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NURSE ENGAGEMENT: EXAMINING THE ROLE OF RESILIENCE

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Abstract

Work engagement within nursing workforce has become an increasingly significant factor and a prerequisite for high-quality health care performance, thus influencing the success of the organization. As the nursing profession is regarded as an emotionally demanding work environment, nurses as boundary-spanners of healthcare institutions need to have greater resilience. This study aimed to explore the relationship between resilience and work engagement. The sample comprised of 305 staff nurses working in two public hospitals in Peninsular Malaysia. Statistical results using regression analysis indicated that resilience was positively related to work engagement. Nursing management should develop resilience among nurses to enhance their work engagement.

Keywords: Work Engagement, Resilience, Nurses

INTRODUCTION

Malaysia aspires to be a developed nation by 2020. In its effort to enhance its economic growth, the government of Malaysia in its Eleventh Malaysia Plan (2016-2020) remains committed to improve the fundamentals of the health care system. The government's aspiration will be realised via four strategies: (1) enhancing targeted support, particularly for underserved communities, (2) improving system delivery for better health outcomes, (3) expanding capacity to increase accessibility, and (4) intensifying collaboration with private sector and NGOs to increase health awareness (Economic Planning Unit, 2017).

The country's current nurse-to-patient ratio is 1:325 which is far below the 1:200 ratio recommended by the World Health Organization (Economic Planning Unit, 2017). Hence, the need to employ sufficient, qualified, and committed nurses is more acute for Malaysia, particularly in public hospitals. Within healthcare organizations, nurses as customer-contact employees play an important role in care delivery and health quality. Nursing is an important profession to study because nurses' performance has a great impact on the nature and quality of service provided to the patients (Cohen & Golan, 2007; Chen et al., 2009; Purdy et al., 2010). Previous studies have found nurses' attitudes and behaviours as significant in determining the quality of healthcare services (Cohen & Golan, 2007; Al-Ahmadi, 2008). According to Moritz et al. (1989), nurses' attitudes and behaviours toward patients would significantly affect patients' perceived service quality and satisfaction. Moreover, the quality of nursing care has a strong effect on healthcare organizations' ability to provide services at the desired professional standard (Moritz et al., 1989; McSherry & Douglas, 2011).

For that reason, nurses should perform in favourable attitude in the form of work engagement. Work engagement has been recognized as one of the positive states, which is considered to be the opposite of burnout based on the emergence of positive psychology – the scientific study of human strength and optimal functioning proposed by Seligman and Csikszentmihalyi (2000). According to Schaufeli et al. (2006), engaged employees have a sense of energetic and effective relation with their job, and more likely to perceive that they are capable of managing their job demands. Furthermore, a study by Schaufeli and Van Rhenen (2006) has revealed that engaged employees are more productive as they often experienced positive emotions. The notion of nurse engagement is frequently used to describe nurses' commitment and satisfaction with their jobs. As nurse engagement relates directly with critical safety, quality and patient

experience outcomes (Day, 2014; Nishioka et al. 2014) understanding the present state of nurse engagement and its predictors must be a strategic imperative (Dempsey & Reilly, 2016).

LITERATURE REVIEW

Work Engagement

Throughout the last decade, awareness on work engagement in the health sector has developed. Work engagement of health care professionals has become an increasingly significant element and a prerequisite for high-quality health care performance (Horner et al., 2011; Kushnir & Cohen, 2006).

In this context work engagement is defined as a positive, fulfilling, work-related state of mind that is characterized by vigor, dedication and absorption (Schaufeli & Bakker, 2004). Vigor is a state where individual experiences a high degree of energy, a strong work ethic and an ability to persevere when confronted with challenging work (Schaufeli & Bakker, 2004). Dedicated individuals have an enthusiastic attitude and being motivated and proud of their work. Individuals who experience dedication also perceive their work to be important and they describe difficulties as challenges rather than strains. Absorption in work entails being fully immersed in work and feeling happy about one's work roles. Individuals who are absorbed in their work perceive time to pass quickly and find it difficult to separate themselves from work tasks (Schaufeli & Bakker, 2004).

Furthermore, work engagement is crucial as engaged employees: (1) experience pleasure, joy, and enthusiasm, (2) enjoy good physical and psychological health, (3) have better job performance, (4) show increased ability to create job and personal resources, and (5) have the capability to transfer their engagement to others (Bakker et al. 2008). Several studies examined the motivational influence of work engagement on employees in numerous settings, for example, service members, nurses, leaders and followers (Delahaij et al. 2016; Wang et al. 2017; Chen, 2015). All of these studies demonstrate that engaged employees display better job outcomes. In addition, past researchers (e.g., Xanthopolou et al., 2009; Othman & Mohd Nasurdin, 2013; Othman et al., 2015; 2017) who asserted that positive perception of personal resources and job resources will lead to higher work engagement.

Resilience

Luthans (2002) defined resilience as a "positive psychological capacity to rebound, to 'bounce back' from adversity, uncertainty, conflict, failure, or even positive change, progress and increased responsibility" (p. 702). Resilience allows for not only reactive recovery but also proactive learning and growth through winning challenges. In other words, resilience may integrate both negative and positive setbacks but potentially overwhelming events. Meanwhile, Tusaie and Dyer (2004) defined resilience as a dynamic process that results in adaptation in the context of significant adversity. At workplace, resilience has been described in terms of mitigating the effects of stress through the use of behaviours that facilitate adaptation and permit individuals to function beyond the norm in spite of significant stress (Tusaie & Dyer, 2004).

Furthermore, within healthcare organizations, nursing is considered to be intrinsically stressful profession (Decker, 1997). The nature of their jobs are continuously confronted with sufferings, deaths and patients' grief, whilst at the same time they have routine tasks to perform (McGrath et al., 2003). Under such circumstance, psychological capital with regards to "resilience" may possibly to be one of the important resources that necessary for employees to manage stressful work environment (Lazarus & Folkman, 1984). Luthans et al. (2008) argued that employees who possess personal resources, such as optimism, self-efficacy, self-esteem, resilience and active coping style will assist them to control their work environment and to achieve career success.

Several studies investigated the relationship between resilience and work engagement. For instance, Bakker et al. (2006) in their study among female school principals found that principals with high personal resources which include resilience, self-efficacy and optimism scored highest in work engagement. Meanwhile, a study by Othman and Mohd Nasurdin (2011) among public hospital nurses revealed that psychological capital (e.g., hope and resilience) was positively associated with work engagement. Additionally, in a most recent study by Mache et al. (2014) among hospital doctors found that personal resources (e.g., resilience, and optimism) were significantly related to work engagement.

To foster high work engagement within the nursing workforce, nurses as boundary-spanners of healthcare institutions need to have greater resilience. Tusaie and Dyer (2004) argued that resilience

among nurses is identified as important for them in their day-to-day work. The nature of workplace adversity for nurses requires them to build the inner strengths in the form of resilience, so that they are able to manage with and protect themselves from the effects of workplace adversity. Without this inner strength, nurses may experience negative feelings such as burnout and depression. Moreover, nurses' occupational settings will always surround with elements of stressful, traumatic situations, and episodes of hardship. Nurses with high resilience are believed to be able to combat these adverse effects efficiently, which in turn, will lead to higher work engagement and better service quality. Therefore, this study sought to examine the impact of resilience on work engagement among Malaysian nurses.

RESEARCH METHODOLOGY

Samples and Procedures

Respondents in this study comprised of staff nurses working in two public hospitals in Malaysia. A total of 324 questionnaires were distributed with the assistance of the Matron Office of the two hospitals. The distribution and collection of the completed questionnaires took about one month. Of the 324 questionnaires distributed, a number of 305 questionnaires were returned, yielding a response rate of 94.14%.

Measures

For the purpose of this study, two instruments were used to measure the study variables. All items were rated using Likert scales.

Work Engagement

Work engagement was measured using the shortened nine-item version of the Utrecht work engagement scale (UWES-9) developed by Schaufeli and Bakker (2003). This UWES-9 consists of three underlying dimensions, which are measured with three items each: vigor, dedication and absorption. Respondents reported on a seven point Likert scale ranging from 1 = "never" to 7 = "always". The Cronbach's alpha coefficient for this scale is 0.90. For the purpose of analyses, an overall work engagement factor score will be computed. Schaufeli and Bakker (2003) argued that the total score for work engagement may sometimes be more practical in empirical research as the moderate to high correlations between the dimensions.

Resilience

A scale by Block and Kremen (1996) and Klonhlen (1996) which include 14 items were used to measure resilience. All items were measured on a seven point Likert scale ranging from 1 = "strongly disagree" to 7 = "strongly agree". The Cronbach's alpha coefficient for this scale is 0.84.

Demographic factors

Demographic information such as gender, marital status, age, race, organizational tenure, job tenure and educational qualification were also requested.

RESULTS

Table 1 shows some of the demographic characteristics of the sample. Of the 305 respondents, 5 (1.6%) were males and 300 (98.4%) were females. Most of the respondents (228 staff nurses or 74.8%) were married, while the remaining 25.2% of the respondents were unmarried. The mean age of the respondents was 33.79 years (SD=9.29). In terms of ethnicity, the majority of the respondents were Malays (89.5%), followed by Indians (4.9%), Chinese (4.3%), and other races (1.3%). Education-wise, 203 respondents (66.6%) had basic training, and 102 respondents (33.4%) had post basic training. As for organizational tenure, the mean value was 7.57 years (SD=7.82). Meanwhile, the mean value for job tenure was 9.90 years (SD=8.88).

Table 2 illustrates the descriptive statistics such as mean scores, standard deviations, reliabilities, and intercorrelations of the study variables. As shown in Table 2, on the average, the level of work engagement (M = 5.15, SD = 0.83), and resilience (M = 5.19, SD = 0.86), was perceived highly by respondents. The reliability coefficients for the study variables were above 0.80, which meets the minimum acceptable standard of 0.7 for exploratory research as suggested by Hair et al. (2006). Meanwhile, correlation between the study variables were found to be significant (p<0.01).

Table 1: Demographic Characteristics

Demographic Variable	Category	Frequency	Percentage
Gender	Female	300	98.4
	Male	5	1.6
Marital Status	Married	228	74.8
	Unmarried	77	25.2
Ethnicity	Malay	273	89.5
	Indian	15	4.9
	Chinese	13	4.3
	Others	4	1.3
Educational Qualification	Basic Training	203	66.6
	Post Basic Training	102	33.4

	Mean	SD	Min	Max
Age (year)	33.79	9.29	22	58
Organizational Tenure (year)	7.57	7.82	0.25	33
Job Tenure (year)	9.90	8.88	0.25	38

Table 2: Descriptive Statistics, Correlations, and Reliabilities of the Study Variables

Variables	Mean	Standard Deviation	Work Engagement	Resilience
Work Engagement	5.15	0.83	(0.83)	
Resilience	5.19	0.86	0.54**	(0.86)

Note: ** p<0.01, * p<0.05. Figures in parentheses denote the reliability coefficients for the study variables.

This study also investigated the relationship between resilience and work engagement using hierarchical regression analysis. Demographic variables such as age, marital status, education, organizational tenure and job tenure were statistically controlled (Koyuncu et al., 2006; Mauno et al., 2007). As shown in Table 3, based on model 1, the control variables accounted for 8% of the variance in work engagement (r^2 = 0.08, f-change = 4.83, p < 0.01). All the five control variables were insignificantly related to work engagement. This indicates that the five control variables did not make any significant contribution towards the variance in work engagement among public hospital nurses. In model 2, by adding the predictor variable, the r^2 increased to 0.33. This result shows that the predictor variable was able to explain an additional 25% of the variance related with work engagement (r^2 change = 0.25, f-change = 114.99, p < 0.01). Resilience was found to have a positive and significant relationship with work engagement (ß = 0.52, p < 0.01). Since there was a positive and significant relationship between resilience and work engagement, we concluded that our hypothesis was supported.

Table 3: Results of Regression Analysis

Dependent Variable	Work Engagement

Independent Variables	Model 1 Std. ß	Model 2 Std. ß
Step 1: Control Variables		
Age	0.12	-0.09
Marital Status	0.00	0.03
Education	0.03	0.05
Organizational Tenure	-0.08	-0.04
Job Tenure	0.20	0.30
Step 2: Predictor Variable		
Resilience		0.52**
F- value	4.83	24.72
R^2	0.08	0.33
Adjusted R^2	0.06	0.32
R^2 Change	0.08	0.25
F-Change	4.83**	114.99**

* $p<0.05$, ** $p<0.01$

CONCLUSION AND DISCUSSION

The main purpose of this study was to investigate the effect of resilience on work engagement. Findings revealed that resilience was a significant predictor of work engagement. This finding is consistent with those of previous researchers (Bakker et al., 2006). The current nurse-to-patient ratio (1:325) in Malaysia revealed the existence of a chronic shortage of nurses in public hospitals. Under such circumstances, existing nurses have more workload and greater responsibilities. The nature of their job dealing with death and dying, lack of employees support, work overload, relationships with other professionals, inadequate resources, and work-home conflict leads to stressful work environment (Decker, 1997; Mc Grath et al., 2003; Othman, 2012). Hence, public hospital nurses who are high in resilience are likely to be adaptive to change, creative, and persistent in dealing with workplace adversity, resulting in engaging in a favourable attitude in the form of work engagement.

As for implications, since resilience influences work engagement, it would be worthwhile for hospital administrations and the Ministry of Health to encourage and enhance resilience among public hospital nurses. It is important to assist nurses to develop skills that will aid them in being more resilient and capable to handle and protect themselves from the effects of workplace adversity. As stated by McGee (2006), it is nurses' own resiliency skills that sustain them during challenging and difficult working environment. Resilience is a trait than can be learned and developed as suggested by past scholars (Masten, 2001; Bonanno, 2005). Hence, Ministry of Health should provide more training to nurses in developing their resilience level.

In terms of limitations, only one predictor variable (resilience) was examined. Other personal resources such as self-efficacy, optimism, hope, self-esteem, and others may play an important role in predicting work engagement. Future researchers may wish to expand the scope of this study by focusing on these variables. Moreover, this study is limited to staff nurses working in public hospitals in Peninsular Malaysia. The same research could be expanded and replicated among other healthcare personnel from public and private hospitals. A larger sample in the same industry would improve the generalization of the findings.

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