Nurses' Perception of Ethical Climate and Its Relation to Workplace Deviance Behavior

Israa Ismaeil Hussein [(1)]; Sanaa Mohammed Aref [(2)]; Amira Mostafa Fahmy [(3)]; Heba Dakrory Ali El-said [(4)]

1. B.Sc. Nursing.
2. (2) Retired Professor of Nursing Administration, Faculty of Nursing - Minia University.
3. Assistant Professor of Nursing Administration, Faculty of Nursing –Minia University.
4. Assistant Professor of Nursing Administration, Faculty of Nursing –Minia University.

Abstract

Background: Ethical Climate significantly influences nurses' attitudes and ethical conduct. It increases the perceived organizational support from hospitals and decreases engagement in deviant workplace behaviors. **The study aimed to** assess nurses' perception of ethical climate and its relation to workplace deviance behavior. **Research design:** A descriptive correlation research design. **Setting:** All staff nurses available during data collection, totaling 389 participants. **Tools of data collection:** Two tools were used, 1st tool was self-administer questionnaire consisted of two parts as socio demographic part and ethical work climate part, 2nd tool was workplace deviance. **Results: reveals that** (68.1%) of nurses perceived a high level of total ethical work climate and (31.9%) of them had a moderate level of perception about total ethical work climate. Moreover (100%) of nurses have low level of perception about behavior of work deviance. **Conclusion:** there was a negative statistically significant correlation between ethical work climate and workplace deviance with highly statistical significant (P <= .000**). **Recommendations:** Create strategies by the hospital management to promote supportive work environment and reduce workplace deviance behaviors including providing rewards, including providing

Keywords: Ethical Climate, Nurses' Perception, Workplace Deviance Behavior.

Introduction

The world of health care is generally acknowledged as a primary service sector that is entirely dependent on qualified and skilled workers. Human resource is seen as a fuel for workplace development and economic expansion in most health care organizations **(Khanam et al., 2023)**, where nurses and nurse leaders make up most of the workforce and carry out greatly responsibility to supports for patients, families, and their teams. They collaborate daily to complete tasks effectively **(Lesandrini & Leclerc, 2024)**.

Nurses are responsible for have responsibilities toward their colleagues, profession, and community. Ethics-based performance is an important issue in nursing. Accordingly, the nurses work based on the intrinsic values of their career and ethics-based behavior even when their integrity is threatened. Ethical climate (EC) can be considered as the public perception of certain organizational performance and procedures containing ethical content **(Manderius et al., 2023)**.

Ethical values are universal rules of conduct that provide a practical basis for identifying what kinds of actions, intentions, and motives are valued. Ethics are moral principles that govern how the person or a group will behave or conduct themselves. The focus pertains to the right and wrong of actions and encompasses the decision-making process of determining the ultimate consequences of those actions. Each person has their own set of personal ethics and morals. Ethics within healthcare are important because workers must recognize healthcare dilemmas, make good judgments and decisions based on their values while keeping within the laws that govern them. To practice competently with integrity, nurses, like all healthcare professionals, must have regulation and guidance within the profession **(Nengsih & Hariati, 2024).**

Ethical climate can be defined as a set of behaviors, emotions and impressions characteristic for a given organization and shaped by a number of factors, such as professional values, norms, views, and cultivated tradition. The concept of the Ethical Climate Theory (ECT) dates back to the 1980s. The ECT authors, Victor and Cullen, classified the following five types of climates: caring, independent, rules, rights referred to as professional, and instrumental. The term ethical climate was redefined by referring to nursing staff perceptions of how ethical issues are addressed in their specific work environment. The level of ethical climate is largely determined by the relationships between nurses and colleagues, patients, physicians, managers, and the hospital. Ethical climate is the foundation upon which professional nursing delivery is based) **Ozdoba et al., 2022).**

Professional ethics is a set of basic human principles and standards governing the individuals and groups' behavior. Moreover, professional ethics is a rational thinking process that targets at determining values of an organization, and disregarding it can question the organization's legitimacy and actions. Empowerment and adherence to principles and codes of ethics are among the concerns of human resource management in the healthcare organizations worldwide. According to the International Council of Nurses (ICN), nurses not only promote public health and well-being, but also protect themselves against ethical dilemmas in healthcare organizations by emphasizing on ethical planning and practicing **(Dziurka et al., 2022).**

The healthcare organizations' negligence of the professional ethics and their failure in adhering to ethical principles can create problems for nurses that question their measures and reduce their teamwork, job satisfaction, and appropriate relationships with colleagues. However, results of various studies indicated that nurses' adherence to professional ethics was not high. In other words, nurses encounter conflicts

between their personal and professional values by ignoring ethical considerations, thereby resulting in their distance from patients and indifference to care provision **(Rivaz et al., 2024).**

Also, ethical climate in a clinical setting comprises elements that can help with communication and decision-making under critical conditions. The most important aspects of the work environment in nursing are the ethical climate. Due to their extensive workload, nurses face ethical stressors. In addition, the demanding nature of the nursing profession can negatively impact nurses' well-being and, consequently, the standard of care they deliver **(McKnight et al., 2020).**

Thus, improving the ethical climate and nurses' working environments is imperative, lower fatality rates, better treatment, fewer medical errors, and fewer workplace risks are all linked to an ethically sound nursing environment **(Dziurka et al., 2022).** Research has identified variations in ethical climate across subunits, job roles, and tenure levels. This suggests that, although it may not be present throughout the entire organization, a dominant status of the ethical climate can be seen in a particular working group **(Faramarzpour et al., 2021).**

Every organization aims to create a positive and highly efficient work environment by establishing regulations, policies, and practices that staff members are supposed to stick, but results aren't always what is anticipated. Such resistance frequently results in workers "acting out" against policies, which produces counterproductive behavior. This type of behavior has been labeled as "deviant". Deviant behavior refers to voluntary actions that violate significant organizational norms, threatening the well-being of the organization or its members. Effective management practices that promote ethical behavior are crucial for building trust and improving individual performance, thereby mitigating workplace deviance **(Dewangan & Verghese, 2023).**

The prevalence of workplace deviance among workers has become a critical issue and the existence of deviance affects the performance of the organizations. Lack of integrity at work, fraudulence, underperformance, and fake medical claims were among the types of deviances that were reported. Deviant Workplace Behaviors refers to the behaviors of the employees that can harm an organization or its members. Deviant behaviors are practices which are beyond the reasonable norms of the organization. The norms are those acceptable behaviors and beliefs which are permitted in the organization **(Hany et al., 2020).**

Workplace deviance among nurses can significantly impact the healthcare environment, affecting both patient care and team dynamics. This behavior includes actions such as absenteeism, idleness, spreading rumors, and not adhering to medical protocols. Several factors contribute to such deviance, including perceived organizational injustice, emotional labor, and psychological stress. Nurses who feel unfairly treated or overburdened by emotional demands are more likely to engage in these behaviors. Conversely, those with strong psychological resilience and work ethics tend to exhibit fewer deviant behaviors. Addressing these issues requires a multifaceted approach, including fostering a fair work environment, providing emotional and psychological support, and promoting strong ethical standards. By understanding and mitigating the causes of workplace deviance, healthcare organizations can create a more positive and productive work environment for nurses **(Haider & Yean, 2023).**

There are two forms of deviances; whether the deviance was centered at the institutions (organizational deviance) such as theft, sabotage, being late to work or leave early and withdraw effort from work whether or the deviance was directed to the co-workers, managers, and subordinates (interpersonal deviance) such as exhibiting actions such as making fun of others, behaving rudely, arguing, and physical aggression **(Dewangan & Verghese, 2023).**

So, the organizations should use appropriate methods to recruit, select, promote, reward, and discipline their workers, ensuring the standards for raises, promotions, and punishments are clearly communicated to them. Additionally, incentives should be used to reward ethical behaviors which are valuable to the organization **(Abo-Algheit et al., 2024).**

Significance of the study

Ethical climate is positively related to workplace spirituality, and workplace spirituality is negatively related to deviant behavior. According to a recent study done by **Haldoraia et al., (2020)** investigated workplace spirituality as a mediator between organizational justice/ethical climate and workplace deviant behavior/organizational citizenship behavior reported that ethical climate had a significant and positive relationship with organizational citizenship behavior. Also, **Aryati et al., (2018)** concluded that ethical leadership, either directly or indirectly, has affected deviant behavior in the workplace. Increasingly, leader's ethical behavior could reduce deviant behavior.

In Egypt, recent study done by **Hany et al., (2020)** assessed the relation between organizational justice and workplace deviance behavior among staff nurses conducted at Ain Shams University hospital reported that slightly more than two thirds (68.2%) of staff nurses had high workplace deviance behavior. Ethical leadership, ethical climate received a great deal of attention, some issues have yet to be explored.

Nurses play a key role in the healthcare sector and it was noted at Aswan university hospital nurses face many challenges during their work and feel uncomfortable and the relationship with their colleagues at work is not good, this may be due to the lack of a good understanding of the ethical climate of work, which results in negative effects on the efficiency and performance of nurses and hospitals. This work environment leads to high rates of absenteeism, low productivity, poor quality of care, increased rate of behavioral deviation of employees and increased financial load on healthcare organizations **(Haider & Yean, 2023).**

Therefore, it is expected that the results of this study will be useful for nursing and human resources managers to enhance their understanding of deviation behaviors in the workplace, which will enable them to develop effective policies and strategies to eliminate them and notice.

Aim of the Study:

The aim of the current study is to assess nurses' perception of ethical climate and its relation to workplace deviance behavior

Research Questions:

- What is the level of nurse's perception of ethical climate and workplace deviance behavior?
- Is there a relation between nurse's perception of ethical climate and their workplace deviance behavior?

SUBJECT and METHOD

Descriptive correlational research design was utilized to fulfill the aim of this study.

Setting

The study was conducted at Aswan University Hospital in Aswan City, Aswan governorate, Egypt.

Aswan University Hospital is the only hospital that receives patients from all parts of the governorate as well as the neighboring governorates. After being a university hospital, the clinical departments increased from 8 to 24 in all the medical specialties. Aswan University Hospitals is a group of university hospitals affiliated with the Faculty of Medicine, Aswan University, with a capacity of 750 beds, located in the T-Sail area in Aswan City and the Third District in New Aswan City.

Sample type:

Convenience sample used in this study.

Subjects:

The total number of nurses were (389) and classified as follows:

Department	No. of nurses
Emergency department	43
General Medical /Surgical	40
Burn unit	17
Obstetrics and Gynecology	11
Coronary care and Cardiothoracic	22
Gastroenterology	10
Nephrology	10
Ophthalmology	5
Orthopedics	8
ENT	9
Renal dialysis	45
Pediatric	12
Neonatal Department	15
Cardiac Catheterization	3
Operating Room	43
Recovery Room	22
Pediatric ICU	17
Traumatic intensive care unit (TICU)	9
Thoracic Care Unit	10
Medical Intensive Care Unit	20
Critical Care	10
Intermediate Care Unit	8
Total	**389**

Data Collection Tools: (Appendix B)

Data were collected through the utilization of two tools as follows:

First Tool: Self Administer Questionnaire:

It included two parts: **Part I: Socio demographic**

This part used to collect data about nurses and encompass items such as age, gender, marital status, educational qualification, years of experience in nursing field and residence.

Part II: Ethical Work Climate (EWC): It was designed by **Elsayed et al., (2020)** and adopted by the researcher, it used to measure the ethical work climate as perceived by nurses. It consisted of 72 items that are classified into ten dimensions as:

Dimensions	No. of items
Personal interest	4
Efficiency	4
Personal morality	4
Hospital profit	4
Friendship	4
Hospital rules and procedures	4
Team interest	4
Laws and professional codes	4
Social responsibility	4
Conduct of the first line manager	36
Total items of the tool	**72**

The response of each item measured on a 3-point scale ranged from (0) false to (2) true in the positive statements, while from (2) false to (0) true in the reversed statements as (1,3,4, 9, 10, 38, 40, 44, 45, 46, 47, 48, 49, & 51). So, the scoring system (0-144) as following

	Low	Moderate	High
Total ethical work climate	**0-47**	**48-95**	**96-144**

Second Tool: Workplace Deviance

It developed by **Bennett and Robinson, (2000)** and adopted by the researcher, it used to measure the workplace deviance as perceived by nurses. It composed of 18 items. This tool classified into two major dimensions as following.

Dimensions	No. of items
Deviant behavior toward the organization	12
Deviant behavior toward individuals	6
Total items of the tool	**18**

Each item measured on a 3-point Likert scale ranging from (1) never to (3) always. So, the scoring system (18-54) as following

	Low	Moderate	High
Total work deviance	**18-29**	**30-41**	**42-54**

The Validity of the study scales: (Appendix C)

The tools (I, and II) were translated into Arabic by the researcher, then a panel of three assistant professor from Minia university in nursing administration specialists in the faculty of nursing evaluated the tools' face validity and made the required revisions. A review of the tools' content coverage, clarity, phrasing, length, format, and overall appearance was requested from each member of the expert panel, and necessary modifications were made as change the scoring system in the tool I from six point in the responses of each item to three points in the responses of each item as well as the tool II from five point in the responses of each item to three points in the responses of each item.

Reliability of the study scales

To establish the consistency of the tools were tested for reliability. The Cronbach's alpha test was used to determine the degree to which the tool's items measured the same idea and were correlated with one another. The results showed that the tools in the current study had good internal reliability, and were distributed as follows:

Ethical Work Climate	α
Personal interest	.89
Efficiency	.76
Personal morality	.91
Hospital profit	.92
Friendship	.88
Hospital rules and procedures	.78
Team interest	.91
Laws and professional codes	.93
Social responsibility	.89
Conduct of the first line manager	.78

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Ethical Work Climate	α
Total ethical work climate	**.95**

Workplace Deviance	α
Deviant behavior toward the organization	.89
Deviant behavior toward individuals	.88
Total work deviance	**.90**

Pilot Study:

A pilot study was carried out before starting the data collection of nurses from Aswan University Hospital. This pilot study aimed to test the clarity, comprehensiveness, accessibility, and applicability of the tools and to estimate the appropriate time required to fill out the questionnaire. The pilot study 39 nurse (ten percent) of the nurses, was carried out. The pilot study's findings were added to the final results without alteration.

Data Collection Procedure:

- Official letters approval was obtained from the faculty dean and the Scientific Research Ethics Committee of the Faculty of Nursing, Minia University; these letters included a description of the study's aims.
- Approval to conduct the study was obtained from the Dean of the Faculty of Nursing, at Minia University.
- An official letter was obtained from the director of Aswan University Hospital, before the conduction of the pilot study as well as the actual study.
- Tools were translated into Arabic before introduced to the jury committee for using it to gather study data.
- Agreement was obtained from nurses who participated in the study, after explaining the nature and purpose of the study.
- After describing the goal and procedure of data collection, the tools were given to all nurses during their morning shift to answer the questions
- Nurses took 29 to 33 minutes to respond to the tools as measured by the pilot study. Then collected the sheets from the nurses after completing the tools filling.
- Between the beginning of 11th of March 2023 to the 10th of July 2023, data collection from nurses was carried out.

Ethical Considerations:

- The nurses were made aware that taking part in the study was entirely voluntary and that declining to do so would not have any negative effects.
- Agreement was obtained from nurses who were willing to participate in the study, after explaining the nature and purpose of the study.
- The study subjects had the right to refuse to participate and or withdraw from the study without any rationale at any time.
- Study subjects' privacy was considered during the collection of data. Participants were assured that all their data were highly confidential; anonymity was also assured by assigning a number for each nurse instead of names to protect their privacy.

Statistical Design:

The collected data was tabulated, computerized, analyzed, and summarized by using descriptive statistical tests to test research questions using the SPSS version (25). Qualitative data were expressed as frequency and percentage. Probability (P-value) is the degree of significance, less than 0.05 was considered significant. The smaller the P-value obtained, the more significant the result (*), and less than 0.001 was considered highly significant (**). T-test and ANOVA test were used for qualitative data test was used to detect the relation between sociodemographic data of nursing staff and their study variables.

The statistical method of correlation is used to determine the type and degree of a link between two numerical variables. The co-sign efficient indicates the type of the relationship (positive/negative), while the value indicates its strength, as follows: Rho values below 0.25 indicate a weak correlation, 0.25-0.499 indicate a fair connection, 0.50-0.74 indicate a moderate correlation and values above 0.74 indicate a strong correlation.

Results

Table (1): Percentage distribution of the nurse's personal data at Aswan University Hospital (no.=389).

Items	Nurses (no.= 389)	
	no.	%
Age		
•<30 yrs. old	321	**82.5**
•30- <40 yrs. old	65	16.7
•>40 yrs. old	3	0.8
Mean ± SD	26.59 + 3.954	
Gender		
• Male	94	24.2
• Female	295	**75.8**
Marital statues		
• Single	180	46.3
• Married	209	**53.7**
Educational qualification		
• Diploma degree of nursing	61	15.6
• Technical institute of nursing	289	**74.3**
•Bachelor of degree of nursing	31	8
• Others	8	2.1
Years of experience in nursing field		
•< 5 yrs. old	186	**47.8**
• 5 - <10 yrs. old	147	37.8
•10- <15 yrs. old	29	7.5

Items	Nurses (no.= 389)	
	no.	%
●>15 yrs. old	27	6.9
Mean ± SD	5.77 +4.240	
Residence		
●Rural	141	36.2
●Urban	248	**63.8**

Table (1) introduces that (82.5%) of nurses have less thirty years old of age with mean age 26.59 + 3.954 years, also (75.8%) of them are females and (74.3%) of them are have technical institute of nursing. Regarding years of experience, there are (47.8%) of nurses have less five years old of experience with mean5.77 + 4.240. Moreover, in relation to nurses' residence, there are (63.8%) of nurses are living in urban area.
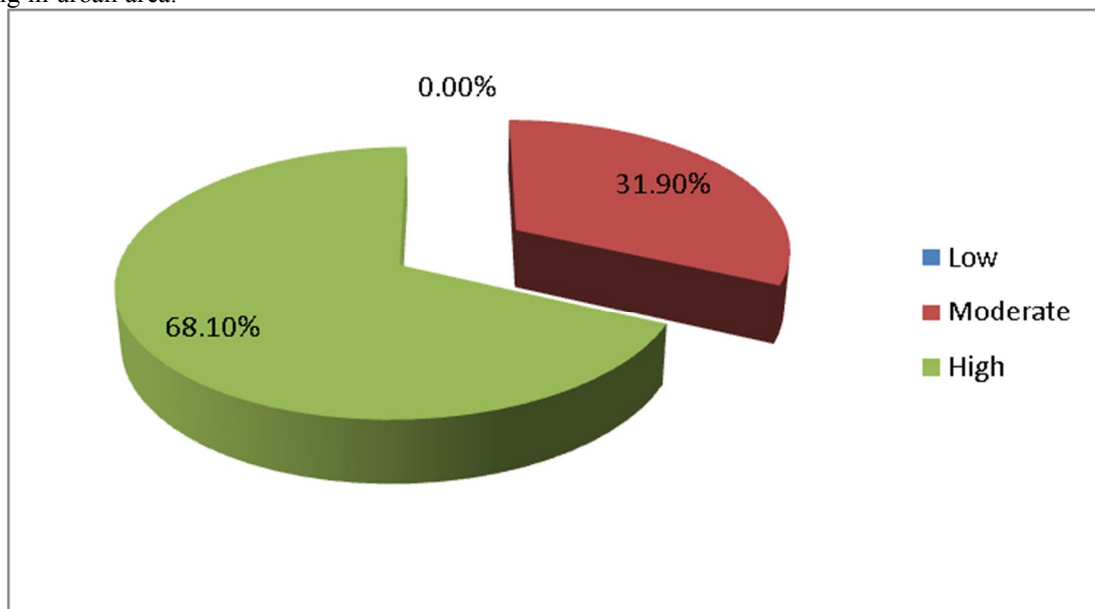

Figure (1): Level of nurses' perception about total ethical work climate at Aswan University Hospital (no.=389)

Figure (1) explains that the nurse's perception about total ethical work climate that (68.1%) of the nurses have high level of hospital rules and procedures, while there are (31.9%) of them have moderate level of total ethical work climate.
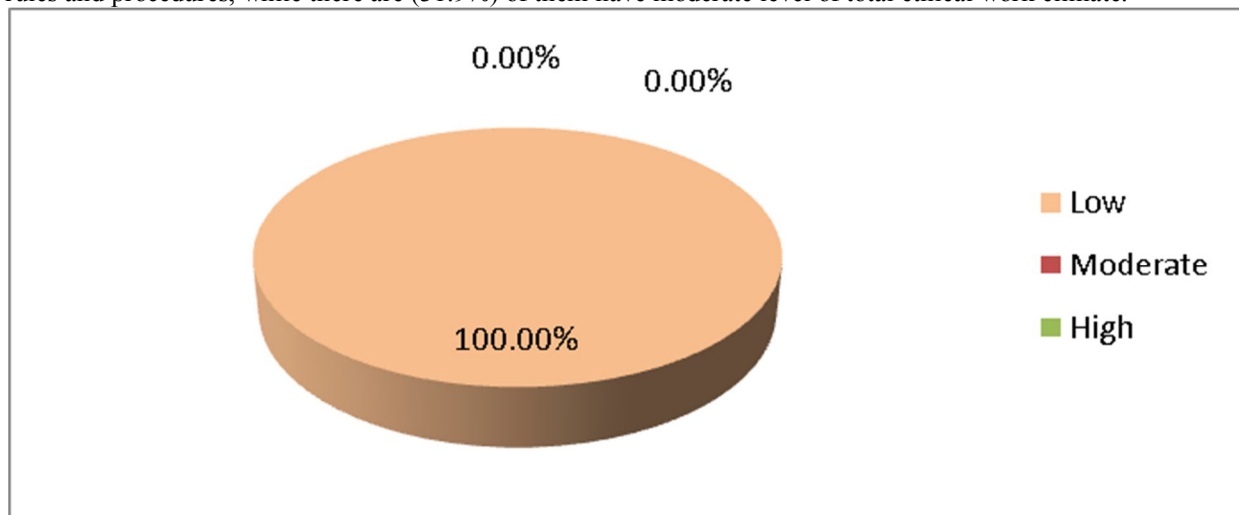

Figure (2): Level of nurses' perception about total work deviance at Aswan University Hospital (no.=389)

Figure (2) displays that the nurse's perception about total work deviance that all (100%) of the nurses have low level of total work deviance

Table (2): The relation between nurses' perception about total ethical work climate and their personal data at Aswan University Hospital (no.= 389).

Personal data of nurses	Mean + SD
Age	
●<30 yrs. old	105.8910+20.56
●30- <40 yrs. old	108.2615+14.47
●>40 yrs. old	93.6667+4.61
Anova test (P value)	**1.009 (.365NS)**
Gender	
● Male	111.13+21.44
● Female	104.61+18.78
T test (P value)	**2.83(.005**)**

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Personal data of nurses	Mean + SD
Marital statues	
• Single	105.54+21.71
• Married	106.75+17.68
T test (P value)	**.604(.546)NS**
Educational qualification	
• Diploma degree of nursing	15.44+1.97
• Technical institute of nursing	20.91+20.91
•Bachelor of degree of nursing	16.92+3.03
• Others	109.1+0.00
Anova test (P value)	**.589(.623)NS**
Years of experience in nursing field	
•< 5 yrs. old	106.3011+20.33
• 5 - <10 yrs. old	105.4150+20.65
•10- <15 yrs. old	108.0000+13.77
•>15 yrs. old	107.7407+14.14
Anova test (P value)	**.215 (.886NS)**
Residence	
•Rural	104.56+21.5
•Urban	107.12+18.4
T test (P value)	**1.23(.217)NS**

* p≤0.05 (significant) T-test: P – value based on independent sample t-test, F-test P – Value based on compares mean, NS= No Significant difference * Statistically significant difference

Table (2) shows that there is statistically significant relation between nurses' gender and their perception about total ethical work climate as (p- value= 0.005**).

Table (3): The relation between nurses' perception about work deviance and their personal data at Aswan University Hospital (no.= 389).

Personal data of nurses	Mean + SD
Age	
•<30 yrs. old	18.90+1.31
•30- <40 yrs. old	18.60+1.12
•>40 yrs. old	18.00+0.000
Anova test (P value)	**2.113 (.122NS)**
Gender	
• Male	18.50+.948
• Female	18.95+1.35
T test (P value)	**2.98(.003**)**
Marital statues	
• Single	18.84+1.42
• Married	18.84+1.15
T test (P value)	**.055(.957) NS**
Educational qualification	
• Diploma degree of nursing	18.69+1.16
• Technical institute of nursing	18.95+1.35
•Bachelor of degree of nursing	18.32+0.475
• Others	18.00+.000
Anova test (P value)	**3.92(.009*)**
Years of experience in nursing field	
•< 5 yrs. old	18.92+ 1.42
• 5 - <10 yrs. old	18.86+ 1.12
•10- <15 yrs. old	18.76+ 1.38
•>15 yrs. old	18.30+ 0.72
Anova test (P value)	**1.916 (.126NS)**
Residence	
•Rural	**18.96+1.46**
•Urban	18.77+1.16
T test (P value)	**1.35(.176) NS**

* p≤0.05 (significant) T-test: P – value based on independent sample t-test, F-test P – Value based on compares mean, NS= No Significant difference * * highly Statistically significant difference

Table (3) presents that there is statistically significant relation between nurses gender as well as educational qualification and their perception about total work deviance as (p- value= 0.005** &.009* respectively).

Table (4): Correlation between nurses' perception about ethical work climate and workplace deviance at Aswan University Hospital (no.= 389).

Items		Workplace Deviance
Ethical Work Climate	r	-.243**
	P- value	.000

p≤0.05 (significant), NS= No Significant difference * * highly Statistically significant difference

Table (4) reveals that there is negative association between ethical work climate and workplace deviance with highly statistically significant (P <= .000**).

Discussion

In nursing profession, nurses have responsibilities to the patients they give care, to colleagues, to profession, and to the society. Ethical dilemmas arise in all these relationships, and the solution requires an ethical approach. Ethical leadership requires acting in accordance with the requirements of the nursing profession for the benefit of individuals, groups, and organizations in these health sectors ethical conflicts that nurses often meet. Nurses' negative perceptions of ethical climate and the ethical characteristics of leaders may lead to a failure in the care and treatment of the patients they are responsible for **(Hsieh et al., 2020).**

So, when nurses perceive the support of the organization and feel that are accepted by the hospital, will be motivated to devote themselves to work and care about the development of the hospital. Therefore, probably do not look for other employment opportunities and stay in the current position and don't engage in deviant workplace behaviors **(Li MS et al., 2020).**

Therefore, the current study stressed to assess nurses' perception of ethical climate and its relation to workplace deviance behavior

Concerning nurses' personal data, the current study revealed that the highest percentage of the nurses' age was (<30 yrs). Regarding their gender, the study results noted that more than three-quarters of the nurses were female. Concerning their marital status, more than half of them were married. Concerning their Educational qualification, the current study revealed that nearly three-quarters of them had a technical institute of nursing. Regarding nurses' Years of experience in nursing, the study findings illustrated that nearly half of them were <5 yrs. For their residence, the highest percentage of them were living in Urban areas.

For the level of nurses' perception of the total ethical work climate at Aswan University Hospital, the present study results reported that more than two-thirds of the nurses had a high level of ethical work climate. From the researchers' point of view, due to the hospital's commitment to enforcing clear ethical guidelines, strong leadership, and supportive policies. This positive environment fosters a sense of fairness, trust, and accountability, which enables nurses to feel supported in making ethical decisions. The structured ethical framework and institutional culture probably play a key role in shaping this perception, leading to a more unified sense of ethical responsibility among the nursing staff.

This finding is supported by **Ahmed et al. (2024)** study involving ICU nurses from multiple countries, including Egypt, which found that the overall ethical work climate was fairly good. The study highlighted that ICU nurses generally had a positive perception of the ethical work climate, which was significantly associated with their personal and professional characteristics. Also, **Aloustani et al. (2020)** study highlighted a significant correlation between ethical leadership, ethical climate, and organizational citizenship behavior among nurses. This suggests that in some settings, most of the nurses perceive the ethical climate positively, which enhances their organizational behavior.

However, **Hakimi et al. (2023)** showed that nurses had an average moral courage score, and the ethical climate was perceived as a low-level score. This suggests that a less favorable ethical climate could be linked to lower moral courage among nurses.

Regarding the Level of nurses' perception of total work deviance at Aswan University Hospital, the current study revealed that all nurses have a low level of total work deviance. This could be due to the hospital's strong adherence to ethical standards, clear rules, and effective management. The presence of strict policies and regular monitoring may discourage deviant behaviors, while a positive work environment and strong leadership likely promote professional accountability. Additionally, the nurses' commitment to patient care and organizational values could contribute to their low engagement in deviant actions.

This finding is aligned with **Elliethey et al. (2024)** A study conducted in an Egyptian hospital found that the majority of nurses reported a low level of counterproductive work behaviors, which aligns with a low level of total work deviance. Also, the study of **Ata et al. (2024)** reported that the majority of the nurses had a low level of deviant behaviors at work.

However, **Ahmed et al. (2024),** study on the effects of toxic leadership found that toxic leadership significantly increased workplace deviance among nurses. Emotional exhaustion and organizational cynicism also contributed to higher levels of deviant behaviors.

Regarding the relation between perception of total ethical work climate and their personal data at Aswan University Hospital, the current study noted that there was no statistically significant relation between nurses' data (age, marital status, years of experience, educational qualification, and residence) and their perception of total ethical work climate except their gender. This clarifies that these demographic factors may not strongly influence how nurses perceive the ethical environment. However, gender might play a role due to potential differences in communication styles, experiences in the workplace, or societal expectations, which could impact how male and female nurses perceive ethical standards and organizational practices.

This finding is attributed to **Slåtten et al. (2022)** who found that organizational culture and climate significantly influence nurses' work engagement and job satisfaction, but demographic factors like age, marital status, and years of experience did not show a significant impact. Also, Recent research conducted by **Zheng et al. (2024)** indicated that decent work conditions correlate with higher job satisfaction and lower turnover intentions among nurses, but demographic variables such as educational qualification and residence were not significant predictors. Moreover, the study aligned with **Abd-Elmoghith et al. (2024)** who found that female nurses reported a more positive perception of the ethical work climate compared to their male counterparts. This was attributed to differences in communication styles and ethical sensitivity.

However, **Vallone and Zurlo, (2024)** study highlighted that interpersonal and inter-role conflicts and psychological health conditions among nurses are influenced by demographic factors like age and years of experience, suggesting these factors can impact perceptions of the work environment. Also, **Tong et al. (2023)** research highlighted that while gender influences nurses' perception of caring, it did not significantly affect their perception of the ethical work climate.

Regarding the relation between perception of total work deviance and their personal data at Aswan University Hospital, the current study noted that there was no statistically significant relation between nurses' data (age, marital status, years of experience, and residence) and their perception of total work deviance except their gender, and

educational qualification. This is because these factors do not directly influence ethical behavior in a structured work setting. However, gender and educational qualifications were exceptions. Gender may affect workplace interactions and experiences differently, potentially influencing deviant behavior. Educational qualification plays a role because higher education often emphasizes ethical standards and professional responsibility, which could lead to a stronger awareness and avoidance of deviance in the workplace.

This finding is aligned with **Ahmed et al. (2024),** who found that gender significantly influences perceptions of workplace deviance, with female nurses reporting higher levels of perceived deviance compared to male nurses. Educational qualification was also found to be a significant factor, with nurses holding higher educational qualifications perceiving lower levels of workplace deviance. Also, **Hashish et al. (2024)** Educational qualification was also highlighted as a significant predictor, with more educated nurses reporting less exposure to workplace deviance.

However, **Crawford et al. (2023)** a comprehensive review of questionnaires measuring nurses' perceptions of their work environment found that gender and educational qualification did not significantly influence perceptions of workplace deviance

Concerning the correlation between nurses' perception of ethical work climate and workplace deviance at Aswan University Hospital, the current study revealed that there was a negative association between ethical work climate and workplace deviance with high statistical significance (P <= .000**). This could be due to when nurses perceive a positive ethical work climate—characterized by clear ethical guidelines, support, and fairness—they are less likely to engage in deviant behaviors. A strong ethical environment promotes accountability, professional integrity, and adherence to standards, which reduces the likelihood of actions that violate workplace norms or ethical principles. This inverse relationship highlights the critical role of ethical climate in minimizing workplace deviance.

This study finding is supported by **Shang and Yang, (2022)** who reported a significant negative association between ethical work climate and workplace deviance. It highlighted that a strong ethical climate reduces instances of deviant behavior among employees. Another study by **Elliethey et al. (2024)** indicated that higher levels of perceived ethical work climate are associated with lower levels of counterproductive work behaviors among nurses.

However, Essex et al. (2023) study highlighted that while a positive ethical climate can reduce deviant behaviors, the presence of ethical tensions and conflicts can still lead to higher levels of workplace deviance among nurses. also, A comprehensive review of **Zappalà et al. (2022)** found mixed results, with some studies showing no significant relationship between ethical work climate and workplace deviance, suggesting that other factors like organizational culture and leadership styles might play a more crucial role.

Conclusion

The finding of this research concluded that more than two thirds of nurses were perceived high level of total ethical work climate and approximately one third of them had moderate level of perception about total ethical work climate. Moreover, all sample of the nurses had low level of perception about behavior of work deviance. Additionally, there was a negative statistically significant correlation between ethical work climate and workplace deviance with highly statistically significant (P <= .000**).

Recommendations:
Recommendations for Hospital administrators:
- Develop system for rewarding and supporting nurses who behave ethically and serving as ethical role models by providing different kinds of bonuses and incentives through the hospital management system.
- Develop strategies by the hospital management to promote supportive work environment and reduce workplace deviance behaviors including providing rewards, implementing flexible work schedules, fair pay and benefits, safe working conditions, and offering training .
- Provides promotion and fairness system through distributing resources for nurses equally by the hospital management.

Recommendations for nursing manager:
- Maintain equitable work environment for all nurses through maintaining an open clear communication with all nurses about the ethical behavior, ethical dilemmas.
- Provide honesty and sincerity work environment for creating emotional relationship with nurses to avoid deviant workplace behaviors.
- Provide nurses constructive feedback to increase their capabilities and job satisfaction by nursing manager.

Recommendations for nursing level:
- Encourage nurses consider their time value for caring for patient in order to increase patient satisfaction
- Complying Nurses with regulations of the hospital to avoid punishment from hospital management.

For further research
- Replicate the study for large sample in other departments at clinical setting and other hospital with differences circumstances to prove its effectiveness.
- Investigate factors the can led to occurrence of deviant behaviors between nurses in hospital.
- Conduct studies to examine the effect of workplace deviance behaviors on job performance and productivity.
- Investigating the relationship between deviant workplace behaviors and leader mistreatment.

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