

Personality (Type A and Type B) In Relation to Organizational Citizenship Behaviour (OCB) Among Female Nursing Professionals

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ABSTRACT

The objective of present study is to examine the extent of organizational citizenship behaviour among type A and type B personality nursing professionals. OCB is a spontaneous and voluntary initiative taken by an employee which is not formally rewarded by an organization's management. A nursing professional in a health care organization is primarily concerned with the well-being and assurance of proper health care facilities to the patients. So, in this respect, the concept of OCB becomes crucial particularly in a health care organization. Contemporary literature largely focuses on linking organizational citizenship behaviours with Big-5 personality traits. However, only a few of them addressed the personality traits of type A and type B among nursing professionals. The hypotheses predicting a negative relationship between type A and OCB while, a positive relationship between type B and OCB were formulated. The correlational analysis was carried in order to test the proposed hypotheses. For this purpose, data were gathered from 50 female nursing professional working in a private hospital using standardised tools. The obtained results indicate a significant positive relationship between type B and OCB and a negative correlation was obtained between OCB and type B personality. The findings suggest that type B nurses are willing to go beyond their in-role tasks for the welfare of both the patients and their organizations. Ultimately, the study aims to contribute to the hiring of nursing staff and providing appropriate interventions for each personality type.

Keywords: *Organizational Citizenship Behaviour, Type A and Type B personality, Big-5 personality traits.*

A health care sector includes services such as preventive, curative, palliative and rehabilitative care to treat patients. The modern health care industry is largely dependent on interdisciplinary teams of trained professionals in order to meet the health requirements of individuals and populations. A nursing professional within the health care sector is primarily responsible for caring of individuals, families, and communities to maintain, attain, or recover so as to achieve a

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desired quality of life. Productive nurses in a health care organization play a significant role in improvements of these organizations (Dehghanet al, 2005). It is a profession which involves a close interaction with patients and their families which requires a good communication and team cooperation. Therefore, in this respect, the concept of Organizational Citizenship Behaviour (OCB) becomes indispensable for establishing an increased work quality and patient satisfaction (Altuntaş, 2008; Altuntaş& Baykal, 2010).

Over the past three decades, the interest in Organizational citizenship behaviours has increased significantly. OCBs are the extra-role behaviours, also commonly known as good soldier syndrome (Organ, 1988). Organ (1988) defines OCB as “individual behavior that is discretionary, not directly or explicitly recognized by the formal reward system, and that in the aggregate promotes the effective functioning of the organization" (p. 4). Such positive behaviours are not formally included in the job description and increase the efficiency of an organization as a whole. They are voluntarily displayed by workers depending on their personal choice and have important consequences in the workplace.

OCB can chiefly take two forms: OCBO, behaviours directed towards the organization and OCBI which are directed towards the individuals (Williams & Anderson, 1991). Furthermore, in a subsequent attempt to explain OCB, Organ (1988) and other studies (i.e., Mackenzie, Podsakoff, & Fetter, 1991, 1993; Podsakoff & MacKenzie, 1994; Podsakoff, MacKenzie, Paine & Bachrach, 2000; Lievens & Anseel, 2004) highlighted five distinct categories of discretionary behaviour and explained their effectiveness in the organizations. These are: Conscientiousness, Altruism, Civic Virtue, Courtesy, and Sportsmanship. Organ (1988), defines conscientiousness as an indication of hard work and accountability that exceeds formal requirements such as working late hours. Altruism is a voluntary behaviour wherein an employee helps other individual by giving him assistance to complete a particular task under unusual circumstances by overall contributing to the group effectiveness. Civic Virtue is defined as the voluntary subordinate participation in organizational politics by serving on committees and thereby supporting the administrative functions and further attending meetings.

While, courtesy involves certain problem solving behaviours which focus on the necessary steps in order to lessen the intensity and effects of a problem. In a research by Podsakoff et al., (2000), it was found that courtesy exhibiting employees significantly reduces the intergroup conflict and thus diminishing the time spent on conflict management strategies. Lastly, sportsmanship as defined by Organ (1988), avoids complaining by warmly tolerating the irritations within the organizational settings. It has also been revealed that good sportsmanship enhances the overall morale of the group which subsequently reduces helps to reduce the employee turnover (Podsakoff and MacKenzie, 1997).

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In today's world of increasing competitiveness where survival is one of the key issues, a committed workforce who is willing to go beyond the demands of the formal job descriptions is certainly an asset to the organization. It has also been associated with the organizational effectiveness, contributing to overall productivity. Thus, such employee behaviours play a crucial role in the workplace and because of this, the OCB remains to be one of the top priority among the organizational scholars and business literatures (Bateman and Organ, 1983; Organ, 1988).

Historically, it has been argued that several motivational mechanisms such as job attitudes, personality, and organizational variables drive citizenship behaviours (Borman & Penner, 2001; Schnake, 1991; Van Dyne, Cummings, & Parks, 1995). The underlying assumptions regarding OCB is that either it is dispositionally driven or is performed as a reaction to job or organization (Borman & Motowidlo, 1993; Organ, 1990).

Antecedents of OCB

Job Attitudes. Organ (1977) suggested that job satisfaction could result in positive feelings within the employees and OCB is performed as a result of the reciprocation of these positive feelings.

Employees who psychologically identify themselves with their organizations desire to maintain the organizational membership by putting extra efforts beyond their normal in-role requirements in order to strengthen their ties with organization. A meta-analysis by Organ and Ryan (1995) revealed the relationship between organizational commitment and OCB.

An alternative and more contemporary view holds that exhibiting citizenship behaviours derives from the commitment to self. In other words, when employees perceive that engaging in citizenship behaviours will facilitate them to achieve their personal goals which ultimately acts as a motivation to perform such voluntary acts (Hui et al., 2000; Hui, Law, & Chen, 1999).

Personality. Organ and Ryan (1995) performed a meta-analysis of the dispositional and attitudinal predictors of OCB. Their study showed that conscientiousness emerged as a reliable predictor of compliance and altruism dimensions. Penner and his colleagues (Penner & Finkelstein, 1998; Penner, Fritzsche, Craiger, & Freifeld, 1995) devised a scale to measure the pro social personality orientation of an individual. Validated on volunteers' sample, two factors of the measure, Other-Oriented Empathy and Helpfulness, have shown to predict OCB and other citizenship behaviours (Midili, 1996; Midili&Penner, 1995, Rioux & Penner, 2001; Tillman, 1998). Organ (1990) after reviewing the literature established that job attitudes acts as moderating link between personality and OCB.

Similar Constructs to OCB

Contextual performance is an extra-role work activities or behaviours contributing to psychological and social aspects of the organization which chiefly consists of four dimensions: assistance to others, openly defending the organizations objectives, persistence of enthusiasm,

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and rule and following of rules and prescribed procedures. (Borman & Motowidlo, 1993). Both contextual performance and OCB contribute to overall effectiveness of the organization.

Prosocial organizational behaviour (POB) has often been compared to OCB. Prosocial behaviour within an organization is aimed at helping other co-worker (Brief & Motowidlo, 1986). However, an important difference between these two lies in the fact that unlike OCB, prosocial behaviour can be unrelated to the organization.

The available literature seems to agree on the fact that OCB has an important role in employee performance and wellbeing. The performance ratings of the workers seem to get better by their managers who tend engage in OCB (Podsakoff et al., 2009). The possible explanation lies to the fact that employees who engage in OCB are perceived more favourably and are thus liked more by their managers. This effect is known as 'halo effect' (Organ et al., 2006). Moreover, the better performance rating is related to gaining rewards such as promotions, pay increments, and other work related benefits and has also been linked to employee turnover and absenteeism (Podsakoff et al., 2009).

PERSONALITY

Personality refers to the characteristic patterns of differences among individuals in terms of feeling, thinking, and behaving. The study of personality in particular focuses on two broad aspects: One is determining individual differences in terms of personality characteristics such as sociability. The other aspect is about understanding a person as a whole.

"Personality is the dynamic organization within the individual of those psychophysical systems that determine his characteristics behavior and thought" (Allport, 1961, p. 28).

History

Type A and type B personality theory describes one's chances of getting a coronary heart disease based on two contrasting personality types. This was first described by cardiologists Meyer Friedman and Ray Rosenman in 1950s. After a long eight-and-a-half-year study, Friedman and Rosenman concluded that participants with type A personality has twice the risk of developing coronary heart disease. The research later laid a significant impact on the development of health psychology domain within psychology, which looks at how individual's physical health is affected by his or her mental state.

According to this theory, the type A personality pattern is often described as impatient, ambitious, proactive, anxious, and overly concerned with time management. They are high achieving workaholics who are multi-taskers, and seems to push themselves with deadlines.

In the book, *Type A Behaviour: Its diagnosis and treatment* (1996), Friedman suggests three major symptoms which is expressed in type A behaviour: (1) irritation and exasperation

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triggered by impatience and time urgency; (2) free-floating hostility caused by even minor incidences and; (3) a competitive drive causing stress and achievement oriented mental framework. The described symptoms are overt as well as covert.

Friedman and Rosenman based their theory on the observation of heart patients in their waiting room. Unlike most of the patients, some patients (Type A personality) were unable to sit in their seats for long. Although, originally termed as 'type A personality', it has recently been conceptualised collectively as Type A Behaviour Pattern.

Type B

The theory further describes type B individuals who generally live at lower stress levels, work steadily, and enjoying achievement but not becoming stressed out when not achieving in contrast to type A personalities. Some of the major traits of type B personality pattern are: relaxed, flexible with situations, too casual and laid back attitude, and emotional and expressive.

Despite of negative aspects, type A individuals also have positive aspects in their personality patterns. Their competitiveness drives them to perform well in certain tasks (Boyd, 1984; Taylor et al., 1984). This superior performance of type A can be attributed to their devotion towards the work (Byrne and Rinehart 1989). Furthermore, it also appears that much of their health related problems arise due to free floating anger and not due to competitiveness and achievement orientation (Spence et al, 1987, 1989). Type A people as compared to other personality types show higher levels of aggression and hostility (Masters, Lacaille, & Shearer, 2003; Baron, Neuman, & Geddes, 1999; O'Connor, 2002). Thus, nurses within type A behaviour pattern can generally be considered as impulsive and hasty in terms of their interaction with patients.

A finding among Iranian nurses by Daraghi, Alirezaei, & Shaham, 2012, showed that existence of OCB is essential in developing patient oriented behaviour. Further, according to them, OCB also enhances job satisfaction among nursing professionals. In yet another finding (C. S. Chang & H. C. Chang, 2010) it was revealed that organizational justice and job satisfaction play a significant role in demonstration of citizenship behaviours among nurses.

OCB refers to anything that employees choose to do voluntarily by themselves without any pressure from the organization and lies out of specified contractual obligations. As evident from the available literature no research has been done on relationship between personality (type A and B) and Organizational Citizenship Behaviour among nursing professionals. Till date the only study that highlighted the importance of personality types (A and B) among nursing professionals in Iranian healthcare settings was done by Fallahnejad & Hassanzadeh (2015). So far, the previous studies have linked OCB to Big-5 personality factors and none of them has focused on establishing a relationship between OCB and Type A and B personality patterns. The

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present study highlights that an individual who exhibits OCB, possesses a certain type of personality pattern. Despite of current challenges in the present health care system, promoting OCB helps not only to wellbeing of employees but also in flourishing the organization as a whole. Individual differences predictors of OCB are still unsettled. Hence, the purpose of this study is to understand an individual difference which may cause OCB. So it is felt that there is a need to study in relation to personality types.

The purposes of the current research are to investigate:

1. Organizational citizenship behaviour levels among nurses.
2. The relationship between personality (type A and B) and OCB of the sample.
3. The relationship between OCB dimensions (Altruism, Conscientiousness, Sportsmanship, Courtesy, and Civic Virtue) and type A personality of the sample.
4. The relationship between OCB dimensions (Altruism, Conscientiousness, Sportsmanship, Courtesy, and Civic Virtue) and type B personality of the sample.

The following hypotheses were framed in conformity with the purpose of the present study:

1. H1: There is a significant relationship between OCB scores of type A and type B personality.
2. H2: OCB is negatively related to type A personality individuals.
3. H3: OCB is positively related to type B personality individuals.
4. H4: Type A is negatively related to OCB dimensions (Compliance, Engagement, Initiative, Branding and Loyalty, Helping Behaviour, and Sportsmanship).
5. H5: Type B is positively related to OCB dimensions (Compliance, Engagement, Initiative, Branding and Loyalty, Helping Behaviour, and Sportsmanship).

METHODS

Design:

The study employs a within-subjects design and correlational analysis to explore the relationship between OCB and personality (Type A and B). A correlational design investigates an existence of a relationship between two or more variables.

Participants And Procedure:

The sample of the present investigation was drawn adapting purposive sampling method. The sample consists of 50 female nursing professionals and was drawn from a private hospital in Jaipur city. Initially approximately 70 female nursing professionals constituted the sample. But, later only 50 professionals were selected for the final study. Rest of the subjects were dropped because of their incompetence to fulfil the criteria, incompleteness of responses and their reluctant behaviour. The private hospital which was covered during this investigation was Fortis Hospital. The professionals were in the age group of 20-30 years, along with a minimum of three

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years of working experience as revealed by the demographics of the sample. Before starting the entire research procedure, the participants were assured that all their data would be kept confidential. The selected professionals were asked to complete a questionnaire which took around 10-15 minutes to complete.

Instruments

1. Organizational Citizenship Behaviour

OCBs are employee behaviors that, although not critical to the task or job, serve to facilitate organizational functioning. The Organizational Citizenship Behaviour scale developed and processed by Dr. Tejinder Kaur, Ms. Deepti Sharma and Ms. Priya Sharma was used. OCB scale contains 49 statements categorized into seven dimensions i.e.; Compliance, Engagement, Initiative, Branding and Loyalty, Helping Behaviour, Relation with Supervisor, and Sportsmanship. Seven statements in each dimensions were included. Statements of the scale were arranged randomly Respondents were asked to rate their responses based on 5 point Likert scale. After reading each statements they were asked to indicate: 1 if Strongly Agree with the statement, 2 if Agree with the statement, 3 if Neither Agree nor Disagree with the statement, 4 if Disagree with the statement and 5 if Strongly disagree with the statement. The coefficient of reliability was determined by using test-retest ($r=.95$) and split half method ($r=.97$).

2. Personality:

For measuring personality, Type A/B behavioural pattern scale by UpinderDhar and Manisha Jain was used. The scale consists of 36 items and presented in the form of a 5-point scale. Further, the scale is divided into two forms: Form A and Form B. The form A consists of items related to type A personality pattern while, form B has questions relating to type B behaviour. The reliability coefficient of form A was found to be 0.54 and co-incidentally for form B also it was found to be 0.54.

RESULTS

The data were collected from a sample of 50 nursing professionals. The study aims to investigate the relationship among OCB, type A and type B personality. In order to test the formulated hypotheses, the correlation was computed on the SPSS software. On running the tests for normality, the data was found to be normally distributed. As per the descriptive analysis of the data, the mean score and SD on the OCB scale were 108.64 and 35.76 respectively. Likewise, for type (M=50.94, SD=15.06), and type B (M=51.26, SD=13.92).

Table 1. The table shows t test comparing the significant difference between type A and type B personality nursing professionals in terms of exhibiting OCB.

	N	M	SD	SED	df	p value	t value
TYPE A	21	135.57	41.72	29.18	48	1.96	5.55
TYPE B	29	89.13	14.77				

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A dependent t test was conducted to compare type A and type B personality nursing professionals in terms of demonstrating Organizational Citizenship Behaviour. There was a significant difference in the scores of type A (M=135.57, SD=41.72) and type B (M=89.13, SD=14.77) personalities OCB score; $t(48) = 5.55, p > 0.05$. these results suggest that both type A and type B personality nurses differ from significantly from each other in terms of committing to extra-role behaviours (OCB).

Table 2. The table below provides a detailed description of the Descriptive Statistics (mean and SD). (N=50).

Factors	Mean	SD
Organizational citizenship behaviour	108.64	35.76
Type A	50.94	15.06
Type B	51.26	13.92

Table 3. showing personality correlates of OCB.

PERSONALITY	OCB
TYPE A	-.70**
TYPE B	.65**

** . Correlation is significant at the 0.01 level (2-tailed).

The table shows coefficient of correlation (Product Moment, r) between Type A personality and OCB and Type B personality and OCB among nursing professionals. The coefficient reveals that there is a negative relationship between OCB and Type A personality individuals ($r = -.70, p < .01$). Whereas, a positive relationship ($r = .65, p < .01$) exists between OCB and Type B personality individuals.

Table 4. The table shows coefficient of correlation between type A and type B along with OCB dimensions (Compliance, Engagement, Initiative, Branding and Loyalty, Helping Behaviour, and Sportsmanship).

PERSONALITY	COEFFICIENT OF CORRELATION (r) FOR OCB DIMENSIONS						
	C	E	I	BL	HB	RWS	S
TYPE A	-.75**	-.73**	-.68**	-.63**	-.63**	-.70**	-.71**
TYPE B	.68**	.66**	.62**	.64**	.62**	.69**	.67**

** . Correlation is significant at the 0.01 level (2-tailed).

The table shows the coefficient of correlation between OCB dimensions and Type A and Type B personality individuals. Results shows that there are significant correlations between individual

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OCB dimensions and personality types. As evident from the above correlation coefficients, there exists a positive correlation for Type B individuals with all the seven OCB dimensions (Compliance, Engagement, Initiative, Branding and Loyalty, Helping Behaviour, and Sportsmanship). While, a negative correlation is reported between type B personality and OCB dimensions.

GRAPHS:

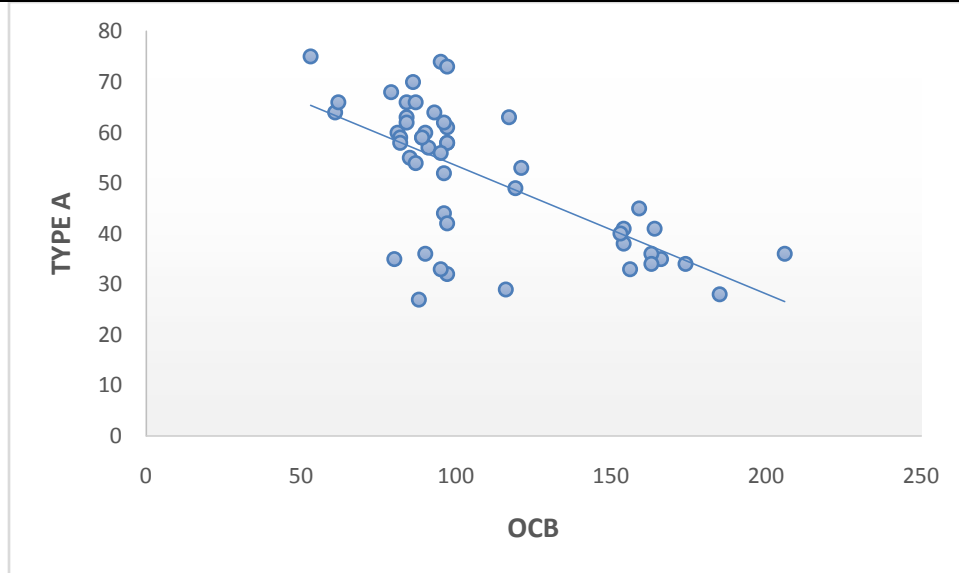


Figure 1: The above figure depicts a negative correlation between OCB and Type A personality ($r = -.70$).

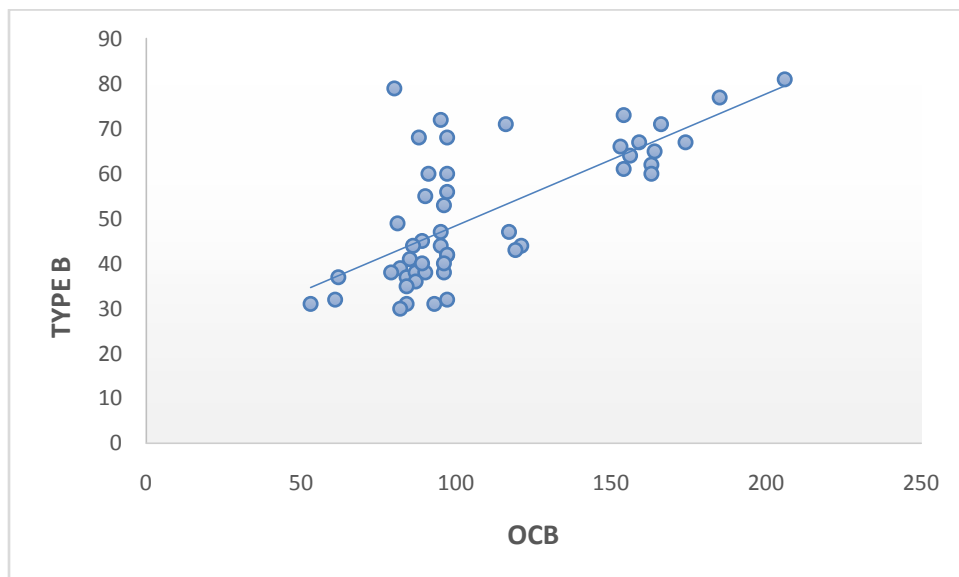


Figure 2: The above figure depicts a positive correlation between OCB and Type B personality ($r=.65$).

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Therefore, as evident from the above result analysis, there exists a positive relationship between OCB and type B personality. While, a negative interaction is reported between type A personality pattern and OCB. While a significant difference was found between OCB scores of type A and type B female nursing professionals.

DISCUSSION

The present study was undertaken to examine the relationship between Organizational Citizenship Behaviour (OCB) and type A and type personality patterns among female nursing professionals. Based on the objectives of the study it was hypothesized that that there exists a significant relationship between OCB patterns of type A and type B personality individuals. To accomplish this, a correlational analysis was carried out. The hypotheses were tested in a sample of 50 female nursing professionals from a private sector hospital. The obtained results indicated a significance association between OCB, type A and B personalities. The subsequent paragraphs will throw a light on linkage between ‘good behaviour’ (OCB) and personality traits of type A and type B behaviour pattern which varies from person to person.

To begin with, nowadays health sector is increasingly facing challenges and demands with the rapidly changing times and invention of new technology. Stress experienced by health care professionals is one of the most pressing issues in the recent years. Therefore, the health care sector needs to be dependent on professionals who are willing to invest extra efforts beyond formal tasks. With these increasing demands such as, severe competitions, unrealistic expectations from superiors, the employees are now assumed to be like machines or computers and have subsequently led to the host of psychological problems among the workplace professionals. Therefore, organizations need to find ways to enable their employees perform at their best.

The extent to which an employee performs citizenship behaviours, is a direct function of his or her motivation, opportunity, and ability. Motivation determines how hard an employee will try to engage in citizenship behaviours, whereas, the combination of both opportunity and ability determines how successfully such behaviours are exhibited by an employee (Organ, Podsakoff and MacKenzie 2006, p. 93). OCB as per its definition is considered as discretionary and thus engagement in such behaviours is voluntary and one cannot be punished for not engaging in OCB. In this respect, nursing professionals have to exhibit informing and helping behaviours more frequently than other members of the health care sector (Altuntas 2008; Boerner et al., 2005). Likewise, in a study by Geçer (2008), it was reported that nurses more often display courtesy and self-sacrificing behaviours.

Personality refers to enduring patterns of differences in thinking, behaving, and emotional expressions that are likely to be stable over time and thus explain people’s characteristic ways of

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behaviour across different domains (Costa & McCrae, 1989; Funder, 2001). In the past decades, there has been a significant amount of researches by psychologists, psychiatrists, and management researches in order to understand the dynamics of coronary prone type A pattern along with type B behaviour pattern. This emphasis is significantly attributed to the researches performed by Friedman & Rosenman (1974).

It was hypothesized that there will be a significant difference among type A and Type B nursing professionals in relation to exhibiting Organizational Citizenship Behaviour. The results of the study support the above hypothesis as there was a significant difference among Type A and Type B nursing professionals in relation to exhibiting Organizational Citizenship Behaviour. This indicates that Type B professionals show non-discretionary behaviours in the organization for example, helping the fellow co-worker regarding the performing of duties and to help him adapt to the working environment, working extra time in the office when it is not mandatory from the senior manager or nurses getting involved in a friendly manner with their patients. Type B personality is quite flexible in terms of their time so they don't mind if they spent extra hours in their workplaces as they are not restricted to themselves and tend to enjoy the company of their fellow workers or colleagues. They also prefer to attend or take part in activities and programs which are not compulsory but are important. Type B personality individuals tend to enjoy everything that comes on their way. On the other hand, the Type A personality individuals are strictly time bound and are highly obsessed with time urgency. They are highly rigid in terms of their behaviour and thus are restricted to themselves only. Therefore, they do not tend to exhibit pro social behaviour in their workplaces. This fact can further be attributed to the fact that individuals with type B personality work at a steady rate, do not easily get annoyed and patiently manage the details of their work. Such individuals tend to adapt with different conditions of their work environment as they accept the situations in a more realistic manner as they become angry (Ganji, 2001).

The second hypothesis stated that the Organizational Citizenship Behaviour (OCB) is negatively related to Type A personality professionals. As can be seen from the table 2, that the correlation coefficient between Type A and OCB came out to be negative. This suggests that Type A individuals do not exhibit OCB. Instead, they show the reverse trend by thinking just about their own motives only without concerning the welfare and well-being of others for example, fellow workers or patients in case of nursing professionals. These people tend to complain and easily get irritated over trivial matters. Further, they are so rigid that they hardly or never went beyond their formal job descriptions for their managers. In addition, they are also not concerned about the instructions or directives given to them by their supervisor doctors because of their dominance and aggressive behaviour. They are highly achievement oriented. That is, for them success matters the most. Unlike, Type B individuals these people do not prefer or want a healthy interaction with their colleagues or their immediate supervisors and as a result, they are

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exhausted and are stressed out at the end of the day and this is probably the reason as to why they suffer more health related problems such as coronary heart disease, high blood pressure, etc.; which is a fact proven by many existing researches.

Moreover, the obtained results also confirmed the third hypothesis which stated that there will be a positive correlation among the Type B individuals and OCB. This shows that there is a positive relationship between these two variables. It means that as a person gets more towards Type B personality, more are the chances for him to exhibit organizational citizenship behaviours. Such individuals are more concerned about others by showing selfless attitude and tend to consider the impact of their own actions on their fellow workers. They share a cordial relationship with their supervisor and prefers to perform all the tasks and duties religiously and further they work overtime. They do not make big issues out of small matters. In this manner it is quite clear that Type B individuals prefer to be happy. As a result, they are less prone to health related risks. In other words, this also suggests that type B personality nurses are more satisfied with their job as compared to type A professionals and finding is in line with the results obtained by Fallahnejad & Hassanzadeh (2015). When a job matches with one's personality, the more he or she is satisfied with the job. On the contrary, lower job satisfaction arises with lower rates of adjustment. For this reason, type B personality nursing professionals have a more positive attitude towards their job as compared to type B nurses.

Further, in yet another study it was confirmed that type A nursing professionals experience more burnout levels as compared to their counterparts type B personality professionals (Brennan, 1989). According to Kirkcaldy & Martin (2000), type A personality factor emerged as a significant determinant of occupational stress. Likewise, as per a study conducted by Jamal & Baba (1991), it was observed that type A nurses significantly experienced work overload, job stress, turnover cognition, and role ambiguity.

Moreover, as evident from above the above correlation coefficients that a negative relationship exists between type A personality and the OCB dimensions (initiative, branding and loyalty, helping behaviour, relationship with supervisor, and sportsmanship). This suggests that type A personality nursing professionals are not proactive and thus prefer to be the part of the situation rather than controlling them. It also seems that such individuals are so preoccupied with themselves and their in-role assigned duties that they generally fail to participate in other activities voluntarily and are highly concerned toward the trivial matters about their job. In addition, such individuals do not seem to have cordial relations with their supervisors as they are least concerned with the directives and supervision given to them. However, on the other hand, compliance and engagement are positively correlated with type A personality nurses, suggesting that they are workaholics and keep themselves updated about the recent trends in their jobs and thus are task-oriented.

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The relationship between OCB dimensions (compliance, engagement, initiative, branding and loyalty, helping behaviour, relationship with supervisor, and sportsmanship) and type B personality of the sample was found to be positive, indicating that such professionals usually perceive non-rewarded extra-role behaviours for gaining job satisfaction and self-fulfilment. They responsibly participate in the life of their organization i.e.; the nurses with type B personality maintains their highest ethical standards. As opposed to type A's, they seem to be extra concerned about their patient's health and well-being. Additionally, type B personality nursing professionals are proactive i.e.; creating or controlling a situation rather than just being a part of them and thus are actively involved in their tasks by crossing the boundaries of their formal job description. In other words, it can be said that such nurses seem to be nurture-oriented and are more focused on the interpersonal aspect of their profession in that they will be eager to know the entire life story of their patients. Thus, they seem to be satisfied with the overall functioning of their organization and feel confident and happy about their work.

From the findings, it can be concluded that Type A and Type B differed significantly in terms of exhibiting OCB. A positive correlation was found between Type B and OCB and a negative relation between Type A and OCB. Results of the study confirm the hypotheses. Thus, the significant differences among type A and Type B nursing professionals in relation to their OCB was pertaining to the contrasting characteristics for example, their stress levels, happiness levels, optimism levels, achievement orientation, way of perceiving the situations around them, etc. of their personality types which can be placed on the two opposite dimensions.

The study had both strengths and weaknesses. As the present study is a time bound project, it had some limitations of its own. The focus of the present study was only based on two personality patterns or types (A and B). However, the researches also identified further two personality types viz; Type C and Type D. The locale of the present investigation was confined to private sector hospital; and subsequently the investigations may be extended to public sector to obtain comparative study. Various other variables such as, resilience, job satisfaction, burnout levels could also be taken into account for further study. Nevertheless, the findings derived from the present investigation provide a promising foundation for further researches in psychology, especially in industrial/organizational and health sphere. It would also help in determining the dominant personality traits in an individual so that appropriate interventions can be given during adverse situations. Lastly, it may provide valuable hints for the recruitment and selection of the appropriate staff for respective positions.

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Conflict of Interests

The author declared no conflict of interests.

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