

Organizational Citizenship Behavior and Job Satisfaction from The Nurses' Perspective

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Received October 28, 2021, accepted November 25, 2021, published January 1, 2022.

ABSTRACT

Context: There is a debate in the literature on the value of organizational citizenship behavior and its relation to job satisfaction. No research in Saudi Arabia has been published investigating organizational citizenship behavior among nurses. In addition, job satisfaction has been identified as the main solution to the high turnover rate among nurses in Saudi Arabia and one of the factors that could affect organizational citizenship behavior.

Aim: The current study aimed to determine the level of organizational citizenship behavior, assess the level of job satisfaction, and identify the relationship between organizational citizenship behaviors and job satisfaction from the nurses' perspective.

Methods: A quantitative cross-sectional correlational study was conducted at the two largest government hospitals in Medina City, Saudi Arabia. A convenience sampling technique was used to recruit 315 nurses. The study used an electronic self-reporting questionnaire consisting of sociodemographic characteristics, an organizational citizenship behavior scale, and a nurse job satisfaction scale.

Results: In this study, the overall level of organizational citizenship behavior among nurses was high (3.86±0.35). The overall level of nurses' job satisfaction was medium (2.88±0.76). There was a statistically significant positive relationship between overall organizational citizenship behavior and overall job satisfaction among nurses ($r = 0.354$, p -value <0.01).

Conclusion: This study provides evidence that increasing the level of job satisfaction among nurses will increase their levels of organizational citizenship behavior. Therefore, healthcare organizations must focus on certain interventions that could increase nurses' jobs satisfaction, such as providing adequate remuneration, increasing the capacity of nursing schools, emphasizing psychological support and participative leadership, and improving the community's perception of the nursing profession.

Keywords: Organizational citizenship behavior, job satisfaction, nurses

Citation: Al-Ahmadi, T. A., & Mahran, S. M. (2022). Organizational Citizenship Behavior and Job Satisfaction from the Nurses' Perspective. *Evidence-Based Nursing Research*, 4(1), 17-25. <http://doi.org/10.47104/ebnrojs3.v4i1.230>.

1. Introduction

Organizational citizenship behavior (OCB) is a fundamental issue in the field of organizational behavior that enhances efficiency, increases productivity, promotes employee engagement, reinforces teamwork and cooperation within the organization, and, in general, maintains a good environment in the workplace (Chib, 2016; Ramezani et al., 2015; Rego et al., 2010; Taghinezhad et al., 2015). An employee with high OCB will support his/her co-workers and work to his/her maximum potential to meet organizational goals and help the organization deal with change and unexpected circumstances (Pickford & Joy, 2016; Sinha & Negi, 2019).

The concept of OCB was initially presented by Organ (1988), who defined it as "individual behavior, not directly or explicitly recognized by the formal reward system and that in the aggregate promotes the effective functioning of the organization." Thus, employees demonstrate high OCB levels because they want to engage in such practices, not out of obligation (Veličkovska, 2017).

Organ (1988) highlighted five specific aspects of OCB. The first is altruism, a discretionary behavior targeted at helping others without expecting a reward (Mete, 2019). The second is sportsmanship, which is employees' ability to endure inconvenient circumstances without complaining (Sadeghi et al., 2016). The third is courtesy, which includes behaviors that concentrate on preventing problems and taking steps to minimize the impact of the problem in the future (Tamunomiebi & Onah, 2019). The fourth is civic virtue, which is conceptualized as the willingness of employees in an organization to be responsible and active, participate in all practical and political processes for the benefit of all, and scan for possible threats that could affect the functioning of the organization (Kaya, 2015). Finally, the fifth is conscientiousness, the discretionary behavior that leads employees to go beyond minimum job requirements, such as working extra hours and not taking extra breaks (Hazratian et al., 2015).

On the other hand, job satisfaction is a feeling of welfare that results from the interaction of different aspects of the work and can affect employees' relationships with their

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organizations, clients, and families (Melo et al., 2011). Lately, it has been considered a crucial issue in healthcare institutions, especially in nursing (Al Maqbali, 2015). In the current healthcare delivery system, nurses play a significant role, and their satisfaction towards the job has long been recognized as a critical indicator of performance, quality of care, patient satisfaction, cost savings, and nurse retention (Gatchel, 2018; Gulsen & Ozmen, 2020; Zaghoul et al., 2008). Furthermore, job satisfaction is one of the factors discussed in nursing that positively affects OCB and leads to these voluntary behaviors. A study in Italy demonstrated that greater OCB among palliative care nurses correlated with job satisfaction (Biagioli et al., 2018). In Indonesia, three studies concluded that job satisfaction significantly and directly influenced OCB among nurses (Charolyna & Sukiswo, 2019; Johnly & Tampi, 2018; Ruhana, 2020).

2. Significance of the study

One of the Ministry of Health's strategic objectives in service of the Kingdom Vision 2030 is to increase the attractiveness of nursing as a preferred career path (Bassi, 2016). The healthcare system in Saudi Arabia faces a problem with the high turnover rate of experienced nurses (Alshareef et al., 2020). The high rate of nurse turnover has adverse effects such as work overload for the remaining staff, delays in routine tasks, patient dissatisfaction, reductions in organizational performance and the quality of care, threatening for patient safety, and increased patient mortality (Antwi & Bowblis, 2016; Rajan, 2013).

Improving job satisfaction is considered the main solution to maintaining and stabilizing the nursing workforce worldwide and locally (Alsubaie & Isouard, 2019; Dwinijanti et al., 2020; Gebregziabher et al., 2020). In addition, satisfied nurses are likelier to willingly engage in citizenship behaviors (Mahmoud & Ibrahim, 2016).

However, there is currently no published research investigating OCB among nurses in Saudi Arabia and its relation to their job satisfaction. Therefore, this study sought to address this gap through three objectives: determining the level of organizational citizenship behavior among nurses, identifying nurses' levels of job satisfaction, and uncovering the relationship between organizational citizenship behavior and job satisfaction in nursing.

3. Aim of the study

This study aimed to determine the level of organizational citizenship behavior, assess the level of job satisfaction, and identify the relationship between organizational citizenship behaviors and job satisfaction from the nurses' perspective.

3.1. Research Question

- What is the level of organizational citizenship behavior?
- What is the level of job satisfaction from the nurses' perspective?
- From the nurses' perspective, is there a relationship between organizational citizenship behavior and job satisfaction?

4. Subjects & Methods

4.1. Research Design

This study used a quantitative cross-sectional correlational design. A quantitative correlational strategy is used to identify the linkage between two or more variables as well as the degree of the linking between these variables inside a population or a sample, and it uses and analyzes numerical data by utilizing particular statistical measures to respond to specific questions (Apuke, 2017). In cross-sectional studies, the researcher could measure the results and exposure to the study participants simultaneously (Setia, 2016).

4.2. Study setting

The research was conducted at two large government hospitals (King Fahad General Hospital and Maternity and Children Hospital) in Medina City, Saudi Arabia. Those hospitals were selected for several reasons, such as they are governmental hospitals, having high bed capacity, and containing a large number of nurses with different cultures.

4.3. Subjects

A convenience sampling technique was used to recruit staff nurses with experience of at least one year and not involved in administrative positions. The total sample population was 1750. After using the Survey System website with a 5% margin of error and a confidence level of 95%, the final sample size was 315 based on the following equation:

$$SS = \frac{z^2 * (p) * (1 - p)}{c^2}$$

Where:

Z = Z value (e.g. 1.96 for 95% confidence level).

p = percentage picking a choice expressed as a decimal (0.5 used for sample size needed).

c = confidence interval expressed as a decimal.

4.4. Tools of data collection

The current study used an electronic self-reporting questionnaire, and data were collected on three aspects: sociodemographic characteristics, OCB Scale, and Nurse Job Satisfaction Scale.

4.4.1. Sociodemographic data Assessment Questionnaire

This information was obtained through a questionnaire developed by the researcher and included age, gender, marital status, nationality, education level, and years of work as a nurse.

4.4.2. Organizational Citizenship Behavior Scale (OCB)

This part was adopted from Podsakoff et al. (1990) and modified by the researcher for the current setting. This scale is the most widely used in studies measuring the level of OCB and its five dimensions. It contains 24 items: Altruism (5 items), sportsmanship (5 items), conscientiousness (5 items), courtesy (5 items), and civic virtue (4 items).

The participants' responses were measured on a five-point Likert scale ranging from (1) "strongly disagree" to (5) "strongly agree." The scoring system was devised by a statistician for the OCB scale calculated by weighted mean. Moreover, the five negative statements for the sportsmanship dimension involved reverse coding. Point 1 of the Likert scale (strongly disagree) with a weighted mean limit of 1.00 to less than 1.80 indicated a very low level. Point 2 of the Likert scale (disagree) at a weighted mean limit of 1.80 to less than 2.60 indicated a low level. While point 3 of the Likert scale for (neutral) with a weighted mean range of 2.60 to less than 3.40 indicated a medium level. Also, point 4 of the Likert scale (agree) in the weighted mean range of 3.40 to less than 4.20 indicated a high level. Finally, point 5 of the Likert scale (strongly agree) in weighted mean range 4.20 to 5 indicated a very high level. The internal consistency and reliability of the OCB scale were assessed using Cronbach's alpha coefficients. It had an acceptable level (0.74).

4.4.3. Nurse Job Satisfaction Scale (Escala de Satisfação dos Enfermeiros com o Trabalho - ESET)

The scale was developed by *Da Silva João et al. (2017)*, who confirmed its validity and reliability. It contains 37 items to assess the level of nurses' satisfaction toward aspects related to work dynamics. The scale has six dimensions: Satisfaction with co-workers (5 items), satisfaction with recognition and remuneration (5 items), satisfaction with leadership (12 items), satisfaction with staffing (2 items), satisfaction with the organization and its resources (8 items), and satisfaction with professional recognition (5 items).

The responses were measured on a five-point Likert scale: (1) "not at all", (2) "slightly", (3) "moderately", (4) "very", and (5) "extremely". A statistician devised the scoring system for the nurse job satisfaction scale calculated by weighted mean. Point 1 of the Likert scale for (not at all) with a weighted mean limit 1.00 to less than 1.80 indicated a very low level. Point 2 of the Likert scale for (slightly) at a weighted mean limit of 1.80 to less than 2.60 indicated a low level. While point 3 of the Likert scale for (moderately) with a weighted mean range of 2.60 to less than 3.40 indicated a medium level. Also, point 4 of the Likert scale for (very) in the weighted mean range 3.40 to less than 4.20 indicated a high level. Finally, point 5 of the Likert scale for (extremely) in weighted mean range 4.20 to 5 indicated a very high level. The internal consistency and reliability of the ESET scale were assessed using Cronbach's alpha coefficients. It had an excellent level (0.96).

4.5. Procedures

Five academic experts in the faculty of nursing at King Abdulaziz University tested the content validity of the measurements. According to jury suggestions, the researcher has modified two items in the OCB scale. Those two items were American idioms that were inconsistent with the current culture. More specifically, the researcher modified "I tend to make mountains out of molehills" to "I tend to

exaggerate things" and "I am the classic 'squeaky wheel' that always needs greasing" to "I complain and protest loudly."

Furthermore, the original English format of the questionnaire was translated into the Arabic language to be consistent for the current setting that contains some of the Saudi nurses who studied nursing science in the Arabic language, and they do not understand the English language using a translating and back-translating technique.

A pilot study was carried out on 10% of the sample (31 nurses) to test the questionnaire's clarity, feasibility, and ambiguity and estimate the time required to answer the questionnaire and its applicability, besides testing the feasibility of the research process. The questionnaire proved clear, and no modifications were required; the pilot study sample was thus included in the study sample. Notably, the required time by each participant for filling the tools was 15–20 minutes.

Approval was obtained from the Ethical Committee of the Faculty of Nursing at King Abdulaziz University and the Ministry of Health. Permission was obtained from King Fahad General Hospital and Maternity and Children Hospital. The respondents were fully informed, and their consent for participation was obtained. The electronic questionnaire contained a clear statement on the confidentiality of the information obtained. The respondents were not asked to disclose their names, thus ensuring anonymity. They were also informed of their right to withdraw from the study at any time. Data on the participants were available only to the research team.

The researcher converted the hard copy of the study questionnaire into a soft copy due to the critical situations caused by COVID-19. So that, the researcher used Google Drive to establish the English and Arabic links of the electronic questionnaire. Then, the researcher contacted the nursing directors, supervisors, and head nurses of the two hospitals after obtaining the ethical approvals to explain and send the electronic questionnaire. They sent the questionnaire to their staff nurses via their e-mails. Furthermore, the researcher contacted some of the staff nurses from the two hospitals to explain and fill the questionnaire. The duration to collect data for the study was from March 15, 2020, to May 7, 2020. The response rate was 100%.

4.6. Data Analysis

The statistical package for the social science SPSS version 25 was used to analyze data. Descriptive statistics such as percentages, frequencies, means, weighted means, relative weights, and standard deviations were used to describe sociodemographic data and the levels of study variables. Pearson's correlation coefficients were used to assess the relationship between the study variables. The statistical significance of the correlation was tested at the 0.01 and 0.05 levels.

5. Results

Table 1 presents the descriptive statistics of sociodemographic data for the study participants. More than

half of the participants (53.3%) were between 30 to less than 40 years old. The majority (94.9%) were females, and more than half of the nurses (58.4%) were married. Concerning nationality, more than two-thirds (68.9%) were Saudi nurses. In addition, two-thirds of the nurses (62.5%) had a bachelor's degree in nursing. Also, most nurses (77.4%) had work experience for more than five years.

As shown in table 2, the overall level of organizational citizenship behavior among nurses was high (3.86±0.35), with a relative weight of 77.26%. All dimensions of organizational citizenship behavior had a high level. The highest weighted mean for the courtesy dimension (4.13±0.54) with a relative weight of 82.63%, whereas the lowest weighted mean for civic virtue (3.54± 0.67) with a relative weight of 70.86%.

Table 3 reveals the frequency and the percentages for the nurses' responses regarding the levels of organizational citizenship behavior. Near to three-quarters of the nurses (74.29%) had a weighted mean from 3.40 to less than 4.20, which means they had a high level of OCB, while only 8.25% had a weighted mean from 2.60 to less than 3.40, which means they had a medium level of OCB.

As indicated in table 4, the overall nurses' job satisfaction level was medium (2.88±0.76), with a relative

weight of 57.57%. All dimensions of job satisfaction had a medium level score, except for the dimension of satisfaction with staffing, which had a low level. The highest weighted mean was for satisfaction with co-workers (3.29±0.75) with a relative weight of 65.82%, while the lowest mean was for satisfaction with staffing (2.16±1.16) with a relative weight of 43.21%.

Table 5 displays the frequency and percentages for the nurses regarding the levels of job satisfaction. The nurses' responses reveal that 42.54% of them had a weighted mean from 2.60 to less than 3.40, which means they had a medium level of satisfaction, while the lowest percentage (5.40%) had a weighted mean from 1 to less than 1.80, which implies a very low level of satisfaction.

Table 6 illustrates the relationship between nurses' organizational citizenship behavior and job satisfaction. There was a statistically significant positive relationship between overall organizational citizenship behavior and overall job satisfaction among nurses ($r = 0.354$, p -value < 0.01), which indicates that increasing the level of job satisfaction among nurses will increase their level of organizational citizenship behavior.

Table (1): Frequency and percentages distribution of sociodemographic data for the studied participants (n= 315).

Variables	Frequency	Percent
Age		
20-<30 years.	115	36.5
30-<40 years	168	53.3
40 years and more	32	10.2
Gender		
Male	16	5.1
Female	299	94.9
Marital status		
Single	111	35.3
Married	184	58.4
Divorced	20	6.3
Nationality		
Saudi	217	68.9
Non-Saudi	98	31.1
Educational level		
Diploma	106	33.7
Bachelor	197	62.5
Master	12	3.8
Years of work as a nurse		
1-<5 years	71	22.6
5-<10 years.	122	38.7
Ten years and more	122	38.7

Table (2): Mean, Standard Deviation, Weighted Mean, Relatives Weights, and The Level of Organizational Citizenship Behavior for Nurses (n=315).

Organizational Citizenship Behavior Sub Scales	Mean	Weighted Mean	SD	Relative weights	Level
Altruism	20.61	4.12	0.48	82.43%	High
Sportsmanship	17.83	3.57	0.67	71.34%	High
Conscientiousness	19.45	3.89	0.55	77.79%	High
Courtesy	20.66	4.13	0.54	82.63%	High
Civic virtue	14.17	3.54	0.67	70.86%	High
Overall Organizational Citizenship Behavior	92.72	3.86	0.35	77.26%	High

Table (3): Frequency and percentages for the nurses' responses regarding the levels of organizational citizenship behavior (n=315).

Overall OCB level	Mean Range	Weighted Mean Range	Frequency	Percent
Very Low	24 to less than 43.2	1 to less than 1.80	0	0.00%
Low	43.2 to less than 62.4	1.80 to less than 2.60	0	0.00%
Medium	62.4 to less than 81.6	2.60 to less than 3.40	26	8.25%
High	81.6 to less than 100.8	3.40 to less than 4.20	234	74.29%
Very high	100.8 to 120	4.20 to 5	55	17.46%

Table (4): Mean, Standard Deviation, Weighted Mean, Relatives Weights, and The Level of Job Satisfaction for Nurses (n=315).

Job Satisfaction Sub Scales	Mean	Weighted Mean	SD	Relative weights	Level
Satisfaction with the co-workers	16.45	3.29	0.75	65.82%	Medium
Satisfaction with recognition and remuneration	13.11	2.62	0.94	52.46%	Medium
Satisfaction with the leadership	34.24	2.85	0.87	57.07%	Medium
Satisfaction with staffing	4.32	2.16	1.16	43.21%	Low
Satisfaction with the organization and resources	22.83	2.85	0.86	57.09%	Medium
Satisfaction with professional recognition	15.54	3.11	0.91	62.17%	Medium
Overall Job Satisfaction	106.5	2.88	0.76	57.57%	Medium

Table (5): Frequency and percentages for the nurses regarding the levels of job satisfaction (n=315).

Overall Job Satisfaction level	Mean Range	Weighted Mean Range	Frequency	Percent
Very Low	37 to less than 66.6	1 to less than 1.80	17	5.40%
Low	66.6 to less than 96.2	1.80 to less than 2.60	52	16.51%
Medium	96.2 to less than 125.8	2.60 to less than 3.40	134	42.54%
High	125.8 to less than 155.4	3.40 to less than 4.20	88	27.94%
Very high	155.4 to 185	4.20 to 5	24	7.62%

Table (6): Pearson Correlation Coefficient Test for the Relationship between Organizational Citizenship Behavior and Job Satisfaction among Nurses.

Job satisfaction dimensions	OCB dimensions					Overall (OCB)
	Altruism	Sportsmanship	Conscientiousness	Courtesy	Civic virtue	
Satisfaction with the co-workers	0.180**	0.171**	0.143*	0.137*	0.232**	0.291**
Satisfaction with recognition and remuneration	0.088	0.074	0.081	0.039	0.269**	0.183**
Satisfaction with the leadership	0.128*	0.175**	0.215**	0.111*	0.384**	0.343**
Satisfaction with staffing	0.002	0.116*	0.130*	-0.002	0.270**	0.179**
Satisfaction with the organization and resources	0.097	0.165**	0.235**	0.114*	0.309**	0.313**
Satisfaction with professional recognition	0.231**	0.155**	0.203**	0.233**	0.384**	0.401**
Overall Job Satisfaction	0.148**	0.176**	0.214**	0.132*	0.379**	0.354**

Note: OCB = Organizational Citizenship Behavior ** Correlation is significant at the 0.01 level (2-tailed). * Correlation is significant at the 0.05 level (2-tailed).

6. Discussion

Organizational citizenship behavior promotes the creativity and efficiency of the performance, maintains teamwork, and decreases the need for supervision and the time consumed to solve the problems (Dargahi et al., 2012; Yaakobi & Weisberg, 2020). Investigating the level of job satisfaction for nurses can help healthcare organizations to determine those aspects that increase their job satisfaction and motivate them to remain in governmental hospitals (Khunou & Davhana-Maselesele, 2016). This study aimed to determine the level of organizational citizenship behavior, assess the level of job satisfaction, and identify the relationship between organizational citizenship behaviors and job satisfaction from the nurses' perspective.

In this study, the nurses had an overall high level of OCB and high scores in all OCB dimensions. The nurses

may be interested in engaging in voluntary behaviors when their managers encourage innovation and teamwork and empower them to be accountable and in control in delivering nursing care to improve the quality of the care.

Several studies were congruent with the current study results that showed high levels of OCB among nurses (Agheli et al., 2017; Aloustani et al., 2020; Elsayed et al., 2019; Ruhana, 2020). By contrast, a study in Iran found low scores in sportsmanship, civic virtue, and courtesy (Jafarpanah & Rezaei, 2020).

The overall satisfaction of nurses in this study was medium, which supports two other studies in Saudi Arabia (Alshahrani & Baig, 2016; Al-Takroni et al., 2018). Internationally, most studies report moderate job satisfaction among nurses (Asamani et al., 2016; Jang & Oh, 2019; Mazumder et al., 2016).

More specifically, the nurses in this study were moderately satisfied with participative leadership,

remuneration, organizational resources, recognition of the nursing profession, and relationships with co-workers. However, they were dissatisfied with the staffing aspect.

The critical situation caused by COVID-19 worldwide has led to a lack of resources in many healthcare institutions and affected the psychological status of healthcare providers by increasing their levels of stress, anxiety, sleep disorders, and exhaustion (Danet, 2021; Vergano et al., 2020). This stressful environment could influence healthcare workers' satisfaction with their organizations' resources and relationships with supervisors and colleagues. Recent studies concluded that the Saudi community negatively perceives the nursing profession (Alotaibi et al., 2016; Elmorshedy et al., 2020), which may affect patients' and their families' recognition and understanding of this profession could reflect on nurses' satisfaction with their jobs.

In Saudi Arabia, there are only around four nurses for every 1,000 people, indicating a significant shortage of nurses (Alotaibi et al., 2016). Heavy workloads and long hours resulting from such a shortage are likely to factor into nurses' dissatisfaction (Alotaibi et al., 2016; Nantsupawat et al., 2017) and could explain the dissatisfaction found in the present study regarding the staffing aspect.

Previous studies in line with our findings reported that several challenges are likely to reduce nurses' job satisfaction, including a transactional leadership style, inadequate remuneration and resources, decreased appreciation from patients and their families, unbalanced workload due to the shortage of nurses, and high volumes of patients (Aljohani, 2019; Alshahrani & Baig, 2016; Al-Takroni et al., 2018; Mousazadeh et al., 2019).

Concerning the relationship between OCB and job satisfaction, the present study found a statistically significant positive relationship between nurses' overall OCB and job satisfaction. This result provides additional evidence for the positive effect of nurses' job satisfaction on OCB levels discovered in previous studies (Biagioli et al., 2018; Charolyna & Sukiswo, 2019; Johnly & Tampi, 2018; Ruhana, 2020).

7. Conclusion

In the current study, the level of organizational citizenship behavior was high, both overall and in each of its dimensions. However, it revealed moderate overall job satisfaction among the surveyed nurses. Mid-level scores were found in all dimensions of job satisfaction except satisfaction with staffing, which was low. There was a positive relationship between the overall OCB and nurses' job satisfaction, which provides evidence that increasing the level of job satisfaction among nurses will increase their levels of organizational citizenship behavior.

8. Recommendations

Providing adequate remuneration could reduce the effect of overwork on nurses' job satisfaction. Furthermore, increasing the capacity of nursing schools to produce more nurses in the future could reduce the workloads and staff shortages of nurses. Nursing supervisors must develop

strategies and policies that focus on psychological support and participative leadership. Patients' and their families' perception of nurses could be improved by providing lectures for the community regarding the importance of this valuable profession. These interventions could increase nurses' satisfaction with their jobs. Finally, there is a dearth of literature on OCB among nurses and the effect of job satisfaction on it. Therefore, nationally and internationally, further research is needed in this field.

9. References

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