

Influence of a merger on nurses' emotional well-being: the importance of self-efficacy and emotional reactivity

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Influence of a merger on nurses' emotional well-being: the importance of self-efficacy and emotional reactivity

The influence of the merger of two major medical centres on the emotional well-being of nurses was investigated by use of a questionnaire on emotional distress, perception of threat, self-efficacy and emotional reactivity. Evaluations were carried out 1 month prior to the merger at the official announcement, and again half a year after the merger took place. Before the merger, threat perception was higher in the transferring nurses, but the difference was of borderline significance ($P = 0.05$). There was a significant positive correlation between threat perception and both emotional reactivity and emotional distress, and a significant negative correlation between self-efficacy and both threat perception and emotional distress ($P < 0.001$ for all). After the merger, the transferring nurses showed more emotional distress ($P = 0.009$). There was a significant positive correlation between threat perception, emotional distress and negative outcome variables such as burnout and stress ($P < 0.001$), and a significant negative correlation between threat perception and positive outcome variables such as growth ($P < 0.01$). This study identifies some personal characteristics that can affect the way nurses deal with hospital mergers and need to be considered during organizational changes in order to maintain job satisfaction.

Keywords: emotional reactivity, merger, nurses, self-efficacy

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Introduction

Mergers differ from other organizational changes by their large scale, rapid rate of occurrence, and high level of uncertainty (Marks 1988, 1989). Like the business world (Fink 1988, Peterson & Fisher 1991),

health care management often involves the merger of hospital wards, hospitals, and even health management associations (Kooi & White 1988, Appenzeller 1993, Kuittner 1996). Most of the studies on mergers deal with the organizational aspects (Appenzeller 1993), and far fewer with the impact of the merger on

employees or the effect of employee response on the success of the merger (Jick 1979, Blake & Moutin 1983, Blake & Mouton 1985, Marks 1988, Kent 1991, Ashford 1998).

Jick (1979) described a merger as a socio-psychological event that most employees find threatening and painful. It involves loss of status, loss of identity, loss of autonomy, lowered self-image, and feelings of 'being left in the dark'. Some people react with fear, anxiety, anger or even depression (Brockner 1985, Dianis *et al.* 1997). The reaction to the news of an imminent merger has been likened to that on hearing of the death of a loved one. It seems to follow the same pattern of denial, anger, negotiation, depression and acceptance (Cartwright & Cooper 1993, Powell 1997).

Many workers react to the anxiety and stress by objecting to the merger (Altendorf 1986, Marks & Mirvis 1986, Schwiger *et al.* 1987, Fink 1988, George *et al.* 1997, Hendel 1998). This can take many forms: (a) rejecting new processes, protocols, policies and standards, (b) expressing disappointment and frustration over reductions in staff and resources, (c) regressing to older, nostalgic processes in order to fend off the newer ones, (d) passive acceptance without an active component and (e) failure to integrate into the new units created by the merger. The end result is a reduction in the level of job commitment, stress-related adverse effects on health, increased absenteeism and poorer job performance as a result of low employee self-esteem and preoccupation with the new situation. Nevertheless, most employees ultimately accept the change and find ways of coping with the new reality. Specifically, this means working with new managers and a new team of workers, handling new procedures, working in new surroundings, adjusting to changes in policy and salary, and so on. From the surveyed literature, it could be concluded that:

- 1 The process of merging is a complex process with implications on the organization, the individual, and the group.
- 2 The literature mostly reports on the negative implications of the merging process at the organizational behaviour level, such as resistance to changes, absences, etc.
- 3 In surveying the literature no studies were found that examine the psychological implications of a hospital merger on nurses, from the individual's point of view.

The aim of the present study was to investigate the influence of the merger of two medical centres in Israel on the emotional well-being of the nurses employed at these facilities.

In 1995, Beilinson and Hasharon Hospitals, both in central Israel, decided to consolidate their facilities, with the smaller hospital being relocated within the premises of the larger one. The merger was completed in 1997.

This study, the first of its kind in Israel, focuses on nurses from the Departments of Obstetrics and Neonatal Medicine, which were housed in a new wing built for the merger.

We examined three characteristics which we felt according to the literature, would best determine an individual's success in dealing with the merger: perception of the change as a threat, self-efficacy, and emotional reactivity. Self-efficacy is the ability of the individual to believe in his/her capabilities (Bandura 1992). Emotional reactivity is the ability to respond to a stressor with heightened emotional capabilities and to remain in this state as long as is necessary to deal with the new situation. People who react emotionally to an event are more probably to believe that they are less capable of dealing with stressful situations (Melamed 1987). Outcome was measured by level of emotional well-being, defined as a subjective feeling of growth (as a result of the merger) and/or the lack of symptoms of burnout, emotional distress and adaptation difficulties. The variables of capability and emotional response can predetermine the individual's personal response in the organization, but have not been researched in relation to coping with stress and threat that stem from a merging process.

Four hypotheses were raised:

- 1 Individuals in the facility being transferred are more probably to show symptoms of emotional distress, as they are making the greater change.
- 2 Threat perception before a merger is positively correlated to emotional distress and emotional distress increases after the merger is implemented.
- 3 Individuals with high emotional reactivity perceive the merger as more threatening.
- 4 Individuals with high self-efficacy perceive the merger as less threatening.

Methods

A prospective study design was used. The study sample consisted of 93 nurses from the maternity ward, the neonatal ward and the delivery suites of two medical centres, which were combined into a single Women's Health Centre on the campus of the larger centre. There were two groups of nurses: those who transferred from the smaller hospital to the main centre ($n = 37$) and

those from the main centre whose work was affected by the merger ($n = 56$). Findings were compared with a control group of nurses from the larger centre who were not directly affected by the merger ($n = 35$). The nurses were both registered and practical nurses, ranging in age from 25 to 66 (average 44); two were male, the rest female. All participants completed a specially formulated questionnaire for the evaluation of emotional distress, including items on demographical and occupational details, anxiety, somatic complaints, depression, and occupational insecurity (Derogatis 1976, Melamed 1987, Shirom 1989, Smith 1989).

The questionnaire was administered at two time points: at the announcement of the prospective merger (about a month and a half before it took place) and 6 months after its completion. All items were rated on a Likert scale of 1 (strongly agree) to 5 (strongly disagree). In addition, at the first time point, the questionnaire included additional questions on threat perception, self-efficacy and emotional reactivity, again rated on a scale of 1–5 or 1–6. At the second time point, they were asked about their opinion of the change as a chance for growth, their satisfaction with the change, and their feelings of burnout.

Statistical analysis was carried out using two-way ANOVA to evaluate the influence of the two main effects and the interaction between them, and the common influences of the independent variables on the dependent variables. The reliability of the questionnaires was tested using Cornbach coefficient Alpha (factors). Evaluation of the correlations between the variables was performed using Pearson's correlation factors for variables with continuous distribution and Spearman's test for those with discontinuous distribution. The t -test for comparison of averages was used for variables with normal distribution and the Wilcoxon test for those without normal distribution. The population t -test for test of differences for each individual at the beginning and at the end of the study was used when there was normal distribution.

Results

First time point

No statistically significant difference was found between the two study groups in self-efficacy or emotional reactivity. Therefore, the groups were combined for further analysis. A significant positive correlation was found between threat perception and emotional reactivity as well as between threat perception and emotional distress ($P < 0.001$). There was a significant

negative correlation between threat perception and self-efficacy and between self-efficacy and emotional distress ($P < 0.001$).

Second time point

There was no difference in burnout, feelings of stress, or lack of energy among the three groups (including controls), and there was no difference in feelings of growth or satisfaction between the two study groups (excluding the controls). The transferring nurses showed a significantly higher level of emotional distress than the nurses affected by the change who did not transfer ($P < 0.009$).

There was a significant positive correlation between threat perception and emotional distress, and between emotional distress and the negative outcome variables of burnout, stress, lack of energy, adjustment difficulties ($P < 0.001$ for all). A significant positive correlation was also noted between the various negative outcome variables, including reduced salary and status, and the need to learn new things ($P < 0.001$ for all). There was a significant negative correlation between threat perception and growth, and between emotional distress and the positive outcome variables of satisfaction, growth and perception of the change as positive ($P < 0.001$).

To evaluate the connection between self-efficacy and emotional reactivity, nurses were divided into four groups according to levels of the two qualities. As expected, the nurses with low self-efficacy and high emotional reactivity reported the most emotional distress, threat perception, and adjustment difficulties.

Discussion

This study sought to determine how obstetrics and neonatology nurses perceived the merger of their hospitals and to identify emotional factors that may have affected this perception and the subsequent response to the change.

At the first point in the study all the nurses perceived the pending merger as a threat and a source of stress and emotional distress. The lack of a significant difference between the three groups in self-efficacy and emotional reactivity indicated that all possessed the same capabilities to cope with the change. The results confirm our hypothesis on the role of threat perception. Analysis of the questionnaires showed that the perception of the merger as a threat led to greater emotional distress. This correlation increased in strength after the merger and was associated with other negative outcome variables such as burnout and stress. The nurses who transferred

showed more emotional distress than those who stayed at the same facility; this could have been predicted as they had the greater change to make. High self-efficacy was associated with lower threat perception and other positive outcome variables, such as growth.

Not included in the study, but important to mention, are the nurses (12 from the transferring hospital and eight from the receiving hospital) who chose to take early retirement shortly after the announcement of the merger was made, even though these specific nurses, because of their experience and position, were not among those slated to be made redundant. It is significant to note that they refused to take part in the study. This phenomenon of coping with the threat of the merger by objecting to it and looking for a new job or taking early retirement has been described in the literature (Peterson & Fisher 1991, Schwiger *et al.* 1987).

The hypothesis that self efficacy is negatively correlated with perception of threat was supported by the study. Only partial support was found for the negative correlation between self efficacy and the negative outcome variables. These findings support the characterization of self efficacy as a personal variable which represents the ability of the individual to achieve a goal and so is expected to be negatively associated with negative outcome variables.

The literature is not clear on the question of whether self efficacy is a specific or general characteristic. Sherer *et al.* (1982) make the case for it being a general characteristic where the expectations generated from one situation influence other newer situations. Bandura (1986) claims that self efficacy is different in different cases. Eden (1988) puts forth his view that there are two types of self efficacy and that the general self efficacy is cognitive in nature. This study shows a better relationship between general self efficacy and the outcome variables than between specific self efficacy and the same outcome variables, as also Sherer *et al.* (1982) found.

The hypothesis that emotional reactivity is positively correlated with threat perception was supported by the results; only partial support was seen for the negative correlation between emotional reactivity and negative outcome variables. Melamed (1987) defined emotional reactivity as the ability to easily enter a state of heightened excitement and to keep it at a high level even after the end of the causative emotional event.

Nurses were divided into four groups based on their levels of self efficacy and emotional reactivity. The interaction between the two qualities is significant especially in determining level of distress after the merger took place and in locating the individuals at

risk. The interaction is also important as the condition for the use of the variables of perception of self efficacy and emotional reactivity as moderators is met (Baron & Kenny 1986). Thus, after the announcement of the merger, nurses with high emotional reactivity and low self efficacy reported the highest levels of emotional distress. This supports similar findings by Matteson & Ivancevich (1990) and Hendel (1998) that mergers bring uncertainty and threat which increase pressure and create negative repercussions. Other studies (Cartwright *et al.* 1993, Powell 1997, Hendel 1998) showed that physiological reactions, anxiety and stress are related to the perceived threat of a merger.

The present study has two main contributions:

- 1 The variables of perceiving capabilities and emotional responses have not been researched yet in relation to coping under stress and threat conditions that stem from a merging process. Thus, this present study contributes by adding a body of knowledge in this area.
- 2 This study is the first of its kind being conducted in Israel regarding the effect of the processes of merging on nurses involved in the process. Being the first, only some of the variables were examined and a future study should also examine the effects of personal variables such as professional education, tenure, position scope, etc., on the emotional well-being in the process of merging.

In addition, it should be noted that the state of Israel is in a constant political state of regional tension that effects each person's individual sense of tension and which certainly has an effect on the work.

When an additional stressor is added, such as a merger in the place of work, the capacity for maintaining emotional stability becomes more difficult.

The results of the present study have important implications for other hospitals as well as for other organizations in general, as the success of any merger is dependent on maintaining human resources at a high level. High-quality output is a function not only of salaries and benefits, but also of job satisfaction and job certainty. This study identifies some personal characteristics that influence the psychological response of workers to an organizational change. Authorities should consider involving the nursing staff in formulating interventions that befit the transition period. Involving the personnel in formulating future plans, allowing for ventilation, searching together for new ways to improve the existing routines and adjusting to new ones, would reduce the loss in quality and allow for more cooperation during this transition period.

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