

ORIGINAL RESEARCH

Relationship among organizational cynicism, perceived job insecurity and nurses' work role performance

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ABSTRACT

Background and objective: Organizational cynicism is undesirable attitude that is reported to have a negative impact on employee security and performance. The aim of this study was to examine the relationship among staff nurses' levels of organizational cynicism, perceived job insecurity and work role performance.

Methods: Descriptive correlational design was used to conduct this study. The study was conducted at a large university hospital, Egypt. Convenience sampling technique was employed to select (205) staff nurses. Three tools were used: Organizational Cynicism Scale, job insecurity scale, and Work role performance scale.

Results: Organizational cynicism level was high, job insecurity level was moderate whereas nurses' work role performance was low. Organizational cynicism and all of its' three dimensions i.e. affective, cognition & behavioral had significant and positive relationship with job insecurity and negative with work role performance. Also, there was a significant negative relationship between perceived job insecurity and work role performance.

Conclusion: There were significant relationships among organizational cynicism, job insecurity and work role performance and these three variables differed in relation to demographic characteristics of participants.

Key Words: Organizational cynicism, Job insecurity, Work role performance

1. INTRODUCTION

1.1 Organizational cynicism

The nursing workforce is very significant for any health organization to gain good reputation and is well thought-out to be crucial to achieve its strategic goals. Organizational cynicism is a result of an employees' credence that organizations lack integrity. More precisely, the employees' anticipations of goodness, honesty and fairness are disrupted. Disciplines in social sciences like philosophy, religion, political science, sociology, management and psychology are paying increased attention to the concept of cynicism.^[1] Organizational cynicism is mainly negative perceptions towards an organization

which is reflected as an attitude of aggravation accompanied by decreased interest to work. Others viewed organizational cynicism as an outlook of hostility of oneself toward its organization due to a plumb that organization will always attempt to sucker its employees.^[2]

Studies on organizational cynicism in Egypt are in its primary stages. Consequently, theoretical and empirical studies on this important area are needed to better understand the short-term and long-term consequences on organizations.^[3] Özler et al.^[2] Stated that cynicism is associated with negative feelings such as anger, disappointment, and hopelessness. Ultimately, it generates multiple problems for both

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staff and organizations. Organizational behaviors known to provoke cynicism among employees are misunderstanding, poor communication and managerial insincerity regarding organizational values or principles.^[4] It is a reverberation of unfavorable feelings towards the policies, procedures, rules, and processes, adopted by the organization. The organization's leadership seems to lack honesty and authenticity, in that they do not treat subordinates with justice and they have unseen plans.^[5]

Organizational cynicism encompasses three distinct aspects, namely; 'Cognitive cynicism' which is concerned with lack of sincerity, honesty, and justice in the organization. Employees experiencing cognitive cynicism believe that principles are often sacrificed for expediency, and that duplicity, deception, and personal interest are common in their organizations.^[6] Concerning the feelings associated with cynicism or its affect aspect, organizational cynicism has usually associated with negative work attitudes such as job dissatisfaction, lack of commitment to the organization, perceptions of lack of organizational support and injustice.^[7,8] With regards to behavioral aspect, cynical attitudes between employees and their organization appear in the form of undesirable behaviors. Many research studies had revealed that organizational cynicism is associated with an increase in undesirable employee behaviors such as repeated criticizing of the organization, badmouthing and deviation from accepted behaviors. Nevertheless, no conclusive evidence has been cited to correlate between organizational cynicism and employees' performance behaviors.^[7,9]

Numerous research studies on cynicism found it to be a result of several negative workplace experiences as well as an antecedent to various undesirable feelings and behaviors.^[10-12] Organizational cynicism fosters behavioral alterations such as expressions of frustration from work and the organization.^[13] Though, favorable organizational outcomes may accompany cynicism. As the cynics of Greek society sought to refuse the trimmings and allurements of wealth, power, and social position in pursuance of reality; workplace cynical employees often act as the "voice of conscience" or "devil's advocates" to work as a sign of hope against misconduct in organizations.^[14]

1.2 Job insecurity

De Witte^[15] stated that among the predisposing factors for negative reactions are workers' feelings that they are endangered with unemployment. Based on this clarification, it can be said that it is sound to notice a positive relationship between organizational cynicism and job insecurity. Staufenbiel and König^[16] declared in their research about

effects of job insecurity on performance, turnover intention, and absenteeism among non-managerial employees in Germany that job insecurity causes a reduction in work attitudes which leads to a decrease in performance level. Furthermore, Shahzad and Mahmood^[17] examined the relationship between organization cynicism and job satisfaction and stated that an increase in the level of organizational cynicism is associated with higher level of job insecurity.

Job insecurity is a pivotal concern for nurses and their organizations as well. Job insecurity is perceived as inability to sustain the required stability in an endangered job status. Also, it is founded on the conceptualization and evaluation of the employee's work environment. Job insecurity is a general disquiet about the future sustenance of the current job position. It is an employee's belief that there is a probable risk to stability in his or her current job.^[18] Job insecurity is also a predisposing factor for negative work attitudes which in turn leads to lower levels of performance and exacerbated rates of absenteeism and turnover. Thus managers should not consider job insecurity is a strategy for motivating employees as it has too many undesirable concerns and negative outcomes.^[16]

1.3 Work role performance

The willingness of an employee to perform at an optimal level requires encouragement and supportive work environment which should be nurtured so that an employee can have higher chance to improve performance level. The success of an organization depends to a great extent on employee's work performance and is also the millstone for its effectiveness. For this reason, researchers and managers have paid an increased attention to employees' performance for more than several decades. The employee performance is the result of sum total of employee capability and enthusiasm. Employees who perceive their organizations as just, encouraging and supportive are expected to contribute more to their job and organization. By time, cynical behaviors toward the organization appear and take other forms rather than reverberation of unfavorable feelings towards their organizations such as secession from work performance.^[5]

A new model of work role performance was developed by Griffin et al.^[19] This model cross-classify the three levels at which role behaviors can contribute to effectiveness (individual, team, and organization) and the three different forms of behavior (proficiency, adaptively, and proactivity) into sub dimensions of work role performance. This cross-classification is an important extension to existing performance models. Figure 1 summarizes the main elements of the model.

Individual Work Role Behavior	Proficiency	Adaptivity	Proactivity
	Fulfills the prescribed or predictable requirements of the role	Copes with, responds to and supports change	Initiates change, is self-starting, future directed
Individual Task Behavior Behavior contributes to individual effectiveness	Individual Task Proficiency e.g., ensures core tasks of the job are completed properly	Individual Task Adaptivity e.g., adjusts to new equipment, processes, or procedures in core tasks.	Individual Task Proactivity e.g., initiates better way of doing core tasks.
Team Member Behavior Behavior contributes to team effectiveness rather than individual effectiveness	Team Member Proficiency e.g., coordinates work with team members	Team Member Adaptivity e.g., responds constructively to team changes (e.g., new members)	Team Member Proactivity e.g., develops new methods to help the team performs better
Organization Member Behavior Behavior contributes to organization effectiveness rather than individual and team effectiveness	Organization Member Proficiency e.g., talks about the organization in positive ways.	Organization Member Adaptivity e.g., copes with changes in the way the organization operates.	Organization Member Proactivity e.g., makes suggestions to improve the overall efficiency of the organization

Figure 1. Work Role Performance Model. Source:^[19] Griffin M., Queensland A., and Parker S. (2007). *A New Model of Work Role Performance: Positive Behavior in Uncertain and Interdependent Contexts*. *Academy of Management Journal* 2007, Vol. 50, No. 2, 330.

1.4 The significance of the study

One of the chief problems that impede the organizational effectiveness and prosperity is organizational cynicism. Thus, research on cynicism is attaining more consideration.^[20] It's worthwhile to mention that studies on cynicism in Egypt are novel. Furthermore, the relationship among organizational cynicism, job insecurity and nurses' work role performance has not been thoroughly investigated. So, the results of the current study will be useful for management to inhibit the negative attitudes and behaviors associated with cynicism and thus enhancing staff nurses feeling of job security and improving their role performance. Hence, the purpose of the current study was to examine the relationship among staff nurses' levels of organizational cynicism, perceived job insecurity and work role performance at a large university hospital, Egypt.

1.5 The purpose of the study

The purpose of the present study was to examine the relationship among staff nurses' levels of organizational cynicism, perceived job insecurity and work role performance.

1.6 Research questions

Question 1: What is the level of organizational cynicism among staff nurses at the studied university hospital? Question 2: What is the level of job insecurity as perceived by Staff nurses at the studied university hospital? Question 3: What is the level of staff nurses' work role performance at the studied university hospital? Question 4: Are there differences among staff nurses in the levels of organizational

cynicism, job insecurity, and work role performance based on demographic characteristics?

1.7 Research hypotheses

From the aforementioned research questions, this study seeks to test the following hypotheses:

H1: There will be a positive and significant relationship between organizational cynicism and job insecurity among nurses.

H2: There will be a negative relationship between the level of organizational cynicism and work role performance among nurses.

H3: There will be a negative relationship between the level of job insecurity and work role performance among nurses.

H4: The levels of organizational cynicism, job insecurity and work role performance will differ according to demographics of nurses.

1.8 Conceptual research model

Figure 2 shows that the study variables (organizational cynicism, job insecurity and work role performance) are related to each other and all are correlated with demographic characteristics of nurses.

2. SUBJECTS AND METHODS

2.1 Research design

Descriptive correlational design was used to conduct this study.

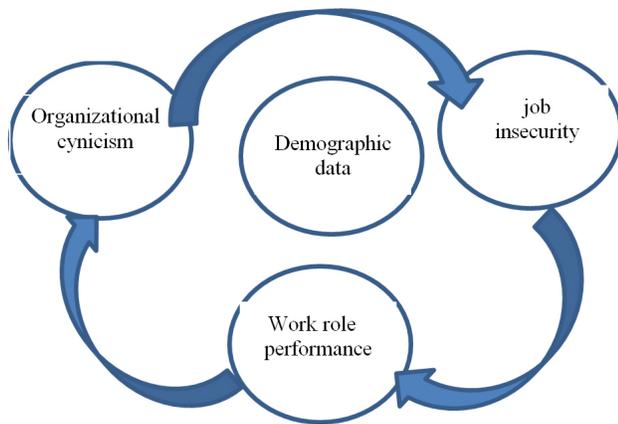


Figure 2. Conceptual research model

2.2 Setting

The study was conducted at selected inpatient departments and critical care units at a large university hospital, Egypt.

2.3 Subjects

The study subjects consisted of one group of staff nurses working at the above –mentioned settings. Convenience sampling technique was employed to select (n = 205) staff nurses. The following inclusion criteria guided the selection of the study sample:

- 1) Staff nurses who are working at the study setting for at least one year.
- 2) The study included both genders, all ages and all nursing qualification.

2.4 Tools of data collection

Three tools were used in collecting data for this study:

Tool 1: Organizational Cynicism Scale (OCS): it was developed by Dean et al.^[21] and used for measuring nurses' perception of organizational cynicism. It consisted of two parts:

Part 1: Contains socio-demographic characteristics of the study subjects such as (department, age, qualification and years of experience).

Part 2: Organizational Cynicism Scale (OCS). This scale comprised of 14 items representing the three dimensions of cynicism proposed by Dean, namely cognitive dimension (5 items), affective dimension (5 items) and behavioral dimension (4 items).

Scoring of the tool: A three-point Likert scale ranging from 1 = "disagree" to 3 = "agree" was used, so that the maximum possible score is 42. The higher the score, the higher the degree of cynicism. A score less than 60% indicates a low degree of cynicism, a score equal to 60% to 74.9% indicates a moderate degree of cynicism and a score equal to or higher than 75% indicates a high degree of cynicism.

Tool 2: Job insecurity scale developed by De Witte.^[22] This scale aimed to assess nurses' perception of job insecurity. It consisted of two parts:

Part 1: Included items related to qualitative job insecurity. It included five items.

Part 2: Included items related to quantitative job insecurity. It included four items.

Scoring of the tool: Three point Likert scale was used ranging from 1 = 'disagree' to 3 = 'agree', so that the maximum possible score is 27. The higher the score, the higher the degree of job insecurity. A score less than 60% indicates low degree of job insecurity, a score equal to 60% to 74.9% indicates moderate degree of job insecurity and a score equal to or higher than 75% indicates high degree of job insecurity.

Tool 3: Work role performance scale developed by Griffin et al.^[19] to measure the nurses' work role performance. This tool consisted of three dimensions. The first dimension included four items related to individual task behavior. The second dimension included eight items related to team member behavior. The third dimension included four items related to organization member behavior.

Scoring of the tool: Three point Likert scale was used ranging from 1 = "disagree" to 3 = "agree", so that the maximum possible score is 48. The higher the score, the higher the level of role performance. A score less than 60% indicates low level of role performance, a score equal to 60% to 74.9% indicates moderate level of role performance and a score equal to or higher than 75% indicates high level of role performance.

2.5 Validity and reliability of the study tools

The overall Cronbach's alpha for organizational cynicism scale was 0.94.^[23] The other two tools were tested for reliability using the Cronbach's alpha coefficient. For job insecurity scale, it was ($r = 0.71$) and for work role performance ($r = 0.646$). The instruments had high construct validity. A bilingual group of five experts tested the content and face validity of the tool. The tool was considered valid from the experts' perspective.

2.6 Pilot study

A pilot study was carried out to test the clarity, relevance, and applicability, and to estimate the time required to fill the study questionnaire and the checklist for nurses' work role performance. The questionnaire was tested on a sample of twenty staff nurses (10% of the total sample size) chosen by convenience sampling technique and were not included in the main study sample. The time required to fill the questionnaire was 10-15 minutes. The checklist for role performance was tested by three head nurses (10% of the total number of head nurses working at the study units). The time required

to fill the checklist was 15-20 minute. Minor modifications were done after the pilot study.

2.7 Ethical considerations

Written approval was obtained from the medical and nursing hospital directors after explanation of the purpose and procedures of the study. The objectives and procedures of the study were explained to the study participants and they were informed that they had the right to accept or refuse to participate in the study and that their information will be treated with confidentiality and for the purpose of research only. An oral consent to participate the study was obtained.

2.8 Data collection and procedures

Preparation of data collection tools was carried out over a period of three months from the first of January to the end of March 2018. Data were collected upon a period of two months from the first of March to the end of April 2018. An official permission to conduct the study was obtained from the Dean of the Faculty of Nursing and the hospital and nursing directors to facilitate collection of data. After explanation of the study purpose and procedures, an oral consent was taken from study subjects. The organizational cynicism scale and job insecurity scale were distributed among the study participants as self-administered questionnaires and researchers were available for any clarifications. For evaluating staff nurses work role performance, each head nurse in the units of the study were asked to rate the frequency that the given staff nurse demonstrated each indicator of performance over the past 6 months (questionnaire filling was done in the presence of the researcher to clarify any question).

3. RESULTS

Table 1 represents socio-demographic characteristics of the studied subjects. As shown in the table, the mean age of the studied staff nurses was 32.30 whereas the mean years of experience was 12.84. Regarding qualifications of the studied subjects, the highest percentage of them (43.4%) had diploma in nursing. Nearly equal percentage of staff nurses were working in inpatient units and critical care units (50.2%, 49.8%).

Table 2 reflects number and percentage distribution of the studied subjects regarding organization cynicism, job insecurity and work role performance. As shown in Table 2, the highest percentage of the studied staff nurses have high degree of organization cynicism, moderate degree of job insecurity and low degree of work role performance.

Table 3 illustrates mean scores of the studied staff nurses regarding organization cynicism, job insecurity and work role performance. As indicated from the table, total orga-

nizational cynicism and all of its dimensions' mean scores are considered high as compared to the range. This indicates that staff nurses had high degree of cynicism. Furthermore, mean scores of job insecurity and its two dimensions mean were considered low especially qualitative job insecurity. As for work role performance, its total mean scores and all of its dimensions were also low.

Table 1. Socio-demographic characteristics of the studied subjects (n = 205)

Socio-demographic characteristics	Mean \pm SD Range
Age (years)	32.30 \pm 5.80 21-47
Years of experience	12.84 \pm 6.26 1-29
No (%)	
Educational level:	
Technical Diploma in nursing	89 (43.4)
Associate nursing degree	53 (25.9)
Bachelor degree in nursing	63 (30.7)
Unit:	
Critical care units	103 (50.2)
Inpatient units	102 (49.8)

Table 2. Number and percentage distribution of the studied subjects regarding organizational cynicism, job insecurity, and work role performance (n = 205)

Variables:	No (%)
Organization cynicism:	
High	165 (80.5)
Moderate	32 (15.6)
low	8 (3.9)
Job insecurity:	
High	50 (24.4)
Moderate	150 (73.2)
Low	5 (2.4)
Work role performance:	
High	47 (22.9)
Moderate	60 (29.3)
Low	98 (47.8)

Table 4 illustrates relationships among organizational cynicism, job insecurity and work role performance. As evident from the table, there were significant positive correlations between cognitive cynicism, affective cynicism and overall organizational cynicism with quantitative job insecurity, and overall job insecurity. On the other hand, there were significant negative correlations between cognitive cynicism, affective cynicism, behavioral cynicism and overall organizational cynicism with individual task behavior, team member behavior, organization member behavior and overall work role performance.

Table 5 shows the relationship between work role performance and job insecurity. As evident in the table, there were significant negative correlations between quantitative job insecurity and overall job security with overall work role performance and their domains (individual task, team and organization behaviors). These means that the higher the level of job insecurity, the lower the level of work role performance.

Table 6 illustrates correlations among organizational cynicism, job insecurity and work role performance with age and years of experience as reported by the studied staff nurses. As evident from the table, there were significant negative correlations between cognitive cynicism, affective cynicism, overall organizational cynicism, quantitative job insecurity and overall job security with age and years of experience of staff nurses. On the other hand, there were significant positive correlations between individual task behavior, team

member behavior, organization member behavior and overall work role performance with age and years of experience of staff nurses.

Table 3. Mean scores distribution of the studied staff nurses according to organization cynicism, job insecurity and work role performance (n = 205)

Variables	Mean ± SD	Range
Cognitive cynicism	12.75 ± 2.09	5-15
Affective cynicism	13.27 ± 2.41	6-15
behavioral cynicism	10.51 ± 1.44	7-12
Total cynicism	36.53 ± 5.07	18-42
Quantitative job insecurity	8.33 ± 3.85	5-15
Qualitative job insecurity	4.82 ± 1.48	4-10
Total job insecurity	13.15 ± 4.09	9-25
Individual task behavior	8.63 ± 2.26	4-12
Team member behavior	15.09 ± 3.93	8-24
Organization member behavior	6.41 ± 2.58	4-12
Total work role performance	30.13 ± 7.43	16-48

Table 4. Relationships among organizational cynicism, job insecurity and work role performance (n = 205)

Variables	Organizational cynicism							
	Cognitive cynicism		Affective cynicism		Behavioral cynicism		Total organizational cynicism	
	(r)	p-value	(r)	p-value	(r)	p-value	(r)	p-value
Job insecurity scale								
Quantitative job insecurity	0.23	.001*	0.29	< .001*	0.05	.466	0.24	< .001*
Qualitative job insecurity	-0.06	.380	0.04	.562	-0.10	.135	-0.04	.623
Total Job insecurity	0.19	.007*	0.28	< .001*	0.01	.866	0.22	.002*
Work role performance scale								
Individual task behavior	-0.32	< .001*	-0.37	< .001*	-0.14	.048*	-0.35	< .001*
Team member behavior	-0.35	< .001*	-0.38	< .001*	-0.29	< .001*	-0.40	< .001*
Organization member behavior	-0.28	< .001*	-0.27	< .001*	-0.16	< .001*	-0.29	< .001*
Total work role performance	-0.38	< .001*	-0.41	< .001*	-0.25	< .001*	-0.42	< .001*

Note. (r): Pearson Correlation

Table 5. Relationship between work role performance and job insecurity (n = 205)

Variables	Work role performance							
	Overall work role performance		Individual task behavior		Team member behavior		Organization member behavior	
	(r)	p-value	(r)	p-value	(r)	p-value	(r)	p-value
Quantitative job insecurity	-0.362	< .001*	-0.579	< .001*	-0.254	< .001*	-0.149	.033*
Qualitative job insecurity	-0.062	.378	0.032	.650	-0.102	.147	-0.052	.462
Total Job insecurity	-0.364	< .001*	-0.534	< .001*	-0.276	< .001*	-0.159	.023*

Note. (r): Pearson Correlation

Table 7 illustrates correlations among organizational cynicism, job insecurity and work role performance with the studied staff nurses' qualification. As evident from the table, there was a significant difference in organizational cynicism score with staff nurses' qualification as nurses who had diploma degree had the highest score followed by staff

nurses with bachelor degree. Also, the lowest score of work role performance was predominated among diploma degree. On the opposite, there was no significant difference in job insecurity score as regards staff nurses' qualification ($p > .05$).

Table 6. Correlations among organizational cynicism, job insecurity and work role performance with age and years of experience (n = 205)

Variables	Age (years)		Years of experience	
	(r)	p-value	(r)	p-value
Cognitive cynicism	-0.37	< .001*	-0.38	< .001*
Affective cynicism	-0.52	< .001*	-0.52	< .001*
Behavioral cynicism	-0.25	< .001*	-0.25	< .001*
Total organizational cynicism	-0.47	< .001*	-0.47	< .001*
Individual task behavior	0.59	< .001*	0.67	< .001*
Team member behavior	0.30	< .001*	0.34	< .001*
Organization member behavior	0.19	.006*	0.21	.003*
Total work role performance	0.40	< .001*	0.45	< .001*
Quantitative job insecurity	-0.70	< .001*	-0.74	< .001*
Qualitative job insecurity	0.04	.572	-0.03	.660
Total Job insecurity	-0.65	< .001*	-0.71	< .001*

*p < .05

Table 7. Correlations among organization cynicism, job insecurity and work role performance with the studied staff nurses' qualification

Variables	Staff nurses' qualification			χ^2	p-value
	Diploma (n = 89) NO (%)	Technical nursing(n = 53) NO (%)	Bachelor (n = 63) NO (%)		
Organization cynicism score:					
High	79 (88.8)	36 (67.9)	50 (79.4)	10.71	.030*
Moderate	9 (10.1)	14 (26.4)	9 (14.3)		
Low	1 (1.1)	3 (5.7)	4 (6.3)		
Job insecurity score:					
High	19 (21.3)	9 (17.0)	22 (34.9)	6.29	.178
Moderate	68 (76.4)	43 (81.1)	39 (61.9)		
Low	2 (2.2)	1 (1.9)	2 (3.2)		
Work role performance score:					
High	10 (11.2)	20 (37.7)	17 (27.0)	20.83	< .001*
Moderate	23 (25.8)	13 (24.5)	24 (38.1)		
Low	56 (62.9)	20 (37.7)	22 (34.9)		

*p < .05

Table 8. Correlations among organizational cynicism, job insecurity and work role performance with staff nurses' units of work

Variables	Staff nurses' units of work		χ^2	p-value
	Critical care (n = 103) NO (%)	Inpatient (n = 102) NO (%)		
Organization cynicism score:				
High	75 (72.8)	90 (88.2)	8.98	.011*
Moderate	21 (20.4)	11 (10.8)		
Low	7 (6.8)	1 (1.0)		
Job insecurity score:				
High	26 (25.2)	24 (23.5)	0.28	.871
Moderate	75 (72.8)	75 (73.5)		
Low	2 (1.9)	3 (2.9)		
Work role performance score:				
High	34 (33.0)	13 (12.7)	22.23	< .001*
Moderate	36 (35.0)	24 (23.5)		
Low	33 (32.0)	65 (63.7)		

*p < .05

Table 8 illustrates correlations among organizational cynicism, job insecurity and work role performance regarding staff nurses' units as reported by the studied staff nurses. As

evident from the table, there was a significant difference in organization cynicism score as regards staff nurses' units as nurses worked at inpatient units had higher score than nurses

worked at critical care units. Also, low score of work role performance was more among nurses worked at inpatient units than in nurses worked in critical care units. On the opposite, there was no significant difference in job insecurity score as regards staff nurses' units ($p > .05$).

4. DISCUSSION

Nowadays, there are multiple challenges and dangers facing organizations in dynamic ever changing work environment. Persistence and remaining competitive requires that organizations effectively make best use of their workforce. Based on this clarification, organizational cynicism and job insecurity should be viewed as barbed matters for organizations as they have great impact on employees' feelings, attitudes and behaviors, and performance.^[17] Cynicism is associated with high intention to leave the organization and low levels of job satisfaction. Low employee morale is antecedent to high absenteeism, high stress levels and low productivity.^[11]

The current study basically aimed to assess and examine the relationships among organizational cynicism, job insecurity and work role performance of staff nurses. Then it attempted to test whether the demographic characteristics of nurses affect the levels of organizational cynicism, job insecurity and work role performance or not. The highest percentage of the studied nurses had diploma in nursing with mean age by years 32.30 ± 5.80 and mean years of experience 12.84 ± 6.26 .

The results of the present study concluded that the highest percentage of the studied staff nurses had high degree of organization cynicism and their overall cynicism mean score and mean scores of its entire dimensions especially affective dimension was high as compared to the range. This means that they have negative attitudes towards their organizations; or they feel uncomfortable and even shy from being a member of their organizations. From the researchers' point of view and the study participants' responses on the study questionnaires, this result may be attributed to many factors as lack of job security, lack of organizational support, lack of justice, poor work environment, lack of resources, work overload, violence, bullying and inadequate supervision and guidance. This result is in agreement with the findings of Kudo et al.^[24] who declared that cynicism has long been a major concern for the modern organization which induces negative emotions that causes bad emotional status for employees. In the same line, a study conducted in USA, by Volpe et al.^[25] showed that organizational cynicism was prominent among USA health care workers. Also, a study conducted by Aly et al.^[12] at Alexandria University, Egypt, reported that attitudes of organizational cynicism among nurses was high.

Their results showed that the highest level of cynicism was in the affective component then at behavioral and cognitive component.

A study conducted by Nafei and Kaifi^[3] revealed that there were differences in evaluative attitudes towards organizational cynicism and job attitudes among the employees. Nevertheless, the cognitive, affective, and behavioral components of cynicism have a strong effect on job attitudes. On contrary, the current results are not in agreement with the study results conducted by Durrah et al.^[6] as their study showed that the prevalence of organizational cynicism in the surveyed companies was low. They attributed this result to the healthy work environment in the studied companies which is not true in our study setting as declared earlier.

The results of the present study revealed that the highest percentage of the studied staff nurses had moderate degree of job insecurity. At the same line, a study conducted by Aly et al.^[12] had attributed high level of organizational cynicism found in Main Alexandria University Hospital in Egypt to the high level of job insecurity and stated that perceived job insecurity could be owed to insufficient protection provided in safeguard against nurses' exposure to infection while working, inadequate immunization against infectious diseases, and inadequate planning for accidents and crisis management.

The current study revealed that there were significant positive correlations between cognitive cynicism, affective cynicism and overall organizational cynicism with quantitative job insecurity, and overall job security. These results are matched with those of Orhan et al.^[26] who stated that there are strong relationships among those concepts and further maintained that the higher level of organizational cynicism is associated with higher level of perceived job insecurity and higher turnover intention.

The results of the present study revealed that there were significant negative correlations between cognitive cynicisms, affective cynicism, behavioral cynicism and overall organizational cynicism with individual task behavior, team member behavior, organization member behavior and overall work role performance of staff nurses. This result is also consistent with the result of the study conducted by Rehan et al.^[5] who studied "organizational cynicism and its relationship with employee's performance in Teaching Hospitals of Pakistan" as their study concluded that the higher the level of cynicism, the lower the employee performance. Kim et al.^[27] also concluded that affective and cognitive organizational cynicism is negatively correlated with employee performance. In the

same line, a study conducted by Chiaburu et al.^[13] found that cognitive and behavioral dimensions of organizational cynicism were significantly and negatively associated with employee performance.

The present study found that there were significant negative relationship between job insecurity and nurses' performance. This means that the higher the level of perceived insecurity, the lower the level of role performance. This result is in agreement with that of Shahzad and Mahmood^[17] who declared in their study that job insecurity causes reduction in work attitudes and this causes a decrease in work performance.

The fourth study hypothesis which stated that levels of organizational cynicism, job insecurity and work role performance will differ according to demographics of nurses was true according to the study findings. The study found that there were significant negative correlations between cognitive cynicism, affective cynicism, overall organizational cynicism, job insecurity and overall job insecurity with age and years of experience of staff nurses. An explanation of that negative relationship would be that the more the age and years of experience, the more attached the nurses to their place of work and the more they get used to its negative aspects and thus they may feel a lesser level of cynicism and feel more secure in their jobs. These results are inconsistent with those of Franklin et al.^[23] who conducted a study about "organizational cynicism and the role of hope theory on job satisfaction" and used age, gender, and work tenure as control variables. All those control variables remained insignificant with organizational cynicism. Also, on contrary to our results, a meta-analysis by Chiaburu et al.^[13] found no significant relationship between gender, age, or workplace experience with organizational cynicism.

On the other hand, there were significant positive correlations between individual task behavior, team member behavior, organization member behavior and overall work role performance with age and years of experience of staff nurses. This result is also justifiable as more age is often accompanied by better maturity and more experience which leads to role performance improvement. Thus, those with more age and experience had higher levels of work role performance. These results are inconsistent with that of Leong and Rasli^[28] who conducted a study about the relationship between innovative work behavior and work role performance. Their results showed lack of differences in work role performance based on gender education, age, and years of experience as years of experience explained only 3.8% of the variance in work role performance. This incongruence may be owed to different study setting and study population as study was

conducted on employees in an integrated automotive organization involved in designing, manufacturing and the sale of cars.

The results of the current study revealed that there was a significant difference in organizational cynicism score with staff nurses' educational level as nurses who had diploma degree had the highest score followed by staff nurses with bachelor degree. Also, the lowest score of work role performance was predominated among diploma degree. From the researchers' point of view, these findings are logic as the less educated nurses may have many causes that evoked negative attitudes toward their organization. Among these causes is less involvement in decision making as the extent of the relationship between them and management is somewhat limited, low status at work and less salary as compared to bachelor educated nurses. Also higher education is frequently associated with better work performance.

On contrary, our study showed no significant difference in job insecurity score as regards staff nurses' education. On the other hand, a study conducted by Orhan et al.^[26] examined the difference of organizational cynicism and job insecurity according to the qualification of participants; two groups (high school and university) were studied. Their results indicated that the participants who have high school education had higher job insecurity perception than those who had university education. They further clarified that less educated employees think that if some employees would leave the organization, he/she was more probably to be one of them. Also, the study finding is not in agreement with that of Bustillo and Pedraza^[29] who found in their study in some European Countries that higher educational level is associated with lower perception of job insecurity. They stated that their finding might occur because of less experience. As the studied workers were new at work, they might not have other workplaces to compare with. Most of these aspects are not true in our study as the mean years of experiences of staff nurses involved in the study was high.

The results of the present study revealed that there was a significant difference in organization cynicism score as regards staff nurses' units as nurses worked at inpatient units had higher cynicism score than nurses worked at critical care units. Also, low score of work role performance was more among nurses worked at inpatient units than in nurses worked in critical care units. On the opposite, there was no significant difference in job insecurity score as regards staff nurses' units. From the researchers experience at the clinical setting, high cynicism score at inpatient units as compared to critical care units may be attributed to less decisional in-

volvement, lower status of nurses, and lesser availability of resources. The majority of nurses working at critical care units are highly educated. This may be an explanation of higher work role performance levels found at critical care units in this study.

The results of the current study are in the same line with the Egyptian study in 2013 and others from 1997 to 2014 in other countries that presented the detrimental effect of organizational cynicism on employees' attitude.^[2,6,25,30-34] It's evident that the undesirable outcomes of organizational cynicism are nearly the same at diverse settings in the world.^[12]

Finally, organizational cynicism is a destructive perspective an employee holds toward his/her organization. Thus, it is sound to detect a positive relationship between organizational cynicism and job insecurity and negative correlation between job insecurity and nurses' work role performance. Drawing on the above discussion, the study contributes to the literature in terms of being one of the first study investigating organizational cynicism, job insecurity and work role performance in the same research model.

5. CONCLUSION

In the light of the present study results it can be conclude that organizational cynicism level was high, job insecurity level was moderate whereas nurses' work role performance was low. Organizational cynicism and all of its three dimensions i.e. affective, cognition & behavioral had significant and positive relationship with job insecurity and negative with work role performance which means that the higher level of organizational cynicism results in the higher level of perceived job insecurity and the lower level of work role performance. Also, there was a significant negative relationship between perceived job insecurity and work role performance. Results also concluded that there were statistically significant differences between the levels of those three variables according to the demographic characteristics of nurses. In conclusion, the study was successful in answering the research questions and hypotheses were true according to the study results.

5.1 Recommendations

Based on the study findings, the researchers propose a host of recommendations which could be summarized as follows:

- Administrators at hospitals must adopt an open-door policy that allows nurses to freely express their opinions to their managers. Also, hospital management should be passionate to learn more about causes in the

hospital that may attribute to cynicism.

- Nurse managers need to be emotionally intelligent and more open minded when dealing with their staff. Information sharing, frequent communication and feedback help early identification of negative attitudes especially among young and new staff nurses.
- All changes adopted by the organization should be clearly publicized and communicated to all influenced by these changes to convey respect and provoke positive attitudes.
- Those responsible for recruitment and selection of nurses should select nurses who have lower general cynicism. Enhancing compensation and benefits, health insurance, recognizing and rewarding good performance are weapons that can hit two birds with one stone; reduces the perception of job insecurity and at the same time helps improve work role performance.
- Nursing management should make thoughtful efforts to understand the situation from the nurses' standpoint to realize why they incline to have negative attitudes toward the hospital.
- Nurse Managers should work to develop challenging career path and stimulating job content. These enhance the perception of qualitative job security.
- Training programs aimed at helping staff nurses at developing their skills or taking on new roles to cope with changes in the way the unit works is beneficial to enhance work role performance.

5.2 Limitations and areas for future research

The sample size was somewhat small. Unfortunately, nursing is a predominately female profession so this proves a challenge globally for the nursing profession. It would be beneficial to replicate this study on a larger sample that includes groups of males and females to investigate whether there is a difference based on gender. A comparative analysis between private and public hospitals is recommended.

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CONFLICTS OF INTEREST DISCLOSURE

There were no conflicts of interest to declare.

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