THE EFFECT OF ORGANIZATIONAL COMMITMENT ON INTENTION TO LEAVE AMONG NURSES: A QUANTITATIVE STUDY OF ABU DHABI HEALTH SERVICES COMPANY (SEHA)

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ABSTRACT

BACKGROUND:

Healthcare industry pursues in retaining customers to provide them with best health services and in return gained revenue through their staff support and exceptional performance, this created challenges for the organization due to demanding work schedule and emotional stress while delivering patient care, hence higher tendency levels to withdraw from the organization exist.

AIM:

The primary objective of this study is to investigate the relationship between organizational commitment (OC) and intention to leave (IL) in the health care sector, with the focus on how these factors affect employee retention and by influencing their job satisfaction. The focus of this study is to investigate the role of toxic work environment (TWE) as a potential mediator in the relationship between organizational commitment (OC) and intention to leave (IL).

METHODS:

A quantitative descriptive cross-sectional design was used targeting the largest healthcare company employees in United Arab Emirates (Abu Dhabi healthcare company –SEHA-), 367 participants responded to the questionnaire. SmartPLS version 4 and SPSS version 26 used to analyze the data.

RESULTS:

The statistical analysis of the study revealed significant findings, which showed that organizational commitment (OC) negatively influences intention to leave (IL) with a beta coefficient (β) of -0.545 and a p-value which is less than 0.05, and likewise affects a toxicity negatively -0.411, p factory (TWE) where β is < 0.05. Furthermore, TWE has been shown to significantly influence IL (β = 0.529, p < 0.05) and mediate the relationship between OC and IL.

CONCLUSION:

OC impacts the IL in different ways and at different levels. Yet, there needs to be more research investigating the correlation between these two variables in the health sector. The relationship between OC and IL requires further elucidation. This study evaluated the mediation influence of the TWE notion, which helps employees feel safe and comfortable.

KEYWORDS

Intention to leave (IL), Organizational commitment (OC), Social Exchange Theory (SET), Toxic work environment (TWE).

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INTRODUCTION

In the current, increasingly globalized competition in the healthcare industry, hospitals seek to acquire and retain loyal customers, achieve financial rewards by supporting their employees, and achieve exceptional performance results. In addition, healthcare organizations commonly perceive nurses as crucial components and indispensable participants in a dynamic healthcare environment with a substantial duty to provide patient care.

The job comes with many challenges, such as the schedules and emotional stress associated with patient care. These challenges increase job dissatisfaction and a tendency to leave the company or job. On the other hand, employees with quitting intentions voluntarily withdraw from the job and their jobs [1]. Companies may face many consequences due to change, including decreased nursing productivity, quality of nursing care, and increased financial burden [2]. However, organizations' personal commitment, psychological attachment to individuals, and loyalty to their abandoned employer all have an impact on employee emotional ties [3, 4].

In contrast, the perception of a toxic work environment, characterized by factors such as poor communication, lack of support, bullying, lack of salary increases, increased patient acuities and overwork, has been identified as an essential contributor to nurse turnover increases [5]. These environments reduce not only job satisfaction but also organizational commitment, increasing the intention to turnover [5].

The healthcare sector in the United Arab Emirates (UAE) faces significant challenges due to the increasing demand for qualified and licensed healthcare professionals, including nurses. This demand is driven by rising healthcare needs resulting from sociodemographic and epidemiological changes. These challenges are further compounded by high turnover rates and the tendency for specialists to leave the profession. However, various organizational and individual factors influence nurse retention, including organizational commitment, hostile environment, and poor working conditions [6]. It is therefore crucial for the Emirati healthcare sector to ensure the stability of the healthcare sector, including nursing staff retention and satisfaction; as the UAE continues to research healthcare, it will improve quality to ensure the quality of patient care and service delivery, organizational efficiency, productivity and performance, and a medical tourism centre.

The main objective of this study is to investigate the effect of organizational commitment on nurse's intention to leave within Abu Dhabi Health Services Company (SEHA). In addition, the nursing literature must thoroughly examine the mediating role of a TWE in the relationship between OC and IL. This study attempts to fill this gap by proposing that toxic workplaces act as essential mediators in this relationship. To examine this idea, we draw on the theoretical framework of the Job Demands-Resources (JD-R) model [7], which posits that job demands (e.g., toxic workplaces) have negative consequences, such as employee. Mental and physiological factors lead to the idea of giving up.

The study may provide valuable insights to hospital administrators, policymakers, and other relevant stakeholders and enable them to effectively implement measures that promote commitment and mitigate attrition rates within the nursing profession.

This research contributes to the literature on organizational commitment and intention to leave by providing quantitative evidence of the relationship between these variables in the context of the healthcare sector in Abu Dhabi. Additionally, the study enhances understanding of how organizational commitment can influence nurses' decisions to stay or leave their positions, offering valuable insights for stakeholders in developing strategies to improve job retention.

LITERTURE REVIEW

Nursing is a demanding career that is pivotal in all healthcare institutions. The highly selective work frequently leads to emotional, physical, and mental fatigue in professionals, resulting in decreased motivation, emotional exhaustion, frustration, strained relationships with colleagues, extended working hours, and limited autonomy.

The healthcare sector must enact reforms to establish an organizational culture that fosters a sense of ownership and close involvement among younger and freshly hired staff in the organization's vision and mission. The study suggests that policymakers should prioritize improving

nurses' organizational commitment, requiring implementing methods to recruit, attract, and retain dedicated nurses.

THEORETICAL BACKGROUND

Social Exchange Theory

This study utilized social exchange theory (SET) to examine the relationship between the organization and its employees. The theory of social exchange is a sociological and psychological perspective that explains social change and stability as a process of interactional exchange between different aspects, derived from economic, psychological and social learning [8,9,10]. It emphasizes that through subjective value-benefit analysis and contrast of alternatives human relations [8]. SET is a foundational concept of organizational behavior and human resource management, assisting to give an explanation for how interactions among personnel and their groups have an effect on attitudes and behaviors along with commitment, delight, and turnover intentions [11]

Based on social exchange theory, the three variables organizational commitment, intention to leave, and toxic work environment are intriguingly associated through the scale of value-advantage appraisal and to each different self-efficacy organizational dedication displays the volume to which employees experience loyalty and duty to their organization [8]. In contrast, a toxic work environment, characterized by miscommunication, lack of support, and pervasive stress, increases perceived costs for employees, leading to dissatisfaction and the breakdown of the reciprocity expected in a healthy working relationship [11]. This imbalance greatly increases the intention to leave, as personnel try to escape unfavorable situations and are looking for higher alternatives wherein profits are greater favorable [9]. Thus, SET explain how the nature of workplace change directly affects employee behavior and decisions, where toxicity undermines commitment and increases turnover intentions [10].

Organizational Commitment

OC is an individual's psychological connection and loyalty to their workplace, is a crucial factor influencing such decisions [3]. OC refers to an individual employee's profound emotional attachment to the organization. It can be comprehended through three dimensions: affective, continuance, and normative. Affective commitment is the emotional attachment that employees

have towards the organization. Continuity commitment is determined by the anticipated expenses linked to departing from the company. Normative commitment is influenced by a feeling of moral duty to stay in the group [1]. Commitment can reduce discontent and the need to leave, while its lack might worsen these feelings.

While it was anticipated that all three types of commitment would connect employees to the organization, each type was thought to have a distinct influence on employee work behavior [4,12]. Furthermore, each type of commitment was supposed to signify a different motivation for a specific result. In 1993, a quantitative correlational study examined the three-component commitment model and its impact on turnover intention and occupational commitment. Furthermore, the study reviews the literature regarding the tools researchers utilize to evaluate employee affective, continuance, normative commitment, and turnover intentions [4].

OC is considered a predictor of intention to depart. It is crucial to comprehend how nurses' leadership styles, work engagement, and organizational commitment are interconnected due to the rapidly evolving regulations, procedures, and work-life quality, which can substantially impact healthcare operations and service provision.

Intention To Leave

Intention to quit refers to an employee's voluntary wish to depart an organization [13]. Intention to leave refers to the desire to stop a current position and find a new one within the same organization (internal) or in a different organization (external), which could also involve leaving the profession entirely. This phenomenon is intricate, particularly in healthcare environments, and can be affected by several elements, such as motivational, cognitive, and behavioral factors [14]. While turnover intention has been extensively discussed in research, verifying turnover cognition measures is still necessary [15]. Previous research has shown that factors like work environment, emotional tiredness, practice safety, staff shortage, and professional characteristics such as age and education might lead to nurses wanting to quit their unit, department, or organization [16, 17, 18,19]. Insufficient staffing and poor work situations often prompt professionals to depart (leave) due to higher workloads that are not conducive to nursing practices. Professional development opportunities are a crucial component.

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Career stagnation is linked to organizational loyalty and the likelihood of leaving a job [20].

Toxic Work Enviroment

Many healthcare workers, particularly nurses and administrators, may face irritation and bewilderment when working in challenging circumstances. The nurse's duty has become more complex and demanding due to challenging work conditions and increased demands from the Health Ministry, healthcare organizations, patients, and relatives. The evolving duties of nurses significantly affect their working conditions and healthcare delivery. Several factors contribute to occupational stress in toxic work environments. The sources of toxic work environments differ in type and occurrence among various nursing specialities. Identifying the causes of job dissatisfaction and poor work and life quality among healthcare professionals and taking steps to resolve these issues could help reduce turnover rates and the intention of nursing staff to quit the hospital.

Some researchers have contended that toxic leaders' lasting adverse impact on an organization's culture and climate is a crucial factor in determining toxicity [21]. Toxic leaders were identified as a component of contaminated environments. Another study proposed bullying, stress, and emotional fatigue as examples of characteristics found in toxic companies [22]. Management by terror, a strategy linked to dictatorial regimes, was suggested to be a significant harmful influence. Managers' narcissistic behaviours were meant

To be inevitably dangerous. When narcissism reaches a level of disorder similar to alcoholism, drug addiction, and depression, it could negatively impact morale and group effectiveness and potentially result in disaster [23].
Overall, this study has two primary goals. The first objective is to analyze the correlation between OC and IL in the health sector. The second objective is to uncover the mediating influence of a TWE in this correlation. It will help policymakers improve retention methods and increase practice settings and job-related results.

HYPOTHESIS DEVOLMENT

Organizational Commitment And Intention To Leave
The relationship between organizational commitment and intention to leave an important research area in organizational behavior, particularly the nursing profession.

Organizational commitment, defined as the psychological attachment an employee feels to their organizational feelings about [4,24]. High levels of organizational commitment are associated with low intentions to leave, which is important in nursing because of the high costs and negative consequences associated with nurse turnover [1]. Multiple studies consistently demonstrate that emotional commitment has the most robust inverse correlation with the desire to leave. This implies that nurses who experience a strong emotional bond with their organization are less inclined to contemplate leaving [24,25]. In contrast, higher levels of turnover are linked to lower levels of organizational commitment, as nurses seek to locate a work environment that is both fulfilling and supportive [26].

One study examined how work environment and nurse staffing influence organizational commitment and intention to leave in Portuguese hospitals, emphasizing the critical role of affective and continuance commitment in reducing turnover intentions [27]. Similarly, integrative research found that factors such as job satisfaction and leadership style significantly influence nurses' decisions to stay or leave [28]. Furthermore, research revealed a negative relationship between organizational commitment and turnover intentions, suggesting that congruence between individual and organizational values can increase commitment and reduce turnover [29].

Prior research has confirmed the correlation between OC and nurses' IL the organization and the profession. A significant connection was discovered between the affective aspect of work commitment and the intention to leave among Malaysian nurses [30]. Furthermore, a strong correlation was established between work quality, health perceptions, and normative organizational commitment [31]. A study conducted with nurses in Korea found that high levels of organizational commitment and job fatigue were strong indicators of a likelihood of turnover intentions. In China, nurses who expressed satisfaction and demonstrated a strong sense of job commitment were likelier to remain in their current roles [32].

A current look at across many sectors has uncovered a strong correlation among organizational commitment and the intention to leave, highlighting its significance outside the nursing discipline. A robust sense of organizational commitment, coupled with effective results such as increased productiveness, reduced turnover, and greater

activity pride and emotional commitment, efficaciously diminishes employees' purpose to go away through fostering a more potent emotional reference to the business enterprise [33]. Both emotional and normative commitment play vital roles in mitigating turnover intentions through enhancing worker loyalty and fostering a sense of duty [34]. Teachers who own a robust experience of organizational commitment are less in all likelihood to have the preference to leave their career. This is in the main due to the fact they revel in more degrees of task pleasure and emotional properly-being [35]. Promotional dedication is a vast factor in worker retention, particularly while thinking about job balance and benefits [36].

The studies spotlight the importance of enhancing organizational commitment by supportive management, favorable running circumstances, and explicit career development opportunities with a purpose to decrease turnover intentions across diverse task settings [24]. Taking into account the results of earlier studies, the hypothesis is stated as follows:

H1: Organizational commitment is negatively related to intention to leave among nurses.

Organizational Commitment And Toxic Work Enviroment

The correlation between organizational commitment and toxic work environment among nurses is an important region of studies. An evaluation of organizational behavior and HR practices includes the examination of a toxic work environment, which is characterized by using terrible behaviors which includes bullying, harassment, lack of aid, high degrees of pressure, and ineffective communiqué. Studies indicate that toxic work environments lessen organizational commitment by using amplifying process discontent, stress, and burnout, consequently elevating turnover intentions [37]. Nurses running in toxic environments demonstrate diminished emotional dedication because of emotional stress and a dearth of helping connections, each of which are vital for fostering loyalty and involvement [28]. Moreover, extended exposure to destructive operating situations would possibly erode normative dedication, for the reason that experience of responsibility to live within the company is diminished due to the continuing presence of terrible situations [38].

Studies have shown that besides stressors inherent to nursing, management attributes also impact adverse work-related outcomes such as stress, fatigue, health issues, burnout, and low performance among nursing staff [39,40]. The previous study proposed four poisonous behaviors: aggressiveness, narcissism, lack of trustworthiness, and passivity [41]. A low-trust environment, negative emotional contagion, high stress, and incivility are considered toxic environmental variables [42].

Recent research across various industries has illuminated the significant impact of a toxic work environment on organizational commitment, demonstrating that this relationship extends well beyond the nursing profession. Organizational commitment, which includes affective, continuance, and normative additives, is usually associated with high quality place of job outcomes consisting of multiplied activity performance and lower turnover quotes [4,24]. Workplace bullying and harassment notably reduce personnel' organizational commitment in various industries, main to multiplied turnover intentions [43]. High pressure and poor management are fundamental factors contributing to reduced organizational commitment and expanded turnover within the generation area [44]. A loss of assist and high-pressure ranges cause decrease organizational commitment amongst instructors, contributing to higher intentions to leave [38]. Furthermore, poisonous work environments characterized by means of terrible conversation and excessive stress erode affective dedication and growth turnover intentions inside the company area [45]. This literature underscores the significance of addressing toxic paintings environments to enhance organizational commitment and decrease turnover intentions among nurses. Drawing from previous research findings, the hypothesis is proposed as follows:

H2: Organizational commitment is negatively related to a toxic work environment among nurses.

Toxic Work Enviroment And Intention To Leave

The correlation between toxic work environment and nurses' intention to leave has been a crucial subject of study in recent times, carrying substantial ramifications for the healthcare sector. Nurses' intents to leave their jobs are greatly heightened by workplace bullying and harassment, as these behaviors foster a hostile and stressful work environment [43]. The primary factors that prompt nurses to seek employment elsewhere include elevated levels of job stress and inadequate professional support [46]. Nurses working in settings characterized by insufficient support and elevated stress levels frequently

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contemplate abandoning their profession, underscoring the significance of intervention to enhance workplace conditions [2]. A toxic work environment, characterized by deficient communication and absence of support, substantially heightens nurses' intents to resign, underscoring the significance of establishing a constructive and supportive work milieu [47].

Studies in the realm of technology suggest that elevated levels of stress in the workplace and inadequate support from supervisors are significant determinants in employees' choice to pursue other employment opportunities [36]. Furthermore, a study conducted in the healthcare industry revealed that a noxious work atmosphere substantially amplifies the likelihood of health workers wanting to leave their jobs, underscoring the significance of implementing measures to enhance the work environment [47]. These findings emphasize the influence of a harmful work environment on employees' inclination to resign. Based on the findings of prior research, the following hypothesis has been formulated:

H3: Toxic work environment is positively related to intention to leave among nurses.

Mediating Role Of Toxic Work Environment

The present literature has not adequately examined the effect of a toxic work environment in mediating the association between organizational commitment and intention to leave among nurses. Studies have demonstrated that workplace bullying and harassment have a direct impact on nurses' inclination to leave their jobs, indicating the detrimental consequences of a hostile work environment without explicitly examining its intermediate function [43]. A study discovered job stress and low supervisor support as significant factors contributing to intention to leave [48]. However, they did not investigate the mediation impacts of a toxic work environment.

In healthcare, the need for better workplace conditions to reduce turnover intentions has been emphasized without exploring the mediating role of toxic environments [45]. However, a toxic work environment can undermine the positive effects of organizational commitment by increasing job dissatisfaction, stress, and burnout, which in turn heighten the intention to leave [37].Studies have shown that even highly committed nurses are more likely to consider leaving if they perceive their work environment as toxic, as the negative aspects of their

workplace outweigh their attachment to the organization [50,37]. These findings underscore the significant impact of toxic work environments on turnover intentions and highlight the need for further research to explore their mediating role in the relationship between organizational commitment and intention to leave among nurses. The hypothesis is formulated as follows:

H4: Toxic work environment mediates the relationship between organizational commitment and intention to leave among nurses.

CONCEPTUAL FRAMEWORK

The conceptual framework of this study, depicted in Figure 1, is based on the connections identified among various factors in the literature review.

FIGURE 1 - CONCEPTUAL FRAMEWORK
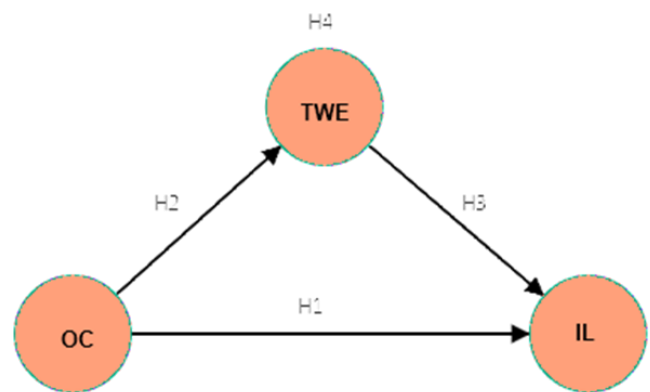
METHODS AND MATERILES

SAMPLING AND DATA COLLECTION

The study used a descriptive design, focusing on the objectives of the study. A cross-sectional approach was also used considering the data collected at this particular point in time. The sample of the study consisted of nurses working in the Abu Dhabi Healthcare Company (SEHA) in Abu Dhabi, United Arab Emirates (UAE).

The procedure was a comprehensive examination, and approval was obtained from the Research Ethics Committee of SEHA, with a decision number SEHA-IRB-487. The data were gathered from November to December 2023 through an online survey methodology.

The study used a disproportionate random sampling method to accurately describe conditions across hospitals, as the hospitals in the population varied significantly in terms of their people and other resources,

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making them non-homogeneous. To supplement this, the researchers employed convenience sampling to select a total sample of 367 staff nurses for an online survey. Convenience sampling was chosen for its practicality and efficiency in accessing participants. The inclusion criteria required all accessible staff nurses during the data collection period who were willing to participate, with no specific exclusion criteria applied.

The tools for data collection were meticulously developed based on a comprehensive literature review and guidance from esteemed professionals in research and nursing.

The study employed a four-part questionnaire form as a technique for collecting data. The initial section of the form comprises the "personal information form," which is used to gather descriptive details about the participants. The subsequent section encompasses the "organizational commitment scale," while the third section focuses on the "intention to leave." The final part of the form addresses the concept of a "toxic work environment."

The Organizational Commitment measure is presented in the scholarly realm [51]. This measure consists of 18 items rated on a five-point Likert scale. The Intention to Leave scale [52] has a five-point Likert format comprising 15 questions. It aims to evaluate an individual's inclination to depart from their organization. The Toxic Work Environment scale [53] assesses perceptions of negativity in the workplace. It comprises 11 items rated on a five-point Likert scale. Each scale measures complicated concepts in organizational behaviour research and helps enhance our understanding of workplace dynamics.

STATISTICAL ANALYSES

Survey data were analyzed using SmartPLS version 4 software. A "reliability analysis" was conducted to assess the reliability of the scale, while a "confirmatory factor analysis (CFA)" was conducted using the SmartPLS tool to assess the conceptual validity The model was evaluated using path analysis. For structural equation modeling, the data set must have a multivariate normal distribution. Descriptive statistics and correlation analyzes were performed using the SPSS 26 version.

DATA ANALYSIS

Descriptive Statistics

The demographic analysis of our sample, consisting of 367 participants, reveals a largely female workforce, with a representation of 81.2%. Additionally, a substantial number

(47.7%) of the participants belong to the age group of 30-39. The majority of individuals in the sample are married, accounting for 83.7% of the total. Additionally, the educational background of the sample is primarily at the Bachelor's level, making up 71.4% of the sample. Regarding professional experience, a significant 49.6% of individuals have worked for 16 years or longer, indicating a highly experienced group. The majority of workplace shifts, accounting for 62.4%, are a combination of day and night shifts. This indicates the ability to adjust and the possibility of being exposed to different work schedules. The statistics provide a comprehensive picture of the sample, which is crucial for placing the research findings in the larger context of workforce demographics and working conditions. Descriptive Statistics of the Demographic Factors of the Study are shown in Table 1.

INTERNAL CONSISTENCY OF THE MEASUREMENT SCALES

Six items were eliminated from the Intention to Leave (IL) scale. The items were removed due to their factor loadings falling below the minimum criteria of 0.50. The remaining components exhibit robust scale reliability, as evidenced in Table 2. All factors surpass the minimum threshold for factor loadings (>0.50), showing significant contributions from all observed variables, consistent with the findings of Anderson and Gerbing (1988).

After conducting a comprehensive psychometric evaluation of our measurement instrument, we found the results to be encouraging in terms of reliability and validity. The factor loadings for each construct—OC, IL, and TWE—consistently exceeded the minimum acceptable threshold of 0.4, indicating that the items and their constructs are intimately connected. The reliability metrics, measured by Cronbach's alpha and composite reliability values (rho_a and rho_c), all exceed the customary threshold of 0.7, confirming the strong internal consistency of the constructs. The constructs' Average Variance Extracted (AVE) values also exceed the standard of 0.5, ensuring robust convergent validity. The present results substantiate the dependability and accuracy of the measuring instrument. Generally, the survey instrument exhibits high reliability and significant information regarding conceptual and convergent validity. This framework will strengthen the impact of our research on existing knowledge and validate the findings from our study.

CORRELATIONAL ANALYSIS OF VARIABLES

Prior to doing the correlation test, the normality test was executed. Table 3 displays the test results. The normal distribution of the data is contingent upon the skewness and kurtosis values falling within the range of ±3 . From this perspective, the results indicate that the data acquired from this investigation follows a normal distribution.

TABLE 1- DEMOGRAPHIC FACTORS RESULTS

Variables	Demographic Factors	Frequency	Percentage %
Gender	Male	69	18.8
	Female	298	81.2
Age	20-29 year	11	3.0
	30-39 years	175	47.7
	40-49 year	111	30.2
	50 years and above	70	19.1
Marital status	Single	48	13.1
	Married	307	83.7
	Widowed	6	1.6
	Divorced	6	1.6
Qualification	Diploma	48	13.1
	Bachelor	262	71.4
	Masters	55	15.0
	Doctorate	2	.5
Experience	1-5 years	13	3.5
	6-10 yrs	57	15.5
	11-15 yrs	115	31.3
	16 yrs and above	182	49.6
Workplace	Morning shift / Admin duty	126	34.3
	Evening shift	12	3.3
	Day-Night shift	229	62.4
	Total	367	100

(N= 367)

TABLE 2- RESULTS OF VALIDITY AND RELIABILITY ANALYSES

Variables	Num. of items	Factor loading intervals	Cronbach's alpha (a)	Composite reliability (rho_a)	Composite reliability (rho_c)	Average variance extracted (AVE)
Organizational commitment (OC)	18	0.415-0.825	0.946	0.963	0.951	0.530
Intention to leave (IL)	9	0.522-0.865	0.884	0.899	0.908	0.529
Toxic work environment (TWE)	11	0.747-0.919	0.963	0.968	0.968	0.734

TABLE 3- NORMALITY TEST OF THE SCALES

Variable	Skewness	Kurtosis	Result
Organizational commitment (OC)	-0.210	0.072	Normal
Intention to leave (IL)	-0.115	-0.260	Normal
Toxic work environment (TWE)	0.176	-0.346	Normal

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The study employed parametric tests due to the normal distribution of the data. Consequently, the Pearson correlation coefficient was utilized to examine the association between the scales employed in the investigation. The correlation coefficients are displayed in Table 4.

The data set indicates that participants demonstrate a moderate level of Organizational Commitment (OC), with an average value of 3.2578 and a standard deviation of 0.83163. This suggests a rather strong connection to their organizations, although there are noticeable variations across individuals. The Intention to Leave (IL) is moderately expressed, as indicated by a mean of 3.28 and a standard deviation of 0.8294. This shows that employees are considering the possibility of leaving their businesses, with noticeable diversity among the responses. The Toxic Work Environment (TWE) scores exhibit a mean of 2.9698, which is relatively low, and a standard deviation of 0.93132, which is the greatest among the scores. This suggests that there is a greater diversity in the sense of workplace toxicity.

Correlational analysis reveals a substantial negative correlation between organizational commitment (OC) and both intention to quit (IL) and perceptions of toxicity (TWE) (r = -0.492 and r = -0.372, respectively). This suggests that as organizational commitment increases, both the desire to leave and perceptions of toxicity diminish. On the other hand, there is a notable and positive relationship between IL and TWE (r = 0.661), indicating that a toxic work environment strongly predicts employees' plans to leave. The use of asterisks (**) as the significance level (p<0.01) implies that these correlations are strong and presumably represent a significant relationship within the population from which the sample was obtained. These findings enhance our comprehension of how workplace settings impact employee retention and commitment. They emphasize the significance of addressing toxicity in the workplace to reduce potential turnover.

HYPOTHESIS TESTING
H1-H3

The effects were examined in a mediator-free model. The findings indicate that the impact of Organizational commitment on Intention to leave (β = -0.545, p < .05) was statistically significant. Furthermore, the impact of Organizational commitment on Toxic work environment was shown to be statistically significant (β = -0.411, p < .05). Thus, the hypotheses were deemed valid and accepted. The statistical analysis revealed that the impact of a toxic work environment on the intention to leave was substantial (β = 0.529, p < .05). The resulting analysis findings are presented in Table 5 and Figure 2.

TABLE 4- CORRELATIONS RESULT

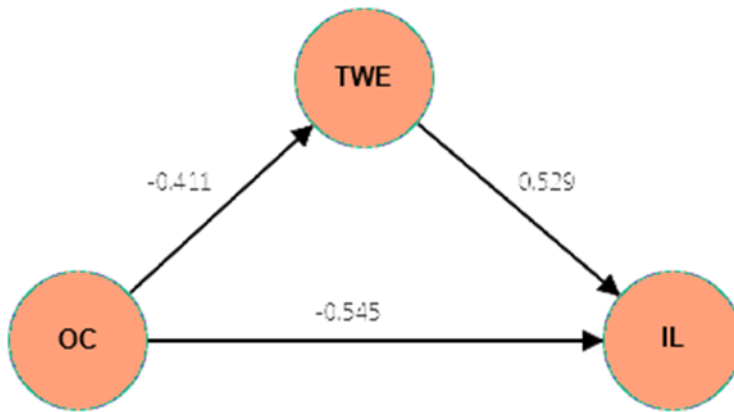| Variable		Mean	SD	1	2	3
1	**Organizational commitment** (OC)	3.2578	0.83163	1		
2	**Intention to leave** (IL)	3.2800	0.82940	-0.492**	1	
3	**Toxic work environment** (TWE)	2.9698	0.93132	-0.372**	0.661**	1

** p<0.01 (two-tailed)

TABLE 5- PATH MODEL

Path	β	SE	t-Value	p- Value
OC ⟶ IL	-0.545**	0.052	10.554	.000
OC ⟶ TWE	-0.411**	0.055	7.416	.000
TWE ⟶ IL	0.529**	0.053	10.070	.000

** p<0.01 (two-tailed)

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FIGURE 2- ANALYSIS RESULTS IN THE MODEL

MEDIATING ROLE OF TOXIC WORK ENVIRONMENT

H4: Toxic work environment mediates the relationship between Organizational Commitment and Intention to Leave

The statistical examination of the direct, indirect, and total effects of OC on IL demonstrates a substantial inverse correlation in all paths. The data indicates that stronger OC has a direct negative impact on the IL, as seen by a direct effect value of -0.328 and a significant p-value of 0.000. Additionally, OC indirectly reduces the Intention to Leave by enhancing views of the work environment, as indicated by an indirect effect value of -0.217 and a significant p-value of 0.000. The cumulative impact of -0.545 represents the overall influence of OC, suggesting a strong negative

correlation with IL. This finding suggests that efforts to improve OC can reduce turnover intentions by enhancing employee loyalty and creating a more positive work environment. Therefore, organizational interventions should focus on improving employee commitment and reducing workplace toxicity to effectively reduce employee turnover. The study identifies two effects of OC, highlighting the need for a comprehensive approach to organizational culture and employee engagement initiatives. Table 6 presents the results of the effect of OC on IL with the mediating effect of TWE.

Table 7 presents a summary of the results for the hypotheses, following the description of the analysis.

TABLE 6- THE EFFECT OF OC ON IL THROUGH WITH MEDIATING ROLE OF TWE

Path	β	SE	t-Value	p- Value	LLCI	ULCI
OC → IL	-0.545	0.052	10.554	0.000	-0.636	-0.430
Direct effect (OC → TWE → IL)	-0.328	0.055	6.006	0.000	-0.432	-0.218
Indirect effect (OC → TWE → IL)	-0.217	0.032	6.716	0.000	-0.283	-0.156

TABLE 7- SUMMARY OF HYPOTHESES

Hypotheses	Summary	Results
H1	Organizational commitment is negatively related to intention to leave among nurses	Supported
H2	Organizational commitment is negatively related to a toxic work environment among nurses	Supported
H3	Toxic work environment is positively related to intention to leave among nurses	Supported
H4	Toxic work environment mediates the relationship between organizational commitment and intention to leave among nurses	Supported

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DISCUSSION AND CONCLUSION

This study investigated the correlation between organizational commitment and intention to leave among nurses, as well as the mediating influence of a toxic work environment on this correlation. According to the study findings, nurses' inclination to depart decreases as organizational engagement increases. Various studies in the literature analyze the impact of organizational commitment on intention to leave.

Research conducted in many sources has uncovered significant knowledge about the evolution of the nursing field in diverse countries. Research has shown a significant relationship between affective aspects of job commitment and tendency to quit among nurses in Malaysia [30]. Furthermore, another study showed a significant relationship between quality of work, health attitude and organization values [31]. In Korea, high levels of organizational commitment and job sabotage were found to be important predictors of intention to leave, while in China, high levels of job satisfaction and internal commitment love is associated with the likelihood that nurses will remain in their current role [24]. These findings strongly support the results of our study and confirm the findings of existing literature [4,25,26,28].

Our study contributes to the literature by providing quantitative evidence of the relationship between organizational commitment, a toxic work environment, and intention to leave quit among nurses in the SEHA in Abu Dhabi. It focuses on unique regional challenges and extends existing knowledge with context-specific insights. Through the mediating role of toxic work environment, our study provides an important nuanced understanding for the development of targeted interventions to improve nurses' perceptions.

Workplace bullying had an indirect effect on turnover intention through the mediating role of organizational commitment. Thus, healthcare organizations and nursing managers should formulate effective measures to bolster nurses' organizational commitment with the aim of mitigating their intention to leave the organization [54]. This study examined the relationship between organizational commitment and intention to leave among nurses, as well as the role of a toxic work environment in mediating this relationship. Our findings indicate that higher organizational commitment significantly reduces the intention to leave. Additionally, we found that toxic work environment act as a mediator in this relationship. This study highlights the significance of strengthening organizational commitment and toxic work environment in order to decrease turnover intentions.

These valuable observations are crucial for hospital managers and policymakers to formulate measures that will help them retain nursing staff and maintain a stable and efficient healthcare workforce. Moreover, this research offers significant knowledge for hospital managers, legislators, and other interested parties, empowering them to enact efficient strategies to augment nurse retention, raise job happiness, and eventually guarantee the provision of exceptional patient care.

IMPLICATIONS OF THE STUDY

Theoretical Implication

OC impacts the intention to leave in different ways and at different levels. Yet, more research is needed to investigate the correlation between these two variables in the health sector. This study on nurses adds to the existing literature on OC and IL. Although understood, the relationship between OC and IL requires further elucidation. The overall environment and social situations significantly influence the link between the two variables. This study evaluated the mediation influence of the hazardous work environment notion, which helps employees feel safe and comfortable. OC had a strong negative indirect effect on the desire to depart through a hostile work environment. This finding offers a unique viewpoint on OC and IL, especially in hospitals with significant interpersonal relationships.

Nursing policymakers should consider the significant impact of self-efficacy and work engagement on OC and IL healthcare organizations. Training programs should be designed for supervisors to enhance their skills in providing assistance and giving appropriate feedback to improve work efficacy beliefs. Nursing policymakers must also consider the availability of adequate employment resources, such as fiscal support, training initiatives, and programs promoting work-life balance, to establish work settings that foster high levels of work engagement among nursing staff.

Practical Implication

Many healthcare personnel encounter adverse circumstances like burnout, heavy workloads, and

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diminished motivation. These negative circumstances primarily arise within the nursing profession. Nurses comprise the most significant percentage of healthcare workers and are mainly responsible for providing healthcare services. The adverse circumstances could impact both nurses' well-being and the healthcare delivery standard. Research indicates that nurses experience physical, cognitive, and perceptual burdens. Hence, these issues in working circumstances must be eradicated to ensure the safety of both nurses and patients. Furthermore, the responsibilities of all employees have escalated, and the working conditions have grown increasingly challenging. Nurses must demonstrate proactive behaviours in this setting. Creating a conducive climate for OC in hospitals can help decrease nurses' challenges and empower them to display aggressive behaviours. The study findings show that leaders/directors should create an environment conducive to OC by implementing policies and behaviours that help nurses feel psychologically comfortable and secure.

LIMITATIONS AND FUTURE RESEARCH DIRECTIONS

The study's cross-sectional design results depict the situation at a certain point in time. Testing this model using a correlation design can help bolster the research findings. The study was carried out in public hospitals. Alternatively, the perspective of private hospitals can also be considered. Public and private hospitals are similar. Conversely, the study's sample consisted of nurses. Studying additional professional groups in future research will help in extrapolating the findings achieved for health professionals.

References

1. Tett RP, Meyer JP. Job satisfaction, organizational commitment, turnover intention, and turnover: path analyses based on meta-analytic findings. Personnel psychology. 1993 Jun;46(2):259-93.

2. Roche MA, Duffield CM, Homer C, Buchan J, Dimitrelis S. The rate and cost of nurse turnover in Australia. Collegian. 2015 Dec 1;22(4):353-8.

3. North N, Leung W, Ashton T, Rasmussen E, Hughes F, Finlayson M. Nurse turnover in New Zealand: costs and relationships with staffing practises and patient outcomes. Journal of Nursing Management. 2013 Apr;21(3):419-28.

4. Meyer JP, Allen NJ. A three-component conceptualization of organizational commitment. Human resource management review. 1991 Mar 1;1(1):61-89.

5. Cao J, Jia Z, Zhu C, Li Z, Liu H, Li F, Li J. Nurses' turnover intention and associated factors in general hospitals in China: A cross-sectional study. Journal of Nursing Management. 2021 Sep;29(6):1613-22.

6. Marufu TC, Collins A, Vargas L, Gillespie L, Almghairbi D. Factors influencing retention among hospital nurses: systematic review. British Journal of Nursing. 2021 Mar 11;30(5):302-8.

7. Demerouti E, Bakker AB, Xanthopoulou D. Job demands-resources theory and the role of individual cognitive and behavioral strategies. The fun and frustration of modern working life: Contributions from an occupational health psychology perspective. 2019 Jan 1:94-104.

8. Blau P. Exchange and power in social life. Routledge; 2017 Sep 29.

9. Homans GC. Social behavior as exchange. American journal of sociology. 1958 May 1;63(6):597-606.

10. Cook KS, Cheshire C, Rice ER, Nakagawa S. Social exchange theory. Handbook of social psychology. 2013:61-88.

11. Cropanzano R, Mitchell MS. Social exchange theory: An interdisciplinary review. Journal of management. 2005 Dec;31(6):874-900.

12. Jaros S. Meyer and Allen model of organizational commitment: Measurement issues. The Icfai Journal of Organizational Behavior. 2007;6(4):7-25.

13. Zhang Y, Wu J, Fang Z, Zhang Y, Wong FK. Newly graduated nurses' intention to leave in their first year of practice in Shanghai: A longitudinal study. Nursing outlook. 2017 Mar 1;65(2):202-11.

14. Moloney W, Fieldes J, Jacobs S. An integrative review of how healthcare organizations can support hospital nurses to thrive at work. International journal of environmental research and public health. 2020 Dec;17(23):8757.

15. Uddin M, Ali S, Ali B. Effect of Islamic work ethics on job stress, turnover intention and employee well-being. Turnover Intention and Employee Well-Being (February 19, 2016). 2016 Feb 19.

16. Burmeister EA, Kalisch BJ, Xie B, Doumit MA, Lee E, Ferraresion A, Terzioglu F, Bragadóttir H. Determinants of nurse absenteeism and intent to leave: An international study. Journal of nursing management. 2019 Jan;27(1):143-53.

17. Sasso L, Bagnasco A, Catania G, Zanini M, Aleo G, Watson R, RN4CAST@ IT Working Group. Push and pull factors of nurses' intention to leave. Journal of nursing management. 2019 Jul;27(5):946-54.

18. Alenazy FS, Dettrick Z, Keogh S. The relationship between practice environment, job satisfaction and intention to leave in critical care nurses. Nursing in critical care. 2023 Mar;28(2):167-76.

19. Ayalew E, Workineh Y, Semachew A, Woldgiorgies T, Kerie S, Gedamu H, Zeleke B. Nurses' intention to leave their job in sub-Saharan Africa: A systematic review and meta-analysis. Heliyon. 2021 Jun 1;7(6).

20. Moloney W, Boxall P, Parsons M, Cheung G. Factors predicting Registered Nurses' intentions to leave their organization and profession: A job demands-resources framework. Journal of advanced nursing. 2018 Apr;74(4):864-75.

21. Aubrey DW. The effect of toxic leadership. US Army War College; 2012 Mar 15.

22. Parker L. A small step from a toxic workplace to dictatorship.

23. Taştan SB. Toxic workplace environment: In search for the toxic behaviours in organizations with a research in healthcare sector. Postmodern Openings. 2017;8(1):83-109.

24. Meyer JP, Stanley DJ, Herscovitch L, Topolnytsky L. Affective, continuance, and normative commitment to the organization: A meta-analysis of antecedents, correlates, and consequences. Journal of vocational behavior. 2002 Aug 1;61(1):20-52.

25. Galletta M, Portoghese I, Battistelli A, Leiter MP. The roles of unit leadership and nurse–physician collaboration on nursing turnover intention. Journal of advanced nursing. 2013 Aug;69(8):1771-84.

26. Hayes LJ, O'Brien-Pallas L, Duffield C, Shamian J, Buchan J, Hughes F, Laschinger HK, North N, Stone PW. Nurse turnover: a literature review. International journal of nursing studies. 2006 Feb 1;43(2):237-63.

27. Neves T, Parreira P, Rodrigues V, Graveto J. Organizational commitment and intention to leave of nurses in Portuguese hospitals. International Journal of Environmental Research and Public Health. 2022 Feb 21;19(4):2470.

28. Al Zamel LG, Lim Abdullah K, Chan CM, Piaw CY. Factors influencing nurses' intention to leave and intention to stay: An integrative review. Home Health Care Management & Practice. 2020 Nov;32(4):218-28.

29. Chambergo-Michilot D, Rebatta-Acuña A, Delgado-Flores CJ, Toro-Huamanchumo CJ. Socioeconomic determinants of hypertension and prehypertension in Peru: Evidence from the Peruvian Demographic and Health Survey. PLoS One. 2021 Jan 26;16(1):e0245730.

30. Omar K, Mohamed Anuar M, Abdul Majid AH, Johari H. Organizational commitment and intention to leave among nurses: the mediating role of moral obligation. International Journal of Management Studies (IJMS). 2012;19(2):31-46.

31. Al-Hussami M, Darawad M, Saleh A, Hayajneh FA. Predicting nurses' turnover intentions by demographic characteristics, perception of health, quality of work attitudes. International journal of nursing practice. 2014 Feb;20(1):79-88.

32. Wang L, Tao H, Ellenbecker CH, Liu X. Job satisfaction, occupational commitment and intent to stay among Chinese nurses: a cross-sectional questionnaire survey. Journal of advanced nursing. 2012 Mar;68(3):539-49.

33. Faridah F, Gustini G, Salehan S, Efendi R. The Turnover Intention Influenced by Job Satisfaction and Organizational Commitment. International Journal of Social Science Research and Review. 2022 Apr 30;5(5):334-40.

34. Karatepe OM, Avci T. Nurses' perceptions of job embeddedness in public hospitals. Sage open. 2019 Feb;9(1):2158244019828848.

35. Skaalvik EM, Skaalvik S. Job Satisfaction, Stress and Coping Strategies in the Teaching Profession-What Do Teachers Say? International education studies. 2015;8(3):181-92.

36. Kim M, Beehr TA. My self: The key to job insecurity predicting my occupational and general well-being. International Journal of Stress Management. 2023 Aug;30(3):249.

37. Spence Laschinger HK, Leiter M, Day A, Gilin D. Workplace empowerment, incivility, and burnout: Impact on staff nurse recruitment and retention outcomes. Journal of nursing management. 2009 Apr;17(3):302-11.

38. Goh YS, Lopez V. Job satisfaction, work environment and intention to leave among migrant nurses working in a publicly funded tertiary hospital. Journal of Nursing Management. 2016 Oct;24(7):893-901.

39. Babapour AR, Gahassab-Mozaffari N, Fathnezhad-Kazemi A. Nurses' job stress and its impact on quality of life and caring behaviors: a cross-sectional study. BMC nursing. 2022 Mar 31;21(1):75.

40. Thapa DR, Subedi M, Ekström-Bergström A, Areskoug Josefsson K, Krettek A. Facilitators for and barriers to nurses' work-related health-a qualitative study. BMC nursing. 2022 Aug 5;21(1):218.

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41. Brightman B. How to overcome the 6 most toxic employee behaviors. Fast Company. Retrieved from http://www. fastcompany. com/3023318/leadership-now/how-to-overcome-the-6-most-toxicemployee-behaviors. 2013.

42. Gilbert JA, Carr-Ruffino N, Ivancevich JM, Konopaske R. Toxic versus cooperative behaviors at work: the role of organizational culture and leadership in creating community-centered organizations. International Journal of Leadership Studies. 2012;7(1):29-47.

43. Giorgi G, Leon-Perez JM, Arenas A. Are bullying behaviors tolerated in some cultures? Evidence for a curvilinear relationship between workplace bullying and job satisfaction among Italian workers. Journal of Business Ethics. 2015 Sep; 131:227-37.

44. Xu H, Wang Z, Lian N, Khan A, Zhang L. The impact of transformational leadership on organizational commitment and intention to stay empirical evidence from China's performing arts industry. Frontiers in Psychology. 2022 May 6; 13:874803.

45. Giao HN, Vuong BN, Huan DD, Tushar H, Quan TN. The effect of emotional intelligence on turnover intention and the moderating role of perceived organizational support: Evidence from the banking industry of Vietnam. Sustainability. 2020 Mar 1;12(5):1857.

46. Yoon JE, Cho OH. Intention to stay in specialist trauma nurses: relationship with role conflict, stress, and organizational support. Journal of Trauma Nursing| JTN. 2022 Jan 1;29(1):21-8.

47. Labrague LJ, McEnroe-Petitte DM, Papathanasiou IV, Edet OB, Tsaras K, Leocadio MC, Colet P, Kleisiaris CF, Fradelos EC, Rosales RA, Vera Santos-Lucas K. Stress and coping strategies among nursing students: an international study. Journal of Mental Health. 2018 Sep 3;27(5):402-8.

48. Leineweber C, Chungkham HS, Lindqvist R, Westerlund H, Runesdotter S, Alenius LS, Tishelman C. Nurses' practice environment and satisfaction with schedule flexibility is related to intention to leave due to dissatisfaction: A multi-country, multilevel study. International journal of nursing studies. 2016 Jun 1; 58:47-58.

49. Kim HJ, Shin SH. Mediation effect of job satisfaction in the relationship between need satisfaction and turnover intention of clinical nurses. Journal of the Korea Convergence Society. 2021;12(11):445-56.

50. Hutchinson M, Wilkes L, Jackson D, Vickers MH. Integrating individual, work group and organizational factors: Testing a multidimensional model of bullying in the nursing workplace. Journal of Nursing management. 2010 Mar;18(2):173-81.

51. Meyer JP, Allen NJ. TCM employee commitment survey academic users guide 2004. London, Ontario, Canada: The University of Western Ontario, Department of Psychology. 2004 Jul 19:143-59.

52. Bothma CF, Roodt G. The validation of the turnover intention scale. SA journal of human resource management. 2013 Jan 1;11(1):1-2.

53. McCulloch A. Toxic work environments (Doctoral dissertation, Carleton University).

54. Xia G, Zhang Y, Dong L, Huang F, Pu Y, Luo J, Chen YP, Lei Z. The mediating role of organizational commitment between workplace bullying and turnover intention among clinical nurses in China: a cross-sectional study. BMC nursing. 2023 Oct 6;22(1):360.

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