INFLUENCE OF ROLE DISCRETION AND SHIFT WORK ON ETHICAL BEHAVIOUR OF NIGERIAN NURSES

Barnabas E. Nwankwo¹, Tobias C. Obi², Ngozi Sydney-Agbor³

¹, ² Department of Psychology, Caritas University Enugu, &
³ Department of Psychology, Imo State University Owerri,
NIGERIA.

¹ banniewankwo@yahoo.com

ABSTRACT

This study investigated the influence of role discretion and shift work on ethical behaviour of nurses. One hundred and seventy four (174) nurses from University of Nigeria Teaching Hospital, and National Orthopaedic hospital all in Enugu with age range of 24-65years and a mean age of 40.25years participated in the study. A cross sectional survey design was employed in the study. Two scales which include Job role discretion scale (Hackman & Oldham, 1975) and Ethical behaviour inventory (Kanu, 2009) were used in gathering the data for the study. A 2 X 2 Analysis of Variance was adopted in testing the hypothesis. The result showed that role discretion did not significantly influence ethical behaviour of nurses $F (1,170) = -269.42$, $P > .05$. Also, the result showed no significant influence of shift work on ethical behaviour of nurses $F (1,170) =-1.20$, $P > .05$. There was no significant interaction effect between role discretion and shift work on ethical behaviour of nurses. The result and its implication were discussed and suggestions made for further research.

Keywords: Role discretion, shift work, ethical behaviour, nurses

INTRODUCTION

A disturbing but unavoidable fact of organization life is that employees sometimes engage in ethically questionable activities that harm their companies, their co-workers, or the general public (Ugwu, 2011). The question of ethics is one that is linked with the history of mankind. It deals with good or bad, right or wrong of behaviour, it evaluates conducts against some absolute criteria and puts negative or positive value on it (Hanekon, 1984; Guy, 1990). What is needed in today’s complicated times is for more organizations to step forward and operate with one positive ethical culture. Besides, understanding the meaning of ethics and morality requires the distasteful reworking of the long forgotten classroom studies. Possibly, a gap in philosophical knowledge exists between organizations. They have and will continue to be a surge of interest in ethics (Dordrecht, 1992).

Ethics is the branch of philosophy that investigates morality and the way of thinking that guide human behaviour. It involves initially from religion of thinkers in the Judeo-Christian tradition. Ethics involves examining moral standards of society and asking how these standards are reasonable or unreasonable. Thus, ethics examines the moral standards of society, assesses their reasonableness or not, and evaluates the impact of these standards upon the lives of individuals. Implicit in this is the notion of the common good, which is one of the factors that determine whether an act is right or wrong (Vee & Skit More, 2003). Ethics also refers to the study and development of one’s ethical standard, feeling, laws, and social norms. So it is necessary to constantly examine one’s standard to ensure that they are reasonable and well-founded. Ethics also means the continuous efforts of studying our own moral beliefs and our moral conduct, and striving to ensure that we, and the institution we help to shape, lives
up to standards that are reasonable and solidly-based (Velasquez, Andre, Shant & Meyer, 1987).

Formally defined, ethical behaviour is that which is normally accepted as ‘right’ as opposed to ‘bad’ or ‘wrong’ in a particular setting. Is it ethical, for example to pay a bribe to obtain a business contract in a foreign country? Is it ethical to allow your company to withhold information that might discourage a job candidate from joining your organization? Etc. Despite ones’ initial inclination in response to these questions, the major point of it all is to remind organisations that the public at large is demanding that government officials, managers, workers in general and the organizations they represent all act according to high ethical standards. The future will bring a renewed concern with maintaining high standard of ethical behaviour in organizational transactions in the work place (Dordrecht, 1992).

Ethical behaviour is characterized by honesty, fairness and equity in interpersonal, professional and academic relationships, and in research and scholarly activities. Ethical behaviour respects the dignity, diversity, and rights of individuals and group of people. This definition is not a denial of the existence of other ethical duties with respect to practice, professional service delivery and research. These words demonstrate the significance of the language in which moral issues are concluded, or ‘moral training,’ using moral language (words like integrity honesty, fairness, propriety or lying, cheating, stealing), will more likely trigger moral thinking because these terms are attached to existing cognitive categories that have moral content (Crane & Matten, 2004). While ethics is concerned with human conduct in general, researchers such as Ray, Brook, More & Fraser (1999) identified ethical issues in the organization as falling into two categories. These are: Personal ethics and Professional ethics.

Personal ethics describes ethics as generally constituting a system of moral principles by which human actions and proposals may be judged good or bad, right or wrong; the rules of conduct recognized in respect of a particular class of actions and the moral principles of the individuals. Professional ethics on the other hand, refers to the behaviour expected of an individual in a workplace or in an organization or a particular group within the organization that is bound by a set of principles, attitudes or types of character dispositions that control the way the profession is practices (Vee & Skit More, 2003). To clarify the term ‘Professional’, Ray et al (1999) defined Professional as a group of people organised to serve a body of specialized knowledge in the interest of the society. Professional ethics involves assessing each decision in practise not only in regard to individuals’ moral concerns but also in terms of professional norms. ‘Profession’ is defined as including all tiers of the organization itself as well as the Client(s) and the government.

Kaiser & Hogan (2006) highlighted the importance of temporal connections between role discretion and shift work and the meaning people assign to their activities and engagements. Discretion is a multifaceted variable that reflects the degree to which employees can turn their intentions into reality, what Hambrick & Finkelsten (1987) called ‘Latitude of action’. When discretion is low, managerial judgement and behaviour are constrained, while when it is high, employees are relatively free to do as they wish. Thus, discretion is a situational variable that moderates how much workers can affect organizational processes and outcomes. Some line of researches has shown how discretion influences leadership in an organizational sector such as social psychology of discretion, which is an influential critique of traditional personality psychology. Mischel (1968) argued that behaviour is determined by situational factors rather than personality variables. He later considered that personality may influence behaviour but only in ‘weak situations’. According to Mischel (1968), strong situations provides clear, unambiguous cues about appropriate behaviour and that lead to less variability.
in how people respond. Weak situations provide only ambiguous cues for actions; these conditions allow greater opportunity for personality to influence behaviour. Situation strength has been used to analyze organizational behaviour (Weiss & Adler, 1984). Research shows, for example, that job autonomy moderate the relationship between personality and performance (Barrick & Mount, 1993). However, the concept of situation strength is obviously related to discretion, thus situation strength should be inversely related to organizational level because with increasing organizational status, autonomy increases roles and performance criteria when autonomy is less clearly defined (Zakada, 1999).

Role discretion can be explained as the amount of leeway individuals have in performing their jobs (Karasek, 1979; Anderson, 2003). Though role discretion have been suggested and opined by researchers to influence ethical behaviour, major empirical findings are yet to support these assertion (Selher & Fenner, 2009). They further suggest that role discretion may have a significant influence and impact on employee ethical behaviour. However, the study of shift work in relation to job role discretion may help determine an employee’s ethical behaviour among nurses. Shift work is defined as ‘non-standard schedules requiring that at least 50% of the work be done at a time other than between 8am and 4Pm (Parkas, 2003). It is necessary and becoming more popular to work at night. Many occupations require shift work such as the medical professions example, doctors, nurses, and the security etc.

National Population Health (N.P.H) Survey (1994, 1995), defined shift work as anything but a regular day time schedule and other. Raines (2000) in a study of 229 nurses found that they experienced an average of 32 different types of ethical dilemma daily. In addition, nearly 4 out of 5 nurses reported a stress level of 6 or more on a scale of an old age psychiatry wards, it was found that doctors and nurses differed in respect to patient’s autonomy. In addition, they also valued relationships, character, and virtues more than doctors in everyday patient relationship; nurses are also likely to face more serious consequences of their decisions than physicians when faced with an ethical problem. In response, nursing ethic committee were set up by nursing professionals to address ethical concept and legal issues (Joseph & Deshparde, 1996). In a survey sampling of 140 certificate students from a tertiary programme, Yung (2008) found that role discretion is a significant predictor of ethical behaviour. Multiple regression analysis showed that ideal role discretion was a significant predictor, accounting for 46% of the variance in the ideal ethical score of the degree students. The result also found that role discrepancies have a negative effect on the actual ethical behaviour of the degree students. This result suggests that professional values developed through socialization in nurses education programmes benefit patients, when degree students adapt successfully to the demands of bureaucratic organization (Yung, 2008). Furnham & Hughes (1999) found that night workers were significantly less oriented with ethical behaviour than day workers. In a random sample of four occupations, researchers revealed that day workers showed absent ethical behaviour more than night workers. Also, findings show that level of job strain (a combination of perceived job demand and control), in shift workers and day workers were not found to be significantly different when examined on ethical behaviour (Knutsson & Nilsson, 1997). Consistent with the finding of Furnham & Hughes (1999), Boggild, Burr, Tuchsen and Teppersen (2001) in their study, found that among shift workers, day workers showed a higher score on ethical behaviour comparable to night workers. The result of the study suggests that employees who run night services are less ethically oriented than those who run day services. Also, in their study, skill and role discretion was also rated significantly less favourable to night workers on ethical behaviour (Boggild et al, 2001). Parkas (2003) reported in her study that shift work has a significant influence on ethical behaviour. In her study using 1,867 employees, result showed that perceived work
environmental measures (physical stressors, Job demands, Job control, role discretion and supervision), support and safety perception and shift work interaction was significant, multivariate test result showed that shift work and environmental measures interact to predict ethical behaviour among industrial workers (Parkas, 2003). Research also showed that job role discretion is an important tool for workers facing high job demands (Fenwick & Tausing, 2001). This study sets out to answer the following research question:-

1. Will role discretion significantly influence ethical behaviour of nurses?
2. Will shift work significantly influence ethical behaviour of nurses?

HYPOTHESES

1. There will be a significant influence of role discretion on ethical behaviour of nurses.
2. There will be a significant influence of shift work on ethical behaviour of nurses.

METHOD

Design/Statistics

A cross-sectional survey design was adopted for the study while a 2 X 2 analysis of variance f-test using the method of unweighted means for unequal sample size was employed in testing the hypotheses.

Participants

One hundred and seventy four (174) nurses with age range of 24-65 years and a mean age of 40.25 constituted participants for the study. The participants were randomly selected from two major federal Hospitals in Enugu metropolis using simple random sampling technique; this was done by giving all the nurses equal chance of participating in the study. The Hospitals include University of Nigeria Teaching Hospital Ituku Ozalla and National Orthopaedic Hospital Enugu. The two Hospitals were chosen due to the number of available nurses in the hospitals who engage in shift work. The participants were nurses who run both day, and night shifts in the hospitals, they included both male (26) and female (148) nurses, married (103) and their unmarried counterparts (71) that work in the Hospitals. The participants were further grouped into four groups based on their scores on the job role discretion scale (Hackman & Oldham, 1975), and those that run either day shift or night shift. The group includes those that have high role discretion and work day shift (36), those that have low role discretion and work day shift (41), those that have high role discretion and work night shift (52) and those that have low role discretion and work night shift (45).

Measures

Two instruments were used for the study. The first instrument, Job role discretion (Hackman & Oldman, 1975), was used to measure the participant’s level of autonomy to take significant decision alone as regards their work. While the second instrument, Ethical behaviour of nurses inventory (Kanu, 2009), was used to measure how ethically Oriented the participants are in line with the ethics that guide’s the nursing profession. The job role discretion scale as developed by (Hackman & Oldham 1975) contains five items on employee discretion. These items have statements on (1) Choose of order, (2) Method of work, (3) Speed of work (4) Time of break, and (5) Working hours. An example of the items is “I am able to choose or change my order of task”. The scale is scored based on five-point likert response format style ranging from (1) Never, (2) Rarely, (3) Sometimes, (4) Often, and (5) Very often. There is no direct or reverse scoring items therefore a possible maximum score of twenty five (25) and a
possible least scored of five (5) is obtainable from the scale. Thus, scores above the average (12.5 and above) indicates high role discretion while scores below the average (12.5 and below) indicates low role discretion. The scale is made up of two sections, section A is meant to obtain the demographical data of the participants while section B is meant to obtain the level of discretion of the participants. The developers found the scale to be reliable at cronbach alpha of .73, also, content and concurrent validity were established by the developers to ascertain the validity of the scale. The Instrument was standardized using Nigerian sample by Chibueze (2010) and a reliability coefficient of .72 were Obtained. The Ethical behaviour of nurse’s inventory is a twenty eight (28) item scale developed by Kanu (2001). The instrument was modified by the researcher based on the code of ethics that guide the Nigerian nursing profession. The instrument is scored on a five point likert response format style ranging from (1) Never, (2) Rarely, (3) Sometimes, (4) Often, and (5) Very often. A possible highest score of one hundred and forty (140) and a possible least score of twenty eight (28) is obtainable from the scale. There is no reverse scoring item therefore, the higher the score, the more ethically oriented the participant is and Vice-versa. The scale is made up of two sections, section A is made up of the demographical information of the participants while section B is meant to obtain the degree of ethical behaviour of the participants. The instrument was found reliable at Cronbach alpha of .86, also construct validity was employed in obtaining the validity of the instrument.

Procedure

The researcher, after indentifying himself with the managements of the Hospitals was permitted to go into the wards and administer his questionnaires. The researcher administered the instruments simultaneously with the help of research assistants to the participants during their working hours. The exercise was done in two phases, first during the day between the hours of 8am and 3pm for nurses on day shift and secondly during the evening between the hours of 6pm and 8.30pm covering those that work on night shift. The questionnaires were distributed to the participants (nurses) in their different wards and departments as they were discharging their duties. The participants were instructed on how they can respond to the scale and pleaded to be honest in responding to the items. The next day after the distribution, the researcher went back to gather the questionnaires back although some were returned some minutes or hour’s interval after distribution. Out of the one hundred and ninety eight (198) questionnaires distributed, one hundred and two two (182) were returned. Eight (8) questionnaires were discarded for incomplete response and mutilations while the remaining one hundred and Seventy four (174) properly responded ones were used for the statistical analysis.

RESULTS

Table 1. Summary table of Means on the influence of role discretion and shift work on ethical behaviour of nurses

<table>
<thead>
<tr>
<th>Work Shift</th>
<th>High</th>
<th>Low</th>
</tr>
</thead>
<tbody>
<tr>
<td>Day Shift</td>
<td>T11 = 3100</td>
<td>T12 = 5097</td>
</tr>
<tr>
<td></td>
<td>N11 = 36</td>
<td>N12 = 41</td>
</tr>
<tr>
<td></td>
<td>X11 = 86.11</td>
<td>X12 = 124.31</td>
</tr>
<tr>
<td>Night Shift</td>
<td>T21 = 4113</td>
<td>T22 = 5655</td>
</tr>
<tr>
<td></td>
<td>N21 = 52</td>
<td>N22 = 45</td>
</tr>
<tr>
<td></td>
<td>X21 = 79.09</td>
<td>X22 = 125.66</td>
</tr>
</tbody>
</table>
Table 1 shows that participants on day shift with low role discretion had a higher mean score on ethical behaviour (M = 124.31) than those on day shift with high role discretion (M = 86.11).

In the same vein, participants on night shift with low role discretion had a higher mean score on ethical behaviour (M = 125.66) than those on night shift with high role discretion (M = 79.09). This result was subjected to two-way Analysis of Variance for Unequal sample size to test the significance of the f-ratio among the differences obtained on mean scores.

Table 2. Summary table of 2 X 2 Analysis of Variance F-test for unequal sample size using the method of unweighted means on the influence of role discretion and shift work on ethical behaviour of nurses

<table>
<thead>
<tr>
<th>Source of Variance</th>
<th>Sum of Squares</th>
<th>df</th>
<th>Mean Square</th>
<th>F</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rows (Shift work)</td>
<td>356.85</td>
<td>1</td>
<td>356.85</td>
<td>-1.20</td>
<td>&gt;.05</td>
</tr>
<tr>
<td>Columns (Discretion)</td>
<td>79836.02</td>
<td>1</td>
<td>79836.02</td>
<td>-269.42</td>
<td>&gt;.05</td>
</tr>
<tr>
<td>Interaction (Shift work) &amp; (Discretion)</td>
<td>-160449.73</td>
<td>1</td>
<td>-160449.73</td>
<td>-541.47</td>
<td>&gt;.05</td>
</tr>
<tr>
<td>Within Cells</td>
<td>-50374.04</td>
<td>170</td>
<td>-296.32</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Dependent Variable = Ethical behaviour

The result obtained from the ANOVA Summary table above (Table Two) shows that on role discretion, the difference obtained on the mean scores between participants who have high role discretion and those that have low role discretion was not significant thus, the first hypothesis which states that role discretion will not significantly influence ethical behaviour of nurses was not rejected, but accepted.

In the same vein, the mean difference obtained between participants who work day shift and those that work night shift was equally not significant thus; the second hypothesis which states that shift work will not significantly influence ethical behaviour of nurses was equally accepted. Also, the result showed no significant interaction effect between role discretion and shift work on ethical behaviour of nurses.

Results may be summarised as: a) Role discretion did not significantly influence ethical behaviour of nurses, b) Shift work did not significantly influence ethical behaviour of nurses, c) Role discretion and shift work did not have significant interaction effect on ethical behaviour of nurses.

**DISCUSSION**

Considering the results, the first hypothesis which states that there will be no significant influence of role discretion on ethical behaviour of nurses was not rejected. The result showed that role discretion did not play a significant role on ethical behaviour of nurses. Nurses who experience low role discretion are not more inclined to ethical behaviour than those who experience high role discretion.

It is important to note that nurses, during their course of training, are imbibed with the orientation of maintaining high standards both in competence, ethical codes and discipline. This is why the professional ethics is linked with more practical concept and expectations from the general public such as competence and responsibility. Also, nurses tend to be ethically inclined as it is stipulated in the nursing principles that each person is personally
accountable for his/her actions. All persons have a shared responsibility to uphold ethical behaviour in the profession and anything short of this, if officially reported, may lead to withdrawal of the nursing certificate from the individual. The purpose of fundamental principles and accompanying policies and procedures in the nursing profession is to facilitate and promote ethical behaviour in the nursing profession. The personal ethics of the nurses acquired during their course of training disposes the nurses to being ethically inclined irrespective of the working condition. Also, since nurses are also more likely to face more serious consequences of their decisions and actions when faced with an ethical problem, and the establishment of nursing ethical committee to monitor the overall adherence to the nurse’s codes of ethics by their members, nurses generally tend to be ethically inclined to avoid the repercussion of losing their membership in the nursing profession and also the dirt on their self-image as a person.

The second hypothesis which states that shift work will not significantly influence ethical behaviour of nurses was equally not rejected. The result showed that shift work played no significant influence on the ethical behaviour of nurses. Both those who work day and those who work night shift tends to display the same level of orientation in ethical behaviour. Shift work is a dynamic, rotational affair in which all nurses can work night this time and work day the next time of the rotation, as a result of this, nurses concentrate more on the work they have at hand rather than thinking or acting contrarily to their assigned duties. Nigerians, especially the South Eastern part of the country are known for their high level of religiosity which is manifested in their relationship with affairs that requires morality, actions such as going contrarily to the code of ethics guiding their profession, in this case, the nursing profession, as a result of the high level of super-ego inculcated into the nurses in their respective religions, they learn how to adhere to their ethics thus being ethically inclined in their jobs and their endeavours not regarding whether they work day, night, have high role or low role discretion bestowed on them in their work place. The central theme here is focusing on the job and doing what is supposed to be done at the right time not minding condition (s) behind it. Hence, no significant interaction effect exists between role discretion and shift Work on ethical behaviour of nurses. This means that role discretion and shift work did not significantly interact to influence ethical behaviour of nurses.

**Implications of the Findings**

There are several implications of the finding of the present study. Several deductions can be made that can benefit future researchers, employees of labour and workers in the health profession in Nigerian Organizations at large.

For the employers, they should realize that whether an employee have high role discretion or low role discretion, work day shift or night shift, does not determine whether the employee will be ethically inclined or not. Both workers with high role discretion, low role discretion, day workers and night workers, could be ethically inclined or not, however, ethical behaviour has more to offer from moral orientation imbibed by the employee.

To the employees, shift work and role discretion is a rotational and dynamic affair which changes for all concerned from time to time, therefore, workers should concentrate on their respective duties when at work while observing the ethical codes of the profession.

Ethical behaviour fosters the efficiency and credibility of an organization. When employees maintain the ethical codes of the profession, it strengthens the unity between the workers and the employers, thereby reducing crisis and counterproductive work behaviour among personnel.
SUMMARY AND CONCLUSION

Organizations are encouraged to discover variables that could influence the ethical behaviour of their employees in order to know those to check and those to encourage in organizations. Emphasis should be laid on the importance of ethical codes in organizations because it determines the healthy nature of such organization. One major limitation of the study is the sample size used in the study. A handful of one hundred and seventy four (174) participants were used in the study. An increase in the sample size could serve as a better representative when further research and similar study arises. Again, demographical Variables like gender, Sex, age, socio-economic status, ethnicity, religion, Job status, academic attainment, and marital status could influence the ethical behaviour of workers in different organizations. Restricting the study to only two independent variables (Role discretion and shift work) has narrowed the search on factors that influence ethical behaviour. Finally, the study was not conducted across many states of the Federation; rather, it was restricted to only one state capital (Enugu) which may create loophole in terms of generalizing the finding of this study to all Nigerian workers.

REFERENCES


