One of the Informal Communication Channels among Nurses: Attitudes and Thoughts Toward Gossip and Rumors

Abstract

Aim: The present study aimed to analyze nurses' attitudes toward and opinions regarding gossip and rumors, an informal communication channel.

Methods: This descriptive study was conducted among 124 nurses working in a university hospital in the Central Anatolia Region. The data were collected using "The Descriptive Questionnaire" and "The Gossip and Rumor Attitude Scale". Ethical approval and institutional permissions were obtained for the study. Data analysis was performed using descriptive statistics, the independent samples *t*-test, the Mann–Whitney *U*-test, and the Kruskal–Wallis test.

Results: The nurses obtained the highest mean score (3.15 ± 0.49) on the identification sub-dimension and the lowest mean score (2.17 ± 0.72) on the effects sub-dimension of the Gossip and Rumor Attitude Scale. Among the nurses, 55.6% reported that they frequently encountered gossip and rumors, mainly related to nurses (37.4%) and personal matters (34.4%). No statistically significant difference was found between the sub-dimension scores according to age, gender, education level, the unit worked, and shift (*P* > .05).

Conclusion: Nurses positively identified but negatively affected by gossip and rumor. Nurse managers should be aware of the positive and negative aspects of gossip and rumors, an informal way of communication, and have the ability to reduce the negative personal and institutional effects.

Keywords: Informal communication, Gossip, Rumor, Nurse, Attitude

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Introduction

Communication, a process of sharing emotions, opinions, and information, occurs in both formal and informal manner within an institution.[1] Formal communication is defined as being maintained within the preset rules of the institution, while informal communication is defined as that which occurs naturally as a result of the relationship between the institution members.[2] Informal communication, which spreads faster than formal communication, may positively contribute to the decision-making process by facilitating this process when it is blocked due to institutional procedures.[1]

Gossip and rumors, which are indicated to be the oldest media in the world, involve the informal aspect of communication.[3] In the dictionary of the Turkish Language Association, gossip is defined as the "conversation aiming to backbite and condemn others," while rumors are defined as the "news that is spread from mouth to mouth but is not certain, hearsay."[4] Gossip is a significant social behavior that is experienced, heard, and probably engaged in by almost everyone working in an institution.[5] The general belief about gossip and rumors is that they are always bad behaviors that have the negative aim of damaging people and institutions.[6] Previous studies have reported that gossip reduces team collaboration[7] and organizational citizenship behavior,[8,9] and increases negative feelings in individuals such as fear,[10] as well as emotional exhaustion,[9] and shown that gossip within an institution may yield negative results for both teams and individuals.

Although the concept of gossip and rumors in an institution bring negative connotations to mind, the literature also includes studies that have reported positive results. Such studies have indicated that gossip facilitates the sharing of information during periods of uncertainty and change in institutions,[5] maintains and controls group solidarity by serving as a guide for group norms,[11] positively affects businesses' efficiency,[12] ensures the rapid sharing of new and original news with others,[13,14] and allows strengthening of the status, prestige, and increase intragroup reputation of those who bring the news.[15,16] In addition, since gossip increases fun, and indirectly, social relationships,[17] it may make routine work tolerable and increase employee motivation.

In hospitals, as in other institutions, communication is established in various and complicated ways. The centers that provide healthcare services are considered to be more stressful compared with other working environments due to the complicated organizational structure and way of communication of the healthcare system, working in shifts, and providing service for individuals under a lot of stress.[18] Gossip has an important place in people's lives, and studies support the fact that it undeniably exists in health institutions, where a complicated manner of communication is present.[7,12,19–23]

Nurses, who are most affected by the negative factors in their working environment and have a stressful and a complex communication network, are also among the groups that gossip.[12,23–28] Nurses experience multidimensional relationships with patients and other healthcare

personnel, and use gossip and rumors to share information[27] and express their emotions.[28] When gossip and rumors intended for a positive purpose are used negatively, this may cause those nurses, whose personality and characteristic traits do not comply with the institution, to leave, which results in loss of experienced nurses[12] and damage to teamwork,[7] and may be perceived as an implied threat or psychological harassment,[29] which in turn affects the quality of patient care and the success of the institution. Gossip and rumors cannot be completely eliminated; therefore, they should be effectively managed by managers and turned into an advantage.[1,30] For a successful process, it is important that managers try to maximize the positive effects of gossip and rumors by controlling them instead of trying to suppress them.[28]

Aim of the Study

The present study sought answers to the following questions with a view to analyzing nurses' attitudes toward gossip and rumors:

- What attitudes do nurses have toward gossip and rumors?
- What opinions do nurses have on gossip and rumors?
- Do nurses' attitudes toward gossip and rumors significantly differ according to their personal information?

Methods

Study Design and Period

This descriptive study was conducted in a university hospital in the Central Anatolia Region of Turkey between January 22 and March 19, 2018.

Study Population and Sample

The study population consisted of all nurses working in a university hospital (N: 317). Only the nurses working on the inpatient wards were included in the study; those working in polyclinics, emergency departments, and operating rooms (n: 76), and those who were on annual or maternity leave during the study period (n: 13) were excluded. The study sample was determined using the random sampling method among the improbable sampling methods; of the nurses included (n: 228), 124 volunteered to participate and constituted the study sample. The power of the study was found to be 85% in the calculation made for 124 nurses, with an effect size of 0.5 and a margin of error of 5% to determine the sufficiency of the sample size.

Data Collection Tools

The data were collected using "The Descriptive Questionnaire" and the "The Gossip and Rumor Attitude Scale".

The Descriptive Questionnaire This form was prepared by the researchers following a literature review[12,23,31] and included nine questions regarding the nurses' sociodemographic and professional characteristics, status of encountering gossip, and the situations about which people gossip.

The Gossip and Rumor Attitude Scale This scale was developed by Eşkin Bacaksız and Yıldırım[31] in Turkish with a sample of nurses to determine people's attitudes toward gossip and rumors. This 5-point Likert-type scale consists of 61 statements under four sub-dimensions (Identification, Causes, Effects, and Reactions). The items are scored as 5 = totally agree, 4 = agree, 3 = neutral, 2 = disagree, and 1 = totally disagree. Since it is a multidimensional scale, the mean sub-dimension scores are separately evaluated; no evaluation is made on the mean total scale score. The sub-dimension scores are calculated by dividing the total score of the items in each sub-dimension by the number of items in the sub-dimension, ie, the arithmetic mean is found. The scale

has no cut-off point. The minimum and maximum sub-dimension scores are 1 and 5, respectively. Higher mean sub-dimension scores (closer to 5) indicate positive attitudes and lower mean sub-dimension scores (closer to 1) indicate negative attitudes toward gossip and rumors. Cronbach's alpha coefficients ranged from 0.77 to 0.90 for the sub-dimensions of the original scale. In the present study, Cronbach's alpha coefficients were found to range from 0.79 to 0.89.

The identification sub-dimension includes statements such as "gossip and rumors are funny," "gossip can be accepted unless it violates personal rights," "gossip and rumors cause time to be wasted," "gossip and rumors are definitely based on facts," "gossip and rumors aim to discredit individuals or institutions," and "conversations undertaken for fun are not deemed gossip and rumors," which involve opinions describing the positive and negative aspects of gossip and rumors. Lower mean scores on this sub-dimension indicate negative attitudes and higher mean scores indicate positive attitudes toward identifying gossip and rumors.

On the causes sub-dimension, lower mean scores indicate that gossip and rumors cannot be attributed to any particular reason, while higher mean scores indicate that gossip and rumors arise based on certain reasons. This sub-dimension includes statements such as "gossip and rumors arise from an individual's need to talk about and share things," "individuals refer to gossip and rumors when they cannot express their thoughts clearly," gossip and rumors are more frequently encountered in working environments where different occupational groups work together," and "insufficient in-house official communication channels cause an increase in gossip and rumors."

On the effects sub-dimension, lower mean scores indicate that gossip and rumors have negative personal and institutional effects, while higher mean scores indicate that they have positive personal and institutional effects. This sub-dimension includes statements such as "gossip and rumors in the working environment cause damage to people," "gossip and rumors in the working environment cause stress in employees," "employees' commitment to the institution reduces as gossip and rumors increase," "gossip and rumors in the working environment cause damage to the institutional image," and "gossip and rumors may cause employees to quit their job."

On the reactions sub-dimension, lower mean scores indicate that people's reactions are more severe than expected, while higher mean scores indicate that people's reactions are at the expected severity. This sub-dimension includes statements such as "I get angry when I realize that people gossip about me," "I feel very sad when I realize that people gossip about me," "my performance decreases when I realize that people gossip about me," "when I realize that people gossip about me, I keep my distance from those people," and "I do not care when I realize that people gossip about me."

Data Collection

The data were collected using the Personal Information Form and the Gossip and Rumor Attitude Scale. The researchers distributed the forms to the nurses, waited for them to be completed, and collected them following completion. The researchers did not wait for the forms that were not completed within the time given; they took the forms back incomplete. Completion of the forms took 15 minutes on average.

Ethical Considerations

Approval of the Ethics Committee on Drug and Non-Medical Device Research of a university (Decision No: 2017/1121) and permission from the institution were obtained to conduct the study. For the use of the

scale in the study, permission was obtained from the author who developed the scale. The nurses were informed about the study and their verbal consent was obtained.

Data Analysis

Data analysis was performed with the SPSS 20.0 package program using descriptive statistical analysis methods (numbers, percentages, means, standard deviation, and minimum and maximum values). Whether the data were normally distributed was analyzed using the skewness, kurtosis, and Shapiro–Wilk test; the independent samples *t*-test was used for normally distributed groups, while the Kruskal–Wallis and Mann–Whitney *U*-tests were used for abnormally distributed groups. The results were assessed at a confidence interval of 95% with $P < .05$.

Results

The nurses' mean age was 31.21 ± 7.71 years old, and of them, 59.7% were aged 30 or younger, and 84.7% were female. Of the nurses, 50% had a bachelor's degree, 66.9% were working in surgical and internal medicine units, and 71% were working the night-day shift (Table 1).

The nurses' mean score was 3.15 ± 0.49 for the identification sub-dimension, 2.21 ± 0.60 for the causes sub-dimension, 2.17 ± 0.72 for the effects sub-dimension, and 2.83 ± 0.59 for the reactions sub-dimension (Table 2).

Of the nurses, 55.6% reported that they "often" encountered gossip and rumors, and 46% reported that they "sometimes" partake in gossip and rumors. The nurses reported that nurses were the group that partake in gossip and rumors most (37.4%), followed by caregivers/personnel (36.6%). The nurses reported that personal matters were the most frequently encountered content of gossip and rumors (34.4%), followed by institution-related matters (31.2%), and matters regarding patients and patient relatives (19.9%) (Table 3).

No statistically significant difference was found between the sub-dimension scores according to the nurses' age, gender, education level, the unit worked, and shift ($P > .05$) (Table 4).

Table 2. Gossip and Rumors Attitude Scale Mean Sub-dimension Scores

Sub-dimension	Mean ± SD	Min	Max
Identification	3.15 ± 0.49	1.82	4.82
Causes	2.21 ± 0.60	1.00	4.82
Effects	2.17 ± 0.72	1.15	5.00
Reactions	2.83 ± 0.59	1.29	5.00
Min: Minimum, Max: Maximum, SD: Standard deviation.			

Table 1. Nurses' Characteristics (N: 124)

Characteristics	n	%
Age (Mean ± SD = 31.21 ± 7.71)		
18-30	74	59.7
31-51	50	40.3
Gender		
Female	105	84.7
Male	19	15.3
Education Level		
Vocational health school	23	18.5
Associate degree	30	24.2
Bachelor's degree	62	50.0
Postgraduate	9	7.3
The unit worked		
Surgical and internal medicine	83	66.9
Intensive care units	26	21.0
Administrative units	15	12.1
Shift		
Day	36	29.0
Night	88	71.0
SD: Standard deviation.		

Table 3. Distribution of the Nurses' Opinions on Gossip and Rumors

Nurses' Opinions on Gossip and Rumors	n	%
How often do you encounter gossip and rumors?		
Rarely	4	3.2
Sometimes	19	15.4
Often	69	55.6
Very often	32	25.8
How much do you think you gossip and rumor?		
Never	5	4.0
Rarely	43	34.7
Sometimes	57	46.0
Often	16	12.9
Very often	3	2.4
Which groups do you think engage in gossip and rumors the most?*		
Nurses	91	37.4
Caregiver/personnel	89	36.6
Physicians	58	23.9
Others (medical secretary, companion relatives)	5	2.1
About which matters are the gossip and rumors that you encounter the most?*		
Personal matters	64	34.4
Institution-related matters	58	31.2
Matters about patients and companions	37	19.9
Matters about daily life	27	14.5
*More than one option was marked, and percentages were taken over number "n".		

Discussion

The present study, which analyzed nurses' attitudes toward and opinions regarding gossip and rumors, an informal communication channel, found that nurses had the highest mean score on the identification sub-dimension and defined gossip and rumors as positive. This finding is interpreted that the participating nurses considered gossip and rumors as a fun need and a way of communication that strengthens social bonds. In addition, gossip and rumors, regarded as positive and funny, were considered to make a positive contribution to patient care output by reducing nurses' stress in their working environment and increasing their occupational motivation. Previous studies have shown that gossip and rumors positively contribute to organizational efficiency,[12] assist in reducing employee stress,[28] accelerate and facilitate information sharing,[1,5,13] strengthen social relationships,[15,17] and help people express their feelings[13] and relieve mentally,[22] which is in accordance with the findings of the present study. On the other hand, some studies have demonstrated that gossip and rumors increase fear[10] and emotional burnout,[9] cause wasted time,[31] and reduce team collaboration,[7] which drew attention to the negative aspects of gossip and rumors, conflicting with the present study.

The present study found that nurses had a low mean score on the causes sub-dimension, indicating that they did not consider gossip and rumors to be attributed to any particular reason. Erol and Akyüz[22] conducted a study with healthcare personnel, which supported that

Table 4. Comparison of the Nurses' Personal Characteristics with Their Gossip and Rumors Attitude Mean Sub-dimension Scores						
Characteristics			Identification	Effects	Causes	Reactions
		n	Mean ± SD/ Med (Min-Max)	Mean ± SD Med (Min-Max)	Mean ± SD Med (Min-Max)	Mean ± SD Med (Min-Max)
Age	18-30	74	3.54 ± 0.55	2.05 ± 0.50	4.18 ± 3.95	3.31 ± 0.53
	31-51	50	3.19 ± 0.42	2.22 ± 0.45	3.95 ± 0.48	3.25 ± 0.51
t			2.144	−1.947	2.309	0.681
p			0.056	0.059	0.061	0.497
Gender	Female	105	3.27(3.09-3.68)	2.17(1.89-2.47)	4.00(3.69-4.53)	3.23(2.92-3.69)
	Male	19	3.36(3.00-3.90)	1.91(1.43-2.34)	4.69(3.84-4.69)	3.23(2.92-3.76)
z			−0.699	−1.881	−2.125	−0.170
P			0.485	0.060	0.034	0.865
Education Level	Vocational health school	23	3.63(3.09-4.00)	2.39(1.95-2.73)	4.38(3.84-4.69)	3.46(3.15-3.61)
	Associate degree	30	3.18(2.88-3.68)	2.21(1.90-2.52)	4.00(3.82-4.44)	3.23(2.90-3.73)
	Bachelor's degree	62	3.31(3.06-3.65)	2.02(1.64-2.39)	4.03(3.69-4.69)	3.23(2.84-3.76)
	Postgraduate	9	3.27(2.77-3.68)	2.21(1.93-2.34)	3.92(3.57-4.53)	3.15(2.84-3.46)
KW			5.894	5.505	0.725	2.334
P			0.117	0.138	0.867	0.506
The Unit Worked	Surgical and internal medicine	83	3.36(3.00-3.90)	2.13(1.78-2.43)	4.23(3.69-4.69)	3.30(3.07-3.76)
	Intensive care units	26	3.22(2.90-3.68)	2.23(1.84(2.47)	3.84(3.67-4.17)	3.00(2.69-3.50)
	Administrative units	15	3.45(3.27-3.63)	2.21(1.86(2.56)	3.92(3.53-4.38)	3.23(2.76-3.69)
KW			1.458	1.071	5.035	3.946
P			0.482	0.585	0.081	0.139
Shift	Day	36	3.27(3.09-3.63)	2.26(1.88-2.48)	4.00(3.73-4.38)	3.30(2.92-3.69)
	Night	88	3.36(3.00-3.81)	2.13(1.78-2.46)	4.00(3.69-4.69)	3.23(2.92-3.67)
z			−0.165	−0.802	−0.947	−0.581
P			0.869	0.423	0.344	0.561

Min: Minimum, Max: Maximum, SD: Standard deviation, Med: Median.
KW: Kruskal Wallis test, t: Independent samples *t*-test, z: Mann Whitney *U*-test.

gossip had positive effects in terms of relationships within the institution and was necessary. This finding was interpreted as nurses not considering that gossip and rumors can be attributed to any particular reason and that this is a normal way of communication. In addition, gossip and rumors are not considered to be used as a way of communication that causes damage to individuals and the organization as they are regarded as positive and normal.

The present study found that nurses had a low mean score on the effects sub-dimension, suggesting that themselves and the institution were negatively affected by gossip and rumors. It has previously been reported that gossip may cause employees to quit their jobs,[12] reduce collaboration[13] and trust[14] among employees, and negatively affect their organizational citizenship behaviors.[8,9] Eşkin Bacaksız and Yıldırım[31] reported that the effects of gossip and rumors on nurses were observed as reduced labor productivity and commitment to the institution. Social interaction norms stipulate that people should behave with dignity toward others and that individuals' privacy should be respected. Individuals who perceive themselves as the victim of negative gossip cannot consider their interpersonal relationships to be significant. The detrimental and hidden nature of negative workplace gossip will weaken individuals' social integrity and work relationships; therefore, managers should be vigilant to the possible problems in their interactions with colleagues and the institution in the future.

In the present study, the reactions sub-dimension was found to be at the moderate level, indicating that nurses' reactions to gossip and rumors were close to the expected level. This is interpreted as the nurses feeling angry, sad, and disappointed, and preferring to keep their distance when they encountered gossip and rumors. This is in accordance with the results reported by Eşkin Bacaksız and Yıldırım.[31] Artaç[12] reported that gossip and rumors may cause 44.5% of employees to quit their jobs and increase the intention of revenge. The fact that gossip and rumors with the aim of having fun and strengthening social communication cause reactions detrimental to the institution, such as quitting jobs and revenge, is an unexpected situation. In the present study, nurses gave more passive reactions, naturally and psychologically. However, gossip and rumors have two aspects (light and dark); and if they cannot be well-managed, this should be considered a situation in which undesirable and negative results are inevitable, and measures should be taken accordingly.

The nurses reported that they "often" encountered gossip and rumors and that they themselves "sometimes" partake. In accordance with the present study, Eşkin Bacaksız and Yıldırım[23] and Artaç[12] reported that 33.2% and 26.6% of nurses, respectively, often encountered gossip and rumors in their institution. Gossip is an inevitable and unplanned behavior that we encounter in life, and it is impossible to completely eliminate it. Instead of considering gossip as a problem that should be managed, it should be considered a reflection of the "problem behind a problem."[21] Managers should not ignore gossip and rumors in their institution and must have the ability to consider them a call for aid for an event that can damage the institution.

In the present study, nurses reported that nurses constituted the group that gossip the most, which may be attributed to the fact that the study sample consisted only of nurses, and they answered the questions considering themselves. Artaç[12] also found that nurses were the group that gossip the most. Altuntaş et al.[27] and Eşkin Bacaksız and Yıldırım[31] determined that nurses gossip about their colleagues most. Grosser et al.[11] reported that more than 90% of employees in institutions in the USA and Western Europe partake in gossip in their workplace. Studies conducted with healthcare personnel indicate that all occupational groups in health services partake in gossip and rumors in their daily life, although the rates change.[12,27,31] In the present study, as expressed by most of the nurses, the causes of gossip and rumors were accepted as natural situations, and gossip and rumors were used as a way of communication to strengthen social relationships. Therefore, managers should adopt an open-door approach by increasing their communication with their employees to positively transform gossip and rumors.

In the present study, nurses reported that most of the gossip and rumors that they encountered were about personal matters, followed by institution-related matters, and matters regarding patients and patient relatives. In accordance with the present study, Artaç[12] also found that personal matters ranked first; conversely, Altuntaş et al.[27] and Eşkin Bacaksız and Yıldırım[31] reported that institution-related matters ranked first. Kuo et al.[32] indicated that work-related gossip negatively affects work performance and causes cynicism. Georganta et al.[7] and Ceylan and Çetinkaya[24] determined that gossip and rumors endanger patient safety and privacy. In the present study, the fact that nurses gossiped about personal matters most can be interpreted as them using gossip and rumors in a positive way to express their feelings, socialize, and have fun, depending on the high mean score on the identification sub-dimension. However, the rates of gossip and rumors about the institution and patients were also considerably high. To prevent damage to institutions and patients as indicated in these studies, managers should recognize gossip and rumors quickly, evaluate their effects, and attempt to correctly manage them in such a way to yield positive results.

In the present study, no statistically significant difference was found between the nurses' sub-dimension scores according to age, gender, education level, the unit worked, and shift. Similarly, other studies found no significant difference in gossip and rumors according to age and gender, but their content was different.[11,33,34] Bulduk et al.[26] determined that female nurses and those who have a bachelor's degree are more negatively affected by gossip and rumors. Kim et al.[25] found that gossip and rumors are negatively related to increased age, and females tend to partake in more gossip and rumors as compared with males. Georganta et al.[7] determined that females are more negatively affected by gossip and rumors in terms of teamwork and emotional fatigue as compared with males. In the present study, the fact that no significant difference was found in gossip and rumors according to the nurses' descriptive characteristics could be attributed to the sample size.

Conclusion

The present study found that nurses identified gossip and rumors in the institution to be positive and did not consider them to be attributed to any particular reason but constitute a natural way of communication. In addition, nurses were negatively affected by gossip and rumors but showed passive reactions. Nurses often encountered gossip and rumors in their institution and were among the groups that gossip. Although they gossiped about personal and institution-related matters most, they also gossiped about patients and patient relatives. It should be realized that gossip and rumors constitute a paradoxical situation and that organizational culture may be negatively affected. In addition, managers should consider gossip and rumors to be indicators of a situation that requires intervention. To do this, managers can gain a perspective about what happens in their teams by collecting information regarding certain gossip examples and using them to obtain positive results and reduce negative results. Gossip is inevitable, and it is important for nurse managers to know what motivates gossip and rumors in their institution and how they can be managed to avoid the

effects on the organizational results. Since studies in the literature concern employee attitudes toward gossip and rumors and the personal and institutional damage they can cause, it is recommended that future studies investigate the causes of gossip and rumors in organizations as this is also equally important.

Ethics Committee Approval: Ethics committee approval was received for this study from the Necmettin Erbakan University Drug and Non-Medical Device Research Ethics Committee (2017/1121) and institutional permission was obtained from Necmettin Erbakan University Meram Medical Faculty Hospital.

Informed Consent: For the use of the scale in the study, permission was obtained from the author who developed the scale. The nurses participating in the study were informed about the study and their verbal consent was obtained.

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