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# Factors Related To Nurses' Voice In Korean Hospitals

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## INTRODUCTION

- Previous research has shown that nurses' voice behaviors are a significant factor that affects patient safety in healthcare organizations.
- Although considerable attention has been given to the speaking-up behaviors of nurses, voice behaviors should be conceptualized and operationalized not only as speaking-up but also silence as the behaviors could have different antecedents.

## AIM

To investigate potential influencing factors for nurses' speaking-up and silence behaviors in the Korean healthcare context

## METHOD

- Population studied: 1,255 registered nurses who were providing direct patient care in 34 Korean hospitals
- Research design: Cross-sectional, Correlational
- Statistical analysis: Multivariate linear regression analysis using STATA version 16
- **Outcome variable**
  - Nurses' speaking-up behavior: measured with 3 items developed by the Agency for Healthcare Research and Quality (2004)
  - Nurses' silence behavior: measured with 5 items developed by Tangirala & Ramanujam (2008)
- **Predictor variables:**
  - Futility: measured with 3 items developed by Burries et al. (2008)
  - Supervisor support for patient safety: measured with 3 items developed by the Agency for Healthcare Research and Quality (2021)
  - Power distance: measured with 5 items developed by Yoon et al (2011)
  - Workload: measured with 5 items developed by Shields et al. (2006)
  - Psychological safety: measured with 7 items developed by Edmondson (1999)
- Controlled variables: Unit tenure, hospital tenure

## RESULTS

Table1. Multivariate regression results for Nurses' Speaking-up Behaviors

|                                                                                                                       | $\beta$ | $p$      |
|-----------------------------------------------------------------------------------------------------------------------|---------|----------|
| Futility                                                                                                              | -0.54   | 0.076    |
| Supervisor support for patient safety                                                                                 | 0.07    | 0.015*   |
| Workload                                                                                                              | -0.06   | 0.021*   |
| Psychological safety                                                                                                  | 0.32    | 0.000*** |
| Power distance                                                                                                        | -0.07   | 0.007**  |
| Adjusted R <sup>2</sup> = 30%<br>$\beta$ , Standardized beta coefficient<br>* $p$ <0.05, ** $p$ <0.01, *** $p$ <0.001 |         |          |

- For **nurses' speaking-up behaviors**, psychological safety was the strongest, followed by power distance, supervisor support for patient safety, and workload.
- Futility was not a statistically significant predictor for nurses' speaking-up behaviors.

Table2. Multivariate regression results for Nurses' Silence Behaviors

|                                                                                                                       | $\beta$ | $p$      |
|-----------------------------------------------------------------------------------------------------------------------|---------|----------|
| Futility                                                                                                              | 0.22    | 0.000*** |
| Supervisor support for patient safety                                                                                 | -0.07   | 0.009**  |
| Workload                                                                                                              | 0.01    | 0.667    |
| Psychological safety                                                                                                  | -0.22   | 0.000*** |
| Power distance                                                                                                        | 0.20    | 0.000*** |
| Adjusted R <sup>2</sup> = 30%<br>$\beta$ , Standardized beta coefficient<br>* $p$ <0.05, ** $p$ <0.01, *** $p$ <0.001 |         |          |

- For **nurses' silence behaviors**, futility and psychological safety were strongest predictors, followed by power distance and supervisor support for patient safety.
- Workload did not make a unique contribution to the prediction of nurses' silence behaviors.
- **The findings of this study indicate different antecedents for the two voice behaviors.**  
Psychological safety was the strongest predictor for speaking up behaviors of nurses. However, futility was the strongest predictor for silence behavior whereas it was not significantly related to speaking-up behaviors of nurses.

## CONCLUSION

- This study findings indicate that different interventions may be needed to encourage nurses to speak up and discourage them from remaining silent when they encounter patient safety threats.
- This findings also suggest that nurse managers should create a psychologically safe and non-hierarchical environment that fosters nurses speaking-up behavior and reduces silence behavior.

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## CONTACT INFORMATION

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