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Impact of Psychological Capital and Social Capital on the Job Stress and Deviant Behaviors in Clinical Staff

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Abstract

Background and Objectives: Working in hospital is stressful, and this may result in deviant behaviors of clinical staff and thus irreparable damages to the patients' health. It is, therefore, crucial to empower hospital workers in managing job stress to ensure high quality of healthcare. Psychological and social capitals (SCs) have been shown to influence organizational behaviors of the employees. The aim of the present study was to investigate the impact of psychological capital (PC) and SC on job stress and deviant behaviors in clinical staff.

Methods: A random sample of 375 individuals was randomly selected from among the clinicians of hospitals of Tabriz city (North-Western Iran). Data were collected using valid and reliable questionnaires. The obtained data were summarized using descriptive statistical methods. The relationship between the variables was explored by Pearson correlation coefficient and multiple regressions analysis.

Findings: Higher PC and SC negatively predicted both job stress and deviant behaviors. In addition, the negative correlation between PC and job stress was found to be stronger in the employees with higher SC.

Conclusions: Our study, hence, suggests promotion of PC and SC in clinical staff as an effective approach to empower them in managing stressful situations. Increased PC may also alleviate the rate deviant behaviors in clinicians, resulting in higher performance of healthcare human resources.

Keywords: Psychological capital, Social capital, Job stress, Deviant behaviors, Healthcare human resources, Human resources performance

Background and Objectives

Human resources is the key capital of contemporary organizations to realize their strategic goals. A high performance of human resources is a perquisite to achieving a high overall organizational effectiveness. Among the most important factors negatively influencing the efficiency of human resources is job stress.[1] The World Health Organization (WHO) has declared job stress as an epidemic phenomenon. According to National Institute of Health job stress occurs when the job requirements and work conditions do not match the employees' expectations and ideals.[2] Job stress may reduce cooperative behavior, increase backbiting, and reduce productivity and motivation among the staff. Particularly and more harmfully, the job stress is a significant resource for the deviant behaviors of

the staff.[3-6] Deviant behaviors are deliberate behaviors violating accepted organizational norms and rules, including ridicule, physical assault, apathy, lack of overt and covert compliance with laws, lack of attention to regulations and guidelines, and damaging the organizational properties.[7,8] These behaviors are a responsible for a large waste of organizational resources and reduced quality of work life and human resources performance, particularly in healthcare organizations.[9,10]

As one of the most complex organizations, hospitals are characterized by a stressful workplace environment, which is a potential source of deviate behaviors, particularly in clinical staff. Given their close relationship with the patients and their direct role in healthcare processes, the mental and physical health of the clinical staff has significant impact on the performance of the health system.[10-12] Considering the rapid and continuous transformation of the community, healthcare administrators require to constantly seek novel approaches to control stress

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and its consequences in their employees. Given the difficulty to gain control over emergence and the strength of the stressors, the most practical way to eliminate the adverse effect of job stress is probably to empower the employees in managing the stressful situations.

Stress arises when one confronts a difficult situation and lacks the required resources to manage that. Psychological capital (PC) is increasingly regarded as a resource to deal with stressful conditions. By positively influencing one's understanding of stressful situation, PC alleviates one's negative psychological and physical reactions to the stressors.[13,14] Higher level of PC has been associated with reduced anti-productive behaviors.[15] Individuals with high PC are able to return to their reference mental state (flexibility), use the pressures inversely (hope), resist against pressures (self-efficacy), and know that pressure and stress will soon reduce (optimism).[16] Several studies have shown that PC is associated with reduced absence, job stress, pessimism, and tendency to leave the job in the employees, on the one hands, and their improved job satisfaction, commitment and organizational citizenship behaviors, on the other hands.[17-21]

Nonetheless, PC is not developed independently. People are living in a cultural and social environment and constantly receive feedbacks from it; these feedbacks play role in the development of mental capabilities and social skills.[22] Therefore, development of PC is largely influenced by individuals' interactions in the social networks and the norms, values, and understandings shared in these networks which provided a basis for cooperation of members.[23-25] In another word development of PC in an individual is associated with their social capital (SC).

Despite being important concepts with established impact on organizational outcomes, PC and SC have not been adequately explored in the Iranian context, particularly in the healthcare domain. The aim of the present study, hence, was to help address this gap by investigating the effect of PC and SC and the interaction between the two constructs on job stress and deviant behaviors of clinical staff. To this end, we formulate and test the following hypotheses:

Hypothesis 1: PC negatively predicts job stress.
Hypothesis 2: PC negatively predicts deviant behaviors.
Hypothesis 3: SC negatively predicts job stress.
Hypothesis 4: SC negatively predicts deviant behaviors.
Hypothesis 5: The interaction of PC and SC negatively predicts job stress.
Hypothesis 6: The interaction of PC and SC negatively predicts deviant behaviors.

Methods

Setting and Sample

The study population was all clinical staff (12512 individuals) of East-Azerbaijan province (Iran), including health workers, nurses, operating room nurses, midwives, and doctors of the hospitals who had at least one year of work experience. A random sample of 375 individuals was selected based on Cochran formula.

Data Collection

PC was measured using the 24-item questionnaire of Luthans and Avolio.[26] The reliability of the tool was confirmed by Cronbach α of .95. SC was measured by 19-item questionnaire developed by Alizadeh Aghdam et al.[27] The reliability of the tool was ensured by Cronbach α of .96. Job stress was measured by a 6-item questionnaire developed by House and Rizzo.[28] The reliability of the tool was approved by Cronbach α of .88.[2,28] Organizational deviant behaviors were assessed by the 12-item questionnaire of Bennett and Robinson.[8] A satisfactory reliability and validity of this questionnaire in the Iranian context was reported.[5] The reliability was further confirmed by Cronbach α of .88.

The questionnaires were administered through face-to-face meeting.

Ethical Issues

An approval for conduction of the study was obtained from the Ethical Committee of the Azerbaijan Shahid Madani University. All target participants were briefed on the objectives of the study and their verbal consent was obtained before administrating the questionnaires.

Data Analysis

The obtained data were summarized using descriptive statistical methods. The relationship between the variables was explored by Pearson correlation coefficient and multiple regressions analysis. All analyses were carried out by the SPSS version 19 software package.

Results

Of the total sets of questionnaires distributed, 350 valid completed sets were obtained giving a response rate of 93%. Table 1 presents the demographic characteristics of the sample. Among participants, 81% were females and 70% held a BSc degree. The participants' age and work experience averaged at 33.2 ± 8.5 and 12.3 ± 8.5, respectively.

Table 2 presents the correlations between the study

Table 1. Demographic Characteristics of the Participants

Variable	No.	Percent
Sex (n = 350)		
Male	285	81
Female	65	19
Degree (n = 350)		
Diploma and AD	46	13
BS	247	70
MS	22	6.2
PhD	35	10.8

variables. As seen, all correlations are significant at 0.01 level.

Table 3 shows the results of multiple regressions analysis. As seen, the PC significantly predict (negatively) both job stress (β = -0.377 and $P<.01$) and deviant behaviors (β = -0.349 and $P<.01$), confirming the Hypotheses 1 and 2, respectively. In a similar fashion, SC is found to be a significant predictor (negatively) of both job stress (β = -0.486 and $P<.01$) and deviant behaviors (β = -0.481 and $P<.01$), confirming the Hypotheses 3 and 4, respectively. In addition, the interaction of PC and SC is found to be a significant predator (negatively) of both job stress (β = -0.88, $P<.01$) and deviant behaviors (β = 0.136, $P<.01$), confirming the Hypotheses 5 and 6, respectively.

Discussion

This study explored the role of PC and SC in job stress and deviant behaviors. Our results confirmed that PC and SC are negatively correlated with both of job stress. In addition, it was found that SC modifies the relationship between PC and job stress. This finding implies that PC have a stronger decreasing effect on job stress in the individuals with higher SC. In line with this finding, Adler and Kwon[29] showed that changes in PC at both individual and public levels is related to changes in SC. Congruently, Simsek and Balban Sali[17] found that students addicted to the Internet were facing decrease of PC because of weak social interactions. Avolio[18] also suggested a positive relationship between

SC and PC. On the other hand, it has been shown that individuals with higher PC are less stressed when confronting stressful situation due to their self-confidence in handling the situation.[19] Lazarus[14] proposed the PC as a factor positively influencing the adaptability with stress. Avey et al[9] also identified a significant negative relationship between PC and job stress, and concluded that with increasing PC and organizational supports the individuals become more resistant against job stress.

Our study further confirmed PC is negative predictors of deviant behaviors in healthcare staff. Consistently, the study of Avey et al[21] showed that employees with higher PC are open to development of their positive characteristics and exhibit higher levels of organizational citizenship behaviors. These individuals are more optimistic about organizational changes that may create stresses and are more adaptive to them, compared with employees with low PC. It has been shown that, individuals with higher PC can better cope with stressful conditions, while people with lower PC confront stressful situation as a threat, thus start to respond negatively to it.[19] According to Luthans et al[15] promotion of PC empowers employees to responding appropriately to the stressful conditions. Reduced job stress in individuals with higher PC, in turn would result in lower deviant behaviors in them as observed in our and previous studies.

We also found SC to be a negative predictor of deviant behaviors. The relationship between members of a social network by promoting norms and trust results in realization of the group's collective objectives. Indeed, the group members use their membership as leverage to achieve common goals. The respect of the group members to the norms and their commitment to realize common objectives, thus would lead to more positive social behaviors and less deviant behaviors in them. This argument is supported by the findings Gatti and Tremblay,[30] and Akçomak[31] who showed that SC has preventive effect on aggressive behaviors. Navabakhsh and Vahedi[32] also showed that members of families with higher SC exhibit less abnormal behav-

Table 2. Correlations Between the Research Variables

Variable	Psychological Capital	Social Capital	Job stress	Deviant Behaviors
Psychological capital	1			
Social capital	0.762[a]	1		
Job stress	-0.744[a]	-0.775[a]	1	
Deviant behaviors	-0.748[a]	-0.773[a]	0.754[a]	1

[a] $P < .01$ (2-sided).

Table 3. Multiple Regressions Analysis of PCs and SCs and Job Stress and Deviant Behaviors

	Job Stress	Deviant Behaviors
	β	β
PC	-0.377[a]	-0.349[a]
SC	-0.468[a]	-0.481[a]
Interaction of PC and SC	-0.88[a]	-0.136[a]

Abbreviations: PC, psychological capital; SC, social capital.
[a] $P < .05$ (2-sided), β = standard regression coefficient.

iors. According to Ahmadi[33] improvement of SC as a reliable approach to reducing the probability of deviant behaviors.

Conclusions

Our results confirmed that higher PC and SC are associated with lower job stress and deviant behaviors in clinical staff. In addition, it was found that this negative correlation between PC and job stress is stronger in the employees with higher SC. Our study hence suggests the promotion of PC and SC in clinicians as an effective approach to empower them in coping with stressful situations. Increased PC may also alleviate the rate deviant behaviors in clinicians, resulting in higher performance of hospital human resources.

Abbreviations

(PC): psychological capital; (SC): social capital

Authors' Contributions

The authors contributed equally to this study.

Competing Interests

The authors declare no competing interests.

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