Impact of Ethical Climate on Moral Distress and Nurse's Green Behavior

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Abstract

Background: Green behaviors are frequently characterized as employee acts that promote environmental management initiatives. Nurses' behavior is significantly influenced by the ethical work environment and moral distress. Regardless of the context, nurses should be capable of providing morally sound and clinically excellent care in the absence of moral discomfort. **Aim**: to explore the impact of ethical climate on moral distress and nurses' green behavior. **Subjects**: A convenient sample of 200 nurses working in Sohag University Hospital, Egypt. **Design**: This study used descriptive correlational design. **Tools**: three tools were used to collect the data; Tool I: Hospital ethical climate scale, Tool II: moral distress scale, Tool III: Employee green behavior. **Results**: It was revealed that 90% of nurses had positive perceptions of the ethical work climate. Likewise, 88% of nurses hadhigh levels of moral distress, and 47.7% of them had moderate levels of organizational citizenship behavior. **Conclusion**: Employee green behavior was strongly and positively connected with the ethical climate and negatively correlated to moral distress. **Recommendation**: Establishing a suitable professional performance environment and preserving moral relationships with nurses that support them in performing better will improve the ethical climate in hospitals for nurses.

Keywords: Ethical climate, Moral distress, Nurses green behavior.

Introduction

Organizational integrity and competitive advantage have been severely compromised by the rise in unethical behavior in recent years. As outlined by **Acar et al. (2018)**, these exercises highlight the role that an ethical workplace culture plays in elucidating the causes and mechanisms behind unethical behavior. An ethical climate is one of the most significant obstacles to maintaining the integrity of relationships between organizations and the consistency of previous decisions with moral norms. It represents the views of nurses regarding the ethics-related policies, practices, and procedures that an organization endorses, awards, and demands (**McGilles & Doran,2018**).

The entire organization is impacted by the presence of an ethical climate, but nurses are particularly affected. The organization benefits from increased productivity and efficiency as well as the ability to handle a variety of ethical dilemmas relating to patients that arise from the availability of complex care situations (**Flinkman et al., 2018**). It increases job satisfaction and organizational commitment, as well as the intention of nurses to leave their jobs and perform better on the job. It also gives them the background knowledge they need to make moral decisions (**Lemmenes et al., 2018**).

The work climate of the unit is connected with moral distress, as it is a significant element influencing nurses' behavior and practice. Moral distress is a constant fact, it is the protection of rights and adherence to ethical values in the defense of patients' rights, even if it means losing their jobs (**Gallager, 2018**). Nurses who experience moral distress prioritize patient care and organizational loyalty over their interests in any given circumstance. They also provide support to others and follow the morally right actions to attain the intended goal. Conversely, nurses who lack moral courage become less motivated by their moral convictions and are less inclined

to serve patients (**Taraz et al., 2019**).

Moral distress is considered an emotion that is expressed when the moral complexity of a situation does not lead to a resolution (**Glasberg et al., 2019**). It leads to physical and emotional issues and also affects job retention, job satisfaction, and quality care. Medical mistakes, nursing burnout, sadness, lack of conscience, feelings of impotence, and patient avoidance, all are caused by higher degrees of moral distress. In contrast, nurses' moral distress levels fell, and their job happiness and commitment went up. Additionally, their organizational citizenship behavioralso improved (**Hartrick**, **2019**).

Green behaviors are frequently characterized as employee acts that promote environmental management initiatives. The hospitality industry supports employee green behavior by utilizing natural resources, energy, and human talent to conserve materials while safeguarding the environment with environmentally conscious objectives (**Su & Swanson, 2019**). Recently, there has been a lot of interest in examining the factors affecting green behaviors. **Zhang et al. (2019**) demonstrated that GHRM positively affected green behaviors. Additionally, implementing GHRM practices involves recognizing their contributions to sustainability and giving them opportunities to engage in environmental activities (**Shen et al., 2018).**

Sustainable development and economic growth are at the center of the UN's 2030 agenda. They emphasize how critical it is to solve environmental issues including reducing carbon waste and climate change**.** According to the Intergovernmental Panel on Climate Change (**IPCC, 2018**), greenhouse emissions increased more quickly between 2000 and 2010. The World Health Organization estimates that carbon emissions and global warming cause over 4.3 million deaths annually as well as a 2-4 billion USD loss in economic output (**WHO, 2018**). These are the explanations for why the UN's 2019 sustainable development objectives place a special emphasis on climate change. These concerning issues have also alarmed international authorities, who demand the creation of a green business environment (**Duff et al., 2021; WHO, 2021**).

Previous research indicates that addressing significant environmental concerns and safeguarding the environment may be aided by employees' green behavior (EGB) (**He et al., 2021**; **Mo et al., 2021**; **Unsworth et al., 2021**). Current research has also demonstrated the importance of investigating the EGB and its predictors in a variety of settings (**Mo, et al, 2021**, **Sabbir & Taufique, 2021**). The problem is that nurses lack knowledge about environmentally friendly behavior and green sustainability. In response to these demands, this study looks into how nurses' green behavior is affected by their workplace culture.

Observing their leader's moral behavior improves the way that staff members understand and perceive the company's environmental sustainability policies and procedures. The worker feels confident and strong in this way. Employee empowerment boosts workers' productivity and effectiveness at work, according to Murray and **Holmes (2021)**. **AlKahtani et al. (2021**) define green employee empowerment as the application of employee empowerment to accomplish green aims and goals. These include using energy-efficient equipment, reusing old furniture, making double-sided photocopies, and recycling.

Green employee empowerment is essential for accomplishing firms' green goals, according to **Alhozi et al., (2021).** Managers can enable empowered staff to engage in environmentally conscious activities by offering them supportive feedback and guidance (**Tariq et al., 2020**). According to **Chaudhary (2020**), green tasks encourage workers to contribute to a greener workplace. Thus, the adoption of green functions requires the participation of high management. These features aid in the organization's achievement of its green goals. Employees who absorb knowledge from society also apply that knowledge, according to the Social Cognitive Learning Theory (SCLT).

Green practices and environmental management have become essential for the hospitality sector, according to **Bhutto et al. (2021)**. As to the SCL theory, the hospitality industry must acknowledge and address environmental concerns. The fact that this idea encompasses human norms, regulations, and agent conception gives it a wider application.

The social learning theory, according to **Shi et al. (2021)**, is restricted to managing the learning process within a social setting. The social cognitive learning theory also supports its application. The hospitality industry should embrace the idea of "Go Green" to achieve this (**Gilal et al., 2019**).

Significance of the study:

Since nurses are the backbone of healthcare systems, it is critical to take into account their present perspectives on the methods implemented to resolve ethical issues as they arise. In a hospital with a strong ethical culture, nurses would carry out their duties professionally and morally, assist patients in converting challenges into opportunities, enhance patient care, and increase productivity and commitment (**Tariq et al., 2019***).*

On the other hand; nurses face a lot of challenges such as limited resources, work pressure, value conflicts, and moral distress at the workplace, which affect job satisfaction and the efficiency of their performance as well as patient care and safety. The nurses are unaware of global environmental initiatives, such as those that involve carbon footprint analysis and green sustainability. An environment that fosters empowerment among employees improves organizational performance, which in turn encourages more environmentally conscious conduct from staff members. This study answers the scholarly call of the underlying mechanism (**Danish et al., 2021**). Employee empowerment may result in a more moral workplace culture, which encourages more environmentally friendly conduct. By testing the theoretical relationship in a developing nation—an area that previous research had disregarded—the subsequent study contributes to the corpus of knowledge (**Li, Hong & Song, 2020**). So, the researchers conducted the study to explore the relationship between ethical climate on moral distress and nurses' green behavior.

Aim:

To explore the impact of ethical climate on moral distress and nurses' green behavior through:

- Assessing the level of moral distress among nurses.

- Assessing green behavior levels among nurses.

- Finding out the impact of ethical climate on moral distress and nurses' green behavior.

Research Question:

What is the level of moral distress among nurses?

What is the level of green behavior level among nurses?

Is there a relationship between ethical climate on moral distress and nurses' green behavior?

Subjects and method:

Design:

A descriptive correlational design was used to achieve the aim of the current study.

Setting:

The study was conducted at Sohag University Hospital, Egypt, which included four different departments Orthopedic, Pediatric, Gynecology &Obstetric, and General Surgery.

Sample:

A convenient sample included all 200 nurses working in the mentioned previous settings.

Tools for data collection:

Three tools were used to collect data for this study.

Tool I: Hospital Ethical Climate Scale (HECS): It consisted of two parts as follows:

Part 1: **Nurses 'personal data**; such as gender, age, and years of experience.

Part 2: **Hospital Ethical Climate Scale** developed by **Olson (1998)** to measure nurses' perceptions of ethical climate in the hospital work environment. It consists of 26 items grouped under five domains identified as the

relationship with [peers (4 items), with patients (4 items), with physicians (5 items), with the hospital (4 items), and with managers (6 items)]. The response was based on a five-point Likert scale, ranging from 1 (rarely true) to 5 (almost always true). The higher the score value, the more positive the ethical climate perception. The total scores on the scale range from 26–130. In this analysis, a score was recognized positive perception if it was ≥ 78, and negative if it was < 78 (*Jahantigh* **et al., 2015**). The Cronbach's alpha coefficient ranged from 0.81-0.92.

Tool II: Moral Distress Scale of Nurses: developed by **Hamric et al.**, **(2012)** to evaluate nurses' moral distress levels. The 21 responses were categorized into four dimensions: moral anguish about [nursing practices (5 items), hospital policies (5 items), physicians (5 items), and unnecessary care (6 items)]. A five-point Likert scale, ranging from 0 (never) to 4 (always), was used to measure the replies. The scale's overall scores go between 0 and 120. A score was deemed poor if it was less than 60% and high if it was greater than 60%. The coefficient of Cronbach's alpha was 0.94.

Tool III: Employee green behavior is measured by the 3-item scale of **Bissing-Olson et al. (2013**). Cronbach alpha of it was 0.81. To measure environmental performance, the scale was a five-point Lickert-type scale (1= "Strongly Disagree" to 5= "Strongly Agree".

Fieldwork:

Data collection was extended five months from the middle of July 2023 to the end of December 2023. Through group discussions, the researchers explained the study's purpose to the nurses. Under the researchers' supervision, each nurse was given the chance to finish the questionnaire. It took about 30 to 35 minutes to finish the questionnaire form.

This study included three phases namely:

Preparatory phase:

Review of current national and international related literature, articles, periodicals, magazines, and the internet of the various aspects concerning ethical climate, moral distress, and nurses' green behavior. The study tools were revised with the supervisors. Also getting approval from the medical and nursing directors of the hospital was done.

Content validity:

After the tools were translated into Arabic; a panel of experts (5 professors) from the academic nursing staff, at the administration department performed face and content validity to assess their clarity, relevance, comprehensiveness, and applicability. According to their opinions, no needed adjustments were made.

Pilot study:

It was carried out before starting the actual data collection to confirm the clarity, understanding, and applicability of the tools. Additionally, to estimate the required time to complete the questionnaire sheet. The pilot study was carried out on 20 nurses (10% of the study sample). The 20 nurses who participated in the pilot study were included in the study sample.

Administrative and ethical considerations:

The study was approved by the Ethics Committee and the dean of the Faculty of Nursing, at Sohag University. Verbal and written explanations of the nature and aim of the study have been explained to nurses included in the study. The researchers informed the participants that their participation was voluntary; they could refuse without any rationale, and they weren't forced to write their names with emphasis on the confidentiality of information as it would be used for research purposes only.

Administrative Design:

An official permission was obtained by submission of a formal letter issued from the Faculty of Nursing, Sohag University to the director of the previously selected setting to collect the necessary data for the current study after a brief explanation of the purpose of the study and its expected outcomes.

Statistical Design:

Data entry was done using the SPSS v25 computer software package. Quality control was done at the stages of the coding and data entry. Frequency distribution was conducted as descriptive statistics for all study variables. Pearson correlation coefficient and simple linear regression were used to assess the relationship between the study variables. The Chi-square test was used to assess the relationship between the study variables and the demographic data of the study participants. P value was considered significant at less than or equal to 0.05, and highly significant at less than or equal to 0.001, and insignificant at more than 0.05.

Results:

Table 2 demonstrates the highest mean scores of ethical climate were for relationships with hospitals and physicians (16.44±4.72 and 18.34 ±5.24 respectively). With a total mean score of ethical work climate (79.22±23.18).

Table 3 demonstrates the domains of moral distress, the highest mean scores were for moral distress related to physicians and that related to nursing practices (19.76± 2.88 & 18.34 ± 2.79 respectively), with a total mean score of moral distress(69. 32± 10. 69)**.**

Figure 1 demonstrates that 85% of nurses reported a positive perception of ethical climate.

Figure 2 illustrates that (80%) more than three-quarters of the studied nurses demonstrated high moral distress levels.

Table 4 shows that green behavior was significantly and positively correlated to ethical climate and moral distress at P=0.001.

Table (1).Personal data of studied nurses (n=200)

Personal and job characteristics	No	%
Age in a year:		
< 30	80	20.0
30 - < 40	160	**66.0**
≥ 40	30	14.0
Mean ± SD	**36.25 ±7.42**	
Gender:		
Male	52	26.0
Female	178	**74.0**
Experience (in years):		
< 10	152	**68.0**
≥ 10	78	32.0
Mean ± SD	**8.77 ±4.02**	
Educational Qualification:		
Nursing diploma	28	14.0
Technical diploma in nursing	76	56.0
Bachelor of Nursing	126	**30.0**

Table (2). Mean Scores Distribution regarding Ethical climate among the Studied nurses (n=200)

Study variables	Mean	±	SD
Ethical work climate domains; relationship with:			
Peers	15.33	±	4.22
Patients	13.66	±	3.33
Physicians	**18.34**	±	**5.24**
Hospitals	**16.44**	±	**4.72**
Managers	16.32	±	4.67
Total mean score	**79.22**	±	**23.18**

Table (3). Mean Scores Distribution regarding Ethical climate among the Studied nurses (n=200)

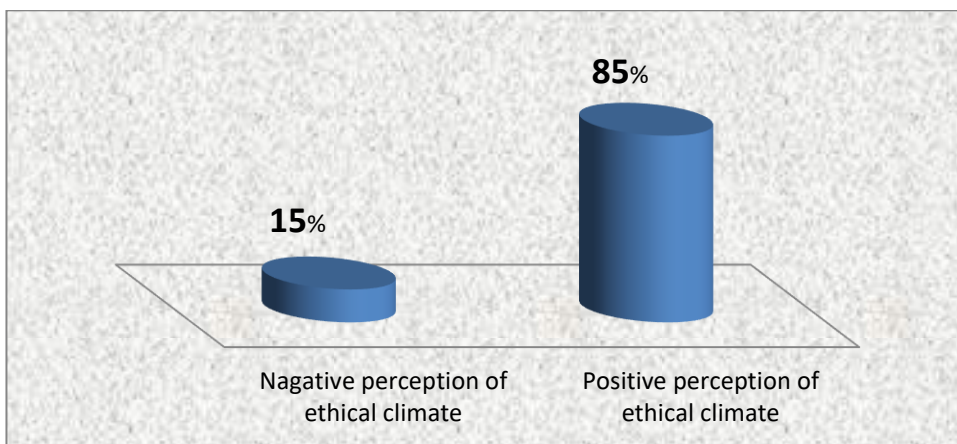| Study variables	Mean	±	SD
Moral distress domains: related to:			
Physicians	**19.76**	±	**2.88**
Nursing practices	**18.34**	±	**2.79**
Hospital's policies	16.22	±	2.33
Futile care	15.17	±	2. 56
Total mean score	**69. 32**	±	**10. 69**

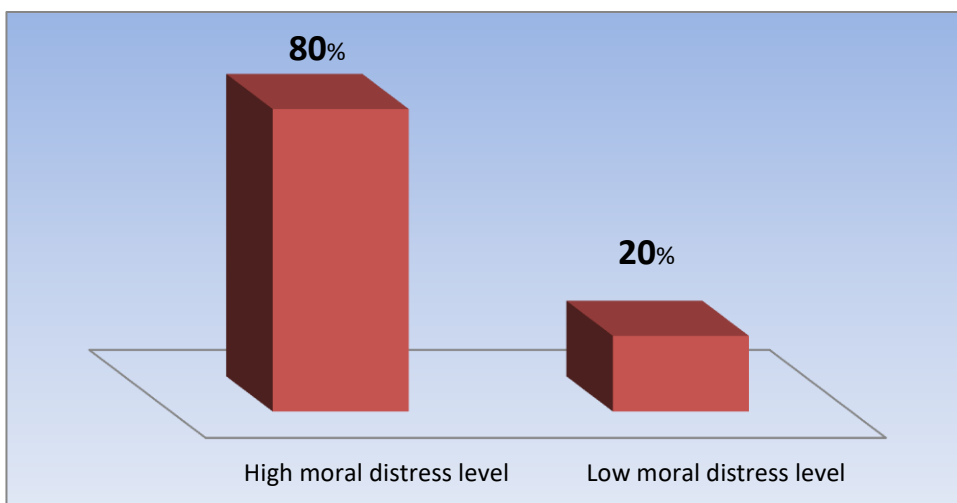**Figure (1) Nurses' Perception Concerning to Ethical Climate (n=200).**

Figure (2) Moral Distress Total Levels among the Studied Nurses (n=200).

Table 4 Correlation among green behavior, ethical climate, and moral distress, (n = 200)

Green behavior		
	R	p
Ethical climate	− 0.549	< 0.001
Hospital	− 0.469	< 0.001
Physicians	− 0.447	< 0.001
Managers	− 0.422	< 0.001
Peers	− 0.350	< 0.001
Patients	− 0.115	0.203
Moral distress	0.456	< 0.001
Physician practice	0.526	< 0.001
Nursing Practice	0.421	< 0.001
Institutional and contextual factors	0.421	< 0.001
Limit to claim the ethical issue	0.309	0.001
Futile care	0.268	0.003

*Statistically significant at P < 0.05, ** Highly statistically significant at P < 0.01.

Discussion

An ethical work environment is essential to raising productivity and effectiveness within the company as well as enhancing management and performance standards. An organization's ethical atmosphere can influence workers' moral discomfort, lessen it, and encourage nurses to behave more sustainably toward the organization (**Glasberg et al., 2019**). This research adds to our understanding of how to enhance employees' green behavior through an ethical atmosphere, which is relevant in light of the issues raised by **Tian et al. (2020) and Danish et al. (2021)** regarding organizational climates. As a result, this investigation was carried out to explore the relationship between ethical climate on moral distress and nurses' green behavior.

Concerning domains of ethical climate; the highest mean score was for the relationship with hospitals. This may be due to the clear hospital policies that helped nurses cope with difficult patient care problems and shared care goals in the care team, which reflects the improvement of inter-group relationships.

The previous findings of this study are consistent with those of other similar searches that have been conducted as the one performed by **Fogel (2019)**, in Chicago, to determine the relationship between moral distress, ethical climate, and intent to turn among critical care nurses, and stated that the highest mean scores of ethical work climate were for a relationship with hospital. However, these findings were inconsistent with those of **Shafipour et al., (2019)** who found the highest mean scores of ethical work climate were for relationships with managers, while the lowest mean score was related to relationships with physicians.

Concerning moral distress domains, our results illustrated the highest mean score was for moral distress related to physicians; while the lowest was related to futile care. This finding may be due to that most doctors are male and most nurses are female, doctors are expected to be aggressive and behave with authority in compliance with traditional sex roles. These findings agree with **Whitehead et al., (2019)**, in the U.S., who measured moral distress in a large healthcare system and found that the highest mean level of moral distress was associated with physicians.

The study's findings revealed that the majority of nurses reported a positive perception of ethical climate. This conclusion might be explained by the hospital's goal and vision being understood and shared by everyone, and commitment toward the organization. The results of the previous study match with those of a Turkish study carried out by **Numminen et al., (2019)**, who examined the perceptions of newly graduated nurses about the ethical climate of their work environment, and stated that nurses generally had a favorable opinion of the ethical climate. However, these findings contradicted a study carried out by **Shafipour et al., (2019)**, in Iran to assess nurses' perception of the ethical climate regulating the hospital environment and found that their perception of the ethical working climate was negative.

According to **Koskenvuori et al., (2019)**, opinions on the ethical climate have generally been favorable even in earlier research. Six the ethical context in Swedish pediatric oncology care has already been examined as part of our current investigation (**Pergert et al., 2019**). These findings indicated favorable opinions. According to **Barnett and Schubert (2020),** the ethical climate within an organization could develop employees' positive perceptions about the relational agreement between themselves and their employers.

Regarding moral distress level; the majority of nurses expressed a high level of moral distress. This may be the result of a tight hierarchy between doctors and nurses, who are frequently seen as doctors' assistants. These findings align with those of research conducted in the United States of America by **Allen et al., (2019)** to measure the moral distress of healthcare professionals, and reported majority of nurses had a high level of moral distress In contrast to these results, in Island, **Gonzalez (2019)** explored the effects of moral distress on critical care nurses, and reported a low level of moral distress.

Regarding relationships between various study variables, the current study found that green behavior was significantly and positively correlated to ethical climate and

moral distress. These results can be explained by the ethical climate facilitating the discussion about patients' health issues and their solutions, which gives nurses a context for moral decision-making, helps them deal with ethical dilemmas and other sources of unhappiness, and may help them behave more responsibly within the organization.

The current findings are consistent with prior investigations, including the study undertaken by **Tariq et al., (2019)**, which clarified a considerable positive correlation between the ethical climate and nurses' moral distress.

This study offers a previously unexplored, deeper, and more analytical perspective on the impact of climates on environmentally conscious employee behavior (**Ahmad & Umrani, 2019**). The results show that employee green behavior is significantly positively impacted by an ethical work environment. According to **Brown et al. (2019) and Bandura (2019),** this link is compatible with the Social Cognitive Learning Theory (SCLT).

Leland et al., (2020) state that moral distress among providers is a factor in ethics consultations. Thankfully, formal ethical support is seen by nurses as beneficial in addressing moral distress (**Helmers et al., 2020**).

Situations that cause moral distress at this sensitive period should never be disregarded or minimized, as nurses have reported that they are extremely distressing when they happen and that their effects can be detrimental and long-lasting. The primary causes of moral distress among nursing staff, as determined by our study, are insufficient staffing levels, nurses' lack of time, and the execution of procedures involving such therapy. The suggested connection between moral anguish and ethical atmosphere is supported by our research (**de Boer et al., 2020; Altaker et al., 2018; Epstein et al., 2019).**

Conclusion:

Based on the findings of the current study, it can be concluded that nurses green behavior was strongly and positively connected with the ethical climate and was negatively

correlated to moral distress

Recommendations

Depending on the findings of the present study the following recommendations are suggested:

- Establishing a suitable professional performance environment and preserving moral relationships with nurses that support them in performing better will improve the ethical climate in hospitals for nurses.

- Upholding ethical and moral relationships with nurses that support them in becoming more effective.

- Creating ongoing training to support an ethical climate work environment inside the company.

- Replication of the current study with a larger sample of nurses in different settings is required to generalize the results.

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