



Mediation role of work engagement in the effect of healthcare professionals' perception of organizational trust and organizational support on perception of organizational cynicism

Mustafa Filiz¹ · Yalçın Karagöz² · Olkan Budak³ · Nurgül Erdal⁴

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Abstract

The aim of this study is to investigate the mediating role of work engagement in the effect of healthcare workers' perceptions of organizational trust and organizational support on organizational cynicism. A total of 306 healthcare workers participated in the research. Data was collected using scales for organizational trust, organizational support, organizational cynicism, and work engagement. Confirmatory factor analysis was conducted to validate the structure of the scales. The study employed PATH analysis to determine the mediating role of work engagement. The data were analyzed using SPSS and AMOS software. The findings established a negative relationship between perceptions of organizational trust and organizational support with organizational cynicism, which is partially mediated by the level of work engagement. Additionally, the study identified a negative relationship between the level of work engagement and organizational cynicism. Conversely, the study concluded that perceptions of organizational trust and support have a positive impact on work engagement levels. This research makes a significant contribution to understanding the effects of healthcare workers' perceptions of organizational trust and support on organizational cynicism and work engagement. Furthermore, these results could provide a valuable foundation for developing effective strategies in the management and practice of health organizations.

Keywords Work engagement · Health professionals · Organizational trust · Organizational support · Organizational cynicism

Introduction

Organizational cynicism, a widespread sentiment among today's employees, is defined by a belief that the organization lacks integrity, accompanied by negative emotions and critical behaviors (Durrah et al., 2019). Numerous factors contribute to this sentiment, but the role of organizational trust and organizational support stands paramount in shaping employees' perceptions, especially within healthcare settings (Di Stefano et al., 2018). Healthcare professionals, due to the nature of their job, require high levels of trust in their organization to effectively cater to patients and manage occupational stress (Ruotsalainen et al., 2015). Furthermore, the perception of organizational support, which encompasses the degree to which workers believe their organization values their contributions and cares about their well-being, has been identified as a critical determinant of

✉ Mustafa Filiz
mustafa2108@artvin.edu.tr
Yalçın Karagöz
yalcinkaragoz@duzce.edu.tr
Olkan Budak
olkan_budak@hotmail.com
Nurgül Erdal
nurgul.erdal@istanbul.edu.tr

¹ Artvin Coruh University, Artvin, Turkey

² Düzce University, Düzce, Turkey

³ Beykent University, Istanbul, Turkey

⁴ Istanbul University, Istanbul, Turkey

several work-related outcomes, including commitment and job satisfaction (Rhoades & Eisenberger, 2002).

While the direct effects of organizational trust and support on cynicism are evident in the literature, there's a burgeoning interest in the intermediary mechanisms at play. Recent studies, like the one by Ahmadizad and Pourahmadi (2015), have begun to explore the mediating role of work engagement in this relationship. Work engagement, described as a positive, fulfilling work-related state of mind characterized by vigor, dedication, and absorption (Mazzetti & Schaufeli, 2022), has potential implications on how healthcare professionals internalize and react to their perceptions of organizational trust and support. By understanding the intricate interplay between these variables, healthcare institutions can foster a more positive, trusting, and engaged workforce, ultimately reducing the pervasive sentiment of cynicism.

The aims of the present study are to investigate the intricate relationships between organizational cynicism, organizational trust, organizational support, and work engagement, particularly within the healthcare sector. The primary focus is to determine the mediating role of work engagement in the link between healthcare professionals' perceptions of organizational trust and support, and their perceptions of organizational cynicism. Through an in-depth exploration of these dynamics, the study seeks to provide a comprehensive understanding of how healthcare institutions can establish a positive, trusting, and engaged workforce that subsequently reduces organizational cynicism. By analyzing the interactions between these critical variables, the study aims to offer actionable insights for healthcare institutions, emphasizing the importance of fostering environments that promote trust, support, and engagement while diminishing sentiments of cynicism.

Theoretical foundations

Organizational trust

In essence, trust epitomizes the degree of assurance an individual places in another entity, be it a person or an organization, anticipating fair, ethical, and consistent behavior (Kanungo & Mendonca, 1996). Trust forms a pivotal cornerstone of efficacious organizational affiliations (Cosgrove-Sacks, & Dembinski, 2012). It embodies an individual's anticipation of genuine transparency and adherence to commitments by other entities, even in scenarios conducive to personal gain, without expecting benevolent endeavors (Lansing et al., 2023). Organizational trust encompasses faith in the broader institution, peers, and leadership. It signifies the alignment of employees with organizational ethos, fostering a symbiotic commitment that caters to the

institution's long-term objectives (Tsai, 2011). This category of institutional trust integrates the trust vested in leadership and the foundational organization. When employees harbor trust in their affiliating institutions, it not only emboldens them to undertake risks but also heightens their vigilance against potential threats (Kleynhans et al., 2022). Such trust is perceived as the employee's conviction in their organizational hierarchy and a manifestation of their allegiance; herein, they perceive top-tier organizational directives as inherently beneficial, sans reservations (Bin Jomah, 2017). Putra, & Pramusiwi (2023) and Purwanto et al. (2021) define trust in an organization in three ways: belief in the integrity, character, and ability of leaders; trust in the mutual relations of employees; and honest behavior of employees towards each other. The healthcare sector exemplifies an industry where collaborative endeavors are paramount, making trust an indispensable asset. Establishments characterized by a robust organizational trust invariably outshine their counterparts in terms of success metrics (Bosch & Mansell, 2015).

McAllister (1995) distinguishes between emotional and cognitive trust. Cognitive trust is based on rational thinking, while emotional trust is based on the emotional bond between people. This distinction challenges the traditional view that trust is solely the result of rational calculation. Research and theory have increasingly recognized the importance of emotions in the trust relationship.

Perception of organizational support

Organizational support perception can academically be conceptualized as employees' formulated cognitions regarding the extent to which the institution values their well-being, job satisfaction, and contributions (Rhoades & Eisenberger, 2002). This construct encompasses employees' discernment of the organization's willingness to provide requisite acknowledgments, accolades for superior professional performances, and cater to intrinsic necessities like respect and validation (Fan et al., 2023).

When employees discern their socio-cultural anticipations being adequately addressed, their heightened organizational support perceptions typically precipitate heightened organizational commitment. Subsequently, this augments their occupational performances, culminating in discretionary behaviors advantageous to the institution (Cappelli & Neumark, 2001). A pivotal element in bolstering the perception of organizational support involves the institution's active consideration and integration of employees' innovative propositions, feedback, and constructive critiques (Anderson et al., 2014). In professional milieus where individuals sense a genuine valuation of their contributions, coupled with consistent respect and support, their subjective well-being and contentment surge. In the contemporary

organizational landscape, fostering such an ambiance of well-being and contentment becomes paramount. Employees, when they discern unwavering institutional backing, exhibit enhanced comfort and efficacy in their professional roles, resulting in elevated performance trajectories (Martin et al., 1998).

Perception of organizational cynicism

Historically contextualized, cynicism denoted an estrangement from societal norms and a profound reverence for the purity of nature. In the modern academic discourse, however, cynicism is delineated as a complex psychological trajectory, evoking sentiments of mistrust, skepticism, and pervasive dubiety towards others. This is accentuated by underlying feelings of despondency, disenchantment, and existential fatigue (AL-Abrrow, 2022). Contemporary academic discourse aligns cynicism with a palpable degradation of foundational ethical tenets such as rectitude, integrity, and unwavering loyalty on an individual plane. When viewed through the lens of organizational dynamics, cynicism signifies an employee's contrarian orientation towards the extant organizational milieu (Durrah et al., 2019). Such tendencies typically materialize based on prior experiences or deeply embedded personality structures, manifesting as antagonistic beliefs, emotional dispositions, and concomitant behaviors (Fleeson et al., 2002). In a more circumscribed interpretation, organizational cynicism epitomizes an individual's dissenting viewpoints vis-à-vis institutional methodologies, administrative stratagems, and overarching functionalities. This dialectic is heightened when there exists a discord between individual aspirations and organizational imperatives (Durrah et al., 2019). Deeply cynical employees often nurture the premise that institutional frameworks and their associates are bereft of elemental moral pillars like transparency, distributive justice, and genuineness, thus engendering perceptions of organizational perfidy (Kim et al., 2019).

If an employee encounters an undesirable situation within the organisation and lacks the power to prevent it, they may resort to cynicism as a coping mechanism (AL-Abrrow, 2022). According to Andersson (1996), organisational cynicism refers to attitudes towards general or specific situations that can be explained by concepts such as distrust and irritability towards people, communities, ways of thinking, social skills or organisations, hopelessness, and unmet expectations. Brandes (1997) defined organisational cynicism as a situation resulting from the experiences of both individuals and the organisation's employees. According to Bernerth et al. (2007), organisational cynicism is the total of employees' beliefs that their organisation lacks commitment to moral values and ignores characteristics such as

justice, honesty, and sincerity for the sake of organisational interests. Laursen (2009) defined organisational cynicism as negative feelings and lost beliefs based on life experiences.

Dean et al. (1998) contributed to the conceptualisation of organisational cynicism, defining it as employees' negative attitudes towards the organisation. The authors explain organisational cynicism with three dimensions: cognitive, emotional and behavioural.

Cognitive; The cognitive dimension refers to negative emotions such as anger, resentment, criticism, exclusion, and contempt. It includes the belief that the organization lacks honesty, integrity, and justice (Dean et al., 1998).

Emotional; The emotional dimension involves intense emotions that arise from cynical beliefs prevalent in organizations. Therefore, this dimension concerns negative issues within organisations and the emotional reactions of employees towards them, such as anger, shame, and disappointment (Brandes & Das, 2006).

Behavioural; The behavioural dimension is expressed through negative employee behaviours towards their organisations, including verbal expressions and actions that suggest a lack of honesty and sincerity. Furthermore, this dimension encompasses severe criticism of the organization and its behaviours, including expressions of hopelessness, pessimism, condescension, and sarcasm. Additionally, these behaviours may involve intense emotions such as disrespect, anger, boredom, and embarrassment (Abraham, 2000).

Work engagement

Engagement in work is a multifaceted construct that has been explored and defined in various ways by scholars over the years. Several researchers have provided diverse terminologies and frameworks to understand this concept. For instance: Kahn (1990) referred to it as "individual participation". Rothbard (2001) labeled it "role participation". Harter et al. (2002) termed it "participation of employees". Schaufeli et al. (2006) and Schaufeli et al. (2019) have described it as "job participation". Mazzetti et al. (2018) emphasized "employee participation", while Rich et al. (2010) introduced a unique perspective called "particular job participation". Furthermore, Schaufeli et al. (2019) diversified it into two categories: "task participation" and "working group participation". These various terminologies can be further understood through three sub-dimensions: vigor, concentration, and dedication. **Vigor:** This refers to the capacity of an employee to remain energetic, psychologically resilient, and persistently committed to their tasks, even amidst challenging circumstances. **Concentration:** This

denotes an employee's complete immersion in their tasks, often to the extent that they lose track of time, experiencing satisfaction and fulfillment in the process. **Dedication:** This emphasizes the commitment of an employee to perform their duties with utmost involvement, even when confronted with work-related adversities (Mazzetti et al., 2018).

Mazzetti et al. (2018) stated that work engagement has two main dimensions: vigour and dedication. Immersion, on the other hand, is a longer-lasting mood. The effect of organisational support on work engagement is more long-term and effective than individual support, such as colleague-supervisor (Biggs et al., 2014). According to Rahmadani et al. (2020), employees who feel autonomous and have authority experience higher levels of work engagement. Work engagement refers to being fully absorbed in one's work, with busy individuals often losing track of time and becoming completely immersed in work activities (Bakker et al., 2023). Work engagement has consistently been shown to be a reliable indicator of both in-role and out-of-role performance across various occupations and cultures, as it enables employees to dedicate a significant amount of energy to their work and maintain a high level of focus (Bakker et al., 2012; Christian et al., 2011). Mazzetti et al. (2018) stated that work engagement has two main dimensions: vigour and dedication. Immersion, on the other hand, is a longer-lasting mood.

The comprehension of work engagement through these diverse lenses underscores its significance and the intricate nuances associated with it in the realm of organizational behavior and psychology.

Theoretical background and hypotheses development

This study examines a critical area within healthcare institutions where employee well-being and positive attitudes directly impact patient care and organizational effectiveness.

Organizational Trust and Support: As emphasized by Cosgrove-Sacks and Dembinski (2012), trust forms the basis of any professional relationship and influences employees' perceptions and attitudes. Similarly, organizational support is argued to promote positive feelings among employees by providing perceived support from the organization (Rhoades & Eisenberger, 2002), and both factors are thought to reduce feelings of cynicism. Work engagement encompasses a deeper level of engagement than simple engagement (Mazzetti et al., 2018). Alagaraja and Shuck's (2015) study suggests that trust and support factors contribute to high levels of engagement, making employees feel

aligned with organizational goals and valued by the institution. Conversely, disengagement can increase cynicism (Robinson, 1996).

Organizational trust and support serve as fundamental elements that foster positive work environments and employee well-being (Fan et al., 2023). However, the emergence of organizational cynicism presents a challenging issue for organizational culture, weakening employees' morale, commitment, and performance (Durrah et al., 2019). Understanding the role of work engagement as a tool to develop effective strategies for strengthening organizational effectiveness is crucial. Trust and support lead to loyalty, alignment, and a sense of value among employees, resulting in higher levels of engagement. High engagement serves as a buffer against cynicism by fostering a sense of purpose among employees and reducing the likelihood of harboring negative organizational perceptions.

The mediating role of work engagement in the effect of organizational trust perception on organizational cynicism

In contemporary organizational studies, there has been a growing interest in understanding the complex interplay between organizational trust, work engagement, and cynicism. This interrelation is especially salient in sensitive sectors such as healthcare, where professionals' trust in their organization can directly and indirectly influence patient care outcomes and organizational efficacy.

Hypothesis 1: *The level of work engagement has a mediating role in the effect of organizational trust perceptions of healthcare professionals on organizational cynicism perceptions.*

To understand this hypothesis, it is essential to break down the sequential relationships and the underlying rationale:

Hypothesis 1a: *Organizational trust perceptions of health workers affect their perceptions of organizational cynicism.*

Trust, as discussed by Robinson (1996), is the foundation of any professional relationship and can deeply influence employees' perceptions and attitudes. When healthcare professionals perceive a high level of trust in their organization, it might mitigate their feelings of cynicism, as trust tends to foster a sense of loyalty and commitment (Robinson, 1996).

Hypothesis 1b: *Organizational trust perceptions of healthcare professionals affect their work engagement levels.*

Trust can be a powerful motivator, leading to increased engagement at work. According to Alagaraja and Shuck (2015), employees who believe their organization values and supports them tend to exhibit higher levels of engagement, as they feel an inherent alignment with organizational goals and objectives.

Hypothesis 1c: *Perceptions of work engagement of health workers affect their perceptions of organizational cynicism.*

Work engagement, as highlighted by Ibrahim and Al Falasi (2014), is not just about mere participation but involves a deeper emotional and cognitive connection to one's job. High levels of engagement may act as a buffer against feelings of cynicism, as deeply engaged employees often experience a sense of purpose and are less likely to harbor negative perceptions about the organization. Conversely, those who are disengaged may become more susceptible to cynical attitudes, questioning the organization's motives and doubting its integrity (Abraham, 2000).

In sum, this line of inquiry suggests that work engagement may play a crucial role in understanding how trust influences cynicism. By understanding these dynamics, healthcare organizations can better strategize their internal policies, fostering environments that promote trust and engagement while minimizing cynicism.

The mediating role of work engagement in the effect of organizational support perception on organizational cynicism

The fabric of contemporary organizational literature is increasingly enriched by studies exploring the dynamics between organizational support, work engagement, and cynicism, particularly in sectors that are paramount to societal wellbeing, such as healthcare. Within such sectors, the perceptions of professionals regarding the support they receive from their institutions can significantly affect both their engagement and feelings of cynicism, with ripple effects on overall organizational performance and patient care.

Hypothesis 2: *The level of work engagement has a mediating role in the effect of health workers' perceptions of organizational support on their perceptions of organizational cynicism.*

The underlying rationale for this hypothesis is structured through the dissection of its components:

Hypothesis 2a: *Organizational support perceptions of health workers affect their perceptions of organizational cynicism.*

Organizational support theory (Eisenberger et al., 1986) posits that employees gauge the extent to which their organization values and cares for them. A favorable perception of organizational support is thought to reduce feelings of cynicism. Conversely, when health professionals feel unsupported or undervalued, they may develop or amplify cynical views towards the organization, doubting its integrity and intentions (Ruotsalainen et al., 2015).

Hypothesis 2b: *Organizational support perceptions of healthcare professionals affect their work engagement levels.*

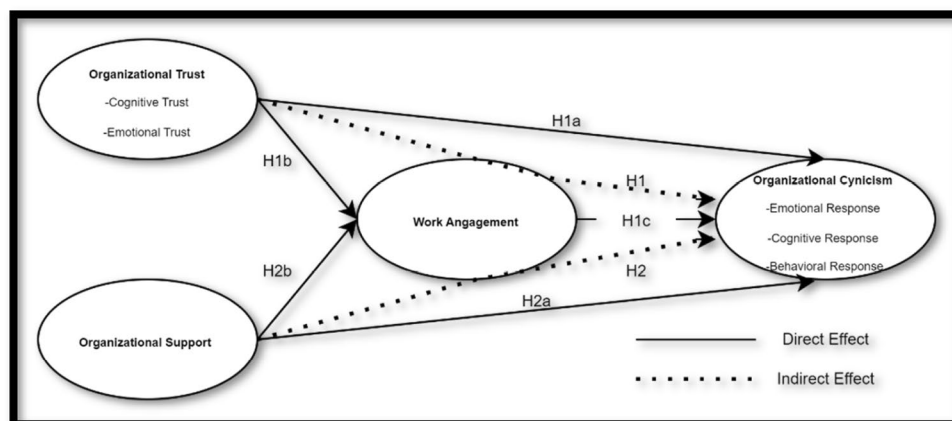
As illuminated by studies like that of Bonaiuto et al. (2022), perceived organizational support can be a determinant of work engagement. Employees who feel supported by their organization are more likely to be engaged, as they sense a reciprocity where their contributions are matched by the organization's commitment to their well-being (Wayne et al., 2002). Engaged workers are likely to feel a stronger alignment with organizational goals and objectives, thus fostering a deeper emotional and cognitive connection to their tasks (Dehler & Welsh, 2010; Clercq et al., 2014).

In essence, by parsing the intricate relationship between organizational support, work engagement, and cynicism, we can glean insights into the psychosocial mechanisms that underpin these dynamics in healthcare settings. As such, this line of inquiry has profound implications for strategies aimed at fostering work environments that amplify support and engagement, ultimately curtailing cynicism.

Based on these data from the literature, the model shown in Fig. 1 below were developed in the study.

The research has significant implications for healthcare institutions. Previous studies have evaluated the impact of perceptions such as organizational trust, organizational support, and work engagement on organizational cynicism. However, this study investigates both organizational factors (organizational trust/support) and personal factors (work engagement) together in a single model with a sample of healthcare workers to understand cynicism comprehensively. This study offers a holistic approach to understand organizational cynicism using a specific sample.

Determining the role of work engagement in alleviating cynicism can assist in illuminating strategies to promote positive employee attitudes and prevent burnout. Identifying the impact of trust and support on work engagement can enable the development of targeted interventions for creating more reliable and supportive work environments.

Fig. 1 The hypothesized structural model

This can ultimately enhance employee well-being and organizational outcomes. Addressing these dynamics in the unique and challenging healthcare context can guide tailored approaches to manage the specific challenges of this workforce.

Methods

Participants

The universe of the study was realized with the voluntary participation of health professionals working in various hospitals in Turkey and 306 people participated. A convenience sampling technique was followed in determining the sample size and collecting data. This method was preferred because the data could be collected in a short time and the research cost was low (Rossi et al., 2013).

Of the health workers participating in the study, 62.1% were female and 37.9% were male, 31.4% married and 68.6% were single, 1% were secondary school graduates, 16% were high school graduates, % It was observed that 69.6% of them were university graduates and 13.4% of them were graduates. In addition, 6.9% of the participants were doctors, 42.2% nurses/midwives, 3.9% administrative workers, 53.9% nurses, 12.4% health technicians, 6.5% auxiliary services, 2.0% laboratory workers and 22.2% other occupational groups, 57.5% in public hospitals, 19.62% in private hospitals, 5.9% in urban hospitals and 17% in university hospitals.

Data collection tools

Research data were obtained by using scales of organizational trust, organizational support, organizational cynicism, work engagement, and personal information form. The research questionnaire consists of 51 questions and five parts.

The personal information form section consists of 6 questions asked to determine the gender, age, marital status, educational status, occupation, and hospital type of the healthcare professionals who participated in the survey. The questions in this section were prepared by the researchers by scanning the literature.

The organizational trust scale was developed by Cummings and Bromiley (1996) to reveal the organizational trust level of employees. While the origin of the organizational trust scale consists of 62 items, the short form of the scale consists of 12 statements. The short form of the scale was used in the study. The scale is in the form of a five-point Likert scale. The scale has two sub-dimensions, cognitive confidence, and emotional trust. 5 of 12 items (4, 5, 6, 10, 12) measure organizational trust emotionally, while 7 items (1, 2, 3, 7, 8, 9, 11) measure organizational trust cognitively. In the emotional dimension, the organizational trust perceptions of the employees are revealed in terms of feelings, while in the cognitive dimension, the organizational trust perceptions of the employees are revealed in terms of thought. Cummings and Bromiley (1996) found the Bentler's Comparative Fix Index of the scale to be 0.98.

The organizational support scale used in the research questions was developed by Eisenberger et al. (1986) to measure the level of organizational support perceived by employees. It was shortened and reduced to 10 items by Armstrong-Stassen and Ursel (2009). The scale is one-dimensional and five-point Likert. Armstrong-Stassen and Ursel (2009) found the Cronbach Alpha coefficient of the scale to be 0.85.

The organizational cynicism scale used in the research was developed by Brandes (1997). It consists of 14 questions and three sub-dimensions in total. These dimensions are cognitive response (1,2,3,4,5,11), sensory response (6,7,8,9,10), and behavioral response (12,13,14). The scale is a five-point Likert type. It includes the grudge, hatred, humiliating and critical consciousness, emotion, and behavior of the employee towards his/her institution. Brandes

(1997) found Cronbach's alpha coefficient of the scale to be 0.91.

Work Engagement Scale Developed by Schaufeli et al. (2002), the scale consisted of 24 questions and three sub-dimensions when it was first developed. In the research, 9 questions and the short version of the scale developed by Schaufeli et al. (2006) were used. The scale is a five-point Likert type. The Cronbach Alpha coefficient of the scale was determined as 0.91 by Schaufeli et al. (2002).

Ethical considerations and data collection

To suit the appropriateness of the study, an application was made to Artvin Coruh University Scientific Research and Publication Ethics Committee. With the decision of the Ethics Committee dated 28.02.2022 and dated E-18457941-050.99-41583, permission was obtained regarding the ethical compliance of the research.

The data collection process began by informing participants of the study's purpose and obtaining their consent. A questionnaire was sent to participants, providing a brief explanation of the study's general aims, and their consent was obtained.

Data collection took place between 1 April 2022 and 10 February 2023. Questionnaires were distributed to participants via email and social media platforms, with a small portion of data collected through face-to-face interaction. The content remained unchanged from the source text. Questionnaires were distributed to participants via email and social media platforms, with a small portion of data collected through face-to-face interaction.

The study employed a mixed-methods approach to data collection. This method allowed for easy access to a wide audience. The language used was clear, concise, and objective, with a formal register and precise word choice. The text adhered to conventional academic structure and formatting, with consistent citation and footnote style. The questionnaire was easily completed and data was securely collected using Google Forms. Respondents were reached on a variety of platforms through email and social media accounts, ensuring recognition and enabling a diverse and comprehensive data set. However, some participants preferred the more personal and intimate experience of face-to-face interaction, which also provided an opportunity for researchers to engage directly with them.

Table 1 Descriptive statistics

Variable	N	Mean	SD	Variance
Organizational trust	306	3.18	0.805	0.649
Organizational support	306	3.02	0.882	0.778
Work engagement	306	3.50	0.802	0.643
Organizational cynicism	306	2.85	0.827	0.685

Analysis of data

For the data obtained, missing data analysis was carried out and it was seen that 13 questionnaires were filled incompletely. Therefore, 12 out of 319 questionnaires were not included in the analysis and the analyzes were carried out on 306 questionnaires. In the study, an evaluation was made of the numerical percentages of the demographic information. Then, factor analysis, CR (CompositeReliability), AVE(Average Variance Extracted) and reliability analysis were performed for the scales of organizational trust, organizational support, work engagement, and organizational cynicism used in the questionnaire. In the next part of the study, the measurement model and structural model, which constitute the basic working principle of SEM studies, were established and after this stage, the hypotheses put forward for the study were evaluated by making PATH analysis with hidden variables. IBM SPSS 25 and AMOS 23 package programs were used to analyze the data.

Results

Descriptive statistics

Within the scope of the research, first of all, the descriptive properties of the variables were examined. The descriptive findings obtained are given in Table 1.

The average value for the organizational trust (3.18), organizational support (3.02), and organizational cynicism (2.85) variables was preferred by the participants, while the average value was calculated as 3.50 for the work engagement variable.

In the study, prior to conducting the PATH analysis, confirmatory factor analysis was performed to assess the validity and reliability of the scales. Additionally, the CR, AVE, and Cronbach's Alpha coefficients for the sub-dimensions of the scales were calculated. The relevant results are presented in Table 2.

In Table 2, the general reliability coefficient of the items is $\text{Alpha}=0.676$. Since this value is between $0.60 \leq r < .80$, the scale is quite reliable. The reliability coefficient for cognitive confidence was $\text{alpha}=0.907$, for emotional confidence 0.855, for organizational support 0.916, for work engagement 0.921 for emotional response 0.916, for cognitive response 0.880, and for behavioral response 0.820. Since these values are between $0.80 \leq \alpha < 1.00$, the scales were decided to be highly reliable.

Since the AVE values calculated in Table 2 are greater than 0.50 and the CR values are greater than 0.70, the factors have high construct reliability and thus concordance validity.

Table 2 Factor analysis results of scales, CR, and AVE values

Construct/Items		Standardized loading	Cronbach's α	AVE	CR
Cognitive trust	CT7	0.707	0.907	0.530	0.880
	CT6	0.809			
	CT5	0.843			
	CT4	0.727			
	CT3	0.630			
	CT2	0.706			
	CT1	0.632			
Emotional trust	ET3	0.563	0.855	0.530	0.740
	ET2	0.825			
	ET1	0.776			
Organizational support	OS10	0.601	0.916	0.570	0.890
	OS8	0.784			
	OS7	0.732			
	OS5	0.813			
	OS4	0.853			
	OS3	0.777			
	OS1	0.685			
Work engagement	WE1	0.953	0.921	0.790	0.940
	WE2	0.949			
	WE3	0.964			
	WE4	0.942			
	WE5	0.875			
	WE6	0.918			
	WE7	0.855			
	WE8	0.676			
	WE9	0.816			
Emotional response	ER1	0.823	0.916	0.69	0.90
	ER2	0.842			
	ER3	0.674			
	ER4	0.885			
	ER10	0.903			
Cognitive response	CR1	0.843	0.880	0.570	0.870
	CR2	0.846			
	CR3	0.799			
	CR4	0.790			
	CR5	0.555			
	CR6	0.631			
Behavioral response	BR1	0.666	0.820	0.600	0.780
	BR13	0.810			
	BR14	0.839			

The regression values of the items in Table 2 show the power of the observed variables to predict latent variables, that is, factor loadings. Factor loadings are important as the “*p*” values for each binary relationship above are less than 0.001. The significant *p* values indicate that the items were loaded correctly on the factors.

In addition, the variance (Var(ei)) values of the error terms are also important ($p < .001$). In addition, the standardized regression coefficients of the items being 0.555 and larger indicate that the power to predict latent variables, that is, the factor loadings of each item, is high.

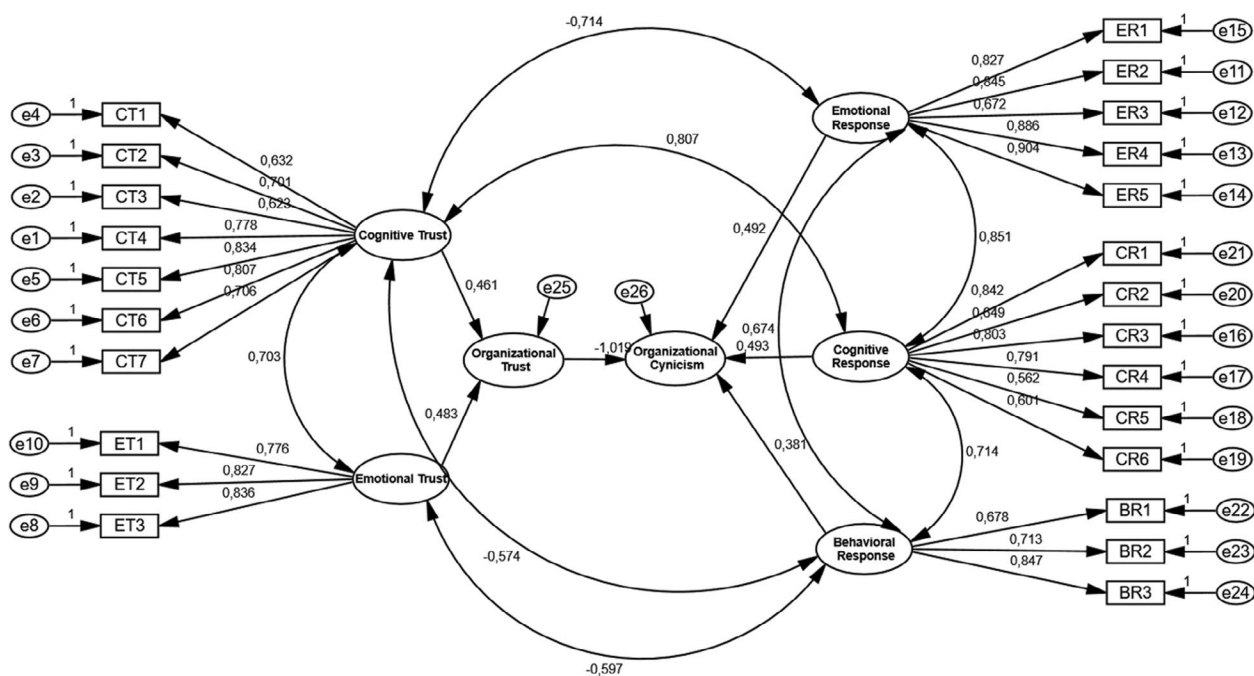
The mediating role of work engagement in the effect of organizational trust perception on organizational cynicism

PATH analysis with hidden variables is an analysis that produces more reliable results than PATH analysis with observed variables. Based on this variable, it was decided to examine the research model in three stages. Accordingly, the mediating role of work engagement in the effect of organizational trust perceptions of health professionals on organizational cynicism, the mediating role of work engagement in the effect of organizational support perceptions on organizational cynicism, and the PATH analysis for the whole model of the research was conducted. Findings will be shared within this framework.

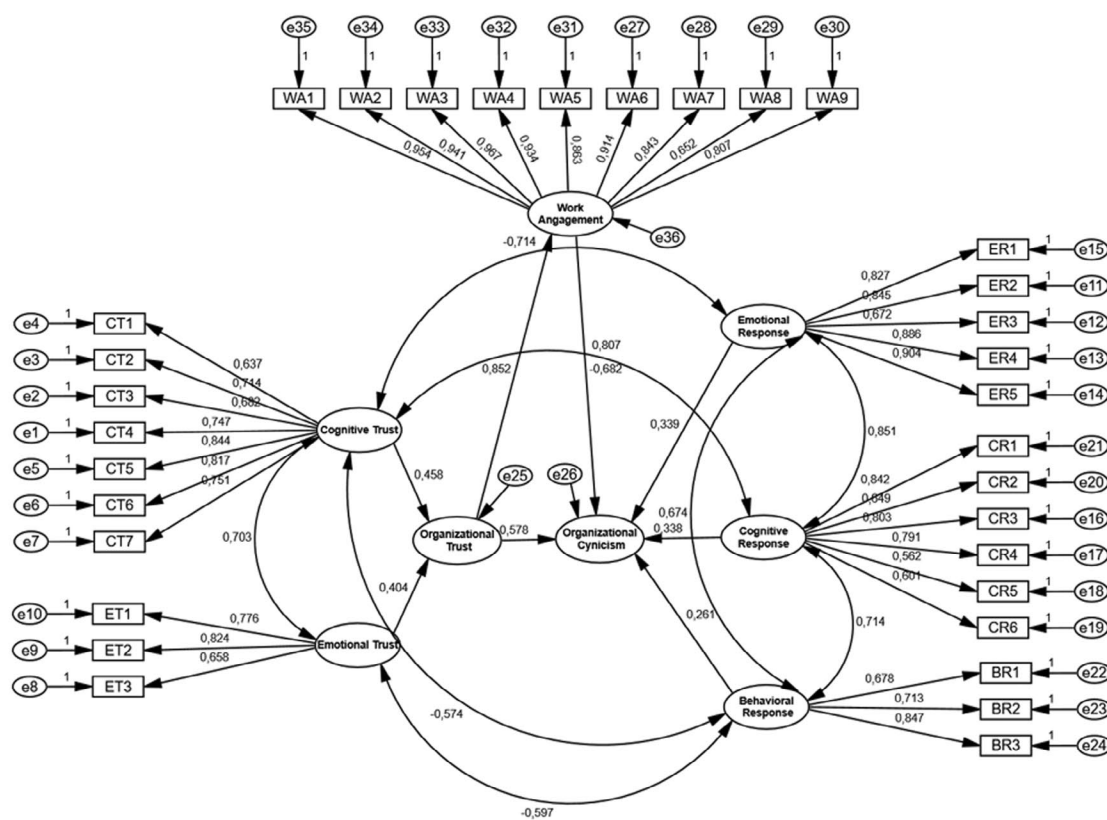
In the study, first of all, the effect of the independent variable on the dependent variable was examined. In Fig. 2a, it is seen that the direct effect of organizational trust, which is included in the research model as an independent variable, on the dependent variable of organizational cynicism is significant ($p < .001$). The standardized coefficient between the independent variable (organizational trust) and the dependent variable (organizational cynicism) is -1.019. In other words, if organizational trust increases by one unit, organizational cynicism will decrease by 1.019 times. On the other hand, it can be said that while cognitive trust affects organizational trust at a rate of 0.461, emotional trust also affects organizational trust at a rate of 0.483 ($p < .001$). In addition, it can be argued that emotional response affects organizational cynicism with a rate of 0.492, cognitive response with a rate of 0.493, and behavioral response with a rate of 0.381 ($p < .001$).

When work engagement was included in the model alongside organizational trust, the effect of organizational trust on organizational cynicism was statistically significant ($p < .001$); however, its impact decreased. Figure 2a shows that only the standardized regression coefficient between organizational trust and organizational cynicism was significant ($p < .001$), with a value of -1.019. Work engagement and organizational trust were not included together in the model. When included in the model, as shown in Fig. 2b, the standardized coefficient between organizational trust and organizational cynicism decreased from -1.019 to -0.578 ($p < .001$). Therefore, it can be concluded that work engagement plays a semi-mediating role.

In addition, it can be said that cognitive trust is effective on organizational trust with a rate of 0.458 and emotional trust at a rate of 0.404 ($p < .001$). Similarly, it was calculated that the emotional response was 0.339, the cognitive response was 0.338, and the behavioral response was 0.261 effective on organizational cynicism ($p < .001$). Based on



a Alternative models



b Alternative models

Fig. 2 a, b Alternative models

these findings, hypotheses H1, H1a, H1b, and H1c have been accepted.

The model of the variables is in Fig. 2b and the fit values in the model are in Table 3.

The fit values examined show that the data fit the model well. The good fit of the data to the model shows that the model has construct validity. Therefore, there is construct validity of the effects in the mediator role model of work engagement in the effect of organizational trust of health workers on organizational cynicism. In conclusion, Hypotheses H1, H1a, H1b and H1c have been accepted.

The mediating role of work engagement in the effect of organizational support of health workers on organizational cynicism

In the study, the mediating role of work engagement in the impact of organizational support, the second independent variable, on organizational cynicism was examined. Firstly, the effect of the independent variable on the dependent variable was investigated. According to Fig. 3a, the direct effect of organizational support on organizational cynicism is statistically significant ($p < .001$). The standardized coefficient between organizational support and organizational cynicism was -0.392 .

In addition, 0.445 emotional responses, 0.440 cognitive responses, and 0.345 behavioral responses were found to be effective on organizational cynicism ($p < .001$).

In Fig. 3b, when work engagement was included in the model along with organizational support, the effect of organizational support on organizational cynicism decreased, although it remained statistically significant ($p < .001$). Figure 3a shows a statistically significant ($p < .001$) standardized coefficient of -0.392 between organizational support and organizational cynicism. The standardized coefficient for organizational support and organizational cynicism decreased from -0.392 to -0.301 ($p < .001$). Therefore, it can be concluded that work engagement plays a semi-mediating role.

In addition, in Fig. 3b, it is seen that the effect of emotional response, cognitive response, and behavioral response on organizational cynicism is statistically significant ($p < .001$). Based on these findings, hypotheses H2, H2a and H2b have been accepted.

Table 3 Evaluation of the proposed model with goodness-of-fit measures

Model	NPAR	CMIN	DF	P	CMIN/DF
Default model	87	1241,140	474	,000	2,618
Saturated model	561	,000	0		
Independence model	33	7948,441	528	,000	15,054
CMIN/DF = 2,618 < 3, $0.90 \leq IFI = 0.921$, $0.90 \leq CFI = 0.917$, $90 \leq TLI = 0.904$, $RMSEA = 0,073 < 0,08$, $SRMR = 0.0381 < 0.08$					

The model of the variables is given in Fig. 3 and the fit values within the model are given in Table 4.

The fit values examined show that the data fit the model well. The good fit of the data to the model shows that the model has construct validity. Therefore, there is construct validity of the effects in the mediator role model of work engagement in the effect of organizational support of health workers on organizational cynicism. In conclusion, Hypotheses H2, H2a, and H2b have been accepted.

Testing the model totally

In order to determine the effect of the organizational trust and organizational support independent variables used in the research on the organizational cynicism independent variable, the PATH analysis for the whole model was conducted in order to determine the effect of the work engagement mediator variable. In Fig. 4, the results of the impact analysis, in which the entire model was analyzed, are shown.

Model fit values in Table 5 were obtained as CMIN/DF = 2.682 < 3 and RMSEA = 0.074 < 0.08. The fit values examined show that the data fit the model well. The good fit of the data to the model shows that the model has construct validity (Table 6).

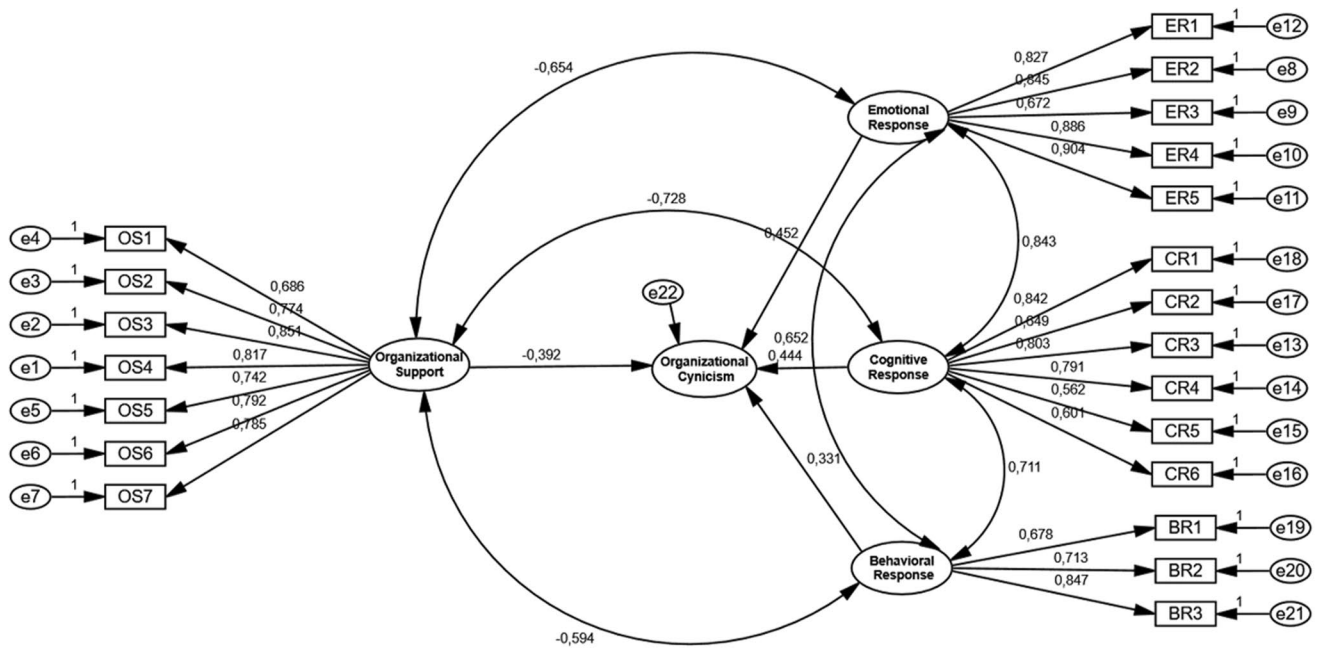
Direct effects are given in Table 5. If the model is evaluated holistically, it is seen that the obtained values are statistically significant, and that it has a structure that confirms the hypotheses supported by other alternative models.

Discussion

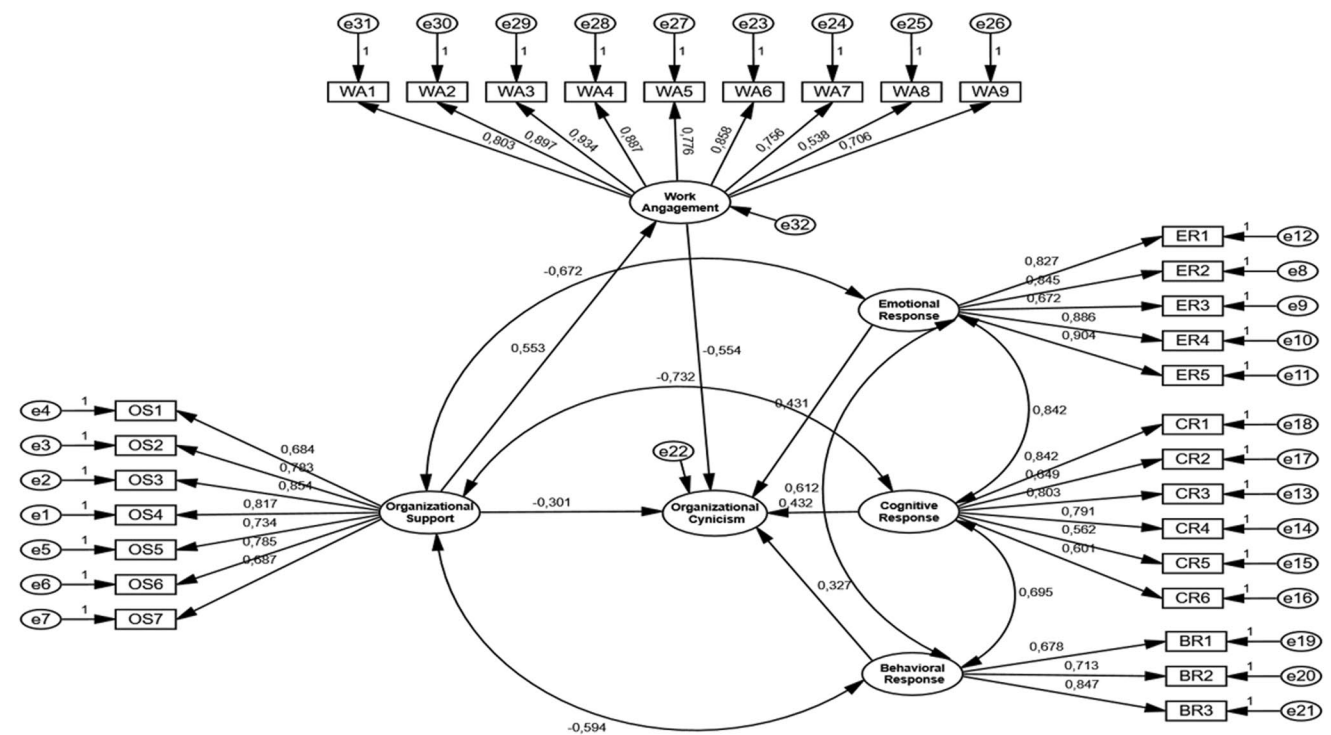
This study presents significant findings on the impact of healthcare workers' perceptions of organizational trust and support on levels of organizational cynicism, as well as the mediating role of work engagement.

The obtained results will be evaluated in the context of the existing literature.

The study reveals that work engagement plays a partial mediating role in the impact of organizational trust on organizational cynicism. The relationship between organizational trust and cynicism has long been a focal point in organizational behavior research (Turner & Valentine, 2001; Chrobot-Mason, 2003; Perry, 2004; Bommer et al., 2005; Jiang & Probst, 2019), and this study sheds further light on this intricate dynamic by uncovering the mediating role of work engagement. This finding suggests that work engagement may act as a buffer or mediator between organizational trust and cynicism. This discovery posits that work engagement might act as a buffer or mediator between organizational trust and cynicism.



a Alternative models



b Alternative models

Fig. 3 a, b Alternative models

Table 4 Evaluation of the proposed model with goodness-of-fit measures

Model	NPAR	CMIN	DF	P	CMIN/DF
Default model	74	1008.842	391	0.000	2.580
Saturated model	465	0.000	0		
Independence model	30	7229.931	435	0.000	16.621

$CMIN/DF = 2.580 < 3$, $0.90 \leq IFI = 0.910$, $0.90 \leq CFI = 0.909$,
 $0.90 \leq TLI = 0.901$, $RMSEA = 0.072 < 0.08$, $SRMR = 0.0372 < 0.08$

Incorporating work engagement into this dynamic provides a novel perspective. When employees are passionate about their work, their enthusiasm and dedication can counterbalance the adverse effects of declining organizational trust, preventing cynicism from fully manifesting. This insight offers organizations a strategic revelation: while nurturing and maintaining organizational trust is crucial, fostering work engagement simultaneously serves as a safeguard against escalating cynicism. If employees genuinely enjoy their work, they may overlook certain organizational

Table 5 Evaluation of the proposed model with goodness-of-fit measures

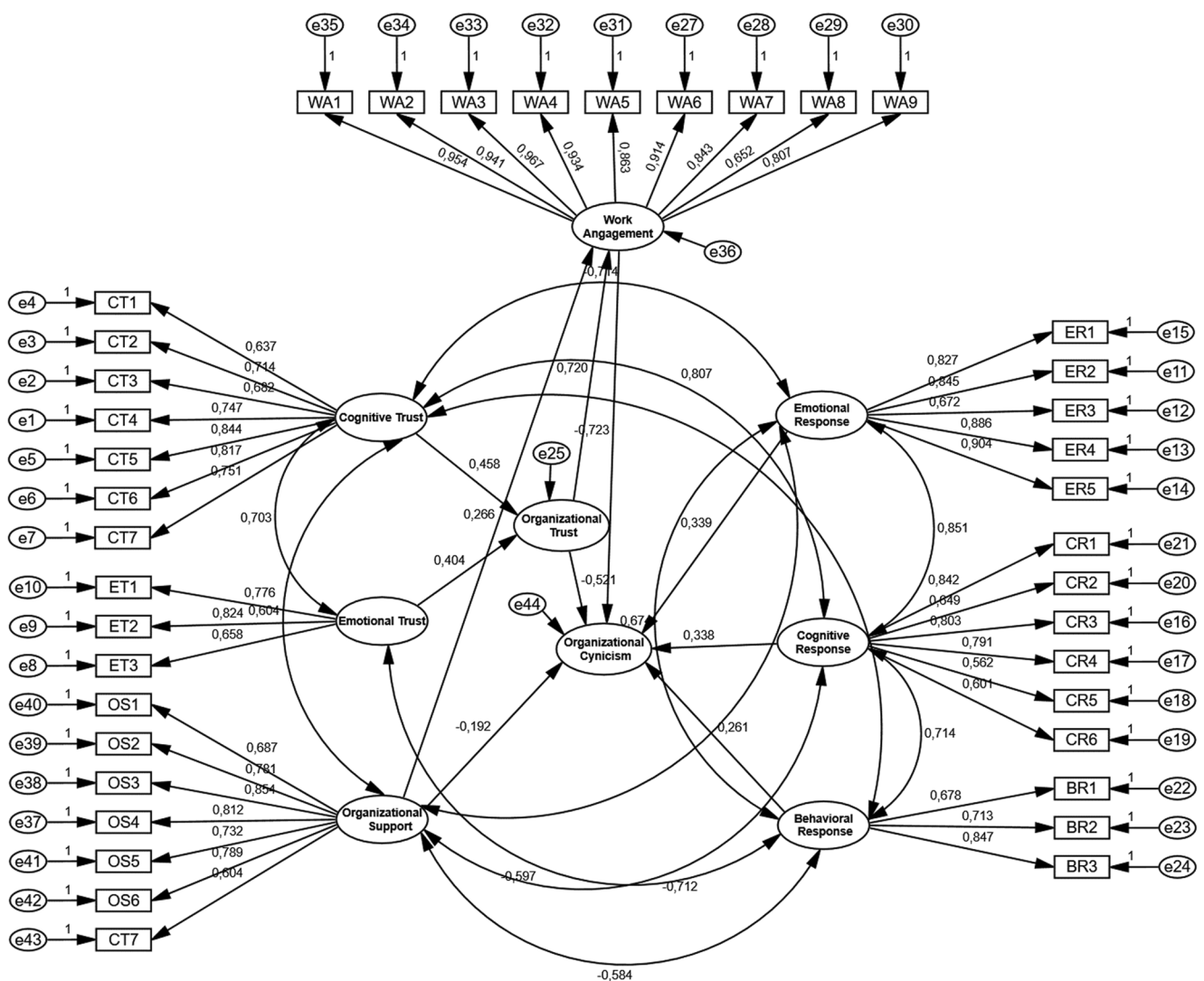
Model	NPAR	CMIN	DF	P	CMIN/DF
Default model	108	1909.311	712	.000	2,682
Saturated model	820	.000	0		
Independence model	40	9965.719	780	.000	12,777

$CMIN/DF = 2.682 < 3$, $0.90 \leq IFI = 0.919$, $0.90 \leq CFI = 0.921$,
 $0.90 \leq TLI = 0.907$, $RMSEA = 0.074 < 0.08$, $SRMR = 0.0396 < 0.08$

Table 6 Direct effects in the structural model

Independent variable	Dependent Variable	Estimate
Organizational Cynicism	<--- Organizational Trust	-,521***
Work Engagement	<--- Organizational Trust	,720***
Organizational Cynicism	<--- Work Engagement	-,723***
Organizational Cynicism	<--- Organizational Support	-,192***
Work Engagement	<--- Organizational Support	,266***

*** $p < 0,001$

**Fig. 4** Final model

shortcomings and be less inclined to develop cynical attitudes. Moreover, the semi-mediating role of work engagement suggests that it does not completely overshadow the direct relationship between trust and cynicism but rather moderates it. Finally, it can be argued that healthcare workers' commitment to their jobs can reduce organizational cynicism by preserving the positive environment provided by organizational trust. Therefore, organizations should develop various strategies to increase employees' job commitment. These strategies may include creating a work environment that features open communication, supportive leadership, fairness, and job satisfaction.

In the context of the impact of organizational support on organizational cynicism, work engagement has been identified to play a partial mediating role. This finding is consistent with prior literature regarding work engagement (Sridadi et al., 2023). Alsubaie and Nasaani (2021) have argued that if the organization is perceived as supportive and its policies and practices are coherent, the likelihood of employees exhibiting cynicism in the workplace will be lower. It has been found that perceived organizational support is a significant determinant of organizational cynicism among healthcare personnel (Alsubaie & Nasaani, 2021). Work engagement reflects an individual's commitment to their job and the satisfaction derived from it. Consequently, it is anticipated to act as a bridge in the relationship between organizational support and organizational cynicism (Christian et al., 2011; Birkeland et al., 2018).

The perception of organizational support denotes employees' belief that they are valued, respected, and that their institutions are genuinely concerned about their well-being (Murthy, 2017; Caesens et al., 2017). When this perception of support is elevated, it could augment employees' engagement for their jobs, facilitating a more positive approach towards their responsibilities. Consequently, in the presence of organizational support, individuals are expected to exhibit reduced tendencies toward cynicism (van Wingarden & Poell, 2017; Durrah et al., 2019). Research has found a negative (Aly et al., 2016) and strong (Byrne, 2008) relationship between organizational cynicism and perceived organizational support. Undesirable outcomes such as decreased employee commitment and increased intention to resign (Vveinhardt & Pleskienė, 2018) have been associated with organizational cynicism. The development of cynicism has been noted to be contributed by low perceived organizational support, especially from managers (Cole et al., 2006).

The partial mediation effect found in this study indicates that job involvement plays an important role in the effect of organizational support on organizational cynicism, although it does not act as a full mediator. In conclusion, the increase in perceived organizational support is associated with an increase in employee work engagement and satisfaction,

thereby indicating a decrease in organizational cynicism tendencies.

Theoretical and practical implications

Healthcare institutions can reduce organizational cynicism by providing trust and support to increase work engagement among employees. Managers can take reassuring steps such as ensuring that employees feel valued, offering support when needed, and encouraging their involvement in decision-making processes. Efforts to strengthen employees' commitment to their jobs can create a more positive working environment within the organization and enhance the performance of the healthcare institution. However, it is important to note that this is just a starting point. Further research, particularly in this area, is needed. For example, more in-depth analyses are required to determine which types of support are most effective. Furthermore, to gain a better understanding of the variations between hospitals or personnel groups, more extensive studies are required. This will enable healthcare institutions to identify the most effective strategies to motivate their employees and reduce organizational cynicism.

Numerous studies in the literature have examined the relationship between organizational support, trust, cynicism, and work engagement. This study provides an illuminating perspective by incorporating work engagement into this relationship within a model. Passionately committed employees counterbalance the adverse effects of declining organizational trust and support, thereby preventing cynicism from fully manifesting. This inference provides organisations with a strategic inspiration: while it is crucial to nurture and maintain organisational trust, fostering work engagement simultaneously provides a safeguard against escalating cynicism. If employees genuinely enjoy their work, they may overlook certain organisational shortcomings or inconsistencies and be less inclined to develop cynical attitudes. Furthermore, the role of work engagement in mediating the relationship between trust and cynicism is suggested to be partial, rather than complete.

Enhancing Organizational Trust: The findings of this study indicate that organizational trust reduces organizational cynicism and amplifies work engagement. Consequently, institutions should promote policies and practices that augment organizational trust. This can be achieved through strategies such as transparent communication, managerial support to employees, and activities that encourage employee participation.

Promotion of Work engagement: It has been identified that work engagement acts as a partial mediator in reducing organizational cynicism. This underscores the need for institutions to organize programs and trainings that bolster

work engagement. This can be facilitated through offerings like professional development trainings, mentorship programs, and career planning workshops.

Organizational Support Initiatives: There's evidence that organizational support curtails cynicism and boosts work engagement. Organizations should adopt strategies that make employees feel valued, support their well-being, and provide necessary resources for their success. Such strategies might include flexible working hours, mechanisms to solicit and evaluate employee suggestions, or activities that foster social interaction amongst employees.

Awareness and Training: Institutions should provide training to managers and leaders about the adverse effects of organizational cynicism, and the positive impacts of organizational trust and support. This will facilitate understanding of the significance of these concepts among leaders and encourage the implementation of pertinent strategies within the organization.

Limitations

This research, like any empirical inquiry, exhibits inherent constraints. The utilization of a convenience sampling approach indicates a non-random participant selection process, potentially constraining the generalizability of findings and prompting queries regarding their broader relevance to the entire population of healthcare professionals within Turkey. Moreover, a substantial portion of the data acquisition occurred online, introducing potential concerns regarding response integrity and comprehensiveness. Given the relatively limited proportion of data collected through face-to-face interactions, the influence of this methodological choice on the dataset's robustness may be challenging to ascertain. Additionally, certain measurement scales employed in the study were abbreviated, potentially compromising the ability to fully capture the intricacies and distinctiveness inherent in these scales.

Conclusion

The findings of this study provide valuable insights into the dynamics between engagement and cynicism within an organizational context. Firstly, it has been determined that work engagement plays a partial mediating role in the impact of organizational trust on organizational cynicism. Specifically, it was observed that organizational trust negatively influences organizational cynicism and positively affects the level of work engagement. This indicates the extent to which individuals are passionate about their work and how this engagement might influence their feelings of mistrust towards their organizations.

Similarly, work engagement also assumes a partial mediating role in the impact of organizational support on organizational cynicism. It was ascertained that organizational support negatively affects cynicism and positively influences the level of work engagement. This provides significant insights into how the support and resources provided by organizations can potentially influence the dedication and engagement of employees towards their work.

In both instances, there exists a negative relationship between work engagement and organizational cynicism, suggesting that an individual's engagement for their work can potentially mitigate the formation of organizational cynicism.

In conclusion, these findings highlight that work engagement could be a pivotal factor in the relationship between organizational trust, support, and cynicism. Organizations can leverage these insights to set strategies that foster employees' engagement and organizational commitment. Such strategies can aid in diminishing the adverse effects of organizational cynicism, thereby fostering a more positive working environment.

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Declarations

Research involving human participants and/or animals If applicable

Informed consent If applicable

Ethics approval Ethics committee approval was obtained

Conflicts of interest None

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