

Research Article

Organizational Trust and Commitment Among Nurse Managers

Nema Fathy Saad, Hanaa Mohamed Abd rabou

Lecturers of Nursing Administration Faculty of Nursing, Ain Shams University, Egypt

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Abstract

The main purpose of this research is reviewing the relationship between organizational trust and the three dimensions of organizational commitment including (affective commitment, continuance commitment and normative commitment) the method of this research is descriptive, correlational, and its statistical sample is included 98 nurse managers. Working in wards at Ain Shams University Hospitals (El-demerdash Hospital, University Hospital, Pediatrics Hospital, and Obstetric Hospital). Data collection tools used through this research was Rudder's (2003) Trust Organizational Questionnaire (TOQ) and Meyer & Allen's (1997) Organizational Commitment Questionnaire (OCQ). The correlations were used to analyze the obtained data; As a result of this research it has been revealed that there is a highly statistically significant positive correlation between organizational trust and the three dimensions of organizational commitment.

Key words: Organizational trust, Organizational commitment, Nurse managers

Introduction

Organizational trust is a necessary element for employees' safety feeling and support and it is shown as an important factor in improving of organizational commitment and performance and also realization of individual and organizational aims [37]. Past studies have demonstrated that trust enhances people's willingness to engage in spontaneous sociability such as cooperative and altruistic behavior [27].

Organizational trust can cause improvement and retention of employees by improving of communication and cooperation between employees and managers and by promoting teams' efficiency. The employees say when they trust to their coworkers and managers, they feel ownership and commitment and become engaged with own job and organization [16]. The result of distrust will be creating behaviors such as rumors, conflict, political work, injustice, and low working in organization that takes a high energy from organization and increases the costs. In such an organization, it is useless to talk about issues such as self-management, self-controlling, cooperation, creativity, job involvement (job engagement), organizational commitment, total quality management, etc. the realization of organizational goals require member's cooperation together; and the most important way to facilitate cooperation is that employees have mutual trust in each other and the same should be existed between employees and managers of organization as well [17].

Organizational commitment is one of the most investigated constructs in organizational research. Organizational commitment has become a highly researched job attitude in recent years including several meta-analyses [8;21,22]. Organizational commitment is the individual's psychological attachment to the organization. Commitment represents something beyond loyalty to an organization. It involves an active relationship with the organization such that individuals are willing to give something in order to contribute to the organization's well-being Organizational commitment can be defined as a psychosomatic state that builds the workers behaviors in the organizations [18].

Organizational commitment also defined as a psychological state that indicates a tendency, need, as well as obligation to serve in an organization. Commitment of employees to the organization is generating intangible assets. In fact, commitment is the attitude and inner feeling of a person towards the organization, occupation or group that influences judgments, performance and loyalty toward organization. Employee with high commitment in organization not only reduces absence, delay and relocation but also considerably increase organizational performance, spiritual exhilaration of employees. Employees, who have more commitment might experience more discipline at workplace; and spend more effective time in the organization [32].

Organizational commitment can be conceptualized in terms of three distinct dimensions: affective, continuance and normative. The first dimension: affective commitment (desire to stay); It means internal and emotional attachment to organization. The person stays in organization because he/she has a positive attitude towards organizational goals and values. The first dimension is a commitment is caused due to emotional attachment and the individual is willing to continue his/her work in the organization [38].

The second dimension: continuance commitment; that relates to weighing the cost alternatives of leaving, and is defined as "the extent to which employees feel committed to their organizations by virtue of the costs that they feel are associated with leaving (e.g., investments or lack of attractive alternatives)". The person continues working in the organization because she/ he need the received. Based on cost-benefit analysis, the person concludes that he needs to stay in organization.

The third dimension: normative commitment; that relates to a sense of obligation, and is defined as "employees feeling of obligation to remain with the organization. This kind of commitment originates

*Corresponding author: Nema Fathy Saad, Lecturer of Nursing Administration Faculty of Nursing, Ain Shams University, Egypt, Tel: 0224041859; Fax: 0224041859; E-mail: dr.nanasaad@yahoo.com

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from the values of employed person in an organization. That is, the committed person is indebted to organization. No organization could ever achieve its goals without having committed human resources [14].

Justification of the study

Trust is crucial in all relationships formed within an organization, particularly in relationships between the staff and their managers. Trust, a crucial component of professional life has favorable consequences for both the staff and the organization. Trust has strong positive effect on commitment. Employees who are willing to be vulnerable to authorities tend to have higher level of affective and normative commitment. Also, people who are not committed to their jobs are likely to leave them. One reason that commitment also studied is that the impact of commitment is associated with work outcomes such as turnover, absenteeism, performance, motivation, and job withdrawal behaviors. Hence, the research question raised in the present study was whether there are relationship between organizational trust and commitment among nurse managers.

Aim of the Study

The aim of this study was to assess the level of organizational trust among nurse managers, assess the level of organizational commitment among nurse managers and find out the relationship between organizational trust and commitment among nurse managers.

Subjects and Methods

Research design and setting

A descriptive, correlational design was used in this study, which was done in the medical and surgical departments of Ain Shams University Hospital, El-demerdash Hospital, Pediatrics Hospital and Obstetric Hospital which affiliated to Ain Shams University.

Subjects

The study sample used were all nurse managers in the study settings and consisted of 98 nurse managers who were available during the time of the study after exclusion of the 15 nurse managers (10%) included in the pilot study. The sample included 37 from Ain Shams University Hospital, 32 from El- demerdash Hospital, 14 from Pediatrics Hospital and 15 from Obstetric Hospital.

Tools of data collection

Trust Organizational Questionnaire (TOQ) to assess level of trust among nurse managers (Rudder's 2003). The tool consisted of two parts; the first part was concerned with the socio-demographic characteristic of the studied group, while the second part included 18 statements to assess level of trust among nurse managers. These were classified into two types of trust as follow: trust in coworkers (8 items) and trust in organization (10 items).

The second tool was Meyer & Allen's [24] Organizational Commitment Questionnaire (OCQ) to assess level of organizational commitment among nurse managers. The tool consisted of three dimensions of organizational commitment including (affective commitment (10 items), continuance commitment (9) and normative commitment (8)). The responses to each statement were on a 5-point Likert scale ranging from "strongly agree" to "strongly disagree." These were scored 5 to 1, respectively. The scores of each area of rights were summed up and divided by the total number of items for conversion into a percent score.

Procedures

Official permission was obtained to perform the study after reviewing ethical aspects of the study by Faculty Ethics Committee.

A Pilot was done on 10% of the sample of nurse managers, and accordingly the tools and data collection plan were finalized. These pilot subjects were not included in the main study sample. Data were collected all days of the week except Fridays starting from 9 am to 2 pm. Nurse Managers fulfilling study criteria in different departments on Ain Shams University hospitals were recruited. Informed consent was obtained from each participant after explaining the purpose of the study, and informing her about the right to refuse or withdraw from the study at any time. Confidentiality of the data was ascertained. And there weren't any limitations in the procedures.

Statistical analysis

The collected was revised, coded, tabulated and introduced to a PC using statistical package for social sciences (SPSS 15.0.1 for windows; SPSS Inc, Chicago, IL, 2001). Data was presented and suitable analysis was done according to the type of data obtained for each parameter. Mean and Standard deviation (\pm SD) and range for parametric numerical data, Frequency and percentage of non-numerical data. Chi square test was used to examine the relationship between two qualitative variables.

NOVA

It was used to assess the statistical significance of the difference of a parametric variable between means of more than two study groups. Pearson Correlation Coefficient (r): Correlation was used as a measure of the strength of a linear association between two quantitative variables. The Pearson correlation coefficient, r , can take a range of values from +1 to -1. A value of 0 indicates that there is no association between the two variables. A value greater than 0 indicates a positive association; that is, as the value of one variable increases, so does the value of the other variable. A value less than 0 indicates a negative association; that is, as the value of one variable increases, the value of the other variable decreases.

Results

The socio-demographic characteristics of nurse managers in the study sample are presented in Table 1. Table (1) shows that more than three quarters of the participants (76.0%) were 40-50 years, (15.0%) were >50ys, while only (7.1%) were <40ys; the mean age of the participants was 46.7 ± 5.2 ; In addition to that; more than three fourth of the participants (77.6%) had 20-30 years of experience in profession, (16.3%) had >30 years' experience while only (6.1%) had experience <20ys; the mean years of experience in profession is 26.2 ± 5.3 , while; (59.0%) of the participants had 10-20 years of experience in department, (28.6%) had >20 years' experience while only (11.2%) had experience in department <10ys; the mean years of experience in department is 18.2 ± 7.2 , Moreover; (37.8%) of the participants work in University, (32.7%) in El demerdash, (15.3%) in Obstetrics and Gynecology hospital, (14.3%) in Pediatrics hospital; (70.4%) of the study participants had nursing diploma, (18.4%) had bachelor of nursing, (8.2%) had master's degree; while (3.1%) graduated from nursing institute.

Table 2 describes the Mean % Score of Organizational Trust Dimension the mean % score of the Total (Organizational Trust among Coworkers) was (67.7 ± 14.5), Total (Organizational Trust among Nurses' Managers) was (63.4 ± 12.8) and finally "Organizational Trust" Dimension was (64.8 ± 11.6). Table 3 shows that the mean % score of items reflecting affective Commitment generally range from (64.8 ± 20.5 to 75.7 ± 16.5). In addition to that; the mean % score of the "affective Commitment" Dimension was (70.7 ± 12.7).

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Table 1: Demographic characteristics of the studied Nurse Managers (n=98).

Age	No.	%	x2	P-value
<40 Years	7	7.1	87.204	0.000*
40-50 Years	76	77.6		
>50 Years	15	15.3		
Age	Mean ± Sd	Min.	Max.	Range
	46.7 ± 5.2	35.0	59.0	(35.0-59.0)
Years of Experience in Profession	No.	%	x2	P-value
<20 ys	6	6.1	87.755	0.000**
20-30ys	76	77.6		
>30 ys	16	16.3		
Years of Experience in Profession	Mean ± Sd	Min.	Max.	Range
	26.2 ± 5.3	15.0	38.0	(15.0-38.0)
Years of Experience in Department	No.	%	x2	P-value
<10ys	11	11.2	36.265	0.000**
10-20ys	59	60.2		
>20ys	28	28.6		
Years of Experience in Department	Mean ± Sd	Min.	Max.	Range
	18.2 ± 7.2	4.0	36.0	(4.0-36.0)
Work Place	No.	%	x2	P-value
University Hospital	37	37.8	16.857	0.001**
El demerdash	32	32.7		
Pediatrics Hospital	14	14.3		
Obstetrics Hospital	15	15.3		
Qualifications	No.	%	x2	P-value
Diploma	69	70.4	112.531	0.000**
Nursing Institute	3	3.1		
Bachelor Of Nursing	18	18.4		
Masters degree	8	8.2		

Table 2: Mean % Score of Organizational Trust Dimension (n=98).

Organizational Trust Dimensions	Percent Score Mean ± SD
Organizational Trust among Coworkers	
OT1- There is an atmosphere for honest cooperation among workers.	73.4 ± 18.7
OT2- Clear expectations connected with results and aims from all workers.	68.9 ± 18.1
OT3- Workers are willing to share knowledge.	71.6 ± 17.9
OT4- Workers openly admit and take responsibility for their mistakes.	62.8 ± 19.4
OT5- Workers avoid participating in gossip and unfair criticism of others.	62.6 ± 19.8
OT6- Workers are willing to take part in trainings.	66.7 ± 19.0
Total (Organizational Trust among Coworkers)	67.7 ± 14.5
Organizational Trust among Nurses Managers	
OT7- Periodic meetings take place between workers and the management.	64.8 ± 19.0
OT8- In general the work responsibilities are established and clear.	65.9 ± 17.2
OT9- The criteria of promotion are clear in every position.	64.0 ± 20.0
OT10- Evaluation of workers is fair.	58.7 ± 19.8
OT11- The relationship between workers is good.	66.5 ± 17.8
OT12- All workers are treated fairly.	62.8 ± 17.7
OT13- The interests of workers are taken care of.	60.0 ± 18.3
OT14- Team work is encouraged and preferred.	64.6 ± 19.2
OT15- Workers are encouraged to take part in decision-making.	63.2 ± 20.4
OT16- Administration communicates decisions that are made to the workers.	63.4 ± 20.7
OT17- Administration is concerned about improving workers' work conditions.	62.0 ± 20.2
OT18- Development of human resources is considered a measure of success.	64.8 ± 19.4
Total (Organizational Trust among Nurses' Managers)	63.4 ± 12.8
Total Mean % Score	64.8 ± 11.6

Trust” Dimension was (64.8 ± 11.6). Table 3 shows that the mean % score of items reflecting affective Commitment generally range from (64.8 ± 20.5 to 75.7 ± 16.5). In addition to that; the mean % score of the “affective Commitment” Dimension was (70.7 ± 12.7) (Table 4,5).

Table 6 shows Level of organizational trust and commitment among Nurse Managers. As Regard Coworkers Dimension Level (14.3%) Scored weak Percent Score, (54.1%) were average, (31.63%) were high; For Management Dimension; (14.3%) Scored weak Percent Score, (75.5%) were average, (10.2%) were high, For Total Organizational Trust Dimension; (9.2%) Scored weak Percent Score, (76.5%) were average, (14.3%) were high; For Emotional Commitment Dimension; (5.1%) Scored weak Percent Score, (57.1%) were average,

Table 3: Mean % Score of Affective Commitment Dimension (n=98).

Affective Commitment Dimensions	Percent Score Mean ± SD
OC1- I feel happy through my work in the current organization	75.7 ± 16.5
OC2- I have a lot of proud whenever I talked about my organization	72.4 ± 18.2
OC3- I feel that my own goals are compatible with the goals of the organization that I work	69.1 ± 17.5
OC4- Fiduciary to my organization is not compensated by other alternative one	71.2 ± 19.0
OC5- Friendly atmosphere in my organization motivates me to stick and stay in it	71.2 ± 19.2
OC6- I feel an emotional attachment to the organization that I work in	73.4 ± 19.4
OC7- I feel part of the family make up this organization	72.8 ± 19.3
OC8- My values are compatible with the prevalent values in my organization	66.9 ± 18.8
OC9- My work gives me the chance to use my talents and skills	64.8 ± 20.5
OC10- My colleagues help me to develop the sense that I'm an important person in their work group	70.0 ± 17.7
Total Mean % Score	70.7 ± 12.7

Table 4: Mean % Score of Continuances Commitment Dimension (n=98).

Continuances Commitment Dimensions	Percent Score Mean ± SD
CC1-I will not accept working in another organization, even if the working conditions there are better	65.1 ± 20.9
CC2-I will stay in work, even if my colleagues preferred to work in another organization	66.9 ± 19.7
CC3-I have a willingness to continue in my current job until retirement age	71.0 ± 19.5
CC4-My life will confuse if I left my current job	61.6 ± 20.6
CC5-Not only the material gains that acquires my impulsiveness to work	62.0 ± 21.7
CC6-I will accept any assigned work to take it in return for continuing the work in this organization	61.6 ± 21.0
CC7-If there are jobs similar to mine, I prefer to continue in my current job	64.8 ± 19.0
CC8-I want to maintain the relationship that has between me and my colleagues at work	71.8 ± 19.4
CC9-I will think to leave work only for exceptional circumstances	70.8 ± 20.3
Total Mean % Score	66.2 ± 13.9

Table 5: Mean % Score of Normative Commitment Dimension (n=98)

Normative Commitment Dimensions	Percent Score Mean ± SD
NC1-I have a strong bond with my work makes me stick to it	73.8 ± 16.5
NC2-My organization has a favor in building of practical experiences	71.8 ± 19.6
NC3-I am careful to help my organization in achieving its goals	75.3 ± 17.6
NC4-I feel that I have a strong commitment to continue to work in this organization	71.6 ± 19.2
NC5-This organization provides opportunities for workers to show their energies	63.6 ± 20.3
NC6-This organization is considered the place where I prefer to work in	67.1 ± 20.1
NC7-My emotional commitment to my colleagues motivates me to stay in this organization	72.4 ± 17.3
NC8-I keen to stay along in this organization	70.6 ± 19.0
Total Mean % Score	70.8 ± 13.4

(37.8%) were high; For Continuances commitment Dimension; (13.3%) Scored weak Percent Score, (55.1%) were average, (31.6%) were high; For Normative commitment Dimension; (6.1%) Scored weak Percent Score, (61.2%) were average, (32.7%) were high; and finally for Total Organizational Commitment; (6.1%) Scored weak Percent Score, (62.2%) were average, (31.6%) were high.

Table 7 illustrates the relation between organizational trust mean % score and demographic characteristics. There is a statistically significant difference between organizational trust mean % score as regard their work

place in addition to that there is a statistically significant difference between mean % score of diploma and master nurses ($P < 0.05$); On the contrast; there is a statistically insignificant difference between organizational trust mean % score as regard their Age, Years of Experience in profession and Years of Experience in this department ($P > 0.05$).

Table 8 illustrates the relation between organizational commitment mean % score and demographic characteristics. there is a statistically significant difference between organizational Commitment mean % score as regard their work place ($P < 0.05$); On the contrast; there

Table 6: Level of organizational trust and commitment among Nurse Managers (n=98).

Dimensions	Weak		Average		High		Chi-square X ²	P-value
	N	%	N	%	N	%		
Coworkers	14	14.3	53	54.1	31	31.63	23.408	0.000**
Management	14	14.3	74	75.5	10	10.2	78.694	0.000**
Total Organizational trust	9	9.2	75	76.5	14	14.3	82.673	0.000**
Affective commitment	5	5.1	56	57.1	37	37.8	40.673	0.000**
Continuances commitment	13	13.3	54	55.10	31	31.63	25.857	0.000**
Normative commitment	6	6.1	60	61.2	32	32.7	44.653	0.000**
Total Organizational Commitment	6	6.1	61	62.2	31	31.6	46.429	0.000**

Table 7: Relation between organizational trust mean % score and demographic characteristics

Socio demographic Characteristics		No	Total Organizational trust			ANOVA	
			Mean	±	SD	F	P-value
Age	<40	7	64.1	±	10.3	1.183	0.311
	40-50	76	64.1	±	12.1		
	>50	15	69.1	±	8.9		
Years of Experience in profession	<20	6	63.8	±	11.3	1.188	0.309
	20-30	76	64.0	±	12.1		
	>30	16	68.9	±	8.3		
Years of Experience in this department	<10	11	62.1	±	6.3	0.581	0.561
	10-20	59	64.6	±	11.8		
	>20	28	66.4	±	12.7		
Work Place (Hospital)	University Hospital	37	59.5	±	10.3	5.017	0.003**, (1,2)**, (1,3)*, (1,4)*
	El demerdash	32	69.3	±	10.9		
	Pediatric	14	66.8	±	13.9		
	Obstetric	15	66.7	±	9.0		
Qualification	Diploma	69	65.7	±	11.8	1.680	0.177 (1,4)*
	Institute	3	60.0	±	13.8		
	Bachelor	18	65.9	±	10.4		
	Master	8	56.8	±	8.8		

Table 8: Relation bet organizational commitment means % score and demographic Characteristics

Socio demographic Characteristics		No	Total Organizational Commitment			ANOVA	
			Mean	±	SD	F	P-value
Age	<40	7	75.4	±	10.3	1.790	0.173
	40-50	76	68.1	±	11.7		
	>50	15	72.0	±	11.1		
Years of Experience in profession	<20	6	75.6	±	10.7	2.849	0.063
	20-30	76	67.8	±	11.9		
	>30	16	73.8	±	8.7		
Years of Experience in this department	<10	11	65.9	±	5.6	1.190	0.309
	10-20	59	68.7	±	11.0		
	>20	28	71.7	±	14.1		
Work Place (Hospital)	University Hospital	37	65.2	±	11.5	6.340	0.001** (1,2)**,(2,3)**, (2,4)*
	El demerdash	32	75.8	±	11.2		
	Pediatric	14	65.4	±	7.2		
	Obstetric	15	68.7	±	10.4		
Qualification	Diploma	69	70.2	±	11.6	0.636	0.593
	Institute	3	63.4	±	14.2		
	Bachelor	18	67.7	±	11.5		
	Master	8	66.6	±	11.5		

is a statistically insignificant difference between organizational commitment mean % score as regard their Age, Years of Experience in profession, Years of Experience in this department and Qualification ($P>0.05$).

Table 9 illustrates the correlation between total organizational trust and commitment among nurse managers. There is highly statistically significant positive correlation between Total Organizational Trust & Total Organizational Commitment ($P<0.01$). However, there is a statistically insignificant correlation between organizational Trust among Coworkers and Normative Commitment ($P>0.05$).

Table 9: Correlation bet total organizational trust and commitment among study sample (n=98)

Dimensions	Coworkers		Management		Total Organizational trust	
	R	P-value	r	P-value	R	P-value
Affective commitment	0.457	<0.01**	0.356	<0.01**	0.453	<0.01**
Continuances commitment	0.366	<0.01**	0.348	<0.01**	0.409	<0.01**
Normative commitment	0.170	>0.05	0.352	<0.01**	0.330	<0.01**
Total Organizational Commitment	0.389	<0.01**	0.404	<0.01**	0.460	<0.01**

Discussion

In research studies conducted on organizational trust, relationships between organizational trust and parameters such as performance, organizational commitment, job satisfaction and intention to quit employment, have been investigated, and positive results have been obtained for organizations. These studies have demonstrated that organizational trust had a positive impact on employee performance [10,15], confidence among employees and toward managers, increased job satisfaction [19,20], decreased absenteeism and intentions of quitting the job [5,36], increased commitment to the job and organization [36], heightened motivation, organizational commitment [12,13; 15.26].

The present study results indicated average level of trust among nurse managers in their management and coworkers and those they trusted more in their management. The finding is expected in hospitals of nurses with a high percentage of low level of education as in the present study sample, as level of education has its influence on their perceived societal value of the organization's production, the perception of the desirability of the mission, and the perception of the way the organization (through norms and past practices) as shown by [2], another study that surveyed nurses showed that the nurses had a higher than average level (>4) of trust in their managers and coworkers. A study by [11], on nurses' levels of trust in manager, nurses demonstrated that nurses' levels of trust in their managers were above the average level [26], similarly reported that 64.5% of the nurses had managers who were capable of establishing a sense of trust within the team.

Affective commitment refers to employee's positive emotional attachment to the organization [38]. The present study results indicated that more than half of nurse managers (57%) had average level of commitment to this dimension. [34] found that affective commitment had the highest score of organizational commitment dimension. Also, [20] found that affective commitment was more stable than continuous commitment. On the contrary, the study done by [1] found that half of the study subjects were totally not committed to this dimension.

Regarding continuance commitment the findings of the present study indicated that more than half of nurse managers (55%) had average level of commitment to this dimension. Also [4], concluded that normative and continuance commitment obtained the highest

ranks. In the same line, the study done by [32,33] found that normative and continuance commitment obtained the highest ranks. On the contrary, the study done by [25], found that continuance commitment had no effect, in addition to [34] who indicated that the study did not find any predictors for continuance commitment.

Regarding normative commitment the findings of the present study indicated that the majority of study subjects were committed to normative domain items. In the same line, [6,33], found that normative commitment obtained the highest ranks. The contrary, the study done by [1], Found that the majority of study subjects were not committed to normative domain items.

According to the present study finding, there is a highly statistically significant difference between Level of organizational trust (Coworkers and management dimensions) and different Levels of commitment among Nurse Managers (Affective, Continuances and Normative commitment) ($P<0.01$). Findings revealed that there was a statistically significant difference between organizational trust mean % score as regard their work place in addition to that there is a statistically significant difference between mean % score of diploma and master nurse managers ($P<0.05$); On the contrast; there is a statistically insignificant difference between organizational trust mean % score as regard their age, years of experience in profession and years of experience in this department ($P>0.05$).

Findings of the present study revealed that there was a statistically significant difference between organizational commitment mean % score as regard their work place ($P<0.05$); On the contrast; there is a statistically insignificant difference between organizational commitment mean % score as regard their age, years of experience in profession, Years of Experience in this department and Qualification ($P>0.05$). On the same line, [34] found negative correlation between education and organizational commitment. Also, [23] found that there was no relation between organizational commitment and age. On the contrary, the study by [23] found a positive correlation between organizational commitment, working experience, and education.

Regarding Correlation between total organizational trust and commitment among study sample there is a highly statistically significant positive correlation between organizational Trust among Coworkers and Management, Total Organizational Trust & Emotional commitment, Continuances commitment, Total Organizational Commitment ($P<0.01$). However, there is a statistically insignificant correlation between organizational Trust among Coworkers and Normative Commitment ($P>0.05$).

Conclusion and Recommendations

The present study findings indicate that there is a highly statistically significant positive correlation between organizational trust and the three dimensions of organizational commitment. The implications of these findings are quite important as the future of public organizations rests in the creation of trust in management and the organization as a means of positively influencing not only quality of work life but efficiency and effectiveness of performance.

This would be through giving more emphasis to ethics and legal issues in nursing curricula, and organizations should improve their appreciation toward employees, because that enforces employees' commitment and appreciation towards their organizations and increases organizational belonging and loyalty culture. Researchers who want to conduct studies on this subject may be recommended to plan research studies that will seek organizational trust levels and commitment on different groups of nurses. Also, researchers may test in future studies the effectiveness of programs or interventions to increase organizational trust and commitment.

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