

## The Relationship between Perceived Organizational Trust and Nurse's Organizational Citizenship Behavior

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### Abstract

**Background** : Nurses are one of the parts of the hospital that are in sever need of organizational citizenship behavior due to the necessity for them to complete these jobs, that is influenced by organizational trust. **Aim of the study**: was to investigate the impact of perceived organizational trust on nurse's organizational citizenship behavior. **Subjects and Methods: Research design**: A descriptive correlation design was utilized in this study. **Setting**: This study was conducted at Zagazig Fever hospital affiliated to ministry of health. **Subjects**: A convenient sample of 100 staff nurses was used in this study. **Tools of data collection**: Two tools were used: organizational trust inventory (OTI) and organizational citizenship behavior scale (OCBS). **Results**: Indicated that the majority of staff nurses had low level of organizational trust (89.0%), while, 90% of them had moderate level of organizational citizenship behavior. **Conclusion**: organizational trust was positively and significantly correlated with organizational citizenship behavior. **Recommendations**: Organization should provide the basic needs of nursing staff, establishment of mutual trust among them and themselves and creating a blame-free culture and reward system should be introduced to staff nurses who demonstrate organizational citizenship behaviors.

**Key words**: perceived organizational trust, organizational citizenship behavior, staff nurses.

### Introduction

Organizational health care is body that comprises nurses who collaborate to achieve certain goals. As a result, these organizations must efficiently employ nursing which is one of the most significant resources in order to achieve their goals and retain their competitiveness <sup>(1)</sup>.

### Theoretical Framework

This study based on Blau's social exchange theory (SET), who states that "Social exchange... refer to voluntary actions of individuals that are motivated by the returns they are expected to bring and typically do in fact bring from others."<sup>(2)</sup>. According to the theory, the more nurses' trust in the hospital, the more effort nurses will do for the hospital. When nurses have trust in their manager, they are willing to do hard and consume energy for their hospital. Also, Organizational citizenship behavior is thought to follow the reciprocation of justice managers. Nurses who believe the system is unjust are more likely to limit their

commitment to citizenship behavior, whereas nurses who believe the system is fair will continue to contribute to the system through organizational citizenship behavior <sup>(3)</sup>. Nurses would have positive attitudes toward their jobs and demonstrate good working conduct if they are handled fairly within their hospital <sup>(4)</sup>.

Organizational trust is described as the willingness to tolerate the acts of others in the expectation that they will accomplish a particular task that is essential to them, despite not having the ability to supervise their work<sup>(5)</sup>. It is characterized as a psychological state in which nurses provide input on how they view issues in circumstances where the hospital survival is in jeopardy<sup>(6)</sup>.

Staff nurses consider three basic dimensions of organizational trust: Trust in co-workers (horizontal or lateral trust, trust in superiors (vertical trust and trust in organization. The factors that affect the

organizational trust are ability, benevolence and integrity<sup>(7)</sup>.

Organizational commitment, employee performance, job satisfaction and organizational citizenship behavior are all influenced by organizational trust; that are considered the outcomes of organizational trust. Additionally, there are three main approaches to improve organizational trust; social equilibrium, changing attributes and structural strategies<sup>(8)</sup>.

Organizational citizenship behavior is defined as behavior that goes beyond the job's official responsibilities and benefits the hospital. It is described as "extra-role" that nurses do that is helpful to the hospital but are not required to do<sup>(9)</sup>. Organizational citizenship behavior is divided into two parts: Organizational citizenship behavior of individual (OCB-I) and Organizational citizenship behavior of the organization (OCB-O)<sup>(10)</sup>.

There are five dimensions of Organizational citizenship behavior's; considering others, self-sacrifice, helping, or generosity (Altruism), courtesy-based information (Courtesy), the development of organizational support (civic virtue), willingness and gallantry/tolerance (sportsmanship), and conscience/advanced sense of mission/ fairness /honesty (conscientiousness)<sup>(11)</sup>.

The organizational citizenship behaviors affecting many factors; which prosocial values motives: the performance of OCB is linked to a variety of personality characteristics that characterize the nurse's prosocial proclivity e.g., empathy for others, prosocial personality, collectivism and agreement<sup>(12)</sup>, organizational concern motives: staff nurses participate in Organizational citizenship behavior as a result of social exchange relationships, impression management motives: nurses use Organizational citizenship behavior to boost their appearance and manager scores when deciding on promotions<sup>(13)</sup> and duty or

obligation: conscientiousness, a personality trait that describes a nurse who is dutiful, trustworthy, goal-oriented and so on, is positively linked to Organizational citizenship behavior<sup>(14)</sup>.

Organizational citizenship behavior has positive and negative outcomes; positive outcomes are divided into positive employee outcomes such as nurse performance and career opportunities can be improved, reduction in a nurse turnover and absenteeism, recognition and appointments to high-profile roles are all influenced by the nurse performance with Organizational citizenship behavior<sup>(15)</sup> and positive group or organization outcomes; while Organizational citizenship behavior is an individual-level phenomenon; it has the potential to improve group and team efficiency because spontaneous, cooperative behavior is critical the hospital performance. While, negative employee outcomes include job stress, position overload and work-family conflict and citizenship fatigue<sup>(16)</sup>.

Managers of hospitals have many barriers of Organizational citizenship behavior as the following; nurses' perception of low job prestige, ageing population and disadvantage of older nurses that may cause workload, bias in treating among staff and personnel retention. In addition, new employees may not be aware of modern communication skills and information technology, as well as minimum salaries, employment law and restrictive hospital laws<sup>(17)</sup>. One of the most Organizational citizenship behaviors is a sort of aggressive behavior that produces a number of negative workplace repercussions including poor work-related attitudes, decreased psychological well-being, intention to quit, lower employee performance, subordinate's deviance and less Organizational citizenship behavior<sup>(18)</sup>. Organizational health care should enhance Organizational citizenship behavior of work team through enhancement of perceived

organizational support, organizational trust, family motivation and civility<sup>(19)</sup>.

### Significance of the Study

Staff nurses are healthcare providers who have the most important role in any healthcare organization thus; their organizational citizenship behavior (OCB) is a vital constituent of their professional performance with promising outcomes for both the staff nurses and the overall organization. In any healthcare organization, if staff nurses have no feeling of trust in co-workers, managers and organization, they will create a climate of resignation without any citizenship in their behaviors<sup>(20)</sup>. It is important to investigate the relationship between perceived organizational trust and nurse's organizational citizenship behavior to reach the organizational objectives.

### Aim of the study:

#### The aim of the study was:

To investigate the relationship between perceived organizational trust and nurse's organizational citizenship behavior at Zagazig fever hospital.

### Research questions:

- What is the level of perceived organizational trust among nurses?
- What is the level of nurse's organizational citizenship behavior?
- What is the relationship between perceived organizational trust and nurse's organizational citizenship behavior?

### Subjects and Methods:

#### Research design:

A descriptive design was adopted to carry out this study.

#### Study Setting:

This study was conducted at Zagazig Fever hospital affiliated to ministry of health, Sharqia Governorate.

### Study Subjects:

All staff nurses from the above mentioned setting who are available and agreed to participate in the study (n=100) at the time of data collection, having at least one year of experience and distributed as the following: (10 staff nurses) in Emergency Department, (7 staff nurses) in Sorting room, (4 staff nurses) in CPR room, (10 staff nurses) in Pediatric Department, (9 staff nurses) in Female Department, (10 staff nurses) in Dialyses Unit, (10 staff nurses) in Hepatic Care Unit, (15 staff nurses) in Hepatic Intensive Care Unit (HICU), (15 staff nurses) in Fever Intensive Care Unit (FICU) and (10 staff nurses) in Male Department.

### Tools of data collection:

In order to fulfill the objectives of the study two tools were used to collect necessary data:

#### Tool I: Organizational Trust Inventory (OTI)

This questionnaire is divided into two parts:- Part one: Personal and job characteristics of nurses was developed by the researcher to collect data about staff nurses' age, department gender, qualifications, marital status and years of experience.

Part 2: Organizational Trust Inventory: was developed by Atalla and Abdelaal<sup>(14)</sup> to measure staff nurses' level of organizational trust. It is 36 items, grouped under three dimensions namely: Trust in coworkers, trust in managers and trust in organization with 12 items per dimensions.

### Scoring system:

Nurses responses were rated on a five point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree). The overall score ranged from 36 to 180. Staff nurses score is considered to be low organizational trust level if it is ranged from 36 to < 85, moderate level ranged from 85 to < 133 and high level ranged from 133 to 180. The higher scoring indicates more positive perception of staff nurses about organizational trust by Atalla and Abdelaal<sup>(14)</sup>.

**Tool II:** Organizational Citizenship Behavior Scale (OCBS) was developed by Atalla and Abdelaal<sup>(14)</sup> to assess staff nurse organizational citizenship behavior level. It included 15 items grouped under five dimensions namely Altruism, conscientiousness, sportsmanship, courtesy and civic virtue with 3 items per each dimension.

**Scoring system:**

Nurses responses were rated on a five point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree). The overall score ranged from 15 to 75. Staff nurses score is considered to be low OCBs level if it is ranged from 15 to < 36, moderate level ranged from 36 to < 56 and the high level ranged from 56 to 75. The higher scoring indicates more positive perception of staff nurses about OCBs by Atalla and Abdelaal<sup>(14)</sup>.

**Content Validity and Reliability:**

The questionnaires were translated into Arabic; then content and face validity were established by a panel of five experts of nursing management department at faculties of nursing in Ain Shims University and Zagazig University. Experts were requested to express their opinions and comments on the translation of the tool and provide any suggestions. According to their opinions, all recommended modifications were performed by the researcher. Tool (I) was tested for their reliability using Cronbach's alpha, which was 0.967. Tool (II) The reliability of the questionnaire was tested using the internal consistency method that used Cronbach alpha coefficient and it was 0.725.

**Field work:**

The data collection phase of the study took two months from the middle of January to the middle of March, 2020. The final forms of the questionnaire sheets were handled to staff nurses in their work setting by the researcher to elicit their opinions. The researcher met staff nurses in their units in the morning, after noon and night shifts after finishing their work to distribute

the questionnaires after clarifying the purpose of the study. Staff nurses completed the questionnaires at the same time of distribution and took about 15-20 minutes. The researcher checked each questionnaire sheet after they had been completed to ensure the completion of all information.

**Pilot study:**

A pilot study was carried out on 10 staff nurses (10% of the study subjects) to test tool clarity and applicability of the tools. In addition to estimating time required for filling in the questionnaires. Staff nurses were selected randomly and they were not excluded from the main study sample as there were no modifications according to their responses in the pilot study.

**Administration and Ethical consideration:**

The study was approved by ethics committee and dean of the faculty of nursing, Zagazig University. An individual oral consent was received from each staff nurses included in the study after explaining nature and aim of the study. Likewise, staff nurses were given an opportunity to refuse or to participate, and they were assured that the information would be used confidentially for the research purpose only. Additionally, they aren't forced to write their names.

**Statistical Analysis:**

Data were collected, analyzed, organized, and tabulated by using statistical package of social science (SPSS) program, version 26. Quantitative data were expressed as the mean  $\pm$  standard deviation (SD) and qualitative data were expressed as absolute frequencies (number) and relative frequencies (percentage). The chi-square test was used to find the significant association between the demographic and clinical data and the outcome measures. Spearman's correlation coefficient was calculated to assess relationship between various study variables. Simple linear regression test was used to study the effect of independent

variable on the dependent variable. Cronbach alpha coefficient was calculated to assess the reliability of the scales through their internal consistency. All tests were two sided. P-value < 0.05 was considered statistically significant,  $p < 0.01$  was considered statistically highly significant and  $p\text{-value} \geq 0.05$  was considered statistically insignificant (NS).

### Results:

**Table (1)** describes personal and job characteristics of the studied nurses; the table shows that 88% of staff nurses were females compared to 12% males. Regarding their age, 32% of their age ranged between 20 to 30 years, while 29% ranged from 30 to 40 years old, and the highest percentages of them were married (78%). as well as, more than half of them have bachelor degree and specialist (53%). additionally, 31% of them have experience from 5 to 10 years.

**Table (2)** reveals mean scores of perceived organizational trust and its domains as reported by staff nurses; the highest mean score was for trust in-coworker level ( $25.88 \pm 7.94$ ), while the lowest mean was for trust in organization level ( $24.09 \pm 8.47$ ) with total mean level was  $75.42 \pm 24.63$ .

**Figure (1)** portrays that 89% of staff nurses perceived low level in total organizational trust, and (90, 91 and 90%) of them had low level of trust in (co-worker, organization and superior, respectively).

**Table (3)** displays mean scores of organizational citizenship behavior domains as reported by staff nurses. The table shows that highest mean was for courtesy level ( $12.66 \pm 1.77$ ), while, the lowest mean was for civic virtue level ( $5.59 \pm 2.531$ ) with total mean score ( $44.5 \pm 7.35$ ).

**Figure (2)** represents levels of organizational citizenship behavior domains as reported by staff nurses. It was found that (90%) of them had moderate level of total organizational citizenship behavior, (66%, 79% & 56%) had moderate levels regarding altruism, sportsmanship and

conscientiousness, respectively. While, highest percent of them (73%) had high level regarding courtesy, also, most of them (87%) had low level regarding civic virtue.

**Table (4)** presents correlations between the study variables as reported by studied nurses. This table displays that staff nurses' organizational citizenship behavior was significantly and positively correlated to their organizational trust ( $r=0.879$ ,  $p < 0.001$ , respectively).

**Table (5)** represents the relation between personal characteristics of the studied staff nurses and their level of perceived organizational trust. It was found that there was no statistically significant ( $p > 0.05$ ) relation between personal characteristics of the studied staff nurses and their level of organizational trust.

**Table (6)** portrays relation between personal characteristics of the studied staff nurses and their level of organizational citizenship behavior. It was found that there was positive statistically significant ( $p < 0.05$ ) relation between years of experience of the studied nurses and their level of organizational citizenship behavior.

### Discussion:

Work in the hospital has evolved to be demanding complex, uncertain, stressful, varied, interrelated and cognitive rather than psychically in nature. As a result, in order to complete their duties and meet their responsibilities, staff nurses must possess certain characteristics and behaviors. Organizational citizenship behavior (OCB) Hazzi<sup>(11)</sup>. Organizational citizenship behavior fosters competency and nurses' engagement, encourages teamwork and cross-organizational collaboration, lowers the cost of errors and generally creates a positive work environment. It should be voluntary not a set task or part of a person's official responsibilities and it is not acknowledged if it is not rewarded directly or through the formal organizational structure Safan et al<sup>(21)</sup>.

Staff nurses have the ability to inspire themselves; this is due to the fact that organizational trust is a major motivator of organizational citizenship activity by nurse motivated behavior, so organizational citizenship behavior is considered as one of outcomes of organizational trust Setyobudi et al<sup>(20)</sup>. Therefore this study was carried out to investigate the impact of perceived organizational trust on nurse's organizational citizenship behavior at Zagazig Fever hospital.

The findings of present study showed that the highest percentage of the staff nurses perceived low level of organizational trust (OT). This result answers the first research question. These findings could be due to the strict rules and regulations of the hospital that do not allow nurses to participate in the decision making of their work, lack of management support, not accessing information of their rights and not sharing the ideas among them. Additionally, other factors lack of superior's communication skills, abuse of the management against nursing and abandoning nursing in crises and problems.

These findings are consistent with previous studies such as that carried out by Elewa and El Banan<sup>(6)</sup>, who assessed relationship of organizational culture, organizational trust and workplace bullying among staff nurses at public and private hospitals in Egypt, that showed low organizational trust level in public hospital compared to private hospital and the other one that was done by Ali et al<sup>(22)</sup>, who explored relationship between spiritual leadership and organizational trust among nurses at Menoufia university hospitals in Egypt, that reported low organizational trust level.

On the contrary, these findings aren't in the same line with previous studies such as that carried out by Atalla and Abdelaal<sup>(14)</sup>, who investigated relationship between organizational trust and organizational citizenship behaviors from staff nurses' perspective at Alexandria main

university hospital in Egypt, that reported high organizational trust level, and the another one that done by Tabancalı and Öngel<sup>(23)</sup>, entitled relationship between organizational trust and school mindfulness among secondary and high-school in İstanbul, that reported high level of organizational trust.

As regards the total mean scores of staff nurses' dimension of perceived organizational trust; the results of the present study showed that the highest mean was for trust in co-worker level, while the lowest was for trust in organization level. This might be due to that the staff nurse' co-workers can establish supportive, helpful, truthful and cooperative environment among them that enable them to do their tasks. On the other hand, lack of management support and lack of appreciation for staff nurses might lead to low level of trust in organization.

These findings support previous studies such as that performed by Tabancalı and Öngel<sup>(23)</sup>, who reported the highest mean score was for trust in co-workers and the lowest was for trust in organization. Conversely, the findings weren't in agreement with a previous study conducted by Sarikaya and Kara<sup>(24)</sup> to determine organizational trust and organizational support as predictors of job satisfaction in Turkey, who reported that the high mean score was for trust in manager and followed by trust in co-workers then trust in organization.

The findings of the present study showed that the highest percentage of staff nurses had moderate level of organizational citizenship behavior (OCB). This result answers the second research question. These findings could be because studied nurses try to remain in their work, keep stability in their hard working conditions and support their coworkers in avoiding issues. Also, they recognize that their behaviors affect other's job, don't abuse the rights of others, help new employees and obey the hospital rules.

The present findings are in agreement with previous studies as that was performed by Metwally et al <sup>(25)</sup>, who investigated the relationship among organizational justice, transformational leadership, organizational citizenship behavior and turnover intention among nurses at Zagazig university hospitals in Egypt, they reported moderate organizational citizenship behavior level. Also Hossain <sup>(26)</sup> explored the relationship between organizational citizenship behavior and organizational commitment among clinical nurses in Bangladesh, that clarified moderate organizational citizenship behavior level and another one that was carried out by Mohammed et al <sup>(27)</sup>, who assessed the perspective of leader-member exchange and its relation with workplace empowerment and organizational citizenship behavior among nurses at Benha university hospital in Egypt, that reported the same results.

Conversely, the present findings are in disagreement with that of Mohammed et al <sup>(28)</sup>, who examined the influence of organizational justice on organizational citizenship behavior among nurses at El Demerdash university hospital in Egypt, that displayed high organizational citizenship behavior level. As well, Al-Ahmadi et al <sup>(29)</sup>, who identified the level of organizational citizenship behavior and its relation to job satisfaction in the nursing field in Jeddah, Saudi Arabia, that displayed high organizational citizenship behavior level, and Mustafa et al <sup>(30)</sup>, who determined the relation among job crafting, work involvement and organizational citizenship behavior among head nurses at Zagazig university hospitals in Egypt, and reported high organizational citizenship behavior level.

Regarding the mean score of organizational citizenship behavior domains; the results of the present study clarified that the highest mean score was for courtesy domain, while the lowest was for civic virtue domain. This might be due to the positive relationship among staff nurses that is

based on friendship, mutual respect, support and cooperation. Also, staff nurses obey the rules and regulations of the hospital as they have awareness about the importance of their job toward the patients. These results are in disagreement with previous studies as that was done by Mohammed et al <sup>(27)</sup>, who reported that the highest mean score was for civic virtue and the lowest was for courtesy and another study conducted by Jafarpanah and Rezaei <sup>(31)</sup>, who assessed association between organizational citizenship behavior and patient safety culture from nurses' perspectives: a descriptive correlational study in west of Iran, that reported the highest mean for conscientiousness and the lowest was for courtesy.

Regarding the correlation between total organizational trust and total organizational citizenship behavior as reported by studied staff nurses, it displays that staff nurses' organizational citizenship behavior was significantly and positively correlated to their organizational trust. This may be explained as the trust feeling of staff nurses stimulates their citizenship behavior toward their hospital resulting in positive effect on their performance.

As for the highly statistically significant relation between total organizational trust score and total organizational citizenship behavior score, this result supported other previous studies such as that conducted by Atalla and Abdelaal <sup>(14)</sup> and Yildiz <sup>(32)</sup>, who investigated the interactive effect of positive psychological capital and organizational trust on organizational citizenship behavior among nurses from seven hospitals in Istanbul, who showed that total organizational trust was highly statistically significant positive predictor of total organizational citizenship behavior. On the contrary, the result was in disagreement with a previous study performed by Akar <sup>(33)</sup>, who identified meta-analysis of organizational trust studies conducted in educational organizations in Turkey, who clarified moderate statistically significant

relation between organizational trust and organizational citizenship behavior.

There was no statistically significant relation between staff nurses' personal characteristics and their level of organizational trust. This result could be due to that there were other factors rather than their personal characteristics such as lack of communication skills of managers and abuse of the management against nursing. Additionally, there were other factors as abandoning nursing in crises and problems, not accessing information of their rights and not sharing the ideas among them.

This result was supported by previous study done by Omer and Gabra<sup>(34)</sup>, who assessed workplace bullying and its effect on organizational trust and turnover intention among nursing staff at Minia university hospitals in Egypt, who reported non-statistically significant relationship between organizational trust and personal characteristics, but this result didn't match previous study carried out by Tabançalı and Öngel<sup>(23)</sup>, who reported statistically significant relationship between organizational trust and personal characteristic.

It was found that there was statistically significant relation between staff nurses' years of experience and their organizational citizenship behavior only. This might be due to that the years of experience play an important role among staff nurses that helped them to recognize and firm the citizenship behaviors for the hospital. It indicates that years of experience affect positively on citizenship behaviors of staff nurses causing high quality work performance. The more the years of experience of staff nurses, the greater citizenship behavior of staff nurses.

This result is similar to previous study done by Mabrouk and El-Shrief<sup>(35)</sup>, who examined nurses' job involvement and its relation to their organizational citizenship behavior in Egypt, and reported that there was non-statistically significant relation between organizational citizenship behavior

and personal characteristics except with age. Also, this result is similar to a study performed by Hossain<sup>(26)</sup>, who clarified that there was non-statistical significance relation between organizational citizenship behavior and personal characteristics except with age. Additionally, this result is in accordance with previous study performed by Mustafa et al<sup>(30)</sup>, who reported statistically significant relation between staff nurses' years of experience and their organizational citizenship behavior only.

On the other hand, this result was in disagreement with some previous studies such as that was carried out by Metwally et al<sup>(25)</sup>, who reported that there was non-statistically significant relation between personal characteristics and organizational citizenship behavior and the study done by Mohammed et al<sup>(28)</sup>, who reported that there was non-statistically significant relation between organizational citizenship behavior of the studied nurses and their personal characteristics.

### Conclusion:

The studied nurses had a moderate level of organizational citizenship behavior, while they perceived a low level of organizational trust. Also, organizational trust was a highly significant positive predictor of organizational citizenship behavior of the studied staff nurses.

### Recommendation:

Based on findings, the study recommended:

- 1- Be fair and equitable in the making, monitoring and enforcement of all management practices.
- 2- Begin organizational support prior to the start of employment.
- 3- Provide the basic needs of nursing staff, establishment of mutual trust among them and themselves and creating a blame-free culture.



- 4- Consider the importance of the Employees and managers must have good cooperative skills and work in the field as a team in order to overcome problems and increase trust.
- 5- Holding workshops and training courses to raise the awareness of staff nurses of how to develop their OCBs.
- 6- Reward system should be introduced to staff nurses who demonstrate organizational citizenship behaviors.

**Further research:**

- Future researches are needed to investigate other factors and challenges affecting organizational citizenship behavior of staff nurses.
- There is an urgent need for intervention studies to develop strategies for enhancing organizational support and trust.
- Replication of this study in a wider context of multiple public hospitals of health sector to provide comparative design and facilitate generalization of the study findings.

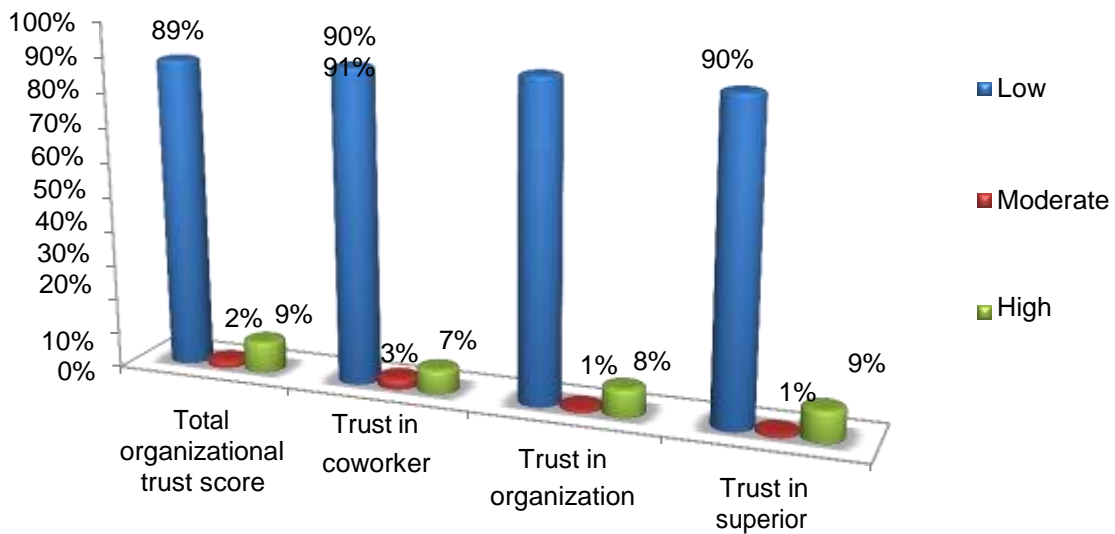
**Table 1: Percentage distribution of Personal & Job characteristics of the studied nurses (n=100).**

Characteristics	N	%
<b>Gender</b>		
Male	12	12.0
Female	88	88.0
<b>Age (year)</b>		
Less than 20 y	9	9.0
20-30	32	32.0
30-40	29	29.0
40-50	19	19.0
More than 50 y	11	11.0
<b>Mean ± SD</b>		
<b>Marital status</b>		
Married	78	78.0
Not married	22	22.0
<b>Educational qualification</b>		
Institute of Nursing	47	47.0
Bachelor of Nursing	53	53.0
<b>Job position</b>		
Technical	47	47.0
Specialist	53	53.0
<b>Years of experience</b>		
Less than 5 y	10	10.0
5-10 y	31	31.0
10-15 y	28	28.0
15-20 y	20	20.0
More than 20 y	11	11.0

**Table 2: Mean scores of perceived organizational trust domain as perceived by staff nurses (n=100).**

Items	Mean ±SD
	Range:- 36- 180
Trust in-Coworker	25.88±7.94
Trust in Organization	24.09±8.47
Trust in Superior	25.45±9.04
Total organizational trust	75.42±24.63

**Figure 1: Levels of perceived organizational trust and its domains among the studied staff nurses (n=100).**



**Table3: Mean scores of organizational citizenship behavior domains as reported by staff nurses (n=100).**

Items	Mean ±SD Range :- 15-75
Altruism level	9.13 ± 2.43
Courtesy level	12.66 ± 1.77
Civic virtue level	5.59 ± 2.531
Sportsmanship level	8.88 ± 1.39
Conscientiousness level	8.24 ± 2.11
<b>Total organizational citizenship behavior</b>	<b>44.5 ± 7.35</b>

Figure 2: Levels of organizational citizenship behavior and its domains as reported by staff nurses (n=100).

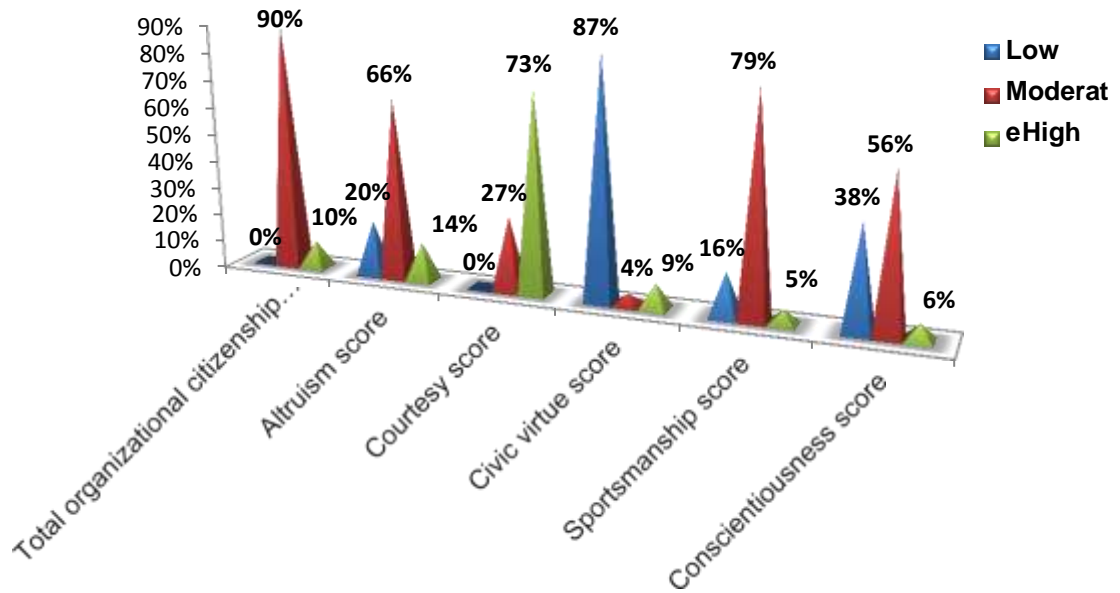


Table 4: Relation between the study variables (Perceived Organizational trust and Organizational citizenship behavior) (n=100).

Study Variables	Perceived Organizational trust	
	R	p
Organizational citizenship behavior	0.879	<0.001**

**Table 5: Relation between personal & Job characteristics of the studied nurses and their level of organizational trust (n=100).**

Personal characteristics		Total perceived organizational Trust level						$\chi^2$	P-value
		Low (n=89)		Moderate (n=2)		High (n=9)			
		No.	%	No.	%	No.	%		
<b>Gender</b>	Male	12	13.5	0	0.0	0	0.0	1.685	0.431 NS
	Female	77	86.5	2	100.0	9	100.0		
<b>Age in years</b>	Less than 20 y	9	10.1	0	0.0	0	0.0	7.105	0.525 NS
	20-30	31	34.8	0	0.0	1	11.1		
	30-40	25	28.1	1	50.0	3	33.3		
	40-50	15	16.9	1	50.0	3	33.3		
	More than 50 y	9	10.1	0	0.0	2	22.2		
<b>Marital status</b>	Married	67	75.3	2	100.0	9	100.0	3.486	0.175 NS
	Not married	22	24.7	0	0.0	0	0.0		
<b>Scientific qualification</b>	Institute of Technical healthy	41	46.1	1	50.0	5	55.6	0.303	0.860 NS
	Bachelor of Nursing	48	53.9	1	50.0	4	44.4		
<b>Job position</b>	Technical	41	46.1	1	50.0	5	55.6	0.303	0.860 NS
	Specialist	48	53.9	1	50.0	4	44.4		
<b>Years of experience</b>	< 10y	40	44.9	0	0.0	1	11.1	5.286	0.071 NS
	> 10 y	49	55.1	2	100.0	8	88.9		

NS: statistically non significant ( $p>0.05$ )**Table 6: Relation between personal & Job characteristics of the studied nurses and their level of organizational citizenship behavior (n=100).**

Personal characteristics		Total organizational citizenship behavior level				$\chi^2$	P-value
		Moderate (n=90)		High (n=10)			
		No.	%	No.	%		
<b>Gender</b>	Male	12	13.3	0	0.0	FET	0.261 NS
	Female	78	86.7	10	100.0		
<b>Age in years</b>	Less than 20 y	9	10.0	0	0.0	7.038	0.134 NS
	20-30	31	34.4	1	10.0		
	30-40	26	28.9	3	30.0		
	40-50	16	17.8	3	30.0		
	More than 50 y	8	8.9	3	30.0		
<b>Marital status</b>	Married	68	75.6	10	100.0	FET	0.112 NS
	Not married	22	24.4	0	0.0		
<b>Scientific qualification</b>	Institute of Technical healthy	41	45.6	6	60.0	FET	0.509 NS
	Bachelor of Nursing	49	54.4	4	40.0		
<b>Job position</b>	Technical	41	45.6	6	60.0	FET	0.509 NS
	Specialist	49	54.4	4	40.0		
<b>Years of experience</b>	< 10y	40	44.4	1	10.0	FET	0.044*
	> 10 y	50	55.6	9	90.0		

NS: statistically non significant ( $p>0.05$ ) \*: statistically significant ( $p<0.05$ ) FET: Fisher's Exact Test

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