

Impact of Organizational Cynicism Program on Staff Nurses' Work Alienation and Commitment

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Abstract

Background: Organizational managers and policymakers have become more concerned about work alienation and organizational cynicism. Both organizational results and employee devotion are significantly impacted. **Aim:** The study aimed to investigate the impact of organizational cynicism program on staff nurses' work alienation and commitment. **Research design:** To accomplish this study a quasi-experimental research design was used. **Research Setting:** The study was conducted at Sohag University Hospital. **Subjects:** a convenience sample of newly staff nurses working at the previously selected setting (n=200). **Tools:** Four tools were used: (1) Personal data assessment sheet, (2) an Organizational Cynicism Scale, (3) a Work Alienation Scale, and (4) an Organizational Commitment Questionnaire. **Results:** Statistically significant positive correlation between total organizational cynicism and total work alienation. On the other hand, there was a statistically significant negative correlation between total organizational cynicism, work alienation, and total organizational commitment. **Conclusion:** Orientation program Implementation has positive effects on reducing Organizational Cynicism, Work Alienation, and improving Staff Nurses' Commitment. **Recommendations:** Organizations must have an open-door policy that gives nurses chances to verbalize their thoughts without fear. Reducing organizational cynicism, job alienation, and increasing commitment should be encouraged by strengthening autonomy, trust, respect, and support, and recognizing superior performance.

Keywords: Commitment, Organizational cynicism, program, Staff nurses & Work alienation

Introduction:

Nurses may feel negatively about their managers and institutions if they don't feel that they are receiving enough organizational support. Negatively affected nurses who are not supported can have a significant impact on excellence and the standard of patient care. Staff nurses are regarded as the backbone of healthcare facilities, and nursing administrators continue to face difficulties in retaining them (Argon, et al, 2019)

One of the most important concepts in organizational behavior that has garnered attention recently is cynicism. Currently, the definition of "cynic" is "one who offers criticism, one who enjoys challenging things, and one who discovers mistakes and imperfections." even though "disbelief," "pessimism," "skepticism," "incredulity," "insecurity," and "negation" are also synonyms as well. Also, Cynicism is an attitude of scornful or jaded negativity that can become pervasive and extreme (Kökalan, 2019).

Organizational cynicism can arise from several activities that are known to make nurses doubtful within the organization, such as miscommunication, managerial deceit about the organization's values or beliefs, and

misinterpretations. It is the result of unfavorable perceptions of the organization's adopted norms, principles, practices, and policies. Since the company's leadership treats employees unfairly and has covert agendas, it appears that they lack honesty and integrity (Mabrouk & Gab Allah, 2020).

According to Neves (2022), organizational cynicism (OC) is "an attitude emerging from a critical appraisal of one's employing organization's motives, behaviors, and values." OC is understood as a mood rather than a personality trait. According to Butt & Yazdani (2021), organizational cynicism is defined as an attitude that involves disdain for the organization because one believes it is dishonest and will always try to deceive its staff. It occurs when employees believe that their organization is insufficient in honesty. This may especially result from the perception of which expectations related to morality, justice, and honesty are despoiled. Organizational cynicism takes place when employees think that their organization is lacking integrity. Organizational cynicism is not simply the feelings that 'negative' people bring into the organization, but that these attitudes are shaped by experiences in the work context" (Ozler, et al., 2021).

There are three elements comprise organizational cynicism: The first is a negative attitude toward the organization, a propensity to criticize it and participate in critical actions, and a feeling that the organization lacks integrity. People who are skeptical about their organizations think that their actions show a lack of values like justice, integrity, and sincerity. The second element, affect, shows that cynicism is both an emotional and cognitive experience, meaning it is felt in addition to being thought. Organizational cynics may feel ashamed, disgusted, or distressed when they consider their company. Finally, behavior is a component of organizational cynicism. Those who have cynical attitudes are most likely to express harsh complaints about the organization (i.e., badmouthing) (Dean et al. 1998). Organizational cynicism is, therefore, a learned response that is affected by workplace experiences. OC is distinct from organizational commitment, trust, alienation, and job satisfaction (Reichers, et al, 2020).

Organizational cynicism affects both nurses and organizations. According to Ryan et al. (2018), a cynical nurse may suffer from a variety of mental and physical illnesses, including burning, worry, pain, alienation, hostility, mistrust of others, disappointment, frustration, suspicion, indifference, and other ailments. A decrease in morale and productivity, an increase in absenteeism, conflicts, ineffective behaviors, restricted access to human resources, wary interactions among nurses, and plans to quit are all consequences of workplace cynicism. Additionally, it undermines civic engagement and organizational commitment, leading to job unhappiness, alienation, and dissatisfaction (Abd El-Monem, et al., 2023).

"Work alienation" is a subjective psychological syndrome that develops when an individual's material, spiritual, and other needs are not met at work. Consequently, the individual begins to disengage from their work and utilizes harmful coping mechanisms (Amarat et al., 2019). In nursing, "workplace alienation" refers to social and psychological issues that cause nurses to feel cut off from their workplaces. It is a dehumanizing drug that makes the nurse appear more like an object completing a task than an active worker capable of carrying out responsibilities (Dajani & Mohamed, 2017).

Work alienation, which is characterized as disengagement or detachment from work caused by demands or expectations from coworkers, is another symptom that arises from poor work attitudes. This reduces employee-worker interaction and emphasizes the relationship between the environment and the workplace (Zhao et al., 2022). Because of helplessness, meaninglessness, and self-estrangement, it symbolizes a state of being cut off from oneself (Mohamed et al.,

2022).

Nursing staff have limited autonomy over their work activities because no one has the right to participate in the process of developing the services they supervise. This is known as powerlessness, or the belief that people have little influence over the decision-making process. A lack of understanding of the organization's purpose results in a condition of meaninglessness for nursing staff who feel their contributions to the organization are restricted and they cannot perceive their value. Nursing staff personnel who lack personal motivation and are unable to follow their desires when external variables, such as money, take precedence may experience self-estrangement (Hany et al., 2020).

Nurses, who suffer from work alienation become disinterested in their employment, find it difficult to focus entirely on their tasks, and put up little effort to succeed or advance their organization. They may also not have the same level of success as they ordinarily would (Elsaeed et al., 2023). Moreover, a feeling of alienation at work can quickly result in a reduction in the autonomy of nurses' work, their involvement in decision-making, the quality of care they deliver, and an increase in absenteeism, turnover, animosity, and isolation among nurses. According to Abd-El Monem (2023), job alienation also plays a role in poor citizenship, anti-productive conduct, work-life dissatisfaction, health issues, a lack of drive for advancement, and a decline in organizational involvement and loyalty.

Organizational commitment is the psychological bond between the organization and its nurses. It spoke of nurses who were involved with and affiliated with a specific group (Elsaeed & Aboushaheen, 2021). Moreover, nurses who exhibit organizational commitment are prepared to work productively inside the organization, have faith in its objectives and guiding values, and want to remain a part of it. It is essential to figure out whether a worker will stay with management longer and work more to achieve the organization's objective. Furthermore, it is a significant factor that lowers staff turnover and absenteeism while increasing nurses' performance, productivity, and job satisfaction at work (Amer & Atia, 2019).

Organizational commitment includes three aspects: affective, continuance, and normative. **Affective commitment** is an optimistic assessment of and psychological state of nurses regarding the organization they work in. It was generated because of a combination of views, perceptions, personal characteristics, and experiences. **Continuance commitment** is explained as contributions given to the organization and replicates the estimated expenses and benefits of continuing to be a

member of the group. A **normative commitment** is the duty to remain within an organization and develops when nurses feel a sense of obligation to the company they work for because they have a moral duty to perform their duties effectively (Amer & Atiea, 2019).

Significance of the study:

As the health sector profession that works most intimately with patients, nursing necessitates collaboration from several health staff members, effective communication, and teamwork. In this way, it fosters a sense of accountability, motivation, and fulfillment as well as an increased propensity to assist and share knowledge inside the organization (Karatepe & Ngeche, 2022). To improve job quality and patient happiness, managers, employees, and health professionals must collaborate and communicate more precisely, which is made possible by organizational cynicism (Bakal, Altuntaş, 2020; Altuntaş, 2018).

In recent years, organizational cynicism has been preventing organizations from progressing and expanding. According to several studies by Singh and Dixit (2018), Koçoğlu and Tailoring (2020), Badran and Abou Zeid (2021), Mahmoud and Abou-Shaheen (2022), and Abd El-Monem et al. (2023), it can lead to issues for nurses like low motivation and self-confidence, job discontent, low organizational loyalty, low commitment, absenteeism, and even increased negative emotion and fatigue. These aspects of the workplace might make nurses feel alone and alienated from their jobs. Socially and emotionally alienated nurses find it difficult to establish connections with supervisors and other nurses, and they do not feel like they belong (Klieb et al., 2023). So the study was done to investigate the impact of organizational cynicism program on staff nurses' work alienation and commitment

Aim of the study:

-This study aimed to investigate the impact of organizational cynicism program on staff nurses' work alienation and commitment

Research hypothesis

Organizational cynicism program has a positive effect on reducing work alienation among staff nurses and improving their commitment.

Material and Methods

Study Setting

The study was carried out at Sohag University Hospital, which contained the 250-bed affiliated with the Ministry of Health and Population. Intensive care units, surgical units, renal dialysis units, pediatric units, orthopaedic units, urology units, operating rooms, obstetrics and gynecology units, isolation units, posing centers, emergency rooms, and neonatal surgery units are examples of inpatient units.

Study Design

This study was conducted using a quasi-experimental research design. Without randomly allocating people to conditions or orders of conditions, it entails manipulating an independent variable. Among the crucial kinds are interrupted time-series designs, pretest-posttest designs, and nonequivalent group designs.

Study Sample

A convenience sample of staff nurses who were working at the previously selected setting (n=200) during the period of data collection.

Data Collection Tools:

Four tools were used for collecting data as follows:

Tool (1): Personal data assessment sheet: It was developed by the researchers and contained personal data such as age, gender, level of education, years of experience, and attendance of training program about organizational cynicism.

Tool II: Organizational Cynicism Scale: The researchers measure organizational cynicism using the Brandes et al. (1999), Kalağan and Gamze (2009), and Dean et al. (1998) scale. Effect, cognition, and action are the three components that make up the Organizational Cynicism Scale (OCS). Negative emotions like distress-anguish, anger-rage, and disgust-repulsion are reflected in the affected items. Employees' cognitive assessments of the honesty and integrity of their employer are reflected in belief items. Critical and derogatory actions linked to corporate cynicism are reflected in behavioral items. There are thirteen statements in OCS. The cognitive dimension has five assertions, the emotional dimension contains four, and the behavioral dimension contains four. The organizational cynicism scale's Cronbach's Alpha Coefficient ranged from 0.60 to 0.80.

Scoring system:

Organizational cynicism has been measured by the five-item scale of Likert of (5) Completely Agree to (1) Completely Disagree where each statement has five

options. To calculate the percent score, the total number of each item was divided by the sum of the scores for each area. The overall level of organizational cynicism was then classified as high if it exceeded 75%, moderate if it fell between 60% and 75%, and low if it was less than 60%.

Tool (III): Work Alienation Scale

This tool was generated by **Mottaz, (1981)**, which was modified by researchers based on **Punia & Berwal, (2017); Durrah, (2020); and Hashish, (2020)**. To evaluate the items of workplace alienation as experienced by staff nurses, the modified version that included 29 items was utilized. It was divided into three categories: self-estrangement (7 items), powerlessness (12 items) and meaninglessness (10 items),

Scoring system:

Responses of staff nurses were measured based on a three-point Likert Scale, which ranged from 3 = agree to 1 = disagree. Each item of workplace alienation was given an overall score, which was then transformed into a percentage with a cutoff point and a range of values from 29 to 87. If it was equal to or more than 75%, they were alienated, if the percentage was less than 75%, staff nurses were not alienated.

Tool (IV): Organizational Commitment Questionnaire:

This tool was created and constructed by **Meyer & Allen (1997)** and modified by the researchers based on **Abdel Maksoud, (2017); Badran & Abou Zeid, (2021)**. It consists of (18) items covering the three domains of commitment as follows: Affective Commitment Scale (7 items), Continuance Commitment Scale (5 items), and Normative Commitment Scale (6 items).

Scoring system:

The responses to each item were measured based on a 3-point Likert Scale ranging from agree = 3 to disagree = 1. These were scored from 3 to 1 respectively. The scores of each item were summed up and divided by the total number of items for conversion into a percentage score. If the percent score fell below 60%, it was deemed low overall organizational commitment, moderate between 60% and less than 75%, and high if it was 75% or more.

Method

Validity and Reliability

Five experts in the field of nursing administration expertise evaluated the tools to determine their face and content validity and to verify their integrity. The adjustments that were required were made in light of this change. For tools I, II, and III, the content validity was

94%, 93%, and 98%, respectively. The Cronbach's alpha coefficient test was used to assess the tools' reliability; the result was (0.897).

Pilot study

A pilot study was done on 10% of the sample of staff nurses (n=20) who were randomly chosen from the above-mentioned hospital and excluded from the subjects to identify the difficulties and problems that may appear during data collection and estimate necessary time.

Ethical considerations

Approval from the Scientific Research Ethical Nursing Committee was obtained with Ethical code (130-3-9-2023). Before starting data collection, the researchers first met the participating nurses and gave them an explanation of the study's objectives to gain their cooperation. After explaining the purpose of the study to each participating nurse, informed consent was acquired. The participants' voluntary participation in the study, the privacy of their answers, and their freedom to withdraw from the study at any moment were all ensured.

Fieldwork:

Data was collected over a period of three months from September 2023 to February 2024 within six months. Approval was acquired to conduct the study after participants were informed about its aim, and how to complete the questionnaire, and were given their verbal consent to participate. The researchers met the subjects in small groups while they were working and distributed the questionnaires. The subjects recorded their answers in the presence of the researcher to answer any questions. Each staff nurse took twenty to thirty minutes to finish filling out the questionnaires.

Implementation of the study included four phases (assessment phase, planning phase, implementation phase, and evaluation phase).

Assessment phase:

Before the orientation program was put into place, the researchers started by conducting individual interviews with each nurse, these interviews lasted 20 to 30 minutes, and the purpose of them was to investigate the impact of program implementation regarding organizational cynicism and work alienation on staff nurses' commitment. Using the nurses' answers, the orientation program score was recorded. The pre-test data collection instruments comprised information on the personal data of nurses (tools I), their organizational cynicism (tools II),

work alienation (tools III), and staff nurses' commitment (tools VI). Nurses in (morning and afternoon shifts) were given the scales.

II. Planning phase:

In response to the nurses, the goals, priorities, and expected results were defined based on the results of the preceding phase. For the nurses under study, the researchers designed three sessions.

The program

The general objective of program sessions:

At the end of the **program** sessions, the nurses were expected to reduce their organizational cynicism and work alienation which reflected positive effects on their commitment

Specific objectives of the program:

- Define organizational cynicism.
- Identify the causes of organizational cynicism.
- Enumerate types of organizational cynicism.
- Discuss the negative effects of organizational cynicism.
- Identify the work alienation meaning.
- Discuss the effects of work alienation.
- Define Organizational commitment
- Discuss Organizational commitment components.

III. Implementation phase:

- The researchers began every session by gathering input regarding the preceding one, and they concluded each one with a recap.
- From 9 a.m. to 12 p.m., three days a week, the researchers were accessible in the study settings. Following a review of the relevant literature based on an assessment of the actual needs of the nurses under study, a simplified booklet was used as supportive material and provided to nurses in Arabic. It covered all items regarding organizational cynicism, work alienation, and staff nurses' commitment.
- A variety of instructional techniques, including lectures, brainstorming sessions, small-group discussions, and visuals, in the education setting. A variety of instructional tools were employed, including flipcharts, PowerPoint, figures, and handouts.

The program's theoretical sessions were done as follows:

The first session (theoretical) began with the researchers introducing themselves, wishing the nurses happy participation in the study, and outlining the goals of the orientation program.

The following topics were reviewed in the first session: definition, causes, types, and the negative effects of

organizational cynicism.

The topics discussed in the second (theoretical) session included the work alienation meaning and the effects of work alienation.

Third session (theoretical): this course covered the Organizational commitment and Organizational commitment components.

The final phase, program evaluation (post-test): The researchers start to re-assess the instruction after one month of the program sessions as follow up. The nurses utilize the same pre-test tools in each of the studies they complete.

Statistical analysis:

The data was coded and converted into a format specifically made for computer feeding. Every entered piece of data was checked for mistakes. Version 20 of the statistical package for social sciences (SPSS) was used to evaluate the data, which were then displayed in tables and graphs. Chi-square analysis, independent sample t-test, and mean and standard deviation calculations were all carried out. Significance was assessed using the P-value at 0.05, with a P-value > 0.05 being considered statistically insignificant. P-values < 0.05 are considered statistically significant, whereas those ≤ 0.001 are considered extremely significant.

Result:

Table 1. Shows that concerning age more than three-fifths (64%) of staff nurses were less than 30 years old. Regards to gender, (87%) were female. Also, the same table revealed that more than half of staff nurses qualification (56%) has a Bachelor's degree. Concerning the experience of staff nurses, the table revealed that about (45%) of staff nurses had (10-20) years of experience.

Figure (1): Shows that 65% of the studied nurses didn't attend any training program about organizational cynicism

According to the mean score of nurses related to organizational cynicism dimensions, highly statistically significant differences and reductions were observed pre and post-orientation program implementation (**Table 2**).

Figure 3 displays that, pre- program implementation, 70% of the staff nurses had a high level of organizational cynicism, whereas, post- program implementation, 53% of them had a high level.

Table 3 shows that there were highly statistically significant difference and a reduction observed pre and post- program implementation According to the mean score of nurses related to work alienation dimensions.

Figure 4 displays that, pre- program implementation, 65% of the staff nurses had work

alienation, whereas, post the program implementation, 53% of them had work alienation.

Table 4 shows that there were highly statistically significant differences and a reduction observed pre and post- program implementation According to the mean score of nurses related to organizational commitment dimensions.

Figure 5 displays that, pre- program implementation, 55% of the staff nurses had a high level of organizational commitment, whereas, post- program implementation, 70% of them had a high level.

Table (5): Mentions the positive correlation between organizational cynicism and work alienation with a high significance with a p-value (0.000) and negatively correlates to organizational commitment with a high significance with a p-value (of 0.001)

Table (1): Personal data of the studied staff nurses (n= 200)

Personal data	No	%
Age (years)		
< 30	128	64
≥ 30	72	36
Gender		
Male	26	13
Female	174	87
Qualification		
Nursing diploma	28	14
Associate degree	36	18
Bachelor degree	112	56
Others	24	12
Years of experience		
< 10	62	31
10 – 20	90	45
≥ 20	48	24

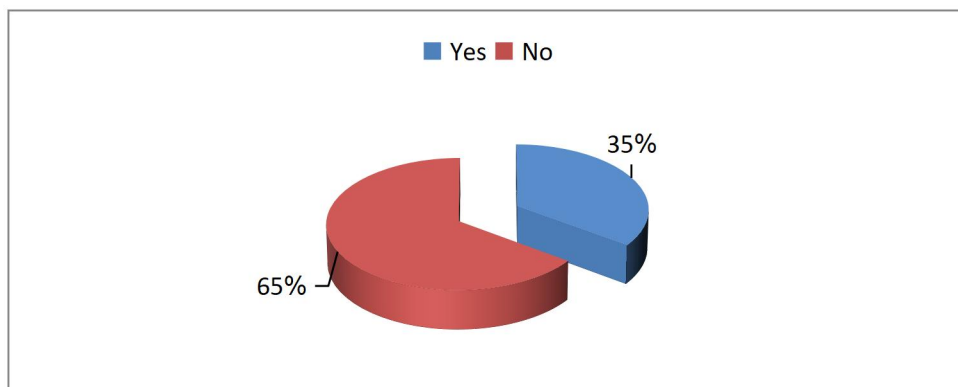


Figure (1): Attendance training program about organizational cynicism among the studied nurses (n= 200)

Table 2: Mean score differences of organizational cynicism dimensions as perceived by staff nurses pre and post- program implementation (n=200).

Organizational cynicism dimensions	Pre- program implementation Mean±SD	Post- program implementation Mean±SD	t-test	P-value
1- Cognitive Cynicism	50.55±0.22	30.22±0.88	122.4	<0.001**
2- Affective Cynicism	51.22±0.33	31.34±0.78	141.3	<0.001**
3- Behavioral Cynicism	54.33±0.34	34.26±0.64	133.2	<0.001**

**highly significant at ($p>0.01$).

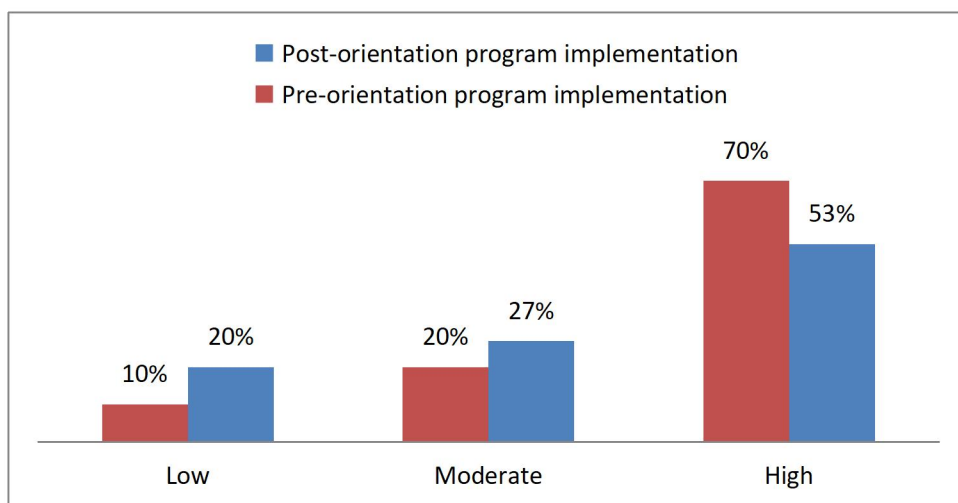


Figure (2): Total organizational cynicism as stated by staff nurses pre and post- program implementation(n=200).

Table 3: Mean score differences of work alienation dimensions as stated by staff nurses pre and post- program implementation (n=200).

Work dimensions	Pre- program implementation Mean±SD	Post program implementation Mean±SD	t-test	P-value
Self-estrangement	15.94±3.77	9.22±3.44	134.4	<0.001**
Powerlessness	22.28±5.86	11.33±5.56	131.5	<0.001**
Meaninglessness	21.38±6.56	14.55±6.74	125.3	<0.001**

**highly significant at ($p > 0.01$).

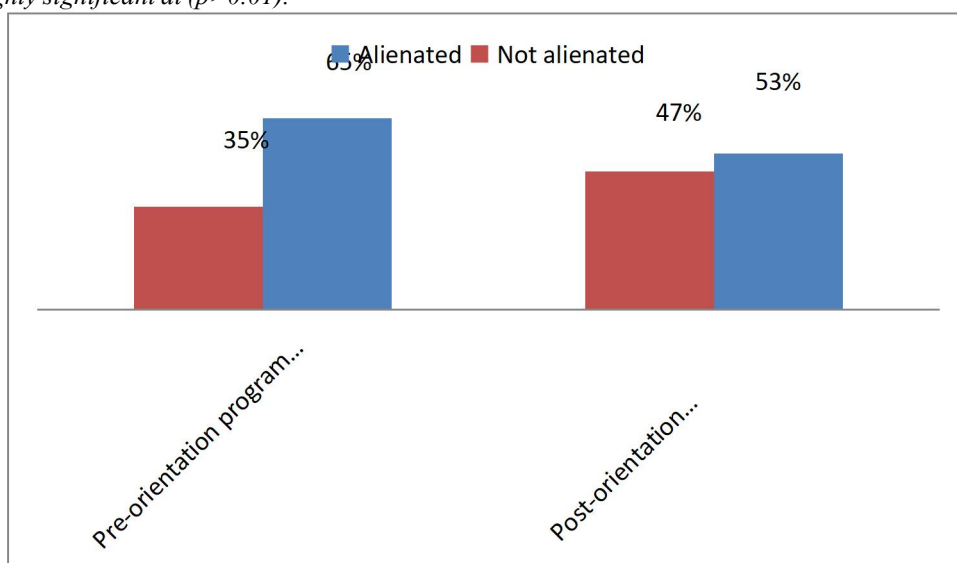


Figure (3): Total score of work alienation among the studied nurses pre and post- program implementation (n=200).

Table 4: Mean score differences of organizational commitment dimensions as stated by staff nurses pre and post- program implementation (n=200).

Organizational commitment dimensions	Pre- program implementation Mean±SD	Post- program implementation Mean±SD	t-test	P-value
1- Emotional commitment	11.67±2.44	9.67±3.42	145.4	<0.001**
2-Continuance commitment	10.22±2.72	8.44±3.73	137.3	<0.001**
3- Normative commitment	11.33±2.94	9.55±2.66	152.2	<0.001**

****highly significant at (p>0.01).**

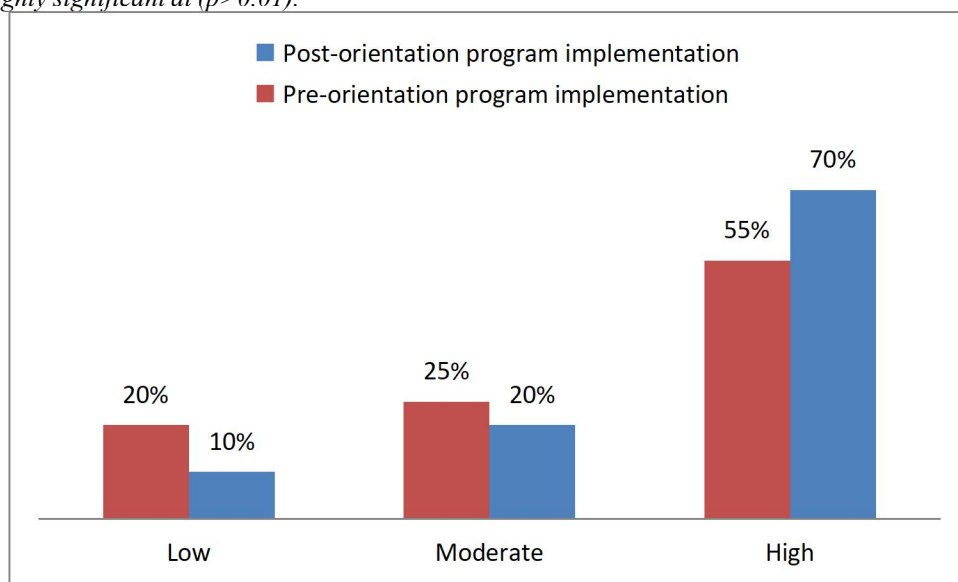


Figure (4) Total organizational commitment as presented by staff nurses pre and post-program implementation (n=200).

Table (5): Pearson correlation between organizational cynicism, work alienation, and organizational commitment among the studied nurse (n= 200)

Variables	Cynicism		Alienation	
	r	p-value	R	p-value
Cynicism	1			
Alienation	0.734	0.000**	1	
Commitment	-0.187	0.001**	0.035	0.001**

*Pearson Correlation Coefficient *highly significant at (p>0.01).*

Discussion:

Organizational cynicism today creates a roadblock and barrier that prevents the organization from improving. In order to receive effective treatment. Early detection is necessary. The following are some problems that can be reduced and fixed: low organizational commitment, high levels of

emotion, weariness, and exhaustion; low employee motivation and self-confidence; and job frustration and discontent. Major steps should be taken in this direction by organizations that wish to retain nurses who exhibit a high level of organizational commitment (Terzi, & Koçoğlu, 2020).

Organizational cynicism reduces employees' loyalty to the organization. When

cynical workers lose faith in their companies, they become less dedicated to their work and the company, which can negatively impact their behavior there. Employees who exhibit organizational cynicism are insecure, indifferent, and often frustrated, all of which negatively impact their relationships with others. In decreased productivity and elevated levels of burnout (**Stradovnik and Stare, 2018**). Hence, the study was conducted to investigate impact of organizational cynicism program on staff nurses' work alienation and commitment

The current results displayed that about two-thirds of the studied nurses didn't attend any training program about the effects of organizational cynicism. From the researchers' point of view, it confirmed the need for staff nurses to attend training programs about the effects of organizational cynicism.

The current results revealed that According to the mean score of nurses related to organizational cynicism dimensions, highly statistically significant differences and reductions were observed pre and post-program. From the researchers' point of view, it reflected the desire of the studied staff nurses to alleviate organizational cynicism and also, positive effects of orientation program implementation.

According to the current findings, most staff nurses showed high levels of organizational cynicism, with a mean score prior to the introduction of the orientation program. However, after the implementation of the program, slightly more than half of them had high levels. As the study, the nurses' cynical behavior could be a reaction to unfriendly work settings like extended work hours and a chaotic schedule. In addition, a lack of fairness, openness, and integrity leads to estrangement, frustration, insecurity, despair, and inhospitality. A sense of disrespect, the task's lack of purpose, the lack of genuine managerial support, poor management and leadership, and a lack of meaningful participation in decision-making processes are other contributing factors. **Ali & Elsayed (2022)** assessed that the mean score for organizational cynicism was (59.89 ± 1.86) , which is consistent with this conclusion. They suggested implementing measures to keep nurses from becoming organizationally cynical.

The results of this study also showed that affective cynicism, followed by cognitive and behavioral cynicism, was associated with the highest level of hospital cynicism as reported by the staff nurses. When nurses think about their hospital, they may have very negative mental attitudes that overwhelm them with feelings of stress, anxiety, anger, injustice, and melancholy. They also regularly express regret for their institution's actions and express disapproval and criticism of the rules and procedures that have been put in place in their hospital to those outside of it.

The absence of organizational policies, unfair treatment of staff nurses, a lack of training and decision-making participation, and poor communication between them could all be contributing factors to this outcome. Staff nurses experienced humiliation, injustice, worry, hopefulness, and a decreased level of job satisfaction as a result of all these organizational cynicism-related problems. This was corroborated by **Komakli (2019)**, who said that OC causes employees to lack social support and recognition within the company. This includes not being involved in decision-making, having an uneven power distribution, and communicating poorly.

However, according to **Komakli (2019)**, academics have considered OC to be a taught behavior brought on by unfairness and dissatisfaction within the organization. The employee's aggravation causes them to start having bad thoughts and having low expectations for their future dealings with the company. Organizational cynicism may therefore have a direct impact on how employees feel about the company.

The findings of study are supported by **Mahmoud and Abou-Shaheen (2022)**, who discovered that nurses at El-Mahalla Hospital indicated that affective cynicism was associated with the greatest degree of hospital cynicism. Additionally, this finding is supported by **Aly et al. (2019)**, who demonstrated that nurses exhibit the highest level of affective (emotional) organizational cynicism in comparison to behavioral and cognitive dimensions. On the other hand, **Archimi et al. (2018)** showed that affective cynicism had the lowest mean percent score of

organizational cynicism.

Additionally, **Badran & Abou Zeid (2021)** showed that affective cynicism had the lowest mean score, behavioral cynicism had the highest mean score, and cognitive cynicism came in second. However, the findings of our study were not supported by **El-Liethiy & Atalla (2021)**, who found that the nurses in the study had a moderate perception of organizational cynicism. They found that hospital staff members showed a moderate level of organizational skepticism, as did **Bacaksız et al. (2018)**.

A study at Minia University Hospital by **Mohamed et al. (2022)** revealed that half of the nurses exhibited a moderate level of organizational cynicism. Additionally, a descriptive study was carried out among nurses at a tertiary hospital in Istanbul by **Akyurt & Dogan in 2023**. The researchers observed fatigue and organizational skepticism among nurses. The majority of nurses at Tanta University Hospital also reported a low perceived level of general hospital cynicism, according to a study done at Tanta University by **Mahmoud & Abou-Shaheen (2022)** explained their findings by saying that University Hospitals have more advantages, which give nurses more opportunities for additional education and training, higher pay and profits, and opportunities for growth and promotion. Furthermore, positive relationships between leaders and nurses are advantageous to the institutions because they foster nurses' dedication to their work, sense of duty to others, and social dedication and loyalty. Similarly, **Sungura et al. (2019)** found that nurses perceived a low level of organizational cynicism.

The current results revealed that According to the mean score of staff nurses related to work alienation dimensions, highly statistically significant differences and reductions were observed pre and post-orientation program implementation. From the researchers' point of view, it reflected the program met the needs of staff nurses related to work alienation dimensions and they refuse work alienation and wanted to avoid it in their work.

The current findings showed that almost two-thirds of the staff nurses had work alienation before the implementation of the orientation program, while over half of them experienced work alienation following the program's implementation. These could be explained by the fact that they feel their contributions are inconsequential, that they lack authority in their position, that they are unable to change their work or receive feedback on it, and that the majority of choices at work are made without their input. They are feeling angry, resentful, and pointless because they were not informed about the organizational changes and their opinions were not taken into account before implementing the innovations.

These results are consistent with those of **Mahmoud & Abou-Shaheen (2022)**, who discovered that nursing staff members had a significant degree of job alienation, with a mean score of 71.75 ± 11.79 . Additionally, the present findings concur with those of **Alfuqaha et al. (2023)**, who noted that nurses experience higher levels of work alienation. The nurses, however, showed moderate levels of work alienation, according to a descriptive cross-sectional study by **Korkmaz & Torlak (2024)**. **Abd-Elrhaman et al. (2020)** also noted that nursing staff members experienced job alienation, with the powerlessness component having the highest mean score and the normlessness factor having the lowest.

According to the findings of **Özer et al. (2019)**, doctors and nurses reported a medium level of work alienation along with high levels of powerlessness and self-estrangement. On the other hand, an investigation by **Durrah (2020)** and **Valikhani and Zamani (2019)** revealed a moderate degree of occupational alienation. A moderate degree of work alienation was also observed by nurses who were exposed to organizational changes, according to **Özçelik et al. (2020)**.

The present finding revealed that there was a highly statistically significant difference and a reduction was observed in pre and post-orientation program implementation According to the mean score of nurses related to organizational commitment dimensions. From

the researchers' point of view, it reflected the success of the organizational cynicism program which met the needs of staff nurses and helped in organizational commitment.

According to the current findings, before the implementation of the program, over half of the staff nurses had a high degree of organizational commitment; however, following the implementation of the orientation program, the majority of them showed an improvement in this regard. According to these findings, the majority of nurses disagree that they are emotionally invested in their work, that they are happy and content in their current position, that they enjoy discussing their work with people outside of their workplace, and that they have more options when it comes to leaving the company. **Deliveli and Kiral (2020)** concurred with this finding, determining that teachers ranked affective commitment as the most important subdimension of organizational commitment, followed by continuation commitment and normative commitment at the lowest level.

In contrast, **Amer & Atiea (2019)** discovered that 50% of nurses in critical care units had a moderate level of organizational commitment. **Al Haroon & Al Qahtani (2022)** reported that the majority of nurses had a modest level of organizational commitment, which is also supported by these data. Additionally, according to the findings reported by **Moradi et al. (2020)**, 67.3% of nurses had a moderate level of organizational commitment. The findings of **Badran & Abou Zeid (2021)**, on the other hand, showed that 70.0% of the nurses in the study scored highly on organizational commitments. Moreover, **Kumar (2019)** found that the subjects of the study were highly committed. A substantial positive association between the organizational cynicism component and work alienation was determined.

Specifically, nursing staff who had high levels of affective, cognitive, and behavioral cynicism were found to have higher levels of self-estrangement, meaninglessness, and powerlessness—all aspects of workplace alienation. This suggests that the nursing personnel who were subjected to organizational cynicism felt more and more helpless, worthless, and alienated from

themselves. The results of **Li & Chen (2018)**, who found a connection between work alienation and organizational cynicism, are consistent with these findings. Furthermore, a statistically significant correlation between work alienation and organizational cynicism was discovered by **Sezgili and Yilmaz (2022)**. Furthermore, organizational commitment is inversely connected with work alienation and organizational cynicism, according to the current study. This indicates that increasing job alienation and organizational cynicism lead to a decrease in organizational commitment.

Cynical nurses, according to the researcher, betray their devotion to their hospitals and refuse to confide in them, which may have a detrimental effect on their commitment there. The feelings of alienation, impassivity, uncertainty, irritation, and ongoing disappointment that nurses with organizational cynicism encounter damage interpersonal connections. Organizational cynicism affects job performance, citizenship behavior, fairness, confidence, and employee turnover intentions, according to **Singh & Dixit (2018)** and **Koçoğlu & Tailoring (2020)**. Moreover, it increases fatigue, low self-esteem, disengagement from one's work without attachment, poor performance, non-compliance, a decline in organizational development efforts, and an increase in absenteeism, all of which support the results of our study.

Similarly, **Badran & Zeid (2021)** discovered a statistically significant negative correlation between nurses' organizational commitment and organizational skepticism. **Ikinci et al. (2020)** also discovered a statistically significant inverse relationship between organizational commitment and organizational skepticism. Additionally, **Kartal (2018)** and **Terzi & Szakaya (2020)** discovered statistically significant negative correlations between the variables of organizational commitment, work alienation, and organizational cynicism.

Workplace alienation and organizational cynicism reduce staff nurses' organizational commitment. Cynical and estranged staff nurses don't trust their

organization since they don't care as much about their work, which may have a detrimental effect on their conduct. Demotivation, absenteeism, lower productivity, conflict, and staff alienation are all consequences of organizational cynicism, which undermines nurses' dedication.

According to **Mohamed and Ali's (2020)** findings, the majority of staff nurses at Minia General Hospital showed "high" reactions to organizational cynicism. However, according to **Komakli (2019)**, cynicism is a taught tendency brought on by unfairness and dissatisfaction within the company. In subsequent encounters with the organization, this results in unfavorable sentiments and low expectations.

The study's findings, on the other hand, demonstrated that emotional commitment had a very high mean score. Workers who derive energy from their work, according to the researchers, are content with themselves and take pleasure in their jobs. When workers are motivated by their work, organizations gain in addition to the benefits to the individual employee. In addition to the benefits to the individual worker, organizations gain when workers are motivated by their jobs. Employees are more productive, more cooperative with their coworkers, and more developmentally advanced if a larger amount of their energy is produced by their work.

In the same vein, **Deliveli and Kiral (2020)** found that instructors rated affective commitment as the most important sub-dimension of organizational commitment, followed by continuance commitment and normative commitment, depending on their perspective. According to **Deliveli and Kiral (2020)**, affective commitment was the highest dimension, and this outcome supported their findings.

According to the results of the current survey, fewer than three-quarters of staff nurses were very committed to their organizations. Employees who are deeply committed to their organizations can devote themselves to shared organizational objectives, according to the researcher opinion. Employee

perceptions about the organization, however, may influence their degrees of organizational commitment. In the same vein, **Moradi et al. (2020)** found that 67.3% of nurses had a moderate level of company commitment. Conversely, **Khalaf and Adam's (2018)** study revealed that significantly fewer than half of the nurses in the study had a high level of organizational commitment. In contrast, **Kumar (2019)**, discovered a high commitment among studied subjects.

According to the study's findings, organizational cynicism and work alienation had a highly significant positive correlation, while organizational commitment had a highly significant negative correlation. From the perspective of the researchers, this indicates that participants may have unfavorable opinions about their organizations or believe that the organizations do not value their contributions or care about them. The present findings are consistent with **Simmons's (2017)** research, which found that cynical attitudes can also result from unfulfilled expectations and a lack of significance. For instance, feeling disrespected, having no purpose at work, not being genuinely supported by management, and not being able to participate in decision-making processes. According to the results, teachers who took part in the study were not pessimistic about their organizations, but rather somewhat workaholics.

The results of this study showed statistically significant negative relationships between organizational commitment and organizational cynicism dimensions. This demonstrates that a decline in organizational commitment follows an increase in organizational cynicism. According to the study, the results of organizational cynicism are detrimental. Furthermore, it can lead to far more detrimental outcomes when a nurse exhibits a significant degree of organizational skepticism. **Ikinci et al. (2020)** observed statistically significant negative relationships between organizational cynicism and organizational commitment dimensions, which was consistent with this finding. Similarly, **Terzi and Sazkaya's (2020)** findings indicate that doctors' perceptions of organizational

cynicism undermine organizational commitment.

Conclusion:

Based on The present study results, it was concluded that Organizational Cynicism program has positive effects on Staff Nurses' Work Alienation and their Commitment. Overall organizational cynicism and overall work alienation indicated a statistically significant positive correlation. However, there was a statistically significant negative correlation between total organizational commitment, work alienation, and cynicism among staff nurses.

Recommendations:

The results of the study led to the following recommendations:

- An open-door policy is essential for organizations to allow nurses to express their opinions without fear. Strengthening autonomy, trust, respect, support, and acknowledging exceptional achievement can all help to increase commitment while decreasing organizational cynicism and work alienation.
- Change hospital regulations so that nursing staff members can participate in the leaders' appraisal and evaluation processes.
- Create a positive work atmosphere by encouraging management, encourage satisfactory performance by providing time and freedom for thought, and foster positive relationships with employees.
- Hospital administrators and nurse supervisors participate in an ongoing training program concerning innovative techniques and strategies for managing workplace alienation and organizational cynicism.
- Organization managers have a critical role to play in reducing cynicism by comprehending the reasons behind it and how to interact with each individual.
- Nurse Managers need to be emotionally intelligent and more open-minded when dealing with their staff.
- **Further researchers:**
- Effect of Organizational cynicism on staff nurses' readiness for professional development and willingness to learn

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