Exploring Supervisor-Related Job Resources as Mediators between Supervisor Conflict and Job Attitudes in Hospital Employees

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A R T I C L E   I N F O

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A B S T R A C T

Background: Conservation of resources theory assumes loss of resources as a cause of job strain. In hospital work, conflicts with supervisors are tested to predict lower resources, that is, supervisory social support, participation possibilities, and appreciation. All three resources are expected to predict, in turn, experienced stress (job strain) and lower job satisfaction, lower affective commitment, and a higher resigned attitude towards the job (job attitudes).

Methods: The sample included 1,073 employees from 14 Swiss hospitals (n = 604 nurses, n = 81 physicians, n = 135 medical therapists, and n = 253 technical and administrative staff). Of the total sample, 83.1% were female and 38.9% worked full-time. The median tenure was between 7 years and 10 years. Constructs were assessed by online questionnaires. Structural equation modeling was used to test mediation.

Results: Structural equation modeling confirmed the negative association of conflict with supervisors and job resources. Tests of indirect paths to resources as a link between conflicts with supervisors and job attitudes were significant. For nurses, social support, participation, and appreciation showed a significant indirect path, while among medical technicians the indirect paths included social support and appreciation, and among physicians only appreciation showed a significant indirect path. In medical therapists no indirect path was significant. Job resources did not mediate the link between conflict with supervisors and job satisfaction in any occupational group.

Conclusion: Conflicts with supervisors are likely to reduce job resources and in turn to lower job attitudes. Work design in hospitals should, therefore, address interpersonal working conditions and conflict management in leadership development.

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1. Introduction

Economic pressure on healthcare has changed the working conditions of hospital workers. Hospital work is nowadays characterized by a fast throughput of patients accompanied by limited job resources due to an increase in Tayloristic scientific management [1]. Fox described this tendency as “conveyor-belt care” [2], which conflicts with the aim to address each patient’s needs individually and holistically [1]. Hence, many hospital workers are exposed to unfavorable working conditions (e.g., increased job stressors and limited job-related resources) that imply the risk of impaired wellbeing (e.g., experienced stress) and lowered job attitudes like job dissatisfaction.

The aim of our study was to investigate the associations of job stressors, job resources, impaired wellbeing, and job attitudes among hospital workers. We concentrate on interpersonal resources (i.e., supervisory support, possibilities to participate in decision making, and appreciation), interpersonal stressors in terms of conflicts with the supervisor and subordinate wellbeing and job attitudes. We exclusively focused on the perspective and experiences of subordinates.

According to the identity-dependence model [3], supervisors control important job-related resources of subordinates. These resources (e.g., the possibility to participate in decision making, provision of supervisory support, appreciation like social recognition,
incentives, and promotion) are highly relevant for employee identity and, therefore, positively influence employee wellbeing.

For instance, supervisors can give or withhold positive feedback, or they can criticise in fair or unfair ways so that subordinates feel more or less valued. Conflicts with supervisors are likely to result in a loss of resources controlled by supervisors because supervisors might be short with conflict partners, might be inattentive with them, or might even avoid or ignore them because of negative emotions elicited by the conflict. In summary, it seems plausible that conflicts make supervisors less willing to grant resources to subordinates with whom they are in conflict, or they may even withdraw resources because of the conflict. Hence, conflicts with supervisors are threatening for subordinates and, therefore, stressful, because they lose important resources or because important resources are at stake [4]. Our first hypothesis proposes, therefore, that conflicts with the supervisor predict lower levels of supervisory support (H1a), fewer possibilities to participate in decision making (H1b), and less appreciation at work in terms of feeling valued and social recognition (H1c). The hypotheses are illustrated in Fig. 1.

Interpersonal job-related resources like supervisory support (e.g., understanding and informational support), possibilities to participate in decision making, and appreciation (e.g., feeling valued and recognition) are positive aspects of worklife that promote optimal human functioning, positive emotions, wellbeing, and health [5,6]. Moreover, job resources can protect from job strain defined as detrimental psychological, physiological and behavioral responses to job stressors [78]. Individuals try to obtain, maintain and defend resources because unavailable resources, threat of resource loss, occurred loss of resources, or the absence of resource gain after the investment of other resources are, according to Hobfoll's conservation of resources theory, predictors of strain such as impaired wellbeing [9,10]. Moreover, job resources are considered as important determinants of motivational states such as work engagement [11] that result in goal attainment, job satisfaction, and commitment [12]. Even though evidence for the main effect of resources on wellbeing and job-related attitudes differs between the three resources, we think that our second hypothesis is justified. We propose that perceived supervisory support (H2a), participation possibilities (H2b), and appreciation (H2c) predict lower levels of experienced stress. Moreover, we assume that supervisory support (H3a), participation (H3b), and appreciation (H3c) predict higher levels of satisfaction and affective commitment, and lower levels of resigned attitude toward one's job (third hypothesis).

Arguably, the most powerful type of job stressor is interpersonal conflict [13,14]. In particular, conflicts with supervisors are threatening and, therefore, stressful because subordinates depend on supervisors in many respects. There is ample evidence that conflicts with supervisors predict impaired employee wellbeing and impaired job attitudes like job satisfaction and commitment [4,15–17].

A further aim of this study was to investigate the process through which conflicts with supervisors can impair wellbeing and job attitudes. Therefore, we examined whether job resources, that is, supervisor social support (H4a), participation possibilities (H4b), and appreciation (H4c) mediate the conflict–strain relationship (Hypothesis 4a–c) and the conflict–attitude relationship (Hypothesis 5a–c). Social support has already been conceptualized as a mediator of the stressor–strain relationship [18–20]. However, so far, in meta-analyses, it has not appeared to function as a mediator [20,21]. However, Viswesvaran et al did not consider interpersonal stressors like conflicts with supervisors, but relied exclusively on task-related stressors such as role overload [20]. From our point of view, indirect effects of social support on the stressor–strain relationship are likely to occur, when the stressors are interpersonal in nature and when the source of the stressor and support are the same person, that is, the supervisor. To the best of our knowledge, no study that has explicitly tested these hypothesized mediations.

We think that the hypothesized associations between conflicts with the supervisor, job resources that are controlled by supervisors, and subordinate wellbeing and attitudes are particularly detrimental to wellbeing and job attitudes when employees have limited job resources. Therefore, we decided to test our hypotheses within the context of hospital work.

2. Materials and methods

2.1. Study sample

The data analyses were based on online self-reports by 1,073 hospital employees of 14 Swiss hospitals within the German-speaking part of Switzerland, including general and private hospitals with narrow and broad areas of expertise such as surgery, internal medicine, cardiology, venous diseases, orthopedics, radiology, gynecology, urology, rehabilitation, psychosomatics, sleep medicine, and nursing for outpatients. The data were collected in 2012. Informed consent was obtained from all participants. Of the total sample, 83.1% were female and 38.9% worked full time. The hospitals requested that age be measured in categories to protect the privacy of the respondents. Twenty-six participants were younger than 20 years of age (2.4%), 208 between 20 and 29 years (19.4%), 270 between 30 and 39 years (25.2%), 285

![Diagram](http://dxdoi.org/10.1016/j.safh.2016.06.003)
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