

## Maintaining altruism among nursing professionals

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### ABSTRACT

The demanding hospital work environment has increased the need for organizational citizenship behaviour (OCB). It's essential to maintain the altruistic behaviour of nursing professionals towards each other to enhance the patient experience and provide quality healthcare service to patients efficiently. This quantitative study explored the relationships between OCB constructs based on social identity theory (SIT) and system justification theory (SJT). This study is empirical and cross-sectional in nature; structural equation modeling is performed on two hundred twenty-two nursing professional responses, using IBM AMOS V.22 to test the hypothesized model. Conscientiousness has a mediating effect on the relationship between civic virtue and altruism (Indirect effect=0.19, Boot SE=.057, lower-level confidence interval (LLCI)=.0940, upper-level confidence interval (ULCI)=.3144). Moreover, sportsmanship had a mediating effect on the relationship between civic virtue and altruism with an Indirect effect=-0.06, Boot SE=.023, LLCI=-0.1159, ULCI=-0.0222). The results supported the hypothesis that civic virtue and altruism are directly related and found that conscientiousness and sportsmanship mediate the relationship between civic virtue and altruism. The findings suggest that employees with higher sportsmanship tend to reduce their altruistic behavior in the long run.

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## 1. INTRODUCTION

In the current competitive healthcare market, nursing behavior can be crucial in differentiating the institution's healthcare services from its competitors. Operational Excellence in nursing care delivery and overall patient care would be hard to bring without a cohesive nursing workforce thriving on extending help and cooperation to their teammates in needful times. Altruistic behavior, a key construct of organizational citizenship behavior (OCB), measures the readiness to help people around you; the other constructs of OCB include sportsmanship, civic virtue, conscientiousness, and courtesy.

OCB refers to the extra-role behavior exhibited in the work setting, which is different from the usual duties, non-formally prescribed, and significant for the organization. The hospital industry is human-resources intensive because of its service nature; therefore, OCB has become highly relevant in healthcare settings. Additionally, healthcare organizations are considered unsafe places and prone to medical errors. Every year 2,51,454 deaths occur due to medical errors, making it the third leading cause of death in the USA [1]. Literature suggests that primary reasons for medical errors include miscommunication, an act of commission, and the act of omission [2]. Primarily, medical errors result from cognitive mistakes in decision-making, skill-based errors, or performance and knowledge deficits [3].

Moreover, the altruistic behavior of nursing employees is found to improve the safety culture of the healthcare organization. However, it is believed that altruism for nursing professionals means supporting patients and nursing concerns driven by internal values rather than the expectation of social rewards or avoiding punishment; moreover, individuals scoring high on altruism as motivation are likely to choose nursing professions [4]. Empathy is considered the precursor of altruistic behavior. However, things have changed with the corporatization of healthcare services. Nurses' understanding of altruism has become ambiguous and ambivalent; moreover, nursing professionals have reported experiencing criticism from their colleagues for acting altruistically [5]; this raises the question, when all the employees are working for the same organization, what are the related organizational factors influencing altruism in the workplace? Therefore, this study is conceptualized with a focus on the organizational citizenship behavior of nurses in the studied hospital.

The OCB can be understood as behaviors outside an individual's job profile and are carried out to improve the organization's task performance or effective functioning. OCB is a widely researched topic, but earlier work primarily focused on OCB's antecedents. The OCB antecedents include variables such as job satisfaction, leader supportiveness, organizational commitment, perceived fairness, and personality [6]–[9]. Maintaining altruistic behaviour among nursing professionals is crucial for organization's survival and growth.

To the best of our knowledge, no prior research has been conducted to assess the interlinkages of OCB constructs. The knowledge about the inter-relationship of altruism with other OCB constructs will help healthcare organizations take suitable measures to enhance it, and it is important to investigate the factors responsible for maintaining the altruistic behavior of nursing professionals. Therefore, this study attempts to explore the relationship between the conceptual dimensions of OCB, i.e., "altruism" (helping others) with other dimensions such as "sportsmanship" (positive attitude, avoiding complaining), "conscientiousness" (exemplary attendance, and punctuality), and "civic virtue" (active participation in the organization).

The later sections of the article are divided into subsections; section two describes the literature review and the description of the OCB conceptual dimensions; section three contains the detail of the proposed model and the hypothesis development and section four highlights the methods adopted; section five presents the results attained and section six and seven present the discussion and the conclusion consecutively.

This study makes a novel contribution to the body of knowledge by describing the phenomenon of "altruistic behavior depletion," which occurs due to the unwillingness of employees to provide "free rides" to co-workers and the "sucker effect." The nursing supervisors need to note that due to the perceived inequity, nurses working under challenging conditions tend to compare themselves with a "referent other" doing similar work; with the help of a mental ratio of outcomes and inputs. Hence, as an immediate measure, healthcare managers should strive to make nurses' work environment equitable and fair. Additionally, nursing supervisors should train the nurses to build a "culture of camaraderie" and enhance communication channels between management and employees to enable them to share their concerns and stress-inducing factors.

OCB roles can neither be reinforced based on role obligations nor be included in the contractual guarantee of compensation. The OCB examples include helping co-workers, voluntariness for work, suggesting innovative suggestions for improving the department and the organization at large, not exploiting the workers' rights, not taking unnecessary breaks, and attending elective meetings. Variables such as "job satisfaction," "pay satisfaction," "trust in management and peers," and "organizational commitments" are the antecedents of OCB. Similarly, Organizational commitment, psychological empowerment, and organizational identification mediate for OCB. Lastly, variables such as intrinsic motivation, justice, norms of reciprocity, and workload act as moderators [9].

Altruism is the extra role dimension of OCB. Altruism can be explained as the voluntariness to help fellow colleagues and co-workers, resulting in good professional relationships [10]. It is also considered the readiness to extend help to people [11]. An example of altruism is the initiative of the experienced employee to come forward and show the newly hired the workplace and brief him about the requirements of the job; this action will help the supervisor to focus on the more important job and will also improve the organization efficiency and productivity [12].

Researchers argue that altruism is predicted by variables such as personality, early learning experiences, and social considerations [13]. It is also argued that prosocial behaviour such as altruism, is positively correlated with extraversion and is negatively correlated with neuroticism [14]. Individuals scoring high on the extroversion dimension have more intense positive mood reactions after engaging in altruistic behaviour. Altruism promotes employee efficiency and enhances teamwork [15].

Courtesy is best described as being conscious of how one's behaviour affects other person's jobs [11]. It also includes discretionary behaviors preventing work-related conflicts with others [16]. Courtesy includes behaviors such as "advance notice for non-routine demands," enabling co-workers to efficiently plan and schedule their efforts, resulting in reduced chances of wastage of efforts and negative experiences [7]. It

also includes informing others about decisions and actions which may affect them [17]. Earlier work suggests no significant linkage between moods and courtesy behaviour [18].

Sportsmanship is the “willingness to tolerate inevitable inconveniences and impositions of work without complaining or indicating grievances” [19]. Sportsmanship behavior is also believed to relieve the manager of dealing with petty work-related complaints. It endures inevitable complications and overworking without complaining about it [19]. One of the researchers has also described it as “always finding right with what the organization is doing” [11].

Lack of sportsmanship harms group cohesiveness and negatively affects the work atmosphere [20]. Employees who exhibit sportsmanship demonstrate a willingness to adopt newer challenges and prepare the organization for the future. They also act as role models and improve the co-worker's morale by setting an example [20]. Sportsmanship is also described as the willingness to sacrifice personal interest for group interest.

Conscientiousness refers to “obeying work rules, job performance, and attendance” [21]. Employees demonstrating conscientious behavior are informed about the latest products and services offered [22]. It is also explained as one's willingness to conform to the organization's roles to maintain the social order [7]. It can be summarized as “Believing in giving an honest day's work for an honest day's pay” [11]. Employees exhibiting this behaviour are likely to maintain predictable and consistent work schedules.

Civic virtue Includes sharing valuable ideas and suggestions for improving the effectiveness of the department of the organization. Behaviors such as attending optional or elective meetings which are not compulsory but are helpful in the interest of the organization [11]. It is also called active participation in the organization's affairs; by participating in the larger issues involving the organization [19]. Employees exhibiting civic virtue participate in the organization's governance and engage in policy debates, showcasing constructive involvement in the organization's political process [19], [21].

Social identity theory (SIT) postulates that a person's self-concept comprises personal identity (individual characteristics, past experiences), and social identity (group characteristics and group classification [23]. Both personal identity and social identity are important for an individual as they improve the self-esteem and self-worth of an individual.

SIT also implies that individuals wish to view themselves positively and extend this motivation to include their group membership or identities by categorizing themselves and others in various social categories, including organizational membership [24]. “Psychological Group” is defined as “a collection of people who share the same social identification or define themselves in terms of the same social category membership.” Such individuals are not required to interact with each other and do not strive for liking or acceptance from other group members. The conceptual component “Civic Virtue” can be related to the social identity theory, where people take pride in their association with the organization and take active measures to improve the organization's effectiveness by participating in the governance of the organization.

Therefore, the hypothesis proposed is: i) H 1: There is a positive association between civic virtue and conscientiousness, ii) H 2: There is a positive association between civic virtue and sportsmanship, iii) H 3: There is a positive association between civic virtue and altruism.

The system justification theory (SJT) postulates that people are motivated to defend, justify, and legitimize the existing system or the social structure so as to prevent the anxiety (palliative function) arising from recognizing its flaws or inherent problems [25]. This preference for the status quo is driven by loss aversion, where the status-quo acts as the reference point, and any deviation from it is perceived as a loss. System justification can be understood as the psychological process wherein social arrangements are legitimized even at the expense of personal or group interests [26], [27] have argued that dimensions such as sportsmanship and conscientiousness originate from the preference for the system's status quo or SJT.

It is argued that sportsmanship is not always driven by the willingness of the employees but due to the reluctance to acknowledge the negative aspects of the system resulting in downplaying the significance of systems flaws to avoid the anxiety and discomfort arising from the acknowledgment of organizational problems [27]. Similarly, conscientiousness, which refers to compliance with corporate rules, can be explained by SJT. Employee's adherence to the organizational rules and code of conduct is vital; nevertheless, mindless obedience can result in ineffective or unethical outcomes. Such unethical behavior is ignored in the organization when employees believe start rationalizing it [27]. The hypothesis based on the conceptualized model are mentioned:

H 4: The association between civic virtue and altruism is mediated by conscientiousness.

H 5: The association between civic virtue and altruism is mediated by Sportsmanship

H 6: There is a positive association between conscientiousness and altruism.

H 7: There is a positive association between sportsmanship and altruism

Hence based on the above-mentioned hypothesis, a conceptualized model is developed; see Figure 1.

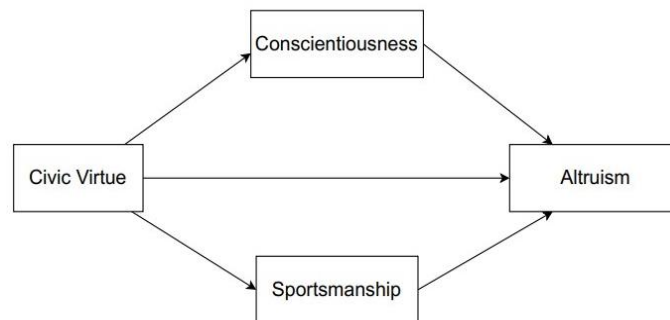


Figure 1. Conceptualized model

## 2. METHOD

The nature of the study is empirical and cross-sectional in nature. The study was carried out in tertiary care, 348-bed hospital in Mohali City, India. The duration of the study was from July 2022 to September 2022. The self-reported questionnaire consisted of five dimensions of OCB was used for the data collection [21], [28], with civic virtue (4 items) “I attend functions that are not required, but help the organization image,” conscientiousness (3 items) “I believe in giving an honest day's work for an honest day's pay,” courtesy (3 items) “I try to avoid creating problems for co-workers,” altruism (4 items) “I help orient new people even though it is not required” and sportsmanship (5 items) “I always focus on what's wrong, rather than the positive side”; hence a total of 19 items were there in the questionnaire. All the questions were based on 5 points Likert scale, ranging from (1) “Strongly Disagree” to (5) “Strongly Agree.” This study complied with the ethical principles and related considerations.

The informed consent was taken from the respondents, assuring them about the privacy and confidentiality of the data. The sampling frame was the nurses working in the hospital. All the hospital nursing staff were approached for their responses, including those working evening and night shifts. All 260 nurses in the hospital agreed to participate in the survey, out of which 38 responses were discarded due to incomplete responses. A total of 222 complete responses were considered for the final analysis. According to Hair *et al.* 2017, It is recommended to make a sample size provision of 10 respondents per item [29]; moreover, sample size recommendations for structural equation modelling (SEM) range from 40-240 samples [30] thus a sample size of 222 is adequate for 14 items and 4 constructs. The data analysis was performed on IBM AMOS V.22. The data were assessed for common method bias, reliability, and validity analysis in the first phase. Furthermore, Hayes Process Macro 3.4 was used for mediation analysis.

## 3. RESULTS

The sample consisted of 4.9% males and 95.9% females. 75.2% of the respondents were in the age group 20-29 years. 45% of the nurses were diploma holders, followed by 52.7 bachelors and 2.3% masters. Around 70.3% of the respondents were married, and 29.7% of the respondents were unmarried. The 74.3% of nurses had work experience in the 1-5 years range, followed by 13.1% 6-10 years and 3.6% 11 years and above. Lastly, around 96.9% of the nurses were staff nurses, followed by 2.3% of intern nurses and 1.8% of nurses holding managerial designations. The descriptive analysis of the five constructs revealed that the hospital nurses scored highest on conscientiousness ( $M=4.03$ ), followed by courtesy ( $M=3.85$ ), Altruism ( $M=3.74$ ), civic virtue ( $M=3.31$ ), and sportsmanship ( $M=2.5$ ), with the overall OCB mean score of 3.49 as presented in Table 1.

Table 1. Descriptive analysis of the constructs

Construct	Maximum	Mean and Std. deviation	Rank
Civic virtue	4.38	3.31 (0.57)	4
Courtesy	4.85	3.85 (0.67)	2
Conscientiousness	4.98	4.03 (0.66)	1
Altruism	4.61	3.74 (0.58)	3
Sportsmanship	4.69	2.51 (0.84)	5
Ocb	4.42	3.49 (0.45)	

The SEM assumptions were checked and found acceptable for the analysis. The skewness and kurtosis values were less than 2 and 3, establishing that the data were normally distributed [31]. The Common method bias (CMB) threatens the validity of the conclusions made on statistical results [32]. Harman's single factor test was performed. The first factor explained the 24.09 % variance, lower than the threshold of 50 %, thus ruling out the presence of CMB [33]. The study did not encounter multicollinearity issues as the correlation between any two variables is higher than 0.80 [34]. The highest correlation between the two variables was 0.68 as shown in Table 2. The Cronbach alpha of the subscale was found to be (0.83) for conscientiousness (0.87) for sportsmanship, (0.83) courtesy, (0.87) Altruism, and (0.81) civic virtue. All the values were higher than the cut-off value of 0.7 as presented in Table 3.

Table 2. Multicollinearity analysis

	Correlations			
	Civic Virtue	Conscientiousness	Altruism	Sportsmanship
Civic virtue	1	.490**	.676**	.241**
Conscientiousness	.490**	1	.682**	0
Altruism	.676**	.682**	1	-.165*
Sportsmanship	.241**	0	-.165*	1

\*\*Correlation is significant at the 0.01 level (2-tailed)

\*Correlation is significant at the 0.05 level (2-tailed)

Table 3. Constructs factor loadings and Cronbach alpha

Construct	Item	Factor loadings	Cronbach Alpha
Sportsmanship	SPM5	.850	0.83
	SPM4	.817	
	SPM2	.810	
	SPM1	.808	
	SPM3	.749	
Altruism	ALT3	.871	0.81
	ALT4	.822	
	ALT1	.783	
	ALT2	.717	
Conscientiousness	CONC1	.855	0.87
	CONC2	.811	
	CONC3	.803	
Civic virtue	CV2	.842	0.81
	CV1	.829	

The composite reliability of the constructs ranged from 0.76-0.87, which is higher than the stipulated value of 0.70 [35], thus ensuring the internal consistency of the constructs. Similarly, the Average Variance Extracted (AVE) ranged from 0.56-0.63 for all the constructs higher than the stipulated value of 0.50 [34]. Furthermore, the discriminant validity is ensured by comprising the squared correlation of AVE with the individual constructs. As shown in Table 4, values of AVE range from 0.56 to 0.63, whereas the diagonal values ranged from 0.74 to 0.79, indicating that the diagonal variables are greater than other AVE values, thus ensuring the adequacy of discriminant validity for all constructs [36] as shown in Table 4.

Table 4. Reliability and validity analysis

	CR	AVE	MSV	MaxR(H)	SPM	ALT	CONC	CV
SPM	0.864	0.561	0.047	0.879	0.749*			0.217
ALT	0.875	0.637	0.365	0.878	-0.151†	0.798*		0.598
CONC	0.832	0.625	0.365	0.843	-0.048	0.604	0.790*	0.435
CV	0.766	0.621	0.358	0.768				0.788*

SPM=Sportsmanship, ALT=Altruism, CONC=Conscientiousness, CV=Civic Virtue, CR=Composite Reliability, AVE=Average Variance Extracted, MSV=Maximum Shared Variance, MaxR(H)=Maximum Reliability, (\*) Square Root of AVE

The results of the structural model provided a good fit for the data ( $\chi^2/df=2.02$ , GFI=0.92, NFI=0.91, CFI=0.95, TLI 0.93, root mean square error of approximation (RMSEA) 0.068, standardized root mean square residual (SRMR)=0.64). The various fit indices used for model testing, such as good of fit index (GFI), normed fit index (NFI), comparative fit index (CFI), and tucker-lewis index (TLI), exceeded the recommended threshold of 0.90, and the RMSEA and SRMR values were below the prescribed value of 0.08 [37], thus ensuring data suitability and models fitness as shown in Table 5.

Table 5. Model fit indices

Fit indices	Model	Cut-off values
$\chi^2/df$	2.02	3
GFI	.920	0.90
NFI	.912	0.90
CFI	.953	0.90
TLI	.939	0.90
RMSEA	.068	0.08
SRMR	.064	0.08

The direct effect of civic virtue on altruism was found to be significant (effect=0.55,  $t=11.79$ ,  $p<0.01$ ). The association between civic virtue and conscientiousness was found to be significant (effect=0.57,  $t=8.94$ ,  $p<0.01$ ). The association between civic virtue and sportsmanship was found to be significant (effect=0.35,  $t=3.73$ ,  $p<0.01$ ). Similarly, the association between conscientiousness and altruism was found to be significant (effect=0.33,  $t=8.12$ ,  $p<0.01$ ). The association between sportsmanship and altruism was found to be significant (effect=-0.19,  $t=-6.9$ ,  $p<0.01$ ). Thus the hypothesis H1, H2, H3, H5 and H7 were accepted as shown in Table 6.

Table 6. Direct and indirect effects and hypothesis testing

Parameters	Coefficient	t value	SE	Lower	Upper	p-value	Hypothesis
Direct effects							
CONC <- CV	.57	8.94	.064	.4481	.7015	.00	Supported
SPM <- CV	.35	3.73	.095	.1686	.5450	.00	Supported
ALT <- CONC	.33	8.12	.041	.2541	.4168	.00	Supported
ALT <- SPM	-.19	-6.9	.027	-.2465	-.1370	.00	Supported
ALT <- CV	.55	11.7909	.0473	.4646	.6511	.00	Supported
Indirect Effects							
ALT<-CONC<-CV	.19	.0940	.3144	.057			Supported
ALT<-SPM <-CV	-.06	-.1159	-.0222	.023			Supported
Direct effect (c)	.557						
Total indirect effect	.124						
Total effect (c')	0.681						

SPM=Sportsmanship, ALT=Altruism, CONC=Conscientiousness, CV=Civic virtue

The mediating effect on conscientiousness on the relationship between civic virtue and altruism was found to be significant with (Indirect effect=0.19, Boot SE=.057, LLCI=.0940, ULCI=.3144). Similarly, the mediation effect on sportsmanship on the relationship between civic virtue and altruism was found to be significant with (Indirect effect=-0.06, Boot SE=.023, LLCI=-.1159, ULCI=-.0222). Thus the hypotheses H4 and H5 were accepted. Figure 2, depicts the hypothesized model as shown in Figure 2.

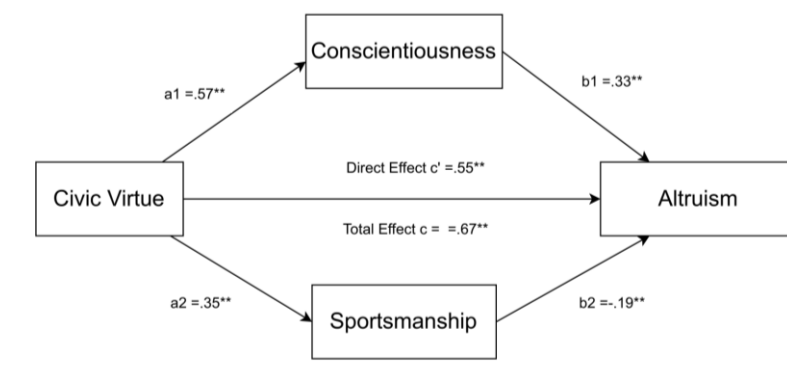


Figure 2. Path model

#### 4. DISCUSSION

The analysis of the individual constructs of the OCB revealed that the nurse had scored maximum on conscientiousness, followed by courtesy, altruism, civic virtue, and sportsmanship. This finding is comparable with another study carried out in Turkey, where the nurses gave maximum scores for conscientiousness. However, there is a slight difference as the nurses scored lowest in sportsmanship in the

present study, whereas, in the study carried out in Turkey, it was for courtesy [38]. The plausible explanation for this is that the present study was carried out during the second COVID-19 wave in India, and therefore the inflow of patients in that period was high. At the same time, many nursing staff had COVID-19 patients in their families and then also, due to organizational commitments and requirements, could devote the required time to the care of family members. This argument is substantiated by the fact that recurring daily negative events diminish the positive affect and lead to the depletion of sportsmanship behavior [39].

The overall OCB score for the nurses was found to be  $3.49 \pm 0.49$ , which is on the lower side and denotes a weak level. The differences in the OCB scores noted in the study with the previous studies [39] can be explained by the differences in personality traits, organizational environment, and nationality [10]. It is also to be highlighted that researchers have noted that employees exhibit organizational citizenship behavior as an impression management tactic and have received better grades in OCB from their supervisors and were better liked by their supervisors [39]; additionally, in times of COVID-19 when the majority of healthcare workers were overburdened with the work, it was difficult and non-rewarding to create fake impressions, as the supervisor will also be occupied and overlooks such acts.

The study attempted to understand the OCB variables influencing altruistic behavior amongst tertiary care hospital nurses. A hypothesized model was created based on the SIT and SJT. It was hypothesized that civic virtue (sense of belongingness) to the organization would affect altruism (helping peers and co-workers); however, this relationship was hypothesized to be mediated by sportsmanship (willingness to tolerate inevitable inconveniences and impositions of work) and conscientiousness (willingness to conform with the organization's roles to maintain the social order).

Sportsmanship and Conscientiousness variables originate from the preference for the status quo [27]. In this study, it was found that civic virtue is associated with altruism. The employees demonstrating civic virtue have a strong sense of belonging to the organization, as supported by social identity theory, resulting in a strong feeling of group membership amongst employees of the same organization. This finding is supported by shared group membership promoting altruism for the in-group members [40]. The social exchange theory propagates exchange as a bidirectional transaction, where employees respond to increase their chances of receiving a benefit [41].

The logical explanation of civic virtue's effect on altruism is the social exchange phenomenon, where employees indulge in positive political behavior and choose to exercise altruistic behavior as they expect a benefit or reciprocation in return. This is consistent with the earlier finding where it was found that there is a positive association between social exchange and altruism [41]. Similarly, it was found that the relationship between civic virtue and conscientiousness is positively associated. The logical explanation is that an individual who wishes to demonstrate his contribution to the organization's growth with his ideas, opinions, and participation in organizational affairs needs to be well-organized in his work and be well-informed about the products and services offered by the organization [42].

The current study also confirms the positive association between civic virtue and sportsmanship, as the employees who are committed and engaged to the organization are ready to absorb and tolerate the inevitable inconveniences and impositions of work. This finding is consistent with the system justification theory imposition, wherein individuals accept suboptimal conditions and avoid acknowledging negative aspects of their work system [27]. Additionally, a negative association was found between sportsmanship and altruism, which is also the key finding of this study and confirms the arguments of Proudfoot&Kay that "Observed instances of sportsmanship may not always be a result of employees conscious decision to quietly endure less than optimal organizational functioning while privately acknowledging that these conditions are suboptimal."

Hence, when employees are aware of the sub-optimal optimal work settings in the organization and accept it as a part of work-life, consistent with system justification theory, they get less inclined to extend their help to other co-workers and colleagues; this "altruistic behaviour depletion" phenomenon originating from sportsmanship behavior is detrimental to the organization's interest in the long run. This finding is also consistent with the equity theory, where employees compare themselves with a "referent other" doing similar work; with the help of a mental ratio of outcomes and inputs. When inequity is experienced, the employees in that unbalanced state are motivated to regain their equity [43]. Thus, employees exhibiting sportsmanship accept the impositions of work as a part of work and expect every "referent other" to tolerate it; therefore, they reduce their altruistic behavior.

In this study, it was found that sportsmanship mediates the relationship between civic virtue and altruism. In the absence of sportsmanship, the direction of association between civic virtue and altruism is positive; however, when sportsmanship is introduced as a mediator, the relationship becomes negative with an indirect effect of -0.06. This again supports our argument that sportsmanship behavior is ideal in the short term [39], and in the long term, it has a negative effect on altruistic behavior. Therefore, employees shouldn't be left alone to tackle the negative effects of job demands, but the supervisors should intervene quickly and make efforts to reduce the job demands as it directly affects the employees' well-being [44].

Early researchers have also noted the relationship between “social loafing” or “free-riding behavior” leading to the “sucker effect” [45]. Social loafing means the tendency of the team members to deliberately withhold their efforts while working in a group rather than individually [46]. The two primary causes of social loafing are “free-riding” and the “sucker effect”. Free-riding behavior represents the personal choice of limiting their efforts in a group assignment as no one can measure their individual contributions; similarly, the sucker effect represents the fearful decision of limiting efforts by a team member as he/she doesn't want to be used by the other team members. The overall effect of the sucker effect is a reduction in group productivity and loss of morale. Additionally, negative social cues have been found to decrease group performance [47].

Therefore, the logical conclusion states that even though nurses at the individual level are willing to accommodate and tolerate the job demands, they reduce their altruistic behavior due to the fear of providing free-ride to someone and the composite sucker effect. Altruistic behavior also denotes team bonding and team cohesion; in times of demanding situations such as COVID-19, when this study was carried out, it was found that the employees were not willing to help their team members, which, if done, would have provided relief to many team members and have also resulted into increase in team productivity. This argument is supported by an earlier work that states that an increase in the altruistic behaviour of employees results in an increase in co-worker's social loafing [45]. The same study also postulates that an increase in co-worker's social loafing results in an increase in the social loafing of the employee exhibiting altruistic behaviour.

Therefore, employees who exhibit sportsmanship behavior by tolerating the nuances of work also note the social loafing behavior of their team members. On the contrary, conscientiousness was found to mediate the relationship between civic virtue and altruism with an indirect positive effect of 0.19, thus confirming the presence of partial mediation [48]. Furnham *et al.* noted that employees exhibiting prudence and inquisitive behavior (conscientiousness) about people are psychologically mature. Such employees also firmly believe in “what goes around comes around” and tend to see the “bigger picture” [49]. They exhibit altruistic behavior as they see the potential implications of such acts, which improves their acceptance amongst the team members, resulting in positive impressions and task achievements. Furthermore, conscientiousness is found to be negatively associated with social loafing [50]. Thus, employees who exhibit conscientious behavior are less susceptible to the “sucker effect” and more prone to showcase altruistic behavior.

The hospital administrators and healthcare managers should focus on the nurses' work environment and job demands in healthcare institutions. Hospital administrators can expect the nurses to tolerate the work impositions in the short term; however, immediate measures should be taken on priority to change or reduce the ill effects of additional job demands. If not addressed on time, work-related harmful impositions will result in the depletion of the altruistic behavior of the employees.

Additionally, nursing supervisors and hospital administrators should take adequate measures to reduce social loafing and existing nurses' “free-riding” behavior. The measures which can be adopted to reduce social loafing include “identifiability of individual contribution,” “anticipated external evaluation,” and instilling the belief of “indispensability of individuals performance to the group [47]. Furthermore, designing “difficult challenging and intrinsically motivating tasks.” Nursing supervisors should take training sessions for the nurses to create a positive set of attitude towards work and colleagues, thus resulting in the creation of the “culture of camaraderie” [50].

Nursing professionals should intrinsically feel self-responsibility towards their work and co-workers, enhancing perceived accountability and a sense of responsibility. It is advisable that the senior staff in the department should be sensitized to exhibit appropriate behavior through effective communication with new joiners and leading up with example by coming ahead to take up additional responsibilities rather than assigning their work to the new joiners.

Nursing supervisors and superintendents should regularly take stock of the motives, such as prosocial values and organizational concerns, as these are found to affect social loafing and OCB [49] significantly [49]. Employees scoring low on prosocial values and administrative considerations are likelier to exhibit social loafing. Employees who exhibit altruistic behavior should be rewarded quarterly with monetary and non-monetary means. Similarly, communication channels between the management and employees should be enhanced, and employees should be encouraged to share suggestions to ease work-related stress and unfavorable and unwanted job demands.

There are a few limitations in this work, firstly, it is carried out during COVID-19, which is an extraordinary situation, and hence there is a possibility that there could be a difference in the demonstrated behavior in the usual times. Moreover, this study is carried out in a single hospital setting; hence the generalizability of the study findings is limited. Therefore, in the future, another study should be carried out with a representative sample of nursing professionals from different types of hospitals, such as public and private, accredited or non-accredited, single-specialty, and multispecialty hospitals in the post-COVID-19 period.



In the future, a study can be done with the suggested interventions such as “identifiability of individual contribution”, instilling the belief of “indispensability of individuals performance to the group”, “anticipated external evaluation”, creating a culture of “camaraderie”, regular assessment of “prosocial values” and “organizational concerns.” These interventions are expected to keep social loafing and the sucker effect under check; afterward, the relationship between sportsmanship and altruism should be explored.

## 5. CONCLUSION

This study fills the literature gap of interlinkages between the OCB constructs. This study highlights the mediating effect of conscientiousness and sportsmanship on the relationship between civic virtue and altruistic behavior. Employees exhibiting conscientiousness-related behavior are more likely to exhibit team spirit by showcasing more altruistic behavior, whereas employees with low conscientiousness scores are more likely to indulge in social loafing. Similarly, virtues such as sportsmanship can be expected from the employees in the short run but not in the long run, as it results in “altruistic behavior depletion,” which occurs due to the unwillingness of employees to provide “free rides” to co-workers and the “sucker effect”.

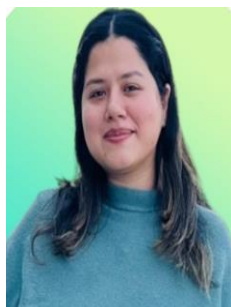
Additionally, when the demanding job conditions continue in the long run, nursing employees accept it's a part of their work-life, and due to the system justification effect, they get less inclined to assist co-workers. Furthermore, due to the perceived inequity, nurses working in such difficult conditions tend to compare themselves with a “referent other” doing similar work; with the help of a mental ratio of outcomes and inputs. When inequity is experienced, the employees in that unbalanced state get motivated to regain their equity. Therefore, they expect every other co-worker to experience the same problems and thus withhold their altruistic behavior.




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