

## **Organizational Learning and Job Satisfaction among Nurses: The Moderating Role of Job Satisfaction**

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In this study, moderating effect of job satisfaction was examined related to organizational learning and work performance among nurses. It was hypothesized that job satisfaction is likely to moderate the relationship between organizational learning and work performance. The correlation research design was used. The non-probability purposive sampling technique was used to collect a sample of 110 nurses from public hospitals of Lahore with at least 2 years of work experience in that hospital. Organizational learning was measured using the subscale of the Integrated scale for Measuring Organizational Learning (Jyothibabu, et.al. 2010). Job satisfaction was measured using Job Satisfaction Survey developed by Spector (1985). The performance was divided into three main categories; task performance, contextual performance and counterproductive work behaviour and assessed by Individual Work Performance Questionnaire (IWPQ developed by Koopman (2014). The hierarchical multiple regression for moderation was carried out and it revealed that job satisfaction moderates the relationship between organizational learning and work performance. The findings can be used to explore the reasons for the counterproductive activities of nurses and solutions can be devised accordingly.

*Keywords:* Organizational learning, job satisfaction, work performance, nurses

The progress of any state greatly depends on the performance of the organizational sector. The organizational performance in turn depends on the work performance of every individual employee working within the organization. The performance does not only depend upon physical factors

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like the health of an employee, rewards and working environment but also on psychological factors like well-being, satisfaction, safety, commitment, learning and cognitive ability of an employee. The focus of previous research was more on physical factors affecting performance, in this study focus is on psychological predictors of performance (Bojan et al., 2020). The employee's level of satisfaction is linked with opportunities regarding grasping knowledge and acquiring new skills within the organization which ultimately impinges on its performance in that organization (Pasebani, et.al. 2012; Rowden, 2002). There are various elements which influence the work performance of an employee. Liao and Chuang (2004) said that conscientiousness, extraversion, climate and involvement of employees can immensely affect their performance in an organization. If we talk about stressors like role conflict, role overload and role ambiguity then it was stated that they have a negative linear relationship with performance (Gilboa et al., 2008). In this study, the focus is on how the learning opportunities and activities within the hospital are affecting the performance of the nurses. The learning activities like workshops, seminars and lectures are contributing factors to the success of any firm performance. It is like if you invest in your employees then in turn they will lead your organization on the path of success (Bresman, 2009).

### **Theoretical Framework**

The organization provides learning opportunities to employees and heartening them to share their experiences with other members of the team, enabling the employee to work hard and contribute towards the better performance of the organization (Lough, et.al. 2011).

The social exchange theory by Bandura (1977) also supports this fact. It states that any interaction between individuals is an exchange of resources. The resources exchanged can be both substantial and insubstantial. Substantial resources include goods or money and insubstantial involve social facilities or friendship. The indispensable assumption behind this theory is that people enter into and continue relationships with the belief that doing so will be rewarding (Homans, 1958). Furthermore, Cropanzano and Mitchell (2005) proposed that employees specifically enjoying the financial and socio-emotional benefits of the organization they are linked with and consider their duty to pay back the organization with their improved and profitable services.

According to Argote and Spektor (2011), learning in an organization is a continuous process. This process involves the change of experience from performing the task into knowledge through the process of organizational learning. The experience of performing a task facilitates creating and enhancing knowledge of the individual performing it.

Furthermore, it was also considered by Elton Mayo with his associates that job satisfaction is important for work performance and productivity. In fact, according to human relations theory, job satisfaction functions as a link between social relations and the performance of the employee. This can also be stated in a way that satisfaction-causes-performance hypothesis: that work performance depends on the worker's being satisfied and similarly work performance will suffer if a worker is dissatisfied (as cited in Sinha & Shukla, 2013).

To sum up, it can be seen that work performance has a strong relationship with both organizational learning and job satisfaction. Although there is no clarity in the direction of the relationship between job satisfaction and work performance, there is much evidence stating that satisfaction and performance have cyclic or two-way relations among them (as cited in Jex, 2002). Research also suggests that job satisfaction can lead to improved performance and the converse can also happen. The factors like age, gender, education, salary, creativity, leadership, integrity, attendance, cooperation and work experience have a certain impact on the work performance of an employee (Jacobs, et.al. , 2007). Furthermore, satisfaction from the job along with learning opportunities within the organization are imperative factors that motivated employees to perform designated duties. These variables were controlled and then the relation between organizational learning and work performance was assessed with the moderating effect of job satisfaction. They have certain impacts on the work performance of an individual employee working in an organization.

## **Literature Review**

These days organizations gave a lot of attention to the work performance of their employees. They spend both time and money to devise ways to improve employees' work performance. The literature reveals that innovation, organizational learning, employee competence and job satisfaction are directly related to employee work performance. Job satisfaction is also used in various studies as a moderator for work success

and performance. The employees being more satisfied are more productive and also perform well (Lopez, et.al. 2005; Noruzy, et al., 2013).

The literature also indicates that turnover intentions are negatively associated with performance and organizational commitment is positively linked with it. On the other hand, the positive relationship between satisfaction and the performance of an employee is quite evident from the available literature (Imran, et.al. 2014; Khan, et.al. 2010).

Most of the work done on these variables are in the banking and academic sector. The medical sector is underexplored concerning these variables in Pakistan. The variables mentioned in this proposed study are not studied together before. So there is a gap in knowledge about these variables, especially in the medical sector.

**Hypotheses**

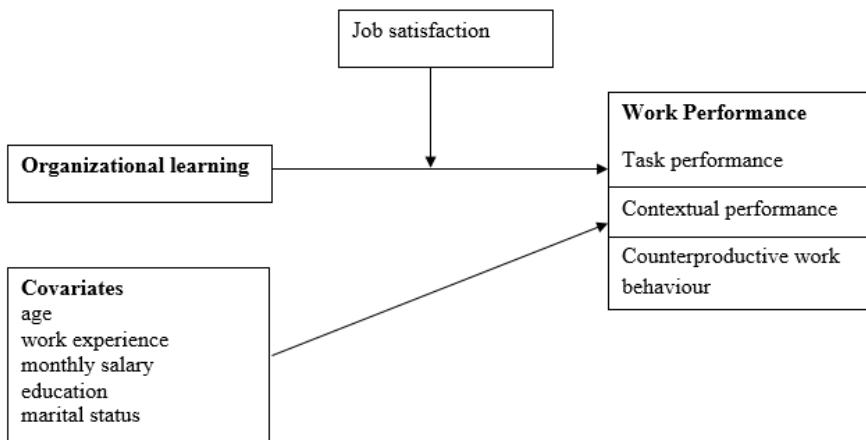
H1: Demographic variables, organizational learning, job satisfaction and work performance will likely be related to each other.

H2: Job satisfaction will likely to moderate the relationship between organizational learning and task performance among nurses.

H3: Job satisfaction will likely to moderate the relationship between organizational learning and contextual performance among nurses.

H4: Job satisfaction will likely to moderate the relationship between organizational learning and counterproductive work behaviour among nurses.

*Figure 1* Proposed Model for depicting predictors of work performance



The above-mentioned model depicts the overall structure of this study. The model states that the organizational learning of an employee predicts their performance on the job (Garcia-Morales, et.al. 2006). The role that job satisfaction plays in organizational learning and work performance was not examined before. The relationship between job satisfaction with work performance has many dimensions it can be direct or cyclic (Chi & Gursoy, 2009).

### **Rationale of the study**

Industry and organizations are core contributors to the growth of any nation. Within the organizational framework, the performance of an employee is an important factor that contributes towards the progress of any organization. These days a lot of money and time is being spent to improve employee performance. The organizations want to investigate those factors that influence the performance of the employee.

A theory of Organizational Learning states that if the organization caters for the learning demands of employees properly, then it will influence employees' contribution towards the firm (Argote & Spekter, 2011). Organizational Learning is studied with performance and satisfaction in health care because in hospitals we are dealing with patients, so we need to study the satisfaction and performance of the staff providing services. Through learning they will have a positive influence on offered care and services towards patients, affecting performance. It develops a learning culture, as shared learning is happening within the health care units and learning can be translated into actions.

In this study, a major focus will be on determining the relationship between organizational learning and work performance with moderating effect on job satisfaction among nurses. Nursing is a profession that is dealing with humans which is changing daily. This is a field that requires continuous learning as daily new techniques and procedures are being developed. So health care providers need to know new developments in their field. The hospitals also have some duties in this part like arranging seminars, workshops and practical demonstrations for their staff. This affects the performance of their staff as there are a lot of industries in Pakistan that want to improve their work performance, so this study catered for their need very well in that respect (Johnson et al., 2010).

## **Objectives of the Study**

Following are the objectives of this study

- To assess the relationship between organizational learning and work performance with moderating effect of job satisfaction.
- To know the effect of organizational learning on the work performance of nurses.
- To see the difference in nurses' performance based on demographic variables.

## **Method**

### **Research Design**

The present study was done using a correlational research design to assess the relationship between organizational learning and work performance with moderating effect on job satisfaction.

### **Participants and Sampling procedure**

The present study comprised of 110 female nurses working in the public sector. The sample was calculated using the G power calculator. The participants were selected through the purposive sampling technique because the acquisition of the sample is contingent on the particular characteristics that are of interest regarding the present research. The response rate of the current study was 77.2%. The data was collected from general OPDs.

### **Inclusion/Exclusion criteria:**

The nurses with a minimum of 2 years of work experience in their respective fields in the same hospital were included because 2 years would be enough for learning and exposure to different practical activities and to access the learning through those activities (Chiliya & Lombard, 2012; Greenhaus, et.al. 1990). Young nurses in the age range of 26-35 were included because young people are better performers than old ones (Birren & Schaie, 2001).

The internees and newly joined nurses were excluded because they don't have any proper knowledge of the respective hospital. They haven't spent much time in the hospital to learn in an organization. The nurses currently not working in hospitals were excluded because they don't have

any experience working which is necessary for the assessment of organizational learning.

### **Measures**

Measures were based on the following criteria and four questionnaires will be used for this purpose.

**Demographic Information Sheet:** Self-developed demographic information sheet was used to get information about age, marital status, number of children, education, work experience, duration of the job, working hours, department, monthly pay, family system and residential status. This demographic information sheet was used to assess the personal information of the participants. These variables were included because of their impact on the work performance of an employee.

**Organization Level Learning:** It is the subscale of the Integrated scale for measuring Organizational Learning (Jyothibabu, et.al. 2010). The scale assesses employee learning at the organisational level. The complete scale consists of 73 items used to measure 11 constructs. The Organization Level Learning subscale consists of 10 items with a higher score indicating greater organizational learning. The response category consists of 6 points Likert-type scale ranging from 1-6. The internal consistency of the subscale is 0.91. The discriminant validity of the scale was very good. The scale was translated into Urdu for the current study as it was more convenient for the sample.

**Job Satisfaction Survey:** This construct was developed to assess the job satisfaction of an employee. The total number of items is 36 with 6 options to encircle. The response category was ranging from 1-6. The 19 items i.e. 2, 4, 6, 8, 10, 12, 14, 16, 18, 19, 21, 23, 24, 26, 29, 31, 32, 34 and 36 were negatively scored. The range of total scores was between 36 and 216 with a higher score meaning higher job satisfaction. The internal consistency of the scale is 0.91 and the test-retest reliability is 0.71. The convergent and divergent validity of the scale was also established (Spector, 1985).

**Individual Work Performance Questionnaire (IWPQ):** The IWPQ was developed by Koopmans et al. (2014). It is a short questionnaire

to determine an individual's performance comprehensively in a generic working population. The scale consists of 3 dimensions. The task performance subscale consisted of 5 items, the contextual performance subscale of 8 items and the Counterproductive Work Behavior (CWB) subscale of 5 items. The scale comprised of 18 items. The responses of the participant are recorded on a five-point Likert-type scale. The scoring was done by taking averages of the total score for each subscale respectively. The high scores on these subscales mean higher work-related performance, which includes a better understanding of the job.

The internal consistency of task performance is 0.81, contextual performance is 0.85 and counterproductive work behaviour is 0.74. The construct validity of the IWPQ is acceptable. So far, two types of construct validity have been assessed, namely convergent validity of the task and contextual performance and discriminative validity. The scale was translated into Urdu by following standard procedure.

### **Procedure**

For the research study, the permissions to use the scales of job satisfaction, Organizational Learning and work performance were obtained through email from respective authors. Then, permissions were gathered from the respective medical superintendent of different hospitals to ask the nurses about the research, using the permission letter granted by the Institute of Applied Psychology. The data was collected from Jinnah Hospital, Model Town Government Hospital and Services Hospital. The scales were translated into Urdu through the proper method to make it easy for the nurses to understand them. Any questions participants had were successfully answered making them comfortable and confident. The nurses were personally approached through purposive sampling. After data collection, data was entered in SPSS and various statistical analyses were performed to calculate and generate results. The scales were translated through the following method.

**Forward Translation:** The main purpose of the forward translation was to obtain the target language version. The scales were translated from the English version scale into Urdu. The scales were first given to translators who were well-informed about the area covered by the scale. It is important to keep in mind that translators have good knowledge of the English language but the primary language should be Urdu. The



translator intended to have conceptual relatedness of words and phrases and not on the word-to-word translation and further it was focused to translate it in a very practical way.

**Expert Panel:** A bilingual expert panel was convened. The goal of this step was to recognize and determine the inadequate expressions or concepts of the translations, as well as any discrepancies between the forward translated version and the original version of the scale in this way shaped and the complete translated version of the scale was obtained.

**Backward Translation:** One particular technique for making conceptual equivalence across languages more likely is backward translation. In this step, the bilingual translator attempts to translate the scale back into the English version. In the preliminary translation, the emphasis was not on language clarity but on cultural and conceptual clarity.

**Final Version:** The final version of the instrument in the target language i.e. Urdu was obtained after following the above-mentioned procedure. After the backward translation, the original and backward-translated versions were compared and points of divergence were noted. The translations were then corrected which solely reflects the intent of the wording in the original language.

**Pilot study:** A pilot study was conducted to gain a preliminary analysis and understanding of the sample. The pilot study was conducted to establish the appropriateness and applicability of the questionnaires. Reliabilities of the assessment measures were also computed from the collected data and they validated the usage of these measures. The manner of approaching nurses distributing questionnaires and encouraging the return of these questionnaires was also tested. For this purpose, ten respondents were approached. It raised a few fundamental issues related to the process of conducting large-scale research such as the time required to fill out the questionnaires, refining the demographic variables and consideration of the input and insight provided by the people under study. In a nutshell, it provided a chance of ironing out the wrinkles in the research methodology in the most optimal way under the combined pressure of time and ethical considerations.

### **Ethical Considerations**

- Prior permission for the tools was sought from the respective authors for translations of the scales and their use in this study.
- Formal written permission was sought from the MS of the respective hospitals.
- Consent was taken from concerned participants and they were briefed about the research.
- The participants were given the right to withdraw from participation at any time they wish.
- The participants were ensured that the information required from them was held confidential and will not be used for any other purpose other than this research.

### **Results**

It was hypothesized that demographic variables, organizational learning, job satisfaction and work performance are related to each other. To test this hypothesis, Pearson's Product Moment Correlation Analysis was run and Table 1 indicates the relationship between these variables with each other. The correlation in Table 1 indicated that task performance has a significant positive relationship with contextual performance. Organizational learning and job satisfaction have no significant relationship with task performance, contextual performance and counterproductive work behaviour.

The relationship of demographic characteristics of participants with studying variables of the current study was also assessed. Education has a significant positive relationship with organizational learning. Age, marital status, current hospital experience and salary have a significant positive relationship with counterproductive work behaviour while several children have a significant negative relationship with counterproductive work behaviour. Further results revealed that marital status has a significant positive relationship with task performance. The hierarchal multiple regression was performed on organizational learning, task performance and contextual performance but there is no significant interaction between them.

Table 2 shows the moderating role of job satisfaction in the relationship between organizational learning and counterproductive work behaviour. The table portrays three models. The first model included

demographic variables and the model was significant  $F(6, 102) = 3.33$ ,  $p < .05$ ,  $R^2 = .16$  and revealed that no demographic variable is a significant predictor of counterproductive work behaviour. The second model included organizational learning and job satisfaction was also significant  $F(2, 100) = 2.57$ ,  $p < .05$ ,  $R^2 = .17$  but indicated that organizational learning and job satisfaction are not significant predictors of counterproductive work behaviour. The third model involving the interaction of organizational learning and job satisfaction was also significant  $F(1, 99) = 3.00$ ,  $p < .05$ ,  $R^2 = .22$  and revealed that there is a significant change in counterproductive work behaviour due to the addition of interaction terms of organizational learning and job satisfaction.

To understand the moderating effect of job satisfaction related to organizational learning and counterproductive work behaviour Figure 2 was used to demonstrate the change due to the addition of the interaction effect of organizational learning and job satisfaction. The graph indicates that organizational learning is not predicting counterproductive work behaviour whereas; job satisfaction is slightly predicting counterproductive work behaviour. In a way, with low job satisfaction organizational learning doesn't bring any change in counterproductive work behaviour. On the other hand, when job satisfaction is high, counterproductive work behaviour decreases as organizational learning increases.

## **Discussion**

The major finding of the study is that when job satisfaction is high, counterproductive work behaviour decreases as organizational learning increases. It means that when the individuals are satisfied, their learning within the organization increases that in turn decreases counterproductive work behaviour. It indicates the importance of satisfaction in performing tasks. According to Motowildo, et.al. (1997), employees gain experience through different learning activities and then incorporate that experience into the performance of the tasks. So if learning increases, it will also increase the satisfaction of employees which can be seen in the performance of that employee. Firstly, it is necessary for the nursing profession or any other profession to be satisfied with your job, which will let the individual explore further opportunities and this fact is also confirmed by literature (Anjum & Parvez, 2013). When nurses from small towns and cities come to Lahore and join public hospitals their satisfaction

with their jobs increases and so does their motivation to learn things. The training improves the quality of their services and skills (Thu, et.al. 2015).

The statistical analysis revealed that marital status has a significant positive relationship with counterproductive work behaviour which depicts that counterproductive work behaviour is more prevalent among married nurses. It can be explained in a way that in our society females are more responsible for the household and children and as the sample of the study is female nurses so it can be put a way that they have a greater responsibility towards their family so they feel quite burdened and this thing indulges them in counterproductive behaviour (Al-Lamky, 2007).

Another major worth considering the finding of the study is that when job satisfaction is low, organizational learning doesn't bring any change in counterproductive work behaviour. It is noticeably true that if the individual is not satisfied with the job he/she does it makes him/her least interested in any work-related activities and it is very much supported by the existing literature on job satisfaction (Weir, 2013).

So in light of the above-mentioned studies and current studies, it was found that various factors lead towards low job satisfaction, which further lead towards the least interest in any work-related activities either positive or negative. Several factors lead towards the dissatisfaction of the nurses with their job, which in turn decreases or completely eradicates their interest in their job. They are not interested in any kind of training, workshops or seminars to increase their expertise because there are lots of other factors that are problematic for them to work properly. The dissatisfaction with the job abandons them to take part in any learning activity going on within the hospitals and thus they continue to use their previously learned skills and the quest of learning new things from the organization disappears. They operate in the traditional ways without adapting to new ways of working which in turn decreases performance. Kalleberg (1997) in his theory of job satisfaction stated that employees having greater autonomy over their job characteristics helps them to obtain greater job rewards.

One other interesting domain of this finding is that nurses with low job satisfaction also don't have any interest in counterproductive activities. They are least interested to such an extent that doesn't even involve gossiping and complaining against the organization. This explains their least involvement in any kind of organization-related activity.

So this explains the importance of job satisfaction in this domain of performance that counterproductive behaviours of nurses are greatly affected by their satisfaction level from that job.

### **Limitations and Suggestions**

The generalizability of the study is low as only three hospitals of Lahore were included in the sample and private hospitals were not considered so to cater to this issue more hospitals should be considered for collecting data. Another limitation of the study is social desirability. Participants thought the researcher will think negatively about them. During the data, collection participants were very busy as it was their working hours. Data should be collected in the free time of the participant so that they can pay attention to the questions being asked.

It is suggested that above discussed limitations and suggestions be seriously attended to by future researchers so that more valid and authentic findings can be generated to unravel the hidden dimensions of this topic.

### **Strength of the Study**

The strength of the study is that these variables have been studied jointly in a pioneering attempt indigenously. Organizational learning and work performance have limited research evidence in the context of the nursing profession to the best of the researcher's knowledge.

The assessment measures utilized in the current study were translated into Urdu to increase the understanding of the concerned sample. Furthermore, these translated scales add to the domain of indigenously applicable research tools.

Furthermore, gender-specific analyses were performed whereas previous studies of a similar nature focused primarily on men as a sample. The covariates studied in this research work were also analyzed about the dependent variable, namely work performance. This led to an enhanced understanding of the intricacies related to nurses.

### **Implications**

So this study will help to enhance knowledge about these variables in the medical sector. The indigenous researches available on these variables are not sufficient enough to elaborate on the link of performance with other factors. The present study findings add to the preceding literature. One possible implication of the study is that it opens a new dimension for

researchers in a way that the relationship of organizational learning with other domains of performance can also be studied.

The findings can be used to understand the reasons for the counterproductive activities of nurses at hospitals and solutions can be explored to cater for the causes of these kinds of work behaviours. Due to the positive impact of job satisfaction on nurses' performance, pieces of training can be designed in a way that increases their satisfaction with the job as well as caters to their needs for work-related learning. For this purpose, a positive work environment should be developed and maintained.

### **Conclusions**

So it can be concluded that demographic variables including age, experience in the current hospital, salary and marital status are related to counterproductive work behaviours.

Job satisfaction has a very clear relationship with one aspect of performance i.e. counterproductive work behaviour. Nurses having low job satisfaction don't take interest in job-related training and workshops.

The nurses being satisfied with their job take part in learning activities carried out within the organization and grab every chance to increase their horizons of expertise. This urge for learning in turn decreases their counterproductive work behaviour at the workplace.

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Received April 24, 2018

Revisions Received June 17, 2022

Table 1

*Correlation Matrix of demographics, Organizational learning, job satisfaction, task performance, contextual performance and counterproductive work behavior*

Variables	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	M	SD
1.Age	-	-	.57***	.19	.86***	.77***	-	.69***	.16	-	-.00	.07	-.17	.01	.36***	29.61	6.58
		.78***					.06			.07							
2.MS	-	-	-	-	-	.64***	-	-	-.05	.03	-.08	-	.26**	-.01	-.31**	-	-
			.39***	.11	.69***		.03	.62***				.11					
3.NOC	-	-	-	.16	.42***	.31***	.01	.31**	.12	.06	.07	-	-.19	-.06	.26**	-	-
												.15					
4.Edu	-	-	-	-	.20*	.37***	-	.20*	.01	-	.30**	-	.15	.14	.01	-	-
							.08			.11		.11					
5.WE	-	-	-	-	-	.83***	-	.60***	.12	-	-.04	.04	.06	.06	.17	7.85	5.48
							.08			.01							
6.CHE	-	-	-	-	-	-	-	.60***	.20*	-	-.14	-	-.02	.11	.11*	-	-
							.09			.11		.06					
7.WH	-	-	-	-	-	-	-	-.02	.06	.14	.11	-	.04	.02	.01	-	-
												.09					
8.Salary	-	-	-	-	-	-	-	-	.01	-	-.06	.05	-.06	.08	.33***	32521	19776
										.17							

9.FS	-	-	-	-	-	-	-	-	-	-	-	.11	.06	.12	-	-	
												.11	.04				
10.Living	-	-	-	-	-	-	-	-	-	-	-	-	-.07	-.02	-.09	-	-
													.16				
11.OL	-	-	-	-	-	-	-	-	-	-	-	.15	.00	-.08	-.03	45.21	7.61
12.JS	-	-	-	-	-	-	-	-	-	-	-	-	-.03	.13	-.04	131.57	21.69
13.TP	-	-	-	-	-	-	-	-	-	-	-	-	-	.23*	.00	4.15	.57
14.CP	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-.02	3.72	.90
15.CWB	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2.27	.10

p<.05; \*\*p<.01; \*\*\*p<.001, MS= Marital status, NOC= No of children, Edu= education, WE= Work experience, CHE=Current hospital experience, FS= Family system, OL= Organizational learning, JS= Job satisfaction, TP= Task performance, CP=.Contextual performance, CWB= counterproductive work behavior

Table 2

*Hierarchical Multiple Regression (Moderation) Analysis of Organizational learning and Job satisfaction as Predictors of Counterproductive work behavior (N=110)*

<b>Predictors</b>	<b>Counterproductive work behavior</b>	
	$\Delta R^2$	<b>B</b>
Step 1	.16*	
Age		.23
Marital Status		-.07
Number of children		.09
Education		.04
Current hospital experience		-.17
Salary		.22
Step 2	.01*	
Organizational learning		-.07
Job satisfaction		-.05
Step 3	.04*	
Organizational learning x Job satisfaction		-.23*
Total $R^2$	.21	

\* $p < .05$ , \*\* $p < .01$ , \*\*\* $p < .001$

*Figure 2*

Interaction Effect of Organizational learning and Job satisfaction on Counterproductive work behavior among nurses.

