PREDICTORS AND OUTCOME OF ORGANIZATIONAL CYNICISM AND THE MODERATED MEDIATING EFFECT OF PERCEIVED ORGANIZATIONAL SUPPORT AMONG NURSES IN PAKISTAN

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UNIVERSITI TEKNOLOGI MALAYSIA
PREDICTORS AND OUTCOME OF ORGANIZATIONAL CYNICISM AND THE MODERATED MEDIATING EFFECT OF PERCEIVED ORGANIZATIONAL SUPPORT AMONG NURSES IN PAKISTAN

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A thesis submitted in fulfilment of the requirements for the award of the degree of Doctor of Philosophy (Management)

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I dedicate this dissertation to my parents, my spiritual mentor HazoorQibla Syed Munir Hussain Shah Sahib (D.B.A) and Hazrat Ali Usman Hajvairi (Data Ganj Bakhsh) R.A
ACKNOWLEDGEMENT

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ABSTRACT

Over the years, researchers in the field of management have tried to explore the factors of negative attitudes among healthcare services staff. However, related studies in the context of organizational cynicism are limited. Thus, it is essential to investigate the factors and outcomes of organizational cynicism among the healthcare services staff. The current study aimed to establish the relationship of perception of ethical climate, horizontal violence and authentic leadership style as predictors and turnover intention as an outcome of organizational cynicism along the moderated mediating effect of perceived organizational support in the nursing profession. The study used a quantitative research design, and eight hundred and seventy questionnaires were distributed to collect data from nursing staff working in Punjab region of Pakistan using a non-probability multistage sampling technique. Exploratory factor analysis (EFA), confirmatory factor analysis (CFA), multivariate data normality tests, descriptive statistics and structural equation modeling (SEM) were applied to analyze the data. The results revealed a statistically significant direct relationship among the perceptions of ethical climate, horizontal violence, authentic leadership style, organizational cynicism and turnover intention. Subsequently, results showed the full mediating effect of organizational cynicism between perception of ethical climate and turnover intention while no mediation was found between horizontal violence and turnover intention. Additionally, results indicated a partial mediating effect of organizational cynicism between authentic leadership style and turnover intention. On the contrary, moderated mediating relationship of perceived organizational support could not proceed because of the insignificant mediating effect of organizational cynicism between horizontal violence and turnover intention. Findings of the current study contributed to the literature of organizational behavior by exploring the factors and outcomes of cynicism among healthcare services staff. The study has also practical implications for nursing managers and the Ministry of Health, Pakistan as the findings would enable them to understand the factors which directly or indirectly affect the negative attitudes among healthcare services staff.
ABSTRAK

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CHAPTER 1

INTRODUCTION

1.1 Background of the Study

Organizations flourish because of favorable work attitudes of their employees. However, in many organizations unfavorable attitudes among employees are being explored deliberately. According to attitude theory, attitude is a disposition to respond favorably or unfavorably to an object, person, institution, or event (Ajzen, 1994). A recent survey conducted by Shehzad and Malik (2014) in the health care sector of Pakistan found that the health care sector of Pakistan faces critical issues regarding the attitude of health care staff. An emerging topic in this context is organizational cynicism, which has been defined as:

“A negative attitude toward one’s employing organization, comprising three elements: (1) a belief that the organization lacks integrity; (2) negative affect toward the organization; and (3) tendencies to disparaging and critical behavior toward the organization that are consistent with these beliefs and affect” (Dean, Brandes and Dharwadkar, 1998: 345).

Cynicism is determined by frustration, disillusionment, hopelessness and it is an attitude which is related to distrust, contempt and disgust (Andersson, 1996). Moreover, Tokgöz and Yılmaz (2008) reported that cynical people have disappointed and pessimistic
thoughts. Cynics show sympathy to people and think about their own interest and claim others as selfish and create unpleasant environment which increases turnover intention (Bernerth et al., 2007). Similarly, Chiaburu et al. (2013) found a positive relationship between cynicism and turnover intention. Moreover, Laschinger et al. (2009) found that cynicism is the strongest predictor of turnover intentions. Likewise, Leiter and Maslach (2009) analyzed that organizational cynicism enhance turnover intentions among employees. In line with this context, Shahzad and Malik (2014) found that negative attitude increases turnover intentions among nurses. In another study, Suzuki et al. (2010) found that novice nurses intend to quit their jobs immediately after the first 15-months of their appointment. Moreover, the authors concluded that cynicism was revealed to be the most significant factor affecting the turnover intention in novice nurses.

In line with this study, Leet et al. (2013) pointed out that cynical attitude resulted in establishing a poor ethical climate that further effects employee attitude. Similarly, Karatepe and Agbaim (2012) found that healthcare professionals encounter serious ethical problems in providing their services. These ethical problems in practice result in negative attitude. Likewise, Wojtowicz, et al. (2013) pointed out that poor ethical climates stem from doubt, fear, frustration and cynical attitudes among employees. In another study, Stachowicz-Stanusch and Simha (2013) argued that the perception of ethical climate strongly predicts employee attitude while they expect strong socialization with each other.

Within the aforementioned context, the social exchange theory supports this assumption. According to Blau (1964) social exchange theory exists when individuals have expectations from others and attract people for their own self-interest. Their self-centered approach produces cynicism among employees. For instance, Maris and Kantar (1991) argued that self-centered people create a more cynical climate in the organization and engage in violent behaviors. Extending this argument, Shehzad and Malik (2014) found that the nursing profession in Pakistan is facing very serious issues of violence among staff because of cynical attitude and turnover intention. According to Laschinger and Grau (2012) horizontal violence embraces any kind of behavior that creates a sense of isolation and feelings of being under attack and devalued in the target health care staff.
and in this way targeted staff become cynical. According to Duffy (1995) horizontal violence can be viewed as non-physical hostility, such as criticism, sabotage, undermining, infighting and backbiting. In addition, Hurst and Smith (2011) discussed that horizontal violence is predominant in health care because of cynical attitude of employees. The authors further explained that horizontal violence is more common in health care organizations than in other work settings. Similarly, Ruby et al. (2012) agreed with Hurst and Smith (2011) and found that horizontal violence is the main factor of incidence and strongly predict cynicism, particularly in nursing profession. For instance, Somani et al. (2012) reported 80% prevalence of horizontal violence was due to the negative image of nursing staff in hospitals.

Subsequently, Laschinger and Fida (2013) found that the role of leadership is very important in preventing cynical attitudes and the shaping of a positive working environment. According to Walumbwa et al. (2008: 95) authentic leadership is defined as “a pattern of leader behavior that draws upon and promotes both positive psychological capacities and a positive ethical climate, to foster greater self-awareness, an internalized moral perspective, balanced processing and relational transparency”. For instance, Stokes (2013) found that the role of leadership accounted for 53% of organizational cynicism. Additionally, Laschinger and Fida (2013) argued that authentic leadership style mitigates negative attitudes among employees more precisely than other leadership styles. According to Walumbwa et al. (2008) authentic leaders display four types of behaviors. These include balanced processing, internalized moral perspective, relational transparency, and self-awareness which significantly affects cynical attitudes. In addition, Wu, et al. (2007) examined the relationship of leadership behavior with negative attitude and found a strong predictor of cynicism.

Another issue reported in the literature is that poor organizational support causes a negative attitude among employees. Social exchange theory addresses the psychological processes underlying consequences of perceived organizational support. In line with this context, James (2005) found that perceived organizational support is a strong predictor of organizational cynicism. In another instance, Nixon et al. (2011) found negative relationship between perceived organizational support and negative
attitudes. Additionally, Forootan (2012) found that perceived organizational support reduces the level of negative attitudes among employees. Similarly, Campana and Hammoud (2013) found that those employees who receive high organizational support yield less toward cynicism and therefore, cynical people have less intention to quit the organization.

Consequently, addressing all the aforementioned problems was the motivation of the present study. Therefore, the purpose of this study was to investigate the perception of ethical climate, horizontal violence and authentic leadership as predictors of organizational cynicism and turnover intention as its outcome along with the moderated mediating effect of perceived organizational support in nursing staff.

1.2 Nursing issues in Pakistan

Nurses in Pakistan are facing very critical issues related to workplace violence, poor leadership and less organizational support (Somani and Khowaja, 2012). According to Economic survey of Pakistan (2012), Pakistan is facing shortage of 60,000 nurses and among the top 57 countries where the nursing to patient ratio is very poor and producing nurses very slowly while the turnover ratio is also increasing day by day (WHO, 2014). At present in Pakistan, there are 972 hospitals, 4,842 dispensaries, 5,374 basic health units and 909 maternity and child health centers. During 2011-12, there are 76,244 nurses and 108,137 hospital beds in the country. However, population of Pakistan is estimated 180.71 million, which shows population growth rate 2.03 percent in 2011-12. Thus, the nursing to population ratio in Pakistan for 2012 is 1:2360. The current nurse-patient ratio is nearly 1:50. The nurse: physician ratio was 1:2.5 (Pakistan economic survey, 2012). In Pakistan for every ten thousand of population there are 4 nurses compared to 14 in Iran, 13 in India, 17 in Sri Lanka and 3 in Bangladesh (WHO, 2010). Moreover, Shehzad and Malik (2014) argued that turnover of skilled employees in healthcare services is quite frightening and in Pakistan the ratio of turnover intention is at high peak. However, Mobley et al. (1979) proposed turnover intentions as key antecedents of turnover.
Pakistan is facing hindrance in attracting new people and producing required number of nursing staff due to social unrest, inadequate number of institutes to provide quality nursing education, deprived status in the society, lack of ethical climate, lack of career growth, insufficient learning and education, absence of harassment laws implementation, lower salaries and incentives, below standard working conditions in both public and private hospitals and inadequate retention policies (Khowaja, 2009).

In this scenario, reducing cynical attitude among nurses towards the hospitals and colleagues is another challenge. Similarly, Ruby et al. (2012) argued that nursing profession in Pakistan is very negatively portrayed by the society and even by the media. They analyzed that 76% nurses experienced physical violence and 44% experienced body injuries while 78.4% of the incidents of violence are because of the attendants of the patients. They also directed for further research to prevent violation. Similarly, Somani et al. (2012) reported 80% prevalence of violence in public healthcare settings and 84% in private sector. They found that the major cause of prevalence of violence in health care is the negative image of nurses in Pakistani society.

Table 1.1 shows the details of nurses working in different hospitals of Punjab Pakistan. There is a still shortage of 2373 charge nurses in Punjab and the health department of Punjab required 8925 additional charge nurses to fill the gap in hospitals. Therefore, the motivation of the current study is to empirically investigate the relationship of perception of ethical climate, horizontal violence and authentic leadership style with organizational cynicism and turnover intention along with the moderated mediating effect of perceived organizational support among nurses in Pakistan.
Table 1.1  Details of Nursing Officers Working in Various Institutions in Punjab

<table>
<thead>
<tr>
<th>Sr.</th>
<th>Posts</th>
<th>Sanctioned</th>
<th>Filled</th>
<th>Vacant</th>
<th>Requirement according to PNC</th>
<th>Additional Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Charge Nurses</td>
<td>11065</td>
<td>8692</td>
<td>2373</td>
<td>19990</td>
<td>8925</td>
</tr>
<tr>
<td>2</td>
<td>Head Nurses</td>
<td>1057</td>
<td>688</td>
<td>369</td>
<td>5971</td>
<td>4945</td>
</tr>
<tr>
<td>3</td>
<td>Dy. Superintendent</td>
<td>Nil</td>
<td>-</td>
<td>-</td>
<td>17</td>
<td>12</td>
</tr>
<tr>
<td>4</td>
<td>Nursing Superintendent</td>
<td>46</td>
<td>29</td>
<td>17</td>
<td>62</td>
<td>16</td>
</tr>
<tr>
<td>5</td>
<td>Nursing Supervisor</td>
<td>Nil</td>
<td>Nil</td>
<td>Nil</td>
<td>126</td>
<td>126</td>
</tr>
<tr>
<td>6</td>
<td>Assistant Nursing</td>
<td>Dire 2</td>
<td>2</td>
<td>Nil</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>7</td>
<td>Deputy Chief Superintendent</td>
<td>Nun 10</td>
<td>2</td>
<td>14</td>
<td>30</td>
<td>14</td>
</tr>
<tr>
<td>8</td>
<td>Deputy Director</td>
<td>1</td>
<td>-</td>
<td>-</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>9</td>
<td>D.G Nursing</td>
<td>1</td>
<td>1</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

Source: (Punjab Health Department, 2013)

1.3  Problem Statement and Research Questions

Over the last decade, ethical climate in healthcare has been a subject of interest to many researchers (Mumtazet al. 2013). According to Victor and Cullen (1987) perception of ethical climate has been defined as the shared perceptions of what ethically correct behavior is and how ethical issues should be handled. Moreover, they argued that lack of
ethical climate induces a cynical attitude among employees and fortifies their turnover intention. Similarly, Karatepe and Agbaim (2012) conducted a study in Abuja, the capital city of Nigeria and found that strong ethical climate mitigates cynical attitude among employees towards the institute and their colleagues. The authors investigated job satisfaction and organizational performance as an outcome of perception of ethical climate and warranted further study should address turnover intention.

Similarly, Wilson et al. (2013) conducted a study in health care organizations and found that ethically distressed healthcare staff is cynical towards the hospital as well as their coworkers. The authors argued that poor ethical climate increases ethical concerns that affects not only health care professionals and administrators, but also the hospital’s perception, including patients, third-party payers, and legislators. In addition, Wojtowicz, Hagen and Smith (2013) conducted a study in healthcare on Canadian baccalaureate nursing students who reported on their experiences of moral distress during a 13-week clinical rotation in inpatient psychiatric units. Overall, nursing students reported significant moral distress due to poor ethical climate and argued that they will quit their job because of cynical attitude of the staff.

Likewise, Stanusch and Simha (2013) conducted a study in Poland based on 200 healthcare professionals of seven hospitals and found a significant relationship between caring, instrumental, independence, law and code, and rules climate with negative consequences. Up to the best knowledge of the researcher, perception of ethical climate has not been investigated as a predictor of organizational cynicism. However, limited studies have been found in which the relationship between perception of ethical climate and job burnout was investigated. According to Maslach and Jackson (1981), job burnout is defined as a syndrome of emotional exhaustion and cynicism that occurs frequently among individuals who do ‘people-work’ of some kind. However, this conceptualization has provided only partial insight into the phenomenon of cynicism within organizations. Unfortunately, this is the case because such conceptualizations do not reflect an integrated and systematic approach that conceptually and empirically investigates the process of organizational cynicism development and its effects on organizations and employees (Dean et al., 1998). The present study bridges this theoretical gap by
investigating the relationship of perception of ethical climate as a predictor of organizational cynicism and further its impact on turnover intention. Therefore, the researcher offered the first research question of this study as:

**RQ1:** Is perception of ethical climate a significant predictor of organizational cynicism and turnover intention in nursing staff?

In addition to the aforementioned issues regarding organizational cynicism, a study was conducted by Laschinger and Grau (2012) in Ontario, Canada based on a sample of 165 nursing staff. The authors found that horizontal violence contributes 19.6% to organizational cynicism. According to Duffy (1995) horizontal violence can be viewed as non-physical hostility, such as criticism, sabotage, undermining, backbiting and bickering. Similarly, Cassirer et al. (2002) used bullying as an interchangeable term for horizontal violence and discussed issues such as yelling, belittling, swearing, ignoring and dismissing. In addition, Ruby et al. (2012) found that 76% of nurses experienced physical violence and 44% experienced body injuries while 78.4% of the incidents of violence are because of the patients. The authors further pointed out that horizontal violence accelerated the cynical attitude towards hospital by 61.8% and by 36.3% in turnover intention.

Similarly, Somani et al. (2012) conducted a study in Sindh province of Pakistan and reported many incidence of horizontal violence in public health care settings. The authors found that the major cause of the prevalence of violence in nursing is the negative image of nurses in Pakistani society. As a result, many young nurses intend to quit their profession. Similarly, Laschinger and Fida (2013) conducted a study in Ontario, Canada from 205 health care staff and found a strong relationship between horizontal violence and cynicism and suggested that in future studies this relationship should be investigated more explicitly. Moreover, providing further support to the above issue, Hogh, Hoel and Carneiro (2011) conducted a three wave study among Danish health care workers in Denmark. The authors targeted 2154 respondents who participated in all three waves of data analysis. They reported that 9.2% were the target of horizontal violence at work in the 1st year after graduation and 1.8% were targeted frequently. Their follow-up analysis
showed a strong relationship between exposure to horizontal violence at Time 2 and turnover intention at Time 3. The authors expressed that all these cases were because of cynicism among employees. In prior literature, organizational cynicism has not been investigated with horizontal violence explicitly. However, few studies found the relationship of horizontal violence with burnout and few studies investigated the relationship of horizontal violence with turnover intention. Therefore, the researcher attempts to fill this theoretical gap by investigating the following research question.

RQ2: Is horizontal violence a significant predictor of organizational cynicism and turnover intention in nursing staff?

In addition to the prior issues of organizational cynicism, Laschinger and Fida (2013) conducted a study in Ontario, Canada from 205 nursing staff and found that the role of leadership is very important in preventing cynical attitudes, shaping a positive working environment as well as reducing turnover intentions among employees. Further, the authors found a strong correlation between authentic leadership and cynicism. Stokes (2013) conducted a two wave study in Virginia and data was collected from 191 respondents at time 1 and 178 at time 2. The results found that leadership accounted for 53% of organizational cynicism and further the authors warranted an empirical investigation of authentic leadership. Additionally, Wu, Neubert and Yi (2007) conducted a study in China on a sample of 469 employees and investigated strong negative relationship of transformational leadership with organizational cynicism. Further, the authors suggested that in future studies authentic leadership style should also be examined.

Moreover, Rittschof (2013) conducted a study in Walden University and investigated the relationship role of leadership with organizational cynicism and found a strong correlation between leadership and organizational cynicism and strong negative relationship with turnover intention. Similarly, Thomas and Lankau (2009) conducted a survey in healthcare services and data was obtained from 422 healthcare employees to investigate the impact of leadership on organizational cynicism. The authors found significant negative association and directed that in future studies authentic leadership
style should be examined. In previous literature of organizational cynicism, the tendency of the researcher was more towards transformational leadership while authentic leadership behaviors were relatively less discussed. However, few studies found in which only direct relationship of authentic leadership style was investigated with organizational cynicism, but the literature is still lacking to explicitly discuss this relationship (Stokes, 2013). To contribute in existing literature and fill this theoretical gap, the current study offers the following research question.

RQ3: Is authentic leadership style a significant predictor of organizational cynicism and turnover intention in nursing staff?

In extension to the aforementioned problems, Schaefer (2010) conducted a study in Paris and data was collected from a total of 84 supervisors and subordinates. Results indicated a strong mediating effect of organizational cynicism between leader-member exchange and job outcomes. Furthermore, Kim et al. (2009) conducted a study in Hong Kong and data were obtained from 144 employees. The authors found a strong mediating effect of organizational cynicism between top management and job outcomes. Further, the authors indicated that future studies should also investigate the mediating effect of organizational cynicism between other leadership behaviors and job outcomes.

Moreover, Laschinger and Fida (2013) conducted a study in Ontario, Canada based on 205 healthcare staff and found a strong mediating effect of burnout between authentic leadership and turnover intention. The authors further suggested that cynicism has a more significant mediating effect than other dimensions of burnout between authentic leadership and turnover intention. In line with the aforementioned context, a study was conducted by Laschinger and Grau (2012) in Ontario, Canada based on 165 nursing staff. The authors found statistically significant mediating effect of cynicism between horizontal violence and health problems. Further, the authors suggested that the mediating effect of cynicism should be investigated between horizontal violence and turnover intention.
Similarly, Laschinger et al. (2010) conducted a study in Ontario, Canada and tested the model using a longitudinal study of 415 newly graduated nurses. Their results revealed statistically significant mediating effect of cynicism between horizontal violence and efficacy and they called for further investigation with the mediating effect of cynicism between horizontal violence and job related outcomes. In addition, Ruby et al. (2012) conducted a study on health care from 50 nursing staff of emergency departments at tertiary care hospitals in Karachi Sindh, Pakistan. The authors found a partial mediating effect of cynicism between horizontal violence and turnover intention.

Another issue that requires close attention by the researcher is the mediating effect of organizational cynicism between perception of ethical climate and turnover intention. In line with the context, Karatepe and Agbaim (2012) conducted a study in Abuja, the capital city of Nigeria and found a significant mediating effect of cynicism between perception of ethical climate and job satisfaction and organizational performance while the authors suggested that in future study it should also be addressed with turnover intention. Similarly, Wilson et al. (2013) conducted a study in health care organizations and found the partial mediating effect of cynicism between perception of ethical climate and moral distress.

In addition to previous study, Wojtowicz et al. (2013) conducted a study in healthcare on Canadian baccalaureate nursing students and found a strong mediating effect of cynicism between ethical distress and nursing mental health. Further, the authors discussed that poor ethical climate enhance turnover intentions. However, few studies have provided a basis for further investigation of cynicism as a mediator. To fill this theoretical gap and to address previous future calls the present study investigated organizational cynicism as a mediator among perception of ethical climate, horizontal violence, authentic leadership style and turnover intention. Therefore, the current study seeks to address the following research question.

RQ4: Does organizational cynicism mediate the relationship among perception of ethical climate, horizontal violence, authentic leadership style and turnover intention in nursing staff?
Another issue that yields hostility and cynicism among employees is the lack of organizational support. For instance, Campana and Hammoud (2013) conducted a study in the United States of America (USA) and data was obtained from 75 healthcare staff. The authors found a strong relationship of horizontal violence with cynicism and discussed that those employees who are supported by their organizations are relatively less engaged in violent behaviors and negative attitudes.

Furthermore, James (2005) discussed that negative experiences related to the exchange relationship can be expected to lead to strong negative emotions rooted in cynical that the organization may be trying to take advantage of employee efforts, which may leave workers more cynical. This lack of faith and trust in the organization induces violence and negative feelings and are likely to contribute to the development of cynicism directed towards the employees and the organization. However, it is expected that perceived organizational support may moderate the relationship of horizontal violence and organizational cynicism. According to Sekaran and Bougie (2011) a moderator is a variable that has a contingent effect on the relationship of independent and dependent variables, and it may strengthen or weaken the relationship of independent and dependent variables.

Moreover, previous studies (Bateman et al., 1992; Dean et al., 1998; Reichers et al., 1997; Andersson, 1996; Andersson and Bateman, 1997; Johnson and O’Leary-Kelly, 2003) have only pointed out the issues of organizational cynicism. But, how organizational cynicism can be reduced through organizational support, the literature is still lacking (Chiaburu et al., 2013). According to Anderson (1996), when employees feel they are treated unfairly, their rights are restricted by the organization and their efforts are not valued they get frustration and inclined towards cynicism. Therefore, in the present study, perceived organizational support is taken as a moderating variable and it is expected that when employees are fairly treated, their rights properly acknowledged and their efforts valued by the organization, they will be less inclined towards horizontal violence and organizational cynicism. Consequently, the current study stimulates the following research question.
RQ5: Does perceived organizational support moderate the mediating effect of organizational cynicism between the relationship of horizontal violence and turnover intention in nursing staff?

1.4 Objectives of the Study

The present study is an endeavor to investigate empirically the following research objectives in healthcare services in Pakistan.

1. To investigate the relationship of perception of ethical climate as a predictor of organizational cynicism and turnover intention
2. To investigate the relationship of horizontal violence as a predictor of organizational cynicism and turnover intention
3. To examine the relationship of authentic leadership style as a predictor of organizational cynicism and turnover intention
4. To investigate the relationship of turnover intention as an outcome of organizational cynicism and mediating effects of organizational cynicism among perceived ethical work climates, horizontal violence, perceived authentic leadership style and turnover intention
5. To analyze moderated mediating effect of perceived organizational support on the mediating role of organizational cynicism between the relationship of horizontal violence and turnover intention

1.5 Significance of the Study

The current study is unique and has notable importance because of its theoretical and contextual significance. First, the present study is carried out to fill theoretical research gap. In previous studies, authors investigated the relationship of organizational
characteristics and perception of psychological contract violation as predictors of organizational cynicism (Abraham, 2000; Andersson, 1996; Johnson and O'Leary-Kelly, 2003; Pugh et al., 2003), few authors found perceived organizational politics and organizational injustice as predictors of organizational cynicism (Fleming and Spicer, 2003; O'Brien et al., 2004; Cartwright and Holmes, 2006).

Moreover, few authors found a lack of sincere participation in decision making processes and the absence of genuine support by management (Fleming, 2005; O'Brien et al., 2004; Wanouset al., 2000), the deficient quality of leader-member exchange (Bommer et al., 2005; Cole et al., 2006), a history of failed change attempts (Reicherset al., 1997; Wanouset al., 1994, 2000, 2004), managerial incompetence (Stanley et al., 2005) in combination with lofty salaries (Andersson and Bateman, 1997), institutionalized organizational hypocrisy (Feldman, 2000; Fleming, 2005; Goldner et al., 1977; Urbany, 2005; Valentine and Elias, 2005), and everyday workplace events and practices such as high executive compensation, restructuring, downsizing and layoffs (Abraham, 2000; Andersson, 1996; Andersson and Bateman, 1997; Bateman et al., 1992) as predictors of organizational cynicism. Furthermore, James (2005) explored the relationship of perceived organizational support, perceived organizational politics and perceived organizational justice as new antecedents in a theoretical framework of organizational cynicism. In the present study, the researcher explored the perception of ethical climate, horizontal violence and authentic leadership style as predictors and turnover intention as outcome of organizational cynicism.

Moreover, the current study addressed all possible future calls to extend the previous models on organizational cynicism. For instance, Chiaburu et al. (2013) developed an integrated model of organizational cynicism and investigated antecedents and consequences of organizational cynicism and suggested that future study should examine organizational cynicism as a mediator and buffering effect of organizational support. Furthermore, Wu et al. (2012) directed that future study should examine violent behaviors with cynical attitudes, whereas Chang et al. (2012) suggested further research should link with violent behaviors. Similarly, Hogh, Hoel and Carneiro (2011) suggested that to protect the organization against such harmful outcomes, organization need to
monitor the ethical climate, develop and evaluate rules and regulations to manage and prevent cynical attitudes. Therefore, to make this process effective there must be a discussion about the values and ethics in the organization. Similarly, Shahzad and Mahmood (2012) indicated that further study should examine the effect of situational factors like leadership style on organizational cynicism, whereas the authors suggested that culture would also be an important factor to examine cynicism at the workplace. Similarly Neves (2012) indicated that future research should examine the spillover effects of cynicism.

In prior studies, perception of ethical climate, horizontal violence and authentic leadership have not been explicitly investigated with organizational cynicism. However, few studies have been found in which their relationship has been investigated with burnout. However, this conceptualization of cynicism provided limited understanding into the phenomenon, because it was unable to respond the process of organizational cynicism and its effects on employees and organizations (Dean et al., 1998). Therefore, this study is surely favorable for the upcoming research endeavors. Furthermore, organizational cynicism has not been investigated as a mediating variable among perceived ethical climate, horizontal violence, perceived authentic leadership and turnover intention. Another theoretical contribution of this study is that perceived organizational support has not been investigated as a moderated mediating on the relationship of horizontal violence and organizational cynicism. Additionally, the current study proposed a conceptual model of organizational cynicism empirically tested in health care services and provided a revised model of organizational cynicism.

Second, the current study extends theory to a new geographical region that is characterized as a collectivist and high power distance country. A number of previous studies of organizational cynicism have been carried out in European and American contexts (Marshall, Michaels and Mulki 2007; Mulki and Jaramillo 2011). These studies were conducted in Western societies, and their findings might not be transferable to Pakistani society which is based on collectivist and high power distance values. For instance, Rubi et al. (2012) argued that the nursing profession in Pakistan is very negatively portrayed by the society and even by the media. The authors analyzed that
76% of nurses experienced physical violence and 44% experienced body injuries while 78.4% reported incidents of violence. Similarly, Somani et al. (2012) reported 80% prevalence of violence in public hospitals. The authors found that the major cause of the prevalence of violence in health care is the negative image of nurses in Pakistani society. Finally, the present study is important to foster the ongoing debate on organizational cynicism and to address the aforementioned issues in nursing profession of Punjab, Pakistan.

1.6 Scope of the Study

The present study is an attempt to cover a wide range of issues related to organizational cynicism in nursing staff of Punjab, Pakistan. The total population of Punjab province of Pakistan is dispersed into 36 Districts. In all 36 districts, 33 district headquarters are operating their services. Moreover, Mumtaz et al. (2013) conducted a study in healthcare Punjab, Pakistan and argued that previous studies highlighted the existence of organizational cynicism specifically in nursing staff as compared to other stakeholders of healthcare services of Punjab, Pakistan. Therefore, the researcher specifically attempted to investigate the issue of organizational cynicism in nursing staff. According to Somani and Khawaja (2012) nurses are facing serious issues related to employee attitude not only in Pakistan, also in all over the world. Therefore, the scope of the study is not limited to the nursing staff of Pakistan, the findings of the current study can be generalized to other countries as well.

Theoretically, few predictors of organizational cynicism have been frequently investigated in different work settings, for example psychological contract violation, perception of organizational politics, perception of organizational justice, participative decision making, person-organization fit, transformational leadership and leader-member exchange (Muniret et al., 2014). However the majority of the studies have a contextual contribution. In this endeavor, it is intended to accommodate all those possible factors
(perception of ethical climate, horizontal violence and perceived authentic leadership) which strongly predict organizational cynicism and turnover intention.

1.7 Definitions of the Key Terms

1.7.1 Definition of Organizational cynicism

Reichers et al. (1997) emphasized that cynicism could be defined as the reaction towards series of unfavourable experiences and also the lack of confidence in their leaders. Furthermore, cynicism is defined as “an attitude of contempt, frustration and distrust toward an object or multiple objects, susceptible to change by exposure to factors in the environment” (Andersson, 1996: 1396). This definition explicitly and considerably broadens the range of cynicism by incorporating all the effective constituents of cynical attitudes.

1.7.2 Definition of Horizontal Violence

The term “horizontal violence” is used interchangeably with bullying in the literature. Horizontal violence can be viewed as “overt and covert, non-physical hostility such as criticism, sabotage, undermining, infighting and bickering”(Duffy, 1995; 9). Additionally, Hutchinson et al. (2005: 331) defined as “collection of repeated acts, where one or more individuals engage, over time, with the intention to harm others and create a hostile work environment”. Furthermore, Cassirer et al. (2002) used descriptive terms similar to those used for bullying in their discussion of and include words such as “yelling, belittling, swearing, ignoring and dismissing” to describe the horizontal
violence. In the present study, the definition of Hutchinson et al. (2005) is considered as the conceptual definition of horizontal violence.

### 1.7.3 Definitions of Authentic Leadership Style

According to George (2003) authentic leaders genuinely desire to serve others through their leadership, are more interested in empowering the people they lead to make a difference, and are guided by the qualities of the heart, passion, and compassion as they are by qualities of the mind. Luthans and Avolio (2003) noted that authentic leaders recognize and value individual differences and have the ability and motivation to identify people’s talents and help them build those talents into strengths. They are leaders who when called upon by the hand of fate will be the ones who take a stand that changes the course of history for others, be they organizations, departments or just other individuals (May et al., 2003).

According to Avolio (1999) authentic leaders can be directive or participative, and could even be authoritarian. The behavioral style per se is not what necessarily differentiates the authentic from the inauthentic leader. Authentic leaders act in accordance with deep personal values and convictions to build credibility and win the respect and trust of followers by encouraging diverse viewpoints and building networks of collaborative relationships with followers, and thereby lead in a manner that followers recognize as authentic. While the definition of perceived authentic leadership has evolved over the last few years, the present study follows Walumbwa et al. (2008: 94) current definition of perceived authentic leadership which emphasizes a transparently connected relationship between leaders and followers, encompassing a high level of self-awareness with internalized beliefs and moral values. Specifically, they write that it is a "pattern of leader behavior that draws upon and promotes both positive psychological capabilities and a positive ethical climate, to foster greater self-awareness, an internalized moral perspective, balanced processing of information and relational transparency on the part of leaders working with followers, fostering positive self-development".
1.7.4 Definitions of Perception of Ethical Climate

Martin and Cullen (2006) stated that there are various types of climates in the workplace and one of them is the ethical climate, which is defined as the established normative procedures and practices of the organizations. Moreover, Victor and Cullen (1988: 101) defined ethical climate as “prevailing perceptions of typical organizational practices and procedures that have ethical content”. Furthermore, the authors conceptualized “caring”, “law and code”, “rules”, “instrument” and “independence” as five fundamental dimensions of ethical climate. These dimensions indicate ethical behaviours because individuals are encouraged to align their behaviours with the standards and values of the organization.

1.7.5 Definitions of Perceived Organizational Support

Perceived organizational support (POS) refers to employees' “beliefs concerning the extent to which the organization values their contribution and cares about their well-being” (Eisenberger et al., 1986: 501). It also implies that an employee will receive assistance from the organization to effectively carry out one's job and handle stressful situations. According to Byrne and Hochwart (2008) when employees have low POS, then they are likely to have higher levels of cynicism toward the organization. The authors indicated that POS influences organizational cynicism, such that employees who perceive less support from their organization are more cynical toward it.

1.7.6 Definitions of Turnover Intention

Turnover intention was seen by some authors as employees leaving one particular health organization to go to another, while another group defined turnover as leaving the profession altogether (Hayes et al., 1998). Turnover is leaving behavior, which is defined
as mental or physical detachment between the employees and workplace (West et al., 2005).

1.8 Structure of the Thesis

Chapter 1 of this thesis gives the background of the research. Under this heading a general discussion is provided about the constructs including why perception of ethical climate, horizontal violence and authentic leadership style are important constructs to measure organizational cynicism and how it affects the turnover intention among nursing staff. Next section contains information about the problems associated with nursing staff and how these problems are associated with organizational cynicism. Moreover, it provides the research questions which have been derived from the problem statement. Further, this chapter discusses the objectives of the study and hypotheses. Additionally, the novelty of the current study has been reported under the heading of the significance of the study. The scope of the study and conceptual and operational definitions are also discussed in this chapter.

Chapter 2 provides the definitions of organizational cynicism and detailed discussion about the supported theories and models of organizational cynicism. This chapter discusses on what basis the researcher has integrated the predictors and outcome of organizational cynicism in his model of organizational cynicism. Furthermore, all the constructs are explicitly discussed in this chapter along with their hypotheses.

Chapter 3 provides an insight to the research methodology of this study. This chapter discusses the research paradigm and research design of the current study. Moreover, sampling design is also mentioned in this study. This chapter also gives the overview of the response rate of the questionnaire survey and provides the proper justification for the quantitative data analysis approach. Further, in this chapter measurement scale and their reliability and validity are also reported which is mentioned
in previous studies. Moreover, this chapter discusses the analytical strategy and the statistical techniques which are used to examine the research questions and hypotheses.

Chapter 4 provides insight into the data analysis of this study. At the first stage, data screening, exploratory factor analysis and confirmatory factor analysis are performed to ensure the reliability and validity of the constructs. At the second stage, multivariate normality assumptions are examined and structural equation modeling is applied to test the hypotheses. Moreover, this chapter contains information about the direct and indirect effects, moderated mediated, control variables and common method variance (CMV).

Chapter 5 contains the most important part of this dissertation. This chapter provides an insight to the discussion of the findings of the study and justification, and why the hypotheses are accepted or rejected. Further, this chapter discusses the theoretical, methodological and contextual implications of the study. It also provides the managerial level policy implications and Govt. level implications of the study. Moreover, limitations and future directions of the study are also discussed in this chapter.

![Structure of the Dissertation](image)

**Figure 1.1** Structure of the thesis
1.9 Summary

This chapter discussed the future indications and theoretical gaps in organizational cynicism and also highlighted the loop holes in nursing literature. Moreover, the researcher identified the broad problem areas in this chapter and offered research objectives and research questions to fill theoretical gaps. To achieve the research objectives, the present study also discussed the importance of perception of ethical climate, horizontal violence and authentic leadership style as predictors of organizational cynicism and turnover intention as its outcome along the moderated mediating effect of perceived organizational support in nursing staff.
instability and law and order situation prevails, horizontal violence does not produce cynical attitude among nurses while horizontal violence significantly and positively correlates with turnover intention. Furthermore, findings did not support the mediating effect of organizational cynicism between the relationship of horizontal violence and turnover intention. Similarly, the researcher found that authentic leadership style significantly reduces organizational cynicism and turnover intention among nurses. Likewise, the researcher found the partial mediating effect of organizational cynicism between the relationship of authentic leadership style and turnover intention. Therefore, if hospital management transforms its leadership style of authentic leadership, it can reduce negative attitude and turnover intention among nurses.

Moreover, the researcher attempted to investigate the moderated mediating effect of perceived organizational support on the mediating effect of organizational cynicism between the relationship of horizontal violence and turnover intention. Since the mediating role of organizational cynicism did not support the results, the researcher cannot establish the moderated mediating relationship. The researcher suggested that further study should consider the moderated mediating effect of perceived organizational support on the mediating effect of organizational cynicism between the relationship of perception of ethical climate and turnover intention.

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