected support on individuals' participation in community of practice.

**Findings and Discussion**

This study explore how outcome expectations in form of expected association, expected contribution and expected support impact individuals' participation in community of practice. The results of regression analysis (table 1) indicate that some types of outcome expectations can be considered as motivators for individuals to participate in the community of practice. The independent variables accounted for 22 per cent of the total variance in the participation of individuals in the community of practice. The results show that expected association has a significant effect on individuals participation in the community of practice ( $B = .370$ ;  $p < .05$ ). Thus, the first hypothesis is supported, as expected association has significant impact individuals to participate in the community of practice. This results are in line with the findings of Chiu & Wang (2007), Watkins et al., (2018) and Javaid and Abdullah (2020). Moreover, this result confirms previous results by Fullwood and Rowley (2017) indicate that expected association impacts individuals to be more active in their discipline rather than on their institution. This is due to the reciprocal benefits received from others resulted from their knowledge sharing. Nahapiet and Ghoshal (1998) explain that impact as it comes from the influence of the network of the relationships that enable individuals to combine and exchange knowledge for the benefit of the participants.

**Table 1.**  
Results of regression analysis

Variables	Coefficient	Error	t	Sig.
Constant	11.217	2.060	5.445	.000
Expected Association	.370	.091	4.081	.000
Expected Contribution	-.492	-.295	-3.433	.001
Expected Support	.224	.211	1.982	.049

Note: R = .476 ; R<sup>2</sup> = .227 ; Adjusted R<sup>2</sup> = .212 ; F = 15.523 ; Prob (F) = .000

Unexpectedly, the results show that expected contribution has a negative impact on individuals participation in the community of practice ( $B = -.492$ ;  $p < .05$ ). Based on this result the second hypothesis is rejected, as expected contribution has significant impact individuals to participate in the community of practice. The possible explanation of this result is attributed to the implemented government policy of job localization in Saudi Arabia. This policy focuses on assimilation of local job applicants through the process of replacement with foreign workers. By doing so, the government aims to increase the employment of local job seekers in all sectors of the local economy (Al-Dosary & Rahman, 2005). Imran et al., (2020) demonstrate that the possible outcome of this policy on expatriates is either to quit or to preserve their value in their organizations in order to protect their jobs. As such, expatriates will consider the knowledge that they gain during years of working their source of power. Where, sharing that knowledge will erode their value to their employers. Hence, they will not allow others to access that knowledge in order to secure their jobs (Ali et al., 2020).

On other hand, the results show that individuals' participation in the community of practice was positively affected by expected support ( $B = .224$ ;  $p < .05$ ). Hence, the third hypothesis is supported, as expected support has significant impact individuals to participate in the community of practice. This result ties well with the findings of previous studies by Ducharme and Martine (2000), Bock and Kim (2002), Tufail et al., (2016) and Yang et al., (2020). The result of this study supports those of Bartol and Srivastava (2002) findings that indicates when individuals contribute their knowledge in informal setting is mostly based on the potential of social exchange. This is considered to be an away of building a strong relationship amongst individuals (Javaid & Abdullah, 2020). In fact, previous research pointed that individuals are encourage to participate in their work group to gain social integration that entails empathy, caring and providing help at work. Within each form of

these benefits, the expectation of attainment of these benefits will motivate individuals to participate in their working group. Hence, community of practice is the place that enable the individuals in organization to receive support (Chiu & Wang, 2007).

As previous research has indicated that informal networks are affected by outcome expectations, where, the outcome expectations are associated with various personal benefits resulted from social interactions in these networks. In this study, expected association implies social approval that individuals gain when engage in knowledge sharing behavior through answering tasks related questions. In order to increase that the organization need to promote the sense of social inclusion to enhance interpersonal relationships, which in turn, can increase individuals' feeling of belonging to social grouping. This would be through enhancing communication between individuals and promoting the social norms that govern individuals' interactions and perceptions. Also, promoting social integration and satisfaction among individuals in the organization. On the other hand, as expected contribution concerns the provision of knowledge to others, which help them to perform their work better. In fact, this has reflection on the contributor image as knowledge holders through their knowledge sharing will show others that they possess valuable knowledge that benefit them. Consequently they become a trusted source of knowledge in their communities. Since, the results in this study indicate that expected contribution has negative impact, in fact, this is attributed to the implementation of job localization. Organizations operating in the same context in order to enhance individuals' contribution to their communities, they should create organizational culture that promoting fairness, social equality, clear career path and transparent recruitment and promotion procedures to mitigate the impact of job insecurity. The expected support denotes the influence of coworkers on employees' opinions and attitudes towards their work through the utilization of

coworkers' experiences and knowledge to learn and accomplish tasks. The organization can foster that through task-direct helping, coworker mentorship and on job training.

### Conclusion

The importance of community of practice stems from its benefits that can be gained from the promotion of knowledge at individuals' and organizational level. Since, individuals' participation in their informal networks can help them to progress in their tasks, expand career prospects, streamlining their works and strengthen their relationships with others in the organization. Managing individuals' participation in the community of practice is not an easy task. As management cannot dictate the intensity of communication, its pattern and the type of knowledge exchanged. The difficulty of managing such of these behaviors is centered around the lack of understanding of the impact of personal benefits that encourage them to build their community of practice and participate in it. While, these communities are primarily formed by individuals to satisfy their needs of learning and knowledge reciprocation, either providing or acquiring knowledge. The organization can create an environment that facilitating social gathering, where individuals can interact with others to gain benefits from their interaction. In fact, it has been identified in this study that individuals' outcome expectations has significant impact on individuals' participation in the community of practice. However, based on the results, the causal relationships between independent and dependent variables may vary according to the mediating role of the contextual factors such as job localization. The contribution of this study to the literature is through demonstrating that community of practice is socially constructed, where individuals' participation is based on benefit-related outcome. They participate in the community of practice to gain intrinsic return in the form of help, feeling of belongingness and confidence in their abilities. Whereas, the provision of these returns are not subjected to the rules and procedures of organization, as they are tied to individuals' participation with other members in the organizations.

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