

PERCEPTION OF ROLE EFFICACY AMONG NURSES – A COMPARATIVE STUDY

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Abstract: The present study intends to compare the nurses working at public and private sector hospitals in respect of their perceptions of role efficacy. A total number of 82 female nurses comprising 42 public sector nurses and 40 private sector ones have been selected as the respondents from the hospitals situated in and around Kolkata city. General Information Schedule and Nursing Role Efficacy Scale (A) have been administered on the subjects following a prearranged programme schedule. Insignificant difference in perceptions of role efficacy has been observed between the two groups of nurses. The two groups of respondents have differed significantly only in respect of integration, proactivity and personal growth – the three dimensions of role efficacy. In most of the dimensions of role efficacy, namely, integration, personal growth, creativity, confrontation, influence, helping relationship and superordination and also in overall role efficacy, the nurses employed at the private sector hospitals have expressed more favourable perceptions than their counterparts from the public sector hospitals.

Keywords - Nurse, role efficacy, public and private sector hospitals

I. INTRODUCTION

The Health team providing treatment to the patients in a hospital consists of doctors on the curative side and nurses on the care side. The role performance of the nurse is crucial since she is responsible not only for providing comprehensive nursing care to the patients but also for being functionally associated with the doctor in the recovery of the patient (Suryamani, 1989). Efficient performance of the nurses, therefore, ensures the smooth running of a hospital on a daily basis. The efficiency of the role performance of nurses depends on their perception regarding their role in the hospital.

Role is a central concept in work motivation and it is only through this that the individual and organization interact with each other. Role efficacy significantly contributes in improving an organisation's performance and is said to have a huge impact on the various aspects of an employee's working in an organisation.

II. REVIEW OF LITERATURE

The impact of role efficacy has been studied in various organisations across industries, namely, manufacturing, information technology, aviation, hospital staff (especially nursing community) and even in the field of education, and both positive and negative results are reported.

Researchers have focussed on determining the correlates as well as antecedent and consequent factors of role efficacy of employees. Malik et al. (2016) reported a positive relation between role efficacy and the motivation levels of the employees, that is, more the role efficacy of a person, more was the motivation to put in more effort at one's workplace. The researchers further concluded that different aspects of role efficacy impact different grades of employees and organisations could work to improve role efficacy among employees thereby improving their motivation levels. That would indirectly improve its productivity. Sandhu and Gurbaxani (2013) revealed that employees with high role efficacy had better interpersonal relationship with other employees and showed higher performance efficiency thereby contributing to organization strategy and success. With an improved sense of effectiveness in the job role, this also resulted in increased motivation of employees. Kaur and Kazi (2012) examined 520 nurses of 4 units of Apollo hospital namely Delhi, Hyderabad, Pune and Kolkata to ascertain how role efficacy was related to organisational effectiveness. Integration, creativity, helping relationship and proactivity were found as the strong predictors of organisational effectiveness. Certain components of role efficacy were found to serve as strong predictors for group functioning, job satisfaction and goal integration – the three factors of organisational effectiveness. Pestonjee and Pandey (2000) too traced the origin, growth and aspects, such as, influence, centrality and proactivity of role perception in an organisation. They analysed the role of the railway workers and studied the extent of its impact on them. The researchers concluded with a positive link between role efficacy and organisational performance with improvements in role perceptions.

Researchers have compared different groups of workers regarding their perceptions of role efficacy. Sidhu (2013) found a significant difference between the variances in scores of the different dimensions of role efficacy for the nurses and the head-nurses in a hospital at Ludhiana, Punjab. The top aspect of role efficacy affecting nurses was observed to be inter-role linkage, whereas that affecting head nurses was super-ordination. With an increased sense of these two aspects, role efficacy of the nurses increased which in turn increased the efficiency and decreased role stress. Chaudhary and Jain (2013) mapped the role efficacy level of 90 academic and non academic employees of public, private and deemed universities of Rajasthan and observed insignificant difference among the employees of public, private and deemed universities on centrality, self role integration,

proactivity, creativity, helping relationship, superordination, influence, personal growth and confrontation dimensions of role efficacy. However, the three groups of employees differed significantly in inter role linkage dimension.

Studies have been made to assess the relationship between role efficacy and role stress of employees. A comparative study among the workers of two diverse industries, manufacturing and information technology showed that role efficacy had a negative impact on role stress and positive impact on organisational culture. Role efficacy was also found to promote an organizational climate of cohesiveness (Lazar, 2015). According to Karve and Nair (2010), role stress had a reciprocal relationship with every aspect of role efficacy. When role stress was used as a eustress, it increased role efficacy which optimized the stress associated with a job role. This ultimately helped the employee improve his productivity through increased motivation.

It is vividly apparent after this review that very few studies have been conducted so far to determine the role efficacy of nurses. The ones which have been done so far have focussed on the relationship between role efficacy and other variables, namely, work motivation, job satisfaction, organisational role stress etc and no attempt has been made to compare the nursing staff placed in public sector and private sector hospitals across their levels of role efficacy. Here lies the significance of the present study which tends to indicate that there is a critical need for further comparative study on the employees of public and private sector health industries in India across different dimensions of role efficacy.

III.METHOD

3.1 Objective of the Study

The aim of the present study is to compare the two groups of nurses employed at the public and the private sector hospitals in terms of their perceptions of role efficacy.

3.2 Concepts and Operationalization

3.2.1 Role

Role is the position that one occupies in a social system. Role encompasses the functions one performs in response to expectations of significant others in the social system, and one's own expectations from that position.

3.2.2 Role efficacy

The effectiveness of a person's role in an organization depends on his own potential effectiveness, the potential effectiveness of the role and the organizational climate. This potential effectiveness is termed efficacy. Role efficacy is the potential effectiveness of an individual occupying a particular role in the organisation. Role efficacy has several aspects which may be classified into three dimensions, namely, role making, role centering and role linking. Role making consists of self-role integration, proactivity, creativity and confrontation. Role centering comprises centrality, influence and personal growth whereas role linking involves inter-role linkage, helping relationship and superordination. The more the aspects are involved in a role, the higher is its efficacy.

3.3 Hypotheses

Hypothesis 1: The nurses in public and private sector hospitals do not differ significantly with respect to role efficacy.

Hypothesis 1a: The nurses in public and private sector hospitals do not differ significantly with respect to integration.

Hypothesis 1b: The nurses in public and private sector hospitals do not differ significantly with respect to proactivity.

Hypothesis 1c: The nurses in public and private sector hospitals do not differ significantly with respect to creativity.

Hypothesis 1d: The nurses in public and private sector hospitals do not differ significantly with respect to confrontation.

Hypothesis 1e: The nurses in public and private sector hospitals do not differ significantly with respect to centrality.

Hypothesis 1f: The nurses in public and private sector hospitals do not differ significantly with respect to influence.

Hypothesis 1g: The nurses in public and private sector hospitals do not differ significantly with respect to personal growth.

Hypothesis 1h: The nurses in public and private sector hospitals do not differ significantly with respect to inter-role linkage.

Hypothesis 1i: The nurses in public and private sector hospitals do not differ significantly with respect to helping relationship.

Hypothesis 1j: The nurses in public and private sector hospitals do not differ significantly with respect to superordination.

3.4 Tools

To verify the hypotheses the following tools were used:

- i) 3.4.1) General Information Schedule developed by the present investigators
- ii) 3.4.2) Nursing Role Efficacy Scale-A (Purohit and Pareek, 1996)

3.4.1 General Information Schedule

The General Information Schedule contains items like age, sex, educational and professional qualifications, marital status, years of experience, years of experience in the present organization, nature of organization, duration of work per day, nature of work, and approximate monthly income to obtain some general information about the participant nurses and their work.

3.4.2 Nursing Role Efficacy Scale (A)

Nursing Role Efficacy Scale (A) developed by Purohit and Pareek (1996) assesses the perception of the nursing role in a hospital. The scale consists of thirty items measuring ten aspects, namely, integration, proactivity, creativity, confrontation, centrality, influence, personal growth, inter-role linkage, helping relationship and superordination respectively. The responses are measured

on a 5-point scale with 1 being “you do not agree with it” and 5 being “you strongly agree with it”. High score indicates high role efficacy.

Reliability of the Scale:

Cronbach alpha coefficient is found to be 0.68.

Validity of the Scale:

The scale has a positive correlation of 0.68 with Nursing Role Efficacy Scale (B).

3.5 Study areas and subjects

To select the subjects a group of public and private sector hospitals from different regions of Kolkata city and Kalyani Township were randomly identified. Thereafter, the representatives of the management of those hospitals were met personally. Finally, 5 public sector and 6 private sector hospital authorities granted permission to collect data from their nursing staff. 42 nurses from the public sector and 40 nurses from the private sector hospitals were finally selected as the respondents of the present study following certain criteria.

- i) Only the female nurses were considered as the respondents.
- ii) Those with a minimum of one year of experience as nurses were considered.
- iii) Only the registered nurses were considered.
- iv) Only those who were willing to participate in the study were considered.

3.6 Procedure

With prior permission from the hospital authorities the tests were administered on the participant nurses following a pre-arranged programme schedule. After collection, the data were carefully scrutinized, tabulated and scored according to the standard scoring key.

In case of General Information Schedule, for each of the nursing staff from both public and private sector hospitals one set of categorical data was obtained. In case of Nursing Role Efficacy Scale, tabulation work was done separately for each category of nurses. The tabulated scores were classified either in qualitative categories for the General Information Schedule data and in quantitative categories for Nursing Role Efficacy Scale for further statistical analysis.

3.7 Statistical Analysis of Data

To depict a typical picture of the general characteristic feature of the subjects in both the groups, descriptive statistics like mode and percentage were used. In case of Nursing Role Efficacy Scale, means and standard deviations were calculated for each category of nurses, for each dimension and for the total scale. Then t-test was applied to compare the two groups of nurses on account of role efficacy both in terms of individual dimension scores and total scores on the test.

IV. RESULTS

Table 4.1: General characteristics of the Nurses employed at Public Sector and Private Sector Hospitals

General Characteristics	Nurses at Public Sector Hospitals	Nurses at Private Sector Hospitals
1. Age in years (Mode value)	27	30
2. Marital Status (%)		
a) Married	83.3	57.5
b) Unmarried	16.7	42.5
3. Education (%)		
a) Higher Secondary	59.5	85
b) Graduate	40.5	15
4. Professional qualification (%)		
a) General Nursing and midwifery	88.1	85
b) B.Sc.Nursing	7.1	7.5
c) M.Sc. Nursing	4.8	7.5
5. Years of experience (Mode value)	3	2
6. Years of experience in the present organization (Mode value)	2	2
7. Monthly income (Mode value)	25,000	15,000

4.1 General characteristics of Nurses

The general characteristic data inserted in Table 4.1 depict the typical characteristic features of the female nursing staff employed at public and private sector hospitals in and around Kolkata. The participants from the public sector hospitals have had an average age of approaching 27 years whereas those from the private sector hospitals have been aged around 30 years, on an average. Both groups of participants are found to possess such educational and professional qualifications that they seem to get sufficient exposures to enrich their cognitive frame of references. Majority of the subjects belonging to both the groups are married. In addition, the participants concerned have 2 years of experience (on an average) of staying in their respective organizations; and have certainly encountered several pros and cons of working as nurses. Obviously the said groups of subjects seem to have wider perceptions to opine about the levels of efficacy in relation to their respective role playing as nurses.

Table 4.2: Role Efficacy Scores of Nurses employed at Public Sector and Private Sector Hospitals

Nursing role efficacy dimensions	Nurses at public sector hospitals (Scores) N= 42		Nurses at private sector hospitals (Scores) N=40		t-value
	M	S.D.	M	S.D.	
Integration	6.452	2.847	7.750	2.771	2.092**
Proactivity	7.524	2.340	5.775	2.465	3.292***
Creativity	7.905	2.010	8.600	2.134	1.516*
Confrontation	7.000	2.811	7.075	2.768	0.122*
Centrality	9.095	1.897	8.825	2.241	0.587*
Influence	7.452	2.643	7.675	2.930	0.361*
Personal growth	6.690	2.984	8.325	2.474	2.706***
Inter-role linkage	8.881	1.928	8.850	2.537	0.062*
Helping relationship	8.881	2.255	9.200	2.255	0.640*
Superordination	8.857	2.090	9.300	2.090	0.959*
Total	78.738	13.816	81.375	14.034	0.857*

* Difference insignificant; ** $p < 0.05$; *** $p < 0.01$

High score indicates favourable perception.

4.2 Perception of Role efficacy among Nurses

Table 4.2 depicts that the two groups of nurses have differed significantly in terms of integration, proactivity and personal growth whereas insignificant differences are noted between the two groups of subjects concerning creativity, confrontation, centrality, influence, inter-role linkage, helping relationship, superordination and overall perception of nursing role efficacy. Such findings speak in favour of rejection of Hypotheses 1a, 1b and 1g. On the other hand, Hypotheses 1c, 1d, 1e, 1f, 1h, 1i, 1j and finally Hypothesis 1 stating that “The nurses in public and private sector hospitals do not differ significantly with respect to role efficacy” are accepted in light of the present findings.

Table 4.2 further indicates that in case of majority of dimensions, namely, integration, creativity, confrontation, influence, personal growth, helping relationship and superordination the private sector nurses have revealed better perceptions than their public sector counterparts. The former group has also displayed better perceptions than the latter relating to the overall level of role efficacy. In case of rest of the dimensions, namely, proactivity, centrality and inter-role linkage the public sector employees are on the higher side than their private sector counterparts.

4.3 Discussion

The results reveal that the two groups of nurses have significantly differed in terms of three dimensions of role efficacy, namely, integration, proactivity and personal growth. The results have partially corroborated with the findings stated by Chaudhary and

Jain (2013) who reported significant difference among the employees of public, private and deemed universities only in terms of inter role linkage. The disparity between the current findings and the ones stated by Chaudhary and Jain (2013) may be attributed to the difference between the samples and the study areas. The difference between the hospital and the educational settings in terms of organizational goal and purpose, nature of administration and kind of service provided by the employees may have led to the discrepancy between the two findings.

The nurses belonging to the private sector hospitals are observed to have better perceptions regarding integration and personal growth as compared to their public sector counterparts. The person and the role get integrated through the possibility of a person's use of his special strengths in the role. Moreover, when an individual perceives that the role that he performs enables him to grow and develop in the organisational hierarchy, his efficacy is enhanced. The private sector organizations generally provide their employees better opportunities to use their special strengths and talents as well as the scope for growth and development in their respective jobs than do the public sector ones. This has probably resulted in favourable perception of role efficacy among the nurses based at private hospitals. The public sector nurses, on the other hand, have more favourable perceptions than their private sector counterparts with reference to the dimension of proactivity. Proactivity refers to taking the initiative in starting some activity rather than only responding to others' expectations. Proactivity contributes to efficacy. The former group seems to get greater opportunities to take up new initiatives rather than only responding to their normal duties as nurses than their counterparts. The unavailability of efficient nurses and the unfilled vacancies in today's government hospitals often provide chances to the capable employees to take up additional responsibilities and share extra workload apart from their routine activities.

The nurses working at the private sector hospitals are observed to score higher, on an average, than those at public sector hospitals also in the dimensions of creativity, confrontation, influence, helping relationship and superordination and also in overall role efficacy. The reasons underlying such findings may be that the employees at the private sector hospitals perceive that they have ample scope for expressing creativity, combating problems at the workplace, receiving help and support from their co-workers as and when required and can reach their goals with such collaborative efforts. They feel that their role is not peripheral to the organisation and whatever they do are likely to influence the mass in general. These feelings may have enhanced their sense of efficacy. The nursing personnel from the government hospitals, on the other hand, have better perceptions than their non government counterparts in the dimensions of centrality and inter-role linkage. Centrality relates to the perceived importance of one's role in the organization whereas inter-role linkage refers to linking one's role with others' in the organization. Inter-role linkage helps one to comprehend and solve the problems at work jointly with others. The public sector hospitals considered in the present study may have generated the feelings among their nursing personnel that their roles are significant to the functioning of the organizations as a consequence of which the employees do not feel isolated, rather connected with their organizations, as a whole. The dearth of staff in the government hospitals, nowadays, may be a reason for this. The scarcity of nurses makes the existing members of the nursing staff to be involved in the functioning of the hospitals.

V. CONCLUDING REMARKS

The present study is a comparative one as well as exploratory in nature. It may be considered as the initiation of a large probe and/or may function as a part of the whole. However, due to the limited resources, opportunities and time the present investigation has suffered from some limitations. The study could consider only a limited number of female nurses. No comparison between the two groups of nurses regarding their perceptions of role efficacy could be made across genders as well as age levels.

The findings have revealed insignificant difference between the nurses employed at the public and the private sector hospitals with regard to their perceptions of role efficacy. In so far as the various dimensions of role efficacy are concerned, significant differences are noted between the two groups of nurses only with respect to integration, proactivity and personal growth. In most of the dimensions of role efficacy, namely, integration, personal growth, creativity, confrontation, influence, helping relationship and superordination and also in overall role efficacy, the nurses employed at the private sector hospitals have expressed favourable perceptions than their counterparts from public sector hospitals. Therefore, the administrators of the public sector hospitals may take initiative to bring about some changes in the work setting as well the nature of the job to enhance the role efficacy of their nurses.

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