The Relation between Internal Work Coalitions and Nurses’ Work Outcomes

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Abstract

Background: Internal work coalition is favorable when a group of nurses come together for the purpose of gaining more influence and power which positively affect their work outcomes. The study aimed to assess the relation between internal work coalitions and nurses’ work outcomes.

Design: Descriptive correlational design was utilized to conduct this study.

Setting: The study was conducted at all inpatients units of medical and surgical departments at Benha University Hospital.

Subjects: A simple random sample of 317 out of 1539 nurses working at the previous setting. Two tools were used for data collection: (I): Internal work coalitions questionnaire and (II): Nurses work outcomes questionnaire. The study results showed that more than half of studied nurses (50.8%, 53.9%) reported moderate level of internal work coalitions and nurses’ outcomes respectively.

Conclusion: There was highly statistically significant positive correlation between total levels of studied nurses' internal work coalitions and their work outcomes.

Recommendations: Paying more attention to the vital role of the internal coalitions as a valuable strategy for upgrading nurses' cooperative abilities improving their work outcomes. Also, creating an empowering and open work environment that fosters nurses' job satisfaction and improve their performance level.

Keywords: Internal Work Coalitions, Nurses, Work Outcomes

Introduction

An organization can become dynamic and grow only through the efforts and competencies of nurses and to keep the morale and motivation of the nurses, effective personnel policies are equally important. Still, these efforts are not enough to make the organization dynamic, for which nurses' capabilities must be continuously acquired, sharpened and is possible only in an enabling organization culture (Refae, 2023). When nurses use their initiative, take risks, experiment, innovate and make things happen, the organization may be said to have an enabling culture. Some of the important characteristics of organizational culture are behavioral regularities, norms, dominant values, philosophy, and rules. Some organizations have strong cultures; others have a weak culture, which depends upon the intensity of mutual understanding (Kugler, 2023).

Internal work coalition consists of individuals who, despite their persistent differences, work together to pursue a mutually beneficial goal. The word coalition connotes a coming together to achieve a goal. Internal work coalitions are groups of agents that work jointly in order to accomplish their tasks. They are short-lived and goal-oriented group of agents that solves a specific predefined problem (Irene, 2022). Nurses are working to promote health equity, and they fill an important role. As well as working together from many distinct practice settings, nurses need to work collaboratively with
interprofessional teams and partners within and beyond health care systems which include in particular community leaders and organizations, who best understand their own community health issues and solutions (Cooper, 2022).

Internal work coalitions for health typically are formed around a particular health issue. After an issue is identified by one or more sectors of the community, partners come together to recruit other invested individuals or groups to collaborate or form a community level across-partner response. Internal work coalitions form for many reasons which form primarily in response to either a local opportunity or challenge funding priorities and opportunities have led to the formation of many community partnerships. hospitals, businesses (Fortunato, McCrain, & Schiff, 2021).

There are four dimensions to internal work coalitions. These dimensions help to measure internal work coalitions. These include the official power dimensions which exercised by the nurses in hospital who have influence and control, bureaucratic power dimensions which includes controlling work content directly by rules and procedures, and indirectly through training and selection procedures. ideology power dimensions which is a set of beliefs shared by internal influencers in a unit that distinguish it from other units and alliances power dimensions which consists of a group of nurses who seek specific interests, and each group tries to impose its details and objectives on the broader system (Murad & Jonathan, 2020).

Internal work coalition is an organization of diverse interest groups that join their human and material resources to produce a specific change that they are unable to deliver as independent individuals or separate organizations. Internal work coalition can do strengthen the core program power base, enhancing nurses’ potential to gain attention and affect change, provide talents, skills, and resources that can be shared to achieve program goals (Brooker and Meyer, 2018). Also, internal work coalition can do propel a strategic and concerted resolution of the problem, allow coalition members to own, embrace, and commit to the program goals and enroll others in their particular organizations to personally commit to them, because the coalition members themselves represent the community (Berkowitz & Allen, 2021).

Nurses' work outcomes are anything nurses get from a job or organization as job satisfaction, commitment, nurses’ safety and turnover. Job satisfaction is generally defined as the degree to which individuals have a positive emotional response towards employment in an organization. Commitment refers to nurses' attachment, identification and loyalty to their organization. This attachment has been measured in two ways: affective (or motional) and behavioral (intent to leave). Nurses' safety refers to the protection of employees from injuries caused by work-related accidents. Turnover which refer to the number of employees who remain at their job within organization (Chen et al., 2020).

Internal work coalitions among nurses is likely to improve profitability of the hospital through improved system outcomes such as lower turnover of the nurses and increase nurses' satisfaction, commitment and safety. Nurses have more job satisfaction and less turnover when they work in coalitions that have supportive and empowering leadership and organizational arrangements, along with positive group environments often reflecting elements of group support, collaboration and consensus (Martha & Susan, 2022).
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Significance of the study
Improving the internal work coalitions of hospitals are important that likely to improve profitability of the hospital through improved system outcomes such as lower turnover of the nurses, and increase nurses' satisfaction, commitment and safety. From my clinical observation and working as a nurse supervisors, it is noticed that nurses in some units work in groups and there are collaboration and good communication among nurses so, they work effectively, love their work, exchange of information through coalitions in order to provide high quality nursing care, become more satisfied and nurses learn from others and acquire new skills and even where nurses in the other units don't work in groups which lead to increase work overload, absenteeism, sloppy and unorganized work. So that the study was conducted to assess the relation between internal work coalitions and nurses’ work outcomes.

Aim of the study:
This study aimed to: Assess the relation between internal work coalitions and nurses’ work outcomes.

Research questions:
1- What are levels of internal work coalitions among nurses?
2- What are levels of nurses' work outcomes from their perspectives?
3- Is there a relation between internal work coalitions and nurses’ work outcomes?

Study design:
Descriptive correlational design was utilized to achieve the aim of the present study.

Study setting:
The current study was conducted in all inpatients units of medical and surgical departments at Benha University Hospital. The hospital consisted of three separated buildings namely: Medical, Surgical and Ophthalmology building. The total number of bed at this hospital is 880 beds divided as the following: Inpatient departments include 568 beds which Medical departments include (478 beds), Surgical departments (384 beds) and Ophthalmology building (18 beds).

1) Medical departments: Included 14 units distributed as the following: General medical (5 units), psychiatric and neurological (1 unit), dermatology (1 unit), rheumatology (1 unit), pediatric (3 units), chest (1 unit), Cardio thoracic (1 unit), cardiac (1 unit).
2) Surgical departments: Included 10 units distributed as the following: Orthopedic (2 units), obstetrics and gynecology (3 units), female surgery (2 units), male surgery (2 units), urology (1 unit), ENT (1 unit).

Sample:
The study subjects included simple random sample of nurses (317) working in the above-mentioned study setting who were available at the time of data collection who having at least two years of experience and accept to participate in the study. The sample size was defined according to the following formula,

\[ n = \frac{N}{1 + Ne^2} \]

Where "n" is sample size = 317
"N" is the total number of staff nurses = 1539
"e" is coefficient factor = 0.05(Simarjeet, 2017)

Tools of data collection: The data for this study was collected by using two tools namely:

Tool I – Internal Work Coalitions Questionnaire:
It was developed by the researchers after reviewing the related literature (Al-Rashidi,
It was used to assess level of internal work coalition among nurses. It included two parts:

**First part**: Personal data of studied nurses included (age, gender, years of experience, marital studied and educational qualification).

**Second part**: It consisted of 25 items divided under four dimensions distributed as the following:

**Table (B): Internal work coalition dimensions**

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>No. of items</th>
</tr>
</thead>
<tbody>
<tr>
<td>The official power</td>
<td>6</td>
</tr>
<tr>
<td>Bureaucratic power</td>
<td>5</td>
</tr>
<tr>
<td>Ideology power</td>
<td>6</td>
</tr>
<tr>
<td>Alliances power</td>
<td>8</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>25</strong></td>
</tr>
</tbody>
</table>

Nurses responses were measured by using three points Likert scale as follows; always (3), sometimes (2) and never (1).

**Scoring system:**

The score of each level summed and converted into percent score. The percent more than 75% indicated high internal work coalition level, if the score was from 60-75%, this indicated moderate level and if less than 60 % this indicated low level.

**Tool II - Nurses work outcomes questionnaire:**

It was developed by Basyon, (2016) and adopted by the researchers to assess nurses’ work outcomes from their perspectives. It consisted of 46 items divided under eight dimensions distributed as the following:

**Table (C): Dimensions of nurses’ work outcomes questionnaire.**

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>No of items</th>
</tr>
</thead>
<tbody>
<tr>
<td>Job satisfaction</td>
<td>6</td>
</tr>
<tr>
<td>Participation in decision making</td>
<td>4</td>
</tr>
<tr>
<td>Challenging job variables</td>
<td>4</td>
</tr>
<tr>
<td>Fringe benefits</td>
<td>4</td>
</tr>
<tr>
<td>Commitment</td>
<td>14</td>
</tr>
<tr>
<td>Nurse safety</td>
<td>5</td>
</tr>
<tr>
<td>Patient safety</td>
<td>6</td>
</tr>
<tr>
<td>Turnover</td>
<td>3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>46</strong></td>
</tr>
</tbody>
</table>

Nurses' outcomes were measured by using three points Likert scale as follows; always (3), sometimes (2) and never (1).

**Scoring system:**

The score of each dimension summed and converted into percent score. The participant who had a percent more than 75% indicated high outcomes level, if the score was from 60-75% this indicated moderate outcomes level and if less than 60 % this indicated low outcomes level.

**Validity of the tools**

- The tools were tested by jury committees consisted of five experts from Nursing Administration field (two assistant professors and one lecturer of nursing administration from faculty of nursing Benha University, two professors from faculty of Menoufia Benha University). Some modifications in Arabic statements were done in tools based on comments of jury experts such as modifying some words in some statements to give the right meaning for the phrase which did not understand clearly and adding or deleting
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Reliability of tools

Reliability of tools tested by using Cronbach's Alpha coefficient, as the following:

Table (D): Reliability of the study tools

<table>
<thead>
<tr>
<th>Tools</th>
<th>Cronbach's Alpha coefficient</th>
</tr>
</thead>
<tbody>
<tr>
<td>Internal Work Coalitions questionnaire</td>
<td>0.755</td>
</tr>
<tr>
<td>Nurses’ Work Outcomes questionnaire</td>
<td>0.837</td>
</tr>
</tbody>
</table>

Ethical Considerations

Approval was obtained from Scientific Ethical and Research Committee. The study was conducted with careful attention to the rights of the participants and written approval from the director of Benha University Hospital to conduct the study. The participants’ rights would be protected by ensuring voluntary participation, so informed oral consent obtained by explaining the objectives of the study, the content of internal work coalitions questionnaire, and nurses’ outcomes questionnaire and gain their approval and cooperation. The participants were assured that all gathered data was used for study purposes only and allow to withdraw from the study at any time without giving reason and confidentially of the gathered data and results were secured.

Field work:

- Data Collection took about two months from the beginning December 2022 to the end January 2023 after securing necessary permissions.
- The researchers met nurses in each unit and explained the aim, the nature of the study and the method of filling questionnaires and this was done individually or through group meetings of nurses during morning shift after taking permission from head nurse of each department/unit.
- The researchers distributed the data collection tools with some instruction about how to fill it.
- The data were collected from nurse for three days per week from 10 a.m. to 1.30 p.m. The average number collected was approximately 13 nurses per day.
- The time required for finishing all questionnaire was around 20-30 minutes.

Statistical analysis:

The collected data organized, tabulated and statistically analyzed using statistical package for social science (SPSS) version 26 for windows, running on IBM compatible computer. Descriptive statistics were applied (e.g frequency, percentage, mean and standard deviation. Test of significance, Chi-square test was used to detect the relation between variables. In addition, correlation coefficient (r) test and spearman's rank coefficient were used to estimate the closeness association between variables. Whenever the expected values in one or more of the cells in 2x2 tables were
less than 5, Fisher exact test was used instead. The P-value is the probability that an observed difference is due to chance and not a true difference. A significant level value was considered when p-value <0.05 and a highly significant level value was considered when p-value <0.001, while p-value >0.05 indicates non-significant results.

**Results:**

Table (1) shows that, more than half of the studied nurses (51.1%) were aged between 20-<30 years with mean age of 32.04 ± 7.58 years. Also, more than two thirds of them (68.5%) were females. Moreover, the majority of them (86.4%) were married. For years of experience, more than half of the studied nurses (51.1%) had 5-<10 years with mean years of experience 11.29 ± 8.03 years.

Figure (1) shows that, more than half of the studied nurses (53.0%) had associate degree of nursing. While, only 0.63% of them had post graduate studies.

Figure (2) shows that more than half of the studied nurses (50.8%) reported moderate level of internal work coalitions. Also, more than one-third of them (35.3%) reported high level of internal work coalitions. While, the lowest percent (13.9%) of them reported low level of internal work coalitions.

Figure (3) shows that, more than half of the studied nurses (53.9%) reported moderate level of outcomes. Also, more than one-third of them (35.0%) reported high level. While, only (11.1%) of them reported low level of outcomes.

Table (2) shows that, there was highly statistically significant positive correlation between total levels of studied nurses’ internal work coalitions and their work outcomes at (P<0.01).

**Table (1): Frequency distribution of the studied nurses according to their personal data (n=317).**

<table>
<thead>
<tr>
<th>Items</th>
<th>No.</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age (years)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20-&lt;30</td>
<td>162</td>
<td>51.1</td>
</tr>
<tr>
<td>30-&lt;40</td>
<td>105</td>
<td>33.1</td>
</tr>
<tr>
<td>≥40</td>
<td>50</td>
<td>15.8</td>
</tr>
<tr>
<td><strong>M ± SD</strong></td>
<td></td>
<td>32.04 ± 7.58</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>100</td>
<td>31.5</td>
</tr>
<tr>
<td>Female</td>
<td>217</td>
<td>68.5</td>
</tr>
<tr>
<td><strong>Marital status</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>274</td>
<td>86.4</td>
</tr>
<tr>
<td>Unmarried</td>
<td>43</td>
<td>13.6</td>
</tr>
<tr>
<td><strong>Years of experience</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1-&lt;5</td>
<td>27</td>
<td>8.5</td>
</tr>
<tr>
<td>5-&lt;10</td>
<td>162</td>
<td>51.1</td>
</tr>
<tr>
<td>10-&lt;15</td>
<td>56</td>
<td>17.7</td>
</tr>
<tr>
<td>≥15</td>
<td>72</td>
<td>22.7</td>
</tr>
<tr>
<td><strong>M ±SD</strong></td>
<td></td>
<td>11.29 ± 8.03</td>
</tr>
</tbody>
</table>

M= Mean SD=Standard deviation
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Figure (1): Frequency distribution of the studied nurses according to their educational qualification.

Figure (2): Total levels of internal work coalitions among studied nurses.
Discussion

Internal work coalitions in nursing is important because each nurse has the knowledge, skill, ability, competency, and experience which are shared together during the process of coalition. This condition can increase the motivation of nurses in the work. Nurses will get additional knowledge and skill when collaborating with other health teams (Irene, 2022). Professional working within internal work coalition allows sharing of expertise and perspective to for maintaining individual’s health and improving outcomes. The addition of this capability is an opportunity to advance for the nurse. Moreover, internal work coalitions can promote a positive organizational climate, in which nurses' experience satisfying relationships by clearly defining members' responsibilities and the derived benefits leading to good performance and positive nurses’ outcomes (Patrick, 2022).

The results of the present study revealed that more than half of the studied nurses were aged between 20-<30 years with mean age of nurses 32.04 ± 7.58 years. Also, more than two thirds of them were females. Moreover, the highest percentage of them were married. For years of experience, more than half of the studied nurses had 5-<10 years with mean years of experience 11.29 ± 8.03 years.

According to total levels of internal work coalitions among studied nurses, the present study revealed that more than half of the studied nurses reported moderate level of internal work coalitions. Also, more than one-
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third of them reported high level of internal work coalitions. While, less than one fifth of them reported low level of internal work coalitions. This might be due to the nature of nurses’ work which require cooperation, coordination and sharing opinions for effective patient care.

This result was congruent with the study conducted by Campbell et al., (2020) who found that most of the studied subjects reported good level of work coalitions. Also, this result was in agreement with Brittin et al., (2023) who mentioned that the high percent of the studied subjects had high awareness regarding work coalitions.

Furthermore, the current study findings clarified that the highest mean score of total internal work coalitions dimensions was for bureaucratic power while the lowest mean score was for official power. From the researchers' point of view, these results could be due to more than half of the studied nurses had 5-< 10 years of experience that may make them aware about different aspects of power.

These findings were in a harmony with Tehranineshat et al., (2020) who stated that the majority of nurses had good perception about types of their work power. On the same line, Leary, (2020) showed that a high level of understanding was reported among the studied nurses regarding different dynamic power.

Furthermore, the current study findings clarified that, more than half of the studied nurses had moderate level of work outcomes. Also, more than one-third of them had high level. While, only of them had low level of outcome. From the researchers' point of view, these results could be due to more half of the studied nurses had Associate degree of nursing that may make them have a symmetrical thought and the same outcomes of their work.

These findings were in a harmony with Riaz, et al., (2021) who stated that more than half of nurses had moderate level of outcomes of their work. On the same line, Ayalew, et al., (2019) who demonstrated that more than half of the sample reported that nurses had moderate level of outcomes. Also, educational level and years of experiences are one of the most important factors that control most aspects at their work conditions.

In relation to the studied nurses’ total work outcomes dimensions, the present study reveals that, the highest mean score and standard deviation of total nurses’ outcome dimensions was for patient safety while the lowest mean score and standard deviation was for turnover. From the researchers' point of view, this result may be due to healthy nurse work environments and hospital administration focus on implementing patient safety measures for providing the best patient care.

These results were in the same direction with a study performed by Bernard et al., (2021) who concluded that near to three quarters of nurses had high level of job satisfaction, patient and nurse safety and low level of turnover. Additionally, Agus (2020) indicated that most of nurses had moderate level of outcome regarding items of job satisfaction, commitment and patient safety with good work environment.

Concerning correlation between total levels of studied nurses’ internal work coalitions and their outcomes, the current study showed that there was highly statistically significant positive correlation between total levels of studied nurses' internal work coalitions and their outcomes. This result could be due to coalition can promote a positive organizational climate, in which nurses' experience satisfying relationships and job satisfaction and finally positive work outcome.
This result was supported by Rajamohan et al., (2019) who stated that a positive correlation was found between cooperation between nurses and nurses’ outcomes related to all aspects of their work. On the same line, Scanlan & Still (2019) stated that there was a positive correlation between the nurses’ outcome items and their work collaboration.

Conclusion:

More than half of studied nurses reported moderate levels of internal work coalitions and work outcome. In addition, there was highly statistically significant positive correlation between total levels of studied nurses' internal work coalitions and their work outcomes.

Recommendations:

- Paying more attention to the vital role of the internal coalition as a valuable strategy for upgrading nurses' cooperative abilities and improving their work outcomes.
- Creating an empowering and open work environment that fosters nurses’ job satisfaction and improve their performance level.
- Putting an effective system of financial and incorporeal incentives for the staff nurses.
- Conducting regular meetings with staff nurses to allow them to express their feelings and opinions and identify work problems to enhance their job satisfaction.
- Conducting an educational program about internal work coalitions for nurses to improve their performance.

For further research

- Conducting a study to determine the effect of internal work coalitions among health care team on organizational excellence.
- Conducting a study to develop strategies for enhancing internal coalitions among staff nurses.

References:


Al-Rashidi, M. (2012): The role of internal coalition in minimizing organizational conflict, Master thesis, Middle East University, 15-20


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العلاقة بين ائتلافات العمل الداخلية ونتائج عمل الممرضين

إيمان سليم محمد - رحاب محمد رشاد - أيه غنيمي حسانين

تكون ائتلافات العمل الداخلية مناسبة عندما تجتمع مجموعة من الممرضين معا بغرض اكتساب المزيد من القوة مما يؤثر بشكل إيجابي على نتائج عملهم. لذا هدفت الدراسة إلى تقييم العلاقة بين ائتلافات العمل الداخلية ونتائج عمل الممرضين. تم استخدام التصميم الوصفي الارتباطي لإجراء هذه الدراسة. وقد أجريت هذه الدراسة في جميع الوحدات الداخلية لأقسام الباطنة والجراحة بمستشفى بنها الجامعي على عينة عشوائية مكونة من 317 من أصل 1539 ممرضا وممرضة يعملون في المكان السابق. وأظهرت نتائج الدراسة أن أكثر من نصف الممرضات الذين شملتهم الدراسة (50.8%, 53.9%) أبلغوا عن مستوى معتدل من ائتلافات العمل الداخلية ونتائج عمل الممرضين. كما كان هناك ارتباط إيجابي ذو دلالة إحصائية عالية بين المستويات الإجمالية للائتلافات الداخلية للممرضين ونتائج عملهم. وأوصت الدراسة بإيلاء المزيد من الاهتمام للدور الحيوي للإتفاعات الداخلية باعتبارها استراتيجية قيمة لرفع مستوى القدرات التعاونية للممرضين وتحسين نتائج عملهم.

وكذلك خلق بيئة عمل تمكينة ومنفتحة تعزز الرضا الوظيفي للممرضين وتحسين مستوى أدائهم.