



Interrelationship of Incivility, Cynicism and Turnover Intention

Tahira Nazir^{1,2*}, Ungku Norulkamar Bt. Ungku Ahmed³

¹Faculty of Management, Universiti Teknologi Malaysia, 81310 UTM Johor Bahru, Johor, Malaysia, ²Department of Management Sciences, COMSATS Institute of Information Technology, Wah Cantt, Pakistan, ³Faculty of Management, Universiti Teknologi Malaysia, 81310 UTM Johor Bahru, Johor, Malaysia. *Email: tahiraasifpk@hotmail.com

ABSTRACT

Workplace incivility being a deviant behavior is acknowledged by its low intensity, moreover its tendency to implicate detrimental conducts; given the broader spectrum of mistreatment. Subjected study was intended to observe the impact of workplace incivility in association to the mediatory role of cynicism over the subsequent turnover intents of nurses in selected healthcare settings of Pakistan. The survey conducted on 395 nurses depicted a positive correlation of workplace incivility towards the progression of cynical attitudes and turnover intents in the subjected profession. The study further signifies the impact of cynicism as a mediator, over the intentions of an individual to quit the employing healthcare setting. The multiple regression tests carry out in hierarchical manner, on the selected variables signified the impact of workplace incivility over the cynicism and turnover intention at respective variances of ($R^2 = 0.061$) and ($R^2 = 0.050$). In comparison to which cynicism exclusively poses a substantial variance of ($R^2 = 0.156$) over the intents to leave. While considering workplace incivility as instigator and cynicism in capacity of a mediator, a cumulative variance of ($R^2 = 0.182$) was observed in relation to an individual quitting the job. Moreover, both of the variables are significant predictors to their resultant variable ($P < 0.001$). It is recommended to adopt proactive approach to contain uncivil incidents and evade costs of following disapproved behaviors and subsequent turnover.

Keywords: Incivility, Cynicism, Turnover Intention, Retention, Nursing, Healthcare

JEL Classifications: I000, I120, I310

1. INTRODUCTION

Being compassionate and concerned about welfare and anguish of others are the considered principles, upon which the healthcare professionals operate (Eron, 1958; Webb and Linn, 1977). Today for any given health care setting, nurses have proved themselves to be the most critical of requirements. Having said that nursing in terms of profession have been observed to face critical workforce deficiencies, which are imminently getting cumulated over time (Keenan and Kennedy, 2003). Thus it has been exceedingly suggested to maintain such environments that tend to keep the regarding employees engaged in their assigned tasks, thus ensuring their retention (Leiter et al., 2009). Mostly nurses do intend to quit from employment when they find the work setting unhealthy, which in most cases are resultant to the uncivil behaviors initiated and regarding escalation to detrimental implications, in later stages.

Suggestively the unhealthy work setting is often attributed to the low-key deviant behavior which prevalently is termed as “workplace incivility.” It has been observed to influence nursing as a profession at comparatively higher rate than any other (Kopelman, 1983). Further, being a deviant behavior of relatively lower magnitude, incivility is considered with short term effects, but quiet contrary is the existent situation. In relation to the acknowledged of the spiral effect theory incivility is defined as a progression which not only disorient an individual’s trust on organization one is being employed under, but also of other individuals who maintain social interactions with the victim (Andersson and Pearson, 1999). It too has been proposed that continued development to these negative feelings tend to turnout to violent behaviors either towards coworkers, clientele or in some cases towards one’s own self (Namie, 2003; Kolanko et al., 2006; Ghosh et al. 2011). Exemplified effects namely are stress, dissatisfaction, mental anguish and drug misuse.

Being mentioned incivility tends to the instigator to the adverse work environment attitudes, and the deleterious feelings of an individual towards the employing organization, which ultimately culminates to be the ineffectiveness towards the organizational progression. In specific to these observed trend, negative emotional state and sense of mistrust posed by individual is termed as cynicism (Andersson and Bateman 1997; Dean et al., 1998).

Research done across multiple organizational capacities over years depicts a positive trend to discouraging attitude of cynicism. The mentionable targets to this attitude can either be one's own organization, management or efforts made in terms of bringing organizational changes (Reichers et al., 1997). Cynicism being declared as a defensive mechanism has been cited in numerous studies as an essential change required to keep up with the dynamic attitudes in organizational capacities. But, most studies are suggestive to the fact that the subjected cynical attitudes are justification to inclination towards workplace violence and quitting the organization (Bedeian, 2007).

Negative attitudes conversed prior, when instigated tend to implicate adversely. This for most organizations results in an acute situation, in form of an employee's turnover. Given the facts it has been a vividly acknowledged that for the ongoing era of 21st century the most important of assets to any organization is its human capital, rather than financial or physical ones. Yet it is the most elusive of all to manage too. For any strategic planning either short or long term wouldn't see light of day, if it's not for the people associated to it. Not only completion of organizational tasks is necessary, but in contrast being competitive is way to win (Devi and Poojitha, 2012). This again is possible by retention of the experienced workforce and on added benefit of viable human resource branding. It should be considered that turnover, more precisely a voluntarily one is associated to numerous aspects in relation to work settings.

Likewise in nursing as a profession the retention of nurses is a serious issue, yet to be resolved. The turnover rate of 30-60% has been observed in fresh graduate nurses, exclusively. Moreover, what adds up the criticality of the problem are the regarding adverse effects brought upon the quality of patient care delivered (Bae et al., 2010). Viable association of unhealthy work settings, thus unsatisfying conditions have been observed with turnover in nurses (Hayes et al., 2006). Given the fact that there can be multiple predictors to the "turnover intention" but, comparison to all it has been demonstrated that "workplace incivility" and its impacting aspects especially "cynicism" implies significant effect upon the dependent resultant behavior. The prior mentioned delinquently acute issues are scoped for, in our current study. Moreover, what encourages the observation of these aspects is in relevance to the fact that it is nursing that subjugates any other role in healthcare profession, in terms of count (McMullin et al., 2004).

2. LITERATURE REVIEW

2.1. Workplace Incivility

Neglect posed towards maintaining a healthy work setting, is among the very reasons of organizational failure (Cooper and

Cartwright, 1994; Lowe et al., 2003; Spence Laschinger et al., 2009). Workplace incivility too is among such factors that need consideration to evade disrupted work settings and hindrances towards attaining organizational goals. Incivility itself is defined as the low intensity deviant conducts that are ambiguously intended to inflict harm upon a target in particular and come in violation of workplace norms (Andersson and Pearson, 1999; Leiter et al. 2009). Incivility is an extraction from the broader scope of deviant behaviors which is largely termed as mistreatment (Cortina et al., 2001). Unlike other behaviors incivility is exclusively based upon a vague intent and has no give or take in relation to violence (Hutton, 2006). Researchers have primarily identified two sources of incivility as the coworkers and the customers, which in our case are the fellow nurses, patients and their regarding guardians (Pearson et al., 2001; Sliter et al., 2012). Incivility faced from either sources, tend to get reciprocated as cynical attitudes or turnover intents (Sliter et al., 2012). Among the pioneering research done on incivility, a particular study done on 800 individuals operating in 17 different industries depicted cost of incivility as decline towards work effort, poor work quality, customer mishandling and turnover (Porath and Pearson, 2013). Moreover, 98% of employees experiencing incivility at least once while being under employment, advocated of the severity associated to the issue in a study spanning from 1998 to 2011 (Porath and Pearson, 2013).

In particular to healthcare profession a study done on 612 nurses statistically arbitrated that 67.5% of nurses were subjugated to uncivil conducts directed from their supervisor, while 77.6% did experience such conducts through their fellow workers (Gallagher, 2012). Moreover, one out of every four uncivil acts, is associated to the subjected profession (Chappell and Di Martino, 2006; Estryng-Behar et al., 2008). Globally workplace deviating behaviors could cost up to as much as 4.2 billion dollars and lives of 1000 individuals per annum while being at employment (Hutton, 2006; Clark and Springer, 2007). In order to avoid such toxic environment proactive assessment including litmus tests, work setting diagnostics and target intervention techniques are essential (Hutton, 2006). Taking in account the low key nature of behavioral intensity in uncivil conducts, depictions like discourteous attitudes when it comes to communication, excluding individuals from societal activities, raising voice, misuse of office supplies, passing snide remark scan vividly be observed (Pearson et al., 2005).

Incivility as a consideration towards workplace violence and a correlative to deviating behaviors can be attributed to "spiral effect" (Andersson and Pearson, 1999). The associated trend of these explanatory patterns are dependable on the adequate understandings of ongoing situations, associated unwillingness to act upon or inability to alter the environmental setting (Masuch, 1985). In a conclusive manner incivility can be related to spiral effect, based upon it amplifying ramifications in effect.

In continuum, theory of "relational aggression" underpins the aspects of incivility. The occurrence of relational aggression is most likely to happen when an individual make use of relationships as means of harms (Dellasega and Nixon 2007). Relational aggression is more of a mentionable to this current study, because

it has been observed more commonly among women in comparison to men (Brureau, 2013).

In a relative perspective nurses being the most oppressed of the working commodity face almost an incessant struggle with the gain of control amid the physicians, superintendents nursing heads and coworkers (Farrell, 1997; Michelle Rowe and Sherlock, 2005; Stanley et al., 2007; D'AMBRA, 2012). Following to which the adaptive approach can be referred from theory of "oppressed group behavior" which suggested that the group who stands inferior in power adapts to unwilling behaviors in order to survive in the environment, which piles up as being as an act of belligerence towards the more vulnerable individuals (Duchscher and Myrick, 2008). Such actions have been proved to be amongst major reasons for an individual to turn from their professional positions (Bush and Gilliland, 1995).

Given the aspect of incivility as a vague intent to harm the target in disregard to the norms, cynicism too is delineation of horizontal violence, which itself is an act of aggression that in nature is non-hostile (Duffy, 1995), and poses diminishing association towards inclined rates of turnover and deterioration in physical and psychological health (Vessey et al., 2010). The occurrence of such behaviors have been observed in persistent manner in the healthcare domains (Roberts et al., 2009).

A study done in particular comprising of 10 nurses interviewed, did conformed to the statement that the major reason resulting to approach for leaving the organization is the unfriendly work settings (MacKusick and Minick, 2010). Following to which, repercussions of incivility in profession of nursing has been evidenced in relation to unhealthy working environment, which further upturn the odds of patients rescue in critical conditions (Kutney-Lee et al., 2009; Aiken et al., 2011).

2.2. Cynicism

It was not until the 1990's when cynicism got attention to be discussed as in organizational capacity (Kanter and Mirvis 1989, Mirvis and Kanter, 1991, Reichers et al., 1997). Among the pioneering studies done in regard to the cynicism justifies that 43% of workers in America depicted a cynical attitudes while being under employment. The subjected individuals not only opinionated the level of trust towards their management, but also held belief in that their organization was taking advantage of them, moreover treating them unfairly (Kanter and Mirvis, 1989). Such severity to issue buoyed up researchers to study the subjected issue, with more profoundness.

Cynicism itself has been in connotation among the numerous disciplines of social sciences including philosophy, political sciences sociology, psychology, religion, management and namely more, for longer period of time (İnce and Turan, 2011). Though, cynicism itself rooted out as mode of life defined by the Geek civilization. Cynics held belief that the most upheld of institutions i.e., religion and government were aspects, unnecessary in nature (Dean et al., 1998). In addition cynics characterized the measure of life as individuality and self-sufficiency, rather than standards set by society with associated expectancy to be fulfilled (Dean et al., 1998; Brandes and Das 2006).

Sociologically cynicism is illustrated as more of a coping strategy than any depiction of being intentionally harmful. The subjected behavior takes form when an individual encounters an unstable, unwelcomed or an insecure environment (Dean et al., 1998). Thus, in response defensive behavioral outcomes including gain of advantage over the rest of individuals in an organization or loss of trust are most common. Given this point of view cynicism is not only a defensive strategy, but also a justification to a self-serving bias (Çınar et al. 2014).

Taking in account the perspective of various studies, the cynicism is defined as an individualistic approach towards retaining a negative perception of the current organization, one is being employed under (Nair and Kamalanabhan, 2010). Over years this subjected topic has driven researchers to study the related aspects and its effects on different organizational capacities. It has been observed that individuals who are cynic in nature can hinder the progression of not only their coworkers but, the whole organization (Özler and Atalay, 2011).

Cynicism itself is comprised of tertiary dimensions. Starting with an organization's lack of integrity, followed by depictions of negative attitudes and lastly the adaptation to disparaging behaviors in consistency to prior beliefs (Dean et al., 1998, Stanley et al., 2005).

Starting with the organizational lack of integrity, it is the cognitive approach which itself comprehends of notions like lack of impartiality and sincerity. Moreover to the absence of mentioned aspects, the cynics have to have belief that humans are the beings; untrustworthy and are incoherent to opted conducts. Next to which is depictions of negative behaviors that practice results in formation of resilient emotional or sentimental reactions towards the organization. The cynics in consequence get to face the sense of disrespect, discomfort or shame. Finally the mentionable are the implications in form of disparaged behaviors. The behavioral depiction to which is in form of adverse moreover, critical attitudes towards the organizations (Barefoot et al., 1989, Dean et al., 1998). Some of the undesirable of outcomes associated to cynicism in an organizational capacity are apathy, work burnout and intentions to resignation (Shahzad and Mahmood, 2012).

In continuum to prior reference cynicism can be perceived in terms of the turnover intentions. It is because the workers illustrating cynical attitude have to have belief that their management is the one lacking the interest in them, and take benefit of them, by means; unfair. Many researchers advocate of level of cynicism being directly proportional to the intent to turnover (Eaton, 2000).

In particular to the subjected discussion the most underpinned of various theories supporting the cynicism to the turnover intent are the theories of "social equity" and that of "social exchange." First off with the equity theory, which is the determinant of parity between the given inputs in form of efforts by an individual and the reciprocated outputs in terms of rewards? When an individual evaluates both the determinants and concludes an imbalance between the duos aspects of inputs in relate to outputs or even observes an imbalance in the recompenses articulated to other individual at the regarding organization, there is a sense of

dissatisfaction, in result. This dissatisfaction further gets implicated as in terms of absenteeism and intentions to leave the current employment (Hatfield et al., 1978). Quiet comparable to that is the theory of social exchange which is defined upon the variables of cost and benefit. Rendering to which, when an individual puts efforts into a task, based upon the prospect of benefits, which if turns out adversely results in the same repercussions mentioned prior (Adams, 1965).

When discussing the aspects of cynicism as in terms of healthcare setting it has been an alarming situation, since psychological literature reflected of cynical patterns found in regarding profession at greater rate, especially in contrast to other professions (Reinhardt and Gray, 1972). As a starting point an unfriendly work setting might lead to cynic behaviors. Though, it has been observed that nurses over years might learn to get by those uncivil behaviors, by considering it as an associated aspect to their profession. But, it is cynicism that gets established with experience that in later stages proves to be a strong determinant to the progression towards turnover (Laschinger, 2012).

2.3. Turnover Intentions

When it comes to a point that an employee start realizing that the current condition one has been deployed under are not up to the expectations, adverse attitudes start to develop (Mano-Negrin and Kirschenbaum, 1999). Which ultimately defies ones intentions to work under any longer. The term “turnover intention” itself is defined as for how long an individual is willing to stay in an organization (Cotton and Tuttle, 1986). Along, that other studies suggest it to be the perceived probability of an individual to either stay or leave an organization (Tett and Meyer, 1993). But, the concept puts up with an additional perspective when it comes to defining turnover intention regarding nursing as profession. It has been so due to the inconsistencies observed between the given definitions and the factual reasons leading to turnover. Thus, defining turnover in nursing as a process where nursing either leaves or gets to be transferred within the hospital environment (Tai et al., 1998). In addition many studies suggest turnover to different extents ranging from job allocation, leaving organization or even leaving nursing as a profession (Hayes et al. 2006).

The turnover intention of an employee is classified into two. It can either be a voluntarily turnover intention or a non-voluntarily one. The occurrence of non-voluntarily turnover takes place when the organization itself suggests that an employee is of no further service. This can either be because of end of role assigned or the poor performance depicted by the subjected individual. In contrast to that, we have the voluntarily turnover intention, which is the intentional decision of an employee to leave the organization when one either outruns physical and mental capacity to perform, or perhaps find a better opportunity to adjust to (Stumpf and Dawley, 1981; Shaw et al., 1998).

Given the profession of nursing, a shortfall has been observed for past many years (Keenan and Kennedy, 2003). Given the reports of W.H.O compiled in 2006 depicts a global deficiency of 4.3 million healthcare workers, moreover it suggested of an increment to this negative trend by 20% in upcoming two decades

(Organization, 2006). Suggestive studies like the mentioned have upturned the distresses in terms of achieving adequate caregivers for future and the possibilities to potential effect upon the patients (Aiken et al., 2002; Needleman et al., 2002, Nantsupawat et al., 2011, D’AMBRA, 2012). Though efforts dedicated to a positive enrollment to the profession of healthcare, have been proved to be quiet progressive (Auerbach et al., 2011). But, at the same time the pending retirements to nurses who have earned their share of experience to its limit and the advancing population trends, yet again reverts us back to point of compelling fulfillment for meeting the ends, in future (Cowin and Hengstberger-Sims, 2006).

It must be considered that turnover is not a singular existing event, with inflictions upon an individual, in particular. It is quite the opposite because the organization gets to rivet the losses in terms of financials spent upon the experienced employee being fired. Moreover there are the cost that gets to be spent upon the new hiring and later on regarding training and development piles up to a greater consideration. Putting coworkers to perspective, it has been evident that an employee leaving an organization burdens the retaining employees with more workloads (Rehman et al., 2012). In comparable aspect turnover in nursing puts a deleterious influence over the care quality delivered (Gray et al., 1996; Tai et al., 1998, Shields and Ward, 2001).

In continuum to that the most important of the aspect to be taken care of is the retention of the workforce, especially the ones freshly employed. For this they will prove to the sustainability for future requirements. To get to achieve that, scoping for nurturing healthy work settings is a necessity. To foster such environment factors namely high stress and relationships with the coworkers must be taken into consideration (Laschinger, 2012).

3. HYPOTHESIS DEVELOPMENT

Incivility in most of studies has been taken in account in terms of some associated dimension of mistreatment and comprising aspects like violence, bullying. Hence, keeping conceptual and contextual regards, the implication of incivility over cynic behaviors and the turnover intent are targeted areas of our study. Moreover this study scoping nursing population will too comprise mediating role of cynicism in relation to organizational retention. Proposed hypothesis, of subjected research are:

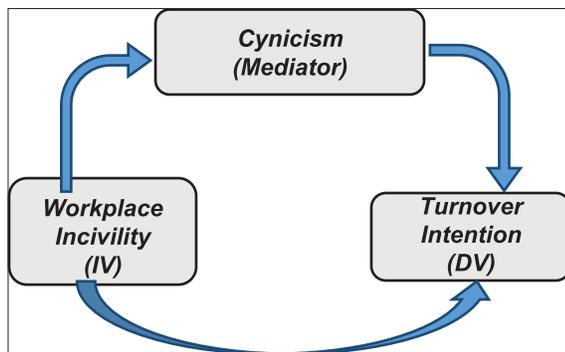
H1: Workplace incivility is directly proportional to the cynic behaviors induced into an individual.

H2: Workplace incivility is positively associated to the intents of an individual towards turnover intentions.

H3: Cynicism is significantly correlated to turnover intent, as in capacity of a mediator.

Defined hypothesis model is shown in Figure 1.

Workplace incivility being a discourteous, rude and undignified behavior in relation with cynicism has been has been justified by the evident existence of extensive studies on subject (O’Brien et al. 2004). Psychological misery has been attributed as the most common of the reactions observed when confronted with incivility, which justifies a relative existence between workplace incivility

Figure 1: Model

and associated negative feelings. In manner alike cynicism too is comparable to aspects such as pessimistic behaviors towards the organization, all of which is synonymous to individualistic frustration. Hence, we can conclude the possible impact of workplace incivility over the cynicism (Abraham, 2000). In addition studies reflect of incivility rate in nursing, being as high as 16 times in comparison to any given profession. These non-favorable circumstances ultimately leads to development of negative feelings towards the organization or associated employees, which are defined basis of cynicism (Ayyub et al., 2013).

Next of proposed correlates are workplace incivility and turnover intent. As stated that turnover intent can be a weighed process based upon the measure of working conditions an individual is being employed under.

A study conducted in 2008 proposed of an adverse association between uncivil behaviors and an individual's physical and mental wellbeing (Martin and Hine 2005; Lim et al., 2008). This association makes them more inclined to quit from their employment. Factors cited such as wellbeing encourages individuals to leap for safe and healthy environments to work into, which in contrast environments with uncivil behaviors are clearly unable to provide for. Such acts are justified as turnover intentions. Conclusive to which various studies done on healthcare employees prove concurrency to the suggested nature of workplace incivility as being a steering factor towards the intentions to quit current employment (Hayes et al., 2006; Lim et al., 2008, Leiter et al., 2009).

The concluding hypothesis suggestively defines cynicism as a mediating factor between the workplace incivility and turnover intent. Cynicism is a precedent leading to the significances including disparaging attitudes, alienation, downturned performance and turnover intentions. A survey study done on 700 individuals reflected of a negative impact on the work performance in relation to the increased incivility (Pearson and Porath, 2005). These results were endorsed with similar study done on 1200 employees in year, 2001 (Cortina et al., 2001). Another of suggestive studies done identified workplace incivility as facet to the mistreatment that encompassed attitudes mentioning bullying or workplace violence (Namie, 2003; Felblinger 2008). In addition aspect of depersonalization, as in terms with cynicism, is suggestively associated to the workplace incivility. Turnover

intentions begin the strongest of predictors to turnover is critical to evaluate, given the number of factors impelling it. Studies suggest that negative evaluation of work setting can be a leading factor towards a voluntarily turnover. But, before conclusive turnover (Allen et al., 2010).

4. METHODOLOGY

To put the suggested hypothesizes to the test, a specified questionnaire was designed. There were (n = 500) copies of the subjected questionnaire that were utilized in the dissemination process, for which we got response rate of 79% (n = 395). To conduct the test we did select 10 different healthcare organizations located in the twin cities of Pakistan i.e., (Islamabad and Rawalpindi); at random. To be noted targeted hospitals were a mix of healthcare environments being operated in both the public as well as private capacity. Dissemination was done utilizing the mailing process, but in addition to that direct approach to the nurses was made under supervisory support. This led to an effective collection of responses, in terms of better involvement of the participants.

The questionnaire itself was composed of 30 questions, in total. The regarding distribution to which was 13 questions dedicated to variable of workplace incivility, followed by 14 to cynicism and lastly 3 queries to evaluate turnover intent of an individual. 5-Point "Likert Scale" was selected as measure of selection, with varying range of 1 as "strongly disagree" up-to 5 as "strongly agree."

The comprised questions in relation to the selected dimensions were referred from the valid and reliable of the studies done, till date. Incivility was referred from presented scale of (Cortina et al., 2001), which measured the factors which lead to the observance of uncivil behaviors in the organization. Cynicism was referred from (Dean et al., 1998), and was put to use to determine the attitudes which concludes to the cynic behaviors of the employed individuals, in addition to define the significance in relation with workplace incivility and in terms of a mediator to the variable of turnover intent. Item selection for Turnover intent was referred from the studies of (Conger and Kanungo 1998; Allen et al., 2003).

5. RESULTS AND DISCUSSION

In order to perform descriptive and inferential tests on the responses gathered, Statistical Package for Social Sciences (SPSS Version 20.0.0 for Microsoft Windows) was utilized. To prove the reliability of the selected measures for the current study, Cronbach's Alpha test was run on items associated to respective variables of workplace incivility, cynicism and consequent turnover intentions. Table 1 shows the Cronbach's alpha value and found that the calculated value of ($\alpha = 0.884$), being greater than the standard level of reliability i.e. ($\alpha \geq 0.7000$), moreover in proximity to ($\alpha = 1.0$) as an absolute measure to reliability depicts of the greater reliability to the selected measures.

Further to build an understanding of selected variables, Table 2 shows the descriptive statistics of the studied variables. Starting

with workplace incivility with the calculated median values of 3.5000, followed by 4.0000 for cynicism and to resultant variable of turnover intent regarding values of 4.0000 are associated. Thus, these calculations are befittingly more consistent towards the relation to the 4th scale on selection measure i.e., “agree.” Given the frequencies of the respective variables it has been indicated that 72.0% of responses were opted as scale selection ≥ 3 for Workplace Incivility, followed by trend alike in cynicism by 78.5% and 69.3% for the Turnover Intentions. In addition the standard deviation subsequently for each considered variable are .90843, .91457 and 1.31211. Respective values residing close to whole value 1.000, indicates a strong impact for each variable calculated.

For inferential statistics, we primarily opted for Pearson’s Correlation method and presented the results in Table 3. The selected method depicts of whether if the selected variables do relate correspondingly, either trended positively or negatively. The test also attributes to the level of significance to the relation.

Pearson’s correlation of workplace incivility and cynicism to the turnover intent is respectively valued as “ $r(393) = 0.248, P = 0.000$ ” and “ $r(393) = 0.395, P = 0.000$.” Moreover, workplace incivility in relation to cynicism is valued as “ $r(393) = 0.224, P = 0.000$.” Respectively, all three of correlational observations depict a positive trend. Also, the value of significance being ($P \leq 0.5$) represents of strong significance to the defined relations.

Further, in order to substantiate the correlational depiction between the variables and mediatory nature of cynicism, regression analysis was utilized in hierarchical manner. The tests were performed, being based upon the hypothetical model in Figure 2.

The defined model defines multiple paths which define the relational approach of one or more variable to another variable. First of which is the path (a) Defining the relation of workplace incivility towards cynicism, followed by path (b) depicting effect of cynicism over the turnover intent, next to which is path (c) with approaching of workplace incivility towards turnover intent of an employee, lastly there is path (c’) that cumulates the effect of workplace incivility and cynicism towards the turnover intent.

In continuum to the inferential test of Pearson’s correlation,

Table 1: Cronbach’s α

Cronbach’s α	Cronbach’s α based on standardized items
0.884	0.895

Table 2: Descriptive statistics

Variables	Median	Standard deviation	Variance
Workplace incivility	3.5000	0.90843	0.825
Cynicism	4.0000	0.91457	0.836
Turnover intention	4.0000	1.31211	1.722

Table 3: Pearson’s correlation

Variables	Turnover intentions	Significance
Workplace incivility	0.248	0.000
Cynicism	0.395	0.000

Spearman’s rho too proves to be consistent to resulting in existence of positive correlation, between the designated variables. The results of this test exclusively designed for opted scale are significant in nature as defined in following Tables 4 and 5. Spearman’s who determined positive correlational factor of workplace incivility and cynicism assessed as ($r_s = 0.283, P \leq 0.5$), followed by workplace incivility in relation to turnover intent as ($r_s = 0.247, P \leq 0.5$) and lastly the cynicism’s correlation to turnover intent evaluated as ($r_s = 0.326, P \leq 0.5$).

Table 5 shows the model summary for the regression analysis and found that the calculated values of R^2 depict the level of variance with which a variable can impact the dependent variable (DV). The respective results suggest that all variables hold no impending, rather a constructive effect onto the resultant variables. Workplace incivility positively impacts the intents of an individual to turnover with variance factor of ($R^2 = 0.061$), and respective impact over cynicism is assessed as ($R^2 = 0.050$). In comparison to which cynicism exclusively influences the turnover intentions at much significant value of ($R^2 = 0.156$). Which ultimately impacts the aggregated effect of workplace incivility as initiator and cynicism as mediator over voluntarily approach of an individual towards quitting the employment, calculated as ($R^2 = 0.182$). Also, the calculated values for “adjusted R^2 ”, while taking sample size into consideration are in proximity to values of R^2 , suggests no redundancy of information in regard to selected variables.

For the categorized paths defined, ANOVA test performed defines the fit of the selected models. Since the significance is valued persistently as ($P = 0.000$) in reference to the standard of significance fitness defined at ($P < 0.05$), our defined models are highly considerable. Moreover, the defined model for path (c’)

Figure 2: Research model

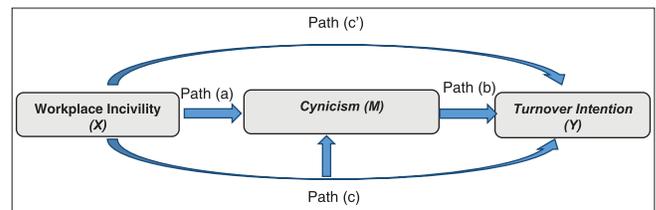


Table 4: Spearman’s rho

Variables	Workplace incivility	Cynicism	Turnover intentions
Workplace incivility	1.000	0.238	0.247
Cynicism	0.238	1.000	0.326
Turnover intention	0.247	0.326	1.000

Table 5: Model summary

Path	R	R^2	Adjusted R^2	Standard error of the estimate
Path c	0.248 ^a	0.061	0.059	1.27289
Path a	0.224 ^b	0.050	0.048	0.89237
Path b	0.395 ^c	0.156	0.154	1.20720
Path c’	0.427 ^d	0.182	0.178	1.18953

^aPredictors: (turnover intentions), workplace incivility, ^bpredictors: (cynicism), workplace incivility, ^cPredictors: (turnover intentions), cynicism, ^dpredictors: (turnover intentions), workplace incivility, cynicism

depicts the explanatory power of associated variables in relation to DV of turnover intent, rated at (F [2,392] = 43.691, P <0.05, R² = 0.182). Corresponding results for ANOVA test are exhibited in defined Table 6.

The following Table 7 of “Coefficients” is imperative to put an explanation to the relation existent between the independent variables and the DVs. The respective values of (t) in reference to the significance rated as (P = 0.000) for designated variables of workplace incivility and cynicism in each defined model, proposes that both variables positively predict the DV of turnover intentions and accounts for the unique amount of variance. The coefficient values are given in Table 7.

In specific, the mediatory role of cynicism can be justified by comparative change observed in value of (β) for workplace

incivility when considering individual impact over the resultant variable in model (c) and the cumulative effect while considering cynicism as a mediator in model (c’).

6. CONCLUSION

The conclusive outcomes to our study suggestively stay concurrent to the actuality that an unhealthy working environment is a considerable contributor towards an individual’s intent to leave current organization. Given the consideration that there are multiple contributors to unhealthy environment, the study proves to the imperative aspects of workplace incivility and cynicism. In relation to the detrimental work setting and consequent quitting of job, thus, considering the critical shortage of nurses in healthcare settings, it is highly suggested that the nurses get exposed to enriched work settings. This will prove to be the retention of currently employed individuals; moreover an encouraging trend to opt the subjected profession will get initiated.

For the given aspect of workplace incivility, it has been depicted that uncivil behaviors tend to initiate conducts which may prove to be harmful to the coworkers or the organization, at substantial magnitude. In addition the current study is too suggestive of the fact that among the various deleterious behaviors that may get instigated by the uncivil behaviors, cynicism acts as a vital mediator to adverse outcomes. Individuals with cynical attitudes think less of their coworkers and in particular retain negative feelings towards the employing organization. Such attitudes leave an individual with non-productive and pessimistic approach towards the environment. Conclusively, leading to the most undesirable results in form of intentional turnover of an employee that an organization is most unlikely to foresee and withstand.

The vital consequences of turnover, specifically in healthcare setting can result in higher stress levels over the retentive nurses, which further encourage the behaviors to quit the workplace. In addition the overall health care quality delivered to the patients is too put to a compromising state, which for a patient might ultimately lead to further complexities or loss of life. In regard to various researches, it has been suggested that there are primarily three recommendations that can ensure decline in the uncivil and cynical behaviors, thus evading the resultant intents of turnover. First of which is communication, which encourages an individual to put an explanation to the problematic situation, instead of fostering negative attitudes. Also as a mediating body, an organizational supervisor can play effective role to initiate and retain good levels of communication. In an advancement to the good communicational levels across the associated employees, there is an essential requirement to involve an individual in the decision making process. Approval to this practice can effectively increase the esteem level of an employee and lessen the sense of insecurity. In continuum to such implications the probability and concerning controllability of forthcoming events can be increased. Lastly, if there takes an occurrence of detrimental behavior, there should be the enactment of organizational justice which can ensure that the discipline gets upheld throughout the organization and take consequential measures, if necessary.

Table 6: ANOVA

Analysis of Variance	Sum of squares	df	Mean square	F	Significant
Path c					
Regression	41.566	1	41.566	25.654	0.000 ^c
Residual	636.753	393	1.620		
Total	678.319	394			
Path a					
Regression	16.599	1	16.599	20.845	0.000 ^d
Residual	312.955	393	0.796		
Total	329.554	394			
Path b					
Regression	105.588	1	105.588	72.453	0.000 ^e
Residual	572.731	393	1.457		
Total	678.319	394			
Path c’					
Regression	123.645	2	61.823	43.691	0.000 ^f
Residual	554.674	392	1.415		
Total	678.319	394			

^aY: Turnover intentions, ^bM: Cynicism, ^cPredictors: (Y), Workplace incivility, ^dPredictors: (M), Workplace incivility, ^ePredictors: (Y), Cynicism, ^fPredictors: (Y), Workplace Incivility, Cynicism *Significant values at 1% confidence interval.

Table 7: Coefficients

Multiple Regression	Unstandardized coefficients		Standardized coefficients	t	Significant
	B	Standard error	Beta		
Path c					
(Y)	2.165	0.235		9.225	0.000
Workplace incivility	0.358	0.071	0.248	5.065	0.000
Path a					
(M)	2.609	0.165		15.855	0.000
Workplace incivility	0.226	0.049	0.224	4.566	0.000
Path b					
(Y)	1.423	0.230		6.194	0.000
Cynicism	0.566	0.066	0.395	8.512	0.000
Path c’					
(Y)	0.829	0.281		2.952	0.003
Workplace incivility	0.242	0.068	0.167	3.572	0.000
Cynicism	0.512	0.067	0.357	7.616	0.000

^aY: Turnover intentions, ^bM: Cynicism, *Significant values at 1% confidence interval.

REFERENCES

- Abraham, R. (2000), Organizational cynicism: Bases and consequences. *Genetic, Social, and General Psychology Monographs*, 126(3), 269.
- Adams, J.S. (1965), Inequity in social exchange. *Advances in Experimental Social Psychology*, 2, 267-299.
- Aiken, L.H., Cimiotti, J.P., Sloane, D.M., Smith, H.L., Flynn, L., Neff, D.F. (2011), The effects of nurse staffing and nurse education on patient deaths in hospitals with different nurse work environments. *Medical Care*, 49(12), 1047.
- Aiken, L.H., Clarke, S.P., Sloane, D.M., Sochalski, J., Silber, J.H. (2002), Hospital nurse staffing and patient mortality, nurse burnout, and job dissatisfaction. *Jama*, 288(16), 1987-1993.
- Allen, D.G., Bryant, P.C., Vardaman, J.M. (2010), Retaining talent: Replacing misconceptions with evidence-based strategies. *The Academy of Management Perspectives*, 24(2), 48-64.
- Allen, D.G., Shore, L.M., Griffeth, R.W. (2003), The role of perceived organizational support and supportive human resource practices in the turnover process. *Journal of Management*, 29(1), 99-118.
- Andersson, L.M., Bateman, T.S. (1997), Cynicism in the workplace: Some causes and effects. *Journal of Organizational Behavior*, 18(5), 449-469.
- Andersson, L.M., Pearson, C.M. (1999), Tit for tat? The spiraling effect of incivility in the workplace. *Academy of Management Review*, 24(3), 452-471.
- Auerbach, D.I., Buerhaus, P.I., Staiger, D.O. (2011), Registered nurse supply grows faster than projected amid surge in new entrants ages 23-26. *Health Affairs*, 30(12), 2286-2292.
- Ayyub, S., Awan, A., Bilal, M. (2013), Interactive effect of organizational cynicism and interpersonal mistreatment on turnover intentions. *Proceedings of International Conference on Business Management & IS*.
- Bae, S.H., Mark, B., Fried, B. (2010), Impact of nursing unit turnover on patient outcomes in hospitals. *Journal of Nursing Scholarship*, 42(1), 40-49.
- Barefoot, J.C., Dodge, K.A., Peterson, B.L., Dahlstrom, W.G., Williams, Jr., R.B. (1989), The cook-medley hostility scale: Item content and ability to predict survival. *Psychosomatic Medicine*, 51(1), 46-57.
- Bedeian, A.G. (2007), Even if the tower is "Ivory," It isn't "White": Understanding the consequences of faculty cynicism. *Academy of Management Learning & Education*, 6(1), 9-32.
- Brandes, P., Das, D. (2006), Locating behavioral cynicism at work: Construct issues and performance implications. *Employee Health, Coping and Methodologies*. New York: JAI Press. p233-266.
- Bureau, U.C. (2013), Male nurses becoming more commonplace. *Census Bureau Reports*. pCB13-32.
- Bush, H.A., Gilliland, M. (1995), Caring for the nurse self: Verbal abuse as a case in point. *Journal of Nursing Care Quality*, 9(4), 55-62.
- Chappell, D., Di Martino, V. (2006), *Violence at Work*. Geneva: International Labour Organization.
- Çınar, O., Karcıoğlu, F., Aslan, İ. (2014), The relationships among organizational cynicism, job insecurity and turnover intention: A survey study in Erzurum/Turkey. *Procedia-Social and Behavioral Sciences*, 150, 429-437.
- Clark, C.M., Springer, P.J. (2007), Incivility in nursing education: A descriptive study of definitions and prevalence. *Journal of Nursing Education*, 46(1), 7-14.
- Conger, J.A., Kanungo, R.N. (1998), *Charismatic Leadership in Organizations*. Thousand Oaks, CA: Sage Publications.
- Cooper, C.L., Cartwright, S. (1994), Healthy mind; healthy organization - A proactive approach to occupational stress. *Human Relations*, 47(4), 455-471.
- Cortina, L.M., Magley, V.J., Williams, J.H., Langhout, R.D. (2001), Incivility in the workplace: incidence and impact. *Journal of Occupational Health Psychology*, 6(1), 64-71.
- Cotton, J.L., Tuttle, J.M. (1986), Employee turnover: A meta-analysis and review with implications for research. *Academy of Management Review*, 11(1), 55-70.
- Cowin, L.S., Hengstberger-Sims, C. (2006), New graduate nurse self-concept and retention: A longitudinal survey. *International Journal of Nursing Studies*, 43(1), 59-70.
- D'ambra, A.M. (2012), *Minimizing incivility in the Workplace to Increase Retention of New Graduate Nurses*. Florida: University of Central Florida Orlando.
- Dean, J.W., Brandes, P., Dharwadkar, R. (1998), Organizational cynicism. *Academy of Management Review*, 23(2), 341-352.
- Dellasega, C., Nixon, C. (2007), *Girl Wars: 12 Strategies that Will end Female Bullying*. New York: Simon and Schuster.
- Devi, V.R., Poojitha, V. (2012), HRD-A source for competitive advantage. *Review of Research*, 1(7), 56-72.
- Duchscher, J.B., Myrick, F. (2008), *The prevailing winds of oppression: Understanding the new graduate experience in acute care*. Nursing forum. New York: Wiley Online Library.
- Duffy, E. (1995), Horizontal violence: A conundrum for nursing. *Collegian*, 2(2), 5-17.
- Eaton, J.A. (2000), *A Social Motivation Approach to Organizational Cynicism*. Toronto: York University.
- Eron, L.D. (1958), The effect of medical education on attitudes: A follow-up study. *Academic Medicine*, 33(10), 25-33.
- Estryng-Behar, M., Van Der Heijden, B., Camerino, D., Fry, C., Le Nezet, O., Conway, P.M., Hasselhorn, H.M. (2008), Violence risks in nursing-results from the European 'NEXT' study. *Occupational Medicine*, 58(2), 107-114.
- Farrell, G.A. (1997), Aggression in clinical settings: Nurses' views. *Journal of Advanced Nursing*, 25(3), 501-508.
- Felblinger, D.M. (2008), Incivility and bullying in the workplace and nurses' shame responses. *Journal of Obstetric, Gynecologic, & Neonatal Nursing*, 37(2), 234-242.
- Gallagher, S.M. (2012), Bullying, moral courage, patient safety, and the bariatric nurse. *Bariatric Nursing and Surgical Patient Care*, 7(4), 156-159.
- Ghosh, R., Jacobs, J.L., Reio, T.G. (2011), The toxic continuum from incivility to violence: What can HRD do? *Advances in Developing Human Resources*, 13(1), 3-9.
- Gray, A.M., Phillips, V., Normand, C. (1996), The costs of nursing turnover: Evidence from the British National Health Service. *Health Policy*, 38(2), 117-128.
- Hatfield, E., Walster, E.H., Walster, G.W., Berscheid, E. (1978), *Equity: Theory and Research*. Boston: Allyn & Bacon.
- Hayes, L.J., O'Brien-Pallas, L., Duffield, C., Shamian, J., Buchan, J., Hughes, F., Laschinger, H.K.S., North, N., Stone, P.W. (2006), Nurse turnover: A literature review. *International Journal of Nursing Studies*, 43(2), 237-263.
- Hayes, L.J., Orchard, C.A., McGillis Hall, L., Nincic, V., O'Brien-Pallas, L., Andrews, G. (2006), Career intentions of nursing students and new nurse graduates: A review of the literature. *International Journal of Nursing Education Scholarship*, 3(1), 1-15.
- Hutton, S.A. (2006), Workplace incivility: State of the science. *Journal of Nursing Administration*, 36(1), 22-27.
- Ince, M., Turan, S. (2011), Organizational cynicism as a factor that affects the organizational change in the process of globalization and an application in Karaman's public institutions. *European Journal of Economics, Finance and Administrative Sciences*, 37(37), 104-121.
- Kanter, D.L., Mirvis, P.H. (1989), *The Cynical Americans: Living and Working in an Age of Discontent and Disillusion*. San Francisco: Jossey-Bass.

- Keenan, P., Kennedy, J.F. (2003), The nursing workforce shortage: Causes, consequences, proposed solutions. Issue Brief. (Commonwealth Fund), 619, 1-8.
- Kolanko, K.M., Clark, C., Heinrich, K.T., Olive, D., Serembus, J.F., Sifford, K.S. (2006), Academic dishonesty, bullying, incivility, and violence: Difficult challenges facing nurse educators. *Nursing Education Perspectives*, 27(1), 34-43.
- Kopelman, L. (1983), Cynicism among medical students. *Jama*, 250(15), 2006-2010.
- Kutney-Lee, A., McHugh, M.D., Sloane, D.M., Cimiotti, J.P., Flynn, L., Neff, D.F., Aiken, L.H. (2009), Nursing: a key to patient satisfaction. *Health Affairs*, 28(4), w669-w677.
- Laschinger, H.K.S. (2012), Job and career satisfaction and turnover intentions of newly graduated nurses. *Journal of Nursing Management*, 20(4), 472-484.
- Lim, S., Cortina, L.M., Magley, V.J. (2008), Personal and workgroup incivility: Impact on work and health outcomes. *Journal of Applied Psychology*, 93(1), 95.
- Lowe, G.S., Schellenberg, G., Shannon, H.S. (2003), Correlates of employees' perceptions of a healthy work environment. *American Journal of Health Promotion*, 17(6), 390-399.
- MacKusick, C.I., Minick, P. (2010), Why are nurses leaving? Findings from an initial qualitative study on nursing attrition. *Medsurg Nursing*, 19(6), 335-340.
- Mano-Negrin, R., Kirschenbaum, A. (1999), Push and pull factors in medical employees' turnover decisions: The effect of a careerist approach and organizational benefits on the decision to leave the job. *International Journal of Human Resource Management*, 10(4), 689-702.
- Martin, R.J., Hine, D.W. (2005), Development and validation of the uncivil workplace behavior questionnaire. *Journal of Occupational Health Psychology*, 10(4), 477.
- Masuch, M. (1985), Vicious circles in organizations. *Administrative Science Quarterly*, 30, 14-33.
- McMullin, J.A., Cooke, M., Downie, R. (2004), Labour force ageing and skill shortages in Canada and Ontario. Ottawa: Canadian Policy Research Networks Incorporated (CPRN).
- Michelle Rowe, M., Sherlock, H. (2005), Stress and verbal abuse in nursing: Do burned out nurses eat their young? *Journal of Nursing Management*, 13(3), 242-248.
- Mirvis, P.H., Kanter, D.L. (1991), Beyond demography: A psychographic profile of the workforce. *Human Resource Management*, 30(1), 45-68.
- Nair, P., Kamalanabhan, T. (2010), The impact of cynicism on ethical intentions of Indian managers: The moderating role of seniority. *Journal of International Business Ethics*, 3(1), 27-38.
- Namie, G. (2003), Workplace bullying: Escalated incivility. *Ivey Business Journal*, 68(2), 1-6.
- Nantsupawat, A., Srisuphan, W., Kunaviktikul, W., Wichaikhum, O.A., Aunguroch, Y., Aiken, L.H. (2011), Impact of nurse work environment and staffing on hospital nurse and quality of care in Thailand. *Journal of Nursing Scholarship*, 43(4), 426-432.
- Needleman, J., Buerhaus, P., Mattke, S., Stewart, M., Zelevinsky, K. (2002), Nurse-staffing levels and the quality of care in hospitals. *New England Journal of Medicine*, 346(22), 1715-1722.
- O'Brien, A.T., Alexander Haslam, S., Jetten, J., Humphrey, L., O'Sullivan, L., Postmes, T., Eggins, R., Reynolds, K.J. (2004), Cynicism and disengagement among devalued employee groups: The need to ASPIRe. *Career Development International*, 9(1), 28-44.
- Organization, W.H. (2006), *The World Health Report: 2006-Working Together for Health*. Geneva: WHO.
- Özler, D.E., Atalay, C.G. (2011), A research to determine the relationship between organizational cynicism and burnout levels of employees in health sector. *Business and Management Review*, 1(4), 26-38.
- Pearson, C. M., Andersson, L. M., & Porath, C. (2005). Workplace incivility. In S. Fox & P. E. Sectors (Eds.), *Counterproductive work behaviour: Investigations of actors and targets* (pp. 177-200). Washington DC: American Psychological Association.
- Pearson, C.M., Andersson, L.M., Wegner, J.W. (2001), When workers flout convention: A study of workplace incivility. *Human Relations*, 54(11), 1387-1419.
- Pearson, C.M., Porath, C.L. (2005), On the nature, consequences and remedies of workplace incivility: No time for "nice"? Think again. *The Academy of Management Executive*, 19(1), 7-18.
- Porath, C., Pearson, C. (2013), The price of incivility. *Harvard Business Review*, 91(1-2), 115-121.
- Rehman, O., Karim, F., Rafiq, M., Mansoor, A. (2012), The mediating role of organizational commitment between emotional exhaustion and turnover intention among customer service representatives in Pakistan. *African Journal of Business Management*, 6(34), 9607-9616.
- Reichers, A.E., Wanous, J.P., Austin, J.T. (1997), Understanding and managing cynicism about organizational change. *The Academy of Management Executive*, 11(1), 48-59.
- Reinhardt, A.M., Gray, R.M. (1972), A social psychological study of attitude change in physicians. *Academic Medicine*, 47(2), 112-117.
- Roberts, S.J., Demarco, R., Griffin, M. (2009), The effect of oppressed group behaviours on the culture of the nursing workplace: A review of the evidence and interventions for change. *Journal of Nursing Management*, 17(3), 288-293.
- Shahzad, A., Mahmood, Z. (2012), The mediating-moderating model of organizational cynicism and workplace deviant behavior: Evidence from banking sector in Pakistan. *Middle-East Journal of Scientific Research*, 12(5), 580-588.
- Shaw, J.D., Delery, J.E., Jenkins, G.D., Gupta, N. (1998), An organization-level analysis of voluntary and involuntary turnover. *Academy of Management Journal*, 41(5), 511-525.
- Shields, M.A., Ward, M. (2001), Improving nurse retention in the National Health Service in England: The impact of job satisfaction on intentions to quit. *Journal of Health Economics*, 20(5), 677-701.
- Sliter, M., Sliter, K., Jex, S. (2012), The employee as a punching bag: The effect of multiple sources of incivility on employee withdrawal behavior and sales performance. *Journal of Organizational Behavior*, 33(1), 121-139.
- Spence Laschinger, H.K., Leiter, M., Day, A., Gilin, D. (2009), Workplace empowerment, incivility, and burnout: Impact on staff nurse recruitment and retention outcomes. *Journal of Nursing Management*, 17(3), 302-311.
- Stanley, D.J., Meyer, J.P., Topolnytsky, L. (2005), Employee cynicism and resistance to organizational change. *Journal of Business and Psychology*, 19(4), 429-459.
- Stanley, K.M., Martin, M.M., Michel, Y., Welton, J.M., Nemeth, L.S. (2007), Examining lateral violence in the nursing workforce. *Issues in Mental Health Nursing*, 28(11), 1247-1265.
- Stumpf, S.A., Dawley, P.K. (1981), Predicting voluntary and involuntary turnover using absenteeism and performance indices. *Academy of Management Journal*, 24(1), 148-163.
- Tai, T.W.C., Bame, S.I., Robinson, C.D. (1998), Review of nursing turnover research, 1977-1996. *Social Science & Medicine*, 47(12), 1905-1924.
- Tett, R.P., Meyer, J.P. (1993), Job satisfaction, organizational commitment, turnover intention, and turnover: Path analyses based on meta-analytic findings. *Personnel Psychology*, 46(2), 259-293.
- Vessey, J.A., DeMarco, R., DiFazio, R. (2010), Bullying, harassment, and horizontal violence in the nursing workforce the state of the Science. *Annual Review of Nursing Research*, 28(1), 133-157.
- Webb, N., Linn, M.W. (1977), Open-mindedness of first year medical, nursing and social work students. *Medical Education*, 11(1), 4-6.