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Research Article

Perceived Organizational Support as the Moderator Between Psychosocial Safety Climate and Organizational Citizenship Behaviour Among Nurses

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Abstract

Background. Psychosocial Safety Climate (PSC) refers to an organizational atmosphere that is characterized by mental wellbeing and security of workers. Literature suggests PSC fosters Organizational Citizenship Behavior (OCB) particularly when employees perceive high degree of organizational support. Therefore, the present study aimed at empirically testing this proposition by investigating the moderating role of Perceived Organizational Support (POS) among nurses.

Method. The sample included 86 male and 214 female nurses recruited from different government and private hospitals of Rawalpindi and Islamabad. Psychosocial Safety Climate Scale (Hall et al., 2010), Organizational Citizenship Behavior Scale (Lee & Allen, 2002), and Survey of Perceived Organizational Support (Eisenberger et al., 1997) were used to measure constructs of the present study.

Results. PSC significantly and positively correlated with OCB and POS. PSC also had a significant main effect (positive) on OCB, and the interaction of PSC and POS on OCB was also significant, suggesting that this positive relationship between and OCB was moderated by POS.

Conclusion. Our findings indicated that POS is an important organizational resource for enhancing the OCB in employees. High degree of organizational support to nurses can influence positive effect of on their OCB.

Keywords. *Psychosocial safety climate, perceived organizational support, organizational citizenship behavior.*

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Introduction

Due to globalization and changing work environments, job demands are increasing and empirical evidence supports high job demands and low resources are major problems which influence worker health and poor work engagement (Bakker & Demerouti, 2007). Posterity of workers is the main focus in occupational health psychology, and was realized 20 years ago that it could be improved (Karasek & Theorell, 1990) by training opportunities in sheltered atmospheres by supervisors. Tuckey et al. (2012) consider such training and learning as occupational assets that fortify inherent and external motivations of workers improving their engagements and employment performances. Therefore, it is essential to study psychosocial safety climate (PSC), perceived organizational support (POS) and organizational citizenship behavior (OCB) that would create better workplace environment and employee well-being.

Safety in an organization, such as PSC is a recent construct that measures worker perceptions of responsibility shouldered by organizations to meet their needs and promote mental wellbeing and prosperity in the organization; in addition, PSC evaluates psychosocial work hazards at working environments (Hall et al., 2010). Managers support PSC by assessing risk components in organizations, use resources carefully to make reasonable demands on their workers, which is true for competitive organizations and environments (Dollard & Bakker, 2010). In addition, when workers go beyond their work demands to organizational loads, PSC reassures positive behaviors in workers (Li et al., 2015), called organizational citizenship behavior (OCB) that adapts them to changing work environment. PSC not only supports such behavior but boosts organizational productivity, help employees accomplish their objectives and thrive in their areas of expertise. Hall et al. (2010) point out PSC improves mental wellbeing and security of workers, which is achieved by authoritative management that uses methodologies, frameworks and practices in garnering these, aims (Dollard & Bakker, 2010). Moreover, if supervisory practices, administrative standards and common methods prompt stress for workers, PSC is conceptualized as "cause of causes" for organizational stress (Dollard, 2012). In Pakistani context, Shakeel (2015) reported perceived psychosocial safety climate as a positive predictor of employee performance.

Dollard and Bakker (2010) suggest PSC covers four dimensions and include senior management support and commitment, management priority, organizational communication and organizational participation (also see Idris et al., 2012 for details of these dimensions).

When efficient supervisory practices are in place, workers perceive organization as supportive, which is measured by Perceived Organizational Support (POS), and is related to well-being. Eisenberger et al. (1986) described POS in the context of worker feelings and beliefs about their worth and approval given by their organization; and that the organization cooperates, assists and supports employees. Supportive organizations breed perception of such support in employees and their future welfare. Eisenberger et al. (1997) further elaborated when POS is high workers will act in line with the ambitions of their organizations.

Well supported workers go beyond their regular workload to express their extraordinary performance or OCB. Bateman and Organ (1983) pioneered the term, and defined it as discretionary conduct of workers, not clearly or unequivocally demanded by the formal reward structure and enhances healthy and positive work environment in the organization (Organ, 1988); this conduct guides the psychosocial conditions in which execution of tasks take place, "… perceived [as] formal reward framework" (Organ, 1997).

One of the important correlates of OCB is POS, and a number of studies have demonstrated a positive relationship between the two. Many studies do find POS as an important antecedent of OCB (Jain et al., 2013; Kim et al., 2016; Mio, 2011; Miao & Kim, 2010; Neves & Eisenberger, 2012; Rhoades & Eisenberger, 2002).

Idris and Dollard (2011) explored the direct and indirect effect of PSC and its dimensions on positive and negative emotions of employees and found a positive relationship between positive emotions with support of coworkers and supervisor. Similarly Law et al. (2011) explored the relationship of PSC with supervisor support and organizational reward and found a positive relationship with both.

Based on these findings, the current research aimed to study the relationship of PSC with POS and OCB (see Dollard & Bakker, 2010; Nimran, 2011). Based on literature above, the present study predicted a positive relationship between PSC (and its dimensions) with OCB (and its subscales) and POS; and predicted that POS would strengthen the relationship between PSC and OBC.

Method
Sample

G*Power 3.0 was used for power analysis. To get a small to medium effect size (Cohen's $f2 = .06$) could be reliably assessed with a sample size of 279 ($\alpha = .05$) at power of .95 (Faul et al., 2008). To be conservative, 300 (71% female) nurses were recruited from different government and private hospitals of Rawalpindi and Islamabad through purposive sampling technique, where the age of participants ranged from 20 to 58 ($M = 28.56$, $SD = 5.96$) years, with job experiences that ranged from 1 to 23 years ($M = 4.13$, $SD = 3.46$). As per the inclusion criteria, only the full-time nurses were recruited in the sample who had an age of > 18 years with a minimum job experience of 1 year. The data were collected between August 2019 and January 2020. Details of other demographic variables are presented in Table 1.

Table 1
Demographic Characteristics of the Sample (N = 300)

Variable	f (%)
Gender	
Male	86(29)
Female	214(71)
Job Status	
Permanent	185(62)
Contractual	115(38)
Organizational structure	
Public	150(50)
Private	150(50)
Education level	
Matric	11(4)
Intermediate	76(25)
Bachelors	213(71)
Job designation	
Head Nurse	65(22)
Staff Nurse	234(78)

Instruments

Psychosocial Safety Climate (PSC-12). Hall et al. (2010) developed PSC with 12 items, divided into 4 subscales that measure management commitment, organizational communication, organizational participation and management priority. Each item is measured on a 5-point Likert scale ranging from "strongly disagree" (1) to "strongly agree" (5). The overall reliability of the scale was $\alpha = .89$ and reliabilities of management commitment ($\alpha = .91$), organizational communication ($\alpha = .76$), organizational participation ($\alpha = .80$) and management priority ($\alpha = .90$) respectively (Hall et al., 2010).

Survey of Perceived Organizational Support (SPOS). Eisenberger et al. (1986) developed SPOS, and its shortened version was used in this study; the scale contains eight items, where items 2, 3, 5 and 7 were reversed scored. Each item is rated on a 7-point Likert scale and responses ranged from "strongly disagree" (1) to "strongly agree" (7). Composite score on the scale could range from 8 to 56, and the reliability of scale was high ($\alpha = .90$) determined by Eisenberger et al. (1997).

Organizational Citizenship Behaviour Scale (OCBS). Lee and Allen (2002) developed OCBS, which consisted of 16 items, divided into two subscales (eight items each) that measured OCB targeted at individuals (OCBI), and the other that measured OCB targeted at organization (OCBO). Each item was measured on a 5-point Likert scale ranging from "Never" (1) to "Always" (5), where the composite score ranged from to 16 to 80. The reliability of OCBI ($\alpha = .83$) and OCBO ($\alpha = .88$) were similar and moderately high (Lee & Allen, 2002).

Procedure

After official permission from the hospitals, the employees were contacted individually in their respective departments and requested to participate in the study. Willing employees were briefed about the purpose of the study and provided with a booklet containing informed consent, demographic information and instruments. Assurance was provided to the participants about the confidentiality of the data and that the information will be used only for the research purpose. Finally, the participants were heartily thanked for their participation, support and cooperation.

Data Analysis

The data was analyzed by SPSS version 24 (IBM Corp. Released, 2016). The missing values (8% of the total data) were replaced through linear interpolation. Descriptive statistics, Cronbach's alpha coefficients of reliability, and Pearson correlations were computed. Furthermore, model 1 of the PROCESS macro (Hayes, 2013) for the SPSS was used for examining the moderating role of POS between PSC and OCB.

Results

Table 2 shows high reliabilities for PSC (α = .94) and its four dimensions and OCB (α = .87) an its two dimensions and acceptable reliability for POS (α = .70). All the values of skewness and kurtosis were within normal range i.e. +2 to -2 standard deviations so the data is normally distributed (George & Mallery, 2010).

Table 2

Descriptive Statistics and Reliability of Scales and Subscales

Scale/Subscale	M	SD	k	α	Range Actual	Range Potential	Sk	Ku
PSC	37.95	11.00	12	.94	12 -60	12 -60	-.45	-.82
MC	9.15	3.25	4	.83	6 -20	4 -20	-.33	-.78
OC	9.74	3.32	4	.86	5 -20	4 -20	-.29	-.84
OP	9.75	3.33	4	.87	4 -20	4 -20	-.35	-.76
MP	9.56	3.35	4	.88	4 -20	4 -20	-.34	-.81
OCB	57.56	10.85	16	.88	18 -80	16 -80	-.96	1.72
OCBI	24.24	5.56	8	.83	14 -40	8 -40	-.89	1.56
OCBO	29.65	6.27	8	.85	16 -39	8 -40	-.82	1.13
POS	25.18	4.50	8	.70	10 -55	8 -56	.26	1.78

Note. Sk = skewness; Ku = kurtosis; k = number of items; α = alpha reliability coefficient; POS = perceived organizational support; OCB = organizational citizenship behavior; PSC = psychosocial safety climate; MC = Management Commitment; OC = Organizational Communication; OP = Organizational Participation; MP = Management Priority; OCBI = OCB targeted at individuals; OCBO = OCB targeted at organization

Table 3 represents PSC and its dimensions are significantly positively related to OCB (and subscales) and POS. Table 2 also shows that significant positive relationship exists between OCB, OCBO and POS; however OCBI is not related to POS.

Table 3

Correlations among Scales and Subscales

Scale/Subscale	PSC	MC	OC	OP	MP	OCB	OCBI	OCBO	POS
PSC	-	.88**	.91**	.91**	.91**	.36**	.28**	.37* *	.49**
MC	-	-	.71**	.71**	.72**	.38* *	.31**	.35**	.42**
OC	-	-	-	.92**	.79**	.30**	.23**	.30**	.46**
OP	-	-	-	-	.78 **	.29 **	.22 **	.28 **	.44 **
MP	-	-	-	-	-	.35* *	.25* *	.37* *	.44* *
OCB	-	-	-	-	-	-	.84* *	.89* *	.20*
OCBI	-	-	-	-	-	-	-	.53 **	.09
OCBO	-	-	-	-	-	-	-	-	.26**
POS	-	-	-	-	-	-	-	-	-

Note. POS = perceived organizational support; OCB = organizational citizenship behavior; PSC = psychosocial safety climate; MC = Management Commitment; OC = Organizational Communication; OP = Organizational Participation; MP = Management Priority; OCBI = OCB targeted at individuals; OCBO = OCB targeted at organization *p< .01;**p < .001

Table 4 shows the interaction between PSC and POS was significant and added a unique variance of 2% in predicting OCB ($\Delta R^2 = .02$, ΔF (1, 296) = 9.60, p = .001) and an overall 17% of explained variance OCB ($R^2 = .17$, F (3, 296) = 17.83, $p = .001$). The conditional effects of PSC on OCB increased as the degree of POS increased.

Table 4

*Conditional Effects of PSC on OCB on levels of POS*

Predictor	B	95% CI LL	95% CI UL	ΔR^2
PSC	.27**	.19	.36	
POS	-.01	-.17	.16	
PSC × POS	.18*	.05	.31	.02**
Conditional Effects				
POS Low	.18*	.08	.28	
POS Average	.27**	.19	.36	
POS High	.36**	.25	.48	

Note. PSC = psychosocial safety climate; POS = perceived organizational support; OCB = organizational citizenship behavior.
*p < .01; **p < .001

The value of the moderator that defined Johnson-Neyman significance region was -.81 Figure 1 shows, POS moderated the relationship of PSC and OCB among nurses and strengthened the positive relationship between PSC and OCB.

Figure 1

Perceived organizational support as moderator between psychosocial safety climate and organizational citizenship behaviour
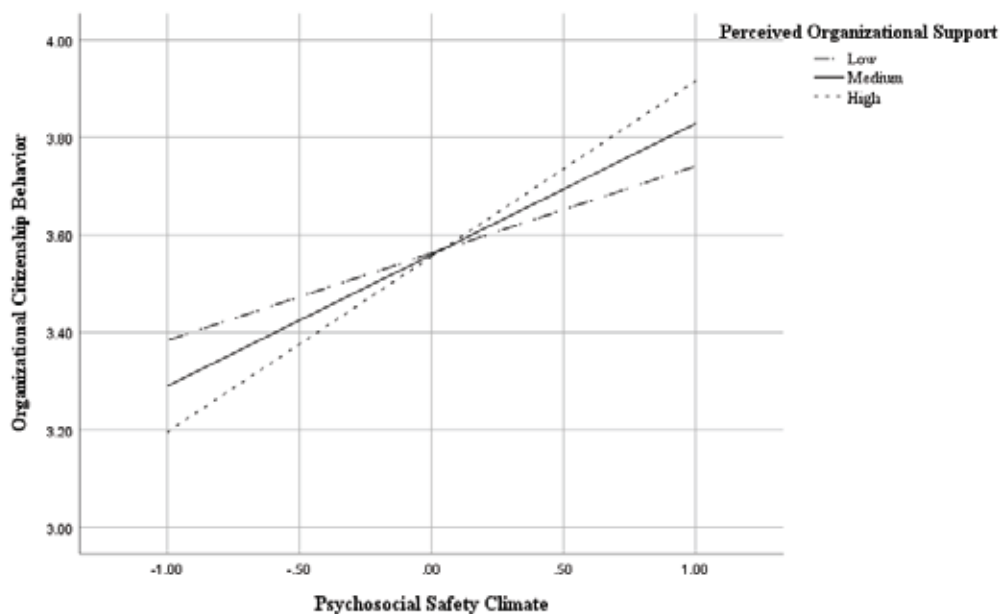
Discussion

All the measures used for the operationalization of the focal constructs of the present study demonstrated satisfactory levels of internal consistency as Cronbach's alphas of all the scales and their subscale remained ≥ .70. The reliability coefficients of the scales and their subscales in the present study are comparable to those reported by the authors of these scales. The present study revealed a positive relationship between PSC and its dimensions with OCB among nurses (Table 3); Grant et al. (2008) report if workers observe organization is looking for their prosperity they put their efforts to enhance the organizational workplace expressing OCB. Dollard and Bakker (2010) suggest PSC is more specific to the mental strength of workers than other organizational climate constructs. In addition, Bakker and Demrouti (2007) in their job demands-resources (JD-R) model show sufficient resources prompt inspiration and engagement, resulting in improvement in worker performance. Dollard and Bakker (2010) also suggest PSC is an expansion of JD-R model and high PSC prompts low demands and high resources use leading to positive results; as PSC enhances, employees get more involved in cooperative work. Workers caring and support each other in problems, and engage in OCB.

Results also revealed PSC and its dimensions were positively associated with POS among nurses (Table 3). Previous literature confirms PSC should have a positive relationship with POS (Kath et al., 2010). A supportive organization is expected to take care of the psychological as well as physical needs of its employees (Rhoades & Eisenberger, 2002). Therefore, it should include a careful and considerate regard to its employees' psychosocial safety at the workplace.

POS was positively associated with OCB in nurses and moderated the relationship between PSC and OCB such that it increased OCB among nurses (Table 4). Jebeli and Etebarian (2015), and Muhammad (2014) demonstrated significant positive relationship between POS and OCB. The present research suggests PSC and OCB relationship is positively affected by higher level of POS. When PSC of an organization increases its environment becomes stable, OCB increases, and so does work performance.

Limitations and Suggestions

First of all, use of self-report measures is the primary impediment of this research, especially in measuring OCB. The issue of common method variance has its drawback in inflating responses. To cope up the bias related to self-report measures in measuring OCB, future researchers should also get data from supervisors or colleagues about respective employees' OCB. Secondly, data were collected from the nurses in two cities of Pakistan, so its generalizability is also restricted to the nursing population. Thus, future research ought to concentrate on taking information from other occupational settings and cities too.

The findings of the present study may be compared across male doctors and female nurses as we anticipate that female nurses might have lower levels of perceived organizational support and psychosocial safety climate as compared to the male doctors. Owing to their gender and lower socioeconomic status, they might have been more vulnerable to harassment that may inculcate a perception of unsafe, hostile, and non-supportive organizational climate resulting in compromised job performance and psychological well-being.

Conclusion and Implications

The current study provides data that supports the premise that if management ensures employee safety from psychosocial hazards in the work environment it will increase employees' OCB. It further indicates that perceived organizational support invigorates the positive association between psychosocial safety climate ant the OCB. It provides base for the future researchers to further explore the relationship of PSC with other organizational variables like in-role job performance, affective organizational commitment, job satisfaction, job stress and turnover intention (Geisler et al., 2019). The study shows PSC and its four dimensions and POS are positively related to OCB. The results of this study showed PSC increases the intensity of OCB when it interacts with POS in affecting it. These findings are especially pertinent to the nursing profession because nurses are exposed an environment that is relatively poor in terms of psychosocial safety climate. They have to attend all types of patients and are very vulnerable to catch contagious diseases because our hospitals do not equip them with any safety apparels or measures.

They may also experience greater degree of harassment in hospitals, which may jeopardize their perception of a safe organizational climate. Our findings suggest that establishing a psychosocially safe climate with high degree of organizational support may be a pragmatic step towards enhancing nurses OCB.

Declarations

Ethics Approval and Consent to Participate. This study was approved by the Institutional Ethics Committee of the Department of Psychology, University of Sargodha, Sargodha (Approval Letter from the Ethics Committee is attached herewith) and all the participants granted their written informed consent to participate in this study.

Consent for Publication. All the authors consent to get this manuscript published in Foundation University Journal of Psychology.

Availability of Data and Materials. Contact corresponding author for data.

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Authors' Contributions

A. T. conceived the research idea, reviewed the literature, collected the data, and wrote the initial draft of the manuscript. I. B. contributed to study design, analysed the data, and compiled the references and the results. A. A. provided the technical assistance in data analysis and interpretation of results, proof-read the manuscript, approved the revised manuscript for submission to the journal.

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