The Role of Emotional Intelligence, Job Satisfaction and Transformational Leadership Toward Organizational Citizenship Behavior of Nurses

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Rapid development of hospital industry has led an intense competition in the hospital business. Nevertheless, it is important that nurses demonstrate *Organizational Citizenship Behavior* (OCB), since OCB could influence organizational effectiveness. Research has shown that emotional intelligence, job satisfaction and transformational leadership have played important roles in OCB. The aim of this study is to examine the role of emotional intelligence, job satisfaction and transformational leadership in nurses' OCB. The hypothesis was that emotional intelligence, job satisfaction and transformational leadership were the predictors of nurses' OCB. This study adopted a quantitative method using questionnaires to collect data. Questionnaires used were the OCB, emotional intelligence, job satisfaction and transformational leadership questionnaire. The analysis was carried out using multiple regression analysis. Data analysis with 146 respondents showed that emotional intelligence, job satisfaction and transformational leadership significantly predicted nurses' OCB ($F =$ 16.062, $p < .05$) with the contribution of 24.4% to the full model.

*Keywords: o*rganizational citizenship behavior, emotional intelligence, job satisfaction and transformational leadership.

Perkembangan industri rumah sakit yang sangat pesat menyebabkan persaingan bisnis rumah sakit menjadi sangat tajam. Oleh karena itu, perawat dituntut untuk menampilkan perilaku *organizational citizenship behavior* (OCB), karena OCB mendukung efektivitas organisasi. Beberapa penelitian telah menemukan kecerdasan emosi, kepuasan kerja dan kepemimpinan transformasional berperan terhadap OCB. Penelitian ini bertujuan untuk menguji peranan kecerdasan emosi, kepuasan kerja dan kepemimpinan transformasional terhadap OCB perawat. Hipotesis yang diajukan dalam penelitian ini adalah kecerdasan emosi, kepuasan kerja dan kepemimpinan transformasional secara bersama-sama merupakan prediktor dari OCB perawat. Penelitian ini merupakan studi lapangan yang akan menggunakan metodologi kuantitatif, dengan menggunakan kuesioner sebagai alat pengumpul data. Kuesioner yang digunakan adalah kuesioner OCB, kecerdasan emosi, kepuasan kerja dan kepemimpinan transformasional. Uji hipotesis dilakukan dengan menggunakan analisis regresi ganda. Hasil analisis data terhadap 146 responden menyatakan bahwa variabel kecerdasan emosi, kepuasan kerja dan kepemimpinan transformasional secara bersama sama secara signifikan dapat memprediksi OCB perawat ($F = $ 16.062, $p < .05$) dengan kontribusi sebesar 24%.

Kata kunci: *organizational citizenship behavior*, kecerdasan emosi, kepuasan kerja, dan kepemimpinan transformasional

Rapid development of the hospital industry has increased the competition of the hospital business in domestic and international market. A hospital is an organization that provides health services and therefore, the quality of the service plays an important role in influencing customers' satisfaction. Customers expect to have the best quality of service (Zeithmal & Bitner, 1996).

The results of a survey on the level of loyalty of hospital customers (i.e., patients), toward hospitals and medical practitioners that was conducted by SWA magazine and Onbee Marketing Research from February to March 2013 showed that service quality was a main factor that influenced customers in choosing a hospital for them and their family. The survey that involved 2,917 respondents found that customers would return to the same hospital for their service based on the following reasons: the quality of service (28%), location

(19%), medical practitioners (13%), being loyal customers (7%), patients' health condition (7%), cost (7%), facilities (7%), affiliation to health insurance (6%), no reason (4%), doctor's recommendation (2%), and hospital's quality (1%; Anjaris, 2013).

Service quality is a measure to determine how accurate the level of services offered by a company or service provider in meeting the standard of quality expected by customers. To improve its quality of service, a company needs to properly equip its frontline employees, since an interaction between customers and frontline employees may determine whether the customer would use the service again in the future (Gronroos, 2000). In the hospital industry, nurses are the frontline employees who often interact with customers. Therefore, nurses' performance plays an important role in providing a good quality of service to customers.

The success of an organization to achieve its objectives is also determined by employees' extra role behavior, or employees' behavior that is not included in their job description but supports an organization to function (Kartz, as cited in Robert & Hogan, 2002; Sloat, 1999). The aforementioned employees' behavior is identified as Organizational Citizenship Behavior (OCB) by Organ (1998). Research showed that there was a positive effect of OCB on organizational effectiveness (Khan, Afzal & Zia, 2010; Wall & Niehoff, 2000; Chahal & Mehta, 2010). OCB might have an influence on organizational effectiveness because it could increase the productivity of coworkers and managerial team, reduce the need for recruiting new employees in order to maintain the productivity of a work unit, increase organizational ability to attract and maintain their best employees, increase the stability of organizational performance, and improve organizational ability to adapt with environmental changes (Podsakoff & MacKenzie, 1997).

OCB is important for hospital industry because of the following reasons: (1) hospital industry is now growing, therefore OCB of employees is needed to make the hospital survive; (2) health practitioners have complex tasks and duties, and OCB could facilitate the goal of a hospital to provide the best service and increase the hospital performance; (3) a hospital may have limited human and capital resources and OCB can contribute to the use of limited human resources more efficiently and to increase organizational productivity; and (4) the quality of service is the main focus of hospital industry, therefore OCB is needed to improve positive relationships among employees, and to increase employees' role in organizational activities in order to maintain a hospital's service quality.

OCB performed by employees is closely related to customers' perception toward service quality (Torlak & Koc, 2007). Positive effects of OCB on the quality of service have been found in several hospitals in Indonesia. The positive effects of OCB on the service quality of the hospitals are based on the effectiveness of internal interaction among employees, and between employees and the hospitals as a whole. At the end, this contributes to the success of external service provided by employees to patients. Nurses who perform OCB accelerate the process of interaction and socialization between employees and patients, and therefore, they become more responsive in providing service according to patients' expectations (Cholil, 2011).

OCB is defined as chosen behavior which does not become a part of an employee's formal main tasks (Robbins & Judge, 2008); flexible behavior of an individual, the behavior that is not directly recognized or rewarded by formal reward system in an organization (Podsakoff, Mackenzie, Paine & Bachrach, 2000); and informal behavior that exceeds normal expectation, but overall, it contributes to organizational effectiveness (Greenberg & Baron, 2003). Definition of OCB in this study is chosen behavior which is not a part of an employee's main tasks, not rewarded, but it supports an organization to function effectively.

The aspects of OCB are: (1) *altruism*: behavior that is performed to help work partners, particularly on tasks other than his/her responsibility; (2) *civic virtue*: behavior that indicates participation and consideration toward organizational survival; (3) *conscientiousness*: behavior that benefits a company, which exceeds minimum requirements of works in following working rules and regulations; (4) *courtesy*: behavior which prohibits interpersonal conflict in an organization; (5) *sportsmanship*: behavior that shows a high level of tolerance toward organization, and this leads employees to act positively and avoid complaints (Organ, Podsakoff & Mackenzie, 2006).

OCB consists of two categories: (1) *organizational citizenship behavior towards individual* (OCBI), the behavior that targets a certain individual, who has an interest with the organization and the behavior may be beneficial in improving organizational effectiveness and efficiency; the behavior is characterized by *altruism* and *courtesy*; (2) *Organizational citizenship behavior towards organization* (OCBO), the behavior that targets organization directly and this may be useful to improve organizational effectiveness and efficiency. This OCB is characterized by *sportsmanship, civic virtue,* and *conscientiousness* (LePine, Erez & Johnson, 2002; Oetomo, 2007).

Generally, there are two factors that influence the occurrence of OCB among employees, i.e., internal and external factors. The internal factors that influence OCB are personality (Ariani, 2010; Elanain, 2008; Elanain, 2009; Wright & Sablynski, 2008), mood (Glomb, Bhave, Miner, & Wall, 2011; Williams & Shiaw, 1999), emotional intelligence (Sahafi, Danaee, Sariak & Haghollahi, 2011; Sahafi, Danaee, Sariak & Haghollahi, 2012) and job satisfaction (Danan, 2007; Feather & Rauter, 2004; Hall, Zinko, Perryman & Ferris, 2009; Lowery, Beadles, & Krilowicz, 2002; Miao, 2011, Schappe, 1998; Shokrkon & Naami, 2009). Meanwhile, the external factors that influence OCB are leadership (Burton, Sablynski & Sekiguchi, 2008; Donaldson, Ensher & Grant-Vallone, 2000; Eliyana, 2010; Jiao, Richards & Zhang, 2011; Kent & Chelladurai, 2001; Moddasir & Singh, 2008; Schnake, Dumler & Cochran, 1993; Truckenbrodt, 2000), inconvenience in work place ((Feather & Rauter, 2004; Reisel, Probst, Chia, Maloles & Konig, 2010) and job status (Cho & Johanson, 2008; Feather & Rauter, 2004; Moorman & Harland, 2002; Stamper & Dyne, 2001). This study examined OCB that was influenced by emotional intelligence and job satisfaction as the internal factors, whereas the external factors that influenced OCB was transformational leadership (Eliyana, 2010; Kent & Chelladurai, 2001; Moddasir & Singh, 2008).

The influence of emotional intelligence on OCB can be explained as follows. Emotion is a mental condition that involves a biological aspect, a psychological aspect, and a tendency to take an action (Goleman, 2007). Previous studies have found positive and significant relationship between emotional intelligence and OCB (Carmeli & Josman, 2006; Chin, Anantharaman & Tong, 2011; Sumiyarsih, Mujiarsih, & Ariati., 2012; Yaghoubi, Mashinchi & Hadi, 2011)., Sumiyarsih et al. (2012) found that employees who had high levels of emotional intelligence experienced positive and exciting emotion (happy, energetic, active, confident), therefore they tended to help their other coworkers to work more cooperatively with other people in different divisions or coworkers, and this improved their performance.

Emotional intelligence is defined as an ability to monitor and control an individual's own feeling and the feeling of others, and use the feeling to guide thoughts and actions (Goleman, 2005); intelligence to use emotion, in which a person purposely manages his or her emotion, and then uses the emotion to guide behavior and thoughts in order to obtain a better outcome (Weisinger, 1998); and an ability to analyze emotion, and to develop a way of thinking (Mayer & Salovey, 1997). In this study, emotional intelligence is defined as an individual's ability to recognize and comprehend the emotion experienced by oneself and others, and subsequently, manage the emotion and use it to help guiding behavior and thoughts in order to obtain a better work outcome.

In this present study, emotional intelligence is explained using the 'ability model' theory by Mayer and Salovey (2004). In the 'ability model' theory, emotional intelligence consists of four basic abilities that can be classified into two factors. The first factor is experiential emotional intelligence, which consists of perceiving emotion and using emotion to facilitate thinking. The second factor is strategic emotional intelligence, which consists of understanding emotions and managing emotions. Individuals with high levels of experiential emotional intelligence have high levels of skills in realizing, recognizing and using their emotions to solve a problem. Individuals with strategic emotional intelligence have an ability to understand and use emotions effectively to manage their own and other people's emotions.

Mayer and Salovey (2004) define perceiving emotion as an ability to recognize emotion in self and others accurately, this includes an ability to express their emotions effectively based on some gestures, such as face expression, tone of voice, and body language. Using emotions to facilitate thinking is an ability to use emotions to facilitate a way of thinking, to solve problems, and to make a judgment needed to combine mental pictures and emotions, and to recognize how emotions could affect the cognitive processes, such as deductive reasoning, problem solving, creativity and communication (Lopes, Brackett, Nezlek, Schutz & Salovey, 2003) by shifting the attention to important events, arousing emotions that might facilitate a decision making, and employing emotional differences to promote different approaches in solving problems.

Understanding emotions is an ability to comprehend emotions, including the changes and mixture of emotions obtained from understanding the relationship between various types of emotions and recognizing the causes and consequences of emotions. Managing emotions is an ability to manage emotions and emotional situations that involve self and others by softening negative emotions and enhancing pleasant emotions, without suppressing or exaggerating information to achieve objectives.

Another factor that influences employees to perform OCB is job satisfaction (Feather & Rauter, 2004; Hall, et al., 2009; Danan, 2007; Miao, 2011, Schappe, 1998;

Shokrkon & Naami, 2009). The relationship between job satisfaction and OCB is simply described by Robbins and Judge (2008) that job satisfaction depends on the perception of fair outcomes, behaviors and procedures. When an individual thinks that the organizational process and outcome are fair, then it would develop a trust. When the trust is emerged, the individual may be more willing to involve voluntarily in performing behaviors that exceed his or her formal working requirements.

Job satisfaction is defined as a person's emotional response toward a part or whole parts of aspects in his or her job (Nawawi, 1998); an affective or emotional response directed toward an occupation (Krietner & Kinicki, 2004); a positive feeling toward a job that is based on the evaluations of several work characteristics (Robbins & Judge, 2008); a degree of satisfaction experienced when employees obtain sufficient reward from many aspects of work situations in the organization where they work (Tangkilisan, 2005); and the result of employees perception on how good their works in producing something that is considered as important (Luthans, 2006). In this study, job satisfaction is defined as positive and negative feelings experienced by employees in relation to their works.

Kinicki, McKee-Ryan and Carson (2002) stated the five aspects of job satisfaction that are considered as factors that measure job satisfaction. Those are: (1) *work itself,* a factor related to tasks that is considered interesting and providing a chance to learn and take a responsibility; (2) *supervision*, a factor related to employers' ability to help and support their employees or subordinates; (3) *workers*, a factor related to a competent friendship and continuous support among coworkers; (4) *promotion*, a factor that relates to an opportunity to develop and progress in their career; and (5) *pay*, a factor that is related to the amount of payment and conditions experienced.

Employees tend to perform tasks exceeding their work responsibilities if they are satisfied with their works, accept fair treatments and receive attention from their supervisors, and perceive that their organization has treated them fairly (Sloat, 1999). Sloat indicates that besides job satisfaction and trust to organizational fairness, a leader's fair and attentive behaviors may also facilitate the occurrence of OCB. Being fair and attentive is the characteristics of a transformational leader (Robbins & Judge, 2008).

In their study, Modassir and Singh (2008) found that employees who worked in an organization that was led by a transformational leader performed OCB spontaneously. Humairah (2005) found that transformational leadership style was more suitable to be used in hospitals rather than transactional leadership style, because the heads of room section in the hospitals treated nurses as their partners who took responsibility for their works, and this had improved the nurses' skills and abilities in performing their tasks and dealing with everyday problems.

A leader, who devotes his or her attention to problems encountered by his or her employees and to the employees' needs for improvement by providing encouragement and support to the employees to achieve their goals, is considered employing transformational leadership styles (Robbins, 2007). Transformational leadership is defined as a leader's ability in developing and directing his or her employees' potentials and capabilities to achieve, or even exceed, organizational goals (Dvir, Eden, & Avalio, 2002). O'Leary (2001) defined transformational leadership as a leadership performed by a manager who wants his or her group to exceed its boundaries and to show a work performance that is more than just a *status quo*, or to achieve a series of new organizational objectives. Transformational leadership is a certain ability possessed by a leader to inspire and motivate his or her subordinates to reach a better result than what has been planned (Rivai, 2004). In this study, transformational leadership is defined as a style of leadership performed by a leader to inspire, motivate, and provide attention to his or her subordinates in order to achieve goals that exceed what has been planned.

Avolio and Bass (1991) indicated four aspects of transformational leadership: (1) *charisma*, it shows the power within a leader that could affect, motivate and induce strong emotions to his or her subordinates to perform their tasks well; (2) *individual awareness*, it shows a leader's ability to support, encourage and provide guidance to his or her employees in performing their tasks and solving problems encountered during their works; (3) *intellectual stimulation*, showing a leader's ability to encourage awareness, creativity, and to provide freedom to express their opinions to his or her subordinates in order to overcome problems with their own perspectives and ways of thinking; and (4) *inspirational motivation*, it is an ability to describe an interesting idea using his or her experiences as examples, to make his or her subordinates have a description of how to complete their tasks and overcome any obstacles.

Based on the literature, the aim of this study is to examine whether emotional intelligence, job satisfaction and transformational leadership style could predict nurses' OCB. This study may assist organizations to improve nurses' OCB by considering factors

such as emotional intelligence, job satisfaction and transformational leadership style that might affect OCB, or in other words, assist organizations to achieve their organizational goals. Furthermore, it is expected that this study can be a source of reference to improve OCB and stimulate new ideas for future research.

This study discusses the relationship between emotional intelligence, job satisfaction and transformational leadership style, and organizational citizenship behavior. The relationship could be explained using a cognitive theory. Based on the theory, an individual processes information received by all senses through awareness (cognition) before he or she shows responses or reactions (Sarwono, 2002). Based on the cognitive theory, OCB performed by nurses is the product of cognitive processes, the ability to manage their and other people's emotions (management, medical practitioners, patients, or patients' family), positive or pleasant reactions toward various aspects of their works, and the leadership style of their employer that encourages and supports their needs.

Nurses who have high levels of emotional intelligence might feel empathy toward their coworkers and the conditions in their organization; the work aspects that they perceived as fair might induce satisfaction and promote positive perception toward their works, while a supportive and encouraging leadership might make them feel accepted in their working environments. This involves cognitive processes that make nurses feel that they are a part of the organizations, and therefore, show willingness to perform the tasks beyond their responsibility to improve organizational effectiveness.

Overall, it was expected that there was a positive effect of emotional intelligence, job satisfaction and transformational leadership (independent variables) on organizational citizenship behavior (a dependent variable; see Figure 1).

The hypothesis was emotional intelligence, job satisfaction and transformational leadership were the predictors of nurses' OCB.

Method

This current research is a field study using quantitative methods to examine the contribution of the three independent variables (emotional intelligence, job satisfaction and transformational leadership) to the dependent variable (organizational citizenship behavior). The variables were measured using questionnaires. A questionnaire is a tool to collect data from primary sources used in quantitative research (Sugiyono, 2011a). Four questionnaires used in this study were the organizational citizenship behavior (OCB), emotional intelligence, job satisfaction and transformational leadership questionnaire.

The OCB questionnaire was modified from the questionnaire employed by Cholil (2011). The questionnaire includes the five aspects of OCB by Organ et al (2006): *altruism, civic virtue, conscientiousness, courtesy,* and *sportsmanship*. It consists of 18 items with the alpha reliability coefficient of .858. The questionnaire of emotional intelligence was based on Mayer and Salovey's concept of emotional intelligence (2004). It consists of four aspects: (i.e., perceiving emotion, using emotion to facilitate thinking, understanding emotion and managing emotion) with 22 items. The alpha reliability coefficient was .903. The questionnaire of job satisfaction was adapted from Sitompul (2013). The questionnaire was based on the aspects of job satisfaction by Kinicki et al (2002), i.e., the work itself, employer, coworkers, promotion and payment. It consists of 25 items with alpha reliability coefficient of .934. The questionnaire of transformational leadership was adapted from Humairah (2005) that was based on the questionnaire consisting of the four aspects of transformational leadership by Avolio and Bass (1991): charm, individual awareness, intellectual stimulation and inspirational motivation. The questionnaire consists of 20 items with alpha reliability coefficient of .875.

The items in the four questionnaires have five options of answer: '*sangat sesuai*' (SS/very appropriate), '*sesuai*' (S/appropriate), '*netral*' (N/neutral), '*tidak sesuai*' (TS/inappropriate), and '*sangat tidak sesuai*' (STS/very inappropriate). The scoring for favorable items range from 1 to 5, 1 = *STS/very inappropriate*; 2 = *TS/inappropriate*; 3 = *N/neutral*; 4 = *S/appropriate*; and 5 = *SS/very appropriate*. On the contrary, the scoring for unfavorable items was reversed.

There were 146 nurses participated in this research. They were randomly chosen from several hospitals
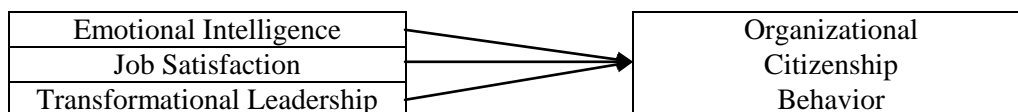

Figure 1. Framework of the study

in Yogyakarta. Data analysis used to test the hypothesis was multiple regression analysis. Multiple regression analysis is used to determine the regression equation of the relationship between two or more independent variables and a dependent variable (Sugiyono, 2011b).

Result

The study was conducted from December 13 to 23, 2013. The analysis was carried out using multiple regression analysis. It was revealed that all variables, emotional intelligence, job satisfaction and transformational leadership, could predict OCB ($F = 15.314$, $p < .05$), and their effective contribution was 24.4% ($R^2 = .244$). The result of regression analysis using stepwise method showed that the three independent variables (emotional intelligence, job satisfaction and transformational leadership) could separately predict OCB. The emotional intelligence, transformational leadership, and job satisfaction variable accounted for the following percentage of the variance in OCB: 19.2%, 3% and 2.2%, respectively. This indicates that emotional intelligence has the highest contribution in predicting OCB, followed by transformational leadership and job satisfaction.

Discussion

The result of multiple regression analysis showed that the three predictors provide significant contribution to OCB ($F = 15.314$, $p < .05$). This indicates that the hypothesis was confirmed. The three independent variables accounted for 24.4% of the variance in OCB, in other words, 24.4% nurse's OCB was influenced by emotional intelligence, job satisfaction and transformational leadership, and 75.6% was influenced by other variables that were not considered in this study.

The positive influence of emotional intelligence, job satisfaction and transformational leadership on nurses' OCB that was found in this study can be explained using a cognitive theory. According to the theory, individuals process information received from their senses through awareness (cognition) before they show responses or reactions (Sarwono, 2002). The application of the cognitive theory in this study can be seen from the OCB performed by nurses. The OCB is the product of cognitive processes of emotion within self and others (management, medical practitioners, patients or patients' family), positive or pleasant reaction toward their work aspects, and employer's leadership style

that supports and attends to the subordinates' need. For example, a nurse is willing to do the works of his or her coworker who is not present because the nurse is aware of difficulties experienced by the hospital management, patients, or his or her working group if the works are not carried out. Additionally, the nurse may voluntarily do his or her co-worker's work because he or she considers that his or her coworker is a friend and they develop mutual understanding, and this leads to satisfaction with the work in the hospital. The nurse's willingness to do his or her coworker's work, may also result from the leadership of the employer that guides the employees whenever the employees encounter problems in doing their coworker's task.

The other result in this study that is performed separately for the three independent variables showed that the three independent variables (emotional intelligence, job satisfaction and transformational leadership) significantly predicted nurses' OCB. The variable that had the most influence on OCB was emotional intelligence (19.2%), followed by transformational leadership (3%), and job satisfaction (2.2%).

The independent variable that had the most influence on nurses' OCB was emotional intelligence. This finding is similar to that in Sumiyarsih et al's (2012) study showing that nurses with high levels of emotional intelligence were more likely to perform OCB. Kierstead's research (1999) also showed a similar result that emotional intelligence possessed by employees at work would make employees, particularly in public service, work more productively.

A significant relationship between emotional intelligence and employees' OCB was also found by Pararak (2006). The higher the level of emotional intelligence of employees, the higher the rate of occurrence of their OCB. Employees who experienced positive and pleasant emotions were more likely to help their coworkers and demonstrate cooperative behavior when working with their coworkers or people in other divisions, and this improved their work performance. Emotional intelligence might lead employees to work cooperatively with their coworkers in order to achieve organizational goals and objectives.

The result also support Purba's and Seniati's (2004) finding that individuals who had higher levels of emotional stability were more able to tolerate inconvenience and did not complain about minor mistakes made by management at work. The employees could manage their emotions and were emotionally stable, and therefore, they showed good attitude toward organizational policy or unfair management's decision. They were also able to change the negative thoughts

about hospital and maintain the hospital's good reputation in society.

In his research, Goleman (2000) demonstrated that emotional intelligence improved emotional bonding and a sense of belonging toward a company, and therefore, employees' loyalty, which was a part of OCB, might encourage employees to be more loyal to organization, i.e., they were willing to postpone their personal matters for organization and to support and fight for their organization's interest. Furthermore, Goleman (2000) stated that employees with good emotional intelligence would have a positive impact on their work environment. Employees who showed self-understanding and self-management would have a positive and supportive work performance that was shown from their dedication and accuracy in performing their work.

Employees with high levels of emotional intelligence might show high levels of empathy, and thus, they were easily aware of and understood other people's feeling and problems. Empathy is the root of altruistic attitude, i.e., an attitude that shows concern toward others; sometimes even ignoring their own interest to help other people (Goleman, 2000). This factor supports the occurrence of helping behavior that was a part of the OCB.

Another independent variable that influences nurses' OCB is transformational leadership. This finding is consistent with the result of study by Modassir and Singh (2008). The study indicated that employees who were led using transformational leadership style showed OCB naturally. It might happen because the employees believed that their employers understood their needs, and therefore, they were willing to give their best to the organization (Modassir & Singh, 2008).

The result supports Humairah's finding (2005) that showed that transformational leadership style was more suitable to be implemented in hospitals since it helped nurses to overcome sudden difficulties or problems when performing their tasks.

Several studies indicated that transformational leadership influenced OCB either directly (Podsakoff, MacKenzie, Paine, & Bachrach, 2000) or indirectly (Pillai, Schriesheim & Williams, 1999; Podsakoff, MacKenzie, Moorman & Fetter, 1999). Pillai et al (1999) found that transformational leadership style led employees to put trust in their leaders and this made them perform OCB. Podsakoff et al (1990) found that the influence of transformational leadership on employees' OCB was related to their trust and satisfaction toward their employers, and thus, they were willing to perform their tasks beyond their organization's expectations.

The last independent variable that influences nurses' OCB is job satisfaction. The result is in line with the previous research that indicated that an employee in an organization, would perform his or her task exceeding his or her formal obligation if he or she get satisfaction from his or her work, such as payment or incentive was paid based on the employee's responsibility, experiences, skills or seniority (Danan, 2007). Sloat (1999) stated that employees tended to work beyond their responsibility if they were satisfied with their works. The employees' satisfaction made them feel obliged to pay back by showing good performance and attitude toward their organization (Korsgaard, Meglino & Lester, 2010).

Limitations

It should be noted that this study has several limitations that need to be improved in the future: a) Limitation in distributing questionnaire. Questionnaire was not distributed directly by the researcher, and therefore it is susceptible to bias due to inability to control participants' seriousness in completing the questionnaire. It is suggested that further research distributing the questionnaire directly to participants in order to obtain honest responses; b) Measures used in this study included items that may contain social desirability and multiple interpretations, and thus, it may lead to biased responses; c) The number of measures used in this study is quite a lot, and therefore it may lead to biases or boredom when the respondents completed the questionnaire. The respondents might not show thorough understanding when reading the items of the questionnaire.

Conclusion

Based on the result and discussion in this current study, it is concluded that the contribution of emotional intelligence, job satisfaction and transformational leadership in predicting nurses' organizational citizenship behavior (OCB) was 24.4%. It indicated that the higher levels of emotional intelligence, job satisfaction and transformational leadership, the higher nurses' OCB. When analyzing separately, emotional intelligence at work place was the most influential factor in predicting nurses' OCB with the contribution of 19.2%. It was followed by transformational leadership that contributed 3% to OCB. Transformational leadership influenced OCB directly and indirectly. The final factor that influenced OCB was job satisfaction that contributed 2.2% to OCB. Emotional

intelligence is the most influential factor in predicting nurses' OCB because a nurse works in a relationship with other people, in this case medical practitioners and patients, and therefore, a nurse needs to control his or her emotions, and to understand the feelings of doctors and patients in order to generate harmonious relationships.

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