The Relationship Between Positive Perceptions Toward Organizational Politics and the Work-Related Outcomes of Nurses

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ABSTRACT

Background: Organizational politics (OP) exists to varying degrees in all organizations. OP plays an important role in creating synergy between employees and the goals of the organization.

Purpose: We aimed to investigate the relationship between positive perceptions toward OP and work-related outcomes in nurses, including stress level, burnout level, turnover intention, and job satisfaction.

Methods: This descriptive, analytical study was conducted from April to June 2018 on nurses at Neyshabur University of Medical Sciences Hospitals in Neyshabur, northeastern Iran. The study included 280 nurses working in two teaching hospitals. Five standardized tools were used, including the Perception of Organizational Politics Scale, the Nursing Stress Scale, the Burnout Measure Scale, the Turnover Intention Inventory Scale, and the Minnesota Satisfaction Questionnaire.

Results: The results indicate that the participants did not hold positive perceptions toward OP. The mean Perception of Organizational Politics Scale score was 2.63 ± 0.55. Multiple linear regression analyses showed a significant and positive relationship between positive perception toward OP and job satisfaction and a negative relationship between positive perception toward OP and turnover intention, burnout, and job stress.

Conclusions: Nurses who perceive the work environment to be political will experience greater levels of stress, turnover intention, and burnout and lower levels of job satisfaction. Politics is an issue that should be handled by all levels of management. Managers should use supportive, nonpolitical workplace strategies to improve the work-related outcomes of employees.

Key Words: organizational politics, job burnout, nurses’ stress, nursing satisfaction, turnover intention.

Introduction

Organizational politics (OP) exists to varying degrees in all organizations (Faye & Long, 2014). Politics is a part of the organizational environment. OP is important because it creates a perception of the informal processes of conflicts in organizations and impact on the performance of employees (Vigoda-Gadot & Drory, 2006). OP plays an important role in promoting synergy between employees and organizational goals (Sparrow & Gaston, 1996). Moreover, positive OP may lead to competitive advantage, especially in the presence of appropriately politically skilled employees. A politically skilled management may lead to the successful management of organizational environments that are under stress and may also foster feelings of confidence, trust, and sincerity (Drory & Vigoda-Gadot, 2010). OP may be functional or dysfunctional depending on the workplace circumstances (Cropanzano, Howes, Grandey, & Toth, 1997). OP is commonly defined as activities that are illegitimate, self-serving, and probably harmful to an organization or its employees (Rosen, Chang, Johnson, & Levy, 2009). OP is a consequence of diverse interests, competitions, conflicts, and, most importantly, the need for personal survival, power, or advancement (Cacciattolo, 2015). OP is a challenge that employees must deal with daily (Labrague et al., 2017). OP may mute the voices and opinions of staffs as well as facts and may, as a result, promote uncertainty (Vince, 2001).
individual's abilities. Responses to occupational stress in nurses may affect the physical, mental, emotional, or psychological dimensions (Gulavani & Shinde, 2014). Job burnout is the psychological response to job-related stress and affects the dimensions of fatigue, cynicism, and professional inefficacy (Rotenstein et al., 2018). Burnout is a chronic job-related disorder and an occupational hazard for healthcare professionals. Approximately 38% of healthcare professionals have chronic occupational complications such as job burnout and low health status levels, which have been shown to decrease the quality of patient care (Dolan et al., 2015). Turnover intention means thinking of resigning from one's current job and doing research to find another job (Apostel, Syrek, & Antoni, 2018). Replacing staffs is a costly process for companies in terms of conducting recruitment and training (Collins & Smith, 2006).

Job satisfaction refers to the general attitude of the person toward his or her job. Individuals with higher levels of job satisfaction hold more positive attitudes toward their profession (Robbins, 2001).

Several studies have shown OP to affect job satisfaction negatively (Atinga, Domfeh, Kayi, Abuosi, & Dzansi, 2014). OP may lead to negative perceptions and negligent behaviors such as turnover intention (Basar & Basim, 2016). Perceptions toward OP may have negative effects on emotional workplace states such as job stress (Abbas, Raja, Darr, & Bouckenooghe, 2014). Hospitals are an organization in which human resources play a key role in providing services to individuals. Nurses play an important role in these organizations.

In Iran, most nurses hold a bachelor's degree and work in public or private hospitals on a permanent, casual, or contractual basis. The entry-level salary for nurses in Iran is usually less than $1,000 per month, which is better than most other entry-level salaries for bachelor-prepared individuals.

Nursing is a stressful job, and this stress may impact the delivery and quality of healthcare negatively (Johnston, Jones, Charles, McCann, & McKee, 2013). Working in a politically charged environment may increase stress and impact the work-related outcomes of nurses. Therefore, an understanding of nurses' perceptions of OP is essential to guiding related research projects and quality initiatives. As OP may differ from country to country, this study was designed to investigate the relationship between positive perceptions toward OP and work-related outcomes of nurses including stress level, burnout level, turnover intention, and job satisfaction.

**Methods**

**Design**

This descriptive, analytical study was conducted from April to June 2018 on 280 nurses in two teaching hospitals at Neyshabur University of Medical Sciences in Neyshabur, northeastern Iran. Licensed registered nurses with at least 1 year of work experience who were a permanent, casual, or contractual employee and who consented to participate were included as participants. Three hundred questionnaires were distributed, and 280 completed questionnaires were received (response rate: 93.3%). Participants were selected using a stratified random sampling technique based on the number of nurses in the hospitals and wards.

**Instruments**

A paper-based, self-report questionnaire with six sections was used to collect the study data.

**Section 1**

This section includes demographic information, including age, gender, institution, ward, level of education, and work experience.

**Section 2**

The main tool in this study was the 12-item version of Perceptions of Organizational Politics Scale (POPS) by Ferris, Adams, Kolodinsky, Hochwarter, and Ammeter (2002). The tool was designed to measure three aspects of OP: “general political behavior” (Items 1 and 2), “go along to get ahead” (Items 3–7), and “pay and promotion policies” (Items 8–12). The participants were asked to give their opinion on each item using a 5-point Likert scale ranging from strongly disagree (1) to strongly agree (5). A reverse code was used for the seven negative items on the scale. A higher total score was associated with a more positive perception toward OP. The questionnaire earned a Cronbach's alpha of .79 in a previous study (Ferris et al., 2002) and earned a Cronbach's alpha of .83 in this study.

**Section 3**

The Nursing Stress Scale was used to assess the perceived stress of the participants (Gray-Toft & Anderson, 1981). This tool consists of 34 items that describe stressful workplace situations for nurses and is scored using a Likert-type scale (1 = never, 2 = occasionally, 3 = frequently, and 4 = very frequently), with a higher total score associated with a higher level of stress.

**Section 4**

The 10-item version of the Burnout Measure Scale (Malach-Pines, 2005) was used to measure job burnout. This scale uses a 7-point Likert scale ranging from 1 = never to 7 = always, with a higher mean score reflecting a higher level of burnout.

**Section 5**

Turnover intention was quantified using the six-item Turnover Intention Inventory Scale (Bothma & Roodt, 2013), which was developed to measure turnover intention using a 5-point Likert scale ranging from 1 = never to 5 = always. Two of the items on this scale were reverse coded. A higher mean score on this scale is associated with higher turnover intention.

**Section 6**

The job satisfaction of the participants was measured using the 20-item version of the Minnesota Satisfaction Questionnaire (Weiss, Dawis, England, & Lofquist, 1977), which was
developed to measure job satisfaction using a 5-point Likert scale ranging from 1 = very dissatisfied to 5 = very satisfied. A higher mean score on this scale is associated with a higher level of job satisfaction.

The content validities of these five questionnaires were assessed. Eight nursing school faculty members reviewed the cultural perspectives of all the items on the translated questionnaires. Relevancy, clarity, and comprehensiveness were assessed for the content validity of each questionnaire using the item content validity index, scale content validity index, and comprehensiveness index. The content validity ratios for all of the items were greater than .8.

Statistical Analysis
Data analysis was performed using SPSS Version 16.0 for Windows (SPSS, Inc., Chicago, IL, USA). Descriptive statistics were used to describe the demographic and clinical characteristics of the participants by calculating frequencies, mean scores, and standard deviations. For data analysis, independent t test, linear regression, and multiple comparisons were used. P values less than .05 were considered statistically significant in all of the statistical analyses.

Ethical Considerations
This study was approved by the ethics committee of Neyshabur University of Medical Sciences (Ethical Approval Number: IR.NUMS.REC.1396.17), which also issued an official letter to the hospitals to obtain their permission and cooperation for the study. Verbal consent was obtained from the participants, who were assured that all of their data would be treated anonymously and kept confidential and that they could withdraw from the study at any time during the study.

Results
Two hundred eighty questionnaires were returned. Over half (57.2%) of the participants were female, and 67.8% were married. The mean (SD) age of the participants was 28.1 (5.0) years (range: 23–50 years), and their mean work experience was 4.3 ± 4.5 years. The demographic characteristics of the participants are displayed in Table 1.

The mean POPS score of the nurses was 2.63 ± 0.55 (minimum score was 1.5 and maximum score was 3.92). Item 5 earned the highest mean score (3.7 ± 1.0), with 63.0% of the participants either disagreeing or strongly disagreeing on this item. In addition, over 69% of the participants either agreed or strongly agree with Item 7, and 66.4% and 63.0% of the participants, respectively, either disagreed or strongly disagreed with Items 4 and 3. The frequency of the perceptions of the participants toward OP is displayed in Table 2, with the POPS dimensions ranked by mean score. The participants held a more positive perception of “pay and promotion policies” (2.67 ± 0.73) than either “go along to get ahead” (2.65 ± 0.58) or “general political behavior” (2.51 ± 1.09).

Multiple linear regression analyses showed a significant and positive relationship between POPS score and job satisfaction (p < .001, r = .46). The participants who held more positive perceptions toward OP had higher levels of job satisfaction. In addition, a negative relationship was found between positive perception toward OP and turnover intention (p < .001, r = -.27), burnout (p < .001, r = -.28), and job stress (p < .001, r = -.47; Table 3). A significant relationship was found between the POPS score and gender (p < .001, r = -.27). The perceptions toward OP of female participants were more positive than those of their male counterparts. In addition, a significant relationship was found between the POPS score and the number of the participants’ work shifts (p < .01, r = -.21), with those holding more positive perceptions toward OP working more work shifts per month. Multiple comparisons between the POPS score and nursing subgroups (nurses, operating room nurses, and anesthesia nurses) and wards (medical, surgical, emergency department, and operating room) showed no significant relationship (p < .47 and p < .53, respectively). No other

TABLE 1.
Sociodemographic Characteristics of the Participants (N = 280)

| Characteristic                     | n   | %   |
|-----------------------------------|-----|-----|
| Age (M and SD)                    |     |     |
| 23–28 years                       | 180 | 64.3|
| 29–34 years                       | 69  | 24.6|
| ≥ 35                              | 31  | 11.1|
| Gender                            |     |     |
| Female                            | 160 | 57.2|
| Male                              | 120 | 42.8|
| Marital status                    |     |     |
| Single                            | 90  | 32.2|
| Married                           | 190 | 67.8|
| Institution                       |     |     |
| 22 Bahman                         | 212 | 75.7|
| Hakim                             | 68  | 24.3|
| Level of education                |     |     |
| Bachelor’s degree                 | 268 | 95.7|
| Master’s degree                   | 12  | 4.3 |
| Work experience (M and SD)        |     |     |
| < 5 years                         | 208 | 75.0|
| 5–10 years                        | 40  | 14.0|
| > 10 years                        | 32  | 11.0|
| Nursing subgroup                  |     |     |
| Nurse                             | 188 | 67.1|
| Operating room nurse              | 50  | 17.8|
| Anesthesia nurse                  | 42  | 15.1|
| Ward                              |     |     |
| Medical                           | 46  | 16.4|
| Surgical                          | 64  | 22.9|
| Emergency department              | 84  | 30.0|
| Operating room                    | 86  | 30.7|
significant relationship between the POPS score and other demographic and job-related factors (such as age, marital status, or work experience) was found.

**Discussion**

The total POPS score of the participants in this study was lower than that reported in other recent studies (Danish, Humayon, Aslam, Usman, & Tariq, 2014; Daskin & Tezer, 2012; Faye & Long, 2014). The POPS score of the nurses in the study of Labrague et al. (2017) was 2.80 ± 0.59. The participants in this study held the highest positive perception of the “pay and promotion policies” dimension. These results may be explained by this study having been performed in government hospitals that follow national payment policies.

Perception of OP is a predictor of work outcomes. Perception of OP in this study was examined in terms of its relationships to job satisfaction, turnover intention, burnout, and job stress. In other related studies, perceptions of OP among nurses and nonnursing employees were found to be associated with job satisfaction, turnover intention, burnout, and job stress (Abbas et al., 2014; Cropanzano et al., 1997; Ferris et al., 2002; Labrague et al., 2017). In this study, perceiving the work environment to be political was shown to be associated with greater levels of stress, turnover intention, and burnout and a lower level of job satisfaction. More than 60% of the participants in this

### TABLE 2.
**Frequency of Perceptions of the Nurses Toward Organizational Politics**

| Item                                                                 | Agree or Strongly Agree | Disagree or Strongly Disagree |
|----------------------------------------------------------------------|-------------------------|-------------------------------|
|                                                                      | n | %   | n | %   | Mean | SD  |
| 1. People in this organization attempt to build themselves up by tearing others down. | 151 | 53.9 | 61 | 21.8 | 2.5  | 1.1 |
| 2. There has always been an influential group in this organization that no one ever crosses. | 156 | 55.7 | 67 | 23.9 | 2.5  | 1.2 |
| 3. Employees are encouraged to speak out frankly even when they are critical of well-established ideas. | 53  | 18.9 | 169 | 60.4 | 2.3  | 1.1 |
| 4. There is no place for yes-men around here: good ideas are desired even when it means disagreeing with superiors. | 28  | 10.0 | 186 | 66.4 | 2.2  | 0.8 |
| 5. If coworkers offer to lend some assistance, it is because they expect to get something out of it, not because they really care. | 40  | 14.2 | 182 | 65.0 | 3.7  | 1.0 |
| 6. People here usually do not speak up for fear of retaliation by others. | 141 | 50.4 | 103 | 36.8 | 2.6  | 1.3 |
| 7. There is a group of people in my organization who always get things their way because no one wants to challenge them. | 194 | 69.2 | 42  | 15.0 | 2.2  | 1.0 |
| 8. I have seen changes made in policies here that only serve the purposes of a few individuals, not the work unit or the organization. | 152 | 54.2 | 54  | 19.3 | 2.6  | 1.0 |
| 9. Favoritism rather than merit determines who gets ahead around here. | 172 | 61.4 | 56  | 20.0 | 2.4  | 1.0 |
| 10. Rewards come only to those who work hard in this organization. | 106 | 37.9 | 119 | 42.5 | 3.0  | 1.2 |
| 11. Since I have worked in this department, I have never seen the pay and promotion policies applied politically | 78  | 27.9 | 122 | 43.5 | 2.6  | 1.2 |
| 12. Promotions in this department generally go to top performers | 84  | 30.0 | 145 | 51.8 | 2.6  | 1.2 |

*Reversed item.

### TABLE 3.
**Linear Regression Results of the Perception of Organizational Politics Scale (Independent Variable) on Work Outcomes (Dependent Variables)**

| Work Outcome       | $R^2$ | Constant $\alpha$ | SE  | Coefficient $\beta$ | 95% CI                | $p$  |
|--------------------|-------|-------------------|-----|---------------------|-----------------------|------|
| Job satisfaction   | .219  | 2.083             | 0.060| 0.375               | [0.25, 0.49]          | < .001 |
| Job stress         | .225  | 3.466             | 0.061| -0.384              | [-0.50, -0.26]        | < .001 |
| Turnover intention | .077  | 3.743             | 0.095| -0.322              | [-0.51, -0.13]        | < .001 |
| Burnout            | .080  | 4.787             | 0.014| -0.506              | [-0.79, -0.21]        | < .001 |
study perceived favoritism as being more important than merit in determining who gets ahead in their organization. These results may indicate that, in highly politicized environments, employees feel that their efforts will not be recognized or rewarded. Politics in the work environment may lead to undesirable workplace conditions such as stress, burnout, and turnover intention. In this study, politics was found to be a better predictor of stress and satisfaction than of turnover intention and burnout (Table 3).

Organizational Politics and Work-Related Outcomes
Stress is a common problem in the workplaces, and nursing is an inherently stressful occupation. Hospital environments easily become tense because of the stresses involved with caring for patients and dealing with patient families. A positive perception toward OP may make managing these stresses and crises easier and lead to improved job performance. Implementing clear and supportive policies will make nurses more confident in stressful situations. On the other hand, punitive policies or discriminatory behaviors will increase nurses’ stress.

Job satisfaction depends on organizational expectations. Autonomy and pay are regarded as the two most important factors affecting job satisfaction. The job satisfaction of hospital nurses is closely related to organizational commitment and job stress (Lu, Zhao, & While, 2019). Supportive, non-political workplace strategies have the potential to increase job satisfaction. Promotion policies within organizations should be clear and based on merit.

In this study, the participants who held a more-positive perception toward OP had a lower level of burnout. Burnout is associated with job stress in nurses and impacts negatively on their quality of life. Moreover, the job support resources available to nurses have always been insufficient to meet their emotional demand (Wu, Zhu, Wang, Wang, & Lan, 2007). However, although burnout is related to multiple social, psychological, and environmental factors, OP is one factor that is controllable. To reduce burnout, OP should be adjusted so that the OP burden of nurses does not exceed their abilities to handle. Hospital managers should reduce OP, promote a friendly work environment, and build trust among employees.

A strong relationship was identified in this study between OP and turnover intention. One previous study did not identify a significant relationship between these two variables (Chang, Rosen, & Levy, 2009), whereas others did (Abbas et al., 2014; Daskin & Tezer, 2012; Javed, Abrar, Bashir, & Shabir, 2014; Labrague et al., 2017). When nurses hold negative perceptions toward OP, they may be encouraged to quit their job. Turnover leads to the loss of experienced nurses, which is detrimental to hospitals and decreases the quality of patient care. Moreover, the participants in this study who held more-positive perceptions toward OP worked more shifts per month than their peers. Enforcing non-politically-based compensation policies, encouraging employees to speak out frankly, and providing rewards and promotions based solely on performance may decrease the turnover intention of nurses.

In this study, the female participants held a more positive perception toward OP than their male peers. In Danish et al., no gender difference was found for perception of OP in the educational sector in Pakistan (Danish et al., 2014). In Iran, although nurses are hired by government hospitals based on their performance on recruitment tests, no standard mechanism is used to select hospital managers. Thus, promotion to management is often based on personal biases and preferences. This process may foster negative attitudes among employees toward OP and negatively affect job outcomes.

The positive and negative aspects of the perceptions of OP and the impact of the dimensions of OP on different work-related outcomes should be examined in future studies. Qualitative studies may provide richer insights into OP outcomes. Finally, the differences in perceptions of OP between management and employees should be examined and compared.

Study Limitations
The data used in this study were obtained from self-report questionnaires and thus may be affected by reporting bias. In addition, the work-related outcome levels may have been underestimated or overestimated by the participants. Furthermore, the participants were from one city in Iran only, and a national survey may yield different results. Finally, no similar studies have been conducted in Iran, so no direct comparison of results is possible.

Conclusions
Politics exists in every organization and cannot be eliminated completely. OP is not purely a negative factor for organizations, and its consequences include positive effects such as enhanced employee commitment and organization-citizen behavior. However, in overly politicized environments, employees may feel their efforts will not be recognized or rewarded. Therefore, managers should use politics as a positive tool to enhance the performance of employees. The results of this study support that holding a positive perception toward OP increases job satisfaction and decreases job stress, burnout level, and turnover intention in nurses.

Implications for Practice
The findings of this study give nursing managers and policymakers valuable information regarding the positive and negative aspects of the OP perceptions of nurses. Nursing managers and leaders should be aware of the harmful effects of politics in their organization. Politics is an issue that should be handled effectively by all levels of management. Managers should use supportive, nonpolitical workplace strategies to improve employee work-related outcomes such as job stress, burnout, turnover intention, and job satisfaction. Clear and consistent policies can foster trust between employees and managers within an organization. Supportive policies will make nurses more confident in stressful situations. On the other hand, punitive policies or discriminatory behaviors will increase nurses’
stress. Finally, organization policies related to employee promotion should be clear and merit-based.

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Author Contributions

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Data analysis and interpretation: MB, AM
Drafting of the article: AM
Critical revision of the article: AM, TA, MK

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