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Analysing the Effects of Organisational Politics on Nurses' Outcomes: The Moderating Role of Nurses' Professional Self-Concept

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ABSTRACT

Aims: To analyse how organisational politics can affect behavioural responses such as organisational deviance and organisational citizenship behaviour towards the organisation among nurses. It also investigates the mediating effect of affective commitment between organisational politics and behavioural responses, and assesses the moderating effect of nurses' professional self-concept in the relationship between organisational politics and its outcomes.

Design: A cross-sectional study was performed among 229 nurses.

Methods: Data were collected between May and November 2019. The sample demonstrates its representativeness of the nursing population based on several demographic characteristics.

Results: The study reveals that organisational politics has a positive effect on organisational deviance and nurses' professional self-concept has a positive moderating effect on this relationship. Affective commitment mediates the relationship between organisational politics and organisational citizenship behaviour towards the organisation.

Conclusions: From a social exchange perspective, this research identifies the moderating role of nurses' professional self-concept in the relationship between organisational politics and organisational deviance. Drawing on the conservation of resources theory, our study contributes to a better understanding of how the non-significant relationship between organisational politics and organisational citizenship behaviour towards the organisation is mediated by affective commitment.

Implications for the Profession: Nursing managers should pay special attention to organisational political perceptions among nurses with elevated professional self-concepts and address them through a collaborative organisational culture and clear norms to mitigate the adverse organisational consequences of organisational politics among nurses. In this sense, managers should actively listen and communicate effectively, as they represent the organisation's values.

No Patient or Public Contribution: No patient or public contribution was involved in this study.

Impact: The results of this study provided a better understanding of the organisational politics' effects among nurses on relational and behavioural responses and the moderating role of professional self-concept in these relationships.

1 | Introduction

Perceived organisational politics represents an individual's subjective appraisal of others' self-serving behaviours, which often disregard or even undermine the interests of others or organisational goals (Ferris, Russ, and Fandt 1989). In recent years, research has delved into the influence of perceived organisational politics on employee attitudes and behaviours among healthcare professionals (Atshan et al. 2022). This pattern is also evident among nursing professionals (Basar and Basim 2016). Furthermore, past research found that organisational politics may affect nurses' workplace outcomes such as organisational commitment, job satisfaction and turnover intentions (Kar and Suar 2014; Labrague et al. 2017; Movahedi et al. 2020).

Nursing professionals' working conditions are harsh and they tend to be exposed to several risks and complexities. For example, nurses spend more time with patients than any other healthcare worker (Butler et al. 2018), and they are often exposed to night shifts, moonlighting and long work hours, such as 12 h or more (Ceballos Vásquez, Valenzuela Suazo, and Paravic Klijn 2014; Trinkoff et al. 2006). They also face a higher risk of potential infections (Nguyen et al. 2020). Additionally, nurses often perceive themselves as subordinate to doctors and tend to receive fewer resources compared to their physician colleagues (Hoeve, Jansen, and Roodbol 2014; Llop-Gironés et al. 2021). This specific nursing professional context, characterised by limited resources and high job demands, can increase work-related stressors, reduce personal resources and hinder nurses' ability to achieve their career goals (Hochwarter et al. 2023). Consequently, it may encourage self-serving behaviours, foster competing interests and amplify power dynamics within the nursing profession (Atinga et al. 2014; Montalvo and Byrne 2016; Labrague et al. 2017). For example, a qualitative study conducted among nurses on medication errors in primary care shows that nurses perceive themselves as working in a context of workload overload and ambiguous rules, where organisational politics and personal relationships are significant factors influencing the reporting of medication errors, potentially generating stigma and negatively affecting their professional image (Khalil and Lee 2018). Thus, assessing the outcomes of organisational politics among nurses can provide a better understanding of their behaviours in contexts of uncertainty (Hochwarter et al. 2023; Labrague et al. 2017).

Although existing research has recognised the importance of organisational politics among nurses at the international level (Atinga et al. 2014; Basar and Basim 2016; Kar and Suar 2014; Labrague et al. 2017; Movahedi et al. 2020; Paarima, Kisinna, and Ofei 2024), none of these studies have investigated how perceived organisational politics may influence two of the most important employees' performance domains: organisational citizenship behaviour (OCB) and organisational deviance (Dalal 2005).

According to Chernyak-Hai and Rabenu (2018), social exchange theory provides insights into how organisational politics can lead to increased deviant behaviour within an organisation. For instance, when employees perceive a

political environment or self-serving behaviour within their organisation, they may respond with active and undesirable behaviours, such as organisational deviance (Meisler, Drory, and Vigoda-Gadot 2020). However, employees may face constraints imposed by workplace rules that discourage such behaviours, or situational limitations that hinder their ability to respond actively, including engaging in deviant or counterproductive actions (Cropanzano et al. 2017). In these scenarios, employees may opt for alternative, passive responses such as refraining from performing desirable behaviours like organisational citizenship behaviour towards the organisation (OCBO) (Chang, Rosen, and Levy 2009). Accordingly, recent research tends to use the conservation of resource theory as a theoretical framework to explain the effects of organisational politics on desirable employee outcomes such as affective commitment and OCBO (Kaur and Kang 2022). This theoretical perspective posits that employees' perception of a politically charged environment within their organisations can induce stress, as this perception is linked to the depletion of valuable personal resources, such as their sense of control over their professional future (Hobfoll 2001). This resource depletion, in turn, tends to diminish employees' capacity to achieve desirable outcomes such as affective commitment and OCBO.

Although previous research has established a connection between organisational politics and an increase in organisational deviance (Meisler, Drory, and Vigoda-Gadot 2020), as well as a negative impact on OCBO (Chang, Rosen, and Levy 2009; Kaur and Kang 2022), little is known about the processes by which organisational politics affects nurses' affective commitment and two behavioural responses such as organisational deviance and OCBO. Moreover, there remains a scarcity of studies that delve into how affective commitment functions as a mediator in the relationship between organisational politics and behavioural responses among nurses.

Recent research reveals the importance of professional self-concept within the nursing profession (Xu et al. 2023). Nursing, as a profession, often deals with issues of low professional self-concept. This can be attributed to various factors, including the perpetuation of stereotyped public perceptions of nurses, gender-based role stereotypes, or the awareness of their subordinate status relative to the medical profession (Hoeve, Jansen, and Roodbol 2014). In this context, existing literature that investigates how employees' self-perceptions can moderate the relationship between perceived organisational politics and nurses' outcomes has predominantly centred on self-efficacy (Bozeman et al. 2001). Nevertheless, it is important to differentiate between professional self-concept and other related concepts, such as self-efficacy and self-esteem. The latter pertains to one's expectations and convictions regarding their capabilities in specific situations, whereas the former involves one's perception of confidence within a particular domain, such as their profession (Marsh and Perry 2005). Considering the significance of professional self-concept among nurses, and in light of recent research indicating that certain self-perceptions, like self-efficacy, can moderate the relationship between perceived organisational politics and employee outcomes (Atshan et al. 2022), there remains a gap in our understanding regarding how professional self-concept might influence the connection between perceived organisational

politics and various nurse-related outcomes, such as organisational deviance, affective commitment and OCBO.

On the basis of the above, this study aimed to provide a better understanding of how organisational politics can affect organisational deviance and OCBO, the mediating effect of affective commitment between perceived organisational politics and two behavioural responses such as organisational deviance and OCBO. This research also examined how self-concept moderates the direct relationship between organisational politics and these outcomes among nurses.

This study is structured as follows: It begins with a general discussion of social exchange and conservation of resource theory. Subsequently, the theoretical model, constructs and hypotheses are presented. This section is followed by the methodology and the analysis of the empirical results. Finally, the study concludes with a discussion, presentation of conclusions, practical implications, suggestions for future research and a description of the major limitations of this study.

2 | Background

Drawing on the social exchange and conservation of resource theoretical frameworks, this research examines how organisational politics can have both positive effects on organisational deviance and negative effects on affective commitment and OCBO. First, this study adopted the social exchange framework, which is a theory rooted in voluntary actions fuelled by the anticipation of reciprocity from others or the obligation to reciprocate gestures initiated by other actors. The act of reciprocating gestures or attitudes functions as an 'initiating action' for social interaction, and this initiating action leads to undefined reactions that are different from those seen in economic exchanges (Cropanzano et al. 2017). A recent theoretical review within social exchange theory (Chernyak-Hai and Rabenu 2018) helps us understand how employees' perceptions of initiating actions by organisations, such as organisational politics, can lead to undesirable reciprocal responses, such as organisational deviance. Additionally, past research among employees shows that social exchange theory may be applied to a better understanding of employees' relational responses, such as affective commitment, and behavioural responses, such as organisational deviance (Cropanzano et al. 2017).

Second, the conservation of resource theory proposes that individuals try to make an effort to preserve, safeguard and improve their resources. They view the potential or actual loss of these valuable resources as a threat (Hobfoll 1989). Hobfoll (2001) elaborated that the theory outlines three situations that lead to stress. First, stress occurs when there is a possibility of losing resources. Second, it arises when resources are genuinely lost. Lastly, stress emerges when individuals fail to acquire sufficient resources despite a significant investment. An instance of such resources could include the perception that an individual's future success hinges on them and the necessity of being understood by employers or supervisors (Hobfoll 2001). Recent studies employ the conservation of resource theory as a conceptual framework to assess the effects of organisational politics on desirable employee outcomes

like citizenship behaviour towards different targets (Kaur and Kang 2022). Accordingly, this research adopts the conservation of resource theory as a foundation to comprehend the adverse influence of organisational politics on both affective commitment and OCBO within the nursing profession.

2.1 | Perceived Organisational Politics and Its Effects

Perceived organisational politics is defined as an employee's subjective assessment of the extent to which their work environment is perceived to prioritise the interests of certain individuals or groups at the expense of others (Ferris et al. 2019). When employees perceive themselves as being evaluated negatively or unfairly by the organisation, it can lead to behaviours that negatively impact the quality of the relationship between employees and their organisations (Chernyak-Hai and Rabenu 2018).

Organisational deviance refers to intentional actions by employees that go against established rules or norms within the organisation and are aimed at harming the organisation or its members (Cropanzano et al. 2017). In his seminal study, Gouldner (1960) elucidated that negative reciprocity places a strong emphasis on the retaliatory aspect of actions. In this context, previous research has indicated that the perception of organisational politics within the workplace can potentially escalate instances of organisational deviance among employees (Cohen and Diamant 2019; Meisler, Drory, and Vigoda-Gadot 2020). However, it remains unclear how perceived organisational politics may affect organisational deviance among nurses.

According to Spector and Fox (2006), when an employee goes against the established norms within an organisation, they are essentially challenging the norms set by the management in charge. As employees often view the actions of certain individuals within an organisation (e.g., managers or physicians) as representative of the organisation itself (Levinson 1965), employees who feel harmed by the actions of these individuals may respond by performing behaviours that disrupt the organisation, such as organisational deviance. Specifically, considering that nursing professionals are particularly vulnerable to political dynamics and self-serving behaviours (Labrague et al. 2017; Montalvo and Byrne 2016), and based on the social exchange theory (Cropanzano et al. 2017), it is expected that nurses who perceive political or self-serving behaviours in their organisations reciprocate it challenging the standards or norms established by the management performing deviant behaviours towards the organisation. Thus, we expect that

Hypothesis 1. *Perceived organisational politics is positively related to organisational deviance.*

OCB is defined as a discretionary behaviour that represents informal modes of cooperation and contributions (Organ 2018). Usually, these actions are aimed at the party responsible for initiating the initial action, which may be the organisation (Cropanzano et al. 2017). Specifically, OCBO represents discretionary behaviour that directly benefits the organisation (Williams and Anderson 1991).

Previous research indicates that employees who perceive a political environment within their organisations tend to engage in lower OCB (Chang, Rosen, and Levy 2009). For instance, Chernyak-Hai and Rabenu (2018) provided an example in which an employee who receives a negative performance appraisal influenced by politics may respond by reducing their OCB. This can be seen as a withdrawal response, as the power imbalance in the employee–employer relationship makes it difficult for the employee to engage in active and retaliatory responses, such as organisational deviance. Recent studies conducted among frontline bank employees and public employees (Kaur and Kang 2022; Khattak, Zolin, and Muhammad 2021) have shown that organisational politics has a negative impact on OCBO. Nevertheless, there is a lack of research that assesses the potential effect of organisational politics on OCBO among nurses. Considering that the nursing professional context is often characterised by limited resources and high job demands, we expect, in line with the conservation of resource theory (Hobfoll 2001; Kaur and Kang 2022), that nurses who perceive high levels of political behaviour among organisational representatives will avoid making additional investments in social and cognitive efforts related to engaging in discretionary behaviours towards their organisation. We therefore hypothesised that

Hypothesis 2. *Perceived organisational politics is negatively related to OCBO.*

2.2 | The Mediating Effect of Affective Commitment

According to Meyer and Herscovitch (2001), commitment can be presented as a behavioural force that binds the person to a course of action to one or more targets, and this behaviour can be influenced without extrinsic motivations. In this sense, Meyer and Allen (1991) divided organisational commitment into three discernible dimensions, namely, normative, continuance and affective. Specifically, affective commitment represents the employee's emotional attachment and identification with the organisation (Meyer and Allen 1991).

According to a meta-analysis conducted by Chang, Rosen, and Levy (2009), organisational politics has a negative effect on affective commitment. In this regard, employees who perceive a political environment in their organisation may experience a decrease in their emotional attachment to it. Previous research indicates that employees who have a stronger sense of affective commitment towards their organisation tend to engage in fewer deviant behaviours in their workplaces (Neves and Story 2015). Nevertheless, existing research shows a non-significant relationship between affective commitment and organisational deviance in different countries such as the United States and China (Liao, Joshi, and Chuang 2004; Qu, Jo, and Choi 2020). Although there is a lack of research proving this relationship among nursing professionals, a study conducted in the United States among healthcare employees found that organisational commitment was negatively related to organisational deviance (Mulki, Jaramillo, and Locander 2006). In this sense, and in line with the social exchange theory, we expect that nurses who perceive organisational politics within their organisations will

reciprocate this negative initiating action by reducing their affective commitment, making them less likely to care for their organisations. Furthermore, in the face of a higher perception of organisational politics, affective commitment may decrease and not help offset the positive effect of organisational politics on organisational deviance among nurses. Therefore, the following hypotheses are formulated:

Hypothesis 3. *Affective commitment mediates the influence of perceived organisational politics on organisational deviance.*

Past research suggests that nursing professionals with a high level of affective commitment towards their organisation tend to exhibit higher OCB (Gupta, Agarwal, and Khatri 2016). Although recent research conducted by De Clercq, Shu, and Gu (2022) has shown that affective commitment mediates the relationship between organisational politics and helping behaviour, which is defined as a specific form of OCB towards co-workers and supervisors, little is known about the potential mediating effect of affective commitment between organisational politics and OCBO. In this sense, past research shows that constructs assessing a specific entity, such as the organisation (i.e., organisational politics, affective commitment and OCBO), tend to show higher correlations than constructs assessing different entities, such as organisational politics and OCB towards co-workers, where the entities are represented by the organisation and co-workers, respectively (Cropanzano et al. 2017; Lavelle et al. 2015). In line with the mentioned research and considering the conservation of resource theory, we hypothesise that nurses perceiving a politically charged environment in their organisation will exhibit diminished emotional attachment. Consequently, this is expected to correlate with a decreased inclination to engage in discretionary duties not formally acknowledged by the organisational reward system, such as OCBO.

Hypothesis 4. *Affective commitment mediates the influence of perceived organisational politics on OCBO.*

2.3 | The Moderating Effect of Nurses' Professional Self-Concept

Nurses' professional self-concept refers to how nursing professionals perceive themselves in their roles and serves as a significant predictor of their behaviour (Cowin et al. 2008; Xu et al. 2023). In the context of the nursing profession, it is imperative to consider professional self-concept as a crucial variable. A high professional self-concept is widely acknowledged as a valuable perception, whereas the significance of a low professional self-concept in the nursing field becomes evident when examining its implications, such as burnout, heightened stress, attrition and diminished professional status (Cao et al. 2016; Wang et al. 2019; Xu et al. 2023). Employees who perceive a political environment within their organisation are likely to believe that the organisation does not adequately reciprocate their efforts and performance (Chernyak-Hai and Rabenu 2018). Consequently, these perceptions of organisational politics may negatively influence various nurses' work outcomes (Labrague et al. 2017; Paarima, Kisinna, and Ofei 2024). However, there is a lack of research investigating how professional self-concept might moderate

the effects of perceived organisational politics on nurses' outcomes. In this regard, previous studies have shown that other self-perceptions, such as self-efficacy, can serve as moderators in these relationships. For instance, a study conducted among managers in the hotel industry revealed that managers with higher self-efficacy levels experienced a more pronounced negative impact of organisational politics on both job satisfaction and organisational commitment (Bozeman et al. 2001). Additionally, recent research among healthcare workers found that the relationship between organisational politics and certain dimensions of job dissatisfaction, such as silence and exit, was stronger when perceived self-efficacy was high (Atshan et al. 2022).

Considering past research on other types of self-perceptions among employees, the distinctive definition of nurses' professional self-concept compared to other forms of self-perception (Marsh and Perry 2005), and its specific design for the nursing profession (Angel, Craven, and Denson 2012; Xu et al. 2023), we expect that nurses with a higher professional self-concept who feel negatively affected by political behaviour in their organisations will not feel valued in their capacities related to leadership, staff relationships, knowledge and care (Angel, Craven, and Denson 2012). In turn, they may be less hesitant to respond more assertively to an organisational political environment. In line with Bozeman et al. (2001), we hypothesised that the positive effect of organisational politics on organisational deviance, as well as the negative effects of organisational politics on affective commitment and OCBO, will be more pronounced among nurses with a strong professional self-concept in their nursing role.

Hypothesis 5. *Moderation of nurses' professional self-concept will increase (a) the positive effect of perceived organisational politics on organisational deviance, (b) the negative effect of perceived organisational politics on affective commitment and (c) OCBO.*

Based on the aforementioned hypotheses, the conceptual model of the research is illustrated as follows (Figure 1).

3 | The Study

3.1 | Aims

Based on the hypothesis presented above, the aim of the present study was to assess how perceived organisational politics can affect organisational deviance and OCBO among nursing professionals. Moreover, this research evaluated the mediating effect of affective commitment between perceived organisational politics and behavioural responses such as organisational deviance and OCBO. Lastly, this study also assessed the moderating effect of nurses' professional self-concept in the relationship between perceived organisational politics and its outcomes.

3.2 | Design

A quantitative cross-sectional design was implemented using data collected among nurses in Argentina. The questionnaire was originally developed in English and subsequently

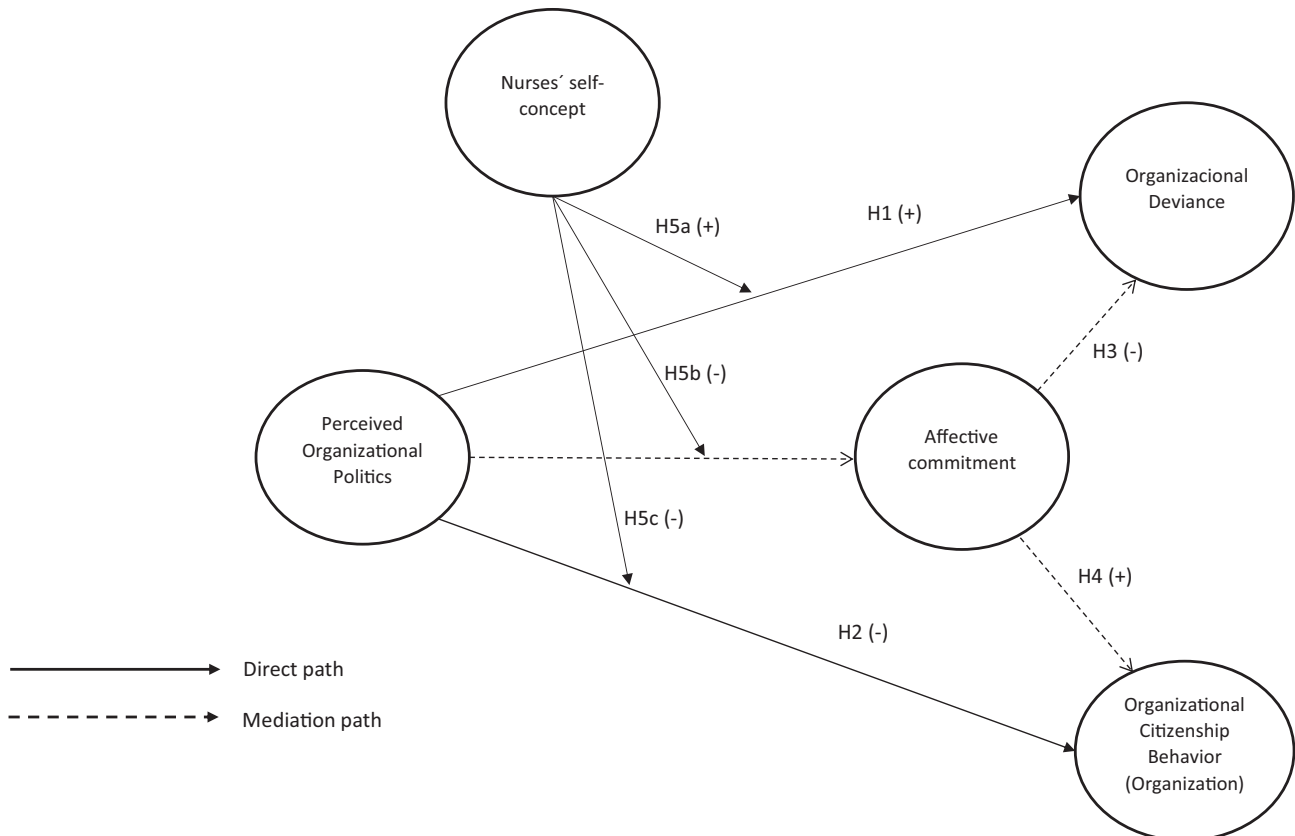


FIGURE 1 | Hypothesised model.

translated into Spanish following the protocol recommended by Brislin (1980). Two bilingual students with master's degrees translated the original measures into Spanish. A doctoral student fluent in both Spanish and English then compared the two Spanish versions of the questionnaire and performed a reverse translation from Spanish back into English without referencing the original English version. Subsequently, a bilingual professor performed a back-translation into Spanish. Finally, three registered nurses assessed their comprehension of the resulting Spanish version and evaluated the survey duration, which took approximately 5–7 min to complete. On the basis of their feedback, we made a few changes to the questionnaire to improve its clarity and avoid complex syntax (Podsakoff et al. 2003).

We conducted a power analysis using G*Power software, estimating the minimum necessary sample size for our proposed theoretical model. Following past research on nursing professionals' perception estimations (Jasiński and Derbis 2023; Qiu et al. 2020), we consider an α error probability of 0.05, a medium effect size (f^2) of 0.15, a power of 0.95 and four predictors because we consider the four dimensions of the higher order construct (i.e., nurses' professional self-concept). The sample size found to be adequate for the statistical analysis was 89.

3.3 | Participants

The study participants were 229 nursing professionals working in three hospitals located in Buenos Aires city, Argentina. Within our sample, 80.79% of the nurses were female, 27.95% reported working 50 h or more per week and 85.9% were 30 years of age or older. In comparison to the broader Argentinian nursing population, where 80.37% of nurses are female, over 23% work more than 50 h per week and 84.62% are aged 30 years or older (Ministerio de Salud 2023), our sample's demographic characteristics are representative in several key aspects of the nursing population in Argentina.

3.4 | Data Collection

We conducted our study using data from a sample of nurses in Argentina because it is an emerging country in Latin America with some conditions that make it suitable for studying the effects of perceived organisational politics on work outcomes among nurses. First, the Americas region presents an unequal scenario regarding the shortage of nursing professionals, with the majority concentrated in the United States, Canada and Brazil (Pan American Health Organization 2023). For instance, nations such as the United States and Canada have over 10 nurses per 1000 people, whereas countries like Bolivia, Argentina and Colombia have fewer than 6 nurses per 1000 people (World Bank, 2023). Additionally, as mentioned above, politics in nursing may be related to the lack of resources and high job demands. In this context, Argentina has faced problems with access to personal protective equipment and human resources in healthcare settings both before and after the COVID-19 pandemic (Centenera 2018; Infobae 2024). This lack of resources, which may exacerbate organisational politics, is not unique to Argentinian healthcare organisations

but also tends to affect emerging countries globally (Labrague et al. 2017; Paarima, Kisinna, and Ofei 2024). Therefore, the characteristics of Argentina offer an ideal scenario for examining the effects of organisational politics on work outcomes among nurses.

A convenience sampling strategy was adopted for this study (Aguinis 2023). Data were collected through online questionnaires distributed by nursing managers to nursing professionals working in three hospitals in Buenos Aires City, Argentina (there were two medium-sized hospitals, one with 144 beds and the other with 200 beds, alongside a large hospital boasting 534 beds). A project consisting of various studies on nurses' perceptions at their workplace facilitated collaboration with three hospitals to survey nurses and provided the necessary data for this study.

Data collection took place from May to November 2019. We contacted nursing managers at the three hospitals, requesting their permission and support to distribute a study survey. After receiving their approval, we met with each nursing manager; explained the purpose, significance and structure of the research; and secured their consent and cooperation. Afterward, we provided the survey access link to the nursing managers, who distributed it to their subordinates, totalling 450 nurses. Completed surveys were returned by 234 nurses. Participation in these surveys was completely voluntary. After data collection, we performed data screening and eliminated observations that showed suspicious response patterns, such as inconsistent answers (Hair, Ringle, and Sarstedt 2021). Following the removal of these inconsistent responses, 229 surveys were deemed valid.

Common method bias was assessed through procedural and statistical methods (Podsakoff et al. 2003). In terms of procedural methods, we assured respondents that the survey was anonymous and that their responses would be kept confidential to encourage honest answers. We also took care to avoid complex sentence structures and double-barrelled questions in the questionnaire. For statistical methods, we conducted a Harman test using SPSS 26.0 that indicated that common method bias was not a concern in this study.

3.5 | Measures

This study employed previously validated scales to operationalise the latent variables within the theoretical model. Perceived organisational politics was measured using four items from past research (De Clercq, Dimov, and Belausteguigoitia 2016) that were adapted from Hochwarter et al. (2023). A sample item was 'People spend too much time sucking up to those who can help them' (Cronbach's $\alpha = 0.84$). Nurses' professional self-concept was measured using the Nurses' Self-Concept Instrument (NSCI) (Angel, Craven, and Denson 2012). This construct consists of four dimensions: care, knowledge, leadership and staff relations, encompassing a total of 14 items. For instance, participants responded to statements such as 'I am proud of the way I care for my patients' (Cronbach's $\alpha = 0.94$). Organisational deviance was measured using five items adapted from (Bennett

and Robinson 2000) a validated instrument. Sample item included, 'Taken an additional or a longer break than is acceptable at your workplace' (Cronbach's $\alpha = 0.81$). OCBO was measured using four items designed to assess the dimensions proposed by Saks (2006). Responses included statements such as "Attend functions that are not required but that help the organisational image" (Cronbach's $\alpha = 0.73$). Finally, this study employed a set of four items adapted from Meyer, Allen, and Smith (1993) to assess affective commitment, with sample items including 'I really feel as if this organisation's problems are my own' (Cronbach's $\alpha = 0.87$).

3.6 | Ethical Considerations

Before starting data collection, the authors of this research have in-depth considered the ethical issues involved in the data collection and analysis, as well as the subsequent publication of the results, to protect the confidentiality of the participants in the study. Although this research involved neither intervention nor manipulation of individuals, the study was approved by the Bioethics Commission of the university where it was conducted. Participants were informed that the surveys were anonymous and that no personal identifiers would be disclosed.

3.7 | Data Analysis

This study used partial least squares structural equation modelling (PLS-SEM) to test the proposed hypotheses. This process was carried out using a bootstrapping procedure with 10,000 subsamples. The choice of PLS-SEM via path modelling with SmartPLS 4.0.7.8 was based on the following considerations. First, PLS-SEM was preferred over traditional covariance-based structural equation modelling because it is particularly suitable when the focus of the study is prediction and theory development, rather than exclusively seeking strong theory confirmation (Hair, Ringle, and Sarstedt 2021). Second, PLS-SEM was deemed appropriate for this research due to its capability to handle theoretical models that assess mediating effects (Hair, Sarstedt, and Ringle 2019). Third, the PLS method was selected as the most suitable option for analysing models with formative constructs, which is especially relevant in the case of the NSCI (Sarstedt et al. 2019). Lastly, PLS-SEM was chosen for its ability to effectively manage highly complex models (Hair, Ringle, and Sarstedt 2021).

Our theoretical model combines constructs compatible with composite reflective models (type A) (i.e., perceived organisational politics, organisational deviance, affective commitment and OCBO) and a composite formative variable (type B) (i.e., nurses' professional self-concept). To estimate the multidimensional construct of nurses' professional self-concept, we implemented an embedded two-stage approach as outlined by Sarstedt et al. (2019). Therefore, we estimated the construct scores of the first-order construct, and we saved the scores in the dataset. After that, the construct scores of each dimension were used as a formative indicator in the higher order latent variable (i.e., knowledge, leadership, staff relations and care)

in the second stage for the analysis of the multidimensional construct.

4 | Results

4.1 | Measurement Model Evaluation

To assess the first-order latent variables (i.e., perceived organisational politics, organisational deviance, OCBO, affective commitment and the four dimensions of nurses' professional self-concept), we initially assessed the indicators' reliability. Items with values < 0.708 were removed. Subsequently, we analysed the internal consistency reliability of the variables, which surpassed the critical threshold of 0.7. Finally, we assessed the average variance extracted (AVE) for these constructs, and the values exceeded the critical threshold of 0.5.

The nurses' professional self-concept was analysed as a second-order construct, where the four dimensions (care, staff relations, knowledge and leadership) collectively constitute a formative construct. In this regard, our results indicate that the VIF among these dimensions does not exceed the value of 3 (Hair, Ringle, and Sarstedt 2021). The outer weights for all dimensions were found to be statistically significant (Hair, Ringle, and Sarstedt 2021). Table 1 presents the estimation and validation of the first-order (factor loadings, ρA , Cronbach's α , 'CR' and AVE) and second-order (weights and VIF) latent variables.

Finally, Table 2 displays the examination of discriminant validity in the reflective constructs using the heterotrait-monotrait (HTMT) ratio of correlations approach (Hair, Ringle, and Sarstedt 2021). The results show that values are below the critical threshold of up to 0.85, which is recommended to ensure discriminant validity.

4.2 | Structural Model Evaluation

Table 3 illustrates the model's explanatory power. According to the coefficient of determination (R^2), the model explains 16.6% of the variance in affective commitment, 40.4% of the variance in OCBO and 9.9% of the variance in organisational deviance. Furthermore, there are no collinearity issues among the exogenous latent variables as indicated by the VIF of the indicators, all of which are below the suggested threshold of 3 (Hair, Ringle, and Sarstedt 2021).

The results of the model reveal that perceived organisational politics has a positive and significant effect on organisational deviance ($\beta = 0.186$; $p < 0.01$). Therefore, our results support Hypothesis 1. Hypothesis 2 is rejected because the relationship between perceived organisational politics and OCBO is not significant ($\beta = -0.069$; ns). With respect to mediating effects, on the one hand, Hypothesis 3 is rejected because the mediating effect of affective commitment between perceived organisational politics and organisational deviance is not significant ($\beta = 0.002$; ns). On the other hand, the mediating effect of affective commitment between perceived organisational politics and OCBO

TABLE 1 | Measurement model.

Construct	Items	Standardised loading/Weight	Cronbach	rho_A	CR	AVE	VIF
Perceived organisational politics (POP)	POP3	0.923	0.814	0.816	0.915	0.843	n/a
	POP4	0.914					
Nurses' self-concept	Care	0.285*	n/a	n/a	n/a	n/a	1.430
	Knowledge	0.281*					1.187
	Leadership	0.591*					1.071
	Staff	0.332*					1.276
Affective commitment (AC)	AC1	0.801	0.753	0.763	0.858	0.669	n/a
	AC2	0.797					
	AC4	0.854					
Organisational deviance (OD)	OD3	0.773	0.763	0.778	0.863	0.678	n/a
	OD4	0.863					
	OD5	0.831					
Organisational citizenship behaviour towards the organisation (OCBO)	OCBO1	0.761	0.800	0.801	0.870	0.626	n/a
	OCBO2	0.833					
	OCBO3	0.820					
	OCBO4	0.747					

Abbreviations: AVE, average variance extracted; CR, composite reliability; rho_A, Dijkstra–Henseler's ρ_A ; VIF, variance inflation factor.

* $p < 0.05$.

TABLE 2 | Discriminant validity.

HTMT	AC	OCBO	OD	POP
Affective commitment (AC)				
Organisational citizenship behaviour towards the organisation (OCBO)	0.649			
Organisational deviance (OD)	0.148	0.226		
Perceived organisational politics (POP)	0.302	0.244	0.279	

Note: Values below the diagonal represent the HTMT ratios between the latent constructs.

is significant ($\beta = 0.080$; $p < 0.01$). Therefore, our results support Hypothesis 4.

Finally, estimations show that professional self-concept has a positive influence on the relationship between perceived organisational politics and organisational deviance ($\beta = 0.117$; $p < 0.05$). However, professional self-concept has no significant influence on the relationship between perceived organisational politics and OCBO ($\beta = -0.042$; ns). In addition, professional self-concept does not affect the relationship between perceived organisational politics and affective commitment ($\beta = 0.066$; ns). Therefore, although

Hypothesis 5(a) is statistically significant with a positive sign, Hypotheses 5(b) and (c) are not empirically supported.

5 | Discussion

As mentioned earlier, social exchange theory explains the importance of reciprocating gestures or attitudes, which in turn serves as the initial mechanism for social interaction. In this sense, we primarily examine the relationship between perceived organisational politics and organisational deviance, which represents a negative form of reciprocity. This is because perceived organisational politics signifies an undesirable hedonic value, whereas organisational deviance represents an undesirable and active social exchange response (Cropanzano et al. 2017). Our study aligns with past research among employees and corroborates that nurses' perceptions of organisational politics contribute to an increase in organisational deviance (Meisler, Drory, and Vigoda-Gadot 2020). This implies that nurses who believe their organisations reward individuals displaying selfish and self-serving behaviours, while not acknowledging their own efforts or perceiving the organisation's representatives as engaging in political activities, may deviate from organisational norms and harm the organisation as a form of retaliation.

This study did not find a significant mediating effect of affective commitment between perceived organisational politics and organisational deviance. This finding is in line with previous research conducted in different countries (Liao, Joshi, and

TABLE 3 | Results of the estimation of the structural model.

Structural paths	Original sample (O)	95% percentile confidence interval		p-values
Direct effects				
H1: POP→OD	0.186**	0.086	0.287	0.001
H2: POP→OCBO	−0.069	−0.168	0.033	0.130
Mediating effects				
H3: POP→AC→OD	0.002	−0.025	0.029	0.442
H4: POP→AC→OCBO	−0.080**	−0.127	−0.038	0.002
Moderating effects				
H5 (a): Nurses' self-concept × POP→OD	0.117*	0.017	0.207	0.023
H5 (b): Nurses' self-concept × POP→AC	0.066	−0.041	0.168	0.152
H5 (c): Nurses' self-concept × POP→OCBO	−0.042	−0.145	0.057	0.245

Note: R^2 Organisational citizenship behaviour towards the organisation (OCBO) = 0.404, R^2 affective commitment (AC) = 0.166, R^2 organisational deviance (OD) = 0.099 and perceived organisational politics (POP).

* $p < 0.01$.

** $p < 0.05$.

Chuang 2004; Qu, Jo, and Choi 2020), indicating that even if nurses experience affective commitment to their organisation, it does not deter them from potentially reciprocating perceived injuries caused by their perceptions of organisational politics.

With respect to the moderating impact of professional self-concept on the relationship between perceived organisational politics and organisational deviance, the findings of this study hold substantial implications for how researchers should approach the understanding of how organisational politics might amplify organisational deviance among nursing professionals. Specifically, the research results indicate that the positive association between perceived organisational politics and organisational deviance becomes more pronounced when nurses have a higher sense of professional self-concept. These findings align with prior research on other self-perception, such as self-efficacy (Atshan et al. 2022; Bozeman et al. 2001). According to our findings, it is anticipated that nurses who perceive themselves as highly competent in their profession may exhibit more pronounced deviant behaviours when they perceive organisational politics within their workplace. A possible explanation could be that nurses with a strong sense of professional self-concept may be less inhibited by workplace regulations that typically discourage deviant behaviour (Cropanzano et al. 2017). For instance, a nurse who possesses a robust professional self-concept in their nursing abilities and perceives a political environment within their workplace may be less hesitant to respond with deviant behaviours, such as disregarding the boss's instructions, as a form of reciprocity to counteract the negative actions initiated by the organisation.

Contrary to our expectations, the results indicate that there is no significant relationship between perceived organisational politics and OCBO. These results contradict earlier observations, which showed that perceived organisational politics can be detrimental to the OCBO (Kaur and Kang 2022). However, affective commitment plays a full mediation between perceived

organisational politics and OCBO. This discovery partially aligns with prior research conducted by De Clercq, Shu, and Gu (2022), which identified a mediating effect of affective commitment between perceived organisational politics and helping behaviour directed towards co-workers and supervisors. Given our results demonstrating that the influence of perceived organisational politics on OCBO is mediated by affective commitment, it is reasonable to infer that a politically charged environment could potentially erode a nurse's emotional attachment to the organisation. As a consequence, this reduction in affective commitment may lead to a decrease in their willingness to engage in discretionary behaviours for the organisation.

Finally, our findings indicate that professional self-concept does not act as a moderator in the relationship between perceived organisational politics and various favourable outcomes for nurses such as affective commitment and OCBO. These results differ from earlier research, which observed the moderation effect of other self-perceptions, such as self-efficacy, in the relationship between perceived organisational politics and organisational commitment (Bozeman et al. 2001). One possible explanation for this outcome could be that withholding a favourable response, as a means to preserve or safeguard resources like affective commitment or OCBO, is a passive response on the part of nurses and does not entail contravening workplace regulations. In this context, a higher professional self-concept may not necessarily influence a reciprocating response that does not involve overt harm to the targeted actor, as is the case with organisational deviance, which is an active response that may incur penalties.

6 | Conclusions

This study makes some specific contributions regarding how nurses' professional self-concept may moderate the relationship between organisational politics and organisational deviance. It also enhances our comprehension of the relationship between

organisational politics and OCBO among nurses, shedding light on the mediating effect of affective commitment.

From a theoretical perspective, the implications of this research can be approached through two distinct theoretical frameworks. First, the social exchange theory provides insight into how employees' perceptions of organisational politics lead to an undesirable and active response, exemplified by organisational deviance, which embodies a negative form of reciprocity (Gouldner 1960). In this context, nurses who possess a strong self-concept as professionals are more likely to engage in negative reciprocity in response to their perception of negative initiating actions initiated by the organisation.

Second, the conservation of resource theory facilitates the comprehension of how an organisational political environment inhibits the nurses' OCBO through the mediating effect of affective commitment. Furthermore, the absence of significance in the moderating impact of professional self-concept on the relationship between organisational politics and positive outcomes (i.e., affective commitment and OCBO) may be attributed to the notion that nurses do not necessarily need to possess high self-confidence as professionals to safeguard their resources, thereby limiting their affective commitment and OCB towards their organisations.

7 | Implications for Nursing Management

The model advanced in this paper suggests that the perception of a higher professional self-concept among nurses serves to exacerbate the positive effect of organisational politics on organisational deviance. This means that managers should avoid generating a politically charged environment in general and take special note of organisational political perceptions among nurses with elevated professional self-concepts. This is particularly important as recent research indicates that nurses with a stronger professional self-concept demonstrate superior performance, safety behaviour and professional quality (Xu et al. 2023). Nevertheless, it is worth noting that some managers may view political behaviour as a means to attain 'ethically justifiable win-win situations' (Ferris et al. 2019, 306). In such situations, it is essential to adopt an organisational approach that involves senior executives and the HR department. In this sense, it is crucial to reinforce organisational norms, deliver clear verbal reprimands when norms are breached and maintain written records of deviations.

Senior healthcare managers and nursing managers should closely monitor nurses' perceptions of organisational politics within their organisations. In this line, it is important to address the organisational politics perceptions through a collaborative organisational culture and clear norms to mitigate the adverse consequences of organisational politics among nurses.

Considering the global shortage of nurses, our findings underscore the need for practitioners to be particularly mindful of the adverse impacts of perceived organisational politics on affective commitment and OCBO. First, a decrease in affective commitment implies that retaining such nurses can be challenging, as they may not develop a strong emotional attachment to the

organisation. Second, the negative influence of perceived organisational politics on OCBO, mediated by affective commitment, suggests that nurses within the organisation may be less inclined to engage in extra job duties. Addressing these detrimental employee outcomes should involve active listening and effective communication by managers, as they serve as the embodiment of the organisation's values (Levinson 1965).

8 | Limitations and Future Research

This study presented certain limitations that warrant acknowledgment. First, it relied on self-reported surveys to examine the proposed hypotheses, which can introduce common method bias. Although this study took measures to mitigate and evaluate common method bias, future research can explore alternative approaches, such as introducing a temporal, proximal or psychological separation between predictor and criterion variables (Podsakoff et al. 2003) to further reduce this bias.

Second, another limitation of this study is that the response rate does not accurately reflect the actual participation percentage, as nurse managers were responsible for distributing it to their subordinates. Therefore, there was no complete control over the process or the population size. Although sample sizes fall within the typical range for voluntary surveys in this field (El-Gazar et al. 2024; Jasiński and Derbis 2023; Shih, Yeh, and Hsu 2023), potential biases should be addressed in future research. For example, because participation in the survey was voluntary, individuals who chose to participate (e.g., those strongly interested in sharing their experiences) might systematically differ from those who did not. This could introduce self-selection bias, potentially affecting the sample's representativeness and limiting the generalizability of the findings. Future studies could address this limitation by employing random sampling techniques or providing incentives to encourage broader participation. These approaches would enable researchers to obtain larger samples and reduce potential self-selection bias (Kohler, Kreuter, and Stuart 2019).

Third, the theoretical model in this research did not account for managerial levels. Future studies could enhance their analyses by incorporating managerial levels within a dyadic perspective. Lastly, this study was focused exclusively on nursing professionals within a single country. To expand the generalizability of findings, future research could explore cultural variations and make cross-profession comparisons to provide a more comprehensive understanding of the phenomenon under investigation.

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Conflicts of Interest

The authors declare no conflicts of interest.

Data Availability Statement

The data that support the findings of this study are available from the corresponding author upon reasonable request.

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Declarations

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