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Research Article

Relational Model of Organizational Politics Perception, Job Satisfaction, Job Stress, and Organizational Com-mitment in Hospital Nursing Staff

Abstract

Objectives: This study investigated the correlations between the organizational politics perception, job satisfaction, job stress, and organizational commitment of the hospital employees in a medical centre. This will allow managers at various levels to understand better the organizational politic perception of the hospital nursing staff, which will enable them to reduce the negative impacts of hospital nursing staff's organizational politics perception and job stress, and improve the job satisfaction and organizational commitment of hospital employees. Accordingly, the hospital will become more competitive and achieve sustainable operation.

Methods: We adopted a cross-sectional design using a questionnaire survey. In this study, the convenience sampling method was applied to the nurses of the hospital. A total of five hundred questionnaires were distributed between March 2017 and May 2017, and four hundred and fifty seven ones were returned; 448 of the copies were valid, with a valid response rate of 89.6%. The SPSS 18.0 and Amos 18.0 (structural equation modeling) software were used for data analysis.

Results: Hospital nursing staff's organizational politics perception has a significant negative effect on their job satisfactionand organizational commitment. Hospital nursing staff's organizational politics perception has a significant positive effect on their job stress. Hospital nursing staff's job satisfaction has a significant positive effect on their organizational commitment. Hospital nursing staff's job stress has a significant negative effect on their organizational commitment.

Conclusion: This study recommends that hospitals establish good communication management mechanisms so that supervisors can effectively communicate with hospital nursing personnel and increase mutual reliance. This can reduce effects from political behaviour and not let hospital nursing personnel feel stressed because of political behaviour. Hospital nursing personnel should be appropriately encouraged to increase their work motivation and service spirit. These results indicate that to reduce hospital personnel work stress, hospital nursing management should pay attention to the function of each position and determine whether the workload of each hospital nurse is appropriate. Positive advice and encouragements for hospital nursing personnel must be given and guidance for inadequacies must be provided to allow hospital nursing personnel in the team to have the opportunities to learn and grow.

Introduction

Following the global economic downturn, numerous changes have occurred in the management environment: competition between companies has become fiercer and the accessible resources for an organization's decision making, operations, and implementations are becoming more limited. How to utilize limited resources to create a competitive advantage for the company will be a key factor for corporate survival in the future. Because of selfishness, general organization members will use official and unofficial methods or legal and illegal methods to affect resource allocation in hopes of maximizing their benefits [1,2]. These attempts to influence an organization's decision making are a broad type of political behaviour, in which everyone works to gain certain returns. These returns may be physical/economical (e.g., salary, rewards, and benefits) or abstract (e.g., social status). To obtain the aforementioned results, individuals must exert great efforts. Thus, when an individual is looking for a job or deciding on a company to work for, this is akin to making a general investment with individual resources [3,4].

Workplace is a result of different individuals or groups interacting with one another (salary is exchanged for performance or production). However, in some organizations, some members can form small groups and use "competitive" or "self-service" work methods. We refer to these organizations as having "political" work environments. When politics exists in the workplace, an individual needs to use competition and increase their authority to determine their amount of reward [5,6]. This in turn impacts the original harmonious work place operations. Because most people will not belong to this small group, they will be suspicious of the expected results. When the reality does not match their expectations, the individual's dissatisfaction towards the political environment will create work stress [7]. To improve and ensure organizational efficacy, the organization not only has to properly operate production equipment, financing, and other market related resources, but the human resources (HR) factors must also be considered [8].

Therefore, in terms of HR management, creating a highly efficient work environment and retaining superior workers to ensure organizational efficacy are of the utmost importance. Thus, work environment atmosphere and personnel stability are topics worth exploring. According to a study by Ferris [9], many HR decision making problems that involve salary and promotion can potentially be affected by the organization's internal political behaviour. When an organization member feels that the existence of organizational politics has changed the member's expected compensation, it can produce negative responses in the member. In the short-term, this may be in the form of decreased job involvement, dissatisfaction, stress, anxiety, or absenteeism. In the long-term, the member may resign [10,11].

Therefore, this study investigated the correlations between the organizational politics perception, job satisfaction, job stress, and organizational commitment of the hospital nurses in a medical centre. This will allow managers at various levels to understand better the organizational politic perception of the hospital nursing staff, which will enable them to reduce the negative impacts of hospital nursing staff's organizational politics perception and job stress, and improve the job satisfaction and organizational commitment of hospital nurses. Accordingly, the hospital will become more competitive and achieve sustainable operation.

Literature Review

Relationships among organizational politics perception and job satisfaction

Cropanzano [7], indicated that awareness of organizational politics is negatively correlated with job satisfaction and is caused by conflicts in social contact and exchange relationships (including economic and social relationships) between employers and employees. A study by Ferris [9], indicated that awareness of organizational politics is strongly and negatively correlated with job satisfaction. They maintain that job satisfaction will decrease as political awareness increases. Cropanzano [7], studied full-time and part-time employees and verified that awareness of organizational politics is

significantly and negatively correlated with job satisfaction. Vigoda [11] showed that awareness of organizational politics is negatively correlated with job satisfaction. Hence, according to the mention above, we could conclude that higher levels of hospital nursing staff's organizational politics perception will lead to lower job satisfaction. Therefore, the *hypothesis 1* is proposed.

Hypothesis 1: Hospital nursing staff's organizational politics perception has a significant negative effect on their job satisfaction.

Relationships among organizational politics perception and job stress

Ferris [9] proposed a framework of variables related to awareness of organizational politics, and in recent years, subsequent researchers have expanded on the original Ferris model with new contributions such as awareness of organizational politics having a negative correlation with organizational commitment [5,6,12] and political awareness having a significantly positive effect on work stress [13,14]. Vigoda [11], proposed that the work stress variable caused by awareness of organizational politics includes three aspects, namely, mental, physical, and behavioural aspects [8]. When employees cannot adequately relieve their work stress, it can directly affect the organization's operations and output [15]. From the abovementioned literature, we infer that higher levels of hospital nursing staff's organizational politics perception will lead to more hospital nursing staff's work stress. Therefore, the following hypothesis is formed:

Hypothesis 2: Hospital nursing staff's organizational politics perception has a significant positive effect on their job stress.

Relationships among organizational politics perception and organizational commitment

Nye [16], asserted that political awareness is the result of the lack of a fair support system. That is, the presence arbitrary policymaking and the politicization of the work environment. From employees' viewpoint, organizational support and political behaviour are perhaps a reflection of organizational climate. Thus, the higher the awareness of organizational politics is, the worse the organizational climate is. Therefore, a poor organizational climate will have a negative impact on the organizational commitment and job satisfaction of employees who choose to stay in the company. Allen [17], proposed that "sustained commitment" refers to when an individual who stays in an organization because he/she knows that leaving the organization will result in him/her losing valuable affiliated benefits (such as rewards or retirement funds) [18]. In a study on full-time and part-time employees, Cropanzano [7], discovered that awareness of organizational politics and organizational commitment are significantly and negatively correlated [19]. Accordingly, the hypothesis 3 is proposed.

Hypothesis 3: Hospital nursing staff's organizational politics perception has a significant negative effect on their organizational commitment.

Relationships among job satisfaction and organizational commitment

Best [20], indicated that when employees' job satisfaction increases, their commitment towards the organization also increases. Tourangeau [21,22], all indicated that job satisfaction is an antecedent variable of organizational commitment, or that job satisfaction is the result of organizational commitment, meaning the two have mutual positive effects on each other. Cropanazano [7], indicated that job satisfaction has a significant and positive effect on organizational commitment. Sarminah [23], studied the correlation between job satisfaction, organizational commitment, and organizational performance of 584 Telekom Malaysia management personnel, and found that their job satisfaction had a significant and positive effect on organizational commitment. Munevver [24], indicated that for a school, the importance of teachers' job satisfaction and organizational commitment is as important as the productivity and professional ability of a business. The study showed that job satisfaction had a significant and positive effect on affective commitment and normative commitment. Consequently, the following hypothesis is proposed.

Hypothesis 4: Hospital nursing staff's job satisfaction has a significant positive effect on their organizational commitment.

Relationships among job stress and organizational commitment

Beehr [25] proposed that work environment stress will have a negative effect on people's health and mental wellbeing as well as on an organization (e.g., absenteeism, resignation, negligence). Jamal [26], maintained that work environment stress is directly related to an organization's decline. Karatepe [27], maintained that work stress has a negative impact on an individual as well as on an organization and its economic aspects. Costs caused by stress can be significant because of time loss, a decrease in production capacity, and occurrence of accidents. Vigoda [10] maintained that when employees' work stress cannot be adequately relieved, it can directly impact the organization's operation and production. Thus, focus should be placed on decreasing the sources and the impact of stress. Fernando [28] evaluated the correlations between work stress, organizational commitment, and physical illnesses of North West teachers in South Africa and found that work stress decreased organizational commitment. Consequently, the following hypothesis is proposed.

Hypothesis 5: Hospital nursing staff's job stress has a significant negative effect on their organizational commitment.

Conceptual framework of the theoretical relationships

Therefore, according to the literature review, organizational politics perception is the independent variable, job satisfaction and job stress are the intervening variables, and organizational commitment is the dependent variable, in order to discuss the correlation among all the variables. The overall research framework is shown in figure 1.
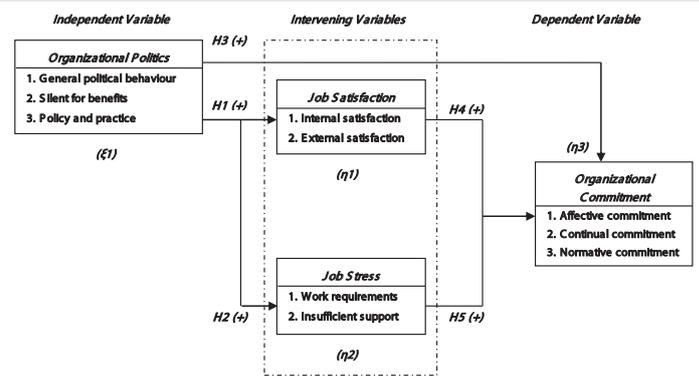

Figure 1: Conceptual framework of the relationships among organizational politics perception, job satisfaction, job stress, and organizational commitment.

Methods

Research subject and sampling method

In order to survey a diverse and representative sample, nurses in one large and influential hospital in southern Taiwan were surveyed. We adopted a cross-sectional design using a questionnaire survey. In this study, the convenience sampling method was applied to the nurses of the hospital. A total of five hundred questionnaires were distributed between March 2017 and May 2017, and four hundred and fifty seven ones were returned; 448 of the copies were valid, with a valid response rate of 89.6%.

Study tools

This study adopted a 5-point Likert scale for the questionnaire which comprises questions already developed in foreign studies and modified to serve the study purposes. First, dimensions of questionnaire forms were obtained from the literature and used to compile questionnaires. Second, the dimensions were slightly modified to create initial questionnaires based on the research purposes and industry features. Third, tests were repeatedly administered to three professional professors in the industry, and to four medical specialists and seven nurses with long-term experience. Fourth, a pilot run of the questionnaire was administered to 38 nurses. A total of 35 valid questionnaire forms were gathered, and the results indicated that the reliability was 0.77 to 0.91 meeting the acceptable standard of 0.7 recommended by Nunnally [29]. Finally, the questionnaire was officially released. The questionnaire scale used was a 5-point Likert scale, where 1 represents extreme disagreement and 5 represents extreme agreement. Table 1 summarizes constructs and variables, including operational definitions for all variables. Questionnaires were examined for reliability and validity as follows:

1. Reliability analysis: Principal component factor analysis was used to extract major contributing factors, and varimax of the orthogonal rotation was performed to maximize the differences in factor loading carried by every common factor after the rotation to help recognize common factors. Thus, as table 2 illustrates, the analytical results indicated that all Cronbach's α values exceeded 0.7 [29-31].

Table 1: Summary of constructs and variables.

Construct	Variable	Operational Definition	References
Organizational Politics	General political behaviour	Degree that the hospital employees being aware of other members engaging in unofficial political behaviour.	[6,10]
	Silent for benefits	Degree that the hospital employees perceived that they should avoid expressing their opinions and position in the organization to avoid bad fortune.	
	Policy and practice	Degree that the hospital employees were aware that salary, promotion fairness, and the system in the organization were inconsistent.	
Job Satisfaction	Internal satisfaction	The opportunities of hospital employees to demonstrate abilities, sense of achievement obtained from work, ethical values of the work, opportunities to provide services.	[42,43]
	External satisfaction	Job content, salary, unobstructed channels for promotion, work environment and equipment for hospital employees.	
Job Stress	Work requirements	Refers to the stress produced by hospital employees' job duties.	[44,45]
	Insufficient support	Refers to the stress created as a result of lack of support in hospital employees' work.	
Organizational Commitment	Affective commitment	Degree that the hospital employees' mental or emotional recognition of the organization and their evaluation of their relationships with the organization.	[46,47]
	Continual commitment	Degree that the hospital employees being aware of the cost of resigning and choosing to remain in the organization.	
	Normative commitment	Degree that the hospital employees' value perception that loyalty to the organization was necessary and must be followed, and perceived that they had a moral obligation and duty to remain in the organization.	

2. Construct convergent validity (confirmatory factor analysis): The confirmatory factor analysis could gain higher recognition than expert content validity [32,33], and the results for all dimensions are listed in table 3. All of the adequacy indicators were close to the ideal. Parameter (λ) between each latent variable and manifest variable were estimated to determine the significance of the estimated parameter (λ) in order to evaluate convergent validity. Thus, as table 4 shows, the t values for the factor loading of all measurement items reached the level of significance (p<0.01), no single factor included only one question, and the composite reliability values for all constructs were greater than 0.6, which demonstrated satisfactory convergent validity [32,34].

Data analysis methods

The SPSS 18.0 and Amos 18.0 (structural equation modeling) statistical software packages were used for data analysis and processing, including:

1. Descriptive statistical analysis: To see the sample characteristics.

2. Structural equation modeling (SEM): According to and by Joreskog [34,35], structural equation modeling clarifies the extent of relationships between variables as well as the chain of cause and effect [36,37]. Restated, SEM results do not merely show empirical relationships between variables when defining the practical situation. For this reason, SEM was used to test the Hypotheses 1 to 5. This study also used several indices, including Chi-square ratio (< 3), goodness of fit index (GFI> .9), adjusted goodness of fit index (AGFI> .8), normal fit index (NFI> .9) and root mean square of standardized residual (RMSR< .08) to evaluate overall model fitness [38,39].

Ethical considerations

Upon approval by the hospital Institutional Review Board, the study was then carried out with participants' written

Table 2: Factor naming and reliability analysis of constructs.

Construct	Factor Name	Cronbach'α Value
Organizational Politics		
	General political behaviour	0.907
	Silent for benefits	0.851
	Policy and practice	0.882
Job Satisfaction		
	Internal satisfaction	0.883
	External satisfaction	0.915
Job Stress		
	Work requirements	0.911
	Insufficient support	0.868
Organizational Commitment		
	Affective commitment	0.873
	Continual commitment	0.929
	Normative commitment	0.850

Table 3: Convergent validity analysis.

Indicator	Organizational Politics	Job Satisfaction	Job Stress	Organizational Commitment	References
χ^2 / df. (< 3)	2.80	2.52	2.93	2.91	[32]
GFI (> .9)	0.91	0.93	0.90	0.91	
AGFI (> .8)	0.90	0.91	0.84	0.87	
NFI (> .9)	0.92	0.93	0.90	0.91	[38]
RMSR (< .08)	0.05	0.04	0.07	0.06	

Note. χ^2 / df. = Ratio of Chi-square; GFI = Goodness of Fit Index; AGFI = Adjusted GFI; RMSR = Root Mean Square of Standardized Residual.

consent; participant personal data were kept anonymous and confidential and used only for research purposes. The response period was limited to two months. An introduction letter was attached to the questionnaire to explain the purpose of the study and to ensure respondent confidentiality. Anyone who

Table 4: Confirmatory factor analysis of all the constructs.

Construct	Variable / Question Item	Standardized Loading	Measurement Error	Composite Reliability (>0.6)	AVE (>0.5)
Organizational Politics	**General political behaviour**				
	1. In this hospital, no one dares to offend influential groups or individuals in the department.	0.91*	0.17	0.93	0.81
	2. In this hospital, some people step on others to gain advantage for themselves.	0.92*	0.15		
	3. In this hospital, I have seen colleagues omit or give selective information to twist information other people needed to benefit themselves.	0.87*	0.24		
	Silent for benefits				
	4. In this hospital, it is best not to meddle in other people's businesses.	0.85*	0.28	0.87	0.68
	5. In this hospital, sometimes it is better to remain silent then to resist the organization.	0.82*	0.33		
	6. In this hospital, sometimes it is better to tell people what they want to hear than to tell them the truth.	0.81*	0.34		
	Policy and practice				
	7. In this hospital, not one promotion I have experienced conformed to promotion policy regulations.	0.86*	0.26		
	8. In this hospital, salary and promotion regulations are not related to actual implementation.	0.91*	0.17	0.91	0.77
	9. In this hospital, there is no clear rule on when hospital employees get raises and promotions.	0.87*	0.24		
Job Satisfaction	**Internal satisfaction**				
	1. My work gives me the opportunity to show my abilities.	0.81*	0.34		
	2. I gain a sense of accomplishment from my work.	0.70*	0.51		
	3. I am satisfied with the self-growth that I get from work.	0.80*	0.36	0.89	0.63
	4. I have sufficient ability to carry out my present duties.	0.83*	0.31		
	5. I feel that my work is very meaningful.	0.81*	0.34		
	External satisfaction				
	6. I feel satisfied about the current work environment and equipment.	0.80*	0.36		
	7. Compared with other hospital employees, I am satisfied with my current salary.	0.83*	0.31		
	8. My current job offers me the opportunity for promotions.	0.87*	0.24	0.92	0.69
	9. I am satisfied with my interactions with hospital colleagues.	0.82*	0.33		
	10. When I have a good work performance, I am praised by others.	0.84*	0.29		
Job Stress	**Work requirements**				
	1. I often feel that my workload is too heavy.	0.91*	0.17		
	2. I often feel that I have a lot of work stress.	0.92*	0.15	0.93	0.81
	3. I often feel that the amount of work means that I cannot complete it on time.	0.87*	0.24		
	Insufficient support				
	4. I often feel that my work lacks opportunities for promotions.	0.82*	0.47		
	5. I often feel that my work lacks decision making participation.	0.81*	0.38	0.86	0.68
	6. I often feel that my supervisor does not give me sufficient support.	0.84*	0.29		
Organizational Commitment	**Affective commitment**				
	1. I am happy that I can invest my future professional career in this hospital.	0.79*	0.38		
	2. I am very happy to discuss my hospital with people outside of this hospital.	0.80*	0.36		
	3. I do not adapt easily to other hospitals.	0.83*	0.31	0.90	0.65
	4. I have an emotional belonging towards this hospital.	0.81*	0.34		
	5. This hospital has a deep personal meaning to me.	0.81*	0.34		
	Continual commitment				
	6. It would be difficult for me to leave this hospital right now.	0.81*	0.34		
	7. My life would become chaotic if I leave this hospital right now.	0.82*	0.33		
	8. I would pay a huge price for leaving this hospital right now.	0.83*	0.31	0.92	0.71
	9. For now, I wish to remain at this hospital.	0.90*	0.19		
	10. I believe that I would have few other choices if I were to leave this hospital.	0.85*	0.28		
	Normative commitment				
	11. I feel I must be loyal to the hospital I am currently serving at.	0.81*	0.34		
	12. I believe that frequently changing jobs is not ethical.	0.70*	0.51		
	13. Maintaining loyalty and ethical responsibility are the main reasons why I stay at this hospital.	0.80*	0.36	0.89	0.63
	14. Assuming that other hospitals can provide me with better salary; I would not leave the hospital I am currently serving at.	0.83*	0.31		
	15. I have been taught to be loyal to this hospital.	0.81*	0.34		

Note. * t- value > 2; AVE= Average Variance Extracted.

was also interested in learning about the result of this study was able to request a copy through the contact address provided in the questionnaire.

Results

Characteristics of samples

Table 5 shows the demographic data of the sample population in this study. In terms of age, most were 31~40 (45.8%). In terms of educational level, most had a bachelor's degree (56.3%). In terms of marital status, most were married (65.4%). As for seniority, most were 6-10 years (43.1%), and for job department, most were working in the surgical department (32.1%) (Table 5).

Structural Equation Modeling (SEM)

Hypotheses 1 to 5 in this study are demonstrated to be significant, as in table 6. Hospital nursing staff's organizational politics perception has a significant negative effect on their job satisfaction (γ_{11}= −0.60, p< .01) and organizational commitment (γ_{31}= −0.64, p< .01). Hospital nursing staff's organizational politics perception has a significant positive effect on their job

Table 5: Descriptive statistics of sample (N= 448).

Description	Frequency	Percentage (%)
Gender		
Male	39	8.7
Female	409	91.3
Age		
30 years and below	32	7.1
31-40 years	205	45.8
41-50 years	173	38.6
51 years and above	38	8.5
Education		
High school and below	35	7.8
Junior college	59	13.2
Bachelor's degree	252	56.3
Master's/Doctorate degree	102	22.7
Marriage		
Married	293	65.4
Not married	155	34.6
Seniority		
0-5 years	113	25.2
6-10 years	193	43.1
11 years and above	142	31.7
Department		
Internal medicine	111	24.8
Surgical	144	32.1
Gynecology and pediatrics	107	23.9
Inspection management	31	6.9
Administrative staff	42	9.4
Others	13	2.9

Table 6: Results of structural equation modeling.

Path	Path name	Path coefficient	t Value
Organizational Politics Perception (ξ1)→ Job Satisfaction (η1) (H1)	γ11	-0.60	-28.88**
Organizational Politics Perception (ξ1)→ Job Stress (η2) (H2)	γ21	0.59	27.15**
Organizational Politics Perception (ξ1)→ Organizational Commitment (η3) (H3)	γ31	-0.64	-34.21**
Job Satisfaction (η1)→ Organizational Commitment (η3) (H4)	β31	0.55	21.14**
Job Stress (η2)→ Organizational Commitment (η3) (H5)	β32	-0.57	-23.30**
Organizational Politics Perception (ξ1)→ General political behaviour (x1)	λ1	0.58	25.33**
Organizational Politics Perception (ξ1)→ Silent for benefits (x2)	λ2	0.47	13.35**
Organizational Politics Perception (ξ1)→ Policy and practice (x3)	λ3	0.53	19.14**
Job Satisfaction (η1)→ Internal satisfaction (y1)	λ4	0.50	15.87**
Job Satisfaction (η1)→ External satisfaction (y2)	λ5	0.61	30.12**
Job Stress (η2)→ Work requirements (y3)	λ6	0.62	31.03**
Job Stress (η2)→ Insufficient support (y4)	λ7	0.55	20.97**
Organizational Commitment (η3)→ Affective commitment (y5)	λ8	0.52	17.06**
Organizational Commitment (η3)→ Continual commitment (y6)	λ9	0.60	29.01**
Organizational Commitment (η3)→ Normative commitment (y7)	λ10	0.48	14.08**

Note. ** p < .01, χ^2 / $d.f.$= 2.58, GFI = .94, AGFI = .90, NFI = .91, RMSR = .046.

stress (γ_{21}= 0.59, p< .01). Hospital nursing staff's job satisfaction has a significant positive effect on their organizational commitment (β_{31}= 0.55, p< .01). Hospital nursing staff's job stress has a significant negative effect on their organizational commitment (β_{32}= −0.57, p< .01). Thus, all hypotheses were confirmed.

Discussion

Conclusions and implications

There are five major results in this study: (1) hospital nursing staff's organizational politics perception has a significant negative effect on their job satisfaction; (2) hospital nursing staff's organizational politics perception has a significant negative effect on their organizational commitment; (3) hospital nursing staff's organizational politics perception has a significant positive effect on their job stress; (4) hospital nursing staff's job satisfaction has a significant positive effect on their organizational commitment; and (5) hospital nursing staff's job stress has a significant negative effect on their organizational commitment. The implications are discussed, as follows:

Relationships among organizational politics perception, job satisfaction, and organizational commitment

This research shows that the more hospital nurses are aware of political behaviour in the organization's environment,

the lower their job satisfaction will be. The results were also consistent with the political awareness model proposed by Ferris [9], which states that job satisfaction decreases as awareness of organizational politics increases. This research also showed that political behaviour in an organization can lower nursing personnel's organizational commitment level and job satisfaction is significantly and positively correlated with organizational commitment.

General political behaviour and job satisfaction were significantly and negatively correlated, indicating that hospital nursing personnel feel insecure and unjust towards the political behaviour of hospital superiors, colleagues, and small groups within the organization, and that this feeling reduces work satisfaction in hospital nursing personnel. Differences between policy and actual practice and job satisfaction were negatively correlated, indicating that hospital nursing personnel cannot increase their own satisfaction level from obtaining rewards with their own political behaviour.

Remaining silent and waiting for benefits was significantly and negatively correlated with job satisfaction. This indicated that when hospital nursing personnel encounter improper decision making or self-serving behaviour, they will be silent, ignore the behaviour, or take a "wait for benefits" approach. They will obey with the person in power; however, such behaviour decreases their job satisfaction. From this, we can see that when hospital personnel take a silent and wait for benefits approach to hospital internal political behaviour, the hospital nursing personnel may enter the group and obtain benefits, but because the hospital nursing personnel are hiding their own true thoughts, they will feel dissatisfied.

This shows that political behaviour in an organization exists and can provide hospital nursing personnel with certain extrinsic satisfaction. However, in reality, political behaviour will still cause a decrease in hospital nursing personnel's satisfaction. Hospital personnel who do not participate in political behaviour (remain silent and wait for benefits) but have good work performance may not feel satisfied as a result. Thus, hospital nursing personnel who do not understand political behaviour but who are professional and capable may leave the hospital or subsequently engage in political behaviour. In terms of maintaining the normal management system, allowing or silently recognizing the expansion of political behaviour is a very unwise choice for hospital nursing managers. In the end, this behaviour will damage the hospital's internal management mechanism.

This showed that political behaviour in an organization can lower hospital nursing personnel's organizational commitment level. Although the managers may think that hospital nursing personnel will silently witness political behaviour in the organization or directly engage in political behaviour, the nursing managers cannot guarantee that the hospital nursing personnel will continue to maintain this attitude. Thus, allowing political behaviour to exist can cause distrust in the hospital nursing personnel towards the organization. Consequently, the hospital nursing personnel may not be willing to invest their energy and time. In addition, they will not expect that these investments result in mental and physical compensations. If organizational commitment is reduced to a low enough level, individuals may choose to leave the organization.

The higher the awareness of organization politics is, the lower an individual's organizational commitment becomes. General political behaviour creates the highest political awareness because hospital nursing personnel can see injustice in work environment opportunities as political behaviour. We recommend that hospitals establish smooth and comprehensive communication channels and establish an open work environment to reduce political behaviour that results from insufficient resources or unclear situations.

This study recommends that hospitals establish good communication management mechanisms so that supervisors can effectively communicate with hospital nursing personnel and increase mutual reliance. This can reduce effects from political behaviour and not let hospital nursing personnel feel stressed because of political behaviour. Hospital nursing personnel should be appropriately encouraged to increase their work motivation and service spirit. Consequently, this can increase organization members' intrinsic feeling of satisfaction and commitment towards the organization, thereby, reducing the negative effects caused by the political behaviour of a hospital organization on nurses' work performance.

Relationships among organizational politics perception, job stress, and organizational commitment

Awareness of organizational politics was significantly and positively correlated with work stress. That is, the more members are aware of political behaviour in the organization environment, the higher their work stress will be. This result matched that of Vigoda [10, 15]. The research result also conforms to what some previous scholars advocated. For example, Brown [40, 41] both showed that work stress had a negative effect on organizational commitment.

The three dimensions of awareness of organizational politics were all significantly and positively correlated with work stress. General political behaviour had a stronger correlation with work stress than remaining silent and waiting for benefits and differences between policy and actual practice did. This shows that the work stress of hospital nursing personnel primarily comes from general political behaviour, differences between policy and actual practice, and remaining silent and waiting for benefits. Because hospital nursing personnel are aware of the presence of hospital politics in the implementation of organizational policies, which creates differences in the expected and actual policies, they subjectively perceive that they cannot receive fair treatment. To protect themselves and to increase benefits for themselves, the hospital nursing personnel will pretend that this does not concern them, and not report this unfair phenomenon. However, this will produce an imbalance in them, and cause anxiety, frustration, and stress. To reduce work stress felt by the hospital nursing personnel, the hospital must take measures to eliminate the awareness of organizational politics.

These results indicate that to reduce hospital personnel work stress, hospital nursing management should pay attention to the function of each position and determine whether the workload of each hospital nurse is appropriate. Positive advice and encouragements for hospital nursing personnel must be given and guidance for inadequacies must be provided to allow hospital nursing personnel in the team to have the opportunities to learn and grow. HR should care about the physical and mental developments of hospital nursing personnel as well as their family status, and hold activities to alleviate their work stress at appropriate times. Regarding organizational commitment dimensions, continuance commitment was the most important factor in hospital nursing personnel's organizational commitment evaluation. This shows that if a hospital wishes to increase hospital nursing personnel's organizational commitment towards the hospital, hospital managers' management attitude and concepts are markedly important. In a rapidly changing and highly competitive medical institution management environment, giving hospital nursing personnel's emotional and mental peace of mind and increasing their recognition of the organization are what hospital nursing management must pay attention to.

Thus, we recommend that hospital nursing management establish an open, fair, and just decision making process for various systems, and realistically implement the systems to avoid the systems from becoming mere formalities. This can increase the positive awareness of hospital nursing personnel towards the organization and decrease hospital nursing personnel' work stress stemming from lack of support. We also recommend that hospital nursing management set challenging but achievable objectives for hospital nursing personnel, let hospital nursing personnel participate in goal setting, provide assisting resources, and improve the work skills of staff through on-the-job training. This will allow hospital nursing personnel to pursue growth and advancement. Hospitals should give hospital personnel more authority, encourage team work, increase their team spirit, allow them to pursue innovation, and give them space to explore. This will ensure that hospital nursing personnel have work autonomy. And an open information work environment can produce good interaction among outstanding hospital nursing personnel and improve work efficiency. Hospitals should employ comprehensive communication in response to internal and external condition changes, and encourage internal hospital nursing personnel to provide proposals and recommendations. Hospitals should establish a smooth communication channel with clear authorization divisions. Because most hospital nursing personnel in hospitals are highly educated and are highly disciplined, they will be able to find more appropriate positions for themselves if the work environment can provide more information. This will give nursing personnel more room to contribute their talents. To a hospital, this can produce a greater performance.

Research limitations and future studies

Finally, the findings of this study should be considered in view of the following limitations.

(1) This research uses the data from a cross-sectional study as the basis for empirical research, and in this time frame, two months were spent on sampling. Sampling bias might exist, and this might have limitations on the inference to the causal relationship. It is suggested that if time and funding permitted, future researchers should do a vertical-section study and conduct a longitudinal research probing into the issue to obtain a more effective verification result. In addition, future studies can include more variables that affect hospital nursing staff's organizational commitment, such as role identification, work self-esteem, leadership style, etc. These variables will help researchers obtain more in-depth findings.

(2) The questionnaire design in this study is mainly based on academic theories, researches, and current status of the industry and tries to make sure each question is comprehensive and explanatory. This research adopts Likert Scales to evaluate hospital nursing staff's perceptions on each variable. Due to the fact that subjects are currently employed by the hospital, they might make reserved judgments. In addition, subjects filled in the questionnaires by recalling their memories instead of evaluating situations from an objective perspective, and this might create bias in their answers. What's more, the healthcare environment is constantly changing so this questionnaire might be outdated in the future. It is recommended that future researchers revise the content of the questionnaire to cope with the changing status of the healthcare environment and to meet their research needs.

(3) The subjects of this study were selected from various hospital departments. Due to the fact that hospitals have a complex system with numerous departments, it is impossible to ask every hospital nursing staff member to fill in the questionnaires. Though the empirical research results are quite representative, they do not take every hospital nursing staff member into consideration. Besides, the cause and formation process of hospital nursing staff's perceived organizational politics perception, job satisfaction, job stress, and organizational commitment could be quite subtle and complex. It is recommended that future researchers may conduct qualitative and quantitative researches by applying case study; in this way, they can have a comprehensive understanding on hospital nursing staff's perceived organizational politics perception, job satisfaction, job stress, and organizational commitment.

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