



Work Engagement and Organizational Citizenship Behavior of Nurses  
in the Referral Hospital, the Republic of Kiribati\*  
ความผูกพันในงานและพฤติกรรมกรเป็นสมาชิกที่ดีขององค์กรของพยาบาล  
ในโรงพยาบาลรับ-ส่งต่อ สาธารณรัฐคิริบาส\*

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**Abstract**

Work engagement of employees is an important factor related to organizational citizenship behavior. This descriptive correlational study aimed to describe the level of work engagement and organizational citizenship behavior and to examine the relationship between work engagement and organizational citizenship behavior among nurses in a referral hospital in Kiribati. A stratified random sampling technique was used to select 89 nurses from every ward of Tungaru Central Hospital (TCH). The research instruments were the demographic data form, the 17-item Utrecht Work Engagement Scale (UWES), and the Organizational Citizenship Behaviour Scale (OCBS). The data were analyzed by descriptive statistics and Pearson's correlation coefficient.

The findings were as follows:

1. The overall work engagement as perceived by nurses was at a high level ( $M = 5.16, SD = .62$ ). The three dimensions of work engagement including vigor, dedication, and absorption were at high levels ( $M = 4.94, SD = .77$ ;  $M = 5.60, SD = .54$ ; and  $M = 5.02, SD = .78$ , respectively).
2. The overall organizational citizenship behavior as perceived by nurses was at a high level ( $M = 5.45, SD = .40$ ). The five dimensions of organizational citizenship behavior including altruism, civic virtue, conscientiousness, courtesy, and sportsmanship were all at high levels, ( $M = 5.59, SD = .46$ ;  $M = 5.24, SD = .56$ ;  $M = 5.41, SD = .58$ ;  $M = 5.58, SD = .47$ ; and  $M = 5.41, SD = .88$ , respectively).
3. There was a positive statistically significant relationship between work engagement and organizational citizenship behavior in the referral hospital ( $r = .53, p < 0.01$ ).

This study's findings provide vital evidence for nurse administrators to maintain and support work engagement to improve citizenship behaviors among nurses in a referral hospital, the Republic of Kiribati.

**Keywords:** Nurses; Organizational citizenship behavior; Referral hospital; The Republic of Kiribati; Work engagement

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**บทคัดย่อ**

ความผูกพันในงานของพนักงาน เป็นปัจจัยสำคัญที่เกี่ยวข้องกับพฤติกรรมการเป็นสมาชิกที่ดีขององค์กร การศึกษาเชิงพรรณนาสหสัมพันธ์นี้มีวัตถุประสงค์เพื่ออธิบายระดับความผูกพันในงานและพฤติกรรมการเป็นสมาชิกที่ดีขององค์กร และเพื่อตรวจสอบความสัมพันธ์ระหว่างความผูกพันในงานกับพฤติกรรมการเป็นสมาชิกที่ดีขององค์กรของพยาบาลในโรงพยาบาลรับ-ส่งต่อผู้ป่วย สาธารณรัฐคิริบาส พยาบาลจำนวน 89 คน ถูกคัดเลือกจากทุกหอผู้ป่วยของโรงพยาบาลกลางรับ-ส่งต่อผู้ป่วยทั้งเกาะ โดยใช้เทคนิคการสุ่มตัวอย่างแบบแบ่งชั้นภูมิ เครื่องมือวิจัย ได้แก่ แบบบันทึกข้อมูลทั่วไป แบบวัดความผูกพันในงานยูแทรซ 17 รายการ และแบบวัดพฤติกรรม การเป็นสมาชิกที่ดีขององค์กร วิเคราะห์ข้อมูลโดยใช้สถิติเชิงพรรณนา และสถิติ Pearson's correlation coefficient

ผลการศึกษา มีดังนี้

1. ความผูกพันในงานโดยรวม ตามการรับรู้ของพยาบาลอยู่ในระดับมาก ( $M = 5.16, SD = .62$ ) ความผูกพันในงานทั้ง 3 ด้าน ได้แก่ ความกระตือรือร้น ความทุ่มเท และการซึ่มซบในงานอยู่ในระดับสูง ( $M = 4.94, SD = .77; M = 5.60, SD = .54; M = 5.02, SD = .78$  ตามลำดับ)

2. พฤติกรรมการเป็นสมาชิกที่ดีขององค์กรโดยรวม ตามการรับรู้ของพยาบาลอยู่ในระดับสูง ( $M = 5.45, SD = .40$ ) โดยพฤติกรรมการเป็นสมาชิกที่ดีขององค์กร ประกอบไปด้วย 5 ด้าน ได้แก่ การเห็นใจผู้อื่น การมีคุณธรรมของพลเมือง ความมีสติ ความสุภาพ และการมีน้ำใจนักกีฬาอยู่ในระดับสูง ( $M = 5.59, SD = .46; M = 5.24, SD = .56; M = 5.41, SD = .58; M = 5.58, SD = .47$  และ  $M = 5.41, SD = .88$  ตามลำดับ)

3. ความผูกพันในงานมีความสัมพันธ์ในทางบวกกับพฤติกรรมการเป็นสมาชิกที่ดีขององค์กรของพยาบาลในโรงพยาบาลรับ-ส่งต่ออย่างมีนัยสำคัญทางสถิติ ( $r = .53, p < .01$ )

ผลการวิจัยนี้ เป็นหลักฐานสำคัญสำหรับผู้บริหารพยาบาลในการวางแผนธำรงรักษาและสนับสนุนความผูกพันในงาน เพื่อปรับปรุงพฤติกรรมการเป็นสมาชิกที่ดีขององค์กรของพยาบาล ในโรงพยาบาลรับ-ส่งต่อ สาธารณรัฐคิริบาส

**คำสำคัญ:** พยาบาล พฤติกรรมการเป็นสมาชิกที่ดีขององค์กร โรงพยาบาลรับ-ส่งต่อ สาธารณรัฐคิริบาส ความผูกพันในงาน

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### Background and significance

The World Health Organization (WHO) has found that 27.9 million nurses were working worldwide and predicted a 5.9 million nurse shortage (WHO, 2020). Low and lower-middle-income nations accounted for 89% of these shortages, with significant regional differences (International Council of Nurses [ICN], 2021). In Kiribati, the nurse-to-patient ratio is 2.7 per 1000, which is below the WHO standard of 3:1000 (Drennan & Ross, 2019). This situation has been highlighted by experiences of nurse exhaustion and heavy workload which turn into nurse burnout (Khan et al., 2019). These issues lead to difficulty with the performing of voluntary tasks, also known as organizational citizenship behavior (OCB).

OCB means discretionary individual behavior not directly or explicitly recognized by a formal reward system, and in aggregate, promotes the effective functioning of an organization (Organ, 1988). Improvements in OCB can boost hospital efficacy as healthcare organizations and improve patient satisfaction by influencing staff attitudes and interactions, to promote delivery of high-quality services (Khajoei et al., 2024). In addition, OCB reduces the cost of errors; increases worker productivity, performance, and engagement; promotes collaboration across organizational boundaries; and generally creates a suitable work environment (Khajoei et al., 2024). Understanding nurses' OCB is crucial, both for organizations, and for enhancing patient outcomes.

Work engagement (WE) has been defined as a positive, fulfilling, work-related state of mind. It includes three dimensions: vigor, dedication, and absorption. Vigor refers to high energy and psychological resilience while working, a readiness to invest effort in one's work, and the intention to continue despite difficulties. Dedication is a feeling of significance, passion, inspiration, pride, and challenge to work. Absorption is characterized by being entirely concentrated on work and feeling that time passes quickly and no difficulties can detach oneself from work (Schaufeli et al., 2002). WE among nurses is crucial due to its benefits for nurses, patients, and the organization. Nurses who possess WE have belief and trust in their abilities to accomplish their goals and adjust to others' expectations (Dagher et al., 2015). Additionally, engaged nurses who are happy, joyful, and enthusiastic can perform better at their jobs, have a greater capacity to create their careers, pursue other interests, and spread their engagement to others (Mirzaei, 2013; Ramazannia et al., 2022).

Previously, scholars have investigated OCB among different nursing populations in different settings using different tools (Jafarpanah & Rezaei, 2020; Özlük & Baykal, 2020; Yu et al., 2018). These studies have indicated different levels of WE, ranging from low to moderate to high, depending on the differences in culture, setting, or place of study. However, there are a lack of studies on OCB among nurses in Kiribati, especially at referral hospitals.

In Kiribati, nurses are 51.3% of the health workforce. However, this nursing workforce has experienced ongoing challenges of high turnover rates, nursing shortages, and nurses' resignations. The Kiribati healthcare system experienced a 25.2% nursing turnover rate, primarily due to overseas labor opportunities (Terubea, 2023). In addition, Kiribati nurses have encountered



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a lack or unavailability of resources and insufficient space to work at the workplace. Moreover, nurses working in rural areas have limited opportunities for training and education to continue their professional development (Terubea, 2023). This situation indicates that nurses may have a problem with engagement in their work. According to Christian et al. (2011), engaged nurses are more likely to complete tasks effectively because they pay attention to the task and dedicate themselves to their work, perform extra-role behaviors that immediately benefit other individuals at work, and follow all organizational ethics and standards resulting in practice as a good member of the organization. Although previous empirical evidence has found a low to high positive correlation between WE and OCB (Liu et al., 2023; Ng et al., 2019; Ojo et al., 2022), the instruments applied were different, and the degree of correlation was inconsistent.

In Kiribati, working in Tungaru Central Hospital (TCH) is increasingly complex and inherently stressful due to the increased number of referrals from the outer islands. As TCH is the biggest and only referral hospital in Kiribati, increased admissions rates, increased numbers of NCD cases, and long lengths of hospital stay are common problems (Kiribati Ministry of Health and Medical Services, 2015). The existence of a burden of disease along with the multiple required duties tends, resulting in overworked nurses who must work in a stressful environment (Kiribati Ministry of Health and Medical Services, 2022). They may be frequently unaware of organizational updates and changes. Furthermore, nurses work long shifts without enough breaks, which may impact their capacity to provide bedside nursing care (The Guardian, 2021).

These problems can be mitigated by nurses having a teamwork spirit and showing a willingness to give a helping hand to colleagues. Given these circumstances, it is necessary to describe WE and OCB among nurses and to examine their relationship among nurses in Kiribati. The results of this study will provide strong evidence to support the nursing profession in Kiribati.

### Objectives

This study aimed to describe the level of work engagement and organizational citizenship behavior and to examine the relationship between work engagement and organizational citizenship behavior among nurses at the referral hospital in the Republic of Kiribati.

### Conceptual framework

The concept of WE is based on Schaufeli et al. (2002) and refers to a positive, fulfilling, work-related state of mind characterized by vigor, dedication, and absorption. The concept of OCB was based on Organ (1988), which includes discretionary behavior not directly or explicitly recognized by a formal reward system and which in aggregate, promotes the effective functioning of an organization. OCB includes five dimensions: 1) altruism, 2) civic virtue, 3) conscientiousness, 4) sportsmanship, and 5) courtesy. According to Blau's (1964) social exchange theory, organizations that provide a meaningful and safe climate for employees are more likely to have engaged employees who demonstrate organizational citizenship behaviors. Additionally,



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according to a literature review and test of the relationship between work engagement and job performance conducted by Christian et al. (2011), engaged nurses are more likely to complete tasks effectively.

## Methodology

This study utilized a descriptive correlational research design.

### Population and sample

The target population was 162 nurses working in Tungaru Central Hospital (TCH), the main referral hospital in the Republic of Kiribati.

The sample size was determined using power analysis by setting an alpha of .05, power of 0.80, and effect size of 0.30 (Cohen, 1992). The final sample size was 101 after adding a possible 20% for sample loss. The inclusion criteria were nurses who had one year of experience at TCH while exclusion criteria included nurse administrators, nurses on vacation or leave, nurses attending long-term education courses, and nurses involved in reliability testing. Stratified random sampling was applied to select nurses. The required number of nurses from each unit of TCH was calculated by setting the hospital's unit as strata and selecting the final participants from the name list of each unit using the lottery method.

### Research instruments

The research instrument included three parts. Permission for use was obtained from each instrument developer. All parts of the instrument were in English.

1. A demographic questionnaire consisting of 9 items was developed by the researchers to obtain the participant's age, gender, marital status, education level, years of nursing experience, years of experience in the present unit, training in the past two years, employment status, and working unit name.

2. The 17-item Utrecht Work Engagement Scale (UWES) was created by Schaufeli et al. (2002) and included three dimensions: vigor (6 items), dedication (5 items), and absorption (6 items), which were rated on a 7-point Likert scale ranging from 0 (never) to 6 (always). The score interpretation is categorized into five levels, overall (very low ( $\leq 1.93$ ), low (1.94-3.06), moderate (3.07-4.66), high (4.67-5.53), and very high ( $\geq 5.54$ ), and for each dimension: vigor (very low  $\leq 2.17$ , low (2.18-3.20), moderate (3.21-4.80), high (4.81-5.60), very high  $\geq 5.61$ ); dedication (very low  $\leq 1.60$ , low (1.61-3.00), moderate (3.01-4.90), high (4.91-5.79), very high  $\geq 5.80$ ); and absorption (very low  $\leq 1.60$ , low (1.61-2.75), moderate (2.76-4.40), high (4.41-5.35), very high  $\geq 5.36$ ) (Schaufeli & Bakker, 2004).

3. The Organizational Citizenship Behavior Scale (OCBS) was developed by Podsakoff et al. (1990) and consists of 24 items with five dimensions: altruism (5 items), civic virtue (4 items), conscientiousness (5 items), courtesy (5 items), and sportsmanship (5 items). Each item is rated on a 7-point Likert scale ranging from 1 (strongly disagree) to 7 (strongly agree). The sportsmanship dimension contains reverse-coded items. Scores are classified as low (1.00-3.00), moderate (3.01-



5.00), and high (5.01-7.00) (Polit, 2010).

The construct validity of the 17-item UWES was tested using confirmatory factor analysis by the instrument developers and the three-factor model fit the data (Schaufeli et al., 2002). For the 24-item OCB scale, construct validity was established by confirmatory factor analysis, and the factor loadings of all items were greater than 0.5 (Podsakoff et al., 1990). Both instruments were applied without modifications, and the validity was not tested again for this study. The internal consistency Cronbach's alpha coefficients of the 17-item UWES, its dimensions of vigor, dedication, and absorption, and the OCB scale were 0.93, 0.88, 0.58, 0.83, and 0.80, respectively.

### **Ethical considerations**

This study received ethical approval from the Faculty of Nursing, Chiang Mai University (Approval No. 133/2023). The hospital administrator granted permission to collect the data. The participants agreed to be involved after they received the information on the study aims, procedures, questionnaires, confidentiality and anonymity, and their right to deny participation.

### **Data collection**

The researcher explained the research objectives and data collection method to two research coordinators who then distributed the questionnaires to participants once they had agreed to participate in the study and requested they return the questionnaires within two weeks. The return rate of the questionnaire was 99 (87.09%) out of 101, and 89 completed questionnaires were used for data analysis.

### **Data analysis**

The data on both variables were distributed normally and analyzed by descriptive statistics and Pearson's product-moment correlation test. The correlation coefficient ( $r < 0.3$ ) was regarded as a weak relationship,  $0.30 \leq r \leq 0.50$  as a moderate relationship, and  $r > 0.50$  as a strong relationship (Gray et al., 2017).

## **Results**

In this study, most nurses were female (84.27%), and 78.65% of participants were married. Around half of them (46.70%) were between 20-29 years of age, 46.07% had 2-10 years of experience in nursing, and 49.44% had 1-2 years of experience in the present unit. Nearly all of the nurses (92%) held a diploma degree in nursing while 60.67% had not received training in the past two years.

1. The overall perceived WE level of nurses at TCH was at a high level ( $M = 5.16$ ,  $SD = 6.2$ ). Nurses also perceived each dimension of WE at a high level: vigor ( $M = 5.60$ ,  $SD = .54$ ), dedication ( $M = 4.94$ ,  $SD = .77$ ), and absorption ( $M = 5.02$ ,  $SD = .77$ ) (Table 1).



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**Table 1** Mean, Standard Deviation, and Level of Work Engagement of Nurses (n = 89)

Work Engagement	M	SD	Level
<b>Overall</b>	<b>5.16</b>	<b>.62</b>	<b>High</b>
Vigor	4.94	.77	High
Dedication	5.60	.54	High
Absorption	5.02	.78	High

2. The perceived overall OCB of nurses at TCH was at a high level (M = 5.45, SD = .40). Regarding each dimension of OCB, nurses perceived these at a high level: altruism (M = 5.41, SD = .58), civic virtue (M = 5.24, SD = .56), conscientiousness (M = 5.41, SD = .88), courtesy (M = 5.58, SD = .47), and sportsmanship (M = 5.59, SD = .40) (Table 2).

**Table 2** Mean, Standard Deviation, and Level of Organizational Citizenship Behavior of Nurses (n = 89)

OCB	M	SD	Level
<b>Overall</b>	<b>5.45</b>	<b>.40</b>	<b>High</b>
Sportsmanship	5.41	.88	High
Courtesy	5.58	.47	High
Conscientiousness	5.41	.58	High
Civic Virtue	5.24	.56	High
Altruism	5.59	.46	High

3. There was a significantly strong and positive correlation between WE and OCB among nurses at TCH, the referral hospital of the Republic of Kiribati ( $r = 0.53, p < 0.01$ ). In addition, vigor ( $r = 0.46, p < 0.01$ ) and dedication ( $r = 0.39, p < 0.01$ ) were moderately and positively related to OCB while absorption was strongly and positively related to OCB ( $r = 0.54, p < 0.01$ ) (Table 3).

**Table 3** Pearson's Correlation Coefficient between Overall and Each Dimension of WE and OCB of Nurses (n = 89)

Work Engagement (WE)	Correlation Coefficient (r)	Level
<b>Overall</b>	<b>0.53**</b>	<b>Strong</b>
Vigor	0.46**	Moderate
Dedication	0.39**	Moderate
Absorption	0.54**	Strong

\*\* p value < 0.01



## Discussion

1. The overall WE among TCH nurses was at a high level ( $M = 5.16$ ,  $SD = .63$ ) (Table 1), similar to a previous study by Alkorashy and Alanazi (2023) among Saudi Arabian nurses. However, this finding is incongruent with that of a study among US nurses by Wei et al. (2023). A possible reason for the high level of WE among TCH nurses in Kiribati can be explained by marital status. Married nurses are more engaged due to their obligation to financially support their families (Yeşilyurt et al., 2023); most of the participants in this study (78.65%) were married. According to Muroi et al. (2023), financial rewards can influence the WE of nurses.

In Kiribati, there was a new increased salary scale for all I-Kiribati government employees, including nurses, together with a benefit of \$3,000 (Leave Grant) at the beginning of each year. Moreover, the effective human resources management, caring, and flexibility of nurse managers enhanced WE (Al Mamari & Groves, 2023); the nurse managers in TCH created flexible working schedules for nurses. Furthermore, a good relationship among Kiribati nurses is usually present as they consider their working unit a typical home for them, and they operate as one team with common goals to take care of their patients. According to Al Mamari and Groves (2023), optimal teamwork and interprofessional relationships increase the WE of nurses.

Regarding each dimension of WE, nurses had a high level of vigor ( $M = 4.94$ ,  $SD = .77$ ) (Table 1) in this study, which means that nurses had superior levels of energy and mental resilience while working along with the willingness to invest effort in one's work, and persistence, even in the face of difficulties. This finding was consistent with a previous study in Saudi Arabia by Alkorashy and Alanazi (2023). The possible reasons may be the training programs for nurses and the induction briefing program for new nurses who have just joined the profession. This personal and organizational support enables nurses to perceive that they are being cared for and boosts their energy to keep going with their tasks as nurses. In addition, the nurses' working experience may be another reason, as 46.07% had 2-10 years of experience in nursing. Years of experience provide nurses more opportunities to learn about the little-known facets of their jobs and become experts at these; this increased knowledge enables them to become completely involved in their profession and triggers the development of resilience in the face of difficulties (Alkorashy & Alanazi, 2023).

Regarding the dimension of dedication, TCH nurses had a high level ( $M = 5.60$ ,  $SD = .54$ ) (Table 1). A possible reason may be due to the good network between the in-charge nurse and her staff as well as among nurse colleagues and extending to nurses and patients and patient's relatives, which encourages the spirit of dedication (Sabetsarvestani et al., 2022). In this study, nurses showed a high level of absorption ( $M = 5.02$ ,  $SD = .77$ ) (Table 1). One reason specific to Kiribati could be that nurses typically had two days off following a night shift. In addition, the monthly roster includes three days off, which are rotated among nurses; so, they have three consecutive days to rest, recharge, and fully concentrate on their work.



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2. Nurses at TCH perceived an overall OCB at a high level ( $M = 5.45$ ,  $SD = .40$ ) (Table 2) which can be explained by the leadership of the nurse manager. The leader's role is to make sure that each employee feels secure and supported, to feel like part of the organization. Leaders or managers take care of interpersonal relationships at work and employee satisfaction, and chances for OCB are greater (Veličkovska, 2017). In Kiribati, nurses pursue management and leadership degrees, and they may have knowledge, skills, and awareness regarding effective leadership behavior. In addition, people are more prepared to work and are happier when they are employed by an organization where there is a high degree of trust and feel that they are an important and useful component of that organization. Employees who trust managers, coworkers, and the organization they work for can demonstrate higher OCB levels and improve relationships by increasing their cooperation at all levels (Tekingündüz et al., 2015).

Induction programs for new nurses and other relevant training are routinely conducted in Kiribati to reinforce the personal resources of the nurses. This would enable nurses to be more competent to implement their work effectively, giving them a sense of job satisfaction and a perception that the organization showed concern and support for them. In addition, altruism, a dimension of OCB, was at a high level in this study ( $M = 5.59$ ,  $SD = .46$ ) (Table 2). The possible reason could be the culture of Kiribati, the immense value of friendship, and strong bonds within families, where living with extended families is a happy wonderful experience to stay together and to help and support each other (Tourism Authority of Kiribati, 2020).

Kiribati nurses at TCH had a high level of civic virtue ( $M = 5.24$ ,  $SD = .56$ ) (Table 2). A possible reason could be related to personal feedback and supervisory communication, as employees with positive impressions of the organization's fairness and satisfaction with supervisory communication and personal feedback are more likely to help voluntarily and exhibit civic virtues (Liu et al., 2022). In this study, nurses had a high level of courtesy ( $M = 5.58$ ,  $SD = .47$ ) (Table 2) with a possible reason being related to the personal resources of nurses concerning their capability to conduct effective communication which is a foundation for interpersonal relationships and a determinant of promoting respect and dignity (Dithole et al., 2017). Additionally, nurses had a high level of conscientiousness in this study ( $M = 5.41$ ,  $SD = .58$ ) (Table 2) with possible reasons related to the capacity to effectively manage one's life and surroundings whereby you have the free will to manage things according to priorities, abide by regulations, and be able to accomplish the aims for the day, one at a time (Ryff, 1989). In this study, nurses had a high level of sportsmanship ( $M = 5.41$ ,  $SD = .88$ ) (Table 2). This behavior supports a positive climate at work because of more polite behavior and cooperation with others. This may be due to the fact that these nurses considered the hospital as their special place, like a home. They had an interest in it and tried not to find mistakes at the hospital where they worked.

3. This study revealed a significant, strongly positive relationship between the WE and OCB of nurses ( $r = .53$ ,  $p < 0.01$ ) (Table 3), consistent with a previous study by Ng et al. (2019). According



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to Christian et al. (2011), engaged nurses are more likely to complete tasks to the highest standard and adhere to organizational ethics and standards due to their attentiveness, dedication, and performance of extra-role behavior that directly benefits other employees, which enables them to function as valuable members of an organization. In addition, it could be related to the fact that following the COVID-19 pandemic, Kiribati has received much support in terms of materials as well as training to enable adaptable, continuous, robust nursing care to its citizens. Moreover, mental and psychological support training has greatly contributed to soothing Kiribati nurses' anxieties within the work environment. Employees' sense of engagement is more likely to be reciprocated by voluntarily participating in their organization's non-mandatory activities when they perceive genuine organization support regarding growth chances (Ensher et al., 2001).

In addition, the current study found a moderate positive relationship between vigor and OCB ( $r = 0.46, p < 0.01$ ) (Table 3). According to Maisyuri and Ariyanto (2021), employees who have a high spirit of enthusiasm for doing work tend to be able to improve their performance and organizational effectiveness. Additionally, dedication had a moderate positive relationship with OCB among nurses in this study ( $r = 0.39, p < 0.01$ ) (Table 3). Employees being devoted are more inclined to invest their resources and act more freely to display extra-role behavior than others. When employees are more dedicated to their work, they will be more likely to engage in behaviors that are altruistic, conscientious, and virtuous (Christian et al., 2011). Absorption had a strong positive correlation with OCB in this study ( $r = 0.54, p < 0.01$ ) (Table 3). Employees with high levels of absorption can entirely focus on their work, and this may have an impact on how well they perform at work. The sense of comfort felt by employees due to teamwork and a sense of kindred established in their work environment makes them enjoy the work they do, so they would find it difficult to get away from their work, leading to higher performance (Maisyuri & Ariyanto, 2021).

### Applications of research findings

1. The findings can provide baseline information for administrators to formulate hospital policies and support organizational factors for enhancing the WE and OCB of nurses.
2. Nursing administrators can apply the study's findings to raise awareness and encourage nurses to maintain their OCB and strengthen strategies for WE.
3. Administrators should ensure that their Ministry of Health supports WE and OCB, through job characteristics, role clarity, material resources, collaboration, reward and recognition, perceived social support, compensation fairness, job security, and development. With this support, WE and OCB among nurses will remain.
4. Administrators should encourage nurses to be proud of their work and to be enthusiastic, as nurses perceived a high mean score of OCB.
5. Nursing administrators should develop a system to manage the absence of nurses in terms of helping the absentees' behaviors and rescheduling staff nurses to maintain productivity in each ward.



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6. Nurse managers should monitor the impact of nursing staff actions on co-workers to improve OCB among nurses.

### Recommendations for further research

Further research should examine the WE and OCB of nurses in other types of hospitals in Kiribati, such as health centers and public health clinics. In addition, exploring the factors related to OCB among nurses in Kiribati needs to be further researched.

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