

Ethical Work Climate, Moral Courage, Moral Distress and Organizational Citizenship Behavior among Nurses

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Abstract

Ethical work climate and moral courage are important elements influencing the actions of nurses and their organizational citizenship. This study aimed to investigate the relationship between ethical work climate, moral courage, moral distress, and organizational citizenship behavior among nurses at Zagazig university hospitals, Egypt. A descriptive correlational design was used for this research. A stratified random sample of 384 nurses was chosen from the above mentioned settings. Four tools were utilized for data collection: Hospital ethical climate scale, professional moral courage scale, moral distress scale and organizational citizenship behavior scale.

Results: Revealed that, 89.1% of nurses had positive perceptions of ethical work climate. Likewise, 85.4% and 83.1% of nurses had high levels of moral courage and moral distress respectively, and 47.7% of them had moderate level of organizational citizenship behavior.

Conclusion: Ethical work climate was significantly and positively correlated to moral courage and organizational citizenship behavior, while it was negatively correlated to moral distress.

Recommendation: Developed continuing education, and discussions promote positive ethical climates within the organization.

Keywords: *Ethical work climate, Moral courage, Moral distress, Organizational citizenship behavior.*

Introduction

In recent years, the amount of unethical activity has increased and it has caused a major loss of organization integrity and competitive advantage. These cases emphasize the significance of an ethical work climate in explaining how and why unethical behavior occurs⁽¹⁾.

Ethical climate is one of the main issues in the integrity of inter-organizational interactions and the continuity of previous decisions with ethical principles. It represents nurses' perception regarding the policies,

practices and procedures in relation to ethics⁽²⁾. The presence of an ethical climate influences on organization and nurses, that for organization, it improves the productivity and efficiency of the organization's performance⁽³⁾. While for nurses, it increases nurses' job satisfaction and organizational commitment, improves job performance and turnover intention⁽³⁾.

The work unit's climate is associated with moral courage, because it is an important factor affecting the behavior and practice of nurses⁽⁴⁾. Moral courage is a continuous fact, protection of rights and commitment to moral principles in the defense of the rights of patients, even in the potential danger to their position at work⁽⁴⁾. Nurses with moral courage, prefer loyalty to organization and treatment of patients to their own interests in any situation, support others, obey the implications of correct moral performance to achieve the desired outcome, while nurses with low moral courage, lose their

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moral motivation and decrease their willingness to serve patients⁽⁴⁾.

High quality of care is provided, while performing ethically and morally with proper healthcare systems, solving problems of nursing retention, job dissatisfaction and the their moral distress against organization⁽⁵⁾. Moral distress defined as an emotion that is expressed when the moral complexity of a situation is not leading to a resolution⁽⁶⁾.

Increased levels of moral distress lead to medical errors, nursing burnout, depression, lack of conscience, feelings of impotence and patient avoidance⁽⁶⁾. In contrast decreased levels of moral distress, increases job satisfaction, commitment and improves organizational citizenship behavior⁽¹⁾.

The conduct of organizational citizenship is a person aware and voluntary practice, and although it is not strictly and clearly acknowledged by the formally rewarding organizational structure, it generally enhances the functions of the organization and effectively influence the organizational efficiency⁽⁶⁾.

Significance of the study: Nursing shortages and the desire to leave are two key issues impacting the healthcare services provided, and the institution must identify underlying factors and develop professional ethical and moral courage among its nurses to avoid them⁽⁷⁾. Nurses are the cornerstone on which health care systems are constructed, and as ethical dilemmas continue to escalate, it is important to acknowledge nurses' current views on the strategies used to overcome these obstacles. When a hospital has a good ethical climate, nurses would do their jobs professionally and morally, help them to turn challenge into opportunity and improve their performance,⁽⁸⁾. So, the aim of this study was to investigate the relationship between ethical work climate, moral courage, moral distress and organizational citizenship behavior among nurses at Zagazig university hospitals, Egypt.

Aim: Investigate the relationship among ethical work climate, moral courage, moral distress and organizational citizenship behavior among nurses at Zagazig university hospitals.

Research Questions: What is the nurses' perception about ethical work climate?

What are the levels of nurses' moral courage, moral distress and organizational citizenship behavior?

Are there relations among ethical work climate, moral courage, moral distress and organizational citizenship behavior?

Methodology

Design: A descriptive correlational design was used for this study.

Setting: This study was conducted at all Zagazig University Hospitals, Egypt, which include two sectors involving eight teaching hospitals providing free treatment.

Subjects: Staff nurses working in the aforementioned setting with at least one year of experience.

Sample Size: It was estimated at confidence interval 95%, margin of errors 5.0%, by using this formula $[n = N / 1 + N (e)^2]$ ⁽⁹⁾; the required sample size was 384 staff nurses. A stratified random sample was used.

Instruments: Four tools were utilized to gather data for this study.

Tool 1: Hospital Ethical Climate Scale (HECS): It was developed by **Olson**⁽¹⁰⁾ to measure nurses' perceptions of ethical climate in hospital work environment. It consists of 26 items grouped under five domains. The response was along continuum of a five-point Likert scale, ranging from 1 (almost never true) to 5 (almost always true). A score was recognized a positive perception if it was ≥ 78 , and a negative perception if it was < 78 ⁽¹⁰⁾. Cronbach alpha coefficient ranged 0.81-0.92.

Tool 2: Professional Moral Courage Scale: It was developed by **Sekerka et al.**⁽¹¹⁾ to assess and quantify the construct of moral courage among nurses. It consists of 15 items grouped under five dimensions. The response was a long continuum of a five point Likert scale ranged from 1 (never) to 5 (always). Scores from 0 to ≤ 39 indicated a low level and scores ≥ 40 recognized a high level⁽¹¹⁾. Cronbach alpha coefficient was 0.85.

Tool 3: Moral Distress Scale of Nurses: It was developed by **Hamric et al.**⁽¹²⁾ to assess moral distress level of nurses. It included 21 items divided into four dimensions. The response was along continuum of five point Likert scale ranged from 0 (never) to 4 (always). A score was considered high in this research if it was ≥ 84 and low if it was < 84 ⁽¹²⁾. Cronbach alpha coefficient was 0.94.

Tool 4: Organizational Citizenship Behavior (OCB): It was developed by **Organ in Podsakoff et al.** ⁽¹³⁾. It consists of 24 items grouped under five domains. Nurse responses were measured on a five-point Likert scale ranging from 1 (Strongly disagree) to 5 (Strongly agree). Scores ≥ 96 revealed a high level, a moderate level indicated from 72 to 95, and a low level indicated < 72 ⁽¹³⁾. Cronbach alpha coefficient was 0.96.

Fieldwork: Data collection started in May till end of, July 2019. The researchers clarified the aim of the study to nurses either individually or through groups. The questionnaire took about 20-30 minutes to be completed.

Pilot study: It was carried out on 38 staff nurses (10% of the study sample), selected randomly and excluded from the main research sample.

Content validity: After translation of the tools into Arabic; face and content validity was done by a jury of experts (5 professors) from the academic nursing staff at Zagazig University. According to their opinions, all required modifications were done.

Ethical considerations: Before data collection, the content of this study was approved by Ethics Committee and Dean of the Faculty of Nursing, Zagazig University. Nurses who participated in the study were given an option to discontinue the study at any time without explanation.

Statistical Analysis: It was performed using the Statistical Package for Social Science (SPSS), version 21.0. Data were presented using descriptive statistics in form of frequencies and percentages for categorical variables. Pearson correlation used for assessment of the inter-relationships among variables.

Results

Table 1: Emphasizes that, less than half of nurses' age were between 30 to < 40 years (41.4%), with a mean age of 35.27 ± 8.38 . Furthermore, the majority of nurses were female, married, worked for less than 10 years of experience, and had technical diploma in nursing (70.1%, 78.7 %, 67.5%, and 55.9% respectively).

Table 2: Indicates total mean scores of hospital ethical work climate, moral courage, moral distress and organizational citizenship behaviors as reported by nurses (77.33 ± 22.19 , 53.48 ± 15.04 , 69.29 ± 10.62 & 85.08 ± 12.09 respectively).

Figure 1: Illustrates that 89.1% of nurses had a positive perception of ethical work climate.

Figure 2: Shows that more than three quarters of nurses had high levels of moral courage and moral distress (85.4% & 83.1% respectively).

Figure 3: Reveals that 47.7% of nurses had a moderate level of organizational citizenship behaviors' domains.

Table 3: Displays that, hospital ethical work climate was significantly and positively correlated to moral courage, and organizational citizenship behaviors ($r=0.651$ & $r=0.493$, at $P=0.000$, respectively), while it was negatively correlated to moral distress ($r=-0.263$, at $P=0.000$). Likewise moral distress was negatively correlated with moral courage and organizational citizenship behaviors ($r=-0.269$ & $r=-0.631$ at $P=0.000$).

Discussion

Ethical work climate of the organization is very important to increase organizational effectiveness and productivity and improve the quality of management and performance⁽¹²⁾. Therefore, this study aimed to investigate the relationship between ethical work climate, moral courage, moral distress and organizational citizenship behavior among nurses at Zagazig University Hospitals.

The results of this research showed that; the highest percentages of nurses had a positive perception of ethical work climate. This finding could be due to the clear and shared sense of the hospitals' mission, vision and value and unique responsibility, also supportive hospital management. The previous study finding is agreement with those of a study performed in Turkey by **Numminen et al.**⁽¹⁴⁾, who found that the overall perception of the ethical climate by nurses was positive. Although, these results were incompatible with those of a study conducted by **Shafipour et al.**⁽¹⁵⁾, in Iran and found that the nurses' perception of the ethical work climate was negative.

Concerning moral courage level; the majority of the nurses had a high level of the moral courage. This results might be due to that nurses have good relationships with their supervisors and motivation throughout allocating resources, training, developmental opportunities to nurses in a fair manner by their managers. These findings are in agreement with those of a study carried

out in Tehran by **Moosavi et al.** ⁽¹⁶⁾, who found that the nurses reported their moral courage at a high level. However, these findings were incongruent with a study conducted by **Day** ⁽¹⁷⁾, and found that nurses had low level of moral courage.

Regarding moral distress level; the majority of nurses had a high level of moral distress. This might be due to a rigid system between physicians and nurses, and are often considered subservient to physicians. These research results go in the same path as those of a study established in U.S.A by **Allen et al.** ⁽¹⁸⁾, and reported that the majority of nurses had a high level of moral distress. However, these findings are inconsistent with those of studies done by **Gonzalez** ⁽¹⁹⁾, in Island, and found that the majority of nurses had low level of moral distress.

In relation to organizational citizenship behavior; slightly less than half of nurses had a moderate level of OCB. This finding may be due to most of nurses seek to achieve their personal goals rather than the organizational ones.

These findings are congruent with those of a study conducted by **Bahrani et al.** ⁽²⁰⁾, in Iran, and found that the mean score of the OCB was moderate. Conversely, the previous findings are in disagreement with that of **Altuntas and Baykal** ⁽²¹⁾, in Turkey, who found that the OCB level of nurses was high.

As regards correlations between the different study variables, the current study results revealed that ethical work climate was significantly and positively correlated to moral courage, and organizational citizenship behaviors, while it was negatively correlated to moral distress. These findings could be due to that ethical climate facilitates the discussion on the patients' health problems and their solutions, provides a framework for ethical decision making in the clinical environment and enables employees to better cope with causes of dissatisfaction, and increases their level of commitment toward organization.

The current study results go in the same line with those of other previous studies as the one conducted by **Taraz et al.** ⁽⁸⁾, which clarified that there was a positive correlation between the ethical climate and moral courage among nurses.

Conclusion

Ethical work climate was significantly and

positively correlated to moral courage and organizational citizenship behaviors, while it was negatively correlated to moral distress.

Recommendations:

- Managers should improve the ethical atmosphere in hospitals by establishing an acceptable professional performance environment.
- Maintaining ethical relationship with nurses that help them to improve their performance.
- Developing continuing education and discussions to promote positive ethical climate within the organization.
- Create a learning and informative environment for nurses where it makes them competent to accomplish organizational objectives.
- Further research should address issues of ethical leadership among nursing managers and creating better ethical workplace environment.

Table (1): Distribution of Personal Characteristics of Nurses (n=384).

Personal and job characteristics	No	%
Age in year:		
< 30	120	31.2
30 - < 40	159	41.4
≥ 40	105	27.3
Mean ± SD 35.27 ± 8.38		
Gender:		
Male	115	29.9
Female	269	70.1
Marital status:		
Single	82	21.3
Married	302	78.7
Widowed	6	1.6
Experience (in years):		
< 10	259	67.5
≥ 10	125	32.5
Mean ± SD 7.68 ± 5.03		
Educational qualification:		
Nursing diploma	89	23.1
Technical diploma in nursing	215	55.9
Bachelor of nursing	80	20.8

Table (2): Distribution of Different Study Variables’ Mean Scores as Reported by Nurses (n=384)

Study variables	Mean	±	SD
Hospital ethical climate domains			
Relationship with peers	14.40	±	4.34
Relationship with patients	12.78	±	3.17
Relationship with physicians	17.23	±	5.16
Relationship with hospitals	17.39	±	4.69
Relationship with managers	15.53	±	4.83
Total	77.33	±	22.19
Professional moral courage domains			
Moral agency	11.05	±	3.38
Multiple values	10.43	±	2.98
Endurance of threats	10.11	±	2.60
Going beyond compliance	11.03	±	3.17
Moral goals	10.86	±	3.00
Total	53.48	±	15.04
Moral distress domains:			
Moral distress related to physicians	19.84	±	2.90
Moral distress related to nursing practices	18.29	±	2.99
Moral distress related to hospital’s policies	16.11	±	2.25
Moral distress related to futile care	15.05	±	2.48
Total	69.29	±	10.62
Organizational citizenship behaviors’ domains:			
Altruism	19.60	±	2.49
Courtesy	18.50	±	2.94
Sportsmanship	17.02	±	3.04
Civic virtue	14.57	±	2.49
Conscientiousness	14.97	±	3.30
Total	85.08	±	12.09

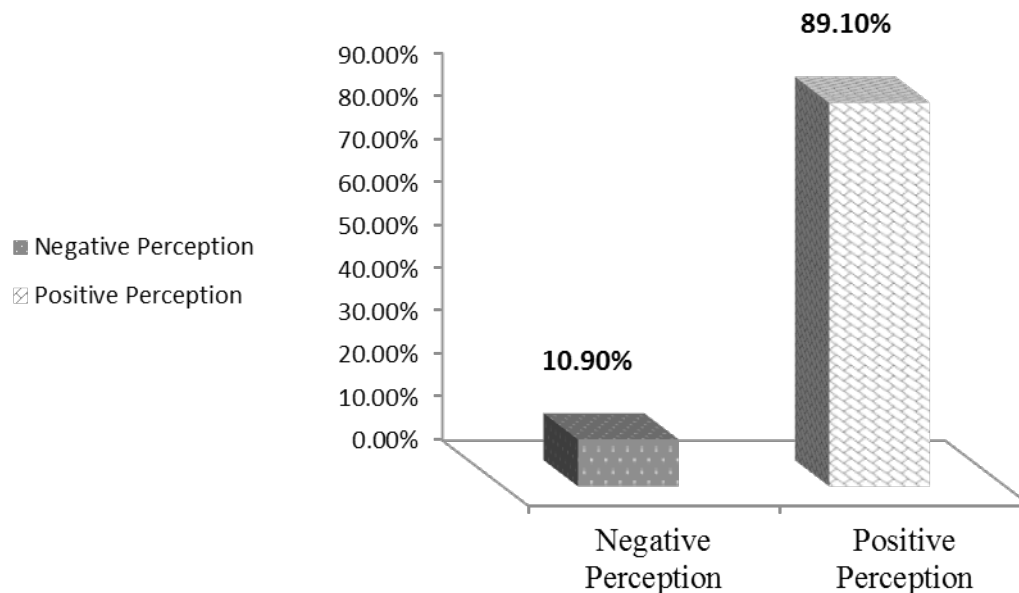


Figure 1: Nurses’ Perception as Regards Ethical Work Climate(n=384).

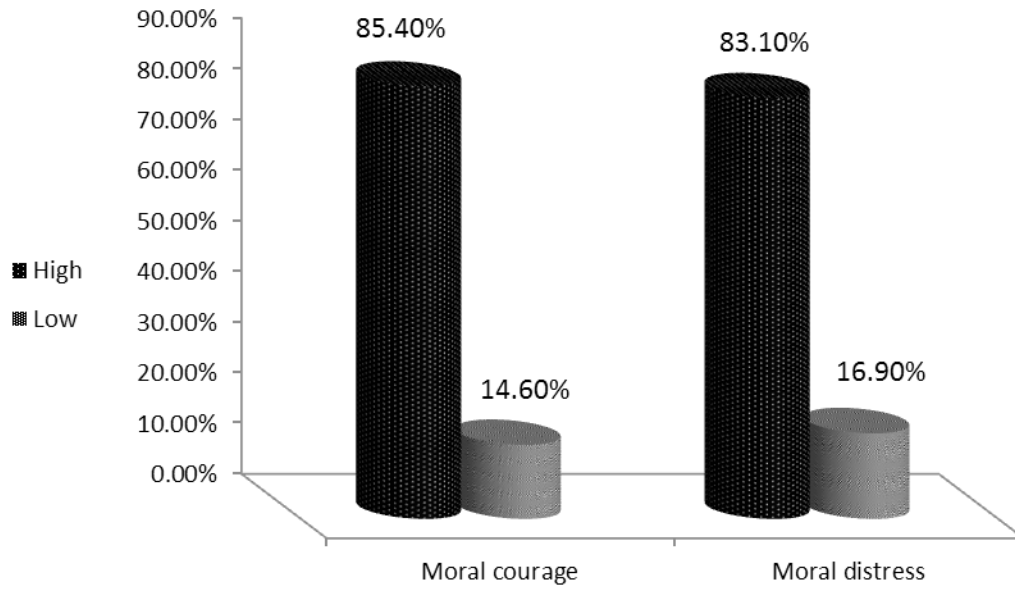


Figure 2: Levels of Moral Courage and Moral Distress among Nurses (n=384).

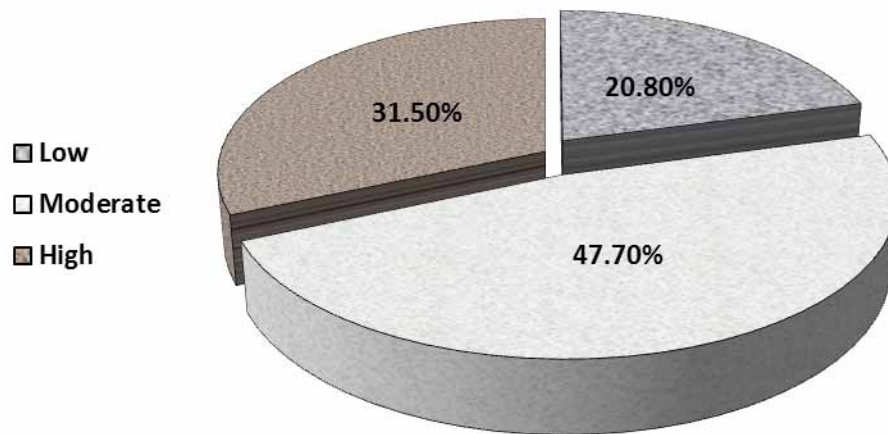


Figure 3: Levels of Organizational Citizenship Behaviors among Nurses(n=384).

Table (3): Correlations Between Study Variables as Reported by Nurses (n=384).

Study variables	Hospital ethical work climate		Moral courage		Moral distress	
	R	P	R	p	R	P
Moral courage	0.651**	0.000				
Moral distress	-0.263**	0.000	-0.269**	0.000		
Organizational citizenship behavior	0.493**	0.000	0.719**	0.000	-0.631**	0.000

**Highly statistically significant at p< 0.000

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