Organizational Silence and Nursing

Örgütsel Sessizlik ve Hemşirelik

ABSTRACT

Organizational silence is a phenomenon that can occur due to individual, managerial or organizational reasons, and it is expressed as employees not expressing their opinions in internal operations, preferring to remain silent. Organizational silence, which is a voluntary form of behavior, is seen as a communication problem and an element of discomfort from the point of view of a person and an organization. As the behavior of remaining silent becomes widespread in institutions, many processes such as problem identification and correction of identified problems, institution development, analysis, change and improvement stages are negatively affected. Especially in health institutions that provide uninterrupted service for twenty-four hours, need to be worked with minimal errors and require instant intervention, it is undesirable for employees to remain silent for individual or managerial reasons. In a healthcare organization dominated by organizational silence, employee feedback, which is extremely important, can be negatively affected and lead to serious mistakes. The presence of nurses, who make up the vast majority of health professionals, in organizational silence behavior poses a high risk for society.

Keywords: Silence, Organizational Silence, Nursing.

ÖZET

Örgütsel sessizlik bireysel, yönetsel veya örgütsel sebeplere bağlı ortaya çıkabilen bir olgu olup çalışanların kurum içi işleyişlerde fikrini beyan etmemesi, sessiz kalmayı tercih etmesi olarak ifade edilmektedir. İstemli bir davranış biçimi olan örgütsel sessizlik, kişi ve örgüt açısından bir iletişim sorunu ve rahatsızlık unsuru olarak görülmektedir. Kurumlarda sessiz kalma davranışı yaygınlaştıkça sorun belirleme ve belirlenen sorunları düzeltme, kurum gelişimi, analiz, değişim ve iyileştirme aşamaları gibi birçok süreç olumsuz olarak etkilenmektedir. Özellikle yirmi dört saat kesintisiz hizmet sunan, en az hata ile çalışılması gereken ve anlık müdahaleyi gerektiren sağlık kuruluşlarında, çalışanların bireysel veya yönetsel sebeplerden sessiz kalması istenmeyen bir durum olarak karşımıza çıkmaktadır. Örgütsel sessizliğin hakim olduğu bir sağlık kuruluşunda, fazlasıyla önem arz eden çalışan geribildirimleri olumsuz etkilenebilmekte ve ciddi hatalara yol açabilmektedir. Sağlık profesyonellerinin büyük bir çoğunluğunu oluşturan hemşirelerin örgütsel sessizlik davranışında bulunması toplum açısından yüksek bir risk oluşturmaktadır.

Anahtar Kelimeler: Sessizlik, Örgütsel Sessizlik, Hemşirelik.

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INTRODUCTION

Silence behavior, which is an important issue in terms of the development of management practices, consists of various emotions, thoughts and interactions in the inner world (Üçok and Torun, 2015). Employees who can change and improve any situation in an organizational silence climate do not share the views that they find to be behaviorally, cognitively and emotionally correct that will contribute to improving the conditions in the organization (Pinder and Harlos, 2001). Employees who remain silent due to work-related fears eventually begin not to express their thoughts about many organizational issues. As this situation becomes widespread among employees, it may turn into a problem at the organizational level (Bowen and Blackmon, 2003). Failure to share the known information and suggestions negatively affects the decision-making, problem reporting-reduction and institutional improvement stages in organizations (Vakola and Bouradas, 2005). It is necessary to question the current order, to discuss the events and to change and develop the conditions (Slade, 2008). For this reason, it is important not to create a climate of silence in organizations that aim to achieve success.

THE CONCEPT OF ORGANIZATIOANAL SILENCE

Organizational silence is expressed as the fact that employees prefer not to make a sound about illegal or unethical practices/initiatives in the workplace, or issues that violate personal, moral and legal standards, and want to stay out of the issues (Knoll and Van Dick, 2013). In other words, the development of the institutions where individuals work, the unwillingness to share suggestions, information and thoughts about their work, the abstinence from the

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institution is defined as organizational silence. The climate of silence in organizations is seen as a threat that limits organizational development and change and a common phenomenon that prevents the formation of a holistic organization (Morrison and Milliken, 2000).

When the concept of silence is applied to an organizational climate, behavior situation, organizational culture, employees become unable to express their emotional states or true and false perceptions with the spread of this attitude. When the attitude of silence in the organization penetrates deeply, individuals form a community that understands the points that need to be revealed in the organization but prefer to remain silent, thinking that their thoughts will not be accepted and will not make sense in the majority (Vakola and Bouradas, 2005). Definitions made in the literature treat silence as a preference and a reactive approach. It is stated that the employee does not take an active role in changing the existing situations in the organization and continues his/her duties with the hope of change by remaining silent (Hirschman, 1970). Although employee silence was previously perceived as a behavior of being compatible with the organization, it is stated that it may not be this way today, in addition, it may be seen as a withdrawal and reaction (Ersançmış, 2015). Silence behavior can occur in complex structures and for more than one reason. Even in mutual, open communication, the obstacles encountered are much more difficult to understand and analyze the problems in a silent environment (Çakıcı, 2007).

Organizational silence may result from conformity to other opinions, self- preservation and protection of others (Taşkıran, 2011). Various researchers in the literature present the concept of silence with several classifications (Bruneau, 1973; Pinder and Harlos, 2001; Van Dyne et al, 2003).

In Bruneau's (1973) classification based on pragmatic silence, which we come across in three ways as psycholinguistic, interactive and sociocultural silence, the individual sometimes does not speak voluntarily, thinking that it is dangerous to share his suggestions, and in general chooses silence in a planned way. Psycholinguistic silence is the type of silence associated with psychology, which includes involuntary hesitations that occur during communication. Interactive silence is defined as silence that is strategic and planned in mutual communication. Sociocultural silence is usually defined as a type of silence in which there is a hesitation within a formalized group or organization.

Pinder and Harlos (2001) classify silence as "passive" and "acceptance". Passive silence is defined as a type of silence in which employees do not speak voluntarily, but can change the state of silence with the help of others or their own support in the event of an injustice encountered in the workplace. Passivity is defined as employees choosing to remain silent, fearing negative feedback, despite the fact that they do not accept the current conditions and believe that conditions will improve with other ideas or alternatives. Despite these attitudes of employees in a state of passive silence, it means that they can break their silence if they believe that conditions can change. The other form of silence, the concept of consent, is defined as submission and condoning. Acceptance occurs when employees feel more deeply that the current situations in the organization will not change, and alternative solutions are seen as limited and unattainable. The silence of consent conveys a deeper formation than passive silence. In order for employees to break their silence in situations of making a noise or complaining, an excessive amount of motivating resources are required in the silence of consent compared to passive silence.

Van Dyne et al (2003) put forward three basic types of silence according to the intentions behind organizational silence; accepting (submissive) silence, protective (defensive) silence and protective (taking care of the organizational benefit) silence.

Accepting (Submissive) Silence: Employees keep their ideas and thoughts to themselves and do not make an active effort to change their conditions (Van Dyne et al., 2003). Accepting the conditions instead of solving problems or initiating changes for the current conditions gives the employee confidence (Pinder and Harlos, 2001). In this kind of silence, employees think that it would be pointless to strive by accepting the conditions they are uncomfortable with, and that organizational development is hopeless (Brinsfield, 2009; Tayfun and Çatır, 2013).

Protective (Defensive) Silence: Working in this type of silence, he/she voluntarily keeps information, suggestions and opinions to himself/herself with the impulse of self-protection /defense. Employees consciously and prudently implement their personal plans and remain silent in order to protect themselves from external threats (Van Dyne et al., 2003). Although employees in a state of protective silence have suggestions that can improve conditions, they prefer silent behavior (Pinder and Harlos, 2001).

Protectionist (Considering the Benefit of the Organization) Silence: In cases where remaining silent is in the best interest of the organization and employees, not sharing opinions, suggestions and information is defined as silence for protection purposes (Van Dyne et al., 2003). Protectionist silence behavior, which is a conscious, voluntary and precautionary behavior, aims to prevent threats that may affect the organization, develop

organizational commitment behavior and maintain organizational order (Podsakoff, 2000; Pata and Gemlik, 2021). Employees who show protective silence behavior do not protect and share the existing information because it would be in the best interest of the organization or employees (Esfahani et al., 2013; Öztürk, 2019).

Factors Affecting Organizational Silence

There are many different individual, managerial and organizational reasons that cause silent behavior. Among the individual-based characteristics, negative emotional state, low position, inadequacy in experience are shown. Distancing of employee-manager communication, distrust of the employee, belief that managers are superior to employees in terms of information, negative reception of differences of opinion in the organization and fear of receiving negative feedback are shown as factors caused by the manager. The fact that the cultural structure does not provide support to the employee in the silence caused by organizational reasons is due to the centralized decision-making mechanisms and the consensus-forcing structure of social pressures (Erenler, 2010). The inability of employees to think that they have the potential to provide development and change in the workplace and express ideas, suggestions and problems leads to many complex negative emotions, they cannot feel belonging in the organization and consider themselves worthless (Çakıcı, 2008). Even if the employee voluntarily prefers to remain silent, not being able to speak causes him/her to feel uncomfortable, exhibit low performance, and be in a bad mood (Brinsfield, 2009).

Beer and Eisenstat (2000) collected the reasons for organizational silence under 6 headings. These:

1. The absence of a top-to-bottom or freedom-based senior management approach in the organization,

2. Having strategies that are not easily understood and a climate of conflict in the organization,

3. The inability of the senior management team to be effective against the problems that occur in the organization,

4. The horizontal communication network is not enough,

5. The coordination system is not sufficient between functions, work and borders,

6. It is defined as the lack of sufficient level of leadership, skills and development from top management to sub-management.

THE CONSEQUENCES OF ORGANIZATIONAL SILENCE

As an organizational situation, the climate of organizational silence, which can lead to negative consequences, is seen as an unsettling and quite common situation (Blatt et al., 2006). The employment of personnel who have strong communication in organizational structures, can indicate their expectations, are solution-oriented, creative and adapt to group dynamics are shown as the skills expected from the future workforce (ACCI/BCA, 2002). Employees prefer to be able to make their shares in a safe environment and to be in organizations where they can express their ideas and suggestions without worrying about the consequences (Ehtiyar and Yanardağ, 2008). The deterioration of the communication climate, which is one of the other consequences of organizational silence, leads to a deterioration of information exchange within the organization (Vakola and Boudaras, 2005). As a result of the research conducted, it has been shown that performance is negatively affected from individual and organizational points of view in institutions where organizational silence prevails (Morrison and Milliken, 2000). It is seen that a quiet atmosphere can prevent a satisfactory efficiency in organizations (Shojaei et al., 2011). By continuing to be dissatisfied with their work within the organization, employees begin to see it as pointless to improve their work and do things that will benefit the organization (Üçok, 2015).

The climate of silence that spreads in institutions negatively affects the institution by preventing the feedback of problems and turning them into a permanent functioning and spreading (Milliken and Morrison, 2003). As the employee silence continues, the detection and notification of errors and the development of problem correction stages become more difficult (Milliken et al., 2003). As a result of the reduced feedback in the organization with the effect of the quiet environment, the change process is negatively affected, internal improvements decrease and the development of the organization slows down (Slade, 2008). As the silence behavior continues, employee motivation is damaged and decreases, organizational learning decreases over time, dismissal rates increase, organizational culture changes and deteriorates, situations begin to develop against the organization (Morrison and Milliken, 2000).

In a study conducted by Henriksen and Dayton (2006) on health workers, they stated that the level of development in the organization will be affected and concerns such as punishment reduce feelings of commitment and trust, employees whose confidence in management is weakened will prefer silence for managerial reasons.

The study conducted by Bayram (2010) concluded that 83% of the participants preferred silence instead of expressing problems related to the workplace, and 17% were able to express their thoughts about problems.

In a study conducted with 1700 people from different disciplines in the health sector, more than half of the health personnel stated that the rules were violated, insufficient performance and teamwork were not shown. The fact that the proportion of employees expressing their concerns about these issues among employees is below 10% shows the seriousness of the dimension of silence in the health sector (Quoted by Şimşek and Aktaş, 2014; VitalSmarts, 2013).

In a study conducted by Yurdakul et al. (2016) with the participation of 159 nurses and midwives, it was found that organizational silence is quite common.

In a study conducted with the participation of 979 nurses and doctors in Switzerland, it was reported that 19%-39% of healthcare professionals were silent, higher frequency of speaking in a stimulating environment, less silent behavior (Schwappach and Richard, 2018).

In a study conducted with 884 health workers in Ankara and 276 health workers (doctors, nurses, other health personnel and administrative personnel) as a sample, it was found that the staff mostly remained silent about management problems and employee performance for managerial and organizational reasons (Çakır and Uğurluoğlu, 2019).

In a study conducted at a health center in the capital of Jordan, organizational silence behavior was found to be at a moderate to high level in general (Allheet, 2019).

In a study conducted in 10 hospitals in the Philippines, it was found that organizational silence behavior was at a moderate level (Labrague and Santos, 2020).

ORGANIZATIONAL SILENCE AND NURSING

When a culture of organizational silence occurs in health organizations, this situation can turn into very dangerous consequences for both the institution and patients. Compared to other organizations, the problem of silence in health institutions can cause events that bring conscientious obligations with irreversible consequences (Yalçın and Baykal, 2012). Employees who are involved in every activity performed in the organization and guide organizational behavior are the best sources for the functioning of the organization, the accuracy of information and data (Clapham and Cooper, 2005). Nurses ensure the coordination of the work of interdisciplinary, professional and non-professional employees, the joint and regular execution of work. The workload in the nursing profession, physical difficulties caused by working conditions, irregular and insufficient sleep, emotional stress caused by being with people experiencing pain and suffering, trying to provide the best service even in desperate situations of patients, etc. lead to burnout in nurses, a decrease in awareness and the consequences of quitting work. Nurses who continue their work under these adverse conditions may be pushed towards low performance and organizational silence (Tayfun, 2013).

It is shown in the studies conducted that nurses who can express themselves comfortably and express problems, share ideas, feelings and thoughts in health institutions are afraid of acting together and tend to remain silent due to the reaction of management and intolerant behavior of nursing members. The continuation of interdisciplinary cooperation in health institutions is seen as an important issue in terms of not causing mistakes (Doğan and Yılmaz, Dec. 2020). If employees are giving a message to the organization or their managers with silence behavior, what needs to be done is to be able to make sense of this message, which can reveal the risk factors in which the organization is located (Özdemir and Uğur, 2013).

In order to improve the conditions and ensure patient safety due to the principle of working with minimum errors of health organizations, nurses working in almost all areas of health organizations should determine unsafe conditions at work and not hesitate to express their ideas and suggestions about these issues, take the necessary measures, and nurses should not remain silent is a good strategy for the institution (Tangirala and Ramanujam, 2008). This issue is of importance both for health services and for nurses who take care of the rights of themselves and their patients in the first place (Yalçın and Baykal, 2012).

CONCLUSIONS AND RECOMMENDATIONS

It is a major problem for the organization that nurses, who play a key role in taking quick action in the sudden and unpredictable functioning of health institutions, ensuring communication and coordination in a timely and effective manner, managing business processes, providing quick solutions at the time of the incident in order to prevent irreversible errors, etc., hesitate to speak out or prefer to remain silent during the work execution and problem

solving stages. First of all, in-house research should be conducted periodically about why nurses remain silent, and a reassuring and supportive environment should be provided. In order to avoid a climate of silence in organizations, the employment of managers should be ensured within the organization where employees can share their knowledge, experience and opinions without fear and without hesitation. It is necessary to make the internal processes in the organization conducive to change and based on an atmosphere that is open to development by supporting employee ideas. Distrust of a top manager in the nursing profession, communication difficulties, fear of being exposed to mobbing behavior, anxiety about rotation against one's will, being seen as disorderly, thoughts such as the monthly work list may be unfair can increase the behavior of remaining silent in nurses. The creation of a communication network where the problems identified by nurses can reach not only micro but macro management without problems, and the provision of a feedback mechanism can be a way to solve organizational silence.

Due to the fact that nurses are the numerical majority among medical personnel, ensure interdisciplinary coordination and are at the forefront of employees who have a close relationship with the patient, the study of the organizational reasons for silence of nurses is important for social and institutional benefit.

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