

Job attitude, OCB and affective commitment: The role of Workplace violence for nurses

Saeed Shahriyari^{1*}, Mansoure Eslami², Forough Lotfi³

¹ Faculty member of Kar High Education Institute, Department of Industrial Engineering, Iran, ² M. A. in Psychology, University of Alzahra, Tehran, Iran. ³ Ph.D. student of Financial engineering, Islamic azad university, Rasht branch, Rasht, Iran.

Correspondence: Saeed Shahriyari, Faculty member of Kar High Education Institute, Department of Industrial Engineering, Iran.
e-mail: Shahriari.saeed2019@yahoo.com.

ABSTRACT

The present study aims to investigate nurses' job attitude, citizenship behavior and affective commitment considering workplace violence. The statistical population includes nurses working in ten hospitals of Tehran City. Finally, 243 questionnaires are collected and analyzed. The Smart PLS3 software is used to test the research hypotheses. The results indicated that about mediation hypothesis, given significant direct effect, indirect effect ($\beta = 0.269$, $SD = 0.052$, $t = 5.217$, $p = 0.000$) and total effect, partial mediation is approved and job attitude affects OCB due to the mediation role of affective commitment. Moreover, workplace violence moderates the effect of job attitude on OCB.

Keywords: Organizational Citizenship Behavior (OCB), Job attitude, Workplace violence, Affective commitment

Introduction

The nurses' activities in hospitals are related to patients (clients). Hospitals and healthcare centers are of great importance in terms of quality of service. Organizational Citizenship Behavior (OCB) is one of the most important factors affecting nurses' behaviors, attitudes and interactions in providing high quality services ^[1]. The concept of OCB and its related factors have been less considered in nursing despite their importance. Since OCB is not treated as the formal role of individuals, it is considered as a behavioral index for responding to cooperative relations ^[2]. OCB can be known as behaviors that are not formal organizational tasks but affect organizational performance. This type of behavior is a kind of extra-role behavior that is opposite to in-role behavior ^[3]. Some of these behaviors include the avoidance of unnecessary contradictions,

helping colleagues in the workplace, tolerating the conditions imposed on the organization, and engaging in organizational activities ^[4]. According to this definition, it can be anticipated that this type of behavior affects nurses' attitude and behaviors, directs their activities to the goals of hospital and ultimately, affects the quality of the services provided to the patients. One of the variables affecting OCB is "organizational commitment." Organizational commitment is an important occupational and organizational attitude that has been a matter of interest to many researchers in the organizational behavior and psychology, especially social behavior, over the past years. According to the various definitions of the organizational commitment, it is considered as an affective attachment to an organization or a kind of loyalty to an organization ^[5]. Affective commitment involves employees' affective attachment to be identified with their organization and engaging in the organization's activities with a positive feeling and attitude. On the one hand, various studies show that the workplace violence adversely affects occupational and organizational attitudes ^[6]. Occupational and organizational attitude is a kind of an individual's feeling about his organization and his career that comes from factors such as the nature of his job and organization, the manpower around him as well as organizational, environmental and individual factors. Research indicates the adverse effects of workplace violence on the staff's attitude. Victims of this type of violence show low job satisfaction, high turnover intention and low

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levels of motivation, creativity, affective and normative commitment [7].

Theoretical framework and hypotheses

OCB, which is a new subject in organizational behavior, is in fact a voluntary and extra-role behavior that is not designed by the organization, but can enhance organizational effectiveness and efficiency if exists [8]. Researchers have defined OCB as the employee's willingness and motivation to go beyond official job requirements in order to help each other, to align individual interests with organizational interests, and to have a real interest in the overall activities and missions of the organization [9]. OCB generally have two general features: 1. They cannot be directly strengthened (for example, they do not essentially need to be technically part of an individual's job; and, 2. They are induced by special and extraordinary efforts that an organization expects from its employees in order to succeed [10]. OCB increases the productivity of employees and work groups, communication and assistance among employees, employee participation in organizational issues, encourages teamwork, reduces mistakes and, in general, improves organizational climate, organizational commitment and job satisfaction, and thereby, reducing turnover, employee absenteeism, and occupational maladaptive behaviors. In addition, it improves extra-organizational factors such as customer satisfaction, quality of services and customer loyalty, resulting in high quality performance [11]. Attitude refers to a mental or neurotic state representing the tendency that is organized through the experience, influences an individual's responses to all the issues and situations that are associated with him and has a dynamic or oriented effect. The attitude denotes cognitive and affective impact rather than a personal experience of an object or a social subject and is a tendency to respond to that object. Attitude, in this sense, is a hidden mechanism that guides behavior. An attitude is a viewpoint expressed about individuals, things or events and reflects the type of individual's feelings about it [12]. Additionally, organizational commitment is a state by which an individual identifies the goals of an organization and wishes to remain as a membership of that organization. Organizational commitment supports interactions between expectations, demographic characteristics of employees, and various occupational characteristics, and ultimately, leads to OCB [13]. Organizational commitment is an individual's affective and mental reaction to his work. If organizational commitment is high in an organization, employees' productivity and efficiency will increase in that organization, and lack of it results in reduced job satisfaction [14]. On the other hand, workplace violence is part of the workplace-related occupational risks, which influences employees' functional ability and motivation. The negative consequences of workplace violence have made this phenomenon to be the subject of many research in different working environments and fields [15]. In those organizations where there is violence, conflicts and inconveniences arise and staff seek to flee. As a result, organizations lose their key employees [16]. Individuals lose their sense of belonging to their

organization. Ultimately, they lose their will to tolerate difficulties and try to find another job with better working conditions [17]. Tepper (2000) reported that victims of workplace violence show higher continuance commitment, lower affective and normative commitment [18]. Ertureten, Cemalcilar & Aycan (2013), in their study, concluded that violent behavior at work by supervisors was negatively related to the employees' job attitudes [7, 18, 19].

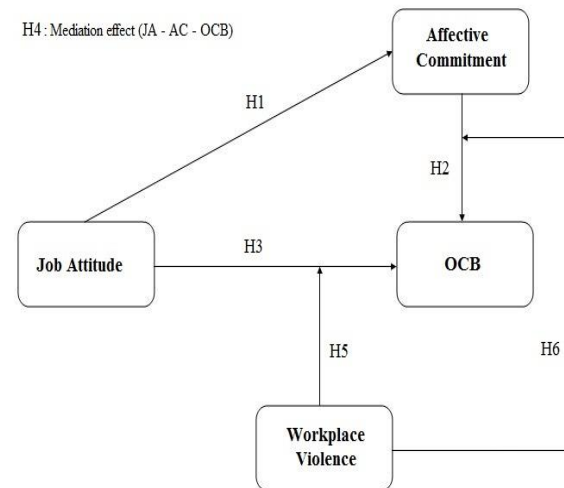


Figure 1. Research conceptual model

H1: Job attitude affects affective commitment.

H2: Affective commitment affects OCB.

H3: Job attitude affects OCB.

H4: Job attitude affects OCB due to the mediation role of affective commitment.

H5: Workplace violence moderates the effect of Job attitude on OCB.

H6: Workplace violence moderates the effect of affective commitment on OCB.

Method

Sample size and variable measurement

In the present study, the statistical population included nurses working in ten hospitals of Tehran City. A sample of 230 people was selected using the G power sampling software and according to the research model. To ensure that at least 230 (sample size) questionnaires were used in the present study, greater number of questionnaires were distributed and finally, 243 questionnaires were selected for analysis.

To collect data, a researcher-made questionnaire was used. It consisted of two parts: 1. General information, including demographic information; and 2-the main body, including 22 closed questions. Job attitude variable was measured with 5 items, affective commitment variable with 6 items, and OCB variable with 6 items. All of these items were extracted from Soltanianaghizi *et al.* (2017) [20]. Moreover, workplace violence variable was measured with 5 items extracted from a questionnaire used by Li *et al.* (2019) [21].

A 5-point Likert scale divided the responses from 5 (strongly agree) to 1 ("strongly disagree").

The content validity of the items was approved by the experts. Also, considering the content of the items, it can be stated that the measurement models are reflective. According to the demographic information of respondents, most nurses were in the 35-44 age group (53.5%), female (84%) and had work experience of 11-15 years (39.9%), so they had the required experience to answer the research questions.

Validity and Reliability

Convergent validity was investigated considering the values of outer loadings and AVE index. As the values of the outer loadings are above 0.4 [22-24] and the AVE index is above 0.5 [25, 26] (Table 1), the convergent validity is confirmed.

The reliability of the questionnaire was evaluated by CR and Cronbach's alpha (Table 1). Some researchers suggest 0.7 and above as a favorable point for CR [27-29]. As the value of these coefficients is higher than 0.7, the research means reliability is confirmed.

Table 1: Measurement models, Convergent validity and Reliability

Constructs	Reliability				Model type
	Outer loadings	AVE	Cronbach's alpha	CR	
Job Attitude (SD=0.389, M=4.022)		0.578	0.816	0.872	Reflective
JA 1	0.652				
JA 2	0.856				
JA 3	0.733				
JA 4	0.771				
JA 5	0.777				
Affective Commitment (SD=0.397, M=4.101)		0.617	0.874	0.906	Reflective
AC 1	0.655				
AC 2	0.781				
AC 3	0.830				
AC 4	0.831				
AC 5	0.799				
AC 6	0.804				
OCB (SD=0.402, M=4.002)		0.560	0.840	0.883	Reflective
OCB 1	0.804				
OCB 2	0.785				
OCB 3	0.757				
OCB 4	0.823				
OCB 5	0.621				
OCB 6	0.682				

Workplace Violence (SD=0.339, M=4.223)	0.624	0.848	0.892	Reflective
WPV 1	0.715			
WPV 2	0.721			
WPV 3	0.768			
WPV 4	0.852			
WPV 5	0.880			

Notes: AVE, average of variance extracted; CR, Composite Reliability; SD, Std. Deviation; M, Mean; AC, Affective Commitment; JA, Job Attitude; OCB, Organizational citizenship behavior; WPV, Workplace violence.

The Fornell and Larcker criterion was used to assess the discriminant validity at the factor level [30]. The square root of the AVE hidden variables in the main diagonal of the matrix was greater than the convergence with those underneath and to the left of the main diagonal (Table 2). This indicates the appropriate fitting of the measurement models in terms of discriminant validity at the factor level.

Table 2: Discriminant validity with (Fornell & Larcker criterion)

Constructs	AC	JA	OCB	WPV
AC	0.785			
JA	0.831	0.761		
OCB	0.789	0.771	0.749	
WPV	0.758	0.760	0.779	0.790

Data analysis and Findings

After examining and confirming the reflective measurement models, in the second step, the PLS-SEM approach was used to evaluate the structural model and test the hypotheses using the SmartPLS 3 software [31].

The output of the software was calculated for path coefficients after testing the conceptual model (Fig. 2). The structural model of fit-criteria were investigated. The most important indices are R² and R² Adjusted (Table 3). Also, in order to investigate the model's ability to anticipate, Q² index, including Construct Cross-validated Redundancy (CC-Red) and Construct Cross-validated Communality (CC-Com), those values closer to 1 are more favorable [32, 33]. Also, SRMR index is used as the main index for evaluating the entire model, including structural model and measurement models [34]. In the present research, SRMR index was reported to be 0.081 in the Estimated model output and 0.076 in the Saturated model output, which shows good fit of the measurement models and structural model.

Table 3: Assessment of structural model indicators

Variable	R ²	R ² adjusted	CC-Red	CC-Com
AC	69%	68.9%	0.384	0.446
JA				0.350
OCB	72%	71.4%	0.360	0.372
WPV				0.405

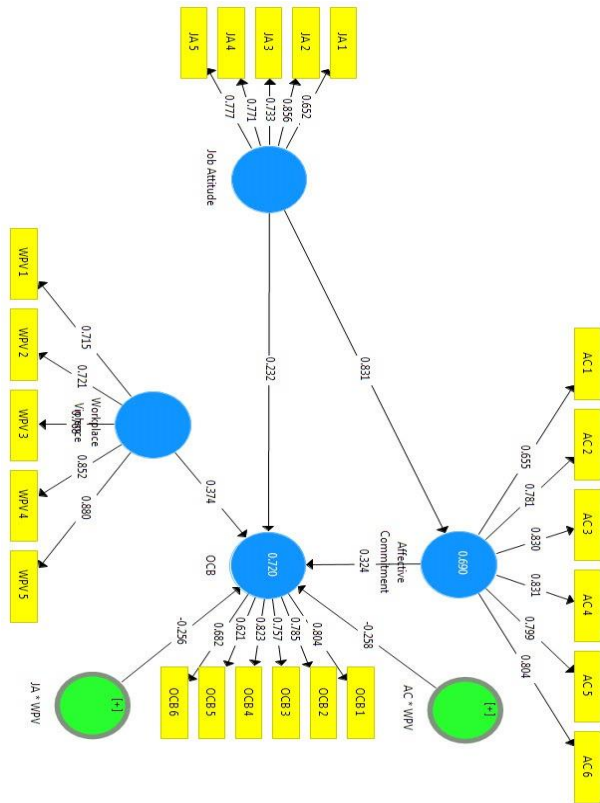


Figure 2. Path coefficients

In order to test the hypotheses H1 to H3, direct effect was evaluated. According to Table 4, about H1 (H1: $\beta = 0.831$, $SD = 0.039$, $t = 21.213$, $p = 0.000$), the results show that this hypothesis is not supported at 95% confidence level considering the confidence intervals and $p < 0.05$. In the cases of H2 (H2: $\beta = 0.324$, $SD = 0.059$, $t = 5.464$, $p = 0.000$) and H3 (H3: $\beta = 0.232$, $SD = 0.061$, $t = 2.844$, $p = 0.005$), the results show that these two hypotheses are supported.

To examine H4, the mediation effect was investigated. At first, the total effect was examined and the results showed that the total effect of job attitude on OCB is significant (Total effect: $\beta = 0.501$, $SD = 0.067$, $t = 7.515$, $p = 0.000$). Then, indirect effect (JA-AC-OCB) was investigated and the results showed a significant effect (Indirect effect: $\beta = 0.269$, $SD = 0.052$, $t = 5.217$, $p = 0.000$). Given the significant direct effect, indirect effect and total effect, partial mediation is approved in this hypothesis. In order to investigate the moderation effect for H5 and H6, the product indicators were used and the results showed that H5 is approved while H6 is rejected.

Table 4: Results of research hypotheses

Hypotheses	Path coefficient	SD	t-statistics	p-value	Decision
H1	0.831	0.039	21.213***	0.000	Supported
H2	0.324	0.059	5.464***	0.000	Supported
H3	0.232	0.061	2.844**	0.005	Supported
H4	0.269	0.052	5.217***	0.000	Supported
H5	-0.256	0.129	1.978*	0.048	Supported
H6	-0.258	0.143	1.803	0.072	Not Supported

Note: $t > 1.96$ at * $p < 0.05$; $t > 2.58$ at ** $p < 0.01$; $t > 3.29$ at *** $p < 0.001$; two-tailed test

Conclusion

Given the important role of human resources in achieving the strategic goals of organizations, especially healthcare centers and hospitals, whose function has a unique sensitivity in crisis situations, it is necessary to pay attention to the factors affecting employees' attitudes and behavior. After the period of classical and instrumental thinking in management, paying attention to human and dimensions of his existence in management increased, and as a result, research on the organizational behavior has become important for many scholars, and the domain of "work ethic" was raised among them. The importance of OCB in various organizations and agencies is irrefutable. Earlier research on OCB has been often carried out to identify the responsibilities or behaviors that staff had in the organization, but were often ignored. Although these behaviors were poorly measured using traditional job performance assessment techniques or even neglected, they were effective in improving organizational effectiveness. On the one hand, work ethic has several aspects and one of its scientific aspect is commitment. Since work commitment is an employee's affective and mental responses to his job, high organizational commitment results in reduced maladaptive behavior, absenteeism and turnover, and job dissatisfaction and increased job satisfaction, accountability, efficiency and production. Many studies have approved that affective commitment has the strongest relationship with OCB. On the other hand, job attitude is very important to organizations. Workplace violence negatively affects employees' job attitude, as nurses experienced job violence have low job satisfaction, anxiety, depression, and high turnover intention.

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