

## Perceived Organizational Support and Ethical Climate: Insights from the Nursing Profession

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### ABSTRACT

**Background:** In healthcare environments, the ethical climate of a hospital greatly affects how ethical challenges are addressed, influencing nurses' professional conduct and decision-making. Simultaneously, nurses' perception of support from their organization—how appreciated and supported they feel—plays a vital role in their motivation, job satisfaction, and adherence to ethical practices. **Aim:** This study aimed to determine the relationship between hospital ethical climate and perceived organizational support among nurses at Benha University Hospital. **Methods:** descriptive correlational design was used. This study was conducted at Benha University Hospitals, (academic hospitals), Al Qaluobia Governorate, Egypt, A stratified random sample of 375 nurses was selected. **Study Tools:** Hospital Ethical Climate Questionnaire, Organizational Support Questionnaires. **Results:** The findings revealed that 35.5% of studied nurses reported that the hospital has an ethical climate at high level, 42.6% of nurses reported high coworker support—the highest among all support types. In contrast, only 19.6% perceived high organizational support, the lowest reported. Additionally, 38.7% of nurses experienced low supervisor support. There were significant positive correlations between scales of perceived organizational support and ethical climate. **Conclusion:** the study revealed that, one third of studied nurses perceived ethical hospital climate in a high level while the highest percent of nurses reported high level of support from their coworkers, while they perceived low organization support. Moreover, there was a significant correlation between the total score of ethical climate and perceived organizational support. **Recommendations:** Foster a supportive ethical climate within hospital units by encouraging open communication, mutual respect, and transparency between nurses, managers, physicians, and administrators.

**Keywords:** *Ethical Climate, Organizational Support, support*

### Introduction

Nurses operate at the heart of healthcare delivery, often navigating complex ethical dilemmas while managing high workloads and emotional demands. Their perception of organizational support and the ethical climate significantly influences their job satisfaction, professional commitment, and

patient care quality. When nurses feel supported by their institutions—through resources, fair policies, and recognition—they are more resilient, engaged, and ethically grounded (Ansari et al., 2024).

Ethical climate refers to the collective perception within an organization regarding what is considered morally right and acceptable behavior in the workplace. In the nursing profession, this includes adherence to values such as integrity, respect, justice, and transparency in patient care and professional interactions. A clear and consistent ethical climate provides nurses with a framework for navigating complex situations, ensuring that their decisions align with both institutional values and personal ethics. When ethical expectations are well communicated and upheld, nurses feel more secure and confident in their roles (Al Halbusi et al., 2021).

A strong ethical climate fosters open communication and ethical decision-making across all levels of the organization. For nurses, this means having the freedom to express concerns, question practices, and report unethical behavior without fear of retaliation. Such an environment reduces moral distress and enhances professional autonomy. When nurses are supported in upholding ethical standards, they are more likely to act in the best interest of their patients, collaborate effectively with colleagues, and maintain high levels of job satisfaction (Arar & Saiti, 2022).

The presence of a positive ethical climate contributes to a culture of trust, mutual respect, and accountability. It not only impacts individual behaviors but also shapes the overall work environment. Nurses who perceive their workplace as ethically sound are more engaged, resilient, and committed to providing quality care. Moreover, ethical leadership plays a crucial role in reinforcing ethical norms, guiding staff through dilemmas, and setting a tone of integrity throughout the organization (Alizadeh et al., 2021).

Perceived Organizational Support (POS) refers to employees' belief that their organization values their contributions and genuinely cares about their well-being. In nursing, this perception is influenced by factors such as fair treatment, recognition, opportunities for growth, and access to resources. When nurses feel supported by their institutions—through reasonable workloads, adequate staffing, and emotional or psychological support—they are more likely to feel valued and respected, which directly impacts their motivation and performance (Duong et al., 2024).

A high level of organizational support strengthens nurses' sense of loyalty and organizational commitment. It creates a sense of belonging and encourages positive attitudes toward work and teamwork. Nurses who feel supported are more likely to go above and beyond their duties, show compassion in care, and remain in their positions longer, thus reducing turnover rates. Supportive organizations often see improved patient outcomes, as well as higher morale among staff (Larsman et al., 2024).

In contrast, a lack of perceived support can result in job dissatisfaction, emotional exhaustion, and increased risk of burnout among nurses. When nurses feel undervalued, overworked, or ignored, their productivity and engagement decline. Organizations that fail to prioritize employee well-being may experience higher absenteeism and lower retention (Ilyas et al., 2023)

### **Significance of the study**

Nurses, as the frontline providers and key drivers of healthcare delivery, are profoundly influenced by the ethical climate established within hospital settings. This environment plays a pivotal role in shaping their ability to navigate ethical dilemmas and maintain professional conduct during ethical decision-making. When faced with challenging situations, nurses may experience feelings of helplessness and moral distress, which can hinder their professional performance. While moral distress and the ethical climate are critical factors, other significant contributors include insufficient organizational support, restrictive institutional policies and procedures, and limited control over available resources (Erogluer & Yilmaz, 2015). There is no study done in Benha university hospital about hospital ethical climate and organizational support. On the other hand, it is important that nurses' decisions and actions are far from being intuitional, free from prejudices, and based on scientific, objective; and ethical principles. It is necessary to create an ethical climate to ensure professional nursing practices; therefore, the aim of the study was to assess relationship between hospital ethical climate and perceived organizational support among nursing staff at Banha University Hospitals.

### **To fulfill this aim the following research objectives were formulated to:**

1. Measure level of hospital ethical climate among nursing staff.
2. Assess levels of perceived organizational support among nursing staff.
3. Examine the relationship between hospital ethical climate and perceived organization support.

### **Research questions of the study were;**

1. What is the level of hospital ethical climate as perceived by nursing Staff?
2. What are the levels of perceived organizational support among nursing staff?
3. What is the relationship between hospital ethical climate and perceived organizational support?

## **Methods**

### **Technical Design:**

The technical design of this study includes a description of the research design used, the study setting, subjects, and the tools of data collection.

### **Research design:**

A descriptive correlational research design is used to achieve the aim of this study.

**Setting:**

This study was conducted at Banha University Hospitals, (Academic hospitals), Al Qaluobia, Egypt

**Subjects:**

It included 375 nurse select by stratified random sample technique of total 2270 nurses at previous mentioned study setting.

**Study Tools:**

Data was collected using the following two tools:

**Tool I: Hospital Ethical Climate Questionnaire**

It consisted of two parts as follows:

**Part one: personal and job characteristics of nurses**, which include the data about characteristics of nurses such as their age, gender, years of experience, and educational qualifications and department type.

**Part two: Hospital Ethical Climate Questionnaire:** It was developed by **Olson (1990)** to measure the perception level of staff nurses regarding hospital ethical climate. It consisted of 21 items grouped under five dimensions namely: peers, patient, manager, hospital, and physicians.

**Tool II: Multi-Source Model of Perceived Organizational Support Scale:**

Based on **Nilesen (2006)**, the assessment of nurses' perceived organizational support includes four distinct scales: organizational support (9 items), supervisor support (4 items), coworker support (9 items), and direct report support (9 modified items). The direct report support scale, adapted from **Eisenberger et al. (1990)**, measures the extent to which nurses feel supported by their junior staff or assistants.

**Content validity and reliability:**

The study tools were translated into Arabic language, and then Face and content validity were established by a panel of five experts from nursing administration department, faculty of nursing at Zagazig University. Content and face validity sheet involved two parts: the first part included the opinions of the experts for each item that were recorded on a two-point scale: relevant, and not relevant. The second part covered general or overall opinion about the form, which express their opinions and comments on the tools for clarity, applicability, comprehensiveness, understanding, any suggestions for any additional or omissions of items and ease for implementation. According to their opinions, all recommended modifications were performed by the researcher.

Reliability analysis was conducted using Cronbach's Alpha Coefficient to assess the internal consistency of each scale. The results indicated satisfactory reliability levels for both the Hospital Ethical Climate Questionnaire and the Multi-Source Model of Perceived Organizational Support

Scale. Specifically, the Hospital Ethical Climate Questionnaire achieved a Cronbach's alpha of 0.724, while the Multi-Source Model of Perceived Organizational Support Scale recorded a value of 0.703, confirming the suitability of both tools for research purposes.

### **Pilot study:**

A pilot study was conducted on 10% of the total sample (38 nurses) to evaluate the applicability, feasibility, and practicality of the research tools, as well as to estimate the time needed to complete the questionnaire. It was carried out one week prior to the actual data collection, with participants randomly selected from the nursing staff. Since no changes were required based on the pilot results, the participants from the pilot study were included in the main study sample.

### **Administration and ethical consideration:**

An official letters obtained from the dean of faculty of nursing at Zagazig University to Chairman of board of directors at Banha University Hospitals to request permission and cooperation for conducting this study, then oral official permission from the nursing director of each hospital and from the head nurse of each unit after explaining the nature and the aim of the work.

The study proposal was approved by the ethical committee in the faculty of nursing at Zagazig University with the ethical code M.Dzu.Nu R/198/12/9/2023. The researchers met the hospital directors (medical &nursing) to clarify the aim of the study and seek their support and approval. The researcher met the study subjects to explain the purpose of the study and obtain their approval to participate in it.

### **Results: -**

**Table (1):** shows personal and job characteristics of studied nurses; as shown, 40.8% of studied nurse was in the age group 30 to less than 40 years old with mean age was  $39.67 \pm 5.15$ . The highest percentage of them was female, married and graduated from secondary school of nursing (62.1%, 69.6%, 44.8%, respectively): additionally 44% experience from five to less than ten years.

**Figure (1):** notifies that one third of studied nurses 33.5% perceived ethical hospital climate in a high level of ethical climate while 22.1% of them perceived in a low level.

**Table (2):** reveals that the highest mean percent was related to relation with patient domain (61.8%), followed by relation with peers (57.2%). While the lowest was for related to relation with hospital (42.8%)

**Table (3):** indicates that perceived coworker support had the highest percentage of participants reporting a high level of support (42.6%), suggesting that, nurses feel most supported by their colleagues. In contrast, perceived organizational support had the lowest proportion of high responses

(19.6%). For perceived supervisor support, 38.7% of the nurses reported low levels. Perceived direct report support showed a more balanced distribution, with 27.2% high, 42.1% moderate, and 30.7% low.

**Table (4):** Shows that shows significant positive correlations between scales of perceived organizational support and ethical climate ( $p \leq 0.05$ ).

**Table (1): Distribution of studied nurses regarding their personal and job-related characteristics (N=375)**

Personal data	N	%
<b>Age</b>		
20-<30	97	25.9
30-<40	153	40.8
40-<50	86	22.9
50-60	39	10.4
Mean+- S.D 39.67±5.15		
<b>Gender</b>		
Male	142	37.9
Female	233	62.1
<b>Marital status</b>		
Single	62	16.5
Married	261	69.6
Divorced	33	8.8
Widow	19	5.1
<b>Educational level</b>		
Secondary school	168	44.8
Technical Institute	118	31.5
Baccalaureate Degree in Nursing Science	84	22.4
Master degree or more	5	1.3
<b>Years of work experience</b>		
<5 years	74	19.7
5-<10	165	44.0
≥10	136	36.3
Mean- S.D 10.47±3.37		

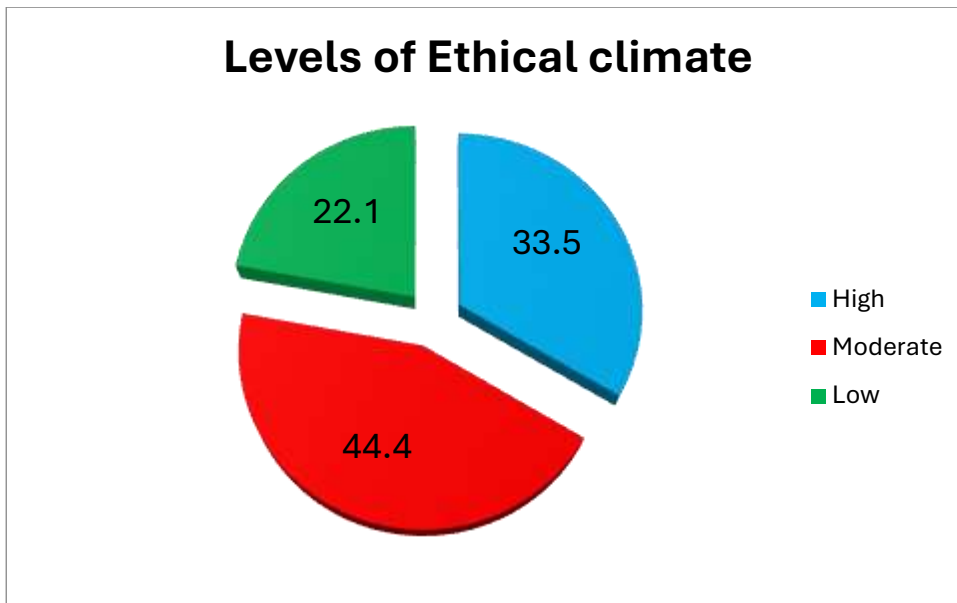


Figure (1): Total levels of hospital ethical climate as reported by studied nurses (n=375)

Table (2): Mean scores of ethical climate domains among studied nurses (n=375)

Total dimensions	High		Moderate		Low		Mean (SD)	Mean percent
	No	%	No	%	No	%		
• Relation with peers	133	35.6	149	39.8	92	24.6	9.49 (1.23)	57.2%
• Relation with patient	159	42.5	171	45.7	44	11.8	10.18 (3.45)	61.8%
• Relation with managers	125	33.3	185	49.4	65	17.3	22.66 (5.84)	51.9%
• Relation with hospital	100	26.7	157	41.8	118	31.6	8.91 (2.45)	42.8%
• Relation with physician	110	29.2	171	45.5	95	25.3	15.19 (3.26)	49.5%
<b>Total</b>	<b>125</b>	<b>33.5</b>	<b>167</b>	<b>44.4</b>	<b>83</b>	<b>22.1</b>	<b>66.43 (7.68)</b>	<b>59.7%</b>

Table (3): Frequency distribution of organizational support domains as perceived by studied nurses (n=375)

Scale	High		Moderate		Low		Mean (SD)
	No	%	No	%	No	%	
• Perceived organization support	74	19.6	141	37.7	160	42.7	24.91 (5.28)
• Perceived supervisor support	113	30.1	117	31.2	145	38.7	11.86 (3.24)
• Perceived coworker support	160	42.6	115	30.7	100	26.7	27.19 (5.21)
• Perceived direct report support	102	27.2	158	42.1	115	30.7	26.55 (4.23)

**Table (4): Correlation between total score of Moral sensitivity, Ethical climate, Perceived organization support among nurses (N=375)**

Variables	Ethical Climate Scale	
	r	p
• Perceived Organizational Support	.479	.05*
• Perceived Supervisor Support	.512	.01*
• Perceived Coworker Support	.438	.05*
• Perceived Direct Report Support	.466	.05*

## Discussion

Today, hospitals strive to receive quality certification and high recognition. Organizational support is required by all healthcare staff through their hospitals, to recognize how much their hospital cares about satisfying nurses' needs as well as nurses' wellbeing. Organizational support can create a positive and productive work environment which helps nurses to manage workplace-related stressors and exhaustion. The more positive the perceived organizational support, the higher the work-life balance and vice versa. The perceived organizational support has an influence on work-life balance. Nurses who are the leading force in operating health care services are health professionals who are directly affected by the ethical climate patterns adopted by hospitals (Abdel Azize et al., 2020).

It is necessary to create an ethical climate to ensure professional nursing practices. indispensable for quality health care services and provides nurses with the opportunity to approach problems faced in patient care with moral sensitivity, effectively follow ethical decision-making process and work by conducting requirements of professionalism (Chen et al., 2022).

### Ethical Climate Scale among the studied nurses.

Regarding total level of ethical climate among the studied nurses, the current study declared that more than two fifths of the studied nurses reported that the hospital has an ethical climate at moderate level, more than one third of them reported high level, while less than one quarter of them reported low level. This may be due to the hospital's commitment to ethical standards and policies, which help foster ethical climate among nurses.

From the research investigator point of view, the presence of clear ethical guidelines, leadership support, and ongoing ethical training may contribute to the studied nurses perceived ethical climate. In addition, challenges such as workload pressures, resource limitations, and varying levels of ethical awareness among nurses could contribute to the moderate perception of the ethical climate. Furthermore, different personal values, experiences, and professional training may influence how nurses perceive and evaluate the ethical atmosphere within their workplace.

Similarly, this result was in harmony with a study carried out by **Ahmed et al., (2020)** in Egypt to assess the perception of ethical work climate and organizational citizenship behavior among nurses, and noticed that perception level of ethical work climate was moderate among the highest percentage of nurses. Likewise, a study done by **Elsayed et al., (2020)** in Egypt aimed to investigate the relationship between nurses' perception of ethical leadership and anti-social behavior through ethical climate as a mediating factor and declared that more than half of nurses perceived ethical climate as a moderate level.

On the other hand, **Ghorbhangoli et al., (2021)** who conducted a study in Iran to investigate the relationship between ethical climate with job conscience in nurses of intensive care units and stated that the largest proportion of the studied nurses reported a high level of ethical climate. Also, this result was contradicted with a study performed by **Atia & Abdelwahid, (2023)** in Egypt, to investigate the relationship between ethical work climate, moral distress, organizational citizenship behavior and moral courage among nurses, it was noticed that the majority of nurses had a favorable perception of the workplace's ethical climate.

Regarding mean scores of ethical climate domains among studied nurses, the current study result reflected that total mean score for all domains of ethical climate was  $(66.43 \pm 7.68)$ . The highest mean score was related to "relation with managers" domain  $(22.66 \pm 5.84)$ , while the lowest mean score was related to "relation with hospital" domain  $(8.91 \pm 2.45)$ . This may be due to the direct and frequent interactions between nurses and their managers, which foster a clearer understanding of expectations, support, and guidance, leading to more positive perception of the ethical climate in this domain.

This result coincided with a study conducted by **Wang et al., (2021)** in China, to examine the impact of clinical nurses' perception of hospital ethical climates on their organizational citizenship behavior, and stated that the nurses' perception of the relationship with the manager was the highest  $(4.53 \pm 0.46)$ . Similar results reported in a study by **Park & Jeong, (2024)** who investigated the relationship between hospital ethical climate, critical thinking disposition, and nursing task performance in Korea and mentioned that the highest mean score for hospital ethical climate was "relation with manager"  $(3.80 \pm 0.53)$ .

In the same scene, a study carried out by **Fradelos et al., (2021)** to assess Greek nurses' perception of hospital ethical climate, in Greece and noticed that the highest score of ethical climate subscales reported to "managers" subscale. On contrary, **Mohamed et al., (2022)** conducted a study about the relationship between nurses' perception of ethical work climate and moral distress, in Egypt, and found that the highest score of ethical climate domains related to the "relation with peers" domain, while they gave low ratings regarding "relation with physicians" domain.

### Nurses Perception regarding organizational support.

As regard total perception levels of organization support among the studied nurses, the current study result reflected that about two fifths of the studied nurses had a moderate perception level of organizational support, and less than one third of them had low perception level, while about one quarter of them had low perception level. This may be due to a balanced mix of supportive and challenging workplace factors that influence nurses' perceptions. While some organizational policies and resources may provide adequate support, inconsistencies in leadership engagement, workload distribution, and professional development opportunities could prevent nurses from perceiving a high level of organizational support.

In this concern, **Abdel Azize et al., (2023)** conducted a study about relationship between organization support and nursing staff burnout in critical care units, in Egypt and reported that more than half of the studied sample perceived moderate level related to total organizational support. Also, this result was in accordance with a study carried out by **Karadas et al., (2023)** in Turkey to investigate the effect of perceived organizational support of nurses on their resilience, and stated that most of nurses perceived a moderate level of organizational support.

On the other hand, research in Iran conducted by **Hasanzadeh et al., (2024)** to examine Participatory management effects on nurses' organizational support and moral distress, which reflected that the largest proportion of the studied nurses perceived low level of organizational support. Also, **Shehata et al., (2024)** who carried out a study to investigate the relation between perceived organizational support and work-life balance among Nurses, in Egypt, and noticed that majority of the studied nursing staff had a low perception level of organizational support.

Concerning mean scorers of organizational support domains as perceived by studied nurses, the present study displayed that the total mean score for all domains of organizational support as perceived by studied nurses was  $(90.51 \pm 8.25)$ . The highest mean scores of organizational support were related to "perceived coworkers support" domain and "perceived direct report support" domain  $(27.19 \pm 5.21, 26.55 \pm 4.23, \text{ respectively})$  compared to "perceived supervisor support" domain mean score  $(11.86 \pm 3.24)$  that was the lowest one. This may be attributed to the fact that nurses often rely more on their coworkers and direct reports for daily tasks, emotional support, and collaboration, fostering a stronger sense of support in these areas.

In this regard, **Li et al., (2024)** who studied relationship between perceived organizational support, work well-being, and medical narrative ability among nurses, in China, and reported that coworkers support sub-scale had the highest mean score of perceived organizational support. This result agreed with **SHAH, (2023)** whose study aimed to investigate the moderating effect of coping

strategies on the relationship between perceived organizational support and burnout of nursing professionals, in Pakistan, and noticed that the studied nurses had higher mean scores in coworker support domains.

On contrary, a study conducted by **Zhang et al., (2024)** about the association between burnout, perceived organizational support, and perceived professional benefits among nurses in China, whose results showed that the studied nurses reported higher mean score in perceived supervisor support domain. Also, **Sabir et al., (2022)** who studied impact of perceived organizational support on employee performance in IT firms—a comparison among Pakistan and Saudi Arabia, and declared that perceived supervisor support holds more significance than coworker support in influencing employee performance.

### **Correlation and relation between the study variables.**

As regard the correlation between the total scores of ethical climate and perceived organizational support among nurses, the current study demonstrated that there was a statistically significant positive correlation between the total score of ethical climate and perceived organizational support.

From the research investigator's point of view, this may be due to the interconnected nature of ethical climate and perceived organizational support, where a positive ethical environment fosters stronger perceptions of organizational support. When nurses perceive a supportive and ethically driven workplace, they are more likely to feel valued and backed by their institution, which may encourage greater commitment and reduce workplace stress (**Hakimi et al., 2020**).

This result is compatible with a study conducted by **Tang et al. (2024)** in China, which examined the associations between the ethical climate of the clinical environment and nurses' caring efficacy. They found that a positive ethical climate in clinical settings is associated with better professional outcomes, suggesting that supportive ethical environments enhance workplace attitudes. Similarly, a study in Iran by **Lotfi-Bejestani et al. (2023)**, entitled "Is there any relationship between nurses' perceived organizational justice, moral courage, moral distress and burnout?", demonstrated a significant relationship between perceived organizational justice and work-related attitudes, indicating that fairness and support within the organization strengthen the overall ethical environment.

On the other hand, **Khatib et al. (2024)**, who investigated the relationship between perceived organizational support and nurses' moral distress in intensive care units in Iran, did not find a significant relationship. However, the study emphasized the importance of a supportive environment in reducing stress and enhancing professional well-being.

### **Conclusion**

The study found that approximately one-third of the participating nurses perceived the hospital's ethical climate as highly positive. In terms of organizational support, most nurses reported receiving

strong support from their colleagues, whereas support from the organization itself was perceived as low. Furthermore, a significant association was observed between the overall ethical climate and perceived organizational support.

**Based on the results of the present study, the following recommendations are suggested:**

1. **Foster a supportive ethical climate** within hospital units by encouraging open communication, mutual respect, and transparency between nurses, managers, physicians, and administrators.
2. **Strengthen leadership practices** among nurse managers to model and reinforce ethical behavior, ensuring that moral principles guide clinical and administrative decision-making.
3. **Enhance perceived organizational support** by providing recognition, fair treatment, and necessary resources to nursing staff, particularly in emotionally and ethically challenging situations.
4. **Implement structured mentorship programs** where experienced nurses support newly employed staff in navigating ethical dilemmas and organizational expectations.
5. **Conduct regular assessments of the ethical climate** using validated tools to identify areas for improvement and ensure that staff perceptions are aligned with organizational values.

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### **Author's contribution**

H.S.M and Z.S.H; conceived of the presented idea. Z.S.H; collected the data. S.E.Z analyzed the data. A.E.A and H.S.M verified the analytical methods, encouraged to investigate the relationship between nursing staff awareness about moral sensitivity, hospital ethical climate and perceived organizational support among nurses.

### **Declaration Of Conflicting Interests**

The author **declared** no potential conflicts of interest with respect to the research, authorship, and/or publication of this article

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