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THE MEDIATING ROLE OF QUALITY LITERACY IN THE RELATIONSHIP BETWEEN EMPLOYEE-ORGANIZATION CONGRUENCE AND SUSTAINABLE PERFORMANCE WITHIN A HIMSS LEVEL 7 HEALTHCARE INSTITUTION

HIMSS SEVİYE 7 BİR SAĞLIK KURULUŞUNDA ÇALIŞAN-ÖRGÜT UYUMUNUN SÜRDÜRÜLEBİLİR PERFORMANSA ETKİSİNDE KALİTE OKURYAZARLIĞININ ARACI ROLÜ

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ABSTRACT

By examining the impact of this effective employee-organization fit on sustainable performance, it is expected that the role of quality literacy as a mediator will continue. The cross-sectional study was conducted with 165 healthcare personnel working in a HIMSS Level 7 digital hospital. Data were collected using the "Person-Organization Fit Scale," the "Quality Literacy Scale," the "Sustainable Performance Scale," and a formula containing information on sociodemographic nutritional characteristics. The obtained data were analyzed using SPSS 27.0 and the Hayes 2025 plugin. Significant positive changes were found between employee-organization fit, sustainable performance, and quality literacy. Furthermore, according to the instrumentality analysis, the role of a certain level of quality literacy plays a role in the impact of sustainable performance on employee and organizational well-being. When the main study variables differed according to occupational and personal variables, a significant difference was observed only between the quality literacy measurement score and income level. Overall, the research results emphasize the expansion of considering digitalization, quality management, and human resources practices as sequential elements in the healthcare sector.

Keywords: Digital Hospital, Employee-Organizational, Quality Literacy, Sustainable Performance.

JEL Classification Codes: 118, M14, L15.

ÖZ

Bu çalışmada, çalışan-örgüt uyumunun sürdürülebilir performansa etkisi incelenerek, kalite okuryazarlığının aracı rolünün belirlenmesi amaçlanmıştır. Araştırma kesitsel türde tasarlanmış HIMSS Seviye 7 bir dijital hastanede görev yapan 165 sağlık çalışanı ile yürütülmüştür. Veriler 'Kişi-Örgüt Uyumu Ölçeği', 'Kalite Okuryazarlığı Ölçeği', 'Sürdürülebilir Performans Ölçeği' ve katılımcıların sosyo demografik özelliklerini içeren bilgi formu aracılığıyla toplanmıştır. Elde edilen veriler SPSS 27.0 programı ve Hayes 2025 eklentisi kullanılarak analiz edilmiştir. Çalışan-örgüt uyumu, sürdürülebilir performans ve kalite okuryazarlığı arasında pozitif yönde anlamlı ilişkilerin olduğu tespit edilmiştir. Ayrıca aracılık analizi sonuçlarına göre sürdürülebilir performansın çalışan-örgüt uyumuna etkisinde kalite okuryazarlığının kısmi düzeyde aracı rolünün olduğu görülmüştür. Çalışmanın ana değişkenlerinin mesleki ve kişisel değişkenlere göre farklılaşıp farklıllaşmadığı değerlendirildiğinde sadece kalite okuryazarlığı ölçek puanı ile gelir düzeyi arasında anlamlı farklılık olduğu gözlemlenmiştir. Genel olarak, araştırma sonuçları sağlık sektöründe dijitalleşme, kalite yönetimi ve insan kaynakları uygulamalarının birbirini tamamlayan unsurlar olarak ele alınmasının önemini vurgulamaktadır.

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Anahtar Kelimeler: Dijital Hastane, Kişi-Örgüt Uyumu, Kalite Okuryazarlığı, Sürdürülebilir Performans.

JEL Sınıflandırma Kodları: 118, M14, L15.

1. INTRODUCTION

HIMSS Level 7 healthcare organizations, recognized as pioneers of digitalization, distinguish themselves not only through advanced technological competencies but also through employee alignment and a strong culture of quality. Electronic medical records (EMRs) digitized versions of patient medical data are widely regarded as a fundamental component of a hospital or healthcare system's information infrastructure (Lugn, 2016). From the perspective of treatment efficiency, a digital hospital is defined as an institution that delivers patient-centered diagnostic and therapeutic services without the constraints of time and place (Kılıç, 2016).

The Healthcare Information and Management Systems Society (HIMSS), founded in 1961, plays a central role in shaping this transformation by promoting the effective use of information technologies in the delivery and improvement of healthcare services (HIMSS, 2021; Tekerek & Işık, 2025). To evaluate the stages of digitalization in hospitals, HIMSS Analytics its research division developed the Electronic Medical Record Adoption Model (EMRAM). First introduced in 2005 to monitor EMR implementation in U.S. hospitals, EMRAM is a specialized scoring system that categorizes an institution's EMR maturity across eight stages, ranging from a paper-based environment (Stage 0) to a fully digital environment (Stage 7) (Pettit, 2013). As of 2024, eight hospitals in Türkiye have successfully reached HIMSS Level 7 status (Republic of Türkiye Ministry of Health, 2024).

Digital transformation is increasingly recognized as the defining paradigm of the contemporary era and is regarded as a fundamental approach to conducting activities across diverse domains. Traditional practices, constrained by their inability to keep pace with the exponential growth of data and information, fall short in addressing the rapid advancements of today's world. This reality necessitates the adoption of modern mechanisms and strategies to effectively manage, regulate, and optimize the utilization of information (Al-Sawwat & Al-Harbi, 2022). Consequently, organizations are compelled to embrace digital transformation and engage in systematic planning to adapt to evolving demands. The accelerated growth of digital technologies and ongoing technological progress have also introduced profound changes in organizational management processes (Haq et al., 2024).

Sustaining employee performance has increasingly depended on the development of innovative applications and solutions, which enable individuals to enhance their efficiency and effectiveness (Alanizan, 2023). Moreover, the alignment of employees' personal values with organizational values fosters stronger organizational attachment and commitment. Accordingly, organizational success is closely linked to psychological factors such as employee—organization alignment and motivation, which are core dimensions of organizational behavior (Özişli, 2024). Within the healthcare sector owing to its service-intensive nature employee—organization alignment assumes particular significance and remains a critical determinant of institutional performance and sustainability.

The concept of sustainable performance is defined as the harmonious achievement of both financial and environmental objectives in carrying out core institutional operations that are essential for enhancing returns (Dey et al., 2022). Sustainable performance extends beyond individual benefits and plays a significant role in strengthening organizational competitiveness. In dynamic business environments, maintaining and enhancing employee motivation enables organizations to remain more flexible and resilient in the face of

uncertainties (Ercan et al., 2025). Employee performance constitutes one of the most critical components of organizational success. The level of performance required by an organization is, by definition, the performance of employees who can simultaneously fulfill the organization's fundamental objectives and contribute to building organizations capable of sustainable growth (Purnomo et al., 2020).

Quality literacy, within the framework of total quality management, constitutes a multidimensional construct that encompasses individuals' knowledge base regarding quality management, standards, and practices, as well as their capacity to effectively and efficiently deploy such knowledge (Ehlers, 2007). This notion extends beyond managerial boundaries to include individual dimensions, thereby permeating the entirety of organizational functioning (Vilijoen & Van Waveren, 2008). In the healthcare context, quality literacy comprises healthcare professionals' levels of knowledge, skills, and awareness in critical domains such as quality management, quality standards, continuous improvement processes, patient safety, and cost-effectiveness, while also encompassing their motivational inclinations toward active engagement in these processes (Turan & Altıntaş, 2024).

The successful implementation of digital hospital processes transcends mere technological infrastructure investments; it necessitates the execution of robust change management strategies and the seamless adaptation of employees to transformative paradigms. Within this framework, investigating the role of variables such as person—organization fit and quality literacy in enhancing the sustainable performance of healthcare professionals emerges as both an academic imperative and a practical necessity. A close scrutiny of the extant literature reveals that research examining the potential mediating role of quality literacy in the relationship between person—organization fit and sustainable performance remains remarkably scarce. Accordingly, the primary aim of this study is to bridge this gap by furnishing original contributions that advance a holistic perspective on the interplay among digital transformation in healthcare, quality management, and human resource practices. In this context, the study aims not only to enrich the theoretical depth but also to make tangible contributions to the operational areas of healthcare institutions.

2. METHODS

The methodological framework of this study was designed to provide a comprehensive examination of healthcare professionals' levels of person—organization fit, quality literacy, and sustainable performance. The research was grounded in quantitative methods, employing descriptive statistics, correlation and regression analyses, as well as mediation tests to identify the relationships among variables. This design enabled the study both to empirically test propositions derived from the theoretical literature and to generate practice-oriented insights within the context of digital transformation in the healthcare sector.

2.1. Research Aim and Type

The primary aim of this study is to investigate the effect of person—organization fit on the sustainable performance of healthcare professionals and to assess the potential mediating role of quality literacy in this relationship. The research adopted a cross-sectional design.

2.2. Research Questions

The study sought to address the following research questions:

- What are the distribution levels of healthcare professionals' person—organization fit, sustainable performance, and quality literacy?
- Do healthcare professionals' person—organization fit, sustainable performance, and quality literacy levels differ significantly with respect to their professional and personal characteristics?
- Does person—organization fit exert a significant effect on sustainable performance?

2.3. Research Setting and Period

The study was conducted in a state hospital certified at HIMSS Stage 7, between June and August 2025.

2.4. Population and Sample

The study population consisted of 220 healthcare professionals employed in a state hospital located in the Black Sea region of Türkiye, holding the HIMSS Stage 7 digital hospital certification. A convenience sampling method was adopted. Sample size was determined based on the table developed by Yazıcıoğlu and Erdoğan (2004). Following the required calculations, the study was carried out with 165 healthcare professionals who volunteered to participate. Participation was entirely voluntary, and individuals not meeting the inclusion criteria were excluded from the study.

2.5. Data Collection Tools

Data were collected through face-to-face surveys. Three validated instruments were employed:

Person—Organization Fit Scale: Originally developed by Netemeyer et al. (1997) and adapted into Turkish by Turunç and Çelik (2012). The scale comprises four items rated on a five-point Likert scale (1 = Strongly disagree to 5 = Strongly agree). Cronbach's alpha coefficient was reported as 0.78. No reverse-coded items are included.

Sustainable Performance Scale: Developed by Ji et al. (2021) and validated in Turkish by Çilhoroz et al. (2023). The scale consists of 10 single-dimension items, rated on a five-point Likert scale (1 = Strongly disagree to 5 = Strongly agree). Cronbach's alpha coefficient was reported as 0.90. No reverse-coded items are included.

Quality Literacy Scale: Developed by Turan and Altıntaş (2024), this scale comprises 30 items grouped under four dimensions: (1) awareness of the meaning of quality, (2) attitudes toward the necessity of quality, (3) awareness of minimum quality standards in healthcare services, and (4) willingness to participate in quality management processes. Cronbach's alpha values for the sub-dimensions were 0.88, 0.93, 0.95, and 0.95, respectively, with the overall reliability coefficient reported as 0.96. Responses were rated on a five-point Likert scale. No reverse-coded items are included.

2.6. Data Analysis

All statistical analyses were conducted using SPSS version 27. Descriptive statistics (percentage, frequency, mean, and standard deviation) were used to analyze the demographic and professional characteristics of participants. The assumption of normality was tested using skewness and kurtosis values, which were found to lie within the ±1.5 range, thus justifying the use of parametric tests.

Pearson correlation analysis was applied to examine the relationships among personorganization fit, quality literacy, and sustainable performance. Regression analysis was employed to test predictive effects, while mediation analyses were performed using Hayes' (2025) Process Macro v.5 extension (Bozkurt, 2023).

Reliability analyses conducted in this study yielded Cronbach's alpha coefficients of 0.92 for the Person–Organization Fit Scale, 0.97 for the Sustainable Performance Scale, and 0.96 for the Quality Literacy Scale. According to the literature, coefficients above 0.80 indicate high reliability (Özdamar, 2004), demonstrating that all three instruments employed in this study exhibit strong internal consistency.

2.7. Ethical Connsiderations

Ethical approval for the study and permission to administer the survey were obtained from the Selçuk University Non-Interventional Research Ethics Committee (Decision No. 2024/465, dated 24.04.2024).

2.8. Limitations

This study was conducted exclusively with healthcare professionals employed in a single public hospital certified at HIMSS Stage 7, which restricts the generalizability of the findings. Additionally, data were collected using self-report surveys, which may introduce bias arising from participants' tendencies to perceive or report their competencies and behaviors differently from reality.

3. FINDINGS

The socio-demographic profile of the 165 healthcare workers who participated in the study is summarized below. This section provides an overview of the participants' age distribution, gender composition, marital status, educational background, and income levels. Presenting these characteristics allows for a clearer understanding of the sample structure and offers important context for interpreting the subsequent results of the research.

Table 1. Demographic Characteristics

Variables	n	%
Age		
21-25 years	30	18.2
26-28 years	41	24.8
29-33 years	30	18.2
34-38 years	30	18.2
39-58 years	34	20.6
Gender		
Female	114	69.1
Male	51	30.9
Marital Status		
Married	91	55.2
Single	74	44.8
Education Level		
High School	33	20.0
Associate Degree	30	18.2
Bachelor's Degree	102	61.8
Income Level		
Twice the minimum wage	116	70.3
Three times minimum wage or more	49	29.7
Total	165	100

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The demographic analysis indicates that the participants are relatively young, with the majority concentrated in the 26–28 age group (24.8%), followed by the 21–25, 29–33, and 34–38 groups, each representing 18.2% of the sample. A smaller portion (20.6%) falls into the 39–58 age category. In terms of gender, the sample is predominantly female (69.1%), with males making up 30.9%. Regarding marital status, slightly more than half of the participants are married (55.2%), while 44.8% are single. Educational background shows that most participants hold a bachelor's degree (61.8%), followed by high school graduates (20.0%) and associate degree holders (18.2%). This suggests that the sample is relatively well-educated. Income levels reveal that the majority of respondents (70.3%) earn approximately twice the minimum wage, while a smaller proportion (29.7%) earn three times the minimum wage or more. Overall, the data suggest that the participants are primarily young, educated, and moderately earning individuals, with a female majority.

Table 2. Demographic Differences in Fit, Performance, and Literacy (N=165)

Variables	n	Employee-	Sustainable	Quality Literacy
		Organization Fit	Performance	Mean (SD)
		Mean (SD)	Mean (SD)	
Age		/>		/ \
21–25 years	30	3.70 (1.07)	4.10 (.629)	3.96 (.623)
26–28 years	41	3.63 (.966)	3.96 (.978)	4.02 (.629)
29–33 years	30	3.35 (1.08)	3.89 (1.03)	3.81 (.897)
34–38 years	30	3.62 (.571)	3.94 (.693)	3.75 (.608)
39–58 years	34	3.81 (.824)	4.27 (.633)	4.14 (.579)
Total	165	3.63 (.926)	4.03 (.822)	3.94 (.678)
		F=1.084; p=0.36	<i>F</i> =1.20; p=0.31	<i>F</i> =1.763; p=0.13
Gender				
Female	114	3.66 (.663)	4.10 (.760)	4.00 (.663)
Male	51	3.54 (.704)	3.88 (.937)	3.83 (.704)
		<i>t</i> =0.767; p=0.44	t=1.602; p=0.11	<i>t</i> =1.479; p=0.14
Education Level				
High School	33	3.55 (1.21)	3.98 (1.05)	3.85 (.766)
Associate Degree	30	3.47 (.711)	3.90 (.609)	3.91 (.586)
Bachelor's and Above	102	3.70 (.874)	4.09 (.528)	3.99 (.676)
Total	165	3.63 (.926)	4.03 (.568)	4.03 (.568)
		<i>F</i> =0.852; p=0.42	<i>F</i> =0.697; p=0.50	<i>F</i> =0.697; p=0.50
Marital Status				
Married	91	3.61 (.871)	4.05 (.855)	3.92 (.742)
Single	74	3.65 (.995)	4.01 (.785)	3.98 (.595)
		<i>t</i> =0.294; p=0.76	t=-0.310; p=0.75	<i>t</i> =0.527; p=0.59
Income Level				
Twice the minimum wage	116	3.61 (.845)	3.96 (.806)	3.85 (.669)
Three times minimum wage or more	49	3.66 (1.10)	4.21 (.841)	4.17 (.650)
		<i>t</i> =-0.283; p=0.77	<i>t</i> =-1.812; p=0.072	t=-2.891;p=0.01

Interpretation: Examination of Table 2 shows that there were no statistically significant differences in employee–organization fit, sustainable performance, or quality literacy mean scores across age, gender, education level, or marital status (p>0.05). However, while employee–organization fit and sustainable performance did not significantly differ across

income groups, a significant difference was observed in quality literacy scores. Specifically, participants earning three times the minimum wage or more had higher quality literacy scores compared to those earning twice the minimum wage (p<0.01). These results suggest that income level may play a role in enhancing healthcare workers' quality literacy, whereas other demographic factors show limited influence.

Table 3. Correlations Among Employee-Organization Fit, Sustainable Performance, and Quality Literacy Scores

Scales	QL	EOF	SP	
Quality Literacy (QL)	1	.57**	.73**	
Employee-Organization Fit (E	OF)	1	.61**	
Sustainable Performance (SP)			1	

**p < .01

Interpretation: As shown in Table 3, there is a moderate, positive, and statistically significant relationship between quality literacy and employee—organization fit (r=.57, p<.01). This indicates that as healthcare workers' knowledge and awareness of quality literacy increase, their alignment with organizational values and practices also improves. Moreover, a strong, positive, and significant correlation was found between quality literacy and sustainable performance (r = .73, p < .01). This suggests that institutions with employees who demonstrate higher levels of quality literacy tend to achieve more sustainable and effective performance outcomes. Finally, the relationship between employee—organization fit and sustainable performance was found to be moderate, positive, and significant (r = .61, p < .01). This implies that employees who are well integrated with their organizations contribute positively to institutional performance and sustainability.

Table 4. Multicollinearity Statistics of the Scales

Scales	VIF	Tolerance
Employee-Organization Fit	1.50	0.66
Quality Literacy	1.50	0.66

Interpretation: According to Table 4, the VIF values for Employee–Organization Fit and Quality Literacy are below the threshold of 10, indicating that there is no multicollinearity problem among the independent variables. Additionally, the fact that the VIF values are close to 1 suggests that there is no strong linear correlation between these variables, and each provides an independent contribution to the model.

Table 5. Predictors of Sustainable Performance

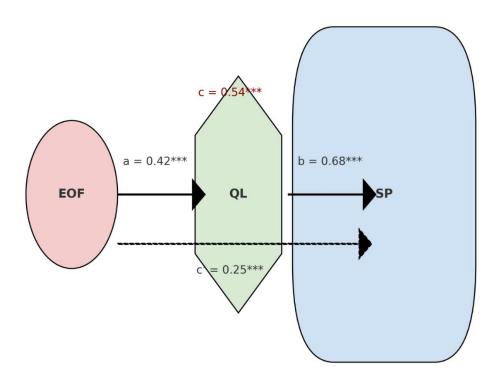
	В	Std. Error	Beta	t	р
Constant	0.414	0.247		1.674	0.046
Employee–Organization Fit	0.684	0.055	0.285	9.116	0.001
Quality Literacy	0.253	0.075	0.565	4.608	0.026

In the multiple regression model, sustainable performance was taken as the dependent variable, while employee—organization fit and quality literacy were entered as independent variables. The analysis showed that the overall model was statistically significant (F(2, 162) = 114.878, p<0.001). Both predictors had a significant and positive effect on sustainable performance. Specifically, a one-unit increase in employee—organization fit predicted an average increase of 0.684 units in sustainable performance, while a one-unit increase in quality literacy predicted an average increase of 0.253 units.

Sustainable Performance=0.414+0.684×Employee–Organization Fit+0.253× Quality Literacy

These findings emphasize that, for institutions to achieve sustainable success, investment should be made in both employee–organization alignment and quality literacy awareness.

Figure 1. Mediation Role of Quality Literacy in the Relationship Between Employee-Organization Fit and Sustainable Performance



The mediation model illustrates the role of quality literacy in the relationship between employee—organization fit and sustainable performance, analyzed using Hayes' (2025) Process Macro (Model 4). The mediation analysis examined the role of quality literacy (QL) in the relationship between employee—organization fit (EOF) and sustainable performance (SP) using Hayes' (2025) Process Macro (Model 4). Results showed that EOF significantly predicted QL (a = 0.42, p < .001), and QL in turn significantly predicted SP (b = 0.68, p < .001). The direct effect of EOF on SP remained significant (c' = 0.25, p < .001), while the total effect was also strong (c = 0.54, p < .001). Bootstrap analysis confirmed a significant indirect effect (B \approx 0.28, 95% CI [.1566, .4710]), indicating that approximately 53.35% of the relationship between EOF and SP is mediated through QL. The overall model was statistically significant (F(2,162) = 114.88, p < .001) and explained 58.65% of the variance in sustainable performance. These findings demonstrate that QL plays a meaningful partial mediating role, highlighting that organizations seeking to enhance sustainable performance should invest not only in strengthening employee—organization alignment but also in promoting quality literacy to maximize long-term institutional outcomes.

4. DISCUSSION, CONCLUSION, AND FUTURE DIRECTIONS

This study primarily aimed to examine the direct effect of employee–organization fit (EOF) on sustainable performance (SP), and secondarily to investigate the mediating role of quality literacy (QL) in this relationship. Findings demonstrated that employee–organization fit, sustainable performance, and quality literacy scores did not significantly differ across

participants' age, gender, education level, or marital status. However, a significant difference was observed with respect to income level in terms of quality literacy, indicating that individuals with higher income displayed higher levels of quality literacy. While these findings diverge from some previous studies (e.g., Merecz-Kot & Andysz, 2017; Çolakoğlu et al., 2009) that reported demographic effects on organizational commitment and adaptation, they align with research suggesting that professional and contextual variables may be stronger determinants of quality perceptions (Özcan Çaklı, 2021). Correlation analysis revealed a moderate, positive, and significant relationship between quality literacy and employee-organization fit, as well as between employee-organization fit and sustainable performance. More importantly, a strong, positive, and significant relationship was found between quality literacy and sustainable performance, supporting prior studies that highlight the central role of quality-related competencies in organizational effectiveness (Erdem, 2022; Turali, 2021; Ablak, 2019; Kınış et al., 2024). Thus, the current study's results are largely consistent with the extant literature, confirming that employees' knowledge and awareness of quality practices enhance both individual alignment with the organization and institutional sustainability. The results of the multiple regression analysis indicated that both employee-organization fit, and quality literacy significantly predicted sustainable performance, with quality literacy emerging as the stronger predictor. This is consistent with earlier findings emphasizing the importance of human resource alignment and qualityoriented practices in fostering organizational outcomes (Kalkavan & Katrinli, 2014; Badrianto & Ekhsan, 2019; İdris, 2020; Çalık et al., 2023). Crucially, the mediation analysis using Hayes' (2025) Process Macro (Model 4) revealed that quality literacy partially mediates the relationship between employee-organization fit and sustainable performance. Specifically, the indirect pathway (EOF \rightarrow QL \rightarrow SP) was statistically significant, with bootstrap confidence intervals confirming that 53.35% of the effect of employee-organization fit on sustainable performance is transmitted through quality literacy. The overall model explained 58.65% of the variance in sustainable performance, underscoring its robustness. To the best of our knowledge, this is the first study to empirically examine the mediating role of quality literacy in this context, thereby contributing a novel perspective to the literature on organizational sustainability and workforce alignment. Despite these contributions, the study has several limitations. The gender distribution of the sample (69.1% female, 30.9% male) and the income imbalance (70.3% earning twice the minimum wage versus 29.7% earning three times or more) limit the generalizability of the findings. Furthermore, reliance on self-reported measures raises the possibility of social desirability bias, which may have influenced participants' responses. Future research should address these limitations by employing larger and more balanced samples, adopting longitudinal designs, and integrating objective performance indicators to validate self-report data.

In conclusion, the findings highlight that employee—organization fit directly enhances sustainable performance, but its effect is significantly strengthened through the mediating role of quality literacy. This indicates that organizations seeking sustainable success should not only prioritize structural and relational alignment but also systematically invest in quality literacy training, awareness programs, and quality management practices. Strengthening employees' capacity to understand, internalize, and apply quality principles fosters a workforce that is both aligned with organizational goals and equipped to drive sustainable outcomes. Moreover, given the limited number of studies addressing quality literacy as a mediator, future research exploring this relationship across different sectors and cultural contexts would provide valuable insights and significantly enrich academic literature.

Based on the results of this research, it is recommended that training programs that enhance quality literacy be expanded and practices that support employee-organizational harmony be strengthened to enhance sustainable performance in healthcare institutions. Developing more inclusive training programs, particularly for low-income employees, increasing employee participation in quality management processes, and fostering interdepartmental collaboration can positively impact organizational efficiency. Future research using larger, more balanced samples, examining whether quality literacy has similar effects across different sectors, and incorporating objective performance indicators into research models will further contribute to the literature.

YAZARLARIN BEYANI / DECLARATION OF THE AUTHORS

Declaration of Contribution Rate: Author 1's contribution to the article is 40%, Author 2's contribution to the article is 30%, Author 3's contribution to the article is 15%, and Author 4's contribution to the article is 15%.

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