

# Work ethics climate in relation to nurses' commitment in a South African hospital



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**Orientation:** Commitment, well-being and employer loyalty affect nurse retention. Literature shows that nurses are leaving the workforce at an alarming rate and that various factors are causing them to leave their employers.

**Research purpose:** The main aim of this study was to investigate the influence of the ethical work climate in the organisation on nurses' commitment.

**Motivation for the study:** The health sector is essential in promoting mental, physical and emotional health but faces a shortage of skilled workers. The work ethics climate (WEC) can play a crucial role in retaining skills.

**Research approach/design and method:** A quantitative research approach was adopted in a non-probability convenience sample of 208 permanent nurses from a South African public hospital. Participants completed self-assessments on an ethical climate questionnaire and an organisational commitment scale (OCS), and regression analysis was used to analyse the data.

**Main findings:** Work ethics climate correlated with nurses' affective, continuance and normative commitment. In addition, the results indicated that WEC predicted nurses' commitment.

**Practical/managerial implications:** Public hospitals in South Africa should create policies, laws and procedures that encourage ethical behaviour characterised by honesty, justice and dignity to boost nurse commitment. Thus, the South African hospital should foster an ethical workplace and implement an ethical code.

**Contribution/value add:** This study contributes to the theory of ethical work climate and ethical behaviour by suggesting that nurses who positively perceive policies, rules and hospitals that have clear regulations are more likely to engage.

**Keywords:** work ethics climate; employee commitment; South Africa; public hospital; social exchange theory.

## Introduction

Healthcare is considered the cornerstone of societal well-being, with nurses playing a crucial role in ensuring quality patient care (Emanuel et al., 2021). In a southern country like South Africa, the health sector faces several challenges, such as resource scarcity, disease burden, inadequate staffing and unequal access to healthcare (Maphumulo & Bhengu, 2019). Nurses are at the forefront of addressing these challenges and often work under difficult conditions (NASEM, 2021). Nurses play a critical role in ensuring the effectiveness of patient care and achieving organisational goals. During the global pandemic crisis, the health sector was highly involved in ethical wrongdoing (Saxena et al., 2021). Accordingly, a conducive climate of work ethics can shape the morale, attitude and behaviour of any employee (AI Halbusi et al., 2022). Workplace ethics refers to the application of principles that govern and address moral issues in the work environment (Mitonga-Monga & Cilliers, 2015). In addition, WEC refers to an employee's perception of appropriate ethical behaviour and how ethical issues should be addressed (Victor & Cullen, 1988). An organisation that fails to value and promote positive ethical behaviour in the workplace can have negative consequences for the profitability and viability of its business (Geue, 2018). Unethical behaviour that goes unpunished can lead to other organisational members viewing unethical misconduct as tolerated (Farooqi et al., 2017; Gonin, 2015; Kau, 2020). A sustainable WEC is positively related to employee attitudes and behaviour, while a number of negative behaviours such as increased absenteeism and turnover rates, lower job satisfaction and organisational commitment (OC) are associated with an unethical work climate (Olayiwola, 2016). Meanwhile, employee commitment refers to individual identification and commitment to

organisational goals (Meyer & Allen, 1997; Mitonga-Monga, 2019). At the same time, the perception of an ethical and favourable work environment should theoretically increase employee commitment (Mitonga-Monga, 2020). In other words, as ethical considerations are an integral part of healthcare, nurses are said to manage complex ethical dilemmas while providing patient-centred care (Haddad & Geiger, 2023). A positive WEC can foster an environment where ethical decision-making is prioritised so that nurses can deliver care that is consistent with their professional values (Mabona et al., 2022). What remains to be explored is the nuanced exploration of the WEC and its relationship with nurse commitment in the particular context of a South African hospital. The purpose of this study is therefore to explore the relationship between WEC and nurse commitment in a South African public hospital. The research question formulated for this study is as follows: what is the relationship between work ethics climate and nurses' OC? By shedding light on these dynamics, the study contributes to the improvement of healthcare management practices, staff retention strategies and the overall improvement of patient care in the South African context.

## South African public hospital work context

Since the dawn of the coronavirus disease 2019 (COVID-19) pandemic crisis, moral deficiencies, shortages and maldistribution of nurses within the South African public health system have been issues of major concern (Jiyane, 2020). Of the 670 cases of corruption in South Africa's health sector, about 52% are in provincial governments, while about 40% of allegations of corruption are prevalent at the national government level (Corruption Watch Report, 2020). At the provincial level, Gauteng Province takes the lead with 39% of corruption cases, and this may be because of Corruption Watch's strong presence in the province, as well as the fact that the province is the most densely populated region in the country. The second highest corruption level is found in KwaZulu-Natal Province at 16%, followed by the Eastern Cape and Mpumalanga jointly at 8% each (Hlafa et al., 2019; Witter et al., 2021). Statistics from the South African Nursing Council (SANC 2016) indicate an increase of 34% of nurses who completed their studies or training in 2015. On the other hand, the 2018 statistics showed a decrease of 15% in the number of nurses who completed their studies (SANC, 2019). Despite the limited increase of nurses who completed their training, developed countries steadily continue with their recruitment of South African nurses because of the global levels of nurse shortages. Kingma (2018) mentions that the South African nursing profession is facing critical moments because experienced nurses leave South Africa in search of lucrative work opportunities in developed countries.

The professional situation has been exacerbated by the fact that many professional nurses have conspicuous unethical behaviours dominating the South African public healthcare system in particular (Fathuse et al., 2023). Consequently, nurses have gradually experienced job dissatisfaction, which

often leads to the abandonment of their profession. The scarcity of experienced nurses in South Africa is perceived as an urgent issue that hinders the South African Department of Health from achieving its objectives and retention of nurses (Gumede et al., 2021; Kau, 2020). In this regard, efforts by the Department of Health to retain its nurses are failing because of other adverse factors, such as unethical practices, corruption, the high level of dissatisfaction among the nurses, as well as situations that negatively affect nurses' intentions to stay in the profession (Haider & Yean, 2023). Consequently, these factors have the potential to affect an individual's commitment negatively and influence their turnover intention. Therefore, this study explores nurses' perceptions of their workplace ethics climate and its influence on their level of dedication in a South African public hospital setting.

## Theoretical perspectives and hypotheses

We resort to Blau's (1964) social exchange theory (SET) as the preeminent theoretical framework for analysing organisational climate and work-related attitudes in an effort to present theoretical reasons for the unique link between the work ethical atmosphere and employee commitment (Meyer & Allen, 1997; Mitonga-Monga, 2019). The SET proposes that connections between employers and employees are developed through subjective cost-benefit analysis, where both sides work to maximise benefits and minimise costs (Kau, 2020; Nedkovski et al., 2017). Employee commitment to the employer organisation will decline in the event of the parties' belief that the social transaction of which they are a part is out of harmony with their expectations (Mitonga-Monga, 2020). Furthermore, Saks (2006) proposes the reciprocity of interaction and interdependence between the employer and employees in the context of SET inside an organisation through duties that are produced in a succession of connections between the parties. As such, the employees will become psychologically and emotionally dedicated to carrying out their tasks in the event of the employer creating a favourable working environment characterised by favourable and transparent policies, procedures and practices. Such an environment will lower the likelihood that the employee will leave the employer's organisation. In contrast, in the event the employer organisation failing to develop a favourable and ethical work environment, employees will become less committed and probably increase their intention to leave.

### Work ethics climate

Ethics refers to choices and regarding acceptable behavioural standards of conduct by individuals or groups in organisations (AI Halbusi et al., 2021). Therefore, the organisational climate itself is perceived as employee-shared perceptions of the psychological aspect of the work environment as experienced by members the organisation (Saks, 2022). The WEC is a type of organisational environment characterised by the application of principles to govern and address moral matters arising in the work organisational

environment (Mitonga-Monga & Cilliers, 2015). The WEC applies to formal and informal shared atmospheric conditions driving employees' attitudes and behaviours towards policies, procedures, regulations and practices with moral consequences (Martin & Cullen, 2006). It is in this regard that the WEC represents organisational values and practices that are reflective of acceptable and unacceptable moral behaviours and attitudes (Cullen et al., 2003; Mitonga-Monga & Hoole, 2018). The following key aspects are attributable to the WEC phenomenon: caring, legal codes and rules, independence and instrumentality.

*Caring* reflects employees' perceptions that decisions are and should be based on an overarching concern for the well-being of others. Caring further depicts a work environment in which the decision-maker seeks to maximise joint interest even if it entails sacrificing his or her comfort and happiness (Cullen et al., 2003). An organisation that promotes caring WEC behaviour also encourages a positive and favourable work environment, that is likely to affect an organisation's members positively (Taylor & Curtis, 2018).

*Laws, codes and rules* depict employees' perceptions that the organisation supports principled decision-making based on external codes, such as laws or professional codes of conduct. In organisations that promote laws, codes and rules, the WEC is likely to include a fair and transparent code of conduct (Mitonga-Monga, 2018), which encourages employees to adhere to the rules and laws of both the organisation and professional body (Victor & Cullen, 1988).

*Independence* refers to the autonomy an employee's belief to achieve organisational tasks. It focuses further on employees following their own moral beliefs when making decisions (Cullen et al., 2003). A work environment that promotes independence also encourages organisational members to apply their discretion when using their moral beliefs in their decision-making (Peng & Wei, 2020).

*Instrumentality* reflects the application of tools that enable employees' work-related ethical decision-making. It also depicts the extent to which organisations prioritise their own self-interest, to the exclusion of the interests of others (Mitonga-Monga & Cilliers, 2015). Accordingly, an organisation that promotes instrumental WEC is likely to encourage its members to prioritise their self-interest (Victor & Cullen, 1988). Previous studies emphasised the effect of perceptions relating to the WEC on employees' psychological attachment and loyalty as being of significant interest (Mitonga-Monga, 2018). Scholars in the fields of organisational psychology and business fields commonly hypothesised that a high level of employee commitment will be present when employees consider the prevalence of a positive WEC (Mitonga-Monga, 2018).

## Organisational commitment

Employee OC is a concept of interest for both scholars and practitioners alike and is fundamental to the achievement of

organisational objectives (Imamoglu et al., 2019; Pusparani et al., 2021). Organisational commitment itself refers to an emotional attachment that enables and binds employees to organisational values (Geisler & Geisler, 2019), influences organisational performance (Mabaso & Dlamini, 2018) and decreases absenteeism and turnover (Ajayi, 2017). Furthermore, committed employees are likely to have greater work satisfaction and productivity (Aguar-Quintana et al., 2020). Organisational commitment occurs when employees identify with and are involved with the organisational goals and values (Cherif, 2020) and apply additional measures to promote the organisation's interest and image (Mitonga-Monga, 2018). Such commitment is defined by affective continuance and normative commitment (Meyer & Allen, 1997). Affective commitment reflects an individual employee's psychological and emotional attachment to the organisation. Continuance commitment, on the other hand, reflects an employee's intention to remain within an organisation. Thus, committed employees are likely to remain with the employer organisation if they perceive the employer to be trustworthy (Presbitero et al., 2019).

Meanwhile, normative commitment refers to the extent to which an employee's sense of indebtedness is attached to the organisation because of social norms. Affective and normative commitment is perceived as an employee's attitudinal disposition, while continuance commitment depicts his or her behavioural orientation (Meyer & Allen, 1997; Mitonga-Monga, 2018). Individual employees who are emotionally attached to their employer's organisation are likely to refrain from leaving their employment (Kaplan & Kaplan, 2018). A high level of commitment characterises the unconditional attachment of the employee to the organisation and the inclination to sacrifice for and contribute to such an organisation (Suryani, 2018). Therefore, a committed employee is an individual who is cooperative and competitive and has a high level of dedication, loyalty and responsibility (Kot-Radojewska & Timenko, 2018).

## The relationship between the work ethics climate and organisational commitment

The link between WEC and OC can be understood relatively better in the context of SET or the principle of reciprocity as developed by Gouldner (1960). The theory encompasses repayment. For example, an individual who receives a benefit from another reciprocates benefit by giving something beneficial in return. In light of this theory, an employee who perceives positive policies, regulations and procedures from their organisation can feel obliged to demonstrate a high level of loyalty and dedication to the employing organisation. Increasing loyalty to the organisation is a way of reciprocating the organisation (Abdulkareem & Ogunbado, 2019). Employees' positive behaviour and attitudes towards the employer are contingent on their perceptions of how the employer cares about their well-being and values their contribution as an explanation of the employer-employee relationship that can be characterised by social exchanges (Arasanmi & Krishna, 2019). These exchanges are said to be the stimulus for commitment to

a positive ethical climate (Mitonga-Monga, 2018). For example, a study conducted by Mitonga-Monga (2018) revealed that the WEC influences employees' OC.

Employees who perceive their organisation to have positive policies, regulations and practices are likely to report a strong desire to extend their membership with the employer organisation (Yan et al., 2019). Moreover, Rubel et al. (2017) indicated that the increase work ethics perceptions correspondingly render employees likely to devote and develop an unconditional sense of commitment to their respective organisations. Therefore, committed employees are likely to refrain from leaving their organisation at the same time as organisational productivity increases (Yu et al., 2019). Loyalty to the organisation is beneficial to an organisation's longevity and leads to decreased turnover (Mitonga-Monga, 2018). Furthermore, a study conducted by Khokhar et al. (2020) revealed that OC increased when both the 'caring' and 'law and code' aspects or factors were recognised but was minimised when 'self-interest' was recognised. Thus, the following hypotheses are proposed:

**Hypothesis 1:** The WEC positively and significantly correlates with OC.

**Hypothesis 2:** The WEC positively and significantly influences OC.

**Hypothesis 3:** The WEC positively and significantly influences the three subdimensions of OC, namely, affective commitment, continuance commitment and normative commitment.

The next section focuses on the research method, which includes a discussion about the participants and setting, measures, procedures and data analysis. The article then discusses the findings and concludes with the implications, limitations and recommendations for future research.

## Research design

### Participants and setting

The study employed a random probability sampling technique with a sample of 208 of the 400 permanently employed nurses at a South African public hospital. As shown in Table 1, the sample demographics comprised 65.9% females and 34.1% males, with their ages ranging from 18 years to 30 years (mean age = years, SD = years). The majority of nurses (78.8%) were black people, 51.9% had 0–10 years of work experience at the hospital and 47.1% had a post-matric qualification.

### Measuring instruments

The participants completed a biographical and demographical survey, as well as the following standardised measures: an ethical climate questionnaire (ECQ) adapted from Victor and Cullen (1988) and an organisational commitment questionnaire (OCQ) adapted from Meyer and Allen (1997).

### Work ethics climate

The ECQ consisted of 26 items or variables to measure employees' perceptions of the extent to which their direct line

**TABLE 1:** Biographical profile of the sample ( $n = 208$ ).

Variable	Categories	Frequency	%
Gender	Male	71	34.1
	Female	137	65.9
<b>Total</b>		<b>208</b>	<b>100.0</b>
Age	18–30 years	61	29.3
	31–40 years	60	28.8
	41–50 years	59	28.4
	51–60 years	15	7.2
	61 and older	13	6.3
<b>Total</b>		<b>208</b>	<b>100.0</b>
Education	Primary school	28	13.5
	Secondary school	98	47.1
	Standard G10/G12 or equivalent	57	27.4
	Post-school certificate	16	7.7
	Bachelor's degree	8	3.8
Honours	1	.5	
<b>Total</b>		<b>208</b>	<b>100.0</b>
Race	Black	164	78.8
	White	14	6.7
	Mixed race	20	9.6
	Indian	10	4.8
<b>Total</b>		<b>208</b>	<b>100.0</b>
Tenure	0–10 years	108	51.9
	11–20 years	51	24.5
	21–30 years	27	13.0
	31 and more	22	10.6
<b>Total</b>		<b>208</b>	<b>100.0</b>

managers act ethically within the organisation. These items are scored on a five-point Likert scale ranging from 1 = strongly disagree to 5 = strongly agree. Examples are given in terms of validity and reliability (Victor & Cullen, 1988). Examples of items include the following: 'People are expected to comply with the law and professional standards', 'Our major consideration is what is best for everyone in the company', 'It is very important to follow company rules and procedures' and 'In this company, people protect their own interests above all else and there is no room for one's own personal morals or either of these in this company'. The ECQ has shown evidence of good psychometric properties. In the present study, we observed Cronbach alpha coefficients ranging from 0.51 to 0.80 for scores from the ECQ employee commitment.

The OCQ consisted of 24 items, which are basically premised on measures of employees' perceptions of OC (Meyer & Allen, 1997). These items are rated on a five-point Likert scale ranging from 1 = strongly disagree to 5 = strongly agree. Examples of items in this regard include 'I would be very happy to spend the rest of my career in this organisation' and 'If I get another offer for a better job elsewhere, I would not feel that it is right to leave my organisation; things were better in the days when people stayed with one organisation.'

The OCQ has evidenced internal consistency reliability coefficients ranging from 0.75 to 0.79 (Meyer & Allen, 1997). In this study, Cronbach alpha coefficients for scores from the OCQ ranged from 0.63 to 0.79.

## Procedure

The University of South Africa's Research Ethics Committee (UREC) approved the study. The South African National Department of Health granted permission for the study to be conducted at the selected hospital. Participants consented to the study after receiving a package consisting of the following: an approval letter from management, an invitation letter indicating the purpose and objectives of the research, a letter explaining the individual's consent and voluntary participation in the research project and confirmation of the safekeeping and confidentiality of the responses. The nurses completed the survey during work hours.

## Data analysis

The data were analysed by means of the Statistical Package for Social Sciences (SPSS), version 27. Pearson's product-moment correlations and standardised regression analysis were conducted to determine the relationship between the WEC phenomenon and employees' OC and to establish whether the WEC (an independent variable) influenced or affected employee commitment (a dependent variable). To establish the significance and counter the probability of type 1 errors, the confidence interval was set at 95% ( $p \leq 0.05$ ) and the practical effect sizes at  $r \geq 0.30 \geq 0.50$  (medium to large effect) (Hair et al., 2019).

## Ethical considerations

Unisa College of Economic and Management Sciences Research Ethics Review Committee. The low-risk application

**TABLE 2:** Descriptive statistics mean, standard deviations and Cronbach's alpha coefficients ( $n = 208$ ).

Variables	Mean	Standard deviation	Cronbach's alpha coefficients
ECQ	4.10	0.483	0.80
Caring	3.17	0.509	0.77
Law and code	3.66	0.906	0.70
Rule	3.08	0.933	0.70
Independence	3.33	0.903	0.58
Instrumental	2.80	0.823	0.51
OCS	2.87	0.667	0.79
AC	2.92	0.552	0.82
CC	2.62	0.855	0.75
NC	3.23	0.910	0.63

ECQ, ethical climate questionnaire; OCS, organisational commitment scale; AC, affective commitment; CC, continuance commitment; NC, normative commitment.

**TABLE 3:** Correlations between ethical climate questionnaire and organisational commitment scale ( $n = 208$ ).

Variables	1	2	3	4	5	6	7	8	9	10
ECQ	1	0.65***	0.65***	0.65***	0.52***	0.56*	0.41**	0.12	0.41**	0.33**
Caring	-	1	0.23*	0.46**	-0.01	0.07	0.09	-0.18*	0.40**	0.02
Law & Code	-	-	1	0.35**	0.29*	0.24*	0.27*	0.14*	0.15*	0.26*
Rule	-	-	-	1	0.18*	0.17*	0.29*	0.13	0.36**	0.11
Independent	-	-	-	-	1	0.38**	0.41**	0.33**	0.09	0.41**
Instrumental	-	-	-	-	-	1	0.35**	0.25*	0.16*	0.31
OCS	-	-	-	-	-	-	1	0.74***	0.51***	0.76***
AC	-	-	-	-	-	-	-	1	-0.06	0.44**
CC	-	-	-	-	-	-	-	-	1	0.15*
NC	-	-	-	-	-	-	-	-	-	1

Note: \*\*\*, level of significance; Correlation values  $r \leq 0.29$  are practically significant (small effect). Correlation values  $r = 0.49$  are practically significant (medium effect). Correlation values  $r \geq 0.50$  are practically significant (large effect).

ECQ, ethical climate questionnaire; OCS, organisational commitment scale; AC, affective commitment; CC, continuance commitment; NC, normative commitment.

was reviewed by the College Research Ethics Review Committee (CRERC) in compliance with the Unisa Policy on Research Ethics and Standard Operating Procedure on Research Ethics Risk Assessment. 2017\_HRM\_011.

## Results

This section reports on the means, standard deviations, reliability of the two measures and the correlations that were used in this study. Table 2 provides the means, standard deviations and Cronbach alpha coefficients for the WEC and employee commitment variables. The mean and standard deviations for the ECQ were 4.10 (M) and 0.48 (SD), respectively. This indicated that participants perceived their line managers to act in an ethical manner in the hospital. Accordingly, the OCS means and standard deviations were 2.87 (M) and 0.67 (SD), respectively. This indicates that participants were unsure about their commitment to their organisation. Apart from two components of WEC (i.e. independence and instrumentality) that were below  $r \leq 0.60$ , both ECQ and OCS were found to be reliable ( $r \geq 0.60$ ).

## Correlations analysis

Table 3 indicates that ECQ significantly and positively correlates with OCS ( $r = 0.41$ ; medium effect;  $p \leq 0.001$ ). The results also revealed that, overall, ECQ correlated significantly with continuance commitment ( $r = 0.41$ ; medium effect;  $p \leq 0.001$ ) and normative commitment ( $r = 0.33$ ; medium effect;  $p \leq 0.001$ ) as shown in the top row of Table 3. Therefore, Hypothesis 1 is accepted.

## Multiple regression analysis

Table 4 presents the results of the multiple regression analyses that were conducted to determine whether the WEC positively and significantly influences OC. Prior to performing the multiple regressions, the multicollinearity was first evaluated. Multicollinearity helps to detect whether there is a relationship between two or more independent variables and happens when the independent variables are highly correlated ( $r > 0.90$ ) (Hair et al., 2019). In testing the assumptions of multicollinearity, this study made use of the tolerance and variance inflation

factor (VIF). Tolerance values less than 0.10 and a VIF above 10 suggest that there is a possible multicollinearity concern (Hair et al., 2019).

As can be observed in Table 4, no concerns of multicollinearity were detected. The three computed regression models were found to be statistically significant ( $F_p < 0.05$ ), as indicated in the respective sections. Model 1 contributed 26% ( $R^2 = 0.26$ : organisational commitment) of the variance in explaining the OC variable. As indicated in Table 4, Model 1 (OCS), independence ( $\beta = 0.29$ ;  $p = 0.001$ ), instrumental ( $\beta = 0.21$ ;  $p = 0.01$ ) and rules ( $\beta = 0.18$ ;  $p = 0.01$ ) acted as significant positive predictors of overall OC, with independence, instrumental and rules contributing the most in explaining the variances in overall OC. Therefore, Hypothesis 2 is accepted.

As shown in Table 5, Model 2 (affective commitment) indicated that caring ( $\beta = -0.29$ ;  $p = 0.001$ ) acted as a negative

**TABLE 4:** Multiple regression analysis: The ethical climate questionnaire as a predictor of the organisational commitment scale ( $n = 208$ ).

Variable	Model 1: ECQ							
	$\beta$	<i>B</i>	<i>p</i>	Tolerance	VIF	<i>df</i>	Mean square	Value
Constant	33.63	-	0.00	-	-	-	-	-
Caring	-0.07	-0.03	0.72	0.767	1.303	-	-	-
Law and code	0.30	0.09	0.22	0.793	1.261	-	-	-
Rules	0.66	0.18**	0.02	0.697	1.435	-	-	-
Independence	0.69	0.29***	0.00	0.805	1.242	-	-	-
Instrumental	0.71	0.21**	0.00	0.840	1.191	-	-	-
<i>F</i>	-	-	-	-	-	5	133.53	14.79***
<i>R</i>	-	-	-	-	-	-	-	0.52
$R^2$	-	-	-	-	-	-	-	0.28
Adjusted $R^2$	-	-	-	-	-	-	-	0.26
Standard error of the estimate	-	-	-	-	-	-	-	5.11

Note:  $R^2 \leq 0.12$  (small practical effect size);  $R^2 \geq 0.13 \leq 0.25$  (medium practical effect size);  $R^2 \geq 0.26$  (large practical effect size).  
*F*, Factor;  $\beta$ , standardised regression coefficient; *B*, unstandardised regression coefficient; VIF, variance inflation factor; *df*, degrees of freedom; ECQ, ethical climate questionnaire.  
 \*,  $p \leq 0.05$ ; \*\*,  $p \leq 0.01$ ; \*\*\*,  $p \leq 0.001$ .

**TABLE 5:** Multiple regression analysis: The ethical climate questionnaire as a predictor of the affective commitment scale ( $n = 208$ ).

Variable	Model 2: Affective commitment							
	$\beta$	<i>B</i>	<i>p</i>	Tolerance	VIF	<i>df</i>	Mean square	Value
Constant	15.20	-	0.00	-	-	-	-	-
Caring	-0.49	-0.29***	0.00	0.767	1.303	-	-	-
Law and code	0.12	0.06	0.42	0.793	1.261	-	-	-
Rules	0.35	0.16**	0.03	0.697	1.435	-	-	-
Independence	0.54	0.23**	0.01	0.805	1.242	-	-	-
Instrumental	0.30	0.15**	0.03	0.840	1.191	-	-	-
<i>F</i>	-	-	-	-	-	5	49.52	9.77***
<i>R</i>	-	-	-	-	-	-	-	0.45
$R^2$	-	-	-	-	-	-	-	0.20
Adjusted $R^2$	-	-	-	-	-	-	-	0.18
Standard error of the estimate	-	-	-	-	-	-	-	3.11

Note:  $R^2 \leq 0.12$  (small practical effect size);  $R^2 \geq 0.13 \leq 0.25$  (medium practical effect size);  $R^2 \geq 0.26$  (large practical effect size).  
*F*, Factor;  $\beta$ , standardised regression coefficient; *B*, unstandardised regression coefficient; VIF, variance inflation factor; *df*, degrees of freedom.  
 \*,  $p \leq 0.05$ ; \*\*,  $p \leq 0.01$ ; \*\*\*,  $p \leq 0.001$ .

predictor of affective commitment, while independence ( $\beta = 0.23$ ;  $p = 0.01$ ), rules ( $\beta = 0.16$ ;  $p = 0.01$ ) and instrumental ( $\beta = 0.15$ ;  $p = 0.01$ ) acted as significant and positive predictors of affective commitment, with caring, independence, rules and instrumental contributing the most in explaining the variance in affective commitment.

While Table 5 illustrates the specific empirical particularities of Model 2 (affective commitment), Table 6 is largely a depiction of the Model 3 (continuance commitment) empirical results.

Model 3 (continuance commitment) in Table 6 indicated that caring ( $\beta = 0.30$ ;  $p = 0.001$ ) and rules ( $\beta = 0.20$ ;  $p = 0.01$ ) acted as significant and positive predictors of continuance commitment, with caring and rules contributing the most in explaining the variance in affective commitment.

Model 4 (normative commitment) in Table 7 indicated that independence ( $\beta = 0.32$ ;  $p = 0.001$ ) and instrumental ( $\beta = 0.17$ ;

**TABLE 6:** Multiple regression analysis: The ethical climate questionnaire as a predictor of the continuance commitment scale ( $n = 208$ ).

Variable	Model 3: Continuance commitment							
	$\beta$	<i>B</i>	<i>p</i>	Tolerance	VIF	<i>df</i>	Mean square	Value
Constant	6.71	-	0.00	-	-	-	-	-
Caring	0.42	0.30***	0.00	0.767	1.303	-	-	-
Law and code	-0.01	-0.04	0.96	0.793	1.261	-	-	-
Rules	0.34	0.20**	0.01	0.697	1.435	-	-	-
Independence	0.08	0.04	0.57	0.805	1.242	-	-	-
Instrumental	0.17	0.11	0.13	0.840	1.191	-	-	-
<i>F</i>	-	-	-	-	-	5	32.62	10.71***
<i>R</i>	-	-	-	-	-	-	-	0.46
$R^2$	-	-	-	-	-	-	-	0.22
Adjusted $R^2$	-	-	-	-	-	-	-	0.20
Standard error of the estimate	-	-	-	-	-	-	-	2.53

Note:  $R^2 \leq 0.12$  (small practical effect size);  $R^2 \geq 0.13 \leq 0.25$  (medium practical effect size);  $R^2 \geq 0.26$  (large practical effect size).  
*F*, Factor;  $\beta$ , standardised regression coefficient; *B*, unstandardised regression coefficient; VIF, variance inflation factor; *df*, degrees of freedom.  
 \*,  $p \leq 0.05$ ; \*\*,  $p \leq 0.01$ ; \*\*\*,  $p \leq 0.001$ .

**TABLE 7:** Multiple regression analysis: The ethical climate questionnaire as a predictor of the normative commitment scale ( $n = 208$ ).

Variable	Model 4: Normative commitment							
	$\beta$	<i>B</i>	<i>p</i>	Tolerance	VIF	<i>df</i>	Mean square	Value
Constant	11.72	-	0.00	-	-	-	-	-
Caring	-0.04	-0.03	0.96	0.767	1.303	-	-	-
Law and code	0.19	0.12	0.10	0.793	1.261	-	-	-
Rules	-0.03	-0.02	0.79	0.697	1.435	-	-	-
Independence	0.56	0.32***	0.00	0.805	1.242	-	-	-
Instrumental	0.25	0.17**	0.01	0.840	1.191	-	-	-
<i>F</i>	-	-	-	-	-	5	26.01	10.85***
<i>R</i>	-	-	-	-	-	-	-	0.47
$R^2$	-	-	-	-	-	-	-	0.22
Adjusted $R^2$	-	-	-	-	-	-	-	0.20
Standard error of the estimate	-	-	-	-	-	-	-	2.26

Note:  $R^2 \leq 0.12$  (small practical effect size);  $R^2 \geq 0.13 \leq 0.25$  (medium practical effect size);  $R^2 \geq 0.26$  (large practical effect size).  
*F*, Factor;  $\beta$ , standardised regression coefficient; *B*, unstandardised regression coefficient; VIF, variance inflation factor; *df*, degrees of freedom.  
 \*,  $p \leq 0.05$ ; \*\*,  $p \leq 0.01$ ; \*\*\*,  $p \leq 0.001$ .

$p = 0.01$ ) acted as significant and positive predictors of normative commitment, with independence and instrumental contributing the most in explaining the variance in normative commitment.

Models 2–4 in Table 5 to Table 7 present the results for the multiple regression analyses that were computed to determine whether the WEC positively and significantly predicts affective, continuance and normative commitment, respectively. Three compulsory regression models were produced, all of which were found to be statistically significant ( $F_p \leq 0.05$ ). The models contributed 18% ( $R^2 = 0.18$ : affective commitment), 20% ( $R^2 = 0.20$ : continuance commitment) and 20% ( $R^2 = 0.20$ : normative commitment) of the variance in the variables in the subdimensions of OC. Therefore, Hypothesis 3 is accepted.

## Discussion

The aim objective of this study was to investigate whether the climate of work ethics correlates positively and significantly with nurses' organisational commitment. The results showed that a climate of work ethics was associated with nurses' organisational commitment. This means that participants who felt that their supervisors were ethical in their daily routines and decisions were committed and identified with the goals and values of the organisation (indicating higher commitment). In this respect, the findings cited above are consistent with those of an earlier study by Demirtas and Akdogan (2015), who found that an ethical climate (especially laws and codes, rules, independence, and instrumentals) may improve employees' loyalty and commitment to the employer organisation.

Regarding the second objective, four subdimensions of WEC (namely, caring, law and code, independence and instrumental) correlated with affective commitment. This suggests that participants who perceive their manager's concern for their well-being and adhere to their beliefs when making ethical decisions and acting for their interests are most likely to be emotionally committed to their organisation. These findings correspond with those of previous studies by Gassas and Salem (2022) who found that ethical climate was related to affective commitment.

Furthermore, this study found a negative correlation between caring and affective commitment, suggesting that when participants perceive their organisation to be less caring or concerned about their well-being, they most likely tend to be disloyal and leave the organisation. These findings contradict those of previous studies by Mitonga-Monga (2018) who reported that caring is positively related to affective commitment. However, this study found no correlation between caring and normative commitment. The findings differ from previous research, which revealed that caring is correlated with affective, continuance and normative commitment (Liou & Cheng, 2010).

In addition, the result indicates that there is no significant correlation between rules and affective and normative commitment. These results are not consistent with those of Fu et al. (2020), who found that the preceding rule is related to affective and normative commitment. Furthermore, the results found no correlation between independence and continued commitment. Nevertheless, Mitonga-Monga (2018) found a strong relationship between climate, ethics and affective commitment.

The second objective aimed at determining whether the WEC positively and significantly predicts nurses' organisational commitment. In this regard, the results revealed that the WEC predicted employee commitment to positive emotional attachment.

The third objective aimed at determining whether the subdimensions of the WEC (i.e. caring, law and code, rules, independence and instrumental) positively and significantly predicted the three subdimensions of organisational commitment, namely, affective, continuance and normative commitment. The results revealed that caring, rules, independence and instrumental factors contributed more to explaining the difference in nurses' affective, continuance and normative commitment. These findings confirm those by Kalhor et al. (2018), suggesting that WEC influences positive nurses' level of organisational commitment, implying that when nurses perceive that their employer pays attention to their well-being, they adhere to and use professional codes of conduct accordingly before making ethical decisions. Additionally, the nurses are more likely to be committed to and extend their membership with the employer organisation. These findings confirm those by Kalhor et al. (2018), suggesting that work ethic climate influences positive nurses' level of organisational commitment, implying that when nurses perceive that their employer pays attention to their well-being, they adhere to and use professional codes of conduct accordingly before making ethical decisions. Additionally, the nurses are more likely to be committed to and extend their membership with the employer organisation. The findings support Mitonga-Monga and Flotman's (2021) assertion that employees are likely to identify with their organisation's values and goals when a climate of work ethics prevails in organisations. Consequently, such involvement and identification become the moral foundation for an employee's loyalty and psychological attachment to the same organisation.

## Limitations

Many limitations must be considered when interpreting the results of the empirical study. Firstly, the study was limited to 208 nurses working in only one hospital in the Tshwane district. A non-probability convenience sampling technique was used to collect the required data. Therefore, it is not possible to generalise the results of this study to all nurses working in different hospitals in other districts in Gauteng province. For these findings to constitute a significant

representation of the total number of nurses, more nurses' experience would have to be explored quantitatively in more than a single public hospital in only a single district within a single province.

Secondly, because of the cross-sectional nature of this study, it was not easy to draw inferences about the cause-and-effect association between the WEC and nurses' organisational commitment. Hence, the findings were interpreted rather than established. Thirdly, two subdimensions of the WEC (i.e. independence and instrumentality) yielded low reliability scores, which could be attributable to the sample size and context of the study. Notwithstanding, the findings bring new light on the association between the WEC and nurses' commitment as it applies in a South African public hospital context.

### Implication for human resource practices

Human resource managers, practitioners and industrial psychologists strive to understand how work ethics climate, as an organisational climate that guides ethical behaviour in an organisation, is related to nurses' OC (Fu & Deshpande, 2014; Mitonga-Monga, 2018). These findings suggest that the health sector should create and promote an ethical climate in the workplace characterised by consideration, caring, clear professional codes of conduct, autonomy to apply discretion when using moral beliefs and encouraging members to prioritise self-interest, which can foster high nurse commitment. In addition, the findings demonstrate that work ethics and ethical climate (caring, law and code, independence and instrumental) predict the three components of nurses' commitment, namely, affective, continuance and normative, suggesting that managers who create a conducive work environment, reward-positive ethical behaviour, and punish misconduct would improve nurses' retention, quality of healthcare and goal attainment. In line with Imani et al. (2017), the authors of the study suggest that managers should create a positive, ethical and favourable work environment that could reduce the propensity of nurses to leave their employer organisation while encouraging them to behave ethically and preventing unethical behaviour. This will help the health sector retain its nurses (Mumbauer et al., 2021). Therefore, minimising unethical behaviour through clear policies, procedures and an ethical lens has many positive implications for the healthcare sector.

### Future studies

Despite the strengths of this study, several identifiable limitations should be considered as well. Firstly, the research was conducted at one organisation only, thus limiting the generalisation of the results to other industries. Secondly, the study only focused on the relationship between the WEC and nurses' OC, while other related variables (for instance, employee retention and work engagement) were excluded. Therefore, future studies should explore the effects of the SET on the relationship between WEC and other work-related outcomes by using samples from various organisations.

Additionally, mixed-methods research designs could be applied to gather data from multiple perspectives for a broader understanding and exploration of the relationship between the WEC, OC and other related variables.

## Conclusion

The purpose of this study was to examine the relationship between WEC and nurses' organisational commitment and to determine whether WEC influences nurses' level of commitment. The empirical-statistical relationship found between WEC and OC provided new insights into nurses' commitment in the health sector. The study concludes that the subdimensions of work ethic, law and code, rule, independence, and an important role in explaining nurses' affective, continuance and normative commitment in the health sector. Nurses who feel that their employer cares about their welfare, has a clear ethical code of conduct, has positive policies and rules, promotes independence and is instrumental are more likely to show high levels of commitment. This strongly suggests that the variables of WEC should be considered when developing retention strategies, the quality of health services and performance practices.

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## Competing interests

The authors have declared that no competing interest exists.

## Authors' contributions

M.D.K. conducted her master's degree on the relationship between the WEC, retention factors and OC. This article is derived from her master's degree data. M.D.R. was the main author. J.M.-M. was the supervisor and T.K.M. was the co-supervisor. For the article, M.D.K. analysed the data and wrote up the results. J.M.-M. conceptualised and drafted the article. T.K.M. was the collaborator, co-author and corresponding author.

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## Data availability

The data that support the findings of this study are available on request from the corresponding author, T.K.M. upon reasonable request.

## Disclaimer

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