

Relation between Ethical Leadership and Deviant Workplace Behaviors as Perceived by Nurses

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Abstract: Background: Ethical leadership plays important role in increasing or decreasing deviant workplace behaviors. It is important that leaders encourage ethical behavior in their organizations. **Purpose:** To assess the relation between ethical leadership and deviant workplace behaviors as perceived by nurses. **Design:** A descriptive correlational research design was used. **Setting:** The study was conducted in all units and departments at El-Shohada Central Hospital. **Sample:** A simple random sample technique of 150 nurses constitutes the study sample. **Instruments:** Two instruments were used, which are ethical leadership scale and deviant workplace behaviors scale. **Results:** More than two fifths (44.7%) of studied nurses perceived that their leaders had a high level of ethical leadership. While, the minority (17.3%) of them perceived their leaders as having a low level of ethical leadership. Also, the majority (94%) of the studied nurses didn't perceive a deviant workplace behavior, while the minority (6%) of them perceived a deviant workplace behaviors. **Conclusion:** There was a negative strong correlation between ethical leadership and deviant workplace behaviors as perceived by the studied nurses. Moreover, ethical leadership is a negative predictor factor of deviant workplace behaviors. **Recommendations:** Training programs need to be conducted for nursing staff about principles of ethical leadership, and its effect on productivity and deviant workplace behaviors. Implement strategies that promote supportive work environment and reduce deviant workplace behaviors, including flexible work schedules, fair pay and benefits, and safe working conditions.

Keywords: Deviant workplace behaviors, ethical leadership, nurses.

Introduction

Ethical leadership plays a pivotal role in shaping nurses' behaviors within organizations, exerting a profound

influence through various mechanisms. Ethical leaders act as powerful role models by consistently demonstrating

ethical conduct in their decision-making and interactions. This serves to inspire and guide nurses, encouraging them to emulate these ethical actions in their own professional behavior. Ethical leaders build trust and respect among their team members, fostering a positive work environment. When nurses trust their leaders, they are more likely to follow their guidance and adopt ethical practices in their day-to-day work, contributes to the creation of an ethical organizational culture (Ahmed et al., 2023).

Meanwhile, ethical leadership is “the demonstration of normatively appropriate conduct through personal actions and interpersonal relationships, and the promotion of such conduct to followers through two-way communication, reinforcement and decision-making” (Shiundu et al., 2024). Ethical leaders are distinguished from other leaders because they exhibit moral values through two-way communication (Islam et al., 2021). Ethical leadership encompasses behaviors such as fairness, honesty, integrity, and concern for others' well-being, all of which are crucial for fostering a positive work environment (Kim et al., 2024).

Deviant workplace behaviors (DWB) is one of the most vital research areas that influencing the behavior of nurses at workplace and affecting the health of hospital. DWB is a vital concern for research due to its evolving and growing level and possible outcome (Mehdi et al., 2023). Deviant workplace behaviors are considered a key problem for every hospital. Therefore, the understanding of these

workplace behaviors and work-related attitudes has become a significant research area and emerging phenomenon (Farooq et al., 2023).

Deviant behaviors in the workplace differ in two dimensions which are directed towards organization and individual. Organizational deviance involves group behaviors between individuals and organizations as theft, sabotage, and putting little effort into work. While interpersonal deviance is the behavior presents between individuals in the workplace, such as making fun of others, playing mean pranks, acting rudely, and arguing (Abdullah et al., 2021). Leaders must show the uppermost moral behavior in their activities to deliver a moral framework. There are a lot of studies on ethical behavior that highlight the importance of ethics for leader. It is important that leaders encourage ethical behavior in their organizations. Moral conducts of the ethical leaders enhance a favorable acuity and also lead to effectiveness and efficiency of nurses (Ciulla et al., 2020).

Considering this, much prior research has looked at the relationship between ethical leadership and deviant workplace. Ethical leadership has been associated with a lower level of counterproductive work behaviors. Since ethical leaders encourage ethical behaviors and promote moral reasoning, they can minimize subordinates' level of moral disidentification, preventing them from indulging in aberrant behaviors. Descriptive ethics in the literature describes the behavioral code of conduct that the workers should follow within an organization to accomplish

the organizational goals without violating norms. Hence, ethical leadership is believed to affect nurse's behavior positively and minimize deviance in organizations (Tufan et al., 2023, Abbas et al., 2024).

Significance of the study:

Deviant workplace behaviors in nursing profession have been a global problem. They are widely observed among nurses working in critical care units due to working in extremely stressful work environments for a long time and conflict with colleagues and patient's families which leads to burnout, low job performance, dissatisfaction, turnover intent, and absenteeism (Ugwu et al., 2017).

Based on reviewing the related literature, there are limited local studies done about ethical leadership. The field of ethical leadership is missing hard academic research about ethical leadership and its relation to deviant workplace behaviors (Naz et al., 2021). So, the present study was conducted to assess the relation between ethical leadership and deviant workplace behaviors as perceived by nurses at El Shohada central hospital.

Purpose of the study

The purpose of this study is to assess the relation between ethical leadership and deviant workplace behaviors as perceived by nurses at El Shohada central hospital.

Research questions

- 1) What is the level of ethical leadership as perceived by nurses?
- 2) What are deviant workplace behaviors as perceived by nurses?

- 3) What is the relation between ethical leadership and deviant workplace behaviors as perceived by nurses?

Methods

Research design:

A correlational research design was utilized in the conduction of this study.

Study Setting:

This study was conducted in all units and departments at El-Shohada Central Hospital in El-Shohada city, Menoufia Governorate. It is affiliated to Ministry of health and population.

Study Sample:

A group of staff nurses were selected to achieve study purpose.

Sampling technique:

A simple random sample technique of 150 staff nurses constitute study sample, which entails nurses working in the above-mentioned setting during the time of data collection.

Sample size:

Sample size was determined by using formula to assess the sample size of staff nurses

(Yamane 1967).

- $n = N / 1 + N(e)^2$
- N= is the total number of staff nurses.
- n = is the sample size.
- e is coefficient factor =0.05.
- 1= is a constant value.

Sample size of staff nurse at El Shohada Central Hospitals is 240 / $(1+240 \times (0.05)^2 = 150$ nurses.

Instruments:

Two instruments were utilized for data collection.

Instrument one: Ethical leadership scale:

Ethical leadership scale was developed by Yasir (2017) and adopted by the investigator to assess staff nurses' perception level of ethical leadership of their leaders. It contained 17 items under five dimensions used to determine the presence of altruism (3items), integrity (3 items), courage (3items), ethical guidance (4 items) and fairness (4items).

Scoring system:

Nurses' responses were scored using a three-point Likert scale ranging from 1-3 as follows never (1), sometimes (2), always (3). Scores of each dimension was summed up and converted into percentage scores. The perception of ethical leadership was considered high if the percent scores were more than 75%, moderate if the percent scores ranged from 60% - 75%, and low if the percent scores are less than 60% (Yasir 2017).

Instrument two: Deviant workplace behaviors:

Deviant workplace behaviors were developed by Bennett and Robinson (2000) and adopted by the investigator to assess staff nurses' perception level toward deviant workplace behaviors. It contains 19 items under two main dimensions interpersonal deviance (7items) and organizational deviance (12items).

Scoring system:

Nurses' responses were scored using a three-point Likert scale ranging from 1-3 as the following never (1), sometimes (2), always (3). Scores of each dimension was summed up and converted into percentage scores. Nurses not perceived deviant workplace behaviors if the total percent score was less than 60% and they perceived deviant workplace behavior if the total percent score was equal or more than 60% (Bennett and Robinson 2000).

Validity:

Translation and Back-Translation

Instruments were translated from English to Arabic to ensure that they are comprehensible and culturally relevant for the participants. Initial Translation into Arabic was done by a qualified translator in both English and Arabic. Back-Translation was done by a different translator, who was not involved in the initial translation, this step helped to check for consistency and accuracy in the translation. Then, comparison and revision were done to compare the different translations and check for any discrepancy and resolve it by a panel of experts, including translators and researchers to finalize the Arabic version of the instruments.

Reliability of the instruments:

Reliability of the instruments was tested by using Cronbach's Alpha Coefficient test to assess ($\alpha = 0.90$ for ethical leadership scale and deviant workplace behaviors scale value was $\alpha = 0.81$).

Ethical Consideration:

A written approval from the ethical and research committee of the faculty of nursing, Menoufia University N (945, 5/2023) was obtained to conduct the study. The findings were undertaken in a manner designed to protect confidentiality of studied nurses. The respondents' rights were protected by ensuring voluntary participation; so that informed consent was obtained after explaining the purpose, nature, time of conducting the study, benefits of the study and how data was collected. The respondents were assured that the data was treated as strictly confidential; furthermore, the respondent anonymity was maintained as they weren't required to mention their names.

Pilot study:

The investigator conducted a pilot study before using the final questionnaire. A pilot study was carried out on 10% (15) of the studied nurses to evaluate the clarity, applicability of the study instruments and to determine obstacles that may be encountered during data collection. It was helpful to estimate time needed to fill the study instruments. Minor modifications were done. So, the sample of the pilot study were excluded from the main study sample.

Procedure: -

Self-administered structured scales were used by the investigator after translating into Arabic. An official letter was sent from the Dean of the Faculty of Nursing containing title and explaining the purpose and methods of data collection to the director of EL-

Shohada Central Hospital. Moreover, a short briefing was conducted to orient staff nurses to the objectives, possible risks and benefits of the study to gain their cooperation to participate in the study. Data was collected through distributing all questionnaires to staff nurses in all units and departments.

Data was collected in a period of two months, starting from the beginning of June to the end of July 2023, in the morning shift with average three days/week. The average number of filled questionnaires were 6-7 per day. Completed questionnaires were entered into an electronic database that was password-protected. Hard copies of the survey questionnaires were kept in a locked cupboard of the investigator.

Statistical analysis:

Data entry and analysis were performed using SPSS statistical package version 26. Categorical variables were expressed as number and percentage while continuous variables were expressed as (mean \pm SD). Weigh mean was used to rank dimensions of both ethical leadership and deviant workplace behaviors when their total score being not equal. ANOVA test was used to compare mean in normally distributed quantitative variables at more than two groups. Additionally, t independent test used to compare mean in normally distributed quantitative variables at two groups. Pearson correlation and Scatter dot correlation was done to measure correlation between quantitative variables. Linear regression model is the most basic and commonly used predictive analysis. Additionally, it used to analysis of ethical leadership effect on deviant

workplace behaviors among the studied nurses.

For all tests, a two-tailed p-value ≤ 0.05 was considered statistically significant, P-value ≤ 0.01 was considered highly statistically significant. While p-value > 0.05 was considered not significant.

RESULTS:

The current research was conducted to assess the relation between ethical leadership and deviant workplace behaviors as perceived by nurses at El Shohada central hospital.

Table 1 shows that the majority (86%) of studied nurses were females with a male to female ratio is 0.2:1. Considering level of education, more than two-fifths (42.7% & 42.6%) of them had Bachelor degree and had experience in nursing field ranged from $5 < 10$ years with a total mean of 6.07 ± 3.6 respectively. Moreover, more than three-quarters (78% & 80.7%) of them married and working at critical care units respectively.

Table 2 demonstrates the mean score of ethical leadership dimensions as perceived by studied nurses is $\bar{x} \pm SD = 38.53 \pm 8.1$ (Total score is 51). Additionally, ethical guidance gained the higher weight mean (2.37 ± 0.52) and ranked as the first dimension of ethical leadership. While, the dimension of courage gained the lower weight mean (2.1 ± 0.60) and ranked as the last dimension of ethical leadership. In addition to, presence of statistically significant difference among the total mean scores of different dimensions of ethical leadership, at $P = 0.000$.

Figure 1 illustrates frequency distribution of level of ethical leadership as perceived by studied

nurses. As observed from the figure, more than two fifths (44.7%) of studied nurses perceived their leaders as having a high level of ethical leadership. While, the minority (17.3%) of them perceived their leaders as having a low level of ethical leadership. In addition to, presence of a highly statistically significant difference among levels of ethical leadership, at $P = 0.001$.

Table 3 represents the total mean score of deviant workplace behaviors dimensions as perceived by the studied nurses is $\bar{x} \pm SD = 21.71 \pm 5.8$ (Total score is 57). Additionally, interpersonal deviance dimension gained the higher weight mean (1.15 ± 0.2) and ranked as the first dimension of deviant workplace. While, the dimension of organizational deviance gained the lower weight mean (1.13 ± 0.3) and ranked as the last dimension of deviant workplace. In addition to, absence of statistically significant difference between the total mean scores of the two dimensions of deviant workplace, at $P = 0.505$.

Figure 2 displays frequency distribution of level of deviant workplace behaviors as perceived by the studied nurses. As noted from the figure, the majority (94%) of the studied nurses didn't perceive deviant workplace behaviors, while the minority (6%) of them perceived a deviant workplace behavior. In addition to the presence of a highly statistically significant difference, at $P \leq 0.001$.

Table 4 represents correlation between the dimensions of ethical leadership and deviant workplace behaviors as perceived by the studied nurses. As evident from the table, there was a

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highly statistically significant negative strong correlation between dimensions of ethical leadership (Altruism, courage, guidance, integrity & fairness) and deviant workplace behaviors dimensions (Interpersonal deviance & Organizational deviance) as perceived by the studied nurses at r ranged from (-0.531 to - 0.812) & $P = 0.000$.

Table 5 illustrates linear regression analysis was conducted to empirically determine whether ethical leadership was a significant determinant of deviant workplace behaviors as perceived by the studied nurses. Regression results indicate the goodness of fit for the regression

between ethical leadership and deviant workplace behaviors, was excellence. Additionally, F statistic of (132) indicated that the overall regression model was highly significant ($P = 0.000$). Moreover, regression coefficients, revealed that independent variable (Total score of ethical leadership) is a negative predictor factor of deviant workplace behaviors as perceived by the studied nurses. As $\beta = (- 0.499)$ indicates that the increase in ethical leadership by one standardized point score is associated with a decrease in deviant workplace behaviors as perceived by the studied nurses (0.499) standardized point score.

Table (1): Frequency distribution of studied nurses according to their personal characteristics(n=150)

Personal characteristics		N	%
Age	20<30	112	74.7
	30<40	33	22
	40<50	5	3.3
	Mean \pm SD	27.93 \pm 3.9	
Sex	Male	21	14.0
	Female	129	86.0
	Male to female ratio	0.2:1	
Marital status	Married	117	78.0
	Unmarried	33	22.0
Years of Experience in nursing	< 5 years.	55	36.7
	5 < 10 years.	64	42.6
	10 < 15 years.	27	18.0
	\geq 15 years.	4	2.7
	Mean \pm SD	6.07 \pm 3.6	
Level of education	Secondary school of nursing	12	8.0
	Technical institute of nursing	60	40.0
	Bachelor degree of nursing	64	42.7
	Post-graduate	14	9.3
Working area	General departments	29	19.3
	Critical care units	121	80.7

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Table (2): Mean score of ethical leadership dimensions as perceived by the studied nurses (n= 150)

Ethical leadership dimensions:	Min	Max	$\bar{x} \pm SD$	Mean%	$\bar{x} W \pm SD$	Degree	Rank	F Test	P value
Altruism	4	8	6.60 ± 1.0	73.3	2.2 ± 0.33	2	4 th		
Courage	3	9	6.55 ± 1.8	72.7	2.1 ± 0.60	2	5 th		
Ethical guidance	5	12	9.49 ± 2.1	79.1	2.37 ± 0.52	3	1 st		
Integrity	4	9	7.09 ± 1.5	78.8	2.36 ± 0.53	3	2 nd		
Fairness	5	12	8.79 ± 1.7	73.3	2.3 ± 0.43	2	3 rd		
Total score (51)	21	50	38.53 ± 8.1	75.6	2.26 ± 0.47	2	-	5.6	0.000**

*Significant $p < 0.05$

F: ANOVA Test

**Highly significant $p < 0.01$

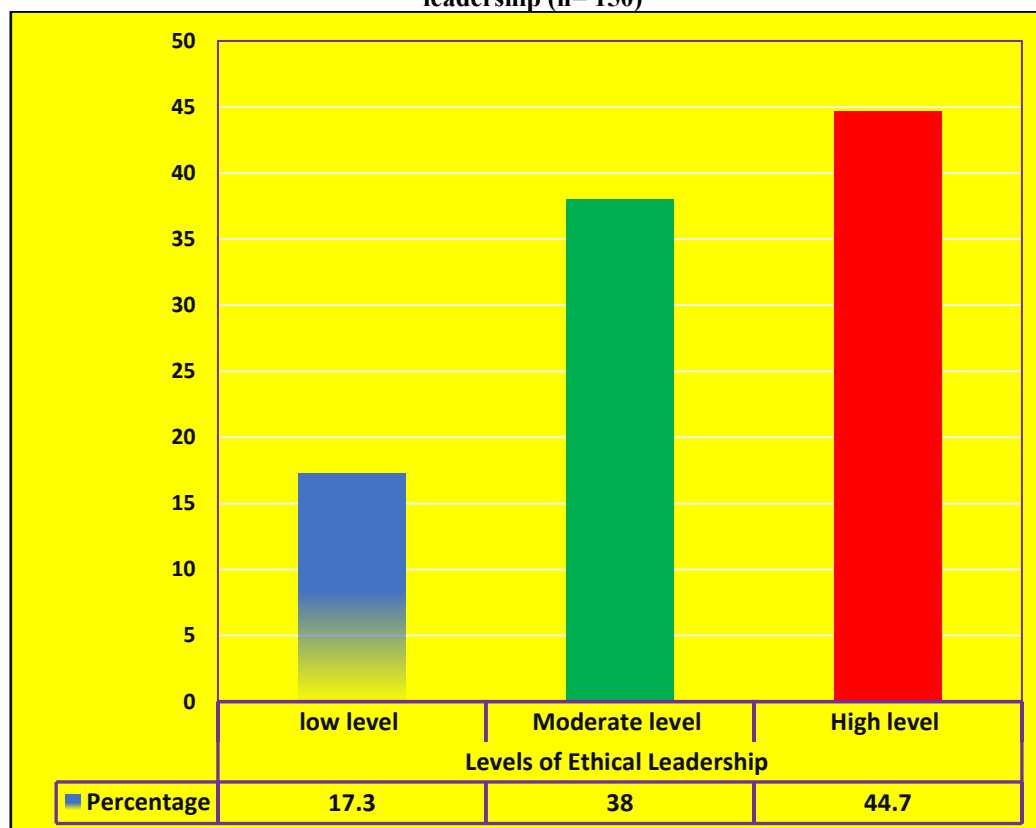
1: Never

2: Some-times

3: Always

$\bar{x} W \pm SD$: Weight mean

Figure (1): Frequency distribution of studied nurses according to their perceptions of ethical leadership (n= 150)



$\chi^2=18.2$, $P= 0.000^{**}$

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Table (3): Mean score of deviant workplace behaviors dimensions as perceived by the studied nurses (n= 150)

Deviant workplace behaviors dimensions:	Min	Max	$\bar{x} \pm SD$	Mean%	$\bar{x} W \pm SD$	Degree	Rank	t Test	P value
Interpersonal deviance	7	17	8.11 ± 1.8	38.6	1.15 ± 0.1	1	1 st		
Organizational deviance	12	31	13.59 ± 4.1	37.8	1.13 ± 0.3	1	2 nd		
Total score (57)	19	48	21.71 ± 5.8	38.1	1.14 ± 0.3	1	-	0.505	0.614

*Significant $p < 0.05$

F: ANOVA Test

**Highly significant $p < 0.01$

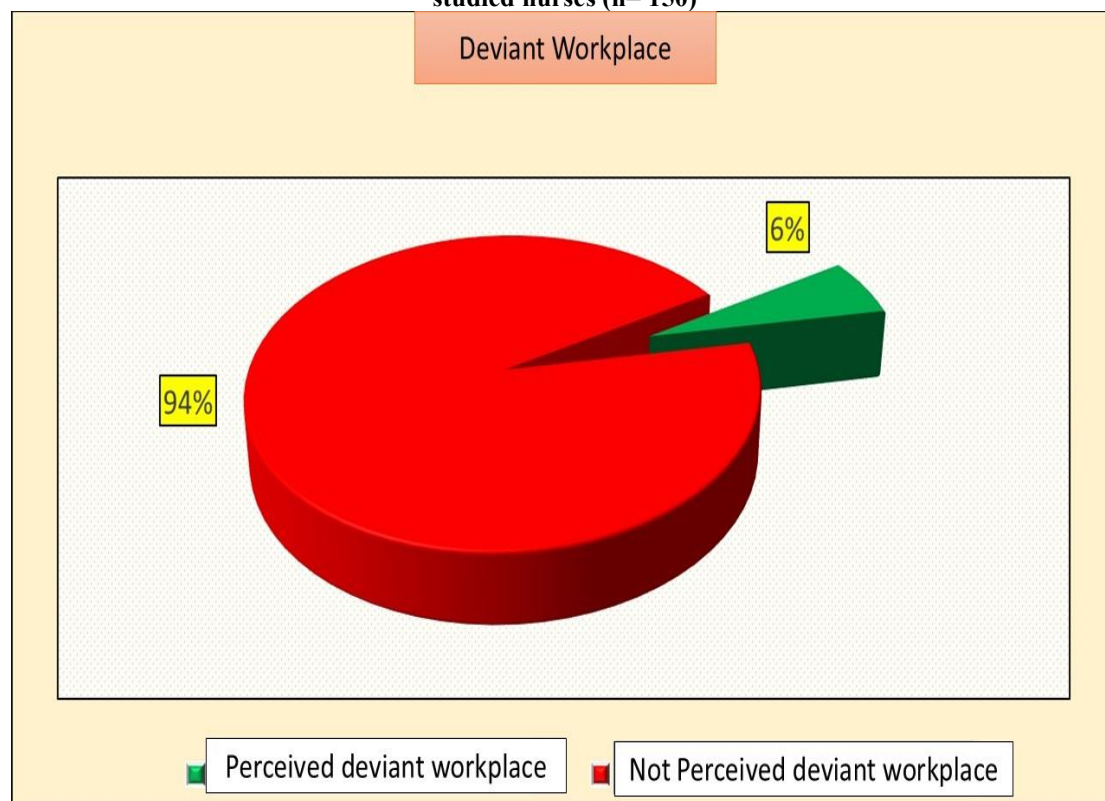
1: Never

2: Some-times

3: Always

$\bar{x} W \pm SD$: Weight mean

Figure (2): Frequency distribution of level of deviant workplace behaviors as perceived by the studied nurses (n= 150)



$\chi^2=116, P= 0.000^{**}$

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Table (4): Correlation between the dimensions of ethical leadership and deviant workplace behaviors as perceived by the studied nurses (n= 150)

Ethical leadership		Deviant workplace behaviors	
		Interpersonal deviance	Organizational deviance
Altruism	r	-0.812	-0.675
	p	0.000**	0.000**
Courage	r	-0.705	-0.531
	p	0.000**	0.000**
Guidance	r	-0.790	-0.636
	p	0.000**	0.000**
Integrity	r	-0.801	-0.641
	p	0.000**	0.000**
Fairness	r	-0.762	-0.600
	p	0.000**	0.000**

*Significant $p < 0.05$

**Highly significant $p < 0.01$

Table (5): Linear regression analysis of ethical leadership effect on deviant workplace behaviors as perceived by the studied nurses (n= 150)

Model	Unstandardized coefficients		Standardized coefficients	T Test	P Value	R	r Square	F	P Value
	β	Std. Error	Beta						
Ethical leadership	-0.499	0.043	0.687	11.5	0.000	0.687	0.473	132	0.000**
a. Dependent variable: Total score of deviant workplace behaviors									
b. predictors (constant): Total score ethical leadership									

Discussion

The present study was conducted to assess the relation between ethical leadership and deviant workplace behaviors as perceived by studied nurses.

Regarding level of ethical leadership as perceived by studied nurses, the current study revealed that, more than two fifths of studied nurses perceived that their leaders had a high level of ethical leadership followed by more than one-third of them perceived a moderate level. While, the minority of them perceived a low level. In addition to, presence of a highly statistically significant difference among levels of ethical leadership.

From the investigator's point of view, these results may be due to the fact that all leaders in the hospital are Muslims and apply the rituals and principles of Islam and the ethics and standards of the nursing profession, including justice, altruism, courage, integrity and respect, in addition to the fact that the hospital is located in a rural community that adheres to the customs and traditions of that community. Moreover, managers' attitude of caring and respecting nurses, treating them fairly and acting in a clear manner.

These results were similar to Essawy et al., (2024) who conducted a study at Zagazig University Hospitals "Effect of

Ethical Leadership on Nurses' Voice Behavior" and found that less than half of nurses perceived that their leaders have an ethical leadership in high level. In the same context, El Naggar et al., (2023) who studied "Head Nurses' Ethical Leadership and its Relation to Staff Nurses' Job Stress" and declared head nurses' overall level of ethical leadership nearly half of the head nurses had high perception level of overall ethical leadership.

Additionally, study conducted by Awad et al., (2022) entitled "Crisis, ethical leadership and moral courage: Ethical climate during COVID-19," and noticed that nurses perceived a high mean percent of overall ethical leadership. Also, Elsayed et al., (2020) who study the relationship between nurses' perception of ethical leadership and anti-social behavior through ethical climate as a mediating factor and revealed that less than half of participants perceived high levels of ethical leadership behavior.

On the other hand, this result was incompatible with the study findings of Abd-Elmoghith et al., (2024) who conducted a study about "The impacts of ethical leadership on the antisocial behavior of nurses: the mediating role of ethical climate" and clarified that more than half of the studied nurses had a low perception level of ethical leadership. Moreover, this result was disagreed with Yasir et al., (2020) who conducted a study in Pakistan to investigate the association between ethical leadership and workplace deviance, with employees' trust as a mediator in the relationship between ethical leadership and workplace deviance in the public sector hospitals

of Khyber Pakhtunkhwa (KPK), and found more than half of nurses had moderate ethical level.

The results of the current study showed that majority of the studied nurses didn't perceive deviant workplace behaviors, and the minority of them perceived a deviant workplace behavior. In addition to the presence of a highly statistically significant difference. From the investigator's point of view, this result may be attributed to fair practices experienced by head nurses and nurses feel a sense of responsibility towards the patients by providing the best possible care. When nurses perceive equal and fair treatment within the organization, they engage in building trust with their leaders and are less likely to engage in deviant behavior.

This study aligned with Khattab et al., (2024) who investigating the relationship between nurses' workplace behavior and perceived levels of ethical leadership in managers and reported that nurses who feel that they are treated fairly by their managers tend to have positive attitudes towards work, colleagues and management. Also, a study done by Elgammal et al., (2023) who conducted a study about "Relation between organizational support and deviances at workplace from nurses' perspective" concluded that level of interpersonal deviance behavior stated that the majority of nurses had minor level. The minority of nurses had serious level of perspective regarding interpersonal deviance.

These findings were in dissimilarity with Nasib et al., (2019), their study of the "Elementary and Secondary Education Department of the K-P

Province of Pakistan" found that the highest mean score was related to the organizational deviance domain. In contrast, the lowest mean score was related to the interpersonal deviance domain.

For correlation between variables under the study, the findings of the present study represented that there was a highly statistically significant negative strong correlation between dimensions of ethical leadership (altruism, courage, guidance, integrity and fairness) and deviant workplace behaviors dimensions (interpersonal deviance and organizational deviance) among the nurses. Also, it illustrated that there was a highly statistically significant negative strong correlation between ethical leadership and deviant workplace as perceived by the studied nurses. From the investigator's point of view, this can be explained when leaders treat their followers fairly and explain to them the importance of ethics, and thus followers feel a sense of responsibility and are less likely to engage in deviant workplace behaviors. A study carried out by Tufan et al., (2023) entitled "The mediating effect of organizational justice perception on the relationship between ethical leadership and workplace deviant behaviors". The study showed that Ethical leadership is negatively and insignificantly related to workplace deviant behavior.

In the same line, Nasim et al., (2021) who studied "Is Ethicality Itself a Boundary Condition for Ethicality: The Complementary Role of Employees' Exchange Ideology and Moral Awareness in Restricting the Effect of Ethical Leadership in Reducing

Workplace Deviance" reported that ethical leadership was negatively associated with employees' deviance directed at the organization.

However, this result was against Bagis et al, (2024) who studied "Efforts to Reduce Employee Deviant Behavior in Islamic Educational Institutions" and stated that there is a weak but positive relationship between workplace deviant behavior and ethical leadership. The findings of the present study illustrated that there was a highly statistically significant relation between personal characteristics (age, years of experience in nursing, and level of education) and level of ethical leadership and deviant workplace behaviors.

In the same line, Essawy et al., (2024) who study "Effect of Ethical Leadership on Nurses' Voice Behavior at Zagazig University Hospitals" mentioned that total ethical leadership has statistically significant relationships with nurses' age, sex, education and years of experience.

Conclusion:

In the light of the current study results, it can be concluded that more than two fifths of studied nurses perceived that their leaders had a high level of ethical leadership. While, the minority of them perceived their leaders as having a low level of ethical leadership. Moreover, the majority of studied nurses didn't perceive deviant workplace behaviors at El Shohada central hospital. Furthermore, there was a highly statistically significant negative strong correlation between ethical leadership and deviant workplace behaviors as perceived by the studied nurses. In

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addition, regression coefficient revealed that ethical leadership is a negative predictor factor of deviant workplace behaviors as perceived by the studied nurses.

Recommendations:

- Encourage staff nurses to participate in decision making and problem solving in the unit to increase nurses' autonomy and consequently preventing deviant workplace behaviors.
- Conduct training program for nursing managers about ethical leadership and its effect on reducing staff nurses' deviant work behaviors.
- Nursing curricula need to be evaluated and updated annually to include new trends in leadership styles as thought leadership, technological leadership and inclusive leadership.
- Replicate this study in different health care sectors upon all healthcare professionals to generalize the results.
- Conduct further study to test the relation between ethical leadership and problem-solving abilities among nurses.

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