NEAR EAST UNIVERSITY
GRADUATE SCHOOL OF SOCIAL SCIENCES
BUSINESS ADMINISTRATION PROGRAM

# THE EFFECT OF TOXIC LEADERSHIP PERCEPTIONS ON HOSPITAL EMPLOYEES

ELİF BAKKAL ÖZTOKATLI

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# ACCEPTANCE/APPROVAL

We as the jury members certify the 'The Effect Of Toxic Leadership Perceptions On Hospital Employees' prepared by the Elif Bakkal ÖZTOKATLI defended on 24/01/2020 has been found satisfactory for the award of degree of Phd.

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# DECLARATION

I 'Elif Bakkal ÖZTOKATLI' hereby declare that this dissertation entitled '**The Effect Of Toxıc Leadershıp Perceptıons on Hospıtal Employees**" ' has been prepared myself under the guidance and supervision of 'Assist. Prof. Dr. BERNA SERENER' in partial fulfilment of the Near East University, Graduate School of Social Sciences regulations and does not to the best of my knowledge breach and Law of Copyrights and has been tested for plagiarism and a copy of the result can be found in the Thesis.

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ELİF BAKKAL ÖZTOKATLI

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# ABSTRACT

# THE EFFECT OF TOXIC LEADERSHIP PERCEPTIONS ON HOSPITAL EMPLOYEES

Leadership is one of the skills expected to be at all levels of health services, especially in managerial positions. It is necessary to investigate the types of negative leadership as well as to identify the types of positive leadership that will render health institutions superior to their competitors in today's conditions and may strengthen the quality of health care services they offer. In this study, the effects of hospital workers' perceptions of toxic leadership on the relationships between job satisfaction, organizational commitment, job performance and turnover intention will be investigated. In this study, which tests whether job satisfaction and organizational commitment have a mediating role in the relationship between toxic leadership, which consists of four sub-dimensions and job performance and turnover intention with hypotheses, Structural Equation Modeling (SEM) was used. SPSS 25.0 and AMOS 24.0 packaged software, which are statistical programs, were used in the data analysis of the research.

**Keywords:** Toxic Leadership, Job Satisfaction, Turnover Intention, Job Performance, Organizational Commitment, Structural Equation Model

# ÖZ

# TOKSİK LİDERLİK ALGILARININ HASTANE ÇALIŞANLARINA ETKİSİ

Liderlik, sağlık hizmetlerinin tüm kademelerinde özelliklede yönetici pozisyonlarında olması beklenen becerilerdendir. Sağlık kurumlarını günümüz şartlarında rakiplerinden üstün tutacak ve sunduğu sağlık hizmetinin kalitesini güçlendirebilecek olumlu liderlik türlerinin belirlenmesi kadar olumsuz liderlik türlerinin de araştırılması gerekmektedir. Bu çalışmada hastane çalışanlarının toksik liderlik algılarının iş tatminleri, örgütsel bağlılıkları, iş performansları ve işten ayrılma niyetleri arasındaki ilişkilere etkileri araştırılacaktır. Hastane çalışanlarının çıkarcılık, değerbilmezlik, olumsuz ruhsal durum, bencillik boyutlarıyla toksik liderlik algıları ile işten ayrılma niyeti ve iş performansı arasında iş tatmini ve örgütsel bağlılık aracılık rolü üstlendiği belirleyen bu araştırmada hipotezlerinin testi için Structural Equation Modeling (SEM) kullanılmıştır. Araştırmadaki veri analizin de istatistiki programlar olan SPSS 25.0 ve AMOS 24.0 paket programları kullanılmıştır.

**Anahtar Kelimeler:** Toksik Liderlik, İş Tatmini, İşten Ayrılma Niyeti, İş Performansı, Örgütsel Bağlılık, Yapısal Eşitlik Modeli

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| | |
|---|---|
| **SEM** | : Structural Equation Modeling |
| **SPSS** | : Statistical Package for the Social Sciences |
| **AMOS** | : Analysis of Moment Structures |
| **KMO** | : Kaiser-Meyer-Olkin |
| **EFA** | : Exploratory Factor Analysis |
| **CFA** | : Confirmatory Factor Analysis |
| **CMIN/DF** | : Relative Chi Square Index |
| **CFI** | : Comparative Fit Index |
| **SRMR** | : Standardised root mean square residual |
| **NFI** | : Bentler Bonett Index veya Normed Fit Index |
| **RMSEA** | : Root Mean Square Error of Approximation |
| **CR** | : Composite Reliability |
| **AVE** | : Average Variance Extracted |
| **MSV** | : Maximum Shared Variance |
| **JS** | : Job Satisfaction |
| **TI** | : Turnover Intention |
| **JP** | : Job Performance |
| **OC** | : Organisational Commitment |

# INTRODUCTION

The globalizing world is a dynamic environment in which change takes place very quickly. Organizations that maintain their lives in a social environment try to adapt to technological, economic and social changes that take place in their internal and external environments, social changes, competition conditions and changes in organizational theories and even management approaches depending on these conditions. In increasing competition conditions, just like enterprises, hospitals need leaders who are aware of their missions and are strong in order to be able to survive, be successful and adapt to changes.

The leadership behaviors of managers have a positive impact on hospital employees' job satisfaction, mood and performance levels.

In scientific researches conducted on leadership and leadership behaviors exhibited in hospitals, leadership styles related with successful leadership and specific behaviors appropriate for that leadership style were examined in general. In the scientific researches conducted in recent years, understanding the consequences and nature of leadership that has no function and is destructive has been the center of attention.

In this research, the characteristics of toxic leadership, which is one of the non-functional and harmful leadership types according to the perceptions of hospital workers, will be examined and these characteristics' ways of effecting hospital employees in terms of job satisfaction, turnover intention, job performance and organizational commitment will be put forward.

# CHAPTER 1
# JOB ATTITUDES AND BEHAVIORS OF EMPLOYEES

In this section, job satisfaction as well as positive and negative evaluations of employees regarding their jobs and organizations, issues related to organizational commitment, job performance of the employees who are satisfied and unsatisfied with their jobs and turnover intention were discussed.

## 1.1 Job Attitudes

Attitude is the sincere orientation of individuals towards any object around them or their jobs. While the psychological tendency that evaluates a certain entity in terms of satisfaction or dissatisfaction is defined as attitude, job evaluations expressing individuals' feelings, beliefs and commitment to their jobs are defined as job attitude (Judge, Weiss, Kammeyer-Mueller , & Hulin, 2017).

According to the ABC model developed by Hovland and Rosenberg, (1960) attitudes consist of three components, being affect, cognition and behavioral intention. The emotion component is the element of attitude related to feelings, cognition is the element related to beliefs and behavioral intention is the element, which indicates how the individual tends to behave towards other beings or situations (Andersson & Fredriksson, 2012).

According to the model of expectation-value, another model that examines attitude, the power of beliefs about the object that has meaning for the individual, the expectation regarding the possibility of the realization of these beliefs and the value attached to the realization of the belief determine the attitude towards that object (Hsiung, 2014).

Attitudes develop over time and the factors that play a role in the formation of attitudes stem from the individuals themselves and their environments. While genetic factors, physiological factors, experiences, personality are elements stemming from the individual him/herself, family, friends, mass media, social class are elements stemming from the environment of the individuals.

Four functions of attitudes are mentioned (Figure 1):
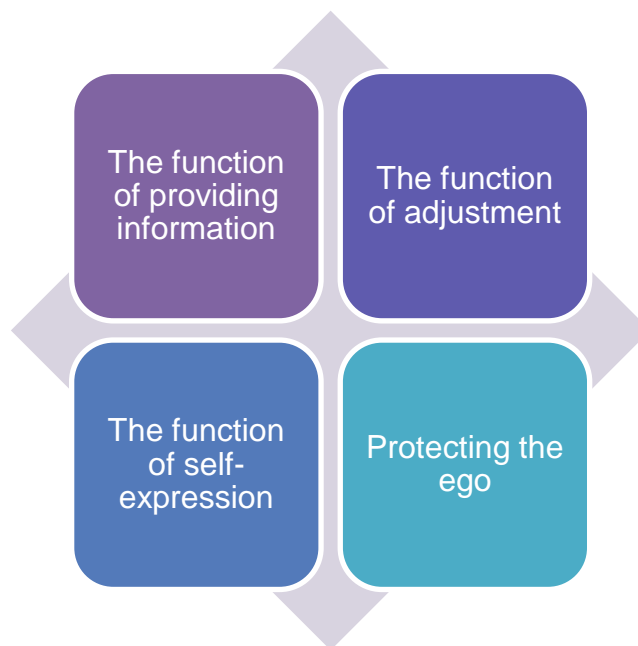


**Figure 1:** The four functions of attitudes

The function of providing information ensures the acquisition of information about the physical and social world so that a clear and comprehensible information on its quality can be obtained, the function of adjustment provides orientation towards the desired and keeps away from pain, the function of self-expression indicates showing ourselves and our environment who we are and the function of protecting the ego explains the attitudes' helping to protect the individual from themselves and their environments (Eagly & Chaiken, 1998).

**1.2 Job Satisfaction**

Job satisfaction is defined as the physiological, psychological and environmental conditions that lead employees to be satisfied with their jobs (Raziq & Maulabakhsh, 2015). It is defined as the attitudes and behaviors that

individuals develop towards their jobs. Positive or negative moods that occur in individuals' environments are called attitudes. If individuals exhibit positive attitudes in their work environments, job satisfaction occurs and if they exhibit negative attitudes, dissatisfaction occurs (Huang, et al., 2016).

According to George and Zakkaria, (2018) working individuals' positive attitudes towards their jobs and their ratio of being satisfied with their jobs are defined as job satisfaction. In his study, Locke (1976) defined job satisfaction as satisfaction or a positive emotional state resulting from the evaluation of individuals' work experiences and stated that job satisfaction would increase if individuals were appreciated as a result of their work. He also listed the characteristics of job satisfaction as follows:

- Job satisfaction covers all of the emotions that individuals feel in the work they do, the workplace they work in and the pleasure that results from the work.
- The emotional state is directly proportional to how satisfied individuals are with the results of the study.
- Job satisfaction does not have to cover an entire job; it can be divided into sections.

Job performance, which is defined as the productivity level of the behaviors and outputs of the employees according to the standards determined by the organization and required by their jobs, is affected by job satisfaction (Babin & Boles, 1998). Since employees whose expectations and needs are different from one another will be satisfied with their jobs when their expectations and needs are met, their productivity and job satisfaction will increase. The researches conducted support this view (Hui & Tan, 1996; Judge, Thoresen, Bono, & Patton, 2001; Miao & Kim, 2010) by stating that there are significant relationships between job satisfaction and job performance, and that job satisfaction is a predictor of job performance.

It is maintained that job satisfaction is strongly related to job performance for employees working in complex jobs such as managers, engineers and

scientists compared to those who work in more structured professions such as accounting and sales (Judge, Thoresen, Bono, & Patton, 2001).

Employees with a low level of job satisfaction may consider quitting the jobs that they are not satisfied with. In the challenging world of competition, while organizations try to minimize turnover rates, that employees consider or plan to leave the organization, which is defined as turnover intention is a destructive action (Saeed, Waseem, Sikander, & Rizwan, 2014). Turnover intention, which is a sign of conflict between the employee and the organization, is undesirable for organizations as it leads to an increase in the labor turnover rate (Kumara & Fasana, 2018). When other factors affecting job satisfaction are kept constant, the increase in employees' job satisfaction leads to a decrease in the labor turnover rate.

### 1.2.1 Factors Affecting Job Satisfaction
### 1.2.1.1 Individual Factors
### 1.2.1.1.1 Age

When the researches on this subject were examined, a positive relationship was found between age and job satisfaction. Job satisfaction increases as individuals age. Young workers' having higher expectations than employees who are older than them may lead to low job satisfaction (Çalışkan, 2005). In a research where more than half of the sample was composed of young health care workers (Aksan, 2010), it was revealed that the expectations of the employees decrease in direct proportion to their increasing age and as a result their job satisfaction increases. In another study stating that the general job satisfaction levels of the public sector employees are low (Ağırbaş, Çelik, & Büyükkayıkçı, 2005), it was revealed that the expectations of the employees decrease in direct proportion to their increasing age and as a result their job satisfaction increases. In another study stating that the general job satisfaction levels of the public sector employees are low (Oflezer, Ateş, Bektaş, & İrban, 2011), when age variables were examined, it was maintained that older employees are more satisfied with their jobs and (Ağırbaş, Çelik, &

Büyükkayıkçı, 2005) similar data were obtained with the results of the study performed with hospital staff in senior positions. As for the survey conducted with 2095 nurses working in Norway (Bjork, Samdal, Hansen, Torstad, & Hamilton, 2007) it was found that their job satisfaction increased in proportion to increasing age. In this case, we can state that since employee's compliance with the institution increases together with increasing age, job satisfaction is also at a high level.

### 1.2.1.1.2 Gender

It is known that there are differences between the benefits offered by females and males to their organizations and their expectations from these organizations. The roles and responsibilities of females and males in social life are different from each other. As a result of the study, conducted to determine the relationship between job satisfaction and gender variables (Garcia-Bernal, Gargallo-Castel, Marzo-Navarro, & Rivera-Torres, 2005) it was concluded that there was an interaction between the variables.

When the surveys related to job satisfaction and gender were examined, it was found that while females constituted the group who were more satisfied with their jobs (Karaalp, 2014) in some cases it was males (Terekli, 2010). For example, in a study comprising employees working in a dental hospital in Zonguldak (Gökkaya, 2012) it was found that female employees had higher levels of job satisfaction. In another study examining multiple hospitals (Çarıkçı & Oksay, 2004), it was maintained that the job satisfaction levels of the employees are not at the desired level and determined that the female employees' job satisfaction is lower. In a study carried out in different hospitals in Portugal supporting this result (Mclntyre & Mclntyre, 2010) males' job satisfaction levels were found to be higher than that of females.

### 1.2.1.1.3 Personality

Personality is the situation that affects whether a person's thoughts and feelings are positive or negative. Therefore, it can be explained that there is a relationship between job satisfaction and personality traits. This situation may be exemplified in that individuals who cannot adapt to the working environment and are nervous experience more job dissatisfaction than others. Employees

with these characteristics show non-positive attitudes, harm themselves and cannot establish a good relationship (Arslan , 2017).

### 1.2.1.1.4 Marital Status

One of the individual factors affecting job satisfaction is the marital status of individuals. Job satisfaction can vary depending on whether the individual is married or single. It may be asserted that factors such as married individuals' having more responsibilities than single individuals may affect job satisfaction positively (Karaalp, 2014).

### 1.2.1.1.5 Education Level

Another factor affecting job satisfaction is the educational level. As the education level of the individual increases, their knowledge in the field of activity they are active in increases, and, as a result, their job satisfaction increases. As the individual's education level increases, the individual advances in their career and their competences increase. Job satisfaction improves positively in employees who advances in their careers and whose competencies increase (Kaygısız, 2014).

### 1.2.1.1.6 Intelligence

One of the individual factors affecting job satisfaction is intelligence. Individuals must have a certain knowledge and experience in order to succeed in the institutions they operate in. In addition, they must have the skills to do the job. An individual needs intelligence to learn and comprehend the information. An individual who operates in a job required by their skills provides more contribution to their job, is more successful in their job and has more job satisfaction compared to the personnel who do not have a certain skill. Ability and intelligence have a positive effect on job satisfaction of individuals. If the individual's intelligence level is high, job satisfaction develops positively (Eroğluer, 2008).

### 1.2.1.1.7 Seniority

It is seen that the term of employment is effective on job satisfaction. It is observed that employees who are rewarded for the time they spent in the enterprise have higher job satisfaction; accordingly they work willingly for a long time in their workplace and these people have high job satisfaction.

According to the research, it is seen that senior managers have high job satisfaction compared to employees with low seniority (Arslan , 2017).

**1.2.1.2 Organizational Factors**

**1.2.1.2.1 Fee**

The salary paid to the employees for their labor is one of the most important factors affecting job satisfaction. It can be said that job satisfaction is high if the employee is able to pursue his life with their wages in return for their labor and meet their needs. However, wage alone is not sufficient to increase job satisfaction. For example, even if an employee gets a good wage when they start working and experience job satisfaction in this respect, their job satisfaction may decrease if they become aware that there is a wage injustice within the organization. Therefore, business executives should accurately analyze each employee, taking into account the market conditions, and pay for their labor in a fair manner (Çiftyıldız, 2015).

**1.2.1.2.2 Promotion**

As a result of the researches, it was found that advance in career has an increasing effect on job satisfaction. It is important for employees to ensure that promotions have a justification and are applied in a fair manner. The employee also expects to be appreciated by their colleagues regarding their job performance. Job satisfaction is higher in individuals with a high levels of career. When the studies carried out on this subject were examined, it was found that people who have the status of manager or a high title have higher job satisfactions than those who work in other low positions (Doğar, 2013).

**1.2.1.2.3 The Business Itself**

Employees should believe that the job they perform in their department is meaningful and important for the organization for their job satisfaction to be brought to the desired level or increased. That their colleagues and manager make the employee feel that they have made an important contribution with their labor in the field in which they took office is a factor that affects job satisfaction (Cinel, 2014).

### 1.2.1.2.4 Work Group

Approaches of employees' colleagues, with whom they spend most of their time together in the same environment, that they have good relations with each other improve job satisfaction positively. This creates a solidarity environment for the employee. Work satisfaction will possibly be increased as a result of the harmony between colleagues in the work environment and the opinions of the employees (Kaygısız, 2014).

### 1.2.1.2.5 Working Conditions

Working hours in the workplace, physical conditions, etc. have a direct impact on job satisfaction. Working hours and physical conditions in the workplace are among the organizational factors affecting job satisfaction. The more positive the working conditions are perceived by the employees, the greater the job satisfaction (Çetin H. , 2014).

### 1.2.1.2.6 Management

There are differences between managers who prioritize their employees and managers who prioritize work in the business world. If managers can make employees feel that they are valuable for the organization, employees' job satisfaction increases. Managers' having supportive relations with the personnel is a behavior that increases the employee's job satisfaction. Managers who do not care about employees' feelings and thoughts and do not deal with their problems cause feelings of job dissatisfaction. The involvement of employees in management decisions also increases job satisfaction. An employee who sees that they are involved in the decision-making process may think that their need for recognition and respect is met. These employees begin to have a positive feeling regarding their managers and colleagues, which increases their job satisfaction (Bekiş, 2013).

### 1.2.1.2.7 Job Safety

Individuals prefer businesses that offer job safety when starting a job. As age increases, the importance given to job safety increases. In job satisfaction, it is an important factor that employees feel safe in the workplace. If the employees think that job safety is provided in the workplace, they will operate more happily and their job satisfaction will increase. Unemployment, accident,

illness, retirement and unemployment insurances have an important role in employee's job dissatisfaction (Söyük, 2007).

## 1.3 Organizational Commitment

Organizational commitment is explained as a psychological agreement between the employee and the organization (McDonald & Makin, 2000); employee's ability to express themselves and feel belonging to the organization in which they operate (Mowday, Porter, & Steers, 1982); employee's efforts in order to survive in the organization and for the organization to reach a better level and to consider the values of the organization as their own (Randall & Cote, 1991) values.

Organizational commitment is a very important issue in terms of ensuring efficiency and productivity in organizations. Employees with high levels of organizational commitment regard the interests of the organization they are in as superior to their own interests, are more compatible with the organization and the other employees in the organization and are more productive within the organization. Employees with low levels of organizational commitment are those who generally act in line with their own interests, who do not come to work on time, who are often absent, who intend to quit their jobs, who cannot effectively perform the jobs in their job description, and who do not act in line with the interests of the organization (Durusu, 2019).

Organizational commitment is divided into three as emotional, compulsory and gratitude commitment. Emotional commitment is emotional attachment to the organization and belief in the values of the organization. Employees who feel high emotional commitment will continue to stay in the organization of their own accord. The economic value perceived as a result of comparing the behaviors of staying in and leaving an organization is compulsory commitment, and the obligation to stay in an organization for moral or ethical reasons is gratitude commitment (Robbins & Judge, 2015).

That organization in intense competitive conditions perform their activities successfully, like job satisfaction, depends on whether the level of organizational commitment, which is one of the job attitudes of employees is high. Whereas organizational commitment includes permanent and general

evaluations of employees about the organization they are in, job satisfaction consists of employees' reactions to the organization. A significant and positive relationship was found in the researches examining the relationship between them by considering organizational commitment and job satisfaction, which are among employee attitudes together (Arnold & Feldman, 1982; O'Driscoll, Ilgen, & Hildreth, 1992; Bennett & Durkin, 2000; Dinc & Huric, 2016; Malik, Nawab, Naeem, & Danish, 2010).

The researches show that there is a high positive correlation between organizational commitment and job satisfaction (Arnold & Feldman, 1982; O'Driscoll, Ilgen, & Hildreth, 1992). This positive correlation depends on employees' responding positively to the research questions regarding both job satisfaction and organizational commitment due to positive response bias or the willingness of employees to convince themselves that they are satisfied with their work and to refrain from cognitive dissonance because of their commitment to the organization (Riggio, 2016). The fact that there are employees with low organizational commitment but who are satisfied with their job, as well as those who think that they should be satisfied with their jobs because they have worked in the business in good and bad days for many years, shows that the direction of the impact between organizational commitment and job satisfaction is contradictory (Becker & Billings, 1993; O'Driscoll, Ilgen, & Hildreth, 1992). Therefore, the effect of these two employee attitudes on employee behaviors rather than their relationship with each other should be examined.

That organizational commitment is also an important factor for employees' job performance (Meyer & Allen, 1997; Yiing & Ahmad, 2009; Dirani, 2009; Al Zefeiti & Mohamad, 2017) was determined in different researches. The relationship between organizational commitment and job performance increases or decreases with the change in commitment level. In a study investigating ways to improve the performance and productivity of long-term employees, (Westover, Westover, & Westover, 2010) it was emphasized that organizational commitment is the most important factor. When employees are emotionally attached to their organization, they will outperform those who feel compelled to stay in the organization (Riggio, 2016). In the research conducted

based on Meyer and Allen's (Meyer & Allen, 1991) three-dimensional organizational commitment model with employees working in a factory belonging to Turkish Armed Forces (Özutku, 2008) a positive relationship was found between organizational emotional commitment and job performance.

Turnover intention, which is closely associated with service quality in healthcare organizations, is significantly affected by organizational commitment (Wang , Tao, Ellenbecker, & Liu, 2012; Labrague, et al., 2018). The findings of a study conducted in private hospitals (Abuseif & Ayaad, 2018) indicate that organizational commitment is negatively and significantly related to intention to leave the job, and nurses with high organizational commitment to their institution are less willing to quit their jobs. As employees' commitment to the goals and values of the organization increases, they will feel a strong moral responsibility to stay in the organization.

### 1.3.1 Organizational Commitment Approaches
### 1.3.1.1 Meyer and Allen's Approach

Meyer and Allen approach is the most well known and frequently used classification in the field of organizational commitment (Meyer & Allen, 1991). The two dimensional organizational commitment scales, which initially included emotional and continuation commitment, were finalized with the addition of normative commitment. According to the explanation made by Meyer and Allen, organizational commitment is the employee's seeing the objectives of the organization they are in as their own objectives, participating regularly in the organization without absenteeism, having the desire to continue his work and protecting the values and norms of the organization they are a part of (Navıdı, 2019). They gather organizational commitment under three subheadings, being desire-based emotional commitment, need-based continuation commitment, and obligation-based normative commitment.

### 1.3.1.2 Wiener's Approach

He discussed his approach to (Wiener & Vardi, 1980) organizational commitment under two subheadings, being instrumental commitment and normative-moral commitment. Instrumental commitment is explained as an

individual, interest-based type of commitment. The person is motivated and starts to operate in line with their own interests and goals. This type of commitment is self-directed (Balay, 2000). In instrumental commitment where personal characteristics are at the forefront, while the organization provides the employees to be satisfied in some areas, it expects them to recompense (Eğilmezkol, 2011). In normative-moral commitment, in contrast to instrumental commitment, organizational goals and interests are in sight. As a result of creating internalized pressures in the individual, it is ensured that the person prioritizes the objectives of the organization. The employee has an orientation towards the organization (Çoban & Demirtaş, 2010). It is explained as a type of commitment that arises from psychological pressures in the individual (Eğilmezkol, 2011).

### 1.3.1.3 O'Reilly and Chatman's Approach

They treated organizational commitment, which is psychologically based on the person's attachment to the organization (O'Reilly & Chatman, 1986) in three dimensions. In this classification they developed in 1986, they gathered organizational commitment in three subheadings: compliance, identification and internalization.

Compliance commitment is the type of commitment, which is based on the concepts of reward-punishment prior to the sharing of organizational values. Employees may receive a reward for its attractiveness or on the contrary, avoid punishment because of its repulsiveness (Çetin F. , 2011). The employee must adopt the objectives and the way of doing business of the organization in which their operates. This type of commitment is based on achieving certain rewards as gain by adapting to the terms and conditions of the organization (Navıdı, 2019)**.**

Identification commitment indicates a process of identification regarding the organization as a result of individuals' establishing close relationships with each other and their organization. The organization's perspective on the situations, the individual's acceptance of it and their degree of self-implementation is an indicator reflecting the commitment to identification (Gül H. , 2002). In contrast to compliance commitment, in identification

commitment, the individual places great importance on being a member of the group and is proud of it. In this case, employees are identified with the organization at a high level because their organizations support the elements that they value (Eğilmezkol, 2011).

Internalization commitment is totally based on the harmony between organizational and individual values. This may be the result of the individual associating their own attitudes with the attitudes of other members of the organization (O'Reilly III, Caldwell, Chatman, & Doerr, 2014). In a similar way to the identification commitment, the individual is proud to be in the organization. Internalization commitment, which can also be called adoption commitment, occurs when employees' own inner worlds overlap with the value judgments of other individuals in the organization. Although it is the most desired dimension of commitment by organizations, it is the most difficult type of commitment to acquire. Because once the adoption occurs among the employees, the organization does not need any other sanction aimed at motivating and influencing its employee (O'Reilly III, Caldwell, Chatman, & Doerr, 2014).

### 1.3.1.4 Mowday's Approach

In the approach by Mowday et al. (1979) organizational commitment is discussed under two general titles: commitment as attitude and behavior. Studies show that the two types of commitment are in a meaningful relationship with each other (Brown R. B., 1996). They laid the foundations of the approach of commitment to the organization as three variables: believing in the goals and values of the organization and accepting them, making intensive efforts for the organization, and the intensive continuation of the desire to be present in the organization willingly (Eren & Bal, 2015).

Commitment as attitude is based on the willingness to work, and ensues as a result of individual's internalizing and identifying with the organizational objectives. As for commitment as behavior, it comprises individual's commitment to activities behaviourally (Ant, 2019).

**1.3.1.5 Etzioni's Approach**

One of the first classifications on organizational commitment is Etzioni's (Etzioni, 1961). Etzioni, in his approach, evaluated the authority and power of the organization over its employees as the basis of this commitment. He suggested that the source of this authority and power is the convergence of the individual to the organization. He examined convergence behavior based organizational commitment under three main headings, being negative, neutral and positive. In addition, when his researches were examined, it was seen that he preferred to use "organizational participation," to correspond to the expression of organizational commitment. When he grouped organizational commitment based on participation, he divided it into three as alienating, calculating and moral participation (Ant, 2019). Negative (alienating) commitment is a type of commitment in which an individual has negativity towards the organization. Although the individual is not psychologically committed to the organization, he cannot leave the organization due to external factors. This commitment manifests itself as a result of individual behaviors restricted within the organization (Gül H. , 2002; Balay, 2000; Taş, 2012). It is a type of commitment that occurs when an employee is forced to stay as a member even though they do not feel ready to stay in the organization in consequence of the restriction of the employee's behaviors.

Neutral (calculative) commitment: in neutral commitment, which can also be termed convergence based on interests, individuals' positive-negative evaluations are in the foreground. On the basis of some kind of an exchange relationship, the individual considers staying in the organization when s/he finds the necessary conditions and considers leaving the organization when the balances change and leaving the organization becomes attractive (Gül H., 2002; Taş, 2012). Employees receive awards in return for their benefits to the organization they are in, and therefore feel loyalty to their organizations.

Calculative commitment constitutes a neutral commitment to the organization (Ant, 2019). Positive (moral) commitment is also viewed as moral convergence, and this commitment is based on orientation towards the organization. Positive (moral) commitment means that the individual considers their work in the organization valuable and attaches importance to it,

internalizes the objectives of the organization and performs their job in the best way since the individual thinks it is more important than anything else. The individual has an intense orientation towards the organization and an attitude towards dedication (Mguqulwa, 2008). Moral commitment is a kind of positive commitment to the organization.

## 1.4 Job Performance

Some generally accepted definitions regarding the concept of job performance are listed as follows (Begenirbaş & Çalışkan, 2014):

- It is defined as any employee activity and behavior that is controlled by means of the employee, together and contributes to the organization's reaching the point it wants to reach.
- It is explained as the labor that the employees have to exert in line with the purposes of the organization in return for the wages received from the enterprises.

Job performance is explained by two types of employee behavior being task performance and contextual performance (Borman & Motowidlo, 1993). Task performance explains how well employees perform their jobs and contextual performance explains the participation of employees in duties other than their own duties and team works and their behaviors of adopting the mission and vision of the organization (Motowidlo & Kell, 2012).

The individual behavioral changes of the employees affect the performance increase positively and change the behaviors of the other employees they interact with.

Job performance can be defined as the level of success that the employee forms in the face of all the efforts they have shown to perform the works assigned to them by the organization. If the employee is rewarded for achieving a high level of job performance, which is accepted as a result of the efficiency level of the effort shown, the employee increases the level of their future effort (Yıldız, Savcı, & Kapu, 2014).

**1.5 Turnover Intention**

Turnover intention is defined as individuals' quitting their current jobs. Greyling and Stanz (Greyling & Stanz, 2010), emphasized that turnover intention may be voluntary or involuntary (Nasurdin, Tan, & Khan, 2018). Pathak and Srivastava (Pathak & Srivastava, 2017) interpret turnover intention as individuals' changing their jobs within a certain period of time or leaving their current jobs. Turnover intention is defined as individuals' desire to leave the institution they work in and is deemed to be the last step of actually quitting the job.

There are many reasons affecting the intention to leave, which is one of the determinants of the employee turnover rates that cause significant costs in organizations. One of the most important reasons triggering the intention of employees to leave their jobs is that it stems from the negative processes of job satisfaction in individuals (Chang, Wang, & Huang, 2013). Another reason is that some social and economic reasons lead individuals to their intention to leave their jobs (Meyer, Stanley, Herscovitch, & Topolnytsky, 2002). If the organization does not meet the expectations of the employee such as executive behaviors, organizational culture, promotion, positive organizational climate and salary, the employee will seek a job that will meet these expectations. Employees with the intention to leave their jobs will perform poorly while fulfilling their duties and will not be able to make sufficient contributions to the organization in which they work (Gözler, 2007).

Job satisfaction, socio-economic reasons and leader behaviors are among the most important factors affecting turnover intention (Schaufeli & Arnold, 2004). When the researches are examined (Wayne, Shore, Bommer, & Tetrick, 2002; Djurkovich, McCormack, & Casimir, 2008; Dawley, Andrews, & Bucklew, 2008) it is observed that there is a significant decrease in the intention of employees to leave their jobs if they think that they are supported by the leaders of the organization.

Considering that people constitute the most important factor for organizations' not being harmed and sustaining their continuity and profitability, the importance of knowing the reasons, which lead individuals to quit their jobs and finding solutions that will eliminate or decrease these reasons is defended (Carmeli & Jacob, 2006).

# CHAPTER 2
# TOXIC LEADERSHIP

In this section, toxic leadership concept, scope and toxic leadership observed in health institutions are discussed.

## 2.1 The Concept of Toxic

The word toxic is derived from the Greek word toxicón, which means "special poison applied to the arrowhead". Excerpt from the word toxicum, which means poison in Latin and the French toxique (Oxford University Press (OUP), 2019).

The word poison, which is used in the same sense as the word toxic, appears in the Ebers papyri in the 1500s before Christ. Information is given about poison in these papyri (Leake, 1952). In ancient times, especially during the Roman Empire, the poisoning of people, which is frequently encountered, was a method used in the wars of competition in imperial rule. One example is the killing of Nero's stepfather Claudius by poisoning with poisonous mushrooms by the mother of the Roman Emperor Nero to control the entire empire of Agrippina (Marmion & Wiedemann, 2002). If we evaluate this example with today's leadership approaches, as observed in toxic leaders, they do not hesitate over poisoning people who they perceive as a threat or obstacle with their toxic behaviors by using the control power they have for negative purposes.

When the Renaissance period is examined, Paracelsus, famous for his studies on the scientific basis of toxicology, is found to state that toxicity is a relative concept, it depends on the properties of the toxic substance, individual factors and dose (Gantenbein, 2017). When the concept of toxicity is considered

within the framework of the management area, it can be stated that it depends on the personal characteristics, behaviors of individuals and the dose of these behaviors.

## 2.2 Definition of Toxic Leadership

The term "toxic leadership", which is harmful in terms of morale, productivity and organizational effectiveness (Maxwell, 2015) was first included in Dr. Marcia Lynn Whicker's (Whicker, 1996) research. Lynnn classified leadership as reliable, changeable, and toxic and brought in the concept of toxic leadership to the literature (Doriane & Manon, 2013) In the following years, he stated that three out of every ten people in the leadership position could be a (Armitage, 2015) toxic leader.

Toxic leaders damage their organizations by engaging in activities that alienate employees and create an overall negative work environment (Lipman-Blumen J. , 2010). When we examine toxic leadership behaviors, we are faced with a leadership type that has an understanding of an abusive management approach and insulting communication style (Walton, 2007), puts the values and norms of the institution in a situation that causes harm and develops inappropriate (Aubrey, 2012) behaviors.

Toxic leaders who emit their poison by imposing redundant control on their employees, poison the original, enthusiastic and innovative expression, harming employees and the organization (Indradevi, 2016). In addition, in the researches conducted, it was determined that toxic leaders harm the health and welfare of employees in the long term (Hitchcock, 2015).

Toxic leaders exhibit behaviors, in which they tend to think that they are excellent or more capable (Tavanti, 2011) are prone to abuse of power and authority (Hadadian & Sayadpour, 2018), are devoid of empathy, narcissistic, paranoid, maladaptive and insatiable (Lipman-Blumen J. , 2005).
Webster, Brough and Daly, (Webster, Brough, & Daly, 2016) in their research, made a general definition of toxic leadership and indicated that toxic leadership refers to individuals who have a tendency to manipulate and exhibit intimidating, arrogant and unethical behaviors towards those around them in a

systematic and repetitive manner. At the same time, toxic leaders have a self-repeating communication style, with which they share their knowledge on the basis of confidential or what they need to know, conduct many non-targeted meetings and telephone conversations (Weberg & Fuller, 2019).

When the studies on the characteristics of toxic personality are examined, the identification of toxic personality is seen in the long term as individuals that weaken individuals, teams and even organizations and exhibit unproductive working behaviors (Kusy & Holloway, 2009). In addition, toxic leaders are described as selfish, deceptive, cruel, ambitious, evil, cruel and greedy people, who are self-obsessed (Reed G. E., 2004; Davis, 2016).

Toxic leaders have positive personality traits as well as negative personality traits. Positive personality traits may be exemplified as toxic leaders' being fascinating (Roter A. B., 2017) and confident.

The most frequent expressions encountered when the literature on the behavior and personality traits of toxic leaders in the working environment is examined, are given in figure 2.

Toxic Leadership Behavior | Toxic Leadership Characteristics

- ☐ Sabotages employees' creativity
- ☐ Owns employee success
- ☐ Does not take responsibility for employee failures
- ☐ Does not trust his/her employees.
- ☐ Avoids contact with employees outside work
- ☐ Causes grouping in the work environment
- ☐ Exhibits fake behaviors to look good to the top management
- ☐ Impairs productivity

- ☐ Arrogant
- ☐ Self-seeker
- ☐ Autocratic
- ☐ Selfish
- ☐ Inappreciative
- ☐ Noncompliant
- ☐ Narcissistic
- ☐ Nervous
- ☐ Discriminatory

**Figure 2:** Toxic Leadership Behaviours and Chracteristics

*(adapted from Lipman-Blumen, 2005; Schmidt, 2014).*

The toxic leadership behaviors identified in the workplace have been empirically associated with various effects such as damaging productivity and causing deterioration of employees' physical and mental health, their loss of employment, absenteeism and poor performance (Burns, 2017).

## 2.3 The Concept and Characteristics of Toxic Organization

Due to the small number of studies on negative emotions in relation to harmful outcomes, in 2012, Kiefer et al. (Kiefer & Barclay, 2012), investigated the effects of toxic emotional experience in the relationship between negative emotions and harmful results and showed that experiencing negative emotions in the workplace may have negative consequences for individuals and organizations.

The number of studies on behaviors that decrease motivation and performance and are deemed negative and disturbing have been increasing

due to the determination of condescending, aggressive, obsessive, humiliating behaviors towards employees in organizations (Konaklı, 2011) (Mehta & Maheshwari, 2014).

It is possible to define non-innovative environments which could not provide integral integrity, which contain unrealistic labor practices, where conflicts with negative impact are experienced, which host destructive competition conditions, have high personnel exchange rate and low productivity as toxic environment (Kets de Vries, 2014).

Organizations with low employee performance, advanced employee dissatisfaction, abnormal workload and high levels of employee stress are called toxic (Too & Harvey, 2012).

Individuals employed by organizations with toxic leaders show reduced willingness to work and meaningfully contribute to the value created by the organization. There is a general lack of energy, low motivation and low morale among workers in toxic organizations. Organizational objectives and standards are not fully understood by employees in general and the organization's objectives are not consistent with the objectives achieved (Bloom & Farragher, 2013).

Reyhanoğlu & Özden (2016), who investigated how toxic leadership affects organizational health, concluded that the behaviors of toxic leaders cause negative impacts on the health of employees and the organization due to their exploitative, narcissistic and authoritarian personalities.

All members of an organization are deeply affected by the topmost action or actions. Many senior executives are really unaware of how their behaviors can prevent the organization from working properly. Not only do they not realize that stress can trigger their behaviors, but they also have no knowledge of how to manage their own stress levels. This directionlessness can seriously affect performance throughout the whole organization (Kets De Vries, Guillen, & Krotov, 2019).

A toxic organization is distinguished from a healthy organization by factors such as poor performance in the work environment, poor decision-making processes, high levels of dissatisfaction and stress.

## 2.4 Differences between Toxic Leadership and Other Types of Negative Leadership

Toxic leadership and destructive leadership, exploitative leadership, narcissistic leadership and autocratic leadership are leadership types that are often confused. Toxic leadership should be categorized as a separate type of leadership because it contains characteristics from each of the other types of negative leadership.

### 2.4.1 Differences between Toxic Leadership and Destructive Leadership

Destructive leaders are leaders who exhibit repeated disruptive behaviors instead of isolated anger crises and self-evolving negative behaviors; and this is a leadership type, which systematically acts against the legal benefits of the enterprise (Aasland, Skogstad, Notelaers, & Nielsen, 2010).

When the literature is examined, some studies were found to state that toxic and destructive leadership are (Reed & Bullis, 2009; Elle, 2012) interchangeable. Destructive leaders' selfish aspects and narcissistic personalities are similar to toxic leadership behaviors because they focus on their own needs (Padilla, Hogan, & Kaiser, 2007). In contrast, in the research where it was stated that toxic leaders differ from destructive leaders who deliberately harm people and turn to destructive targets (Pelletier, 2010) it was emphasized that toxic leaders exhibit discriminatory behaviors by putting obstacles in front of people. In destructive leadership, a deliberate maltreatment and intention like the kind in toxic leadership is not always observed (Schmidt, 2008).

Toxic leadership is the most comprehensive one among other types of negative leadership in terms of the number and types of behaviors it contains. Toxic leadership forms the framework of negative leadership types such as destructive, abusive, narcissistic, authoritarian leadership (Schmidt, 2014). Therefore, when classifying negative leadership types, toxic leadership and destructive leadership should be classified separately.

### 2.4.2 Differences between Toxic Leadership and Abusive Leadership

The type of leadership, in which the leader communicates with their employees in a way that is deemed rude, throws groundless temper tantrums, is deliberately hostile to their employees with their disinterested, humiliating, mocking, insulting, derogatory behaviors for the expected business performance to be realized is abusive leadership (Tepper, 2000).

Toxic leadership includes abusive control (Schmidt, 2008) and toxic leaders have abusive personalities. The toxic effects of abusive leaders are spread through the organizational climate. Abusive leadership differs from toxic leadership in that it cannot meet narcissism and authority. Toxic leaders are narcissist and authoritarian (Lipman-Blumen J. , 2005).

### 2.4.3 Differences between Toxic Leadership and Narcissistic Leadership

Narcissistic leadership is the type of leadership in which the leader gets above him/herself, shows him/herself greater than necessary and expects to be appreciated (Rosenthal & Pittinsky, 2006). Narcissistic leaders adversely affect job satisfaction, organizational commitment, job performance and cause employees to exhibit anti-productive business behaviors (Meier & Semmer, 2013; Shurden, 2014; Ghislieri, Cortese, Molino, & Gatti, 2019).

The fact that there are narcissistic characteristics, which indicate selfishness, self-interest and considering oneself as the only important person (Schmidt, 2008) in the definition of toxic leadership, shows that narcissism is a component of toxic leadership.

### 2.4.3 Differences between Toxic Leadership and Autocratic Leadership

Autocratic leaders display controlling, repressive, punitive behaviors (Barutçugil, 2014). In the study performed on nurses by Asiri et al. (2016), it was found that managers with autocratic leadership style prevent creative thinking and effective nursing practices because they are overly controlling. Extreme controlling behaviors observed in authoritarian leaders and expecting unquestioned obedience from employees are also observed in toxic leaders (Rostron & Wilkins, 2014).

## 2.5 Health Institutions and Toxic Leadership

The concept of leadership has an important role in improving the quality of health care delivery (Kumar, 2013). The effective and efficient realization of health services depends on the effective orientation of the employees in line with the leadership behaviors of the executive health workers. For example, studies investigating leadership behaviors of executive nurses have indicated that nurses' leadership styles can have positive effects on job performance, job satisfaction and attendance rates, as well as negative effects (Lindholm, Sivberg, & Udén, 2000; Johansson, Andersson, Gustafsson, & Sandahl, 2010; Abdelhafiz, Alloubani, & Almatari, 2016; Spencer & Johnson, 2017).

Researches on leadership in health services are mostly studies that shed light on the literature about how to become a good leader by examining the individual's behavior and characteristics (Sfantou D. F., ve diğerleri, 2017) (Ventriglio, Till, & Bhugra, 2019). In addition, in recent years, studies indicating that there are bad leadership types as well as good leadership types regarding the provision of health services are often encountered (Morris, 2019; Weberg & Fuller, 2019; Turner, 2019). These studies provide information about which personality traits and behaviors will lead to bad leadership.

In the study of Kusy and Holloway (2009) involving 156 leaders working in health institutions, it was reported that the participants encountered toxic individuals in their working environments. Bourdoux and Delabelle (Bourdoux & Delabelle, 2013) in their research, described toxic leadership through the experiences of ten nurses, who were supervised by the head nurse responsible for managing all patients in their research, who worked at a private health center, were trained in health managements and had the same qualifications; they found that the toxic leader regulated their shifts in a way that would not cause them to work at the weekends and public holidays and caused the other employees to share all the workload unfairly. In another study (Roter & Spangenburg, 2011) toxic leadership styles were determined through the experiences of nurses in hospital environment and it was concluded that toxic leadership prevented teamwork, influenced communication, harmed organizational culture and the organization as a whole.

According to the study, which investigates the effects of toxic leadership on healthcare workers, (Özer, Uğurluoğlu, Kahraman, & Avci, 2017) toxic leadership is examined in four dimensions. These dimensions are self-seeking, inappreciativeness, negative state of mind and selfishness. Self-seeking is a dimension, in which toxic leaders believe that they deserve their position and even higher positions and that they are more capable than anyone else and think that the organization can only perform well under their leadership. The toxic leadership dimension that insults employees, does not listen, does not value and keeps past mistakes on the agenda is inappreciativeness.

The mental states and emotional behaviors of the leaders have a significant impact on the organizational climate. It was determined that employees' organizational climate perceptions consisted of leaders' mental states and emotional behaviors, which shaped employee morale, emotions and behaviors according to the leader (Momeni, 2009). The dimension, which causes toxic leaders to affect the organization with their negative moods and leads workers to exhibit behaviors in line with the negative moods of the toxic leader is negative state of mind.

Selfishness is the dimension in which toxic leaders accuse the employee for their failure, take credit for employees' successes and prioritize their personal interests.

# CHAPTER 3

# THE RELATIONSHIP OF TOXIC LEADERSHIP WITH EMPLOYEE BUSINESS MANNERS AND BEHAVIORS

In this section, the relationship between toxic leadership and organizational commitment, job satisfaction, job performance and turnover intention is discussed. Information about the formation of the hypotheses of the research is given.

## 3.1 The Relationship between Toxic Leadership and Organizational Commitment

Loyalty of an employee to their institution plays an important role in determining whether employees work passionately in the enterprise they are employed in for long years in line with the mission and vision of the organization. Regarding organizational commitment, a general definition is made, referring to individuals' exerting effort within the framework of the aims and values of the organization and wanting to pursue their membership in the organization (Porter, Steers, & Mowday, 1979).

Leadership behaviors have an important role in employees' organizational commitment and job satisfaction (Mosadeghrad & Ferdosi, 2013). In addition to researches emphasizing that positive leadership behaviors are very important for employees' organizational commitment, (Anderson, 2015; Lyndon & Rawat, 2015; Choi, Lim , & Tan, 2016) lots of researches were conducted indicating that negative leadership behaviors reduce (Rayner & Cooper, 1997; Tepper, 2000; Burns, 2017) organizational commitment.

In Gallus et al.'s (2013) study developed based on Bandura's theory, which is an indirect social learning theory based on observation and imitating the behaviors of others, it was found that toxic leadership mediated the relationship

between organizational commitment and job satisfaction, which are among the measures of organizational success, are affected by toxic leadership behaviors (Schmidt, 2014). Mehta and Maheshwari, in their study, (Mehta & Maheshwari, 2013) found a statistically significant inverse relationship between toxic leadership behaviors and organizational commitment. Toxic leadership behavior reduces organizational commitment (Goldman, 2006).

For the employees to provide the highest benefit to the enterprise they work in, their organizational commitment levels should be high. When the researches conducted are examined, the relationship between toxic leadership and perception of organizational commitment is found to be negative. According to this result, the increase in the toxic characteristics of the leaders weakens the organizational commitment.

## 3.2 The Relationship between Toxic Leadership and Job Satisfaction

Job satisfaction is defined as psychological, physiological and environmental factors that cause an individual (Hoppock, 1935) to be satisfied or unsatisfied with his/her work, the combination of external factors and internal factors including individuals' emotional orientations towards their job roles (Vroom, 1964), and the general grading of (Mueller & McCloskey, 1990) job characteristics. Job satisfaction is employees' developing a positive attitude towards their work (Fatt, Khin, & Heng, 2010). The difference between the expectations of the employees from their jobs and the practice and how much they like their work emerges as job satisfaction and how much they dislike their work emerges as job dissatisfaction (Bayarçelik & Fındıklı).

A number of authors studied different aspects of toxic leadership behaviors. For instance, Kusy & Holloway (2009) explored toxic behaviors that targeted an individual's self-worth and the effect of these behaviors on the individual's motivation and how happy they are as an employee. In related studies, Rayner & Cooper (1997) and Tepper (2000) explored bullying as toxic leadership behavior and how it affected the job satisfaction of employees being bullied by their superiors.

by leaders and its impact on job satisfaction. The work of Kusy and Holloway (2009) focused on leadership behaviors of attacking followers' self esteem and its impact on employee morale and job satisfaction.

Leaders who have the characteristics of narcissism, machiavellianism and psychopathy, which are considered as the dark side of personality, negatively affect employee welfare and job satisfaction (Mathieu, Neumann, Hare, & Babiak, 2014; Schmidt, 2014).

Investigating the negative effects of toxic leadership on job satisfaction, (Mehta & Maheshwari, 2013; Boddy & Croft, 2016; Burke, 2017; Webster V. , Brough, Daly, & Myors, 2011) they proved that toxic leadership behaviors negatively affect job satisfaction. Job satisfaction is one of the factors leading to quitting and it is determined by factors such as job satisfaction, job burnout, stress, routine tasks, role uncertainty (Gergen, Avila, & Green, 2016).

## 3.3 The Relationship between Toxic Leadership and Job Performance

Job performance, is defined as the productivity level of the employee's behaviors and outputs compared to other employees at the same level with their position, (Kohli, 1985), all the activities and behaviors that help the organization achieve its goals and (Rotundo & Sackett, 2002) objectives. Hogan and Kaiser, (Hogan & Kaiser, 2005) in their study, stated that personality determines leadership style and leadership styles affect employees' attitudes, team functioning and organizational performance.

Today, every enterprise, including health institutions, needs employees with high business performance in order to survive, adapt to changing environmental conditions, and provide competitive advantage. Leaders should aim to positively influence the job performance of employees by creating a positive work environment and forming an organizational climate through arrangements that will enable employees to feel positive. In the study conducted on beginning nurses, (Kurniawan, Hariyati, & Afifah, 2019) a strong correlation was found between the job satisfaction and performance of attentive and responsible nurses. In the study that measures the factors affecting the performance of nurses in Saudi Arabia, (Hanan, 2009) job

performance was found to be positively correlated with organizational commitment and job satisfaction variables. In another study applied to nurses in Korea, (Khan & Baloch, 2017) it was found that constructive changes in organizational commitment increase job satisfaction and decrease turnover intention.

Toxic leadership behaviors lead to lower job performance including loss of time (Lipman-Blumen J. , 2005; Steele, 2011-3). In a study conducted in the military field, (Harris, Kacmar, Zivnuska, & Shaw, 2007) it was found that toxic leaders have more harmful effects on the performance of employees who find their job meaningful and have a strong sense of commitment.

Based on this discussion, the following hypothesis is formulated:

*H1a.* Job satisfaction and organizational commitment play a mediating role in the relationship between the self-seeking dimension of toxic leadership perceptions and job performance.

*H1b.* Job satisfaction and organizational commitment play a mediating role in the relationship between the inappreciativeness dimension of toxic leadership perceptions and job performance.

*H1c.* Job satisfaction and organizational commitment play a mediating role in the relationship between the negative state of mind dimension of toxic leadership perceptions and job performance.

*H1d.* Job satisfaction and organizational commitment play a mediating role in the relationship between the selfishness dimension of toxic leadership perceptions and job performance.

## 3.4 The Relationship between Toxic Leadership and Turnover Intention

An employee's having plans and thoughts about quitting within the period until they leave the institution they work in is called turnover  (Fong & Mahfar, 2013) intention. The importance of employees' turnover intention's being at the minimum level regarding the enterprises may be expressed in this way: if the employee does not put their turnover intention into practice they will provide continuity in their job, will not deprive the enterprise of the knowledge, skill and

experience that they have and will not cause expenses such as re-election, placement and training.

When turnover intention is examined, its relationship with job satisfaction and organizational commitment (Baotham, Hongkhuntod, & Rattanajun, 2010; Ramalho, Luiz de Paula, & Oliveria, 2018; Malik, Nawab, Naeem, & Danish, 2010) is found.

There is a positive and significant relationship between toxic leadership and turnover intention (Schmidt, 2008; Schmidt, 2014). Toxic leadership often leads to high employee turnover rate, reduced productivity, less innovation and inter-departmental conflict (Saqib & Arif, 2017).

As a result of the study conducted in the Unites States in 2017, with a thousand employees with university education, it was found that 56% of respondents described their managers as toxic and 73% of respondents quit because of a toxic leader (Singh, Sengupta, & Dev, 2018). Accordingly, the following hypothesis has been developed:

*H2a.* Job satisfaction and organizational commitment play a mediating role in the relationship between the self-seeking dimension of toxic leadership perceptions and turnover intention.

*H2b.* Job satisfaction and organizational commitment play a mediating role in the relationship between the inappreciativeness dimension of toxic leadership perceptions and turnover intention.

*H2c.* Job satisfaction and organizational commitment play a mediating role in the relationship between the negative state of mind dimension of toxic leadership perceptions and turnover intention.

*H2d.* Job satisfaction and organizational commitment play a mediating role in the relationship between the selfishness dimension of toxic leadership perceptions and turnover intention.

When the literature was examined, as a result of a study examining the relationship between the job satisfaction, stress and organizational commitment of the health personnel working in a public hospital and their

turnover intention and organizational commitment (Gül, Gökçe, & Karamanoğlu, 2008) it was found that job satisfaction and organizational commitment adversely affect turnover intention and positively affect job performance. In other studies applied to nurses (Yasmin & Marzuki, 2015; Labrague, et al., 2018) an inverse relationship was found between organizational commitment and turnover intention and it was maintained that nurses with high organizational commitment have higher job satisfaction and want to work in their positions for longer periods. Based on the literature, the following hypotheses have been developed:

*H3a.* Job satisfaction and organizational commitment play a mediating role in the relationship between the self-seeking dimension of toxic leadership perceptions, turnover intention and job performance.

*H3b.* Job satisfaction and organizational commitment play a mediating role in the relationship between the inappreciativeness dimension of toxic leadership perceptions and turnover intention and job performance.

*H3c.* Job satisfaction and organizational commitment play a mediating role in the relationship between the negative state of mind dimension of toxic leadership perceptions and turnover intention and job performance.

*H3d.* Job satisfaction and organizational commitment play a mediating role in the relationship between the selfishness dimension of toxic leadership perceptions and turnover intention and job performance.

In an environment where competition is increasingly intensified, the survival of the enterprises depends on the ability of leaders in business managements to direct the attitudes and behaviors of employees regarding the business in a correct and healthy way. The most important of these attitudes and behaviors are job satisfaction, turnover intention, job performance and organizational commitment (Shore & Martin, 1989).

When the researches conducted up until today are examined, no study is found examining the job satisfaction and organizational commitment mediating relations between the toxic relationship perceptions of hospital employees,

turnover intention and job performance. For this reason, H4 hypothesis was formed based on the job satisfaction and organizational commitment mediating relations between toxic leadership perceptions, turnover intentions and job performance of hospital employees:

*H4.* Job satisfaction and organizational commitment play a mediating role between toxic leadership perceptions, turnover intention and job performance.

# CHAPTER 4

# METHOD

In this section, which includes the research method of the thesis, the sample of the research, data collection tools, data collection and evaluation technique, research limitations are summarized.

## 4.1 Sample

When selecting the sample, 658 healthcare personnel was reached within the working hours by way of simple random sampling method. Distribution of the assignments of 658 participants were as follows; 107 staff physicians, 65 supervisor nurses, 298 nurses, 112 administrative staff and a total of 76 pharmacists, physiotherapists, biologists, anesthesia technicians, surgical technicians, perfusion technicians, laboratory technicians and caregivers.

The participants work at hospitals that are located in the European part of İstanbul, which is the most crowded city in Turkey. The reason why Istanbul province is selected as the universe of the research is presence of many large-scale hospitals in this metropolis and its status to represent the healthcare personnel throughout the country with diversified demographic attributes. According to the data of TSI and the Ministry of Health, number of beds in Turkish hospitals in 2016 was 217.771. The province with the highest number of hospital beds is Istanbul with 36.124 beds. The reason why the study is conducted in hospitals having at least 100 beds and more is because the criterion used to determine the size of the hospitals is the number of beds. The reason for the research to be limited to healthcare personnel who have been working in hospitals with at least 100 bed capacity at least for 1 year is that the orientation of the healthcare personnel with the hospital has been completed.

The study used convenient sampling technique to identify hospitals. This study was conducted in three foundation university hospitals and three public hospitals affiliated with the Secretary General of the Association of Public

Hospitals, of Turkish Public Hospitals Institution in the Bakırköy District, between September and December 2016.

Foundation University Hospitals are private hospitals subject to the provisions of the Private Hospitals Act and they are established and administered by the board of trustees in accordance with the articles of foundation of the related foundation.

We have applied to Bakirkoy General Secretariat of the Public Hospitals Union, General Secretariat of Istanbul Anatolia South Public Hospitals Union, Istanbul Faculty of Medicine, Istanbul University (Çapa) and hospitals of foundation universities in European side of Istanbul to obtain permission to conduct the research. General Secretariat of Istanbul Anatolia South Public Hospitals Union and Istanbul Faculty of Medicine did not grant permission to conduct the research. They stated verbally that they don't find the measurement of toxic leadership in their institutions acceptable. The research is conducted in Istanbul Bakirkoy Dr. Sadi Konuk Training and Research Hospital affiliated with Bakirkoy General Secretariat of the Public Hospitals Union, Bagcilar Training and Research Hospital, Istanbul Bahcelievler State Hospital and foundation university hospitals in Fatih, Bahcelievler and Florya.

Foundation university hospitals and public hospitals operate with at least 100 beds in central Istanbul.

General information about the hospitals affiliated to Istanbul Province Bakirkoy Region Public Hospitals Association:

Istanbul Bakirkoy Dr. Sadi Konuk Training and Research Hospital provides service with a capacity of 150 beds and 1128 staff. Bağcılar Training and Research Hospital has been providing service since 15 November 2006. It has 1600 staff and 213 patient rooms. İstanbul Bahçelievler State Hospital has been serving with 314 bed capacity since 7 March 2014.

Foundation universities did not allow their names to be included in the study. The bed capacity of the foundation university hospitals is 200, 242, 150.

**4.2 Data Collection Instruments**

The data were collected using a questionnaire to gather the demographic information, as well as responses to a Turkish version of the Toxic Leadership Scale (Schmidt, 2008; Celebi, Güner, & Yıldız, 2015), The Minnesota Job Satisfaction Questionnaire (Weiss, Davis, England, & Lofquist, 1967; Baycan, 1985), Organizational Commitment Scale (Meyer & Allen, 1991; Baysal & Paksoy, 1999),Turnover Intention Scale (Rosin & Korabik, 1995; Tanrıover, 2005) and Job Performance Scale (Kirkman & Rosen, 1999).

**4.2.1 Information Related to Studied Sample**

Gender, educational level, age, the type of work at the hospital, health sector work experience in years and how long the person has been employed at the hospital were some of the areas that the survey covered. The survey is presented in Annex-A.

**4.2.2 Toxic Leadership Scale**

Perception of toxic leadership by the employees was measured using a modified version of the data collection apparatus by Schmidt (2008). The modification, which is thought to be applicable to healthcare institutions, was done by Celebi, Güner, and Yıldız (2015). The modified scale has 30 components. These components are divided into four sub-dimensions representing different aspects of toxic leadership:

- inappreciativeness (11)
- self-seeking (9)
- selfishness (5)
- negative mental state (5).

According to Reyhanoğlu & Özden, who compared Schmidt's (2008) study to Celebi et al.'s (2015) study, the abusive, narcissistic, and self-promotional personality dimensions explored by Schmidt (2008) were represented by the selfishness and selflessness dimensions explored by Celebi et al. (2015). As a result, while Schmidt (2008) applied five total personality dimensions in their study, Celebi et al. (2015) were able to apply a modified version of Schmidt's scale using only four dimensions.

While Reed (Reed G. E., 2004) and Wallington (Wallington, 2006) stated in their studies that the self-seeking dimension of the toxic leadership serves their own best interests and ignores the interests of subordinates, Celebi et al.(2015) also noted in their study that presenting the organization's and employees' achievements as if it is his own success, favoring people who are advantageous for him, refusing responsibility on issues stemming from his employees are all characteristics of toxic leadership with a high self-seeking dimension (Celebi et al., 2015). This dimension is compatible with the self-promotion dimension in Schmidt's study (2008) who gives priority to his own interests. The selfishness dimension in the study of Celebi et al. (2015) is associated with narcissists, defined as those who do not show empathy to the thoughts, feelings, and needs of others, and are selfish in relationships and self-centered. Selfishness dimension is also compatible with Schmidt's (2008) TLS where narcissism is characterized by lack of developing empathy and underestimation of subordinates' capabilities and efforts.

The behaviors corresponding to the inappreciativeness dimension of toxic leadership are exhibiting condescending attitude against employees, speaking ill of his employees to other people, unpleasantly reminding their past failures to his employees, telling them that they are inadequate and taking an opposing position to them without listening to his employees (Celebi et al., 2015).

According to Schmidt's (2008) unpredictability dimension of the TLS, employees do not have an idea on when and according to what their leaders will change behavior. Sudden anger outbursts and inconsistency in daily behaviors are the main characteristics of toxic leaders (Wallington, 2006). He states that the negative mental mood dimension is when the toxic leader's current mood affects the atmosphere of the work environment and nobody wants to approach him when he is angry and distressed, or in a depressive mood; this mood is reflected in his voice's tone/intensity. In the negative mental mood dimension, the employees behave according to the toxic leader's mood. Moreover, in this dimension, there is inconsistency and instability in the toxic leaders' behavior (Celebi et al., 2015). The questionnaire concerned is presented in Annex-B.

### 4.2.3 Job Satisfaction Scale

Baycan (1985) translated the Minnesota Job Satisfaction Scale by Weiss et al. (1967) to Turkish and ran validity and reliability studies. Minnesota Scale, which is a 5-point Likert-type scale, contains 20 questions on work conditions and job satisfaction.

The original Minnesota Scale contains two dimensions describing internal and external satisfaction. On the other hand, this study does not make a distinction between internal and external factors affecting job satisfaction.

The questionnaire concerned is presented in Annex-C.

### 4.2.4 Organization Commitment Scale

In the determination of hospital workers' organizational commitment levels, the emotional commitment (Meyer & Allen, 1991) component of Organizational (Baysal & Paksoy, 1999) Scale, developed by Meyer and Allen in 1991 and improved by translating into Turkish by Baysal and Aksoy was adopted to thesis study. Emotional commitment refers to the emotional attachment of the employee to the organization, their identifying with the organization and to remaining in the organization with their own will and preferences. The reason for choosing only emotional commitment among the emotional, compulsory and gratitude commitment components of organizational commitment is that the results of this component are related to intention to quit and employee turnover rate. The results of the compulsory commitment component of organizational commitment are related to organizational citizenship behavior and being present in the workplace, and the results of the gratitude commitment component are related to employee health and happiness (Meyer & Allen, 1991). The questionnaire concerned is presented in Annex-D.

### 4.2.5 Turnover Intention Scale

Tanrıöver (2005), translated the scale originally developed by Rosin & Korabick (1995) to Turkish with four questions, using a five point Likert-type scale. The original scale was found to be highly reliable, with a Cronbach's

Alpha coefficient of 0.93. The questionnaire concerned is presented in Annex-E.

### 4.2.6 Job Performance Scale

In measuring job performance, job performance scale was used, which was used by Kirkman and Rosen (Kirkman & Rosen, 1999), Sigler and Pearson (Sigler & Pearson, 2000). In both of these studies, the reliability coefficient of the scale determined to be over 0.70. The scale consists of four questions (Kirkman et al., 1999; Sigler et al., 2000). The questionnaire concerned is presented in Annex-F.

### 4.3 Data Collection and Evaluation

Research strategy is a plan to be pursued in order to attain the goal of the research. Researchers adopt document/record review, questionnaire, test, interview, focus group, observation, checklist, ethnography, oral history, case study and experimental methods to collect data (Saunders, Lewis, & Thornhill, 2016). In this study, where the effect of toxic leadership on job performance and turnover intention is investigated through job satisfaction and organizational commitment according to the perceptions of hospital employees, questionnaire method was chosen to collect data. After obtaining the necessary permissions for conducting the research and collecting the data, the participants were determined by random sampling and the data were collected by applying the scales related to face-to-face interviews.

In order to test the reliability and validity of the data in the research, various statistical techniques were used to test the research hypotheses. For the validity of the data, explanatory and confirmatory factor analyzes were used. Cronbach's Alpha was used for data reliability. After the determination of the factor structures, the correlation between the factors as well as the mean and standard deviation values of the factors were tested by correlation analysis. Afterwards, SEM was used to test the research hypotheses. SPSS 25.0 and AMOS 24.0 packaged software, which are statistical programs, were used in the data analysis of the research.

## 4.4 Conceptual Framework

The relationships between the four dimensions of toxic leadership have been organized into a conceptual framework, including the constructed hypotheses and their directions (Figure 3).
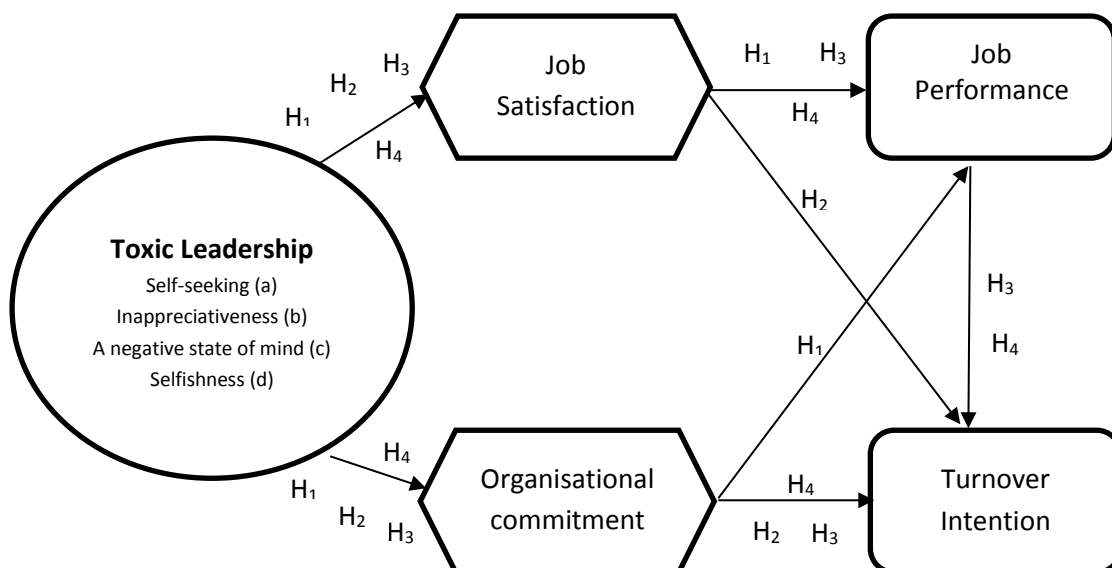


**Figure 3:** *Conceptual Framework*

In the conceptual model, the hypotheses investigating the effect of the four sub-dimensions (Self-seeking (a), Inappreciativeness (b), A negative state of mind (c), Selfishness (d)) of toxic leadership represented as a,b, c,d on job satisfaction and job performance under the effect of organizational commitment are H1 (H1a, H1b, H1c H1d), and hypotheses investigating its effect on intention to quit are H2 (H2a, H2b, H2c, H2d).

Hypotheses investigating the effect of four sub-dimensions of toxic leadership separately on job performance and intention to leave under the influence of job satisfaction and organizational commitment are H3 (H3a, H3b, H3c H3d).

The hypotheses that investigate the effect of sub-dimensions of toxic leadership on job performance and intention to quit under the influence of job

satisfaction and organizational commitment are H4. The hypotheses of the research are given in Table 1.

**Table 1.**

*Research Hypothesis*

| | |
|---|---|
| $H_{1a}$ | Job satisfaction and organizational commitment play a mediating role in the relationship between the self-seeking dimension of toxic leadership perceptions and job performance. |
| $H_{1b}$ | Job satisfaction and organizational commitment play a mediating role in the relationship between the inappreciativeness dimension of toxic leadership perceptions and job performance. |
| $H_{1c}$ | Job satisfaction and organizational commitment play a mediating role in the relationship between the negative state of mind dimension of toxic leadership perceptions and job performance. |
| $H_{1d}$ | Job satisfaction and organizational commitment play a mediating role in the relationship between the selfishness dimension of toxic leadership perceptions and job performance. |
| $H_{2a}$ | Job satisfaction and organizational commitment play a mediating role in the relationship between the self-seeking dimension of toxic leadership perceptions and turnover intention. |
| $H_{2b}$ | Job satisfaction and organizational commitment play a mediating role in the relationship between the inappreciativeness dimension of toxic leadership perceptions and turnover intention. |
| $H_{2c}$ | Job satisfaction and organizational commitment play a mediating role in the relationship between the negative state of mind dimension of toxic leadership perceptions and turnover intention. |
| $H_{2d}$ | Job satisfaction and organizational commitment play a mediating role in the relationship between the selfishness dimension of toxic leadership perceptions and turnover intention. |
| $H_{3a}$ | Job satisfaction and organizational commitment play a mediating role in the relationship between the self-seeking dimension of toxic leadership perceptions, turnover intention and job performance. |

| H$_{3b}$ | Job satisfaction and organizational commitment play a mediating role in the relationship between the inappreciativeness dimension of toxic leadership perceptions and turnover intention and job performance. |
|---|---|
| H$_{3c}$ | Job satisfaction and organizational commitment play a mediating role in the relationship between the negative state of mind dimension of toxic leadership perceptions and turnover intention and job performance. |
| H$_{3d}$ | Job satisfaction and organizational commitment play a mediating role in the relationship between the selfishness dimension of toxic leadership perceptions and turnover intention and job performance. |
| H$_4$ | Job satisfaction and organizational commitment play a mediating role between toxic leadership perceptions, turnover intention and job performance. |

## 4.5 Structural Equation Modeling (SEM), Exploratory Factor Analysis, Confirmatory Factor Analysis

Following the explanation given before, the conceptual model utilized in this work has two main characteristics. First of all, there are two result variables in the model. There are many factors that affect the toxic leadership behaviors the health personnel are exposed to, including their overall performance and intention to leave. It is not possible to fully explore how healthcare personnel are affected by toxic leadership behaviors by addressing only one factor. In SEM analysis, it is possible to test complex models by including multiple dependent variable analyses at the same time.

SEM is a multivariate statistical analysis that is used to test models containing observed and implicit variables, consisting of a combination of factor analysis and regression analyses. The main objective of SEM is to test whether a relationship model with an institutional basis fits the collected data. As a result of SEM analysis, if the goodness of fit values of the model tested are on a sufficient level, it is decided that it is verified with the tested data and if they are not on a sufficient level it is decided that it is not verified with the tested data (Hoyle, 1995).

The subject of goodness-of-fit indices is an area of research that is still in development. There are certain critical limit points in each goodness-of-fit index. However, these points are not certain but accepted. It is normal for a model constructed in new emerging areas to fall below the critical limits of goodness-of-fit indices.

It is a widely used method, which can be treated together in fields such as social sciences, educational sciences and political science, among the many characteristics of units related to each other, which enables the grouping of the unrelated, which can be utilized to describe a formation and defining as a factor with a new name and has widespread usage. In exploratory factor analysis, Bartlett Test of Sphericity is used to determine the assumption that the data are from multivariate normal distribution. Significance value should be less than 0.05 for the assumptions of stemming from multivariate normal distribution to be provided. Kaiser-Meyer-Olkin (KMO) test is used to determine data adequacy (Sharma, 1996).

Regarding the Toxic Leadership Scale, although the factor structure was revealed in previous studies, differentiation in the sample group may lead to different results in the factor structure. Therefore, in this part of the study, it was tried to determine what kind of a difference the sample group caused in factor structure by using explanatory factor analysis.

KMO test is used to determine the sample adequacy during the factor analysis implementation phases and Bartlett sphericity test is used to determine the accuracy of the implementation of factor analysis (Sharma, 1996).

KMO coefficient provides information about whether the data matrix is appropriate for factor analysis and whether the data structure is suitable for factor extraction. The Barlett test examines the relationship between variables on the basis of partial correlations.

After the exploratory factor analysis, as a second step, it was tried to determine how the number of factors changed in the model where item loads are proposed for the items under these factors with the confirmatory factor analysis

for scales. Confirmatory factor analysis was performed separately for all scales.

Confirmatory Factor Analysis is a type of SEM that can measure the relation between the observed and latent variables (Brown T. A., 2006). Confirmatory factor analysis is used to confirm a certain scale whose factor structure is certain and which is used in the literatüre.

## 4.6 Evaluation of the Model in terms of Reliability and Validity

Composite Reliability (CR) test was utilized to reveal the reliability of the measurement model. In addition, Cronbach's Alpha values were examined for internal consistency reliability. That a CR value is greater than 0.70 indicates that the model is reliable.

Convergent validity, which is necessary for construct validity, refers to the extent to which the variability within a structure or implicit variable is shared by the observed variables. In order to ensure convergent validity, the Average Variance Extracted (AVE) value was examined. For the similarity validity of the scale, AVE is expected to be higher than 0.5 and compound reliability ratio is expected to be greater than AVE (CR> (AVE) / AVE> 0.5) (Hair, Black, Babin, & Anderson, 2010).

Distinction validity, which is another validity required for construct validity, refers to the extent to which a construct differs from other constructs, i.e. an implicit variable differs from other implicit variables and can be distinguished from others. For separation validity, AVE is required to be greater than the Maximum Shared Variance (MSV) shared (Hair, Black, Babin, & Anderson, 2010). Therefore, MSV value was determined and compared with AVE.

## 4.7 Research Limitations

The research is limited with health personnel working in hospitals with at least 100 bed capacity in İstanbul Provincial Center for at least 1 year. The study is limited with the data to be collected from Toxic Leadership Scale (Schmidt, 2008; Celebi, Güner, & Yıldız, 2015), The Minnesota Job Satisfaction Questionnaire (Weiss, Davis, England, & Lofquist, 1967; Baycan, 1985),

Organizational Commitment Scale (Meyer & Allen, 1991; Baysal & Paksoy, 1999),Turnover Intention Scale (Rosin & Korabik, 1995; Tanrıover, 2005) and Job Performance Scale (Kirkman & Rosen, 1999).

**CHAPTER 5**

**RESULTS**


**5.1. Demographic Characteristics of the Sample**

As can be seen in Table 2, 26.1% of the sample consists of males and 73.9% females. It is seen that 36.2% of the participants are in the age range of 20-30 years, 46.8% in the age range of 31-40 years, 17% in the age range of 40 years and above. While 46.2% of the participants forming the sample were in the foundation university, 53.8% were found to be employed in the public university. In addition, when the educational status of the participants was examined, 23.9% were found to be graduates of higher education, 36.3% to have a bachelor's, 11.4% a master's and 19.1% a PhD degree, and 9.3% were found to be graduated from other education levels. It was seen that 16.3% of the sample group were specialist doctors, 9.9% were responsible nurses, 45.3% worked as nurses, 17% were administrative staff and 11.6% worked in other duties. Besides, regarding the working periods of participants in the health sector, 20.1% were found to work for 5 years and less, 28.1% for 6-10 years, 27.8% for 11-15 years, 13.2% for 16-20 years, 10.8% for 21 years and above. Considering the working periods in the institution, 18.2% of the participants were found to be working for 0-1 years, 53% for 1-5 years, 18.7% for 6-10 years, 10% for 10 years and more.

**Table 2.**

*Distribution of the Descriptive Features of the Sample Group*

|  | N | % |
|---|---|---|
| **Gender** | | |
| Man | 172 | 26,1 |
| Woman | 486 | 73,9 |
| **Age** | | |
| 20-30 | 238 | 36,2 |
| 31-40 | 308 | 46,8 |
| 40 and over | 112 | 17,0 |
| **Institution** | | |
| Foundation University | 304 | 46,2 |
| Public University | 354 | 53,8 |
| **Educational Status** | | |
| Undergraduate | 157 | 23,9 |
| College | 239 | 36,3 |
| Master | 75 | 11,4 |
| Doctorate | 126 | 19,1 |
| Other | 61 | 9,3 |
| **Duty in the Institution** | | |
| Specialist | 107 | 16,3 |
| Chief Nurse | 65 | 9,9 |
| Nurse | 298 | 45,3 |
| Administrative Personnel | 112 | 17,0 |
| Other | 76 | 11,6 |
| **Health Sector Working Time** | | |
| 5 years and less | 132 | 20,1 |
| 6-10 years | 185 | 28,1 |
| 11-15 years | 183 | 27,8 |
| 16-20 years | 87 | 13,2 |
| 21 years and over | 71 | 10,8 |
| **Institution Working Time** | | |
| 0-1 year | 120 | 18,2 |
| 1-5 years | 349 | 53,0 |
| 6-10 years | 123 | 18,7 |
| 10 years and over | 66 | 10,0 |

In Table 3, whether the data were suitable for factor analysis was analyzed with the help of KMO and Bartlett's Tests. According to these results, it can be said that the data used in the scale are reliable as the KMO value is closer to 1 and not reliable if they are less than 0.50. According to the results obtained, it was determined that KMO value is very close to 1 with 0.971, and therefore that the data used in the scale are appropriate. According to Barlett's Test statistics, the level of significance is expected to be within the 95% confidence

interval. According to the results of Bartlett's test statistics, the significance level of the test (p<0.001) was found to be quite significant. In general, it was concluded that the data used in the scale are appropriate.

**Table 3.**

*KMO and Bartlett's Test Results*

| Kaiser-Meyer-Olkin Measure of Sampling Adequacy. | | ,971 |
|---|---|---|
| Bartlett's Test of Sphericity | Approx. Chi-Square | 12328,017 |
| | df | 253 |
| | Sig. | ,000 |

In the explanatory factor analysis, Principal Component Analysis method was used; and Varimax rotation technique were used as the rotation method. As a result of the analysis, it was determined that the scale consisted of 4 sub-dimensions. When the explanatory power of the factors was examined, it was found that the first dimension explained the variance of the model with 23.006%. When the other dimensions are examined, it is seen that they have the power to explain the variance of the model with 21.830%, second dimension, 16.897%, third dimension and 9.980%, fourth dimension respectively. The total variance explained by the explanatory factor analysis was found to be 71.714%.

**Table 4.**

*Total variance explained by the dominant factors*

| Factor | Initial Eigenvalues | | | Extraction Sums of Squared Loadings | | | Rotation Sums of Squared Loadings |
|--------|-------|-------------|---------------|--------|-------------|---------------|--------|
| | Total | % of Variance | Cumulative % | Total | % of Variance | Cumulative % | Total |
| 1 | 13,624 | 59,233 | 59,233 | 13,624 | 59,233 | 59,233 | 23,006 |
| 2 | 1,274 | 5,541 | 64,774 | 1,274 | 5,541 | 64,774 | 21,830 |
| 3 | ,876 | 3,810 | 68,585 | ,876 | 3,810 | 68,585 | 16,897 |
| 4 | ,720 | 3,129 | 71,714 | ,720 | 3,129 | 71,714 | 9,980 |

Factor distributions in explanatory factor analysis and pattern matrix for the identified factors of the items are given in Table 5. It is seen that, the first dimension, inappreciativeness, is composed of 9 sub-items and has item loads between 0.562 and 0.798. The item loads of the second dimension, i.e. self-seeking sub-dimension, has item loads between 0.525 and 0.743. It is seen that the item loads of A negative state of mind sub-dimension, which is the third dimension are between 0.615 and 0.771. While the lowest item load of Selfishness sub-dimension, which is the last dimension was 0.710, its other sub-dimension was found to be 0.725.

**Table 5.**

*Pattern matrix for the factors identified*

|  | Factor | | | |
|---|---|---|---|---|
|  | Inappreciativeness | Self-seeking | A negative state of mind | Selfishness |
| In5 | ,798 | | | |
| In2 | ,737 | | | |
| In3 | ,720 | | | |
| In6 | ,707 | | | |
| In4 | ,660 | | | |
| In1 | ,611 | | | |
| In7 | ,594 | | | |
| In9 | ,566 | | | |
| In10 | ,562 | | | |
| S5 | | ,743 | | |
| S4 | | ,695 | | |
| S7 | | ,659 | | |
| S2 | | ,658 | | |
| S6 | | ,639 | | |
| S3 | | ,591 | | |
| S10 | | ,563 | | |
| S8 | | ,525 | | |
| Nss2 | | | ,771 | |
| Nss1 | | | ,758 | |
| Nss3 | | | ,738 | |
| Nss4 | | | ,615 | |
| Se3 | | | | ,725 |
| Se2 | | | | ,710 |

In: Inappreciativeness, S:Self-seeking, NSS: Negative state of mind, Se: Selfishness

The results of the confirmatory factor analysis performed for the toxic leadership scale are given in Table 6. Together with the test results Hu and Bentler provided, (Hu. & Bentler, 1999) the excellent and acceptable fit ranges are given in the table. When these values are compared, it is seen that the SRMR test statistic is within the limits of perfect fit threshold value and CMIN/DF, CFI, NFI and RMSEA values are within acceptable limits. Since there was no covariance relationship at a high level between any items in the CFA analysis, no modification was made. In addition, items that were

determined regarding low load values by explanatory factor analysis were also excluded from the analysis as a result of CFA analysis.
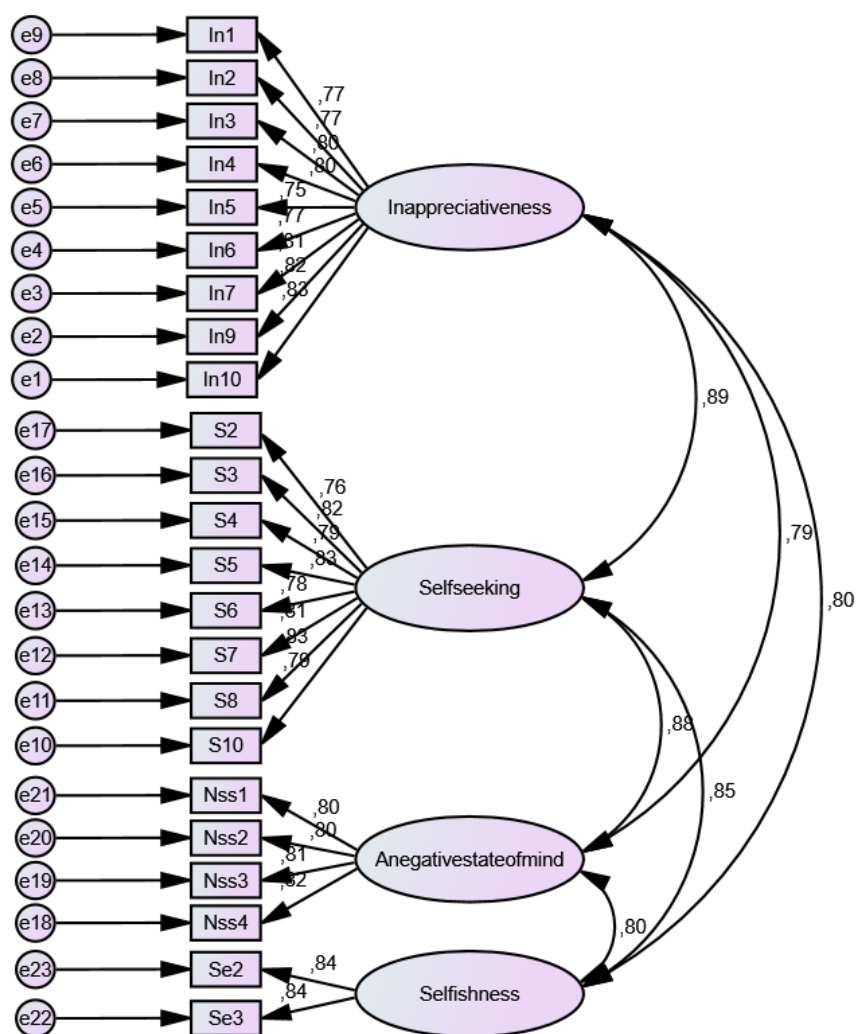
**Table 6.**

*CFA Goodness of Fit values for Toxic Leadership*

| Fit values | Good Fit (GF) | Acceptable Fit (AF) | Test results | Result |
|---|---|---|---|---|
| **CMIN/DF** | 1≤**CMIN/DF**≤3 | 2≤**CMIN/DF**≤5 | **4,336** | **AF** |
| **CFI** | ≥0,97 | 0,90≤**CFI**≤0,97 | **0,939** | **AF** |
| **SRMR** | ≤0,08 | 0,08≤**SRMR**≤0,10 | **0,035** | **GF** |
| **NFI** | ≥0,95 | 0,90≤**NFI**≤0,95 | **0,922** | **AF** |
| **RMSEA** | ≥0,05 | 0,05≤**RMSEA**≤0,10 | **0,071** | **AF** |
| $x^2$ | | 971,330(,000)(DF=224) | | |

* Hu, L. T., & Bentler, P. M. (1999).

CMIN/DF (Relative Chi Square Index), CFI (Comparative Fit Index), SRMR (standardised root mean square residual), NFI (Bentler Bonett Index veya Normed Fit Index), RMSEA (Root Mean Square Error of Approximation)

**Figure 4**. Toxic Leadership Scale CFA Chart

Since the job satisfaction scale is a unidimensional scale consisting of 20 items, confirmatory factor analysis was designed as a single factor. In Table 6, a comparison table of the excellent and acceptable fit indexes and the fit values obtained is given. According to the table, while the SRMR goodness of fit value was a perfect fit, CMIN/DF, CFI, NFI and RMSEA fit values were found to be within acceptable limits.

**Table 7.**

*CFA Goodness of Fit values for Job Satisfaction*

| Fit values | Good Fit (GF) | Acceptable Fit (AF) | Test results | Result |
|---|---|---|---|---|
| CMIN/DF | 1≤CMIN/DF≤3 | 2≤CMIN/DF≤5 | 4,726 | AF |
| CFI | ≥0,97 | 0,90≤CFI≤0,97 | 0,947 | AF |
| SRMR | ≤0,08 | 0,08≤SRMR≤0,10 | 0,032 | GF |
| NFI | ≥0,95 | 0,90≤NFI≤0,95 | 0,933 | AF |
| RMSEA | ≥0,05 | 0,05≤RMSEA≤0,10 | 0,075 | AF |
| $x^2$ | | 765,603(,000)(DF=162) | | |
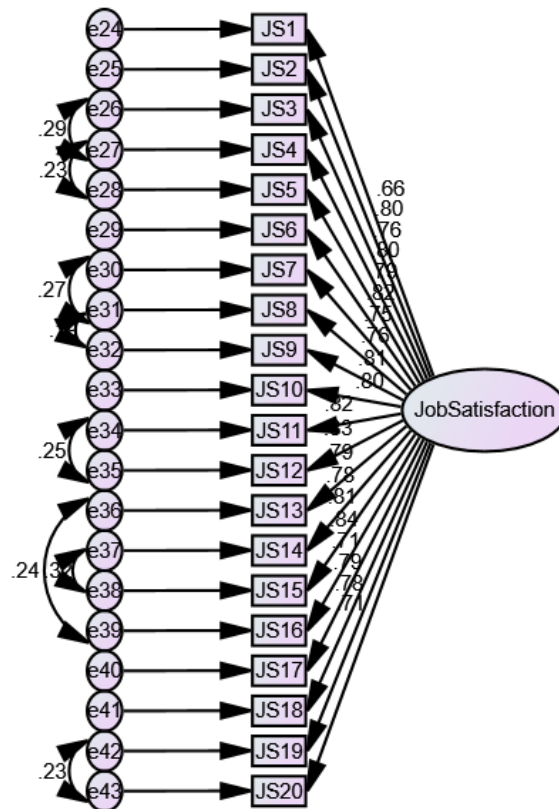


**Figure 5.** Job Satisfaction Scale CFA Chart

JS:Job Satisfaction

Only four items constitute the turnover intention variable. Since it has a unidimensional structure, it was considered as a common variable. Table 7

shows the comparison table of goodness of fit values of the variable of quitting. As can be seen in Table 8, all goodness of fit values have an excellent fit threshold value. Due to the high covariance between the variables TI1 and TI2, modification was made between these two expressions.

*Table 8.*

*CFA Goodness of Fit values for Turnover Intention*

| Fit values | Good Fit (GF) | Acceptable Fit (AF) | Test results | Result |
|---|---|---|---|---|
| CMIN/DF | 1≤CMIN/DF≤3 | 2≤CMIN/DF≤5 | 2,015 | GF |
| CFI | ≥0,97 | 0,90≤CFI≤0,97 | 0,999 | GF |
| SRMR | ≤0,08 | 0,08≤SRMR≤0,10 | 0,011 | GF |
| NFI | ≥0,95 | 0,90≤NFI≤0,95 | 0,997 | GF |
| RMSEA | ≥0,05 | 0,05≤RMSEA≤0,10 | 0,039 | GF |
| $x^2$ | | 2,015(,000)(DF=1) | | |
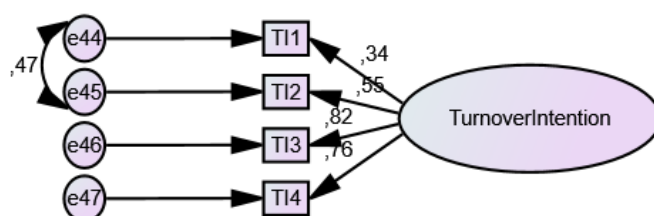


**Figure 6.** Turnover Intention Scale CFA Chart

TI:Turnover Intention

The job performance variable consists of four items. Goodness of fit values of the unidimensional variable are given in Table 8. It was determined that the obtained goodness of fit values were within the limits of perfect fit threshold values. Due to the high covariance between JP1 and JP2 items, modification was made.

**Table 9.**

*CFA Goodness of Fit values for Job Performance*

| Fit values | Good Fit (GF) | Acceptable Fit (AF) | Test results | Result |
|---|---|---|---|---|
| CMIN/DF | 1≤CMIN/DF≤3 | 2≤CMIN/DF≤5 | 1,697 | GF |
| CFI | ≥0,97 | 0,90≤CFI≤0,97 | 0,953 | GF |
| SRMR | ≤0,08 | 0,08≤SRMR≤0,10 | 0,011 | GF |
| NFI | ≥0,95 | 0,90≤NFI≤0,95 | 0,997 | GF |
| RMSEA | ≥0,05 | 0,05≤RMSEA≤0,10 | 0,033 | GF |
| $x^2$ | | 1,697(,000)(DF=1) | | |
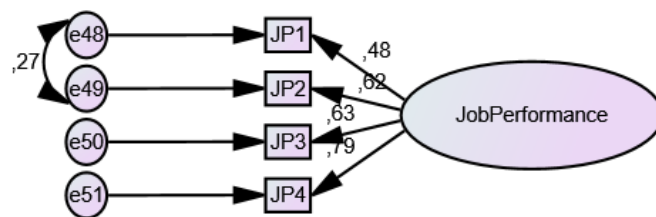


**Figure 7.** Job Performance Scale CFA Chart

JP:Job Performance

The organizational commitment variable consists of 6 expressions and one dimension. Table 9 shows the goodness of fit values of the variable. The values were compared with excellent fit threshold values and acceptable fit range values. While the SRMR goodness of fit value showed excellent fit, CMIN/DF, CFI, NFI and RMSEA fit values were within acceptable limits. Modifications were made due to the high covariance between OC3 and OC4 expressions among the items of the variable.

**Table 10.**

*CFA Goodness of Fit values for Organizational Commitment*

| Fit values | Good Fit (GF) | Acceptable Fit (AF) | Test results | Result |
|---|---|---|---|---|
| CMIN/DF | 1≤CMIN/DF≤3 | 2≤CMIN/DF≤5 | 1,722 | GF |
| CFI | ≥0,97 | 0,90≤CFI≤0,97 | 0,997 | GF |
| SRMR | ≤0,08 | 0,08≤SRMR≤0,10 | 0,016 | GF |
| NFI | ≥0,95 | 0,90≤NFI≤0,95 | 0,993 | GF |
| RMSEA | ≥0,05 | 0,05≤RMSEA≤0,10 | 0,033 | GF |
| $x^2$ | 13,778(,000)(DF=8) | | | |
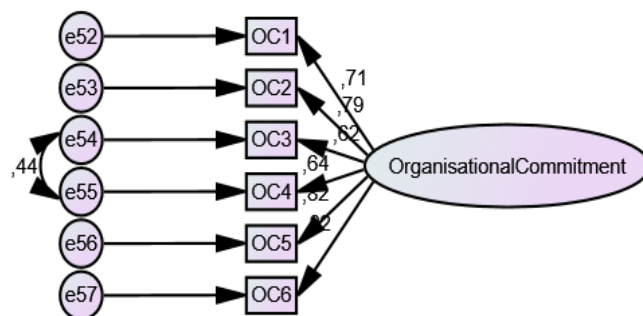


**Figure 8:** Organisational Commitment Scale CFA Chart

OC: Organisational Commitment

## 5.2. Reliability Analysis

The reliability of the scales was determined by Cronbach's Alpha value. That Cronbach's Alpha value is greater than 0.70 indicates that the scale is reliable. When the Cronbach's Alpha values given in Table 11 are examined, it is seen that all scales and sub-dimensions are reliable.

**Table 11.**

*Reliability Analysis Results*

|  | N of Items | Cronbach's Alpha |
| --- | --- | --- |
| Inappreciativeness | 9 | 0,938 |
| Selfseeking | 8 | 0,934 |
| A negative state of mind | 4 | 0,882 |
| Selfishness | 2 | 0,830 |
| **Toxic Leadership** | 23 | 0,869 |
| **Turn over Intention** | 4 | 0,753 |
| **Organisational Commitment** | 6 | 0,882 |
| **Job Performance** | 4 | 0,745 |
| **Job Satisfaction** | 20 | 0,969 |

## 5.3. Hypothesis Tests

The SEM model was used to test the hypotheses formed in the research. Goodness of fit values were examined to determine the significance of the model established before testing hypotheses. According to these results, while the goodness of fit values of the established model SRMR show perfect fit, CMIN/SD, CFI, NFI and RMSEA values are within acceptable limits. In the tests made in order to determine whether the hypotheses established after this evaluation were accepted or not, serial moderator method was used. With these test results, it was determined whether hypotheses were accepted or not (Table 12).

**Table 12.**

*Goodness of Fit values for Hypothesis Tests*

| Fit values | Good Fit (GF) | Acceptable Fit (AF) | Test results | Result |
|---|---|---|---|---|
| CMIN/DF | 1≤CMIN/DF≤3 | 2≤CMIN/DF≤5 | 3,481 | AF |
| CFI | ≥0,97 | 0,90≤CFI≤0,97 | 0,903 | AF |
| SRMR | ≤0,08 | 0,08≤SRMR≤0,10 | 0,068 | GF |
| NFI | ≥0,95 | 0,90≤NFI≤0,95 | 0,901 | AF |
| RMSEA | ≥0,05 | 0,05≤RMSEA≤0,10 | 0,061 | AF |
| $x^2$ | | 5246,374(,000)(DF=1507) | | |
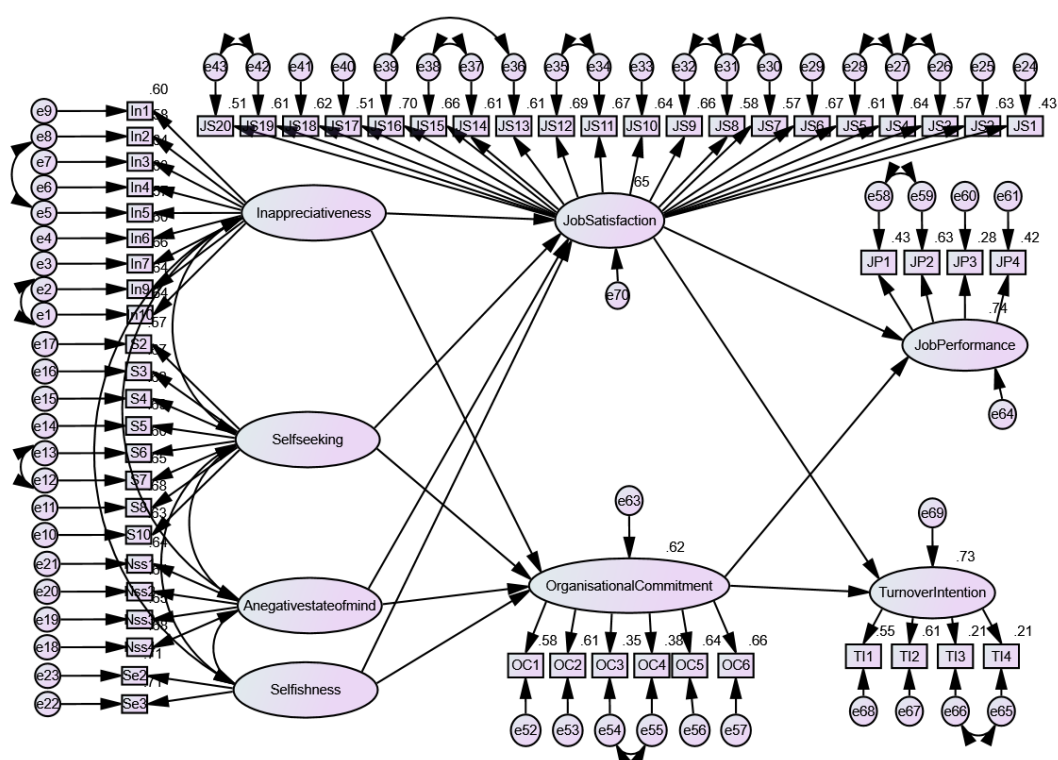


**Figure 9:** Mediation Effect of Job Satisfaction and Organizational Commitment on the Effects of Toxic Leadership Dimensions on Turnover Intention and Job Performance Structural Model

The resulting matrix in accordance with the proposed model is given in Table 12. The obtained mean variance (AVE) criterion, maximum shared variance (MSV) and compound reliability (CR) are used to calculate convergent validity (CV). According to the results, it is seen that the reliability of the structure is met because all reliability coefficients are more than 0.7. Convergent validity is acceptable because all AVE values are more than 5. In addition, discriminant validity was provided since the square root of AVE was higher than all correlation coefficients in each factor and MSV value was lower than AVE value for all factors.

**Table 13.**

*Reliability and validity measures for the proposed model*

|  | CR | AVE | MSV | MaxR(H) |
|---|---|---|---|---|
| **TurnoverIntention** | 0.910 | 0.882 | 0.805 | 0.960 |
| **Inappreciativeness** | 0.936 | 0.820 | 0.799 | 0.937 |
| **Selfseeking** | 0.934 | 0.838 | 0.799 | 0.935 |
| **Anegativestateofmind** | 0.883 | 0.753 | 0.781 | 0.883 |
| **Selfishness** | 0.831 | 0.721 | 0.717 | 0.832 |
| **OrganisationalCommitment** | 0.875 | 0.743 | 0.627 | 0.890 |
| **JobPerformance** | 0.843 | 0.825 | 0.805 | 0.871 |
| **JobSatisfaction** | 0.969 | 0.711 | 0.623 | 0.970 |

**Table 14.**

*Hypothesis tests performed with structural equation modeling*

| Hypothesis | | Estimate | S.E. | p | Result | Mediator/ Moderator |
|---|---|---|---|---|---|---|
| H$_{1a}$ | Self-seeking→ JS→ OC → JP | 0,023 | 0,02 | 0,746 | Not supported | |
| H$_{1b}$ | Inappreciativeness→ JS→ OC → JP | -0,210 | 0,003 | **0,013** | Supported | Mediator |
| H$_{1c}$ | A negative state of mind→ JS→ OC → JP | -0,109 | 0,002 | **0,012** | Supported | Mediator Moderator |
| H$_{1d}$ | Selfishness → JS→ OC → JP | 0,052 | 0,028 | **0,016** | Supported | Moderator |
| H$_{2a}$ | Self-seeking→ JS → OC → TI | -0,004 | 0,009 | 0,346 | Not supported | |
| H$_{2b}$ | Inappreciativeness→ JS → OC → TI | 0,034 | 0,026 | 0,165 | Not supported | |
| H$_{2c}$ | A negative state of mind → JS → OC → TI | 0,017 | 0,014 | 0,118 | Not supported | |
| H$_{2d}$ | Selfishness → JS → OC → TI | -0,002 | 0,005 | 0,403 | Not supported | |
| H$_{3a}$ | Self-seeking→ JS → OC → JP→ TI | 0,23 | 0,002 | 0,690 | Not supported | |
| H$_{3b}$ | Inappreciativeness→ JS → OC → JP→ TI | -0,210 | 0,02 | **0,010** | Supported | Mediator |
| H$_{3c}$ | A negative state of mind→ JS → OC → JP→ TI | -0,109 | 0,033 | **0,010** | Supported | Moderator |
| H$_{3d}$ | Selfishness → JS → OC → JP→ TI | 0,013 | 0,001 | 0,515 | Not supported | |
| H$_4$ | Toxic Leadership→ JS → OC → JP→ TI | -0,491 | 0,050 | **0,005** | Supported | Moderator |

SEM was used for hypothesis tests' analysis. According to the results (Table 14);

The H1b hypothesis, "JS and OC play a mediating role between the inappreciativeness dimension of toxic leadership perception and job performance," was accepted statistically. (=-0.210; p=0.013) According to this result, it is necessary to see whether the mediating variables are really

mediating or mediator variables. The change in the strength or direction of the relationship between the two variables indicates that the variable concerned is a moderator variable. As for the mediator variable, it defines and explains the relationship between two variables. Models should be established separately both without a moderator variable and for each moderator variable to be able to make this comparison and direct or indirect effect should be observed. In direct and indirect effect comparisons, it was determined that mediator variables did not change the relationship between the variables in the H1b hypothesis, i.e. that the mediating variables were mediator variables.

One of the hypotheses, H1c hypothesis, "JS and OC play a mediating role between the negative state of mind dimension of toxic leadership perceptions and job performance," was accepted by the analysis performed. (=-0.109; p=0.012) It can be said that Job Satisfaction, which is among the mediating variables is a mediator variable, but Organizational Commitment variable has a moderator effect.

H1d hypothesis "JS and OC play a mediating role between the selfishness dimension of toxic Leadership perceptions and job performance," was accepted as a result of the model made (=0.052; p=0.016). It was determined that the mediating variability type is the moderator variable.

The H3b hypothesis, " JS and OC play a mediating role between the inappreciativeness dimension of toxic leadership perceptions and turnover intention and job performance," was accepted as a result of the model, because it was statistically significant (=-0.210; p=0.010) When the type of the mediating variables was examined, it was found that the mediating variables are mediator variables.

The H3c hypothesis "JS and OC play a mediating role between the negative state of mind dimension of toxic leadership perceptions, turnover intention and job performance," was statistically accepted. (=-0.109; p=0.010) When the mediation effect was examined, it was determined that the mediating variables are moderator variables.

H4 hypothesis " JS and OC play a mediating role between toxic leadership perceptions, turnover intention and job performance," was accepted. (=-0.491; p=0.005) When the mediation effect was examined, it was determined that the variables have a moderator effect as mediation effect. Other hypotheses were rejected because they were greater than the statistical significance level (p>0.05).

# CHAPTER 6

## 6.1. Discussion

In this study, the relationship between the dimensions of self-seeking, inappreciativeness, negative state of mind, selfishness dimensions, the toxic leadership perceptions of hospital employees and the job satisfaction and organizational commitment mediation relationships between turnover intention and job performance were investigated in the light of the data obtained with the questionnaire method from the personnel working in different departments of at least 100-bed public and foundation university hospitals in İstanbul Provincial Center.

The research hypotheses specified in Table 1 are discussed below, respectively.

In the research, it was determined that job satisfaction and organizational commitment did not have a mediating role between job performance and self-interest dimension of toxic leadership perceptions (H1a). Surprisingly, this result contradicts with the researches (Burnes & Pope, 2007; Huang, Zhao., Niu, Ashford, & Lee, 2013) in the literature stating that negative behaviors of leaders decrease job satisfaction. It can be assumed that healthcare employees may have developed cynical behaviors while answering the questions related to self-interest in the questionnaire due to self-interested and favoritism-related (Kaygın & Kosa, 2019) behaviors within the organization constituting employee cynicism. As a result of the research conducted on the subject with the academic and administrative personnel of vocational high schools in a public university  (Çakıcı & Doğan, 2014), it was concluded that the employees, who were angry, worried and tension due to self-interested behaviors of their managers, shared their concerns,  complaints and criticisms

with their colleagues but did not reflect this on their job performance. This result strengthens this assumption.

As a result of this research, it was found that job satisfaction and organizational commitment play a mediating role between the inappreciativeness dimension of toxic leadership perceptions and job performance (H1b). In this study, it was determined that the presence of job satisfaction and organizational commitment as mediator variable, the inappreciativeness dimension of toxic leadership would affect job satisfaction and organizational commitment and that job satisfaction and organizational commitment would have an effect on job performance. The finding obtained is compatible with researches, which state that toxic leadership behaviors lead to low job performance (Lipman-Blumen J. , 2005; Steele, 2011-3), and the researches, which state that the performance of the employees who feel a strong sense of commitment will be (Harris, Kacmar, Zivnuska, & Shaw, 2007) affected.

That the mediating role of job satisfaction between the negative state of mind dimension of the toxic leadership perceptions of hospital employees and job performance was considered as mediator variable, indicates that job satisfaction is affected by the negative state of mind created by the toxic leader and the affected job satisfaction will have an effect on job performance (H1c). In the same hypothesis, organizational commitment was found to be the moderator variable. With this finding, it was stated that the change that will take place in organizational commitment will increase or decrease the strength of the relationship between the negative state of mind dimension of toxic leadership and job performance. This result is also in accord with the results of the study, which determined that organizational commitment has a moderator variable role in the relationship between leadership behaviors and job satisfaction job (Yousef, 2000) performance.

As a result of the finding that, in the relationship between the selfishness dimension of the toxic leadership perceptions of hospital employees and job performance, the mediating role of job satisfaction and organizational commitment is considered as a moderator variable (H1d), it was determined that the change that took place in job satisfaction and organizational

commitment would increase or decrease the power of the relationship between the selfishness dimension of toxic leadership and job performance. Tınaz, who is engaged in research on psychological harassment in Turkey (Tınaz, 2006), maintains that selfishness, which is a sub-dimension of toxic leadership, is one of the factors that encourage psychological harassment practitioners. The direct effect of selfishness on job performance supports the results of the studies that indicate a positive relationship between psychological harassment behavior and decrease in job performance.

Even though the mediating role of job satisfaction and organizational commitment could not be found in the relationship between the self-seeking, inappreciativeness, negative state of mind and selfishness dimensions of hospital employees' toxic leadership perceptions and turnover intention (H2a, H2b, H2c, H2d), when turnover intention was examined together with job performance, the mediating role of job satisfaction and organizational commitment was found. This result showed that while examining the effect of toxic leadership on turnover intention, job performance should definitely be examined. Turnover intention the job is a result of employees' job satisfaction attitude (Riggio, 2016). If employees feel that the relational contract between them and the organization is breached, they will intend to leave the job. According to Mobley, (1977)intention to leave the job emerges when the employees make up their mind whether they are satisfied with their job or not and this process continues untill they think of leaving the job.

When toxic leadership perceptions of hospital staff are measured, it is seen that such behavior of leaders produces an effect on the employees and they intend to leave their jobs. The reason why the mediation effect of organizational commitment between toxic leadership perception of employees and turnover intention the job is not observed in the study is that it may not be possible for organizational commitment to have an effect on the turnover intention the job by itself. It can be said that cyclical factors existed in the period when the research was made such as recession and other factors such as dense work load and physiological stress of healthcare personnel have an effect on the intention to leave the job. Moreover, if the employees' emotional organizational commitment is high, they may interiorize the values of their

institution and feel that they are inseparable parts of that institution and consequently they may not intend to leave their jobs. (Mael & Ashforth, 1992).

In the research, it was concluded that job satisfaction and organizational commitment did not have a mediating role between job performance and self-interest dimension of toxic leadership perceptions (H3a). This result is not consistent with the studies arguing that the turnover intentions of the employees, who believe that their managers use them in line with their own interests, are high  (Tett & Meyer, 1993; Eaton, 2000), with the study stating that job satisfaction and organizational commitment of healthcare employees negatively affect turnover intention and positively affect job performance (Gül, Gökçe, & Karamanoğlu, 2008) and with the studies revealing that there is a reverse relationship between organizational commitment and turnover intention of nurses and the nurses with high organizational commitment have higher job satisfaction(Yasmin & Marzuki, 2015; Labrague, et al., 2018).

When this result is evaluated by healthcare employees in terms of the behaviors that toxic leaders give more importance to their own interests, it can be interpreted that it makes the effect of toxic leadership on job performance and turnover intention meaningless and when combined with unappreciative, selfish behaviors and negative mood of the toxic leader, it makes it meaningful in a way to effect job performance and turnover intention. This situation leads to the conclusion that the self-interested behaviors of toxic leaders are not perceived negatively by healthcare employees, but when toxic leaders exhibit unappreciative, selfish behaviors and their moods create a negative atmosphere in addition to their self-interested behaviors, they are negatively perceived by healthcare employees.

The mediating role of job satisfaction and organizational commitment between the inappreciativeness dimension of hospital employees' toxic leadership perceptions, turnover intention and job performance was determined as mediation role mediator variable (H3b). According to this data, it was concluded that the inappreciativeness dimension of toxic leadership affects job satisfaction and organizational commitment and job satisfaction and organizational commitment affect job performance and turnover intention.

These results are compatible with the studies, which indicate that the turnover intention is related to job satisfaction and organizational (Baotham, Hongkhuntod, & Rattanajun, 2010; Malik, Nawab, Naeem, & Danish, 2010; Ramalho, Luiz de Paula, & Oliveria, 2018) commitment.

It was determined that the role of mediation between job satisfaction and organizational commitment was moderator variable in the relationship between the negative state of mind dimension of hospital employees' toxic leadership perceptions and turnover intention and job performance (H3c). It was found that the change in job satisfaction and organizational commitment would increase or decrease the strength of the relationship between the negative state of mind dimension of toxic leadership, job performance and turnover intention. This result obtained is in compliance with the researches, which indicate that organizational commitment is also an important factor for employees' job (Meyer & Allen, 1997; Yiing & Ahmad, 2009; Dirani, 2009; Al Zefeiti & Mohamad, 2017) performance. This result is also in compliance with the results of the studies, which indicate that toxic leadership behaviors negatively affect job (Mehta & Maheshwari, 2013; Boddy & Croft, 2016; Burke, 2017; Webster V. , Brough, Daly, & Myors, 2011) satisfaction.

As the H3d hypothesis was not supported, the result that the selfish behaviors of toxic leadership would not affect turnover intention, with the mediation of job satisfaction and organizational commitment (Lynn & Redman, 2005) is in compliance with Lynn et al.'s study, which indicates that the main predictor of nurses' intention to leave their current status and their turnover intention is job satisfaction.

As a result of the study, it was determined that job satisfaction and organizational commitment play a mediating role between the toxic leadership perceptions of hospital employees, their job performances and turnover intentions (H4). This result supports the result of another study, which shows that leadership in health sector has an important role (Mosadeghrad & Ferdosi, 2013) in the job satisfaction and loyalty of employees , the result of another study, which shows that toxic leadership plays a mediating role between organizational commitment and job satisfaction (Gallus, Walsh, Driel, Gouge,

& Antolic, 2013), and the result of the study, which (Schmidt, 2014) states that organizational commitment and job satisfaction are affected by toxic leadership behaviors. This research is also important because it examines the mediating role of job satisfaction and organizational commitment between the toxic leadership perceptions of hospital employees, their job performance and turnover intentions.

## 6.2. Conclusion

The effective and efficient use of limited resources in healthcare delivery, adapting to the continuous change process and managing increasing demands is gradually increasing the importance of leadership. While emphasizing the effectiveness of leadership for businesses, the point that should not be forgotten is the effect it has on the employee. Successful leaders empower employees, create an organizational climate based on trust, raise job satisfaction and create organizational commitment to help the healthcare organization achieve its goals (Murphy, 2005; Sfantou D. F., et al., 2017; Abbas & Asghar, 2010).

One of the types of leadership that will adversely affect the effective and efficient health care services of the employees in hospitals is toxic leadership. In this study, it was revealed that the power of the relationship between toxic leadership and job performance and intention to quit was influenced by job satisfaction and organizational commitment. Bad leaders increase intention to quit by decreasing employee performances (Gözler, 2007; Al-sharafi & Rajiani, 2013).

It is thought that determining the effect of toxic leadership on job performance and intention to quit, identifying elements stemming from toxic behaviors that prevent effective and efficient service of healthcare professionals who are trained in different areas of expertise and making interventions to keep these elements at the lowest level will contribute positively to creating awareness in health managers about the subject.

The process that begins with identification of toxic leadership in healthcare institutions should continue by providing organizational change to cope up with the toxic leadership and neutralize toxic leaders. Toxic leadership behaviors pose significant dangers for the sustainability of healthcare institutions. Toxic leaders spread their toxins by adversely affecting the moral and motivation of healthcare staff who strive to provide healthcare services, absorb the energy of the healthcare institution, decrease the productivity and poison the organizational climate. Consequently, healthcare personnel do their jobs unwillingly and establish negative relationships with their colleagues and patients under the toxic influence of toxic leader. In the end, patient satisfaction decreases due to the poor healthcare service provided in healthcare institutions and the ratio of medical errors increase.

Healthcare institutions are composed of teams of different occupational groups who share their knowledge and experience with others when they perform their tasks. Teams interact with the states of mind of their leaders. It was determined that job satisfaction undertakes the role of mediator between the negative state of mind dimension of toxic leadership perception and job performance will end up with a decrease in the job performance by creating unwillingness through the reflection of changing negative state of mind of the leader.

When organizational commitment assumes the role of mediation between the negative state of mind dimension of toxic leadership perception and job performance, it was concluded that as the negative enviroment increases,created by the leader the job performance of the personnel will be affected negatively accordingly. However, as the organizational commitment increases the job performances will increase also. Furthermore, the power of the negative state of mind of the toxic leader to affect the job performance of healthcare personnel and their intention to leave the job will increase as job satisfaction and organizational commitment of the employees decrease. Unwillingness of healthcare personnel to work and not feeling any commitment to their institution will cause them to be affected more and more by the behaviors of toxic leader and this will result in a decrease in their job performance and they will consider leaving their job.

Behaviors that do not protect or esteem anyone are called   unappreciative behaviors (Türk Dil Kurumu, 2018). Healthcare personnel who devotedly put up with the intense workload, physical and psychological exhaustion in healthcare services are influenced by the unappreciative behaviors of toxic leaders. It is identified that this results in a decease in job satisfaction and organizational commitment of healthcare personnel, their job performance reduces and they begin to consider to leave their jobs.

Selfish behaviors are defined as          valuing    their    interests    above everyone. Selfishness is a natural motive but it should be at minimum level so that it would not adversely affect the healthcare personnel. Selfish behaviors of toxic leaders adversely affect job performance and the power of this influence gradually increases in conjunction with the decrease in job satisfaction and organizational commitment.

When I have collected the research data, I did made face-to-face interviews with the healthcare personnel working at university and foundation university hospitals. They had different complaints about their managers who they perceive as toxic leaders. For example, they were submitting training programs to top management as their own program even if they did not work at all when it was prepared and getting the credit for it. The staff regards this as unappreciativeness and say "I've made a great effort for this but in the end, I've lost my interest". This is an example of how toxic leadership behaviors affect the job performance.

A healthcare personnel working at the public hospital where the research was conducted defined his/her manager who arranges the night duties as a toxic leader because he/she was assigning him/her as the on-call personnel on the first and last days of every holiday. He/she considered this as selfishness and told that he/she would take the opportunity to work at a different institution any time.

Another healthcare personnel working at a different public hospital told me that he/she was planning to study for doctorate but his/her manager, who he/she perceives as a toxic leader, was also planning to study for doctorate but he/she could not apply for doctorate as he/she did not meet the required conditions.

Therefore he/she was creating problems with regard to the leaves the personnel asked for to complete his/her doctorate. This personnel considers this behavior as selfishness.

Basically, it is important for managers to participate in the management coaching process to improve the awareness of their behaviors in order to eliminate the behaviors that cause toxic leadership.

## 6.3. Recommendation

It is necessary for the managers who are authorized to make decisions regarding healthcare services are required to ensure efficient and productive provision of these services and prove the provided services by assessing them. Managers influence their employees and ensure quality service provision.

That the managers, who perform management, which is one of the most important functions of the enterprise assign their employees according to the objectives of the enterprise and mobilizes them in line with these objectives, influences the activities of its employees, strengthen its employees and create a secure organizational climate depends on their leadership characteristics. The success of the enterprise is directly related to leadership behaviors.

Managers with positive leadership characteristics plan the works in line with the objectives of the institution and steer the employees accordingly but those with negative leadership characteristics harm interpersonal relationships and cause grouping among the employees. This results in a negative work environment and reduces job satisfaction, job performance and organizational commitment of the employees.

Quality and safe provision of health services depend on healthcare personnel. Healthcare institutions which aims high performance and productive work are required to ensure job satisfaction of healthcare staff and improve their organizational commitment. It is also expected that negative leadership

behaviors should be at minimum level to prevent the healthcare staff from leaving their jobs.

According to Health Statistics Yearbook (2018) while the total number of consultation to physicians is around 719 million, this number reached the level of 782 million in 2018. Successful conduct of this increasing demand for health services in our country and effective and efficient use of resources depend on leadership behaviors.

Although successful leadership types are regarded for keeping up with the competition and meeting the expectation, the investigation of negative leadership types such as toxic leadership is crucial to prevent the negative effects that negative leadership behaviors will form on the business and employees.

In the process of investigating the toxic leadership perceptions, it is observed at the phase of obtaining permission that the executives interpret the word "toxic" as a concept that harms the reputation of the institutions. Since the word "toxic" evokes danger and damage, it can be said that the managers who do not want to associate negative qualities with their institutions tend to ignore the toxic leadership. Considering that there is no toxic leadership in their institutions before the investigation regarding toxic leadership is completed may be an example of operational blindness.

Suggestions regarding prevention of toxic leadership in healthcare institutions are below.

- Healthcare institutions should take proactive measures in a timely manner to define and eliminate the toxic leaders within themselves.
- In order to determine toxic leadership behaviors in the institution, confidential interviews should be made with the employees so that they will not afraid of losing their jobs and being disclosed.
- Since it is assumed that in institutions where the employees are able to communicate with their superiors any time they want is an added value, open door policy should be implemented in healthcare institutions.

- Job satisfaction and organizational commitment of the employees should be improved to cope with the adverse effects of toxic leader's behaviors. Healthcare personnel cannot be substituted easily. Therefore necessary policies should be developed to improve the job satisfaction and organizational commitment of healthcare personnel in terms of the success of providing quality and productive services in healthcare sector.

- Studies should be conducted by the administration on creation of trust relationship on the basis of team dynamics and improving the performance dynamics of the teams in line with this trust relationship.

- Toxic leadership behaviors which have adverse effects on individuals are affected by numerous factors such as the characteristic properties and state of mind of those who are exposed to such behaviors and those who behave in this way, organizational culture and social values. In consideration of these factors, both the employees and administrators in healthcare institutions should be assessed at certain intervals.

- Leaders have the authority to call the personnel to account but they should also be accountable. Accountability of leaders is defined as proving that they exercise their authorities in the most correct way. Developing performance assessment criteria that may increase the accountability of leaders may be one of the measures to be taken to minimize toxic leadership in healthcare institutions.

- Another measure to minimize toxic leadership in healthcare institutions is appointing managers who have the ability to settle the disputes among the employees.

Today, health institutions are trying to provide the highest quality service with their labor force and medical equipment resources in a sector where competition is intense and demand is high. Managers of health institutions are expected to focus on employees for effective and efficient service delivery, regardless of public or private sector. Regarding the topics, which managers of health institutions providing service in a cost-based and competitive environment will focus on concerning employees, it is important to increase

the organizational commitment levels and job satisfaction of the employees and to make efforts for them to stay in the health institution.

Determination of the effect of toxic leadership in hospitals through job satisfaction and organizational commitment on job performance and intention to quit will guide hospital managers in the solution to the problems of the dominance of fear in problem solving and decision making process resulting from toxic leader behaviors, poor and bad communication, self-focused behaviors of employees, personal conflicts, verbal or physical threats, inefficient and poor performance, high employee absenteeism and staff exchange.

## 6.4. Suggestions For Future Research

In this research, the effect of toxic leadership on job performance and turnover intention was determined by means of organizational commitment and job satisfaction with the employees of health institutions working in Istanbul. Reconstruction of this research through other provinces and sectors may be useful for comparing results and examining differences.

It is suggested that different factors that may affect the health personnel's job performance and turnover intention are treated and the effect of stress formed in hospitals caused by toxic leadership behaviors and the relationship of this effect with organizational culture, climate, cynicism and nepotism are examined. In addition, it is suggested that toxic leadership behaviors are associated with managers' personality analyses and their effects on alienation levels and workplace happiness are investigated.

Conducting focus group studies to measure toxic leadership perceptions of hospital staff will be useful for future because this would enable the researchers to analyze the subject matter, trends, attitudes and behaviors in depth.

It is considered that investigation of the impact of toxic leadership or toxic employees on communication and team work in healthcare institutions will be beneficial for future researches.

In the studies to be conducted hereupon, it is important to examine whether among the managers exhibiting toxic leadership behaviors, those who joined leadership development programs and went through management coaching process showed a behavioral change.

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# APPENDIX

## APPENDIX-A

## Demographic Information

Dear Participant, the form below contains articles that have been prepared to measure perceived toxic leadership characteristics. The scale was prepared as a five-point likert. Your answers to the questions will contribute to the healthy development of the study. When answering the questions, consider your own institution. Your responses to the questionnaire will not be used except for the purpose of the research and will only be evaluated by the researcher. Thank you very much for your contribution.

Near East University

Department of Business Administration

PhD Thesis Student Elif Bakkal

Instructions:

1. Mark your participation in the following situations with a cross (X). When making your selection, select the option that represents your current status, not the status you should have. Please do not select more than one option.

Part 1:

---

**Personal Information**

1- Your Gender?

☐ Female                           ☐ Male

2. Your age …………………..

3. Your Place of Birth ………………

4. Your Educational Level

☐ High School   ☐ Bachelor      ☐ Master       ☐ Doctorate     ☐ Other………

5. For how many years have you been in the health sector?

☐ 0-1 years       ☐ 1-5 years       ☐ 6-10 years       ☐ 11-15 years       ☐ 16-20 years       ☐ 21 and above

6. For how many years have you been working in your current institution?

☐ 0-1 years       ☐ 1-5 years       ☐ 6-10 years       ☐ 11-15 years       ☐ 16-20 years       ☐ 21 and above

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**APPENDIX-B**
**Toxic Leadership Scale**

| Evaluate your managers in your health institution and indicate the most appropriate option reflecting your degree of participation in the following statements by putting an "X" mark. | Strongly Agree | Agree | Undecided | Disagree | Strongly Disagree |
|---|---|---|---|---|---|
| 1. Those in managerial positions display disdainful attitudes towards other employees. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 2. Does not want to communicate outside of work. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 3. Talks in a pessimistic/complaining manner about his/her employees to other people. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 4. Disgraces his/her employees in public opinion. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 5. Reminds his/her employees of their past mistakes ungraciously | ☐ | ☐ | ☐ | ☐ | ☐ |

**APPENDIX-C**

## Job Satisfaction Scale

| Below are statements that show your feelings and situations regarding the job you are doing. Think over these statements and specify the most appropriate option by putting an "X" sign. | Very Unsatisfied | Unsatisfied | Undecided | Satisfied | Very satisfied |
|---|---|---|---|---|---|
| 31. That it keeps me busy all the time | ☐ | ☐ | ☐ | ☐ | ☐ |
| 32. That it enables me to work alone | ☐ | ☐ | ☐ | ☐ | ☐ |
| 33. That it enables me to do different things from time to time | ☐ | ☐ | ☐ | ☐ | ☐ |
| 34. In terms of giving me the chance to be a "respectable person" in the society | ☐ | ☐ | ☐ | ☐ | ☐ |
| 35. In terms of my manager's style of managing people in his/her team | ☐ | ☐ | ☐ | ☐ | ☐ |
| 36. In terms of my manager's ability to make decisions | ☐ | ☐ | ☐ | ☐ | ☐ |

**APPENDIX-D**

**Organization Commitment Scale**

| Indicate the most appropriate option reflecting your degree of participation in the following statements by putting an "X" mark. | Strongly Agree | Agree | Undecided | Disagree | Strongly Disagree |
|---|---|---|---|---|---|
| 59. Spending the rest of my professional life in the institution I work for will make me unhappy. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 60. I do not feel that the problems of the institution I work for are really my own. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 61. I do not feel "emotionally attached" to the institution I work in. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 62. I do not see myself as a "part of the family" in my institution. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 63. The institution I work for means nothing to me. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 64. Currently, I **w**ork in this organization because of the necessity rather than my own will. | ☐ | ☐ | ☐ | ☐ | ☐ |

**APPENDIX-E**

**Turnover Intention Scale**

| Indicate the most appropriate option reflecting your degree of participation in the following statements by putting an "X" mark. | Strongly Agree | Agree | Undecided | Disagree | Strongly Disagree |
|---|---|---|---|---|---|
| 31. If I had the chance, I'd quit my job. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 32. In the last year, I started thinking about leaving my job more often. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 33. I am actively looking for a new job. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 34. I am thinking of quitting my job. | ☐ | ☐ | ☐ | ☐ | ☐ |

**APPENDIX-F**

**Job Performance Scale**

| Indicate the most appropriate option reflecting your degree of participation in the following statements by putting an "X" mark. | Strongly Agree | Agree | Undecided | Disagree | Strongly Disagree |
|---|---|---|---|---|---|
| 35. I cannot complete my work on time. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 36. I cannot achieve my goals. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 37. I cannot solve the emerging problems quickly. | ☐ | ☐ | ☐ | ☐ | ☐ |
| 38. I cannot provide services in or above quality standards. | ☐ | ☐ | ☐ | ☐ | ☐ |

## APPENDIX-G

**T.C.**
**SAĞLIK BAKANLIĞI**
**TÜRKİYE KAMU HASTANELERİ KURUMU**
İstanbul İli Bakırköy Bölgesi Kamu Hastaneleri Birliği Genel Sekreterliği

Sayı : 95273397-604.02
Konu : Araştırma İzni Hk. (Elif BAKKAL)

**DAĞITIM YERLERİNE**

Yakın Doğu Üniversitesi Sosyal Bilimler Enstitüsü İşletme doktora öğrencisi Elif BAKKAL'ın, "**Toksik Liderlik Algılarının Hastane Çalışanlarına ve Hasta Memnuniyetine Etkisi**" başlıklı çalışmasını kurumumuzda yapma talebi Genel Sekreterliğimizce uygun görülmüştür.

Söz konusu araştırmanın yürütülmesi esnasında adı geçene gerekli kolaylığın gösterilmesi ve çalışmanın başlangıç tarihi, başlamaması, iptali veya sonlandırılması gibi durumların Genel Sekreterliğinize bildirilmesini rica ederim.

e-imzalıdır.
Dr. Abdulvahit SÖZÜER
Genel Sekreter a.
İdari Hizmetler Başkanı

Dağıtım:
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EĞİTİM FAKÜLTESİ/MATEMATİK VE FEN BİLİMLERİ EĞİTİMİ BÖLÜMÜ/FİZİK EĞİTİMİ ANABİLİM DALI

**Lisans**
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1

**PLAGIARISM REPORT**

## THE EFFECT OF TOXIC LEADERSHIP PERCEPTIONS ON HOSPITAL EMPLOYEES

elif bakkal öztokatlı

ORIJINALLIK RAPORU

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| 4 | Submitted to Trident University International<br>Öğrenci Ödevi | %1 |
| 5 | Victoria Browning. "The relationship between HRM practices and service behaviour in South African service organizations", The International Journal of Human Resource Management, 2006<br>Yayın | <%1 |
| 6 | Submitted to Indian School of Business<br>Öğrenci Ödevi | <%1 |
| 7 | link.springer.com<br>İnternet Kaynağı | <%1 |
| 8 | Submitted to Grand Canyon University | |

# ETHICS COMMITEE APPROVAL



**SCIENTIFIC RESEARCH ETHICS COMMITTEE**

12.02.2020

Mrs..Elif  BAKKAL ÖZTOKATLI

Your question about your study named "**The Effect Of Toxıc Leadershıp Perceptıons on Hospıtal Employees**" has been evaluated. No ethics committee permit is required as your work took place before SREC becomes active.

Assoc. Prof. Dr. Direnç Kanol

Reporter of SREC