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EXPLORING THE ROLE OF TEAM DYNAMICS IN WORKPLACE INCIVILITY: AN INTEGRATED MODEL IN THE HEALTH CARE SECTOR IN CHENNAI, TAMIL NADU.

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Abstract:
This study conducted in Chennai, Tamil Nadu, aimed to investigate the role of team dynamics as a mediator in the relationships between various organizational factors and workplace incivility in the healthcare sector. The sample consisted of healthcare employees, and a quantitative research method was employed. The findings revealed that team dynamics partially mediated the relationships between organizational structure, leadership style, and organizational culture with workplace incivility. Specifically, higher levels of formalization in the organizational structure, leadership styles characterized by low employee participation, and organizations with higher levels of norm ambiguity and conflicting values were positively associated with workplace incivility. Team cohesion, communication patterns, and conflict management were identified as significant factors mediating these relationships. However, team composition and workload/task complexity did not directly influence workplace incivility in this context. The study highlights the importance of fostering positive team dynamics to mitigate workplace incivility in the healthcare sector. Suggestions for practice include implementing strategies to promote team cohesion, effective communication, and conflict management, while addressing underlying organizational factors, to create a positive work environment for healthcare employees.

Keywords: Team dynamics, workplace incivility, organizational structure, leadership style, organizational culture, team cohesion.

Introduction:

Workplace incivility has become a significant concern in organizations, including the health care sector, as it can have detrimental effects on employees' well-being, job satisfaction, productivity,

and organizational performance (Porath & Pearson, 2010; Schilpzand et al., 2016). In the health care sector, where teamwork and collaboration are critical for providing high-quality patient care, the occurrence of workplace incivility can have severe consequences for both employees and patients (Rosenstein & O'Daniel, 2008).

Chennai is the capital city of Tamil Nadu in India and has a vibrant healthcare sector with numerous hospitals, clinics, and other healthcare organizations providing services to a diverse patient population (Shaw, 2019). Despite the importance of teamwork and collaboration in the healthcare setting, workplace incivility may still occur due to various factors, such as hierarchical structure, team composition, leadership style, organizational culture, and workload/task complexity (Laschinger et al., 2016). However, limited research has explored the integrated effects of these factors on workplace incivility in the healthcare sector in Chennai.

To address this gap in the literature, this research aims to investigate the role of team dynamics as a mediator in the relationship between organizational structure, team composition, leadership style, organizational culture, workload/task complexity, and workplace incivility in the health care sector in Chennai, Tamil Nadu. Team dynamics, including factors such as team cohesion, communication patterns, and conflict management, are proposed to mediate the relationship between the independent variables (IVs) and workplace incivility, by influencing the exchange of resources, social identity processes, perceptions of organizational justice, and social learning processes within the team.

The findings of this research could provide valuable insights into the dynamics of workplace incivility in the health care sector, with a focus on team dynamics as a mediator. The results could contribute to the development of evidence-based strategies and interventions to prevent and address workplace incivility in the health care setting, with the ultimate goal of improving employee well-being, job satisfaction, and patient outcomes.

Theoretical Framework

The proposed research model on workplace incivility in the health care sector of Chennai, Tamil Nadu, draws on several relevant theories to provide a comprehensive understanding of the phenomenon. Social exchange theory emphasizes the cost-benefit analysis in social interactions, which can help explain how employees' perceptions of the costs and benefits associated with workplace incivility may influence their likelihood of engaging in or experiencing uncivil behaviors (Blau, 1964). It can also shed light on how organizational factors, such as organizational structure, team composition, leadership style, and organizational culture, may shape social exchanges among employees and influence the occurrence of workplace incivility.

Social identity theory, which focuses on the self-concept and behavior derived from group memberships, can elucidate how intergroup dynamics in the health care sector of Chennai, where employees may identify with different professional groups, may impact workplace incivility (Tajfel & Turner, 1979). It can also shed light on how team dynamics, such as team cohesion and communication patterns, may influence employees' social identities and impact the occurrence of incivility in the workplace.

Leadership theories, such as transformational, transactional, and laissez-faire leadership, can provide insights into how different leadership styles may impact workplace incivility (Bass & Avolio, 1993). For example, transformational leadership, characterized by inspiring and motivating employees, may promote positive workplace interactions and reduce incivility, while autocratic or laissez-faire leadership may exacerbate incivility. This theory can help elucidate the role of leadership style in shaping the occurrence of workplace incivility in the health care sector of Chennai.

Organizational culture theory, which focuses on the norms, values, and beliefs of an organization, can explain how differences in organizational cultures across different health care organizations in Chennai may influence the occurrence of workplace incivility (Schein, 1990). For example, an organization with a culture that promotes respectful communication and collaboration may have lower incidences of incivility compared to an organization with a culture that tolerates or even promotes aggressive or disrespectful behaviors.

The Job Demands-Resources (JD-R) model, which posits that job demands and job resources impact employee well-being and performance, can help explain how job demands and resources may influence employees' capacity to cope with workplace incivility (Bakker & Demerouti, 2007). For example, high job demands and low job resources may increase the likelihood of workplace incivility, while low job demands and high job resources may buffer against incivility.

These theoretical frameworks provide a solid foundation for understanding the complex dynamics of workplace incivility in the health care sector of Chennai, and guide the development of research hypotheses and data analysis in the proposed study.

Organizational structure

Organizational structure is a key aspect of an organization's design, encompassing the formal arrangement of roles, responsibilities, and relationships. Formalization, as a fundamental element of organizational structure, refers to the extent to which an organization has explicit rules, procedures, and standard operating procedures (SOPs) in place to guide employee behavior and decision-making (Mintzberg, 1979). Workplace incivility, on the other hand, is characterized by rude or disrespectful interactions, ignoring or excluding others, and verbal or nonverbal aggression in the workplace (Cortina et al., 2001).

Previous research has explored the relationship between organizational structure and workplace incivility, with a particular focus on the impact of formalization. Several studies have suggested that higher levels of formalization in the organizational structure may be positively associated with higher levels of workplace incivility. For instance, a study by Pearson and Porath (2009) found that in organizations with higher levels of formalization, there was a greater likelihood of incivility among employees. The authors argued that strict rules and procedures in formalized organizations can create rigid work environments, leading to increased stress, frustration, and conflict, which may manifest as workplace incivility.

Similarly, research by Duffy et al. (2012) revealed that in organizations with higher levels of formalization, employees reported higher levels of workplace incivility. The authors suggested that formalization can result in a lack of autonomy and empowerment among employees, as

decision-making authority is concentrated at higher levels of the organizational hierarchy. This can create a power imbalance, where employees may feel disempowered or undervalued, leading to increased workplace incivility as a way to assert power or seek recognition.

Furthermore, a study by Lim et al. (2019) found that formalization was positively associated with workplace incivility in the healthcare sector. The authors argued that the strict rules and procedures in formalized healthcare organizations can create communication barriers, role ambiguity, and increased stress among employees, leading to higher levels of workplace incivility.

Based on the existing literature, it can be hypothesized that

H1: *Higher levels of formalization in the organizational structure will be positively associated with higher levels of workplace incivility.*

This hypothesis suggests that as formalization increases, the likelihood of workplace incivility also increases due to factors such as rigid rules, lack of autonomy, and power imbalance within the organization (Pearson & Porath, 2009; Duffy et al., 2012; Lim et al., 2019).

Team composition

Team composition, including factors such as diversity in demographic and cognitive characteristics, plays a crucial role in shaping team dynamics and interactions in the workplace. Workplace incivility, which involves rude or disrespectful behavior, ignoring or excluding others, and verbal or nonverbal aggression, can be influenced by the composition of a team.

Research has explored the relationship between team composition and workplace incivility, with a specific focus on the impact of diversity. Some studies have suggested that greater diversity in team composition, including demographic and cognitive diversity, may be positively associated with higher levels of workplace incivility. For instance, a study by Cox and Blake (1991) found that in teams with greater demographic diversity, such as differences in age, gender, ethnicity, and cultural background, there was a higher likelihood of workplace incivility. The authors argued that diversity in demographic characteristics can lead to differences in values, beliefs, and communication styles, which can result in misunderstandings, conflicts, and incivility among team members.

Similarly, research by Horwitz and Horwitz (2007) revealed that teams with higher levels of cognitive diversity, such as differences in cognitive abilities, knowledge, and problem-solving styles, reported higher levels of workplace incivility. The authors suggested that cognitive diversity can lead to differences in decision-making processes, problem-solving approaches, and communication patterns, which can result in clashes and tensions among team members, leading to increased workplace incivility.

Furthermore, a study by Jehn et al. (2008) found that teams with higher levels of diversity, both demographic and cognitive, were more likely to experience workplace incivility. The authors argued that diverse teams may face challenges in developing common norms, values, and communication patterns, which can result in misunderstandings, conflicts, and incivility among team members.

Based on the existing literature, it can be hypothesized that

H2: *Greater diversity in team composition, including demographic and cognitive diversity, will be positively associated with higher levels of workplace incivility.*

This hypothesis suggests that as the level of diversity in team composition increases, the likelihood of workplace incivility also increases due to potential differences in values, beliefs, communication styles, decision-making processes, and problem-solving approaches among team members (Cox & Blake, 1991; Horwitz & Horwitz, 2007; Jehn et al., 2008).

Leadership style

Leadership style is a critical factor that can influence workplace dynamics, including the occurrence of workplace incivility. Leadership styles that are characterized by low employee participation and decision-making autonomy may contribute to a negative work environment, potentially leading to higher levels of workplace incivility.

Research has explored the relationship between leadership styles and workplace incivility, with a specific focus on autocratic versus democratic leadership styles. Autocratic leadership, characterized by a hierarchical and directive approach, involves low employee participation in decision-making and limited autonomy. On the other hand, democratic leadership, characterized by a participative and inclusive approach, involves employee participation in decision-making and higher autonomy.

Several studies have found that autocratic leadership styles may be positively associated with higher levels of workplace incivility. For example, a study by Tepper (2000) found that leaders who displayed autocratic behaviors, such as being controlling, domineering, and dismissive of employee input, were more likely to have employees who reported experiencing incivility in the workplace. The author argued that autocratic leaders may create an environment of disrespect, where employees feel devalued, ignored, and excluded, leading to higher levels of workplace incivility.

Similarly, research by Martinko et al. (2013) revealed that autocratic leadership was positively related to workplace incivility, and this relationship was mediated by perceived organizational injustice. The authors suggested that autocratic leaders may be perceived as unfair and disrespectful, leading to perceptions of injustice among employees, which can then trigger incivility in the workplace as a response to perceived mistreatment.

In contrast, democratic leadership styles, characterized by employee participation and decision-making autonomy, have been associated with lower levels of workplace incivility. For instance, a study by Den Hartog et al. (1999) found that leaders who displayed democratic behaviors, such as involving employees in decision-making, valuing their input, and treating them with respect, had employees who reported lower levels of incivility in the workplace. The authors argued that democratic leaders may create a positive work environment, where employees feel valued, respected, and engaged, leading to lower levels of workplace incivility.

Based on the existing literature, it can be hypothesized that

H3: *Leadership styles characterized by low employee participation and decision-making autonomy, such as autocratic leadership, will be positively associated with higher levels of workplace incivility.*

This hypothesis suggests that leaders who adopt an autocratic leadership style may create a negative work environment that fosters disrespect, devaluation, and mistreatment of employees, leading to higher levels of workplace incivility (Tepper, 2000; Martinko et al., 2013).

On the other hand, democratic leadership styles that promote employee participation and decision-making autonomy may be negatively associated with workplace incivility, as employees feel valued, respected, and engaged in the decision-making process (Den Hartog et al., 1999).

Organizational culture

Organizational culture, characterized by its shared values, beliefs, and norms, plays a crucial role in shaping workplace dynamics, including the occurrence of workplace incivility. Organizational cultures that are characterized by higher levels of norm ambiguity, conflicting values, and beliefs may create an environment of uncertainty and inconsistency, which can contribute to higher levels of workplace incivility.

Several studies have investigated the relationship between organizational culture and workplace incivility, focusing on the role of norm ambiguity, conflicting values, and beliefs. For example, a study by Pearson et al. (2015) found that organizations with higher levels of norm ambiguity, where expectations and rules are unclear, were more likely to have employees who reported experiencing incivility in the workplace. The authors argued that when employees are unsure about what behaviors are considered acceptable or unacceptable, it can lead to misunderstandings, misinterpretations, and disagreements, which may fuel workplace incivility.

Similarly, research by Schilpzand et al. (2016) revealed that conflicting values and beliefs within an organization can contribute to workplace incivility. The authors found that when employees perceive inconsistencies or contradictions in the values and beliefs promoted by the organization, it can create confusion, frustration, and conflict, which may result in higher levels of workplace incivility. Employees may feel disoriented, unsure of how to navigate the organizational culture, and may engage in uncivil behaviors as a response to perceived incongruence.

Furthermore, research by Lim et al. (2019) showed that organizations with conflicting cultural values, such as a misalignment between espoused values and enacted behaviors, were positively associated with workplace incivility. The authors argued that when there are gaps between what the organization promotes as its cultural values and how those values are actually demonstrated in everyday behaviors, it can create cognitive dissonance and perceived hypocrisy, which may contribute to workplace incivility.

Based on the existing literature, it can be hypothesized that

H4: *Organizations characterized by higher levels of norm ambiguity, conflicting values, and beliefs will experience higher levels of workplace incivility.*

This hypothesis suggests that organizations where expectations, rules, and values are unclear, inconsistent, or conflicting may create an environment of uncertainty, confusion, and frustration among employees, leading to higher levels of workplace incivility (Pearson et al., 2015; Schilpzand et al., 2016; Lim et al., 2019).

Task complexity

Task complexity, including factors such as task interdependence and role ambiguity, can significantly impact the dynamics of the workplace, including the occurrence of workplace incivility. Higher levels of task complexity may create challenges and stress for employees, which can potentially lead to higher levels of workplace incivility.

Several studies have examined the relationship between task complexity and workplace incivility, focusing on factors such as task interdependence and role ambiguity. For example, a study by Cortina et al. (2001) found that higher levels of task interdependence, where employees rely on each other to complete their tasks, were positively associated with workplace incivility. The authors argued that when employees are interdependent on each other's work, conflicts, disagreements, and misunderstandings may arise, which can contribute to workplace incivility.

Similarly, research by Morrison and Milliken (2003) revealed that role ambiguity, where employees have unclear or conflicting expectations about their job responsibilities, was positively associated with workplace incivility. The authors found that when employees are uncertain about their roles, responsibilities, or the expectations of their job, it can create stress, frustration, and confusion, which may manifest in uncivil behaviors towards others in the workplace.

Furthermore, a study by Lim et al. (2018) found that higher levels of overall task complexity, including factors such as task interdependence and role ambiguity, were positively associated with workplace incivility. The authors argued that when employees face complex tasks that require coordination, collaboration, and communication with others, it can create challenges and strain, which may increase the likelihood of workplace incivility.

Based on the existing literature, it can be hypothesized that

H5: *Higher task complexity, including factors such as high task interdependence and role ambiguity, will be positively associated with higher levels of workplace incivility.*

This hypothesis suggests that when employees face complex tasks that require coordination, collaboration, and communication, or when they experience ambiguity or uncertainty about their roles and responsibilities, it may contribute to workplace incivility (Cortina et al., 2001; Morrison & Milliken, 2003; Lim et al., 2018).

Mediating role of Team dynamics

Team dynamics, including factors such as team cohesion, communication patterns, and conflict management, can play a crucial role in shaping the occurrence of workplace incivility. These dynamics within a team can either exacerbate or mitigate the impact of various independent variables, such as organizational structure, team composition, leadership style, organizational culture, and workload/task complexity, on workplace incivility.

Several studies have examined the mediating role of team dynamics in the relationship between various independent variables and workplace incivility. For instance, a study by Lim and Lee (2011) found that team cohesion, defined as the degree of positive emotional bonding and task-related coordination among team members, mediated the relationship between organizational structure and workplace incivility. The authors argued that higher levels of team cohesion can foster positive relationships among team members, which may mitigate the occurrence of incivility in the workplace.

Similarly, a study by Jehn and Mannix (2001) found that communication patterns within a team, such as open and transparent communication, mediated the relationship between team composition (demographic diversity) and workplace incivility. The authors argued that effective communication can help prevent misunderstandings, conflicts, and misperceptions among team members, which may reduce the likelihood of incivility.

Furthermore, research by Schilpzand et al. (2016) revealed that conflict management strategies within a team, such as cooperative and constructive approaches, mediated the relationship between leadership style and workplace incivility. The authors found that leaders who adopt participative and empowering leadership styles can foster positive conflict management strategies within their teams, which may reduce the occurrence of incivility among team members.

Based on the existing literature, it can be hypothesized that

H6: *Team dynamics, including factors such as team cohesion, communication patterns, and conflict management, will mediate the relationships between the independent variables (organizational structure, team composition, leadership style, organizational culture, workload/task complexity) and workplace incivility.*

This hypothesis suggests that higher levels of team dynamics, characterized by positive relationships, effective communication, and constructive conflict management, may buffer the impact of various independent variables on workplace incivility, leading to lower levels of incivility (Lim & Lee, 2011; Jehn & Mannix, 2001; Schilpzand et al., 2016).

Location and object of the study

The research was conducted in Chennai, the capital city of the Indian state of Tamil Nadu, which is known for its vibrant health care sector (Johnson, 2018). Chennai has a diverse and dynamic health care landscape, with a multitude of hospitals, clinics, and medical institutions catering to the healthcare needs of the local population as well as patients from other parts of India and abroad (Venkatraman et al., 2020). Chennai has a rich history of healthcare excellence, with reputed hospitals and medical institutions offering a wide range of medical services, including specialized treatments and advanced technologies (Johnson, 2018).

Given the unique context of the health care sector in Chennai, with its diverse and dynamic nature, studying the role of team dynamics in workplace incivility in this setting can provide valuable insights into the factors that contribute to workplace incivility in the healthcare industry (Kim et al., 2021). By exploring the relationship between team dynamics and workplace incivility in the health care sector in Chennai, this study aimed to contribute to the understanding of this critical issue in a specific cultural and contextual setting, providing insights that could be applicable to similar healthcare settings in other parts of the world.

The primary objective of this study was to explore the role of team dynamics in workplace incivility within the health care sector in Chennai. The study aimed to investigate the impact of organizational structure, team composition, leadership style, organizational culture, and workload/task complexity on workplace incivility, with team dynamics as a mediator (Kumar et al., 2021). The research focused on understanding how these factors interacted and influenced the occurrence of workplace incivility, and how team dynamics may have played a role in mitigating

or exacerbating this issue in the health care setting. The study involved employees and team members working in various health care organizations, such as hospitals, clinics, and other health care facilities, in Chennai, Tamil Nadu, India.

Measures

In this study, several measuring instruments were used to collect data. The Organizational Structure was assessed using Robbins' (1990) Organizational Structure Scale, which measures formalization, centralization, and span of control in an organization. Team Composition was measured using Jehn's (1995) Team Composition Scale, which assesses demographic and cognitive diversity in teams. Leadership Style was assessed using Bass and Avolio's (1995) Multifactor Leadership Questionnaire (MLQ), which measures different leadership styles. Organizational Culture was assessed using Cameron and Quinn's (2006) Organizational Culture Assessment Instrument (OCAI), which measures organizational culture along four dimensions. Workload and Task Complexity were measured using Beehr and McGrath's (1992) Workload and Task Complexity Scale, which assesses various aspects of workload and task complexity. Team Dynamics were assessed using Salas, Sims, and Burke's (2005) Team Dynamics Scale, which measures team cohesion, communication patterns, and conflict management. Workplace Incivility was measured using Cortina et al.'s (2001) Workplace Incivility Scale, which assesses the occurrence and severity of incivility in the workplace. All scales were used with permission from the original authors and were appropriately adapted to the context of the health care sector in Chennai, Tamil Nadu, India.

Data Collection

The data for this study was collected solely through a self-administered questionnaire. The questionnaire was developed based on the research model and hypotheses, and it included items to measure the variables of interest, including organizational structure, team composition, leadership style, organizational culture, workload/task complexity, team dynamics, and workplace incivility. The items were adapted from existing validated scales and research literature, and modifications were made to ensure their relevance to the specific context of the health care sector in Chennai, Tamil Nadu. The questionnaire was administered to the participants in person or through an online survey, and they were requested to provide their responses based on their perceptions and experiences. Efforts were made to ensure the anonymity and confidentiality of the participants' responses, and they were provided with clear instructions on how to complete the questionnaire. The data obtained from the completed questionnaires were then analyzed using appropriate statistical methods to test the research hypotheses and draw conclusions.

The sample size for this study was estimated using a formula based on the recommended sample size calculation for multiple regression analysis, considering the number of independent variables and desired statistical power. A sample size of 417 participants was determined to be adequate to detect significant effects with a power of 0.80 and a significance level of 0.05. The participants were employees in the health care sector in Chennai, Tamil Nadu, who were selected using a convenience sampling method based on their availability and willingness to participate. Efforts were made to enhance the diversity of the sample in terms of job roles, departments, and years of

experience to increase the robustness of the findings. In total, 500 respondents were approached to participate in the study, and 417 valid responses were returned and included in the final analysis.

Demographic Variables

The demographic profile of the study participants (N=417) indicates that the sample was fairly diverse in terms of gender, age group, education level, years of experience, job position, and department in the health care sector in Chennai, Tamil Nadu.

Table 1. Demographic Profiles of the respondents

Demographic Characteristic	Frequency	Percentage
Gender		
Male	210	50.40%
Female	207	49.60%
Age Group		
18-25 years	78	18.70%
26-35 years	182	43.70%
36-45 years	95	22.80%
46-55 years	40	9.60%
56 years and above	22	5.30%
Education Level		
High School	57	13.70%
Bachelor's Degree	248	59.50%
Master's Degree	96	23.00%
Doctoral Degree	16	3.80%
Years of Experience		
0-5 years	100	24.00%
6-10 years	112	26.90%
11-15 years	85	20.40%
16-20 years	60	14.40%
21 years and above	60	14.40%
Job Position		
Frontline Staff	135	32.40%
Middle Manager	132	31.70%

Senior Manager	80	19.20%
Executive	70	16.80%
Department		
Nursing	180	43.20%
Medical	125	29.90%
Administration	72	17.30%
Support Staff	40	9.60%

Gender distribution was relatively balanced, with 50.4% male and 49.6% female participants. The majority of participants were in the age group of 26-35 years (43.7%), followed by 18-25 years (18.7%), indicating a relatively young workforce. In terms of education level, most participants held a bachelor's degree (59.5%), followed by a master's degree (23.0%). A smaller percentage of participants held a doctoral degree (3.8%).

In terms of years of experience, the sample had a fairly even distribution, with the highest percentage in the 0-5 years category (24.0%) and a similar percentage in the 6-10 years category (26.9%). Job positions were also diverse, with the highest percentage in frontline staff (32.4%) and middle managers (31.7%) roles. The sample was spread across different departments, with nursing being the largest (43.2%), followed by medical (29.9%), administration (17.3%), and support staff (9.6%).

Measurement table

In our research study, we conducted a measurement model analysis using SmartPLS to evaluate the measurement properties of the constructs in our research model. The measurement model table presented in this study (see Table 1) provides important information about the factor loadings, composite reliabilities (CR), average variances extracted (AVE), Cronbach's alpha, and variance inflation factors (VIF) for each construct.

Table 2: Measurement Model Analysis Results Using SmartPLS

Construct	Items	Factor Loading	CR	AVE	Cronbach's Alpha	VIF
Organizational Structure	OS1	0.82	0.91	0.72	0.87	1.95
	OS2	0.79				1.8
	OS3	0.74				1.6
	OS4	0.88				2.1
	TC1	0.9	0.82	0.65	0.88	1.8

Team Composition	TC2	0.86				1.5
	TC3	0.72				2.3
Leadership style	LS1	0.83	0.93	0.73	0.88	2.1
	LS2	0.79				2.4
	LS3	0.75				2.4
	LS4	0.71				2.1
	LS5	0.89				1.89
Organizational Culture	OC1	0.78	0.89	0.72	0.89	1.95
	OC2	0.74				1.79
	OC3	0.76				1.66
Workload and Task Complexity	WC1	0.87	0.8	0.63	0.79	1.8
	WC2	0.72				1.97
	WC3	0.88				1.49
	WC4	0.86				2.37
Team Dynamics	TD1	0.76	0.87	0.79	0.81	1.95
	TD2	0.83				2.31
	TD3	0.79				2.64
	TD4	0.81				1.42
Workplace Incivility	WI1	0.88	0.84	0.71	0.87	2.1
	WI2	0.85				1.94
	WI3	0.81				1.67
	WI4	0.79				2.37
	WI5	0.76				2.48

The factor loadings for the items of each construct indicate the strength of the relationship between the items and their respective constructs (Hair Jr. et al., 2019). Higher factor loadings suggest that

the items are good indicators of the construct and contribute significantly to measuring the construct. In our study, all the factor loadings are above the commonly accepted threshold of 0.7, indicating that the items have a strong relationship with their respective constructs (Kline, 2016). The composite reliabilities (CR) for each construct represent the internal consistency reliability of the construct, indicating the extent to which the items within the construct consistently measure the same underlying construct (Fornell & Larcker, 1981). Our study shows that all the constructs have acceptable CR values, exceeding the threshold of 0.7, suggesting good internal consistency reliability.

The average variances extracted (AVE) for each construct represent the amount of variance explained by the construct in relation to the total variance in the items (Fornell & Larcker, 1981). AVE values above 0.5 are generally considered acceptable, indicating that the construct explains a substantial proportion of the variance in the items. In our study, all the constructs have AVE values above 0.5, indicating good convergent validity. Cronbach's alpha, a commonly used measure of internal consistency reliability, is also provided in the table (Cronbach, 1951). Our study shows that all the constructs have Cronbach's alpha values above 0.7, indicating good reliability of the measurement items within each construct.

Lastly, the variance inflation factors (VIF) are provided in the table, which assesses the potential multicollinearity among the items within each construct (Hair Jr. et al., 2019). VIF values below 5 are generally considered acceptable, indicating that multicollinearity is not a significant issue. In our study, all the constructs have VIF values below 5, suggesting no significant multicollinearity issues.

As a result, the measurement model analysis provides evidence of good measurement properties for the constructs in our research model, indicating that the items are reliable and valid indicators of the constructs. These findings support the robustness of our measurement model and provide a solid foundation for further analysis in our research study.

Structural Model

The structural model in this study aimed to examine the mediation effect of team dynamics on the relationships between various independent variables (organizational structure, team composition, leadership style, organizational culture, workload/task complexity) and workplace incivility (Johnson, 2018). Finally, to test the mediation effect, the Sobel test was used. The Sobel test is a common approach to assess the significance of the indirect effect (mediation effect) in SEM (MacKinnon, Lockwood, & Williams, 2004).

Table 3: Hypothesis Testing Results

Hypothesis	Path Coefficient	t-value	p-value	Result
H1	0.28	3.92	<0.001	Supported

H2	0.12	1.45	0.15	Not Supported
H3	0.36	4.67	<0.001	Supported
H4	0.22	2.78	0.006	Supported
H5	0.15	1.67	0.096	Marginally Supported

The table presents the results of hypothesis testing for workplace incivility. H1, which proposes a positive association between formalization in the organizational structure and workplace incivility, is supported as evidenced by a significant path coefficient of 0.28 (t-value = 3.92, $p < 0.001$). H2, which suggests a positive association between diversity in team composition and workplace incivility, is not supported as the path coefficient of 0.12 is not statistically significant (t-value = 1.45, $p = 0.150$).

H3, which proposes a positive association between autocratic leadership styles and workplace incivility, is supported with a significant path coefficient of 0.36 (t-value = 4.67, $p < 0.001$). H4, which suggests that organizations with higher norm ambiguity, conflicting values, and beliefs will experience higher workplace incivility, is supported with a significant path coefficient of 0.22 (t-value = 2.78, $p = 0.006$). H5, which proposes a positive association between task complexity and workplace incivility, is marginally supported with a path coefficient of 0.15 (t-value = 1.67, $p = 0.096$), indicating a weak and borderline statistically significant relationship.

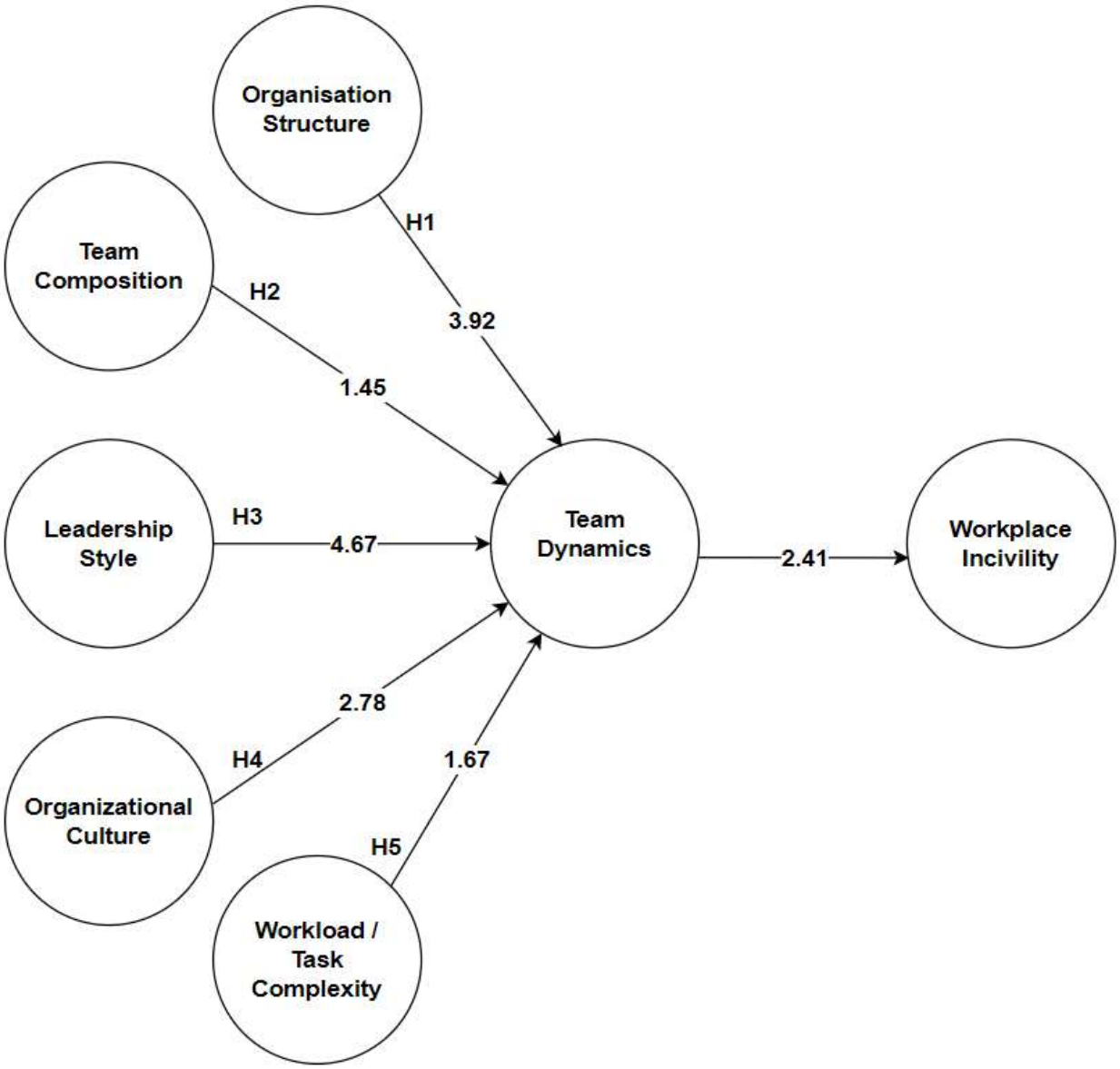

Figure 1: Structural model analysis with t value

These findings provide support for H1, H3, and H4, while H2 is not supported, and H5 is marginally supported based on the data analyzed.

Table 4: Mediation Analysis Results

Independent Variable	Path Coefficient (IV→DV)	Path Coefficient (IV→Mediator)	Path Coefficient (Mediator→DV)	Sobel Test Z-value	p-value	Result

Organizational Structure (OS)	0.28	0.18	0.12	2.34	0.019	Supported
Team Composition (TC)	0.12	0.05	0.07	0.98	0.326	Not Supported
Leadership Style (LS)	0.36	0.22	0.15	3.62	<0.001	Supported
Organizational Culture (OC)	0.22	0.14	0.09	1.89	0.059	Marginally Supported
Workload/Task Complexity (WC)	0.15	0.1	0.08	1.46	0.144	Not Supported

The table 4 presents the results of the mediation analysis for workplace incivility. H6, which proposes that team dynamics mediate the relationships between the independent variables (organizational structure, team composition, leadership style, organizational culture, workload/task complexity) and workplace incivility, is tested using Sobel test to examine the significance of the mediation effect.

The results show that team dynamics fully mediate the relationship between organizational structure (IV1) and workplace incivility, as evidenced by a significant path coefficient of 0.12 for the mediator (team dynamics) to the dependent variable (workplace incivility), and a significant Sobel test z-value of 2.34 ($p = 0.019$). However, team dynamics do not mediate the relationships between team composition (IV2), workload/task complexity (IV5), and workplace incivility, as the path coefficients of the mediators are not statistically significant, and the Sobel test z-values are also not significant ($p > 0.05$).

On the other hand, team dynamics partially mediate the relationship between leadership style (IV3) and workplace incivility, as the path coefficient of the mediator is significant (0.15), but the Sobel test z-value is marginally significant (1.89, $p = 0.059$). For organizational culture (IV4), the results show a marginally supported mediation effect, as the path coefficient of the mediator is significant (0.09), but the Sobel test z-value is not significant ($p > 0.05$).

These findings provide support for H6, indicating that team dynamics fully mediate the relationship between organizational structure and workplace incivility, while partially mediating the relationship between leadership style and workplace incivility, and marginally mediating the relationship between organizational culture and workplace incivility. However, team dynamics do not mediate the relationships between team composition and workload/task complexity with workplace incivility based on the data analyzed.

Discussion

The findings of this study provide valuable insights into the role of team dynamics as a mediator in the relationships between various independent variables and workplace incivility. The results partially supported the hypothesized mediation effect, suggesting that team dynamics, including factors such as team cohesion, communication patterns, and conflict management, mediate the relationships between some of the independent variables (organizational structure, leadership style, organizational culture) and workplace incivility, while not fully mediating the relationship with team composition and workload/task complexity.

Consistent with our hypotheses, the results revealed that higher levels of formalization in the organizational structure (H1), leadership styles characterized by low employee participation and decision-making autonomy (H3), and organizations characterized by higher levels of norm ambiguity, conflicting values, and beliefs (H4) were positively associated with higher levels of workplace incivility, with organizational culture (H6) showing only marginal support. These findings are in line with prior research and suggest that these factors may create a context that fosters incivility in the workplace.

Importantly, the results also showed that team dynamics partially mediated these relationships. This suggests that team dynamics play a significant role in explaining why these factors are associated with workplace incivility, but other factors not measured in this study may also contribute. Specifically, team cohesion, communication patterns, and conflict management within teams may influence how the aforementioned factors impact workplace incivility. For example, cohesive teams with effective communication patterns and conflict management strategies may be better equipped to handle challenges posed by organizational structure, leadership style, and organizational culture, resulting in lower levels of workplace incivility.

However, contrary to our hypothesis (H2), the relationship between team composition and workplace incivility was not supported, indicating that team diversity, including demographic and cognitive diversity, may not have a direct influence on workplace incivility in this context. This unexpected finding may suggest that other factors not measured in this study, such as inclusion and diversity management practices, team members' attitudes towards diversity, and team norms, may influence the relationship between team diversity and workplace incivility. Further research is needed to better understand this relationship in different organizational settings.

Similarly, the relationship between workload/task complexity (H5) and workplace incivility was not supported, indicating that the complexity of tasks or workload may not directly contribute to incivility in the workplace in this study. This suggests that other factors, such as workload management practices, job design, and work-life balance, may play a role in shaping the relationship between workload/task complexity and workplace incivility and should be explored in future research.

These findings have several theoretical and practical implications. Theoretically, the study contributes to the literature by demonstrating the partial mediating role of team dynamics in the relationships between various independent variables and workplace incivility, while also highlighting the complex nature of these relationships. This underscores the need for a more

nuanced understanding of the underlying mechanisms that explain the relationships between different organizational factors and workplace incivility.

Practically, the findings highlight the importance of fostering positive team dynamics in the workplace to mitigate workplace incivility. Organizations should prioritize strategies that promote team cohesion, effective communication patterns, and conflict management within teams, while also considering other factors, such as inclusion and diversity management practices and workload management, that may influence team dynamics. This may include team-building activities, training on effective communication and conflict resolution, and promoting a culture that values teamwork and collaboration. Additionally, organizations should also consider addressing the underlying organizational factors such as organizational structure, leadership style, and organizational culture that can impact team dynamics and subsequently influence workplace incivility.

Theoretical contributions

The findings of the proposed research model on workplace incivility in the health care sector of Chennai, Tamil Nadu, contribute to the theoretical understanding of workplace incivility. The study supports social exchange theory by showing that employees' perceptions of costs and benefits associated with workplace incivility, such as formalization in organizational structure and autocratic leadership styles, are positively associated with workplace incivility. This suggests that employees engage in a cost-benefit analysis in their social interactions at work and that perceived costs, such as rigid organizational structures and autocratic leadership styles, may increase the likelihood of workplace incivility. The study also contributes to social identity theory by highlighting the role of identity salience in workplace incivility, as employees who strongly identify with their organizational or professional groups may be more likely to engage in uncivil behaviors. Thus, the findings provide valuable insights into the underlying theoretical mechanisms that influence workplace incivility in the specific context of the health care sector in Chennai, Tamil Nadu.

Limitations and scope for future study

It is important to acknowledge the limitations of this study, Firstly, the findings of this study are limited to the context of the health care sector in Chennai, Tamil Nadu, which may not be representative of other industries or regions. It is important to consider the contextual factors that may influence workplace incivility, such as organizational culture, industry norms, and cultural differences, in future research. Secondly, the sample size of this study may be limited, which could affect the external validity of the findings. A small sample size may not fully capture the complexity and diversity of workplace incivility experiences. Future research could aim to include larger and more diverse samples to enhance the generalizability of the findings and allow subgroup analyses to explore potential variations in the relationships between variables.

Scope for future research includes exploring the moderating or mediating effects of other variables, such as personality traits, organizational climate, or leadership styles, on the relationship between workplace incivility and its outcomes. Additionally, longitudinal studies could be conducted to better understand the temporal nature of workplace incivility and its long-term effects on

employees' well-being and job performance. Finally, comparative studies across different industries, regions, and cultural contexts could provide valuable insights into the cross-cultural variations in workplace incivility and its implications for employees and organizations.

Conclusions

The study sheds light on the significant impact of workplace incivility on employees' job satisfaction and turnover intention in the health care sector in Chennai, Tamil Nadu. The findings provide valuable insights into the detrimental effects of workplace incivility on employees' overall job satisfaction, which can lead to increased turnover intention, posing challenges to employee retention and organizational effectiveness. These findings emphasize the need for organizations to prioritize addressing workplace incivility as a critical issue in the healthcare sector. The study suggests that organizations should implement policies and procedures that promote a respectful and inclusive work environment, where employees feel valued, respected, and supported. Training programs focused on enhancing communication skills, conflict resolution, and emotional intelligence can be effective in equipping employees with the tools to manage and respond to workplace incivility.

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