

Effect of Organizational Cynicism Management Educational Program on Nurses' Organizational Commitment and Job Embeddedness

¹Tahany Mohamed Osama Elsayed, ²Nermin Mohamed Eid and ³Salwa Ibrahim Mahmoud

(1) M.Sc. Nursing Administration (2019), Faculty of Nursing, Benha University- Egypt,

(2) Professor of Nursing Administration, Faculty of Nursing - Menoufia University- Egypt

(3) Assistant Professor of Nursing Administration, Faculty of Nursing - Benha University- Egypt.

Abstract:

Background: Organizational cynicism is one of the major issues that exists in healthcare organizations and associated with nurses' attitude. Also, it is undesirable attitude that is reported to have a negative impact on nurses' commitment and job embeddedness. **Aim of the study:** To assess effect of organizational cynicism management on nurses' organizational commitment and job embeddedness **Study design:** A Quasi-experimental design was utilized to meet the aim of this study. **Setting:** The study was conducted at general medical units at Benha University Hospital. **Study subjects:** A systematic simple random sample included 58 nurses chosen from the above mentioned units. **Tools of data collection:** Four different tools were used namely; **Tool (I)** Organizational cynicism management knowledge questionnaire, **Tool (II)** Organizational cynicism attitude scale, **Tool (III)** Organizational commitment questionnaire and **Tool (IV)** Job embeddedness scale. **Results:** Majority (94.8%) of nurses had inadequate knowledge regarding organizational cynicism at pre-program phase, but it improved to become (89.7% and 77.6%) adequate knowledge at immediate post and follow up program phase. Also, majority (86.2%) of nurses had high organizational cynicism attitude at pre-program phase, but it improved to (67.2% and 53.4%) at immediate post and follow up phases respectively. **Conclusion:** There was significant positive correlation between knowledge and nurses' organizational cynicism attitude and organizational commitment and job embeddedness during immediate post and follow up (after three months) of the program phases compared with pre-program phase. **Recommendations:** Developing an effective strategy to improve relations between nurses and their superiors, in order to decrease cynicism level.

Keywords: Commitment, Cynicism attitude, Cynicism knowledge, Embeddedness, Nurses.

Introduction:

Health sector is one of the important sectors due to the vital role it plays at the present time. Additionally, nursing job is one of the jobs in which there are many sources of pressure, which make nurses dissatisfied with profession or organizations, and lead to low level of commitment and embeddedness, which results in negative and cynical expressions that reflect on job performance (Mohamed et al., 2022).

Cynicism is among the salient concepts that have emerged in the field of

organizational behavior in recent years. Although, its synonyms include skepticism, incredulity, insecurity, disbelief, pessimism and negation, in the modern sense, a cynic is one who finds faults, the one who likes things with difficulty, and the one who criticizes. Organizational cynicism has direct impact on nurses' job satisfaction, organizational commitment and their job embeddedness (El-liethy & Atalla, 2021).

Organizational cynicism can be defined as general or specific attitudes of disappointment, insecurity, hopelessness,

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anger, mistrust of institutions or persons, group, ideology, and social skills. In other words, organizational cynicism is the negative attitude that is developed by nurses against the organization in which they work, also cynicism can be defined as a pessimistic approach which affect nurses negatively (Jiang et al., 2022).

There are three dimensions of organizational cynicism cognitive dimension, it consists of the belief that the organization's practices are deficient in justice, honesty, and sincerity. Second dimension of organizational cynicism is affective dimension that consists of strong emotional reactions towards the organization. The last dimension is behavioral dimension that refers to negative tendencies and mainly humiliating attitudes. It consists of negative and frequently critical attitudes. Therefore, Organizational cynicism is a learned response that is affected by workplace experiences (Kim, et al., 2022, Peter & Chima, 2018).

Organizational commitment refers to the attachment of the nurses to their organization and their wish to stay there. Organizational commitment is the degree to which nurses' identification of themselves with specific organizations with their goals, and desires to maintain membership in these organizations, work on a regular basis, caring organizational properties, and interesting in its goals (Doan, et al., 2020).

Job embeddedness is defined as an abroad of psychological, social, and financial affects abroad on nurses retention. These effects exist on the job, as well as outside the nurse's immediate work environment. So when nurses get support from coworkers and supervisors they become more involved in their jobs, also nurses in a positive psychological state are more committed and embedded with their jobs, which improves

their performance and decrease level of organizational cynicism (Karatepe & Avci, 2019).

The effect of organizational cynicism decreases or disappears since the workload is distributed fairly among nurses, the environment of trust is ensured, and the expectations of nurses are met at the sufficient level. It can be said that it is difficult for nurses who have cynical thoughts and exhibit cynical behaviors to show commitment towards the institution (Eraslan et al., 2018).

Significant of the study:

The study may help managing the negative attitudes and behaviors associated with cynicism and thus enhance nurses feeling of job commitment, security, increase job embeddedness, develop the competencies and decrease intention to leave work. So, this study was conducted to study the effect of organizational cynicism management on nurses' organizational commitment and job embeddedness.

Aim of the study:

This study aimed to assess effect of organizational cynicism management on nurses' organizational commitment and job embeddedness through:

- Assessing nurses' knowledge toward organizational cynicism through program.
- Assessing nurses' attitude toward organizational cynicism management through program.
- Assessing nurses' organizational commitment through program.
- Assessing nurses' job embeddedness level through program.
- Designing and implementing educational program for organizational cynicism management.
- Assessing effect of organizational cynicism management program on

nurses' commitment and job embeddedness.

Research Hypotheses:

- There will be improvement in nursing knowledge and attitude toward organizational cynicism after implementing the program.
- There will be a positive effect on nurses' organizational commitment and job embeddedness after implementing the program.

Subjects and Method:

Research Design

A quasi-experimental one-group pretest-post-test and follow-up design was carried out in this study.

Setting

This study was conducted in general medical units at Benha University Hospitals in Al-Qalyubia governorate. Medical departments included 6 units.

Study Subjects

The proportion allocation sample consisted of 25% of the total nurses in the above-mentioned setting and was selected by a systematic random sample including 58 nurses from the total 232 nurses. Selection from the sampling frame is carried out systematically rather than randomly, by taking individuals at regular intervals down the list. The starting point begins chosen randomly, this is done by picking every 4th individual (e.g: 4th, 8th, 12th ...etc. unit at regular interval).

Tools of data collection:

Four tools were used for data collection.

Tool (I): Organizational cynicism management knowledge questionnaire:

A structured questionnaire was developed by the researcher based on a review of related literature (Özgür, (2018), Nguyen et al., (2020), and Simsek, (2020), to assess nurses'

knowledge about organizational cynicism management at work. It contained two parts:

Part (1) Personal data: It consisted of personal data of head nurses (age, years of experience, gender, marital status, educational level, attending any courses on organizational cynicism).

Part (2) Organizational cynicism management knowledge questionnaire: It included 35 questions to assess nurses' knowledge about organizational cynicism management at work through educational program in the forms of multiple-choice (15 items), true or false (12 items), matching the right answers (8 items).

Scoring system:

The questions were scored as "1" for a correct answer, and "zero" for an incorrect answer so the total scores (35). Total Knowledge score was calculated as follows; Inadequate if the percent score was less than 60%. Adequate if the percent score equals or more than 60 (Stavrova et al., 2020).

Tool (II): Organizational cynicism attitude scale:

It was developed by Dean et al., (1998), modified, and translated by the researcher based on a related review of literature (Seher, et al., 2018). To assess nurses' attitudes about organizational cynicism. It consisted of three main categories which contained (12) items, which are cognitive cynicism (5) items, affective cynicism (4) items and behavioral cynicism (3) items.

Scoring system:

For answers to each question, scores were allocated as follows: (1) disagree, (2) little agree and (3) agree. Total attitude score was calculated as follows, if the score is less than 60% of total attitude scores it is low exposure to organizational cynicism. If the score is more than 60% it is high exposure to organizational cynicism (Komal, 2020).

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Tool (III): Organizational commitment questionnaire:

The structured questionnaire was adopted from **Faisal, et al., (2017)** to assess organizational commitment among nurses. It consisted of three main categories which contained (18) items, which are affective commitment (6) items, continuance commitment (7) items, normative commitment (5) items.

Scoring system:

For answers in each question, scores were allocated as follows: (1) disagree, (2) little agree and (3) agree. Total organizational commitment score was calculated as follows; if the score was more than 60% it was considered high organizational commitment. If the score was less than 60% it was considered low organizational commitment (**Sinem et al., 2020**).

Tool (IV): Job embeddedness scale

It was developed by **Mitchell, et al., (2001)**, modified and translated by the researcher based on the related literature (**Reitz et al., 2019**) to assess job embeddedness among nurses. It consisted of three main categories which contained (18) items, which are fit embeddedness (6) items, link embeddedness (6) items and sacrifice embeddedness (6) items.

Scoring system:

For answers in each question, scores were allocated as follow: (1) disagree, (2) little agree and (3) agree. Total job embeddedness score was calculated as follows; if score less than 60% of total embeddedness score it was considered low job embeddedness. If the score more than 60% it was considered high job embeddedness (**Osman & Turgay, 2019**).

Administrative design:

An official approval was obtained from the Dean of Faculty of Nursing and the Hospital Director of Benha University

Hospital and from all participants in the study through official letters sent to the heads of departments explaining the aim of the study. Assured complete confidentiality of the obtained information, and the study would not affect in any way the work or jeopardize patient care. The results of the study, along with the recommendations will be forwarded to the hospital administration for possible application, to obtain their permission and help in conducting and facilitating data collection.

Meetings were held between the researcher and nurses of general medical departments. The aim of the study was discussed with them. The time for data collection and program implementation were also determined based on their views, to gain their approval and cooperation.

Content validity:

These four tools were tested for validity (Face, Content) through distribution of the tool to a jury of five Experts on field of Nursing Administration consisting of five Professors; three Professors of Nursing Administration from Tanta University and other two Professors of Nursing Administration from Menoufia University. Modifications were done in the light of their valuable comments such as modify some words to give the most appropriate meaning for the phrase which were not clear.

Reliability of tools:

The reliability was done by Cronbach's Alpha Coefficient test. The internal consistency was 0.885 for knowledge, 0.903 for attitude, 0.878 for Organizational commitment tool and 0.865 for job embeddedness tool.

Ethical Considerations:

Prior the study conduction, ethical approval was obtained from the scientific research committee at faculty of Nursing

Benha University. The study was conducted with careful attention to ethical standards of research and rights of the participants.

▪ **Informed consent**

The respondent rights were protected by ensuring voluntary participation, so the informed consent will be obtained by explaining purpose, nature time of conducting the study, potential benefits of the study, how data will be collected, any invasive procedure, expected outcomes and the respondent rights to withdrawing from the research study at any time in case of violation of his rights.

▪ **Anonymity and confidentiality**

The respondent was assured that the data would be treated as strictly confidential; furthermore, the respondent anonymity will be maintained as they will not require mentioning their names.

▪ **Scientific honesty**

To ensure scientific honesty, the researcher uses bucketing and intuiting to avoid bias.

Operational design:

The operational design for this study includes; preparatory phase, pilot study and field work. The current study was carried out on three phases: preparation, implementation and evaluation.

Preparatory phase

The researcher reviewed the current available literature review to develop the study tools of data collection. Finally, the questionnaires were revised and modified, then approved by the supervision committee.

Pilot study

It took one month (January 2022), the revised questionnaires were piloted with 10% (6 nurses) form the subjects. To evaluate the effectiveness of the proposed data collection tools, and assess the feasibility of the study. The time needed to complete knowledge questionnaire sheet ranged from (25-30) minutes, the time needed to complete

organizational cynicism attitude scale ranged from (10-15) minutes, also the time needed to complete organizational commitment questionnaire ranged from (10-15) minutes. Finally the time needed to complete job embeddedness scale ranged from (15-20) minutes, in the light of the pilot study analysis, no modification was done and the last form was developed, subjects were included in the study sample.

Field Work

The following phases were adopted to achieve the aim of study: Assessment, planning, implementation and evaluation phases. Theses phases were carried out from the beginning of February (2022) to the end of October (2022).

Assessment phase:

- The process of data collection was carried out in February 2022 to assess nurses' knowledge and attitude regarding organizational cynicism and assess nurses' commitment and job embeddedness before implementation of the educational program.
- At the beginning, the researcher welcomed nurses, gave a brief idea about the aim and activity of the program for all nurses. Then, the researcher collected data by using the different tools of data collection to determine learning needs among nurses.

Planning phase

Based on baseline data obtained from pre-test assessment and relevant review of literature, the program was developed by the researcher. This was taken one month March, 2022.

- The researcher started the preparation of an educational program of organizational cynicism management after reviewing the related literature.
- Detected needs were transformed to development education program. An

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education program was developed based on pre-determined learning needs and relevant review of the literature.

- Program construction in a form of printed Arabic form and included different topics to enhance organizational cynicism knowledge. Also the researcher prepared power point presentation of the topics.
- Program targets were nurses working in Benha University Hospital. It aimed to prepare and develop an educational program of organizational cynicism management. Different instructional strategies, method of teaching, media and method of evaluation were selected to suit the learners' needs and achieve the objectives and contents of the program. The teaching sessions were (12) hours distributed as follows: (6) sessions, (2) hours for session, achieved by using available resources, relevant contents, and instructional strategies for each session. Different methods of teaching were used such as lectures, group discussion, and brainstorming. Instructional media included, handouts prepared by the researcher and distributed to participants in the first day of the training.

Implementation phase:

This phase was initiated in April, 2022 to May 2022 .

- The researcher visited the previously mentioned study settings 3days/week from 9 A.M. to 2 P.M. in morning and nurses who working in night shift when return back to morning shift.
- The subjects were divided in to 5 groups according to their units, (3) group was 12 and the others (2) groups were 11. Organizational cynicism program took about (10) days. The duration of each session was two hours depending on workload and including periods of

discussion according to their achievement, progress and feedback. It started at (10) A.M. to (12) P.M. At the beginning of each session an orientation to the training and its aims took place. Feedback was given at the beginning of each session about the previous one and at the end of each session about the current session and program situations given to participants to write their suggestions for alternative solutions.

Evaluation phase:

- During this phase, the impact of educational program was evaluated. Immediate evaluation included, immediate post program implemented for all subjects using the same tools which were used before the program. Follow up after three months of program implementation, all the study tools were applied for nurses to test the follow up gain in the nurses' knowledge, attitude regarding organizational cynicism and change in nurses' commitment and job embeddedness. The time of the data collection lasted during June, 2022.
- Follow up after three months evaluation of program effectiveness was done by using the same tools of data collection during October, 2022.

Statistical analysis:

Data were verified prior to entry into the computer. The Statistical Package for Social Sciences (SPSS version 22.0) was used for that purpose, followed by data analysis and tabulation. Descriptive statistics were applied quantitative data (frequency and percentages). Pearson correlation (r) test was used for association between total scores. Non-significant level value was considered when $p > 0.05$. A significant level value was considered when $p \leq 0.05$ and a highly

significant level value was considered when $p \leq 0.001$.

Results:

Table (1) Shows that, more than one third (34.5%) of nurses aged < 30 years, with mean score (32.10±6.08). In addition more than half (56.9%) of nurses had years of experience between 5- < 10 years. While less than two thirds (65.5%) of nurses were females. In relation to marital status majority (89.7%) of nurses were married. Also, more than half (53.4%) of nurses had associated degree in nursing. Moreover, all nurses (100.0%) did not attend any pervious educational courses about organizational cynicism.

Figure (1) Displays that, there was a highly significant improvement in nurses knowledge regarding organizational cynicism through immediate post and follow up (after three months) of the program compared with preprogram phase. Majority (94.8%) of nurses had inadequate knowledge regarding organizational cynicism at pre-program phase, but it improved to become (89.7%) adequate knowledge at immediate post-program phase and slightly decreased to be (77.6%) adequate knowledge at follow up phase (after three months).

Figure (2) Shows that, majority (86.2%) of nurses had high organizational cynicism attitude at pre-program phase, but it improved to (67.2% and 53.4%) at immediate post and follow up phases (after three months) had low organizational cynicism attitude level, respectively.

Figure (3) Illustrates that there was a highly significant improvement in level of organizational commitment through the phases of implementing organizational cynicism management educational program, majority (89.7%) of nurses had low organizational commitment level at pre-program phase, which improved and increased to high level to become less than

two thirds (62.1%) at immediate post program and decreased to (39.7%) at follow up phases (after three months) that still more than preprogram level.

Figure (4) Displays that, there was a highly statistical significant improvement in level of job embeddedness through phases of implementing program, more than half (56.9%) of nurses had low job embeddedness level at pre-program phase, which improved and increased to become more than three quarters (75.6%) at immediate post program and decreased to (56.9%) at follow up phases (after three months) that still more than preprogram level.

Table (2) Reveals that, there was statistical significant positive correlation between nurses' organizational cynicism management knowledge, organizational commitment and job embeddedness at pre-program phases at $P \leq 0.05$. Also, there was highly statistical significant positive correlation between nurses' organizational cynicism management knowledge, cynicism attitude, organizational commitment and job embeddedness at immediate post program at $P \leq 0.001$. Moreover, there was statistical significant positive correlation between nurses' organizational cynicism management knowledge, cynicism attitude, organizational commitment and job embeddedness at follow up phases at $P \leq 0.05$ (after three months post program). In addition, there was highly statistical significant positive correlation between nurses' cynicism attitude, organizational cynicism management knowledge, organizational commitment and job embeddedness at immediate post program phases at $P \leq 0.001$. Also, there was statistical significant positive correlation between nurses' cynicism attitude, organizational cynicism management knowledge, organizational commitment and

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job embeddedness at pre- program and follow up phases (after three months) at $P \leq 0.05$.

Moreover, there was statistical significant positive correlation between organizational commitment, organizational cynicism management knowledge, nurses’ cynicism attitude and job embeddedness at pre-

program and follow up phases (after three months) at $P \leq 0.05$. Also, there was highly significant positive correlation between organizational commitment, organizational cynicism management knowledge, nurses’ cynicism attitude and job embeddedness at immediate post program phases at $P \leq 0.001$.

Table (1): Frequency distribution of nurses according to their personal characteristics (n=58)

Personal characteristics	No.	%	
Age (in years)	< 30 years	20	34.5
	30- < 35 years	18	31.0
	35- < 40 years	9	15.5
	≥ 40 years	11	19.0
	Range Mean \pm SD	22-44 32.10 \pm 6.08	
Years of experience	< 5 years	3	5.2
	5- < 10 years	33	56.9
	10- < 15 years	4	6.9
	≥ 15 years	18	31.0
	Range Mean \pm SD	3-22 10.68 \pm 5.56	
Gender	Male	20	34.5
	Female	38	65.5
Marital status	Unmarried	6	10.3
	Married	52	89.7
Educational level	Diploma Degree in nursing	17	29.3
	Associated degree in nursing	31	53.4
	Bachelor of nursing	10	17.3
Attending any courses on organizational cynicism	Yes	0	0.0
	No	58	100.0



Figure (1): Percentage distribution of nurses’ total knowledge regarding organizational cynicism management through program phases

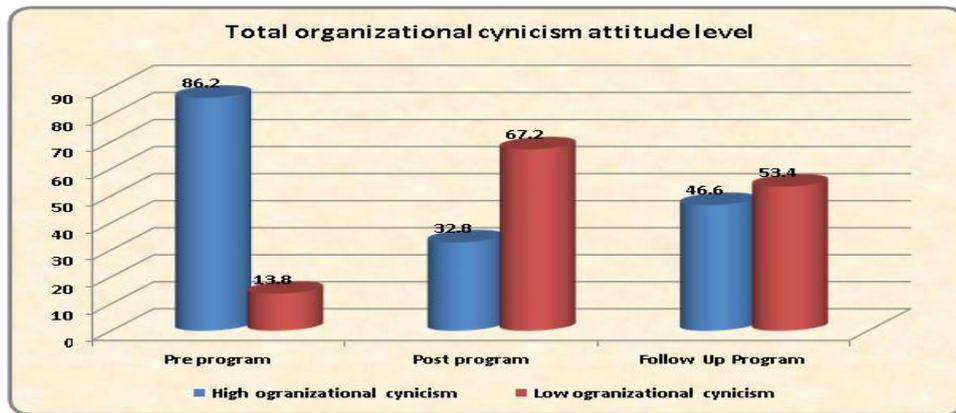


Figure (2): Percentage distribution of nurses’ organizational cynicism attitude through program phases



Figure (3): Percentage distribution of nurses’ organizational commitment through program phases

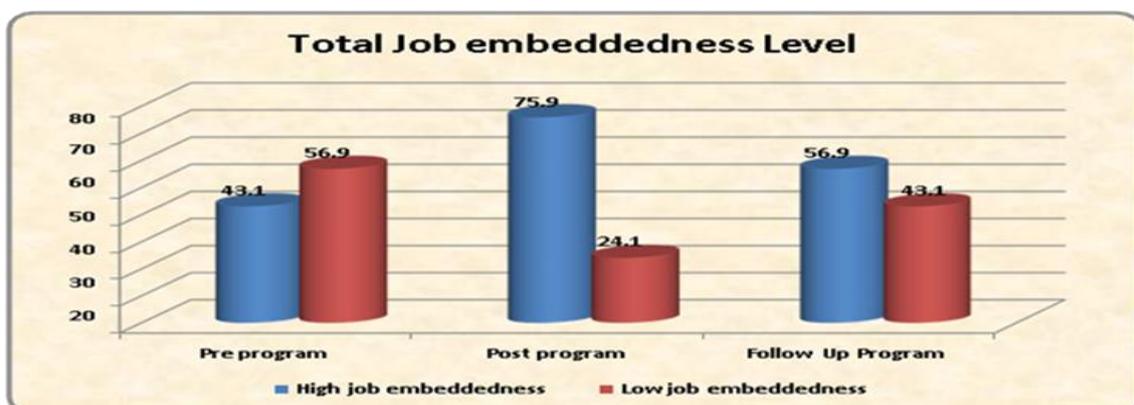


Figure (4): Percentage distribution of nurses’ job embeddedness through program phases

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Table (2): Correlation matrix among the studied variables through program phases.

Variables			Total knowledge	Total attitude	Total organizational commitment	Total job embeddedness
Knowledge	Pre program	r	-	0.204	0.312	0.270
		p-value	-	0.124	0.017*	0.040*
	Post program	r	-	0.421	0.419	0.322
		p-value	-	0.001**	0.001**	0.014*
	Follow up	r	-	0.315	0.295	0.274
		p-value	-	0.016*	0.024*	0.038*
Attitude	Pre program	r	0.204	-	0.295	0.182
		p-value	0.124	-	0.025*	0.172
	Post program	r	0.421	-	0.384	0.558
		p-value	0.001**	-	0.001**	0.000**
	Follow up	r	0.315	-	0.450	0.344
		p-value	0.016*	-	0.000**	0.008*
Organizational commitment	Pre program	r	0.312	0.295	-	0.264
		p-value	0.017*	0.025*	-	0.045*
	Post program	r	0.419	0.384	-	0.521
		p-value	0.001**	0.001**	-	0.000**
	Follow up	r	0.295	0.450	-	0.276
		p-value	0.024*	0.000**	-	0.036*
Job embeddedness	Pre program	r	0.270	0.182	0.264	-
		p-value	0.040*	0.172	0.045*	-
	Post Program	r	0.322	0.558	0.521	-
		p-value	0.014*	0.000**	0.000**	-
	Follow up	r	0.274	0.344	0.276	-
		p-value	0.038*	0.008*	0.036*	-

(*A statistical significant difference $P \leq 0.05$, ** A highly statistical significant difference $P \leq 0.001$).

Discussion:

Regarding personal characteristics of nurses the present study illustrated that the distribution of personnel characteristics of the studied nurses, more than one third of nurses aged less than 30 years, As regarding to years of experience more than half of nurses had experience between 5- 10 years. As regarding to gender less than two thirds of nurses were females. According to marital status the majority of nurses were married. As for their educational qualification more than half of nurses had associated degree in nursing. And all of studied nurses didn't attend any training courses about organizational cynicism.

Regarding percentage distribution of nurses knowledge regarding organizational cynicism management through the program phases the majority of nurses had inadequate knowledge regarding organizational cynicism at preprogram phase, but the majority of nurses had highly adequate knowledge regarding organizational cynicism management at immediate post program phase while it decreased through follow up phase.

From researcher point of view inadequacy nurses' knowledge related to organizational cynicism was new subject and they didn't have adequate training about it. However,

increasing knowledge acquired by nurses could be explained by the fact that learning was not a passive experience and courses created an interactive environment. In addition, this improvement could be due to simple, clear and concise way of presentation and lectures and the availability of relevant media that gave more illustration for understanding the text and frequent repetition and motivating them to share in the program. Also, this may be due to greater effect of the education program in total knowledge about organizational cynicism management after program implementation.

This result in the same line with **Sungur et al., (2019)** who conducted a study about "Paternalistic leadership, organizational cynicism, and intention to quit one's job in nursing" who indicated that, nurses' knowledge about organizational cynicism were low and there was a significant improvement after attending educational program and emphasized the importance of educational opportunities to strengthen and update their knowledge.

This results was also supported by **Mohamed, et al., (2023)**, who conducted a study about "Effect of organizational cynicism on quality of work life and employee effectiveness among nursing staff" who reported that, nurses had low knowledge at the beginning of study and gradually improved by time all over, after one, two and three months post program implementation and highly statistically significant differences in knowledge scores after implementation of the program.

This result were consistent with **Aly, et al., (2016)**, who conducted a study about "Organizational cynicism and its consequences on nurses and quality of care in critical care and toxicology units" who reported that there were a highly statistical

significant improvement in knowledge scores between pre and immediately post program.

Regarding total level of nurses' organizational cynicism attitude through the program phases majority of the studied nurses had high organizational cynicism that improved to be less than two thirds of them had organizational cynicism in post and follow up program phase. This may be due to that the program had a positive effect on releasing effect of cynicism on nurses. Also, improvement in nurses' attitude regarded to that hoped to be less exposure to cynicism and related to enhancing their knowledge from implementing educational program, which helped them to know more about attitude of cynicism and how to manage it.

This result findings were in agreement with **Nafei and Kaifi, (2013)** who conducted a study about "The impact of organizational cynicism on organizational commitment: An applied study on teaching hospitals in Egypt" who reported that there was a highly statistically significant improvement in all the dimensions of organizational cynicism attitude among nurses.

Also, the finding of the current study was in the same line with **El-liethy and Atalla, (2021)** who conducted a study about "Relationship between organizational cynicism and nurses' intension for turnover as perceived by nurses at Alexandria" who reported that majority of nurses had high level of organizational cynicism attitude.

Regarding total nurses' organizational commitment, the current study revealed that a highly significant improvement in level of organizational commitment through the phases of implementing organizational cynicism management educational program, majority of nurses had low organizational commitment level at pre-program phase, which improved and increased to become more than two thirds at immediate post

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program and decreased at follow up phases (after three months).

From researcher point of view improvement in level of organizational commitment through phases of implementing organizational cynicism management program was related to improvement in nurses' knowledge regarding organizational cynicism management and nurses became satisfied with their jobs, and motivated to do their job effectively and efficiently so organizational commitment level increased.

This finding was in consistent with **Kahar, (2019)**, who conducted a study about "Effect of organizational cynicism on commitment and job satisfaction of employees in public sector organizations in GHANA" who reported that there was improvement in organizational commitment after increasing management of organizational cynicism.

This finding was in consistent with **Somunoğlu İkinci, Ünalın, and Yurdakoş, (2020)**, who conducted a study about "An evaluation of the relation between organizational cynicism and organizational commitment" who reported that nurses feel less organizational commitment due to cynic tendency, so organizational cynicism affects organizational commitment as nurses tend to say positive things about their working place, become a part of the team by continuing to work there and show extra effort for the success of the organization, also when cynicism decreased there was improvement and increase in nurses commitment.

This result was disagreement with **Erarslan et al., (2018)**, who conducted a study about effect of organizational cynicism and job satisfaction on organizational commitment who reported that organizational cynicism does not have any influence on organizational commitment.

Regarding total nurses' job embeddedness, the current study revealed that a highly significant improvement in level of job embeddedness through the phases of implementing organizational cynicism management educational program, majority of nurses had low job embeddedness level at pre-program phase, which improved and increased to become more than two thirds at immediate post program and decreased at follow up phases (after three months).

From researcher point of view this improvement in nurses embeddedness through program phases is related to improvement in nurses knowledge about embeddedness, nurses become linked more with organization, also leaders and organizational managers engage nurses in taking decisions which increase nurses trust make them more proud about their organization more embedded with other nurses motivation and incentives decrease cynicism which lead to increase job embeddedness.

This finding was in consistent with **Nafei, (2015)**, who conducted a study about "The effects of job embeddedness on organizational cynicism and employee performance" who reported that when there is improvement of knowledge regarding job embeddedness it leads to high level of embeddedness in organization.

This result was disagreement with **Singh et al., (2018)**, who conducted a study about antecedents of organizational and community embeddedness who reported that there were low embeddedness although there is adequate knowledge regarding job embeddedness.

Regarding correlation between total knowledge, attitude regarding organizational cynicism management, organizational commitment and job embeddedness among nurses through the program phases the study revealed that there were negative correlation

between studied sample total knowledge and their cynicism attitude in preprogram phase, and there were positive correlation between studied sample knowledge, cynicism attitude, organizational commitment and job embeddedness in post program phase. In addition there were positive correlation between studied sample total knowledge and their cynicism attitude, organizational commitment and their job embeddedness in the follow up phase. This may be because the implementation of organizational cynicism management program which indicates the effectiveness of the training program at improving cynicism attitude, organizational commitment and job embeddedness among nurses.

This result was congruent with **Kahar, (2019)**, who reported that there was negative correlation between nurses' organizational cynicism knowledge and their cynicism attitude. Also this result agreed with **Yuksel, and Sahin, (2017)**, who reported that nurse's perception of cynicism is a significant predictor of organizational commitment there is a positive correlation between organizational commitment and their perception of organizational cynicism.

Conclusion:

The educational program was effective for enhancing organizational cynicism knowledge for nurses throughout the program phases. Majority of nurses have adequate knowledge toward organizational cynicism at immediate post program phase. In addition, more than two thirds of nurses had low organizational cynicism attitude at immediate post program phase. Also, there was a highly statistical significant improvement regarding all dimensions of organizational commitment and job embeddedness through immediate post program phase. Moreover, there was significant positive correlation between nurses' knowledge, organizational cynicism

attitude, total organizational commitment and job embeddedness during immediate post and follow up (after three months) of the program phases compared with preprogram phase.

Recommendations:

- Developing an effective strategy to improve relations between nurses and their superiors, in order to decrease cynicism level.
- Taking precautions to remove underlying factors that cause beginning nurses to have a tendency to display cynical behaviors.
- Managers should be committed to promoting a culture of trust at all levels of the organization by building an atmosphere of confidence, adopting the fair practices like operating in an open and honest atmosphere, emphasizing on a conflict-free environment, and fairness feeling among the staff.
- Enabling nurses to feel like a part of organization, value them, and make them feel it.
- Providing more appreciation for nurses that increase autonomy and feeling of responsibility and decrease absence rates and increase level of their commitment and job embeddedness.
- Conducting meeting with nurses and encourage them to express their feeling and what type of recognition they prefer and affect positively on their performance and reduce effect of cynicism.

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تأثير برنامج تعليمي عن إدارة السخريه المؤسسيه علي الالتزام المؤسسي والتناغم الوظيفي للممرضين

تهانى محمد أسامه السيد - نرمين محمد عيد - سلوى إبراهيم محمود

السخرية المؤسسيه هي واحدة من القضايا الرئيسية الموجودة في مؤسسات الرعاية الصحية والمرتبطة بسلوك الممرضين. كما أن السلوك غير المرغوب فيه هو الذي يقال إن له تأثيرا سلبيا على التزام الممرضين و تناغمهم في العمل. لذا هدفت الدراسة إلى تقييم تأثير البرنامج التعليمي لإدارة السخرية المؤسسيه على التزام المؤسسى والتناغم الوظيفى للممرضين. تم استخدام تصميم بحث شبه تجريبي لتحقيق هدف هذه الدراسة. أجريت الدراسة في وحدات الباطنه بمستشفى بنها الجامعى. تضمنت عينة الدراسة ٥٨ من الممرضين تم اختيارهم من الوحدات المذكورة أعلاه. وظهرت النتائج ان غالبية الممرضين ٩٤.٨% لم يكن لديهم معرفة كافية بالسخرية المؤسسيه في مرحلة ما قبل البرنامج، لكنها تحسنت لتصبح ٨٩.٧% و ٧٧.٦% معرفة كافية في مرحلة ما بعد البرنامج والمتابعة الفورية. كان لدى غالبية الممرضين ٨٦.٢% سخريه مؤسسيه مرتفعه في مرحلة ما قبل البرنامج، لكنه تحسن إلى ٦٧.٢% و ٥٣.٤% في مرحلتي التنفيذ والمتابعة على التوالي. كما وجد علاقة ارتباطية إيجابية معنوية بين المعرفة الكليه للممرضين وسلوك السخرية المؤسسيه والالتزام المؤسسى و التناغم الوظيفى أثناء التنفيذ والمتابعة) بعد ثلاثة أشهر(لمراحل البرنامج مقارنة بمرحلة ما قبل البرنامج. واوصت الدراسة بوضع استراتيجيه فعاله لتحسين العلاقات بين الممرضين ورؤسائهم وذلك من أجل خفض مستوى السخرية.