Psychological contract breach and its influence on the job embeddedness of nurses

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ABSTRACT
The global shortage of nurses needs urgent attention. Psychological contract breach may play a role in the job embeddedness of professional nurses. Hierarchical regression, based on 228 nurses employed by a private hospital, examined the prediction of breach on job embeddedness. The results indicate breach negatively influences job embeddedness. This result is an indication to management to be mindful when making promises to professional nurses as well as honoring these obligations. Breach may lead to undesirable consequences, such as the turnover of nurses which increases cost associated with recruitment in the sensitive situation where professional nurses are scarce.

INTRODUCTION
The critical scarcity of registered nurses [1] is a worldwide concern [2], [3]. This shortage is expected to increase, as populations expand [3]. South Africa reportedly had a shortage of 44 780 nurses in 2013 [4]. Nursing shortages have in general been associated with a lack of job satisfaction [5], [6], stress [7], [8] and burnout [9], [10] South African nurses reportedly leave the country due to international opportunities with better compensation [11], [12], high incidence of HIV/AIDS in South African hospitals [13], [14], unreasonable workload [15], and poor training and benefits [5]. All these reasons indicate a possibility of experiencing breach. This is an indication that global competitiveness plays a role even in the nursing occupation. It is clear that the nursing industry in South Africa is facing a challenge to retain employees. Innovative creative action is needed to generate value to remain in the nursing industry and in South Africa specifically: More clarity is needed to understand the influence of breach on job embeddedness as experienced by the nursing profession.

OVERVIEW OF THE LITERATURE
The Social Exchange Theory forms the basis of the psychological contract [16], where the contract exchange between the employer and employee are met to the satisfaction of both parties. The notion of the psychological contract implies the meeting of official and unofficial expectations between employer and employee [17].

Breach takes place when the implicit and explicit promises between the employer and the employee are infringed [18]. Undesirable consequences follow when employers do not keep their promises [19]. Job and community embeddedness is an important phenomenon to take into consideration in the retention of employees. Job embeddedness contrary to breach, seem to contribute to retaining employees [20]. The two concepts of breach and job embeddedness seem to be important factors to take into consideration in the retention of South African nurses.

Previous research indicate that breach influences turnover [21] [22] and absenteeism, with a negative impact on productivity, performance [23], job satisfaction [22], [24], organizational commitment [22], [25], and trust [26]. Specifically among nurses, breach of the psychological contract leads to decrease performance, demotivation, lower job satisfaction [25], [27] and early retirement [28]. The potential adverse effects of breach are a concern.

The term job embeddedness shifted the traditional approach of considering reasons employees leave their organizations, to initiatives stay [20]. The concept of job embeddedness consists of three dimensions: (i) fit refers to the person’s beliefs in the fit of the organizational requirements [20], [29], (ii) connections or involvement of a person experiences with co-workers and activities at work [20], and (iii) sacrifice, the extent to which a person is forfeit privileges \ [20], [30].

The relationship between breach and job embeddedness has not been examined before. However, research indicates that employees who perceive breach are less likely to remain with their employer [16], [31], [32]. The high levels of turnover intention of nurses is a global concern [33]. Breach may play a role in experiencing lower levels of job embeddedness. It is therefore expected that nurses’ perception of breach may negatively predict job embeddedness.

Research question: Does psychological contract breach predict the job embeddedness of professional nurses?

METHOD
A cross-sectional investigation was done into professional nurses from private hospitals. A convenience sample was selected of 228 professionally registered nurses, 34 males and 194 females, 196 South Africans and 32 Non-South Africans, with a mean age
of 42.23 (SD = 11.81), varying between 20 and 76 years. The nurses had a mean tenure of 8.98 years (SD = 6.67), worked mainly in intensive care (51), and theatre (44), the rest were distributed among different specialties.

Breaches [34] and Job Embeddedness [20] were measured on a 5-point Likert-scales ranging between “low” and “high” levels respectively. Exploratory Factor Analysis showed a one factor solution for Breach as independent variable and the three factor solution for Job Embeddedness as dependent variable. The three factors comprised Sacrifice: Organization (Factor 1), Fit: Community (Factor 2), and Fit: Organization (Factor 3). Internal consistencies were at acceptable (breach) and acceptable (job embeddedness) Cronbach’s alpha levels [35] (see TABLE 1). For both variables, responses were based on Likert-scales ranging between 1 and 5 indicating “low” and “high” levels respectively.

Three variables were included as control variables. Age is included as it has an influence on the duration of employment [18], [36]. A difference between psychological contract and age of nurses is reported with younger people as significantly more sensitive to contract breach than older people [37]. Nurses that are older, are less likely to continue their employment at their present position than younger nurses [38]. Citizenship. Job embeddedness influences voluntary turnover, between cross-cultural groups [39]. An investigation comparing a sample of workers in United States of America with and India found a significant difference between the two cultures. Person-Job fit was more important in the USA while organizational and community links were regarded as more important in India to decrease turnover. Although the focus of this study was not on turnover, it provided an indication that different cultural groups and citizens from different countries may perceive job embeddedness differently. Citizenship was coded as 0 = South African and 1 = other; employment status (Emp.) was coded as 0 = temporary and 1 = permanent. Reliabilities (Cronbach’s alphas) are shown along the diagonal.

* indicates p < .01, **, p < .001.

The Pearson correlation coefficient revealed a large negative association [44] between breach and job embeddedness (r = −.55, p < .001). There was no statistically significant association between the control variables and breach and job embeddedness, except for a significant but small positive association between age and job embeddedness (r = .19, p < .01). This is an indication that older professional nurses are more likely to experience higher levels of job embeddedness.

A hierarchical regression measured the prediction of breach to predict job embeddedness. Control variables were entered in Step 1, followed by breach as predictor in Step 2. The results are reported in TABLE 2.

### TABLE 1: Means (M), standard deviations (SD), and correlations between all study variables

<table>
<thead>
<tr>
<th>Var.</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>(--)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Empl.</td>
<td>.01</td>
<td>.23</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CTZ</td>
<td>.41**</td>
<td>.52**</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>JE</td>
<td>.19*</td>
<td>.05</td>
<td>.01</td>
<td>.93</td>
<td></td>
</tr>
<tr>
<td>M</td>
<td>42.63</td>
<td>.80</td>
<td>0.86</td>
<td>2.29</td>
<td>3.83</td>
</tr>
<tr>
<td>SD</td>
<td>11.82</td>
<td>.40</td>
<td>0.35</td>
<td>0.86</td>
<td>0.68</td>
</tr>
</tbody>
</table>

n = 228. Citizenship (CTZ) was coded as 0 = South African and 1 = other; employment status (Emp.) was coded as 0 = temporary and 1 = permanent. Reliabilities (Cronbach’s alphas) are shown along the diagonal.

### TABLE 2: Regression results (with breach as independent variable)

<table>
<thead>
<tr>
<th>Control variables</th>
<th>Step 1</th>
<th>Step 2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td>.261**</td>
<td>.223**</td>
</tr>
<tr>
<td>Employment status</td>
<td>.138</td>
<td>.078</td>
</tr>
<tr>
<td>Citizenship</td>
<td>−.166†</td>
<td>−.097</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Independent variable</th>
<th>Step 1</th>
<th>Step 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breach</td>
<td></td>
<td>−.534**</td>
</tr>
<tr>
<td>F</td>
<td>4.442*</td>
<td>28.497**</td>
</tr>
<tr>
<td>ΔR²</td>
<td>0.956**</td>
<td>0.338</td>
</tr>
<tr>
<td>R²</td>
<td>0.282</td>
<td></td>
</tr>
</tbody>
</table>

n = 228. Standardized regression coefficients are reported.

†p < .10, *p < .01, **, p < .001.

Breaches had a statistically significant and negative relationship with job embeddedness (β = −.534, p < .001), explaining 28% of variance in job embeddedness after controlling for age, employment status, and citizenship. The control variables only explained 6% of the variance in job embeddedness. In the final model (Step 2), only age (β = .223, p < .001) as control variable was statistically significant, with a coefficient lower than breach.

### DISCUSSION

This article reports on the predictive ability of breach on job embeddedness in a sample of professional nurses.
nurses. It was found that perceived breach has an impact on job embeddedness. Higher levels of breach results in lower levels of job embeddedness. This finding was expected as previous evidence suggests the negative impact of breach on productivity, performance [23], job satisfaction [22], organizational commitment [22], [25], and trust [26], which may influence job embeddedness [20]. What remains unanswered is the impact of breach on employees’ community fit (i.e., whether their perception about where they live is positively related to their concern for their community).

**Practical implications.** Management should be mindful of honoring promises made to professional nurses in order to avoid lower levels of job embeddedness. Employers of nurses should tailor a plan to keep nurses within the organization and community using the aspects of Job Embeddedness [45]. Although retention strategies may prove beneficial, management needs to develop more strategies. In turn, nurses need to be sensitized to have realistic expectations when they discuss inducements and obligations of the organization.

**Limitations.** Four limitations are observed. (i) The issue of a possible masking effect by ‘fit to the community’ on the predictive power of breach on job embeddedness may be a limitation of this study; (ii) variables representative of the organization and individual, assessing links to community and organization respectively, have been excluded from this analysis; (iii) this cross-sectional study focused on the private hospital sector. The results may therefore not be representative of a larger population and other countries.

**Suggestions for future research.** Future studies may wish to examine the impact of breach on how nursing employees fit into their community. It may shed more light on whether breach may present uncertainty pertaining to turnover and the possibility of employment outside their communities. The role that organizational- and individual-levels play may be considered. Future studies could investigate the possible buffering effect of job embeddedness on the perception of breach, similar to the buffering effect that client embeddedness has on breach [46]. The above suggestions can be expanded into (a) the differences between private and public hospitals in South Africa, and (b) a cross-cultural study comprising BRICS countries.

**Conclusion.** This study examined and evidenced that breach, has a negative impact on job embeddedness of nurses. Management of nurses needs sensitive and be creative in retention strategies for the greater good of the nursing profession especially in South Africa.

**REFERENCES**


Full reference list available upon request.

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