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The survey of the relationship between ethical climate and ethical behavior in nurses

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ABSTRACT

Nursing is an occupation which is always faced with common ethical problems and paying attention to ethical behavior can exert a considerable effect on the organizational activities and results. Ethicalclimate is also considered among the factors influencing the staff ethical behavior and decision making. The present study was conducted aiming at the relationship between ethicalclimate and nurses' ethical behavior. The present study is of the descriptive-analytical type. The study sample includes 251 nurses working in Ali Ibn Abitaleb and Khatam Al-Anbia hospital in Zahedan in 2014 and for collecting the information a three-part questionnaire was applied the first part of which pertained to demographic characteristics, the second part included Olson ethicalclimate questionnaire and the third part was related to the Luis ethical behavior questionnaire. Data was analyzed by making use of SPSS 19 and descriptive statistical methods, independent sample t-test and variance analysis. The results obtained in the present study indicated that the ethicalclimate governing hospitals is deemed as optimum from the nurses' perspective (the average score= 94.78). There was not observed a significant difference between the ethicalclimate mean scores and ethical behavior ($P>0.05$). Nurses' demographic characteristics were not in a significant relationship with ethicalclimate ($P>0.05$). The results obtained in the present study indicated that there is no significant relationship between ethicalclimate and ethical behavior.

Keywords: ethicalclimate, nurses, ethical behavior.

INTRODUCTION

Nurses working in hospitals are considered among one of the biggest service providers groups in health and treatment team [1]. Nursing is an occupation which is always confronted with numerous ethical problems and it is always the ethicalclimate which determines how much the decision makings are based on ethical and ethical standards [2, 3] and according to the role played by nurses in catering for and attending to the patients the ethical dimension should be taken into consideration plus the health care services provided [4]. Nursing is of a nature in which ignoring ethics in caring for the patients can result in many problems which makes the care standards observation replete with great problems and issues [5]. Ethicalclimate is a type of occupational climate which reflects the policies, methods and organizational careers and it leads to ethical results [6] and in clinical and treatment environment ethicalclimate is comprised of the interpersonal relationships, easy and placid relationship regarding taking care of the patients, supports provided by the treatment and health personnel and their relationship with the patients and their families [7] all of which have caused ethical issues change into one of the most

fundamental topics in nursing performance evaluations [8] and observing ethical behaviors is deemed as more sensitive and more important than the more general caring problems in nursing technical performance [9]. Vanaki states ethicality as the hospital activities foundation and nature [10] and Sherey in his study has come to this conclusion that good and acceptable ethical climate enhances the staff members' ethical principles, upgrades organizational commitment and fosters committed work force [11]. Based on the definition provided by Olson, the way the hospital personnel perceive their work environment ethical climate is hidden in their relationships with their colleagues, physicians, managers, patients and the hospital per se [12].

Organizational ethical climate can be investigated through staff members' perception of the organizational climate, the way decisions are made in confrontation with the ethical problems and the amount of staff participation in ethical issues and problems resolution [13]. Generally, ethical climate affects the quality and safety of the patients' care [14, 15], job satisfaction [16], service desertion and ethical distress [17] and it also can constrain the nurses in correctly conducting their ethical behavior [18]. Hart in his study came to this conclusion that negative ethical climate leads to lack of job satisfaction, job desertion, and even deserting the nursing occupation [19]. In the studies performed by Rohidas the results are consistent with the results obtained here [20]. Also, ethicalclimate exerts a steep effect on the nurses' ethical behavior [21]. Ethical behaviors in an organization are posed as a very important challenge for the management [22] and paying attention to the ethical behavior exerts a considerable effect on the organizational activities and results, since it increases productivity, improves relationships and decreases the risk-taking degree [23]. In a study performed by Aryanejad the results showed that the nurses' performance is in relationship with the hospital's ethicalclimate [24]. Ethical behavior is one of the fundamental features of the nursing occupation [25] and it is enumerated as one of the vital aspects of the nursing cares and being committed to it is a necessary part of the nurses' vocational responsibilities [26]. One of the most important subjects in the organizational studies is to discover the relationship between the organizational ethicalclimate and the staff members' attitudes and behaviors and those of the employees who feel that there is a positive ethicalclimate governing the organization consider their organizational relationships and interactions as fair and this cause their job satisfaction and commitment go up [27]. Paying attention to the nurses' ethical behavior in the contemporary era has become a very important topic due to the increasing advances in the healthcare area and the related technologies and the increasing worries and concerns regarding the imethical behaviors and the factors resulting in such unethical behaviors [28-30]. Therefore, we decided to perform a study aiming at the relationship between ethicalclimate and nurses' ethical behavior.

Implementation method:

The present study is of a descriptive-analytical type. The study sample includes 251 nurses working in Ali Ibn Abitaleb and Khatam Al-Anbia hospital in Zahedan. According to the obtained information and the statistical information collected from the hospital the total number of the study sample reached to a number of 650 individuals and by taking advantage of Morgan Table the study sample was reduced to 250 individuals all of whom have been selected randomly in two steps and one of the study entrance attributes was the minimum one-year work history. To collect the information a three-part questionnaire was used the first part of which was related to the demographic characteristics (age, gender, marital status, job status and ethnicity) and the second part included Olson's ethicalclimate 26-item standard questionnaire (edited by Olson in 1998). The individuals' perception of the ethicalclimate governing the hospital has been measured in five levels (1=almost never/2=rarely/3=sometimes/4=often/5=almost always) by making use of Likert scale. This way, the minimum total score possible for each individual was considered 26 and the maximum possible score was estimated 130 and score 78 and higher was regarded as positive ethical behavior and score lower than 78 indicated a negative ethicalclimate. The questionnaire was translated by Mobasher et al in 2004 and it indicated an optimum reliability of equal to 0.92 [31]. The third part of the questionnaire was also a ethical behavior questionnaire which has been prepared and edited by Luis in 1993. This questionnaire is consisted of 15 questions and it is classified in a 4-item scale and the score calculated for every scale was as follows: 1=never, 2=rarely, 3=occasionally, 4=always. Scoring was in this way that if the total score exceeded 38 it indicated that the individual is not committed to the ethical behaviors in the organization and the score lower than this expressed the individual's high degree of commitment to the organizational ethical standards. The questionnaire validity has been confirmed by five professors in Zahedan medical sciences university and also the reliability of the questionnaire was estimated 0.8. to obtain the reliability, firstly the questionnaire was distributed to 15 people of the staff members and they were collected upon completion. Then, the questionnaire was again distributed to the same 15 individuals after 15 days and eventually after the questionnaires were collected again the questionnaire constant was calculated by taking advantage of the retest method.

To gather the data, after acquiring a letter of permit from the Ethicality Committee in Zahedan medical sciences university the researcher administered the questionnaires to the nurses in 3 hospitals and in 3 shifts. The necessary explanations were given to them regarding the study and the oral consent was taken from them in order for them to be able to enter the study. Finally, the collected data were analyzed by making use of SPSS 19 software, descriptive statistics methods, independent sample t-test and variance analysis.

RESULTS

251 nurses participated in the present study of whom 190 people were women and 61 people were men. The nurses average age was 30.18 ± 3.93 and 113 individuals were working in Khatam Hospital and 138 people were working in Ali Ibn Abitaleb Hospital. To analyze the demographic features (gender, marital status, job status and ethnicity) there was made use of independent sample t-test and the results are given in table 1.

Table 1: the relationship between the demographic characteristics and ethicalclimate and nurses' ethical behavior

	Demographic characteristics	Percentage	The mean score obtained for the ethicalclimate governing the hospital	The mean score obtained for ethical behavior	Ethicalclimate P-value	Ethical behavior P-value	Statistical test
gender	Female	57.7	94.15±15.50	17.62±5.40	0.23	0.39	T-TEST
	Male	24.3	96.77±14.82	18.34±6.60			
Job status	Project	16.7	97.11±13.55	17.71±5.76	0.28	0.53	Anova
	Contractual	35.1	92.88±15.38	17.19±4.80			
	regular	47.8	95.45±15.91	18.05±5.87			
Marital status	Single	22.7	97.70±15.15	18.73±7.09	0.10	0.15	T-TEST
	Married	77.3	93.93±15.35	17.52±5.22			
Ethnicity	Balooch	19.1	98.75±12.28	18.83±6.47			
	Sistani	62.5	93.47±16.06	17.68±5.46			
	Other	18.3	95.13±15.32	17.10±5.67			
Having passed a ethicality-related course	Yes	89.2	95.32±14.97	116.02±13.15			
	No	10.8	90.37±17.93	115.77±13.24			

The relationship between the demographic characteristics (having passed a course on ethicality, ethnicity, marital status, job status, gender) with the ethicalclimate and ethical behavior was not significant ($P=0.04$). Of course, the relationship between age and ethicalclimate was significant ($P=0.04$). Generally, men and singles had a more optimized comprehension of ethicalclimate and their average score was higher in ethical behavior that means that their commitment to ethical values was lower. The relationship between ethical behavior and ethicalclimate was not significant ($P>0.05$) and the perceived ethicalclimate average score was 94.78 ± 15.35 and in ethical behavior it was 17.79 ± 5.71 . In the present study the greatest interference in the ethical behavior questionnaire was related to the item "I use the organization's copy machine for personal uses" and the lowest interference was related to the item "I take my wife or friend out to dinner and charge the organization with the expenses."

DISCUSSION

The results obtained in the present study indicated that the ethicalclimate governing the hospitals is perceived as optimum from the perspective of the nurses and the results of the current study rated the ethicalclimate as more optimum in comparison to the results obtained by Fazl *et al* [32], and the results of the present study are in line with the results obtained by Sauerland *et al* in which 948 nurses were involved [33] but the rate obtained in the present study is lower than the study conducted by Ulrich *et al* [34]. According to the fact that the individuals' perspectives differ in various localities subject to culture and their opinions and also based on the regulations and relationships in different geographical spots the results discrepancies can be justified. Work environment conditions can influence the staff members' behaviors and beliefs [35]. Therefore, work climate should be designed in such a manner that the relationships between the employees and job satisfaction can be enhanced [3] and the nurses face ethical distresses in treating their patients and taking care of them and they need to make appropriate decisions [36] and ethicalclimate is among the factors which is effective on the employees' decisions and behaviors [6]. Therefore, there is a need for ethicalclimate to be enhanced to the maximum extent possible.

There was not observed any significant relationship between ethicalclimate and ethical behavior. But, in the study performed by Wimbush et al there was observed a significant relationship between ethical behavior and ethicalclimate in some respects [37] which does not conform to the results obtained in the present study. In the study conducted by Aryanejad [24] as well which was undertaken in Yazd it was concluded that the nurses' performance is in relationship with hospital's ethicalclimate but it is a faint relationship. Findings of Penn and Argan (2000) indicated that the organizational values and the existing climate in it may influence the staff behavior [38].

Perhaps, one reason for different results can be the matter that the nurses have avoided to disclose their imethical behaviors due to being criticized by their superiors and managers and their responses are not the true reflection of reality. Also, due to the limited number of the studies performed regarding the present study subject matter absolute and decisive comments and remarks cannot be asserted regarding the subject. It is also recommended to the researchers to seek for solutions for assuring the respondents of not being divulged and criticized in future.

There was not found a significant relationship between demographic characteristics (gender, job status, ethnicity, marital status and having passed a course on ethicality) and the ethicalclimate governing the hospital which is in line with the study conducted by Ulrich et al [34] but in the study performed by Fazl et al [32] there was observed a significant relationship between gender and ethicalclimate . Maybe, because there was a considerable difference in the number of the study sample volume the results obtained by these two studies suggest different results. But, there was a significant relationship between age and the hospital place of service for the nurses and the ethicalclimate governing the hospital.

Also, there was not observed a significant relationship between demographic characteristics (gender, job status, ethnicity, marital status and having passed a course on mortality) with ethical behavior. In the study performed by Aryanejad [24] age and education level did not exert any influence on the ethical behavior while gender, marital status and the prior history of participating in Ethicality Workshops is in a significant relationship with ethicalclimate . It is worth mentioning that to survey the relationship between personal characteristics and ethicalclimate and ethical behavior it seems that other factors should be controlled for such as individual, education, organizational regulations and even work nature and type. F course, assuring the respondents of their responses not being disclosed to anyone can be effective and to do so one should take practical measures and not to be sufficed with sayings. Therefore, the results obtained by the present study and many of the other studies cannot resolve the existing ambiguities, so there is not a possibility for expressing absolute and decisive comments and remarks and there is a need for more widespread studies among various organizations with different social, economical and cultural backgrounds and also some of the variables should be controlled such as individual, education, organizational regulations factors and even the nature and the type of the job done in order for the more exact and precise findings to be found.

Ethicalclimate is one of the main factors shaping the intra-organizational relationships and staff attitudes and which considerably influences the organizational results and ethical behaviors. Therefore, managers are expected to do their best to improve the ethicalclimate and due to the limited number of the studies performed on the survey of the relationship between ethicalclimate and ethical behavior in Iran it is expected to acquire better explanations and more comprehensive and generalized results and conclusions through performing future studies with more extensive samples.

CONCLUSION

The results obtained in the presents study indicated that there is no significant relationship between ethicalclimate and ethical behavior but it should be recommended that there is a need for more comprehensive studies and the information is suggested to be collected in a manner that the individuals respond with more attention and care.

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