

The Impact of Ethical Leadership on job stress and turnover intention in nurses: Case study of nurses in the hospitals affiliated to Shahrekord University of Medical Sciences

Mohammad Reza Dalvi Isfahan,¹

Assistant Professor, Management Department, Islamic Azad University Dehaghan Branches, Iran

Mazaher Ganji,²

M.A. Public Administration, Management Department, Islamic Azad University Dehaghan Branches, Iran

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Abstract

Background and purpose: Shortage of nurses and turnover (or leaving occupation) among them have created big problems in view of giving services to patients, care quality, and treatment expenses. The factors effective of nurses' turnover have significant effects on organizational performance. One of the important prerequisites for nurses' turnover intention is leadership and job stress. Ethical leadership provides commitment and loyalty in personnel and as a result they will have no serious decision to leave their organizations. The present study was aimed to understand the effects of ethical leadership on nurses' turnover intention. Job stress was examined as a moderating variable between ethical leadership and turnover intention. The results of this study indicated that there was a negative, significant association between ethical leadership and turnover intention, and a positive, significant association between job stress and turnover intention. Furthermore, between ethical leadership and job stress, there was a negative, significant association.

Keywords: Ethical leadership, job stress, turnover intention, turnover, Shahrekord University of Medical Sciences.

¹ . Corresponding author
E-mail: m_dalvi53@yahoo.com
+989133118083

² . Email: Ganji24@yahoo.com

Introduction:

Today, personnel turnover is a significant challenge for organizations. Hom and Griffeth (1995) indicated that since personnel are known as a very important asset, their turnover will impose major costs for employing substitute workforce and subsequently training, educating, and preparing new staff till productivity stage and desired efficiency (1). Turnover in nursing occupation which alongside other medical professions is responsible for establishing life, providing health, and preventing and restricting diseases is more important in the system of healthcare services provision. Virtually in all countries the most significant part of workforce in health system is nursing staff (2). The expansion of lack of nurses and high rate of leaving this profession by nurses is a global problem in both developed and developing countries. One third of the nurses in England and Scotland and more than 1/5 of U.S nurses are inclined to leave this profession (3). Roman, in his paper, argues that the effect of lack of nurses during 2015-2020 will reach its maximum level (4). Jones estimated that 82000-88000 dollars is the expense incurred per any registered nurse employed in the U.S.A who leaves his/her occupation (5). Turnover in nursing incurs an expense of 60000-120000 dollar per a nurse, not to mention lack of experienced nurses (6). The majority of turnover is voluntary. Tett and Meyer (1993) defined turnover intention as a conscious and deliberate inclination to leave organization (7). Turnover intention is one of the important predictors of actual turnover (Griffeth et al., 2000(8)). Being aware of what factors make an employer decide to leave his/her work is very crucial to organization's ability to retain its staff (9). The best predictor of an individual's behavior is to measure his/her intention to perform that behavior. The studies have indicated that there is a direct association between predicted turnover and actual turnover in nurses (11, 12, and 13). Also, Firth et al. (2004) indicated that the experience and spectrum of the factors leading to job-related stress cause the personnel to leave their organizations (Firth et al., 2004) (8). According to Lazarus (1995) stress could be defined as imbalance between the perceived environmental demand by people and the perceived ability to deal with these demands (14).

Blix (1994) claims that job-related stress could cause sickness absence, turnover of large number of personnel and poor performance, and the potential increase in the accidents due to human errors (15). On the other hand, according to Elci et al. (2012) leadership behaviors affect staff's loyalty and job satisfaction directly, which, in turn, influences turnover intention behaviors (16). One of the most important leadership behaviors is related to ethics. Trevino et al. (2003) indicated that the ethical dimension of the leadership is significant due to leader's behavior influencing personnel's behavior (17). Ethical leader is assumed as a pattern in organization and pursues ethical behavior among his/her subordinates. Brown et al. (2008) [18]. Various theorists have so far described ethical leadership. Some like Brown et al. (2005) have defined this leadership in terms of social learning as leadership based on rules and normative values, which is expressed through acts, practices, decisions, and executive approaches to encouraging and punishing ethical and unethical behaviors in organizational space (19). It is obvious that ethical leaders strive to make fair decisions and take care of subordinates' emotions and develop fair work environments. Therefore, the staff are expected to be more positive and optimistic about their positions and occupation, and be more willing to stay in organization and participate in its success (20). Studies indicate that managers and chief nurses relating to and leading their staff in negative situations (authoritarian and autocratic relations irrespective of status, needs, capabilities, and limitations) cause intensification of tension level and personnel's stress. On the contrary, the presence of positive dimensions in managers' behaviors (within a social and humanitarian

orientation toward personnel) provides the opportunity of decreasing their tension and pressure in arenas concerning role, responsibility and volitions, contrasts, and conflicts and feeling of inability ameliorate to some extent (21). Therefore, ethical leadership is capable of exerting its effect on staff in all levels through the processes targeted at providing ethical milieu and patterning. Of variables influenced by ethical leadership, job-related stress and turnover intention could be mentioned. Conceptually, there is a variety of hierarchical relationship (Figure 1) between ethical leadership and job stress and turnover intention. Ethical leadership provides personnel's loyalty and commitment and when personnel trust and are loyal to their leader, job-related stress subsides among them and take no serious decision regarding turnover (17). Within this framework, this paper focuses on the potential effect of ethical leadership and job-related stress on turnover in nurses.

Hypotheses:

- H1. There is a relationship between ethical leadership and nurses' turnover intention
- H2. There is a relationship between ethical leadership and nurses' job stress
- H3. There is a relationship between nurses' job stress and turnover intention.

Methods:

The present study is descriptive, correlational with 1108 nurses working in the hospitals affiliated to Shahrekord University of Medical Sciences (Ayatollah Kashani, Hajar, Vali Asr, Seyyed-o-Shohada, Imam Javad, Imam Reza, Shohada, and Sina) in 1392 as sample population. 180 nurses were enrolled as sample size calculated by Cochran formula. Sampling method was stratified randomization proportionate to sample size and statistical sample. The research instruments included three questionnaires as follows:

- A. Ethical leadership questionnaire: to measure ethical leadership variable ethical leadership at work (ELW) questionnaire of Kalshoven et al. (2002) was used. Cronbach α coefficient of this questionnaire was obtained 0.74 for the present research, representing its desired reliability.
- B. Job-related stress questionnaire: To measure job-related stress variable, we used Keller questionnaire (1984), consisting of 5 questions. Cronbach α coefficient was obtained 0.78, indicating its desired reliability.
- C. Turnover intention questionnaire: To measure turnover intention variable, we used three-question questionnaire of Kaman et al. (1979). Cronbach α coefficient of this questionnaire was obtained 0.83 which is suggestive of its acceptable reliability.

For this study, the questionnaires were translated (through a two-stage process of translating and matching specialized content of the translated questions with English Language), prepared, and administered after approval of the advisor, supervisor, and other knowledgeable professors and the University's and hospitals' officials and offering some explanations to guide the nurses. Furthermore, to examine the validity of the questionnaire, we showed it to some knowledgeable experts and assessed and matched their views, obtaining the reliability as 0.85. The items were answered on 5-point likert scale (completely disagree: 1 to completely agree: 5). Data analysis on the level of descriptive and analytical statistics was done using SPSS software. The normality of data distribution was examined using KS test, indicating that all factors of sample under study complied with normal distribution as the level

of significance is 5%. Therefore, parametric statistical tests were adopted to test the hypotheses.

Findings:

The findings of this study indicated that the highest frequency was 67 (37.2%) for 30 to 35-year-old participants and the least frequency was 5 for older than 45- years-old. In terms of education, the highest frequency (24 people, 13.3%) was MA or MSc and higher than MA or MSc. 127 (70.6%) respondents were male and the rest were female. 143 people (63.2%) were married and the rest were single. In terms of occupation history the highest frequency (72 people, 40%) was respondents with history of 10-15 years and the least frequency (18 people, 10%) was respondents with history of 15-20 years. In addition, formally employed personnel comprised the highest frequency (10 people, 60.6%) and project personnel did the least (8 people, 4.4%). The mean, variance, and standard deviation of ethical leadership variable, job stress, and turnover intention were respectively 3.1175, 0.843, 0.711; 3.3398, 0.44003, 0.884; and 3.4208, 0.840, 0.706. As standard deviations are nearly close, the values have been measured with equal precision. To examine normal distribution of the data we used Kolmogorov-Smirnov test. The results of this test indicated that all factors of the sample under study conformed to normal distribution ($P > 0.05$). Therefore, parametric statistical tests were used to test the hypotheses.

Table 1. Kolmogorov – Smirnov test

Factor/variable	mean	SD*	Level of significance
Ethical leadership	3.1175	0.843440	0.07
Job stress	3.3398	0/940030	0.23
Turnover intention	3.4208	0.840190	0.21

*standard deviation

Table 2. Regression test of the first hypothesis

	Unstandardized coefficient		standardized coefficient	t	Level of significance
	B	Error	Beta	B	
Model					
(Fixed)	1.332	0.184		7.219	0.000
Ethical leadership	-0.57	0.061	-0.58	9.528	0.000

Table 3. Regression test of the second hypothesis

Model	Unstandardized coefficient		standardized coefficient	t	Level of significance
	B	Error	Beta		
(Fixed)	1.240	0.161		7.706	0.000

Stress	-0.586	0.051	0.655	11.574	0.000
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Table 4 .Regression test of the third hypothesis

	Unstandardized coefficient		standardized coefficient	t	Level of significance
Model	B	Error	Beta	B	
(Fixed)	2.416	0.249		9.707	0.000
leadership	-0.28	0.082	-0.29	2.607	0.010

Regression test indicated a significant, negative correlation between ethical leadership and turnover intention ($P < 0.05$ and $\beta = -0.58$). Also, there was a positive, significant correlation between job stress and turnover intention ($P < 0.05$ and $\beta = 0.65$).

On the other hand, a negative, significant correlation was observed between ethical leadership and job stress ($P < 0.05$ and $\beta = 0.29$).

Discussion:

In the present study, the mean of leadership among 180 people is 3.1175 ± 0.843 (of total 5), meaning that nursing officials follow ethical leadership criteria towards nurses moderately. In addition, the mean job stress was 3.3395 ± 0.94003 (of total 5) indicating that job stress is moderate among nurses. Lambert et al. (2007) considered nursing as a highly stressful occupation and argued that among the 130 occupations of their study, the nurses were ranked 27th in referring to physicians for difficulties derived from mental health (27). Moreover, Safari et al. remarked that more than 35 stressor with mild to high severity threatened nurses (23).

Shahraki Vahed et al. (1389) in a study of Zabol University of Medical Sciences- affiliated hospitals reported nurses' job-related stress as 50.7%, 46.7%, and 1.7% for respectively mild, moderate, and severe cases (24). The mean turnover intention in this study was 3.4208 ± 0.840 , which is suggestive of moderate turnover intention in nurses. In Lutzen et al.'s study, 71.42 nurses each day thought of leaving their vocation (25). In Liou's study of Asian nurses in the U.S.A the mean turnover intention was 2.45 (of total 5) in a 120-individual sample (26). In the present study, the mean turnover intention, among 180 participants, is 3.35 ± 0.929 (of total 5). In Hariri et al.'s study (1390) the mean turnover intention of 350 nurses in medical education hospitals of Shahid Beheshti University of medical Sciences was 3.35 ± 0.020 (27). The results of the present study demonstrated a negative, significant correlation between ethical leadership and turnover intention. Nowadays, people expect to work in an organization where they are paid attention, understood well, and respected; they like to enjoy the feeling of being trustworthy, honest, and reliable, to have self-confidence, and be a part of organization. An individual creating such environments with these characteristics is obviously a leader whose all behaviors should reflect ethical capabilities and whose life should be completely dictated by precepts of honesty and honor (Yilmaz, 2010) (28). Ethical leaders try to take fair decisions. So, it is expected that personnel be more positive, more optimistic about their post and occupation, tend to stay in organization, and participate in its success

(18). These results are in agreement with the findings of Mulki et al. (2007). Their study indicated that ethical atmosphere affected turnover intention and the association between ethical atmosphere and turnover intention was fully influenced by role stress, the conflicts among people, emotional fatigue, trust in supervisor, and satisfaction with occupation. The results indicate that ethical atmosphere could cause role stress to decline and help trust in supervisor increase. Lower levels of stress lead to decrease in emotional fatigue, increase in job satisfaction, and decline of turnover. Ethical atmosphere helps staff have a positive view towards their occupation, stay in organization for a longer time, and think of leaving less (18). Highly ethical environment could contribute to job satisfaction and organizational commitment increase and, in turn, could cause decrease in turnover intention (29). Mulki et al. (2008), in their studies, found that ethical atmosphere was positively associated with job satisfaction, which culminate in decreasing turnover intention and increasing organizational commitment and job-related performance (30). Ethical behaviors in an organization are relevant to management as important issues and management should contribute to promoting ethical behaviors fundamentally (31). If the staff of an organization interpret manager's behavior as ethical, then the organization will experience increase in job satisfaction and decrease turnover intention which both are critical for an organization. In contrast, if personnel interpret manager's behavior as unethical, the level of job satisfaction will decline and turnover intention will increase (32). Nadi and Hazeghi's study findings (1390) suggested a positive association of ethical environment with job satisfaction and organizational commitment and negative association of these three constructs with turnover intention (33).

The evidence of the present study also confirmed the role of job-related stress in the nurses' turnover intention. These results are consistent with findings of Gaither (1999), Nissly et al. (2008), and Fang and Vishwanath (1993). Gaither investigated the effect of job stress on turnover intention mediated by occupational commitment, realized expectations, organizational commitment, and job satisfaction. Occupational commitment was positively related to organizational commitment and job stress. The increase in mean job satisfaction and mean organizational commitment lowered the likelihood of turnover intention (34, 35, and 36). The latest findings on the role of stressors and excitational depression in being willing to leave and turnover have been obtained through four-level pattern presented by Boyd et al. (2009). According to the results reported by them role transparency and role conflict as two main job stress indices firstly cause encounter methods to be activated, including excitement-oriented encounter and question-oriented encounter, and then these encounter styles, particularly excitement-oriented one, provides the context for excitational depression followed by job stress decrease and finally intention of leaving the profession (37).

Furthermore, the results of the present study indicated a negative, significant association between ethical leadership and job-related stress. These results have consistency with the role and characteristics raised for ethically oriented leadership by some researchers like Brown et al. (2005), Baker et al. (2006), and Raveld (2008) and the findings of Elci et al. Ethical leadership provides personnel's commitment and loyalty and when they trust their leaders, job stress declines among them and they have no serious decision to leave their organizations (Brown et al. 2005) (18). In an investigation, Golparvar et al. (1389), in addition to confirming ethically-oriented leadership's role in job stress, argued that through ethical leadership, job stress is weakened based on indicators like perceived inefficiency-derived stress, responsibility limitation and volition-derived stress, and conflict, opposition, and excitational depression-derived stress (directly or indirectly) (38).

Conclusion:

The findings of the present research indicated that the turnover intention in the nurses of study is on average higher compared to the studies conducted in other countries and even some research conducted in Iran. According to literature, between turnover intention and actual turnover in nurses, there is a direct association and therefore this should be more seriously addressed. On the other hand, nursing is classified as a stressful occupation. There are several stressors in work environment which finally develop stress in nurses. In view of the findings of the present study, job stress causes increase in turnover intention and ethical leadership contributes greatly to lowering job stress. Therefore nursing managers could help confidence, loyalty, and organizational commitment increase in nurses through demonstrating a combination of honesty, reliability, trustworthiness, purity, democratic decision and supportive participation, kindness and sympathetic, and promotion of justice and culture of ethical values, and hence they may decrease turnover among them. Thanks to pronounced effect of ethical leadership on personnel's behavior the managers with such leadership style are more likely to succeed. Therefore, high ranking managers, alongside support for such leadership style, are recommended to pay attention to this issue when assigning and relegating managers.

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