

## Organizational Cynicism and Work Alienation among Staff Nurses and its Relation to their Commitment

Samah Abo-Elenein Abdallah<sup>1</sup>, Sally Ebrahim Ali<sup>2</sup> & Loly Mohamed Shawky Elbus<sup>3</sup>

<sup>1</sup>Lecturer of Nursing Administration, Faculty of Nursing, Tanta University, Egypt.

<sup>2</sup>Phd Maternity, Obstetric, and Gynecology Nursing, Al-Rayan Colleges, KSA.

<sup>3</sup>Lecturer of Nursing Administration, Faculty of Nursing, Tanta University, Egypt.

### Abstract

**Background:** For many years, organizational cynicism and work alienation have been a growing concern for policy makers and organizational managers. It has a major impact on employee commitment and organizational outcomes. **Aim:** The study aimed to evaluate organizational cynicism and work alienation levels among staff nurses as well as its relationship to organizational commitment. **Research design:** This study employed descriptive correlational design. **Research Setting:** The study was conducted in all inpatient units of El-Menshawey General Hospital. **Subjects:** This study included (268) staff nurses working in all inpatient units of El-Menshawey General Hospital. **Tools:** Three tools were used: Organizational Cynicism Scale, Work Alienation Scale, and Organizational Commitment Questionnaire. **Results:** Current study demonstrated that a high percentage of staff nurses had a high level of organizational cynicism and work alienation. Around half of them had a moderate level of work commitment. **Conclusion:** 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. **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 can be achieved by strengthening autonomy, trust, respect, support, and recognizing superior performance.

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

### Introduction

For a long time, organizational cynicism has stimulated interest of researchers. The major influence that nurses have on a variety of organizational outcomes serves as the main justification for this concern (Aly, et al., 2016). Recent literature also reveals that researchers and organizational managers are having more serious discussions regarding the detrimental consequences of organizational cynicism among nurses in the organization (Rehan, et al., 2017).

Cynicism represents one of the most essential themes in organizational behavior that has gained prominence in recent years. Presently, the term "cynic" is defined as "one who discovers mistakes and imperfections, one who enjoys challenging things, and one who offers criticism" even though synonyms for the term also include "disbelief" "pessimism" "skepticism" "incredulity" "insecurity" and "negation" (Kökalan, 2019).

According to Peter & Chima, 2018 organizational cynicism is characterized by general or attitudes of disappointment, uncertainty, pessimism, rage, mistrust of people or institutions, groups, ideologies, and social skills. In another context, organizational

cynicism is an unfavorable perception that people have about the organization they work for (Jiang, et al., 2019). Also, organizational cynicism is defined as hostile attitude toward the organization because it is thought to be dishonest and would constantly attempt to mislead its nursing staff (Butt & Yazdani, 2021). It occurs when nursing personnel feel there is a lack of integrity within their company. This could be the result of thinking that standards for morality, justice, and honesty have been crushed.

Cynicism can result from several behaviors that are known to make nurses skeptical inside the organization, including misinterpretations, inadequate communication, and managerial duplicity regarding organizational ideals or beliefs, can lead to organizational cynicism. It is the reverberation of negative opinions regarding the policies, practices, standards, and procedures that the organization has adopted. The leadership of the company seems to lack honesty and integrity since they treat workers poorly and have hidden objectives (Mabrouk & Gab Allah, 2020).

Organizational cynicism is negative and pessimistic perspective that includes three aspects: behavioural, cognitive, and affective. **Behavioural cynicism** manifests itself in negative and disparaging ways,

such as cynical interpretations of organizational activity, sardonic humour, negative non-verbal behaviour, and organizational criticism. It includes nurses criticize the policies and procedures carried out in my hospital to people outside the hospital. **Cognitive cynicism** happens when nurses think they are uninterested in the organization. It also involves the fact that the organization doesn't value their input. Finally, **Affective cynicism** entails emotional responses such as annoyance, tension, worry, and discontent. It includes unpleasant feelings like wrath, agony, shame, and disdain. It can also be experience gained through instinct or intuition in addition to reasoning. These concepts minimize the group's dedication and spirit (**Badran & Abou Zied, 2021**).

Nurses and organizations are both impacted by organizational cynicism. The cynical nurse can experience a wide range of mental and physical disorders, from burning, concern, agony, alienation, animosity, distrust of others, disappointment, frustration, suspicion, indifference, and other conditions (**Rayan, et al., 2018**). Cynicism in the workplace results in a decline in morale and productivity, a surge in absenteeism, disagreements, ineffective behaviours, a lack of access to human resources, cautious interactions among nurses, and intentions to leave. It also erodes organizational commitment and citizenship which results in job dissatisfaction, alienation, and discontent at work (**Abd El-Monem, et al., 2023**).

The subjective psychological condition known as "work alienation" arises when a person's material, spiritual, and other needs are not satisfied at work. As a result, the person starts to distance themselves from their job and employs unhealthy coping techniques (**Amarat, et al., 2019**). Workplace alienation in nursing refer to social and psychological problem that effects on nurses, making them feel isolated from their own places of employment. It is a dehumanising substance that makes the nurse seem less like an engaged employee who can do duties and more like an object finishing a task (**Dajani & Mohamed, 2017**).

Additionally, work alienation is a phenomenon that results from negative work attitudes and is defined as a disengagement or detachment from work brought on by demands or expectations from coworkers. This highlights the connection between the workplace and the environment and lowers employee-work interaction (**Zhao, et al., 2022**). It represents a state of being cut off from oneself because of powerlessness, meaninglessness, and self-estrangement (**Mohamed, et al., 2022**).

Powerlessness known as belief that people have little influence on process of decision-making, which creates situations where nursing staff has little

autonomy over their work activities since no one has the right to participate in the process of developing the services they supervise (**Hany, et al., 2020**). Nursing personnel who feel their limited contributions to the organization and who are unable to see their significance are in a state of meaninglessness, which arises from a failure to grasp the aim of the organization. Self-estrangement can occur when nursing staff members lack personal drive and are unable to act on their own desires when outside factors, like money, take precedence. The nursing staff lost the sense of desire and happiness that arises from achievement and success. It is devoid of self-expression, identity as a person and personal contentment. (**Amarat, et al., 2019; Durrah, 2020**). When a nurse experience work alienation, they lose interest in their job, are unable to devote their whole attention to their work and make little attempt to perform successfully or benefit their organization. Additionally, they might not be as successful as they otherwise would be (**Elsaeed, et al., 2023**). In addition, a sense of alienation at work can swiftly lead to a decline in the autonomy of nurses' work, their participation in decision-making, the standard of care they provide, and a rise in turnover, absenteeism, hostility, and isolation among nurses. Job alienation also contributes to low citizenship, anti-productive behavior, work-life unhappiness, health problems, failure to seek progress, and a reduction in organizational engagement and loyalty (**Abd-El Monem, 2023**).

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 for figuring 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 included three aspects are identified: affective, continuance, and normative. **Affective commitment** is optimistic and positive assessment 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** it 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

Organizational cynicism has been impeding organizations' ability to advance and grow in recent years. It can result in problems for nurses such as low motivation and self-confidence, job discontent, low organizational loyalty, low commitment, absenteeism, and even increased negative emotion and fatigue, according to numbers of studies by (Singh & Dixit, 2018); (Koçoğlu; Tailoring, 2020); (Badran & Abou Zeid, 2021); (Mahmoud & Abou-Shaheen, 2022) & (Abd El-Monem, et al., 2023) . 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. If organizations simply prioritize productivity and overlook human behaviors and sentiments, nurses will experience a sense of insecurity and grow cynical about the organization (Klieb et al., 2023). So, this study was to evaluate organizational cynicism and work alienation level among staff nurses as well as its relationship to organizational commitment.

### The study aim

This study aimed to assess organizational cynicism and work alienation levels among staff nurses as well as its relationship to organizational commitment, which covered **two objectives**:

1. To assess the perception levels of organizational cynicism, workplace alienation and organizational commitment among staff nurses.
2. To determine the relationship between organizational cynicism, work alienation and organizational commitment.

### Research questions.

1. What are the levels of perception among staff nurses toward organizational cynicism, workplace alienation and organizational commitment?
2. What is the relationship between organizational cynicism, work alienation and organizational commitment among staff nurses?

### Subjects and Method

#### Research Design

To fulfil the purpose of the study, a descriptive, correlational research design was adopted. This design is more appropriate for clarifying how staff nurses view both organizational cynicism and work

alienation (independent variable) and organizational commitment (dependent variable).

#### Setting

The study was conducted in the all-inpatient units of El-Menshawey General Hospital, Gharbia governorate which affiliation to Ministry of Health and Population which, it contains (300) bed. Inpatient units include Intensive Care Units, Surgical, Renal Dialysis Unit, Pediatric, Orthopedic, Urology, Operating Rooms, Obstetrics and Gynecology, Isolation, Poisoning center, Emergency, Medical, and Neonate Surgery Units.

#### Subjects

The subjects included a stratified proportional randomized sampling of staff nurses (no= 268) who are working in the setting mentioned above and available at collection of data. Every unit in the study was regarded as a stratum, and the sample was chosen according to the number of nurses who worked each shift. The total study sample was determined using Epi. Info. Microsoft was established by the World health Organization and Center for Disease Control and Prevention, to guarantee that it is a sufficient and representative size. Where N= population size (880), Z = confidence level at 95% (1.96), d= margin of error proportion (0.05). The total number of samples was 268 out of 880 staff nurses were included. The study excluded nurse supervisors and novice nurses with less than six months of experience.

#### Data Collection tools

Three tools were used for collecting data as following:

#### Tool (1): Organizational Cynicism Scale

Involved two parts:

**Part (1):** contains the personal characteristics such as, age, gender, level of education, marital status, years of experience, area of work and attendance of training program about organizational cynicism.

**Part (2):** Organizational Cynicism Questionnaire. It was developed by Brandes, (1997) and modified by researchers based on Erarslan, et al., (2018); Badran & Abou Zeid, (2021); Mahmoud & Abou-Shaheen, (2022) to evaluate staff nurses' level of organisational cynicism. There are 19 items on this scale which encompasses three dimensions: Affective dimension (6 items), cognitive dimension (8 items) and behavioral dimension (5 items).

#### Scoring system:

Response for each item was scored on 3 points Likert Scale ranged from (3) agree to (1) disagree, To calculate percent score, the total number of each item was divided by the sum of the scores for each area. The overall level of organisational 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 (2): Work Alienation Scale**

This tool was generated by **Mottaz, (1981)**, which was modified by researchers based on **Punia & Berwal, (2017); Durrah, (2020); Hashish, (2020)**. In order 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 (3): 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 domain of commitment as fellow; 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**

Six experts in the field of nursing administration expertise evaluated the tools to determine their face and content validity and to verify their integrity. The tools were translated into Arabic to ensure that they were understandable to all participants, Based on this revision. The adjustments that were required were made in light of this change. For tools I, II, and III, the content validity was 95.8%, 91.7%, and 100%, respectively. The Cronbach's alpha coefficient test was used to assess the tools' reliability; the result was (0.783).

**Pilot study**

Pilot study was done on 10% of the sample of staff nurses (n=26) who 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 estimating necessary time.

**Fieldwork**

Data was collected through a period of three months from November 2023 to January 2024. Approval was acquired to conduct the study after participants were informed about its aim, 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 distribute the questionnaires. The subjects recorded their answers in the presence of the researcher to in order to answer any questions. Each staff nurse took twenty to thirty minutes to finish filling out the questionnaires.

**Ethical considerations**

Approval from the Scientific Research Ethical Nursing Committee was obtained with No. 357-12-2023. Furthermore, before to starting the data collection, the researchers received formal approval from the hospital's governing organizations. 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.

**Statistical analysis**

The statistical package SPSS (version 22) is generally used for statistical analysis and Microsoft Office Excel is used for data management and graphical presentation. Number and percent were used to represent the qualitative data and mean and standard deviation were used to describe the quantitative data. Pearson coefficient was used to correlate between variables. The P-value is significant at level less than 0.05 and high significant at level less than 0.01.

**Results:****Table (1): Personal characteristics of the studied nurses (n= 268)**

Personal data	No	%
<b>Age (years)</b>		
< 30	162	60.4
≥ 30	106	39.6
Min-Max	21 – 52	
<b>Gender</b>		
Male	33	12.3
Female	235	87.7
<b>Marital status</b>		
Married	223	83.2
Unmarried	45	16.8
<b>Qualification</b>		
Nursing diploma	28	10.4
Associate degree	45	16.8
Bachelor degree	149	55.6
Others	46	17.2
<b>Years of experience</b>		
< 10	102	38.1
10 - 20	114	42.5
≥ 20	52	19.4
Min-Max	2 – 25	
<b>Training programs</b>		
Yes	218	81.3
No	50	18.7

\*Frequency distribution (Numbers and percentages).

**Table (2): Scores of organizational cynicism dimensions among the studied nurse (n= 268)**

Dimensions	No	%
<b>Affective</b>		
High	134	50.0
Moderate	101	37.7
Low	33	12.3
<b>Cognitive</b>		
High	133	49.6
Moderate	51	19.0
Low	84	31.3
<b>Behavioral</b>		
High	116	43.3
Moderate	101	37.7
Low	51	19.0

\*Frequency distribution (Numbers and percentages).

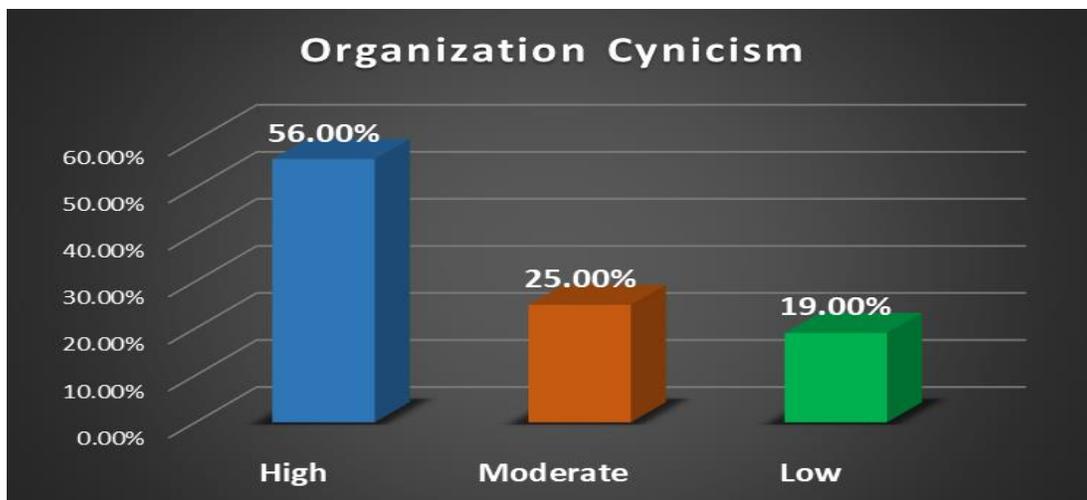


Figure (1): Total score of organizational cynicism among the studied nurse (n= 268)

Table (3): Mean and standard deviation of organizational cynicism among the studied nurse (n= 268)

Dimensions	Max Score	Mean ± SD
Affective	18	13.47±3.54
Cognitive	24	17.58±4.78
Behavioral	15	10.90±3.25
<b>Total</b>	<b>57</b>	<b>41.95±10.54</b>

\*Maximum score of dimensions (mean and standard deviation).

Table (4): Scores of work alienation dimensions among the studied nurse (n= 268).

Dimensions	No	%
<b>Self-estrangement</b>		
Alienated	172	64.2
Not alienated	96	35.8
<b>Powerlessness</b>		
Alienated	159	59.3
Not alienated	109	40.7
<b>Meaninglessness</b>		
Alienated	176	65.7
Not alienated	92	34.3

\*Frequency distribution (Numbers and percentages).

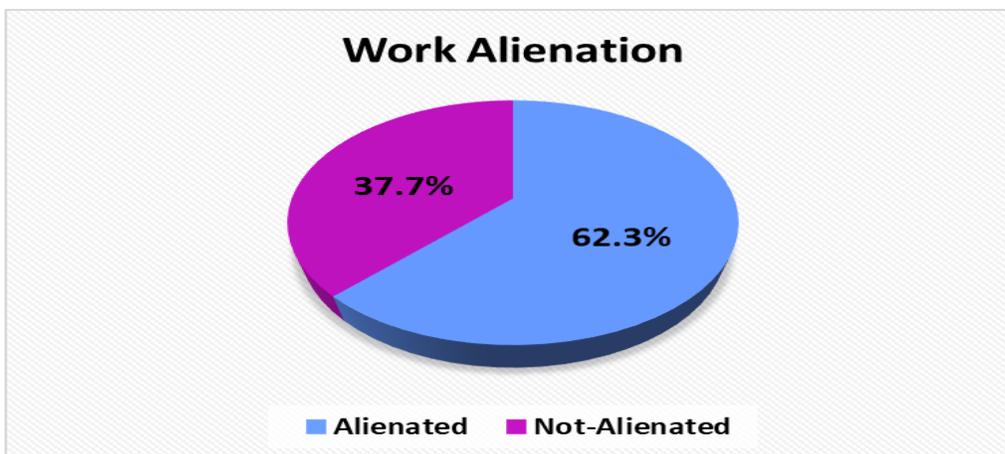


Figure (2): Total score of work alienation among the studied nurse (n= 268)

**Table (5): Mean and standard deviation of work alienation among the studied nurse (n= 268)**

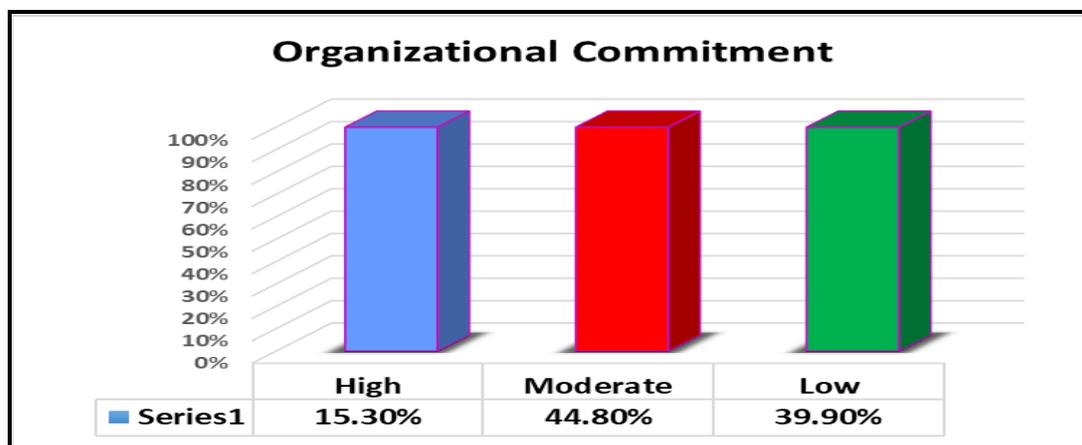
Dimensions	Max Score	Mean ± SD
Self-estrangement	21	15.94±3.77
Powerlessness	36	22.28±5.86
Meaninglessness	30	21.38±6.56
<b>Total</b>	<b>87</b>	<b>59.60±13.26</b>

\*Maximum score of dimensions (mean and standard deviation).

**Table (6): Organizational commitment among the studied nurse (n= 268)**

Commitment dimensions	No	%
<b>Affective</b>		
High	42	15.7
Moderate	77	28.7
Low	149	55.6
<b>Continuance</b>		
High	92	34.3
Moderate	48	17.9
Low	128	47.8
<b>Normative</b>		
High	68	25.4
Moderate	134	50.0
Low	66	24.6

\*Frequency distribution (Numbers and percentages).



**Figure (3): Total score of work commitment among the studied nurse (n= 268)**

**Table (7): Mean and standard deviation of organizational commitment among the studied nurse (n= 268)**

Commitment Dimensions	Max Score	Mean ± SD
Affective	21	11.99±3.28
Continuance	15	10.35±3.60
Normative	18	11.76±2.82
<b>Total</b>	<b>54</b>	<b>34.10±6.11</b>

\*Maximum score of dimensions (mean and standard deviation).

**Table (8): Pearson correlation between organizational cynicism, work alienation, and organizational commitment among the studied nurse (n= 268)**

Variables	Cynicism		Alienation	
	r	p-value	R	p-value
Cynicism	1			
Alienation	0.723	0.000**	1	
Commitment	-0.198	0.001**	0.032	0.001**

Pearson Correlation Coefficient.

\*\*highly significant at (p<0.01).

**Table (9): Matrix correlation between dimensions of organizational cynicism, work alienation, and organizational commitment among the studied nurse (n= 268)**

Variables	Affection	Cognitive	Behavior	Cynicism	Self-estrangement	Powerlessness	Meaninglessness	Alienation	Affective Commitment	Continuance	Normative
<b>Cognitive</b>	0.847 0.000**										
<b>Behavior</b>	0.506 0.000**	0.729 0.000**									
<b>Cynicism</b>	0.906 0.000**	0.962 0.000**	0.842 0.000**								
<b>Self-estrangement</b>	0.564 0.000**	0.573 0.000**	0.533 0.000**	0.613 0.000**							
<b>Powerlessness</b>	0.483 0.000**	0.553 0.000**	0.702 0.000**	0.629 0.000**	0.493 0.000**						
<b>Meaninglessness</b>	0.516 0.000**	0.503 0.000**	0.363 0.000**	0.513 0.000**	0.417 0.000**	0.559 0.000**					
<b>Alienation</b>	0.641 0.000**	0.674 0.000**	0.658 0.000**	0.723 0.000**	0.726 0.000**	0.864 0.000**	0.830 0.000**				
<b>Affective Commitment</b>	-0.536 0.000**	-0.359 0.000**	-0.204 0.001**	-0.406 0.000**	-0.465 0.000**	-0.096 0.115	-0.351 0.000**	-0.327 0.000**			
<b>Continuance</b>	-0.158 0.010*	-0.079 0.196	-0.264 0.000**	-0.007 0.000**	0.173 0.004**	0.311 0.000**	0.044 0.474	0.218 0.000**	0.207 0.001**		
<b>Normative</b>	-0.006 0.925	0.076 0.213	0.063 0.302	0.052 0.395	-0.178 0.004**	0.328 0.000**	0.120 0.050	0.174 0.004**	0.217 0.000**	-0.158 0.010**	
<b>Commitment</b>	-0.384 0.000**	-0.204 0.001**	0.075 0.222	-0.198 0.001**	-0.230 0.000**	0.283 0.000**	-0.107 0.079	0.032 0.597	0.759 0.000**	0.627 0.000**	0.485 0.000**

*Pearson Correlation Coefficient*

*Significant at (p<0.05).*

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

**Table (1):** Shows the personal data among staff nurses. It was noticed that slightly less than two thirds of nurses were less than 30 years old (60.4%). Concerning gender, most of them were female (90.4%). In addition, 83.2% of them were married. Regarding qualifications, more than half of nurses had bachelor's degree (55.6%) and the years of experience ranged from 2 to 25 years.

**Table (2):** Represents the scores of organizational cynicism dimensions among staff nurses. It was observed that half of nurses had high scores of affective cynicisms (50.0%). Regarding cognitive cynicism dimension, 49.6% of nurses had high scores. In relation to behavioral cynicism, 43.3% of nurses had high scores.

**Figure (1):** Reveals that more than half of nurses (56.0%) had high levels of organizational cynicism.

**Table (3):** Illustrates that the means and standard deviations of affective, cognitive, and behavioral dimensions of organizational cynicism were (13.47±3.54, 17.58±4.78, & 10.90±3.25) respectively. While the overall mean and standard deviation was (41.95±10.54).

**Table (4):** Represents the scores of work alienation dimensions among staff nurses. It was estimated that two thirds of nurses were alienated concerning self-estrangement dimension. In relation to powerlessness and meaninglessness dimensions, 59.3% & 65.7% of nurses were alienated respectively.

**Figure (2):** Shows total score of work alienation among the studied nurses. It represents that 62.3% of nurses had work alienation.

**Table (5):** Illustrates that the means and standard deviations of self-estrangement, powerlessness, and meaninglessness dimensions of work alienation were (15.94±3.77, 22.28±5.86, & 21.38±6.56) respectively. Regarding the overall mean and standard deviation, the same table reveals that it was (59.60±13.26).

**Table (6):** Represents the scores of organizational commitment dimensions among staff nurses. It was observed that more than half of nurses had low affective commitment (55.6%). Regarding continuance commitment, 47.8% of nurses had low scores. While half of nurses (50.0%) had moderate scores in relation to normative commitment dimension.

**Figure (3):** Shows that 44.0% of staff nurses had a moderate level of work commitment.

**Table (7):** Shows that the means and standard deviations of affective, continuance, and normative dimensions of organizational commitment were (11.99±3.28, 10.35±3.60, & 11.76±2.82) respectively. Concerning the overall mean and standard deviation, it was (34.10±6.11).

**Table (8):** Mentions positive correlation between organizational cynicism and work alienation with a

high significance whereas p-value (0.000) and negatively correlates to organizational commitment with a high significance whereas p-value (0.001).

**Table (9):** Reveals statistically significant correlations between dimensions of organizational cynicism, work alienation, and organizational commitment.

### Discussion:

Nowadays, organizational cynicism sets a block and barrier against the organization's improvement and from becoming better. For effective treatment. It needs to be identified early. Certain issues that can be minimized and resolved such as: job frustration and dissatisfaction, low organizational commitment, increased emotion, exhaustion, and fatigue, as well as low employee motivation and self-confidence. Organizations who want to retain nurses with a high level of organizational commitment ought to take major steps in this direction. The effects of organizational cynicism and work alienation on organizational commitment were examined in this study, and significant findings were accomplished with the data attained.

**Regarding organizational cynicism,** the current results displayed that above half of staff nurses had high levels of organizational cynicism with a mean score (41.95±10.54). According to the researchers, these cynical actions on the part of the nurses may be a response to hostile work environments, such as long work hours and a disorganized work schedule. Furthermore, a lack of trustworthiness, justice, and transparency results in inhospitality, annoyance, insecurity, desperation, and alienation. Other factors include ineffective management and leadership, the feeling of not being respected, the meaninglessness of the task, the absence of real management assistance, and the lack of meaningful involvement in decision-making processes. This finding is in accordance with **Ali & Elsayed, (2022)**, they estimated that organizational cynicism mean score was (59.89±1.86). They recommended conducting strategies to prevent organizational cynicism among nurses. **El-liethy & Atalla, (2021)** also consistent with our study finding and established that the studied nurses perceived moderate organizational cynicism. As well as **Bacaksız, et al., (2018)** they discovered that hospital employees had a-modest level of organizational cynicism.

Meanwhile, **Mohamed, et al., (2022)** conducted a study at Minia University Hospital and found that half of nurses had moderate level of organizational cynicism. Also, **Akyurt & Dogan, (2023)** conducted a descriptive study among nurses at a tertiary hospital in Istanbul. The researchers noticed that nurses experienced organizational cynicism and burnout.

On the other hand, **Mahmoud & Abou-Shaheen, (2022)** conducted a study at Tanta University, they mentioned that majority of nurses at Hospital of Tanta University had a low perception level of overall hospital cynicism. They attributed their results to University Hospitals having more advantages which provides the nurses more chances for further training and education, higher salaries and profits, and prospects for promotion and advancement. Additionally, good relationships between leaders and nurses benefit the institutions because they encourage commitment among nurses' to their work, social dedication and loyalty, and sense of obligation to others. **In the same vein, Sungura, et al., (2019)** who discovered perception level of organizational cynicism among nurses was low.

The present study findings also declared that the highest level of hospital cynicism as perceived by the staff nurses was related to affective cynicism followed by cognitive and behavioral cynicism. This might be the result of nurses having extremely bad mental attitudes when they think about their hospital, which overwhelms them with feelings of stress, anxiety, rage, injustice, and depression. Additionally, they frequently disapprove and criticize the procedures and policies implemented in their hospital to those outside of it and regret the practices of their institution.

**Mahmoud & Abou-Shaheen, (2022)** corroborates the results of our study finding and found that nurses at El-Mahalla Hospital reported that the highest level of hospital cynicism was related to affective cynicism. Also, reinforces this result **Aly, et al., (2016)** who shown that nurses have the greatest point in the affective (emotional) dimension of organizational cynicism as compared to the behavioral and cognitive dimensions. In contrast, **Archimi, et al., (2018)** who displayed that the lowest mean percent score of organizational cynicism, was for affective cynicism. Also, **Badran & Abou Zeid, (2021)** illuminated that the highest mean score was for behavioral cynicism followed by cognitive cynicism and the lowest mean score was for affective cynicism.

**Regarding staff nurses' work alienation,** the present results revealed that above half of nurses experienced work alienation with meaningfulness and self-estrangement had high scores followed by powerlessness. These might be clarified by the fact that most decisions at work are made without their input, that they are unable to alter their work or receive feedback on it, that they feel their contributions are insignificant, and that they lack authority in their position. Because they were not told about the organizational changes and their perspectives were not taken into consideration before

adopting the innovations, they are experiencing feelings of meaninglessness, resentment, and rage. These findings are agreed with **Mahmoud & Abou-Shaheen, (2022)** they found that the level of work alienation among nursing staff was high with a mean score ( $71.75 \pm 11.79$ ). Furthermore, the current result in agree with **Alfuqaha, et al., (2023)** who mentioned that the work alienation level is increased among nurses. On the other side, a descriptive cross-sectional study conducted by **Korkmaz & Torlak, (2024)** revealed that the nurses had moderate scores of work alienation.

Additionally, **Abd-Elrhaman, et al., (2020)** highlighted that work alienation was experienced by the nursing staff, with the powerlessness factors having the highest mean score and the factor of normlessness having the lowest mean score. According to **Özer, et al., (2019)** findings, there was a medium level of work alienation reported by physicians and nurses, accompanied by high levels of helplessness and self-estrangement.

Conversely, the investigations conducted by **Durrah, (2020) & Valikhani & Zamani, (2019)** indicated that there was a moderate level of work alienation. Also, **Özçelik, et al., (2020)** demonstrated nurses faced with organizational changes reported a moderate level of work alienation.

**Regarding staff nurses' organizational commitment,** the present finding revealed that 44.8% of nurses had moderate level of organizational commitment with a mean score ( $34.10 \pm 6.11$ ). The lowest level of nurses' commitment was related to affective dimension followed by continuance and normative dimensions. These findings are a result of most nurses disagreeing that they feel content and happy in their workplace, that they are emotionally invested in their profession, that they love talking about their workplace with others outside of it, and that they have more options when it comes to leaving the organization. In agreement with this result **Deliveli & Kiral, (2020)** who determined that, among the sub dimensions of organizational commitment, the instructors viewed affective commitment at the highest level, followed by continuance commitment and normative commitment at the lowest level.

These findings are supported by **Amer & Atiea, (2019)** they found that 50% of nurses in critical care unit experienced moderate level of organizational commitment. Furthermore, this results are consistent with **Al Haroon & Al Qahtani, (2022)**, who stated that most nurses had moderate level of organizational commitment. On the same line, the result described by **Moradi, et al., (2020)** indicated that organizational commitment among 67.3% of the nurses was at moderate level. Conversely the results of **Badran & Abou Zeid, (2021)** who observed that

70.0% of the studied nurses had high scores of organizational commitments. Also, **Kumar, (2019)** revealed a high commitment among studied subjects. It was concluded from the results that there was significant positive correlation found between organizational cynicism dimension and work alienation. In other words, the level of self-estrangement, meaninglessness and powerlessness dimensions of workplace alienation was noticed to be increased among nursing staff who had suffered from high level of affective, cognitive, and behavioral cynicism. This indicates that the nursing staff who experienced organizational cynicism felt an increasing sense of meaninglessness and self-estrangement, as well as powerlessness. These findings are compatible with the results of **Li & Chen, (2018)**; they concluded that there was a relationship between organizational cynicism and work alienation. In addition, **Sezgili & Yilmaz, (2022)** found a statistically significant relationship between organizational cynicism and work alienation. Moreover, the current study indicated that organizational cynicism and work alienation are negatively correlated to organizational commitment. This demonstrates that a decline in organizational commitment is caused by the growth of job alienation and organizational cynicism. From the researcher's point of view, cynical nurses undermine their loyalty to their hospitals and don't confide in them, which could have a negative impact on their commitment within the hospital. Interpersonal relationships are harmed by alienation, impassivity, insecurity, frustration, and persistent disappointment that nurses with organizational cynicism experience. **Singh & Dixit, (2018)**; **Koçoğlu & Tailoring, (2020)** noticed that job performance, organizational commitment, citizenship behaviour, fairness, confidence, and employee turnover intentions are all impacted by organizational cynicism. In addition, it raises burnout, low self-esteem, alienation from one's job 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.

On the same line, **Badran & Zeid, (2021)**, found a negative relationship with a high statistically significant between organizational cynicism and organizational commitment among nurses. Additionally, **Ikinci, et al., (2020)** found that there was statistically significant negative correlation between organizational cynicism and organizational commitment. Furthermore, **Kartal, (2018)**; **Terzi & Sazkaya, (2020)** found statistically significant negative relations between organizational cynicism dimensions, work alienation and organizational commitment dimensions.

Finally, staff nurses' organizational commitment is diminished by work alienation and organizational cynicism. Staff nurses that are cynical and alienated don't trust their organization since they don't care as much about their work, which might negatively impact their behavior. Organizational cynicism hinders nurses' commitment by causing demotivation, increased absence rates, decreased productivity, conflict, and alienation among staff members.

## Conclusion

The present study came to conclude that the majority of nursing staff experienced high level of organizational cynicism and work alienation. Most nursing staff were alienated from their workplace due to factors of powerlessness, meaninglessness, and self-estrangement. 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:**

### Healthcare institutions.

- Early detection of negative attitudes is aided by information sharing and regular contact, particularly regarding new staff nurses.
- Put appropriate plans into place and allowing staff nurses to provide feedback on how their present superiors are acting.
- Change hospital regulations so that nursing staff members can participate in the leaders' appraisal and evaluation processes.
- -Create a positive work atmosphere with 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.
- Nurse managers must possess emotional intelligence and a greater capacity for empathy when interacting with their team.
- Academicians teaching nursing should incorporate organizational cynicism and alienation, along with its significance, dimensions, causes, and effects, into their curricula for both undergraduate and graduate students.

**Further research:** It is recommended that more research be done to clarify the relationship between work alienation, job satisfaction, turnover intentions, and organizational cynicism.

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