The Relationship between Characteristics of Nurses and Organizational Commitment of Nurses in Geriatric Health Services Facility in Japan

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Abstract

Background: The quality of care in geriatric health service facilities (GHSFs) in Japan is not in a satisfied level. To improve it, it is crucial to reconsider nurses' professionalism. Our goal is to create an organizational system that allows nurses to succeed professionally. To do this, we must first discuss the relationship between nurses' characteristics and the organization.

Objectives: The aim of the present study was to determine the extent to which demographic and work-related factors are related to organizational commitment among nurses in GHSFs.

Method: A quantitative, cross-sectional designed was adopted, using a self-completion questionnaire survey. The questionnaires consisted of 49 items for job satisfaction, the three-dimensional commitment model of organizational commitment and the background information of respondents.

Results: A total of 1,189 nurses participated. Of those, 91% (n=1084) were women, and mean age was 48.2 years. Most participants were staff nurses (n=791; 66%). Significant differences in "affective commitment" (AC) scores were found for age (p<.001), overall work experience (p<.001), and work status (p<.001). For work experience in the current facility, significant differences were found in all organizational commitment scores (p<.001). The group with high job satisfaction scored significantly higher in all types of organizational commitment (p<0.001).

Conclusions: These results led to a conclusion that understanding the expectations of nurses at the workplace to adapt with the organization, and creating a work environment that clarifies contents of tasks, especially allowing for nurses to feel significance and achievement with tasks, would increase AC.

Key Words: organizational commitment, geriatric health services facility, geriatric nursing, job satisfaction

I. Introduction

Japanese people are now living longer and are well supported by an excellent health system and social welfare structures. Thus, the aged care sector faces increasing care and quality demands. Geriatric health servise facilities (GHSFs) play an important role among this sector in providing hospital care (Ibe, 2013). Therefore, geriatric nursing performance should be improved. To improve the quality of nursing care for residents of GHSFs, it is crucial to reconsider nurses' professionalism. Provision of professional nursing care is reported to result in improved patient satisfaction and positive health outcomes (Blegen, 1993; Cowin, 2002). Our goal is to create an organizational system that allows nurses to succeed professionally. To do this, we must first discuss the relationship between nurses' characteristics and the organization. Employee commitment to the employing organization has been a topic of considerable research over the past two decades (Blegen, 1993). Williams and Hazer (1986) distinguish commitment from job satisfaction in that the former is an effective response to the whole organization, whereas the latter is an effective

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response to specific aspects of the job. Interest in studying commitment has continued as it has been shown to be consistently related to employee behaviors, such as turnover, absenteeism, and professional performance (Angle and Perry, 1981; Bluedorn, 1982; Porter and Steers, 1973); to attitudinal, affective, and cognitive constructs, such as job satisfaction, job involvement, and job tension (Hall and Schneider 1972; Hrebiniak and Alutto, 1972; Porter, et al. 1974); to characteristics of employees' job, role, and task identity (Steers, 1977); and to employees' personal characteristics, such as age, gender, need for achievement, and job tenure (Angle and Perry, 1981; Hebriniak and Alutto, 1972; Steers, 1977).

After the period during which these studies were conducted, the field adopted a new perspective and conceptualized the three-dimensional commitment model of organizational commitment (OC) (Meyer and Allen, 1991), comprised by "affective commitment" (AC), "continuance commitment" (CC), and "normative commitment" (NC). According to this concept, employees with higher AC remain in their organizations because they "want to," those with strong CC remain because they "need to," and those with high NC remain because they feel they "ought to." Organizational commitment has been defined as "...a psychological link between the employee and his or her organization that makes it less likely that the employee will voluntarily leave the organization" (Allen and Meyer, 1997). It has been positively related to professional job performance, organizational citizenship behaviors, and job satisfaction (Meyer and Allen, 1997). Recently, a positive relationship between job satisfaction and organizational commitment has been reported by studies involving qualified professionals. Grinspu (2002) indicated organizational commitment among nurses is an important question, as the employment status of nurses may affect patient care at least in the following ways: continuity of care and the care giver, the knowledge that the nurse has about the patient, and the nurse's ability to influence decision making at the workplace. Wu and Norman (2006) found a positive correlation between job satisfaction and organizational commitment, indicating that student nurses who were more satisfied with nursing as a job were also more committed to health care services. Redfern, Hannan, Norman, and Martin (2002) reported a strong relationship between job satisfaction and organizational commitment in a study of health care staff in the United Kingdom. In Japan, Sawada (2013) found that interpersonal relations in the workplace and AC positively influenced well-being, whereas CC was a negative influence. Muya et al. (2014) found that AC and NC were associated with intention to continue working and with emotional exhaustion from burnout and depersonalization, respectively. Ueno and Nishikawa (2005) classified types of organizational commitment among psychiatric nurses and investigated how each type affected professional care behaviors. However, most studies involving health care tend to focus on nurses and medical personnel in acute care settings, resulting in a major gap in the literature on issues and concerns regarding health professionals in geriatric care settings. Studies of this nature and magnitude may be instrumental in helping administrators to better meet the needs of geriatric long-term care nurses employed in their organizations, with possible implications for service delivery. Therefore, this study focused on the predictive effects of job satisfaction and characteristics on organizational commitment among registered and licensed practical nurses in GHSFs in Japan.

II . Methods

1. Participants

The study was conducted involving 1000 GHSFs across Japan. After obtaining agreement from the organizations involved, questionnaires were distributed by nursing directors to each individual employee who met the study criteria. Written guidelines were given to the administrators of the questionnaire to assure that each nurse received the same directions and information. After the questionnaire was completed, the nurse mailed the questionnaire in a sealed envelope to assure anonymity. The information provided by the participants was completely anonymous and no names or identifying numbers were collected on any of the instruments.

2. Measures

A quantitative, cross-sectional design was adopted, using a self-completion questionnaire survey. The questionnaires were divided into three parts. Part one consisted of the subjects' background information. The following demographic data were collected: age, gender, marital status, overall work experience, job positon (nurse director, nurse manager, or staff), academic background (associate degree, nursing diploma, junior college diploma, or university/graduate degree), work experience in the current facility, and employment type (full-time or part-time). Part two contained 25 items to determine job satisfaction, and

part three contained 18 items concerning organizational commitment. Organizational commitment(OC) was measured by 18-item index called the Organizational Commitment Questionnaire (OCQ), developed by Meyer, Allen, and Smith (1993), with an estimated Cronbach's alpha of .85 (Feather and Rauter, 2004) (Table 1). The Japanese version of the OCQ was translated by Takahashi (2003) and converted to a revised 18-item Japanese scale with an estimated Cronbach's alpha of .70-.85. Participants responded to the items using a 5-point Likert scale ranging from "fully agree" to "fully disagree."

Job satisfaction was measured by a 23-item index called Job Satisfaction among Nurses, developed by Stamp (1978), with an estimated Cronbach's alpha of .85. The Japanese version of the scale was translated by Ozaki and Tadamasa (1988), then partly modified by Yamashita (1995) and converted to a revised 25-item Japanese scale. The Japanese version of the scale is measured from the aspect "autonomy" "management" "human relations" "doctor-nurse relationship" "commitment to nursing professionals" "promotion / self-growth" "guarantee of status". Cronbach's alpha for these items was found to be reliable, at .81. Participants responded to the items using a 5-point Likert scale ranging from "fully agree" to "fully disagree."

Table 1 Organizational Commitment

- 1. I would be very happy to spend the rest of my career with this organization.
- 2. I really feel as if this organization's problems are my own.
- AC 3. I do not feel a strong sense of belonging to my organization. (R)
 - 4. I do not feel emotionally attached to this organization. (R)
 - 5. I do not feel like part of the family at my organization. (R)
 - 6. This organization has a great deal of personal meaning for me.
 - 7. Right now, staying with my organization is a matter of necessity as much as desire.
 - 8. It would be very hard for me to leave my organization right now, even if I wanted to.
 - 9. Too much of my life would be disrupted if I decided I wanted to leave my organization now.
- CC 10. I feel that I have too few options to consider leaving this organization.
 - 11. If I had not already put so much of myself into this organization, I might consider working elsewhere.
 - 12. One of this few negative consequences leaving this organization would be the scarcity of available alternatives.
 - 13. I do not feel any obligation to remain with my current employer. (R)
 - 14. Even if it were to my advantage. I do not feel it would be right to leave my organization now.
- $_{
 m NC}$ 15. I would feel guilty if I left my organization now.
 - 16. This organization deserves my loyalty.
 - 17. I would not leave my organization right now because I have a sense of obligation to the people in it.
 - 18. I owe a great deal to my organization.

AC; Affective Commitment, NC; Normative Commitment, CC; Continuance Commitment (R) = reverse scoring

3. Data analysis

All statistical analyses were performed using IBM [®] SPSS [®] Statistics 22.0 for Windows. Categorical data were described using frequencies and percentages. Mean values and standard deviations were used to describe continuous data. Demographic comparisons based on organizational commitment were analyzed using an independent t-test, and multiple comparison was performed using a multi-factor analysis of variance (ANOVA) followed by the Bonferroni correction. Significant level (α) adjusted by dividing 5% by the total number of pairwise comparisons. (α =5%/6=0.0083)

4. Ethical approval

This study was approved by the Ethics Committee of Kyoto University Graduate School and Faculty of Medicine. The questionnaires included the researchers' contact details, and collected information was voluntary and anonymous.

III. Results

1. Demographic characteristics

A total of 1,189 nurses participated. Of those, 91% (n=1,084) were women, and 75% (n=890) were married. Their mean age was 48.2 years (range: 22-75 years). Regarding professional work experience, 65% (n=776) had over 20 years of nursing experience (range <1-55 years, mean 23.1 years, SD 10.5 years). Their academic backgrounds included associate degrees (n=651; 55%),

nursing diplomas (n=483; 41%), junior college diplomas (n=27; 2%), and university or graduate school degrees (n=28; 2%). Most participants were staff nurses (n=791; 66%). We divided job satisfaction scores into high and low groups based on a mean value cutoff, with 52% (n=622) in the high group and 48% (n=567) in the low group (Table 2).

2. Organizational commitment

The mean score of the total of the three commitment subscales (AC, NC, and CC) among nurses was 60 (SD 52-67). The Cronbach's alpha coefficient was .81 for AC and NC, and .76 for CC (Table 3).

3.3 Differences among demographic characteristics in organizational commitment

Table 2 Demoraphic characteristics of nurses (n=1189)

Demoraphic variable	n	%
Gender		
Male	105	9
Female	1084	91
Marital status		
Single	299	25
Married	890	75
Age range, years, mean (SD)	48.2(9.4)	
Under 39	127	11
40-49	502	42
Over 50	560	47
Overall work experience as nurse, years, mean (SD)	23.1(10.5)	
Under 9	129	11
10 ~ 19	284	24
Over 20	776	65
Academic background		
Associate degree	651	55
Nursing diproma	483	41
Junior college dipromas	27	2
University or graduate schol degrees	28	2
Work experience in current facility, years, mean (SD)	8.2(6.3)	
Under 4	490	41
5~9	268	23
10~19	334	28
Over 20	97	8
Job position		
Staff	791	66
Nurse manager	330	28
Derector of nursing	68	6
Employment types		
Full-time	1057	89
Part-time	132	11
Job satisfacton, mean (SD)	78.7(10.5)	
High	622	52
Low	567	48

Table 3 $\,$ Organizational Commitment Score and Cronbach' α (n=1189)

Variables	AC	NC	CC
Mean	20.51	17.42	16.98
Standard deviation	3.64	4.73	3.78
Maximum value	30	30	28
Minimum value	6	6	6
Cronbach'α	0.81	0.76	0.81

AC; Affective Commitment, NC; Normative Commitment, CC; Continuance Commitment

Significant differences in AC scores were found for age (p<.001), overall work experience (p<.001), and work status (p<.001), meaning that increases in age and overall work experience and job title result in high AC. For work experience in the current facility, significant differences were found in all organizational commitment scores (p<.001). This suggests that as work experience in a facility increases, all organizational commitment scores also increase. The group with high job satisfaction scored significantly higher in all types of organizational commitment (p<0.001), showing that increased job satisfaction relation to all organizational commitment scores (OCS) (Table 4).

IV. Discussion

1. Attributes

Ninety percent of participants were female, and 90% of participants were 40 years or older, while 50% were certified nursing assistants. Though 90% of participants were 40 years or older, 64% had nine years or less at the present workplace; and thus, many of them likely changed their jobs. These results are consistent with the present nursing jobs at GHSFs (Japanese Nursing Association 2015), and the results of this study can be generalized.

Table 4 Demographic comparison based on organizational commitment

		AC		NC		CC	
	n	Mean	SD	Mean	SD	Mean	SD
Gender							
Male	105	21.16	3.24	19.05 *	4.74	17.66	3.69
Female	1084	20.44	3.67	17.27	4.7	16.92	3.79
Marital status							
Single	299	19.88	3.54	16.91	4.59	16.53	3.95
Married	890	20.71 *	3.65	17.61	4.77	17.13	3.72
Age range, years, mean (±SD)							
Under 39	127	ן 19.47	3.51	17.26	4.73	16.71	3.56
40-49	502	20.12 7 *	3.66	17.36	4.93	16.89	3.82
Over 50	560	21.08]*]	3.57	17.52	4.56	17.13	3.81
Overall work experience, years,							
Under 9	129	19.69	3.39	17.01	4.97	16.57	3.56
10~19	284	ן 19.71 *	3.34	17.05	4.46	16.61	3.55
Over 20	776	_{20.93}]*]	3.72	17.63	4.78	17.19	3.89
Academic background							
Associate degree	651	20.53	3.61	17.45	4.81	16.9	3.81
Diploma in nursing	483	20.46	3.71	17.39	4.85	17.07	3.72
Junior college graduate	27	20.22	3.19	16.96	5.29	16.39	4.41
University or graduate university	28	20.89	4.02	17.85	5.26	17.14	4.01
Work experience in current facility, years							
Under 4	490	ר ך 19.68	3.71	ן ך 16.42	3.81	16.42 7	3.81
5 ~ 9	268	20.62 * *	3.21	17.38	4.54	16.71	3.99
10~19	334	21.13	3.79	18.31 *	4.47	17.44 * *	3.51
Over 20	97	21.18	2.84	19.59	4.76	19.01	3.18
Job Position							
Staff	791	ך ך 19.81	3.55	ר 16.84	4.69	ן 16.61	3.78
Nurse manager	330	21.67 * *	3.46	18.32 * *	4.61	17.66	3.72
Derector of nursing	68	22.95	3.08	19.91	4.44	18.01	3.51
Employment types	00	22.50	2.00	17.71		10.01	2.01
Full-time	1057	20.54	3.69	17.54	4.78	17.02	3.81
Part-time	132	20.22	3.28	16.47	419	16.65	3.61
Job satisfacton			2.20		,	- 5.00	2.01
High	622	22.26 *	2.91	19.29 *	4.26	17.96 *	3.65
Low	567	18.52	3.39	15.37	4.37	15.92	3.64

SD: Standard deviation, *; p<0.001

The independent t-test, and a multiple comparison was performed using a multiple analysis of variance (ANOVA) followed by the Bonferroni test

2. Measurement method and confidence coefficient

Cronbach's alpha of the scale used in this study was 0.81 for AC and NC and 0.76 for CC with sufficient reliability for all cases. OC of overall subjects in this study was high for AC and low for CC. This result was different from a previous study that targeted psychiatric nursing job (Ueno, 2005). AC is nurtured when the experience in the organization is consistent with the expectation and desires are satisfied. Subsequently, CC develops when much investment is made to the organization and this investment is perceived as an asset when leaving the organization. Therefore, since 64% of participants have nine of less years of work at the present workplace, investment in the organization was insufficient and CC had not developed yet.

3. Comparison of participant characteristics

In terms of sex, male participants had higher AC when they were older or when they were married. This result was similar to metanalyses (Mathiew & Zajac, 1990; Meyer et al., 2002; Brown, 1996). AC was higher when years of work as a nurse were longer. This means that nurse executive should neither be afraid of employing older nurses. In addition, AC, NC, and CC were all higher when the years at the present facility were longer. It seems that older temporary workers are more motivated and committed to their jobs than their younger colleagues. Yoshizawa and Miyaji (2009) reported that those who had changed their jobs did not change their jobs and organizations one after another. Rather, there is a tendency that the desire to stay at the same job increases with the year's people held jobs, and this tendency was more pronounced in those who had changed their jobs than those who had remained at the same job, and the desire to stay at the same job increased with educational opportunities. This indicates that people do not change jobs because of low level of commitment to the organization, and if the fit is good with the organization, emotional commitment to the organization can be increased with more ease.

When the occupational position clearly became higher, values were higher. CC was significantly lower in staff compared to other occupational positions, and there was no significant difference between head nurses and nursing directors. This can be interpreted as staff not considering occupational positions within the organization as a side bet that would be lost when leaving the organization.

Many previous studies showed that positive relationship between job satisfaction and OC (Chen, 2006; Knoop, 1995; Meng, 2012). To increase the satisfaction with the job, work situation is extremely important, especially the content of the tasks. Therefore, to increase OC, it is important to clarify the content of tasks and to create a work environment that lets workers feel significance and achievement with tasks. AC and NC are related to high performance and actions as good citizens of an organization, but CC to the organization is unrelated or has a negative relationship with these factors. Therefore, for the organization to maintain nursing jobs beneficial to the organization, AC and NC need to be increased.

V. Limitation and future research

There are some limitations that need to be addressed. First, although the relationship between OC and characteristic of nurses have clarified, the statistical causation has uncleared because of the cross-sectional study. Next, this study examined attributes that have related to OC of nursing jobs at GHSFs. However, many other influencing factors for OC such as human relationships at work and motivation likely exist. Therefore, the correlation of independent variables is not sufficiently studied, and the necessity of further analysis such as regression analysis.

VI. Conclusions

The findings indicated that attributes of nursing jobs and OC in GHSFs were as follows:

- 1. Age, years of work as a nurse, years of work at the present workplace, job position and job satisfaction are related to AC.
- 2. Years of work at the present workplace, occupational position and job satisfaction are related to NC and CC.

These results led to a conclusion that understanding the expectations of nurses at the workplace to adapt with the organization, and creating a work environment that clarifies contents of tasks, especially allowing for nurses to feel significance and achievement with tasks, would increase AC and OC.

VII. Disclosure statement

The authors declare they have no potential conflicts of interest.

VIII. Acknowledgments

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要旨

老人保健施設(老健)のケアの質の向上のためには看護師の専門職意識の再考が重要であると考える. 看護職が専門職としての力を発揮できる組織体制構築を最終的な目的とし、本研究はその第一段階として老健の看護職の属性と組織コミットメントにどのような関連があるのかを明らかにすることを目的とした. 方法は、質問紙を使用した横断的研究である. 組織コミットメントは「日本語版 3 次元組織コミットメント尺度」で測定した. 対象は、全国 10 か所の老健の看護職 1189 名であった. 結果は、老健の看護職の情緒的コミットメントと年齢、看護師としての勤務年数、現職場での勤務年数、職位、職務満足度との関連が認められた. 情動的コミットメントは組織の生産性を高めることから、組織との適合のための看護師の職場に対する期待の把握、職務内容の明確化や特に職務に意義や達成感を感じることができる職場づくりが必要であると結論づけられた.

キーワード:組織コミットメント、老人保健施設、老人看護、職務満足度