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THE IMPACT OF ETHICAL LEADERSHIP ON TURNOVER
INTENTION IN THE HEALTH SECTOR

Dissertation presented to Universidade Católica
Portuguesa to obtain a Master's Degree in Psychology in
Business and Economics

By

Maria Luísa Loureiro Viana Dourado

Faculty of Human Sciences

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Abstract

In healthcare organizations, retaining a skilled workforce is crucial, especially given the ongoing global shortages in healthcare resources. The deficit in the nursing workforce is a pressing social concern that requires urgent attention. Although the complexity of healthcare sector is widely recognized, it is important to address this ongoing problem, as turnover is known to have detrimental effects on organizations. This study examines the impact of ethical leadership on turnover intention among nurses, while also evaluating the mediating roles of work engagement and organizational citizenship behavior within this relationship.

The hypothesized model was tested in healthcare organizations in Portugal, with data collected over a period of five months. A total of 115 nurses participated in this research by answering an online survey. Using Hayes' PROCESS macro, we analyzed all the direct and indirect paths, including sequential mediation.

The findings suggest that ethical leadership is crucial in decreasing turnover intention, however the role of OCB as a mediating variable in this context was not a strong predictor of employees' intention to leave. The study discusses its theoretical and practical implications in relation to the findings, while also addressing limitations and proposing directions for future research.

Keywords: Ethical Leadership, Turnover Intention, Work Engagement, Organizational Citizenship Behavior, Healthcare sector

Resumo

Nas organizações de saúde, reter trabalhadores qualificados é crucial, considerando especialmente a atual escassez global de recursos nesta área. A falta de enfermeiros é uma preocupação social urgente que precisa de atenção imediata. Embora a complexidade do setor da saúde seja amplamente reconhecida, é importante abordar este problema contínuo, uma vez que a intenção de saída é conhecida por ter efeitos prejudiciais nas organizações. Este estudo analisa o impacto da liderança ética na intenção dos enfermeiros se quererem despedir, avaliando também os papéis mediadores do envolvimento no trabalho e do comportamento de cidadania organizacional.

O modelo hipotetizado foi testado em organizações de saúde em Portugal, com dados recolhidos ao longo de um período de cinco meses. Um total de 115 enfermeiros participou neste estudo ao responderem a um questionário online. Utilizando o PROCESS de Hayes, analisámos as relações diretas e indiretas, incluindo mediação sequencial.

Os resultados sugerem que a liderança ética é crucial para a diminuição da intenção de abandonar a organização; no entanto, o papel do comportamento de cidadania organizacional como variável mediadora neste contexto não foi um forte preditor da intenção dos colaboradores de deixar a organização. O estudo discute as suas implicações teóricas e práticas em relação aos resultados, abordando também limitações e propondo direções para futuras pesquisas.

Palavras-chave: Liderança Ética, Intenção de Saída, Envolvimento no Trabalho, Comportamento de Cidadania Organizacional, Setor da Saúde

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List of Abbreviations and Symbols

EL - Ethical Leadership

OCB - Organizational Citizenship Behavior

SET - Social Exchange Theory

TI - Turnover Intention

USD - United States Dollar

UWES - Utrecht Work Engagement Scale

WE - Work Engagement

WHO - World Health Organization

Chapter I: Introduction

The concept of turnover intention (TI) has gained significant attention in the academic and professional community due to the growing awareness of the expenses associated with recruitment, training, and reduced productivity (Palanski, 2014). Moreover, organizations that experience a rise in their turnover rate are anticipated to sacrifice intangible knowledge and skills, operational efficiency, customer contentment, and the quality of their products or services (Grotto et al., 2017).

Extensive research has been conducted on employee turnover within organizations (Saleh et al., 2022). Addressing turnover intention is crucial as it pertains to an individual's inclination or plan to leave their current job (Chen et al., 2014). When skilled employees plan to depart from the organization, it presents a significant challenge to the organization's performance, particularly in today's highly competitive and rapidly evolving work landscape (Kaur Sahi & Mahajan, 2014).

Given the various drawbacks linked to turnover, companies nowadays across all sectors of the economy have significant importance on retaining their employees and comprehending the factors that contribute to turnover (Jian et al., 2022). Therefore, employers must identify early indicators of employee disengagement and proactively address them (Tett & Meyer, 1993).

Regarding the healthcare system, a rising turnover rate carries more significant consequences compared to other sectors, as the global healthcare sector is recognized for facing resource shortages (Fu et al., 2022; PWC, 2022). The deficiency in the nursing workforce stands as a pressing current social concern. Ongoing trends project a worldwide shortage of 5.7 million nurses by the year 2030 (World Health Organization, 2020), which justifies the urgency to address this current and future issue.

Research have demonstrated a global rise in turnover within healthcare systems (Daouda et al., 2021). Turnover intention carries significant financial and human expenses, which is especially notable in the nursing field. The ongoing shortage of nurses in healthcare is a costly and lasting problem unless actions are taken to either recruit new nurses or offer current ones compelling reasons to stay in healthcare organizations (Asegid et al., 2014). According to Nazir et al. (2016), in Pakistan, 13% of newly licensed registered nurses resigned from their positions within the first year of employment, and an additional 37% were contemplating leaving their jobs and pursuing different career paths.

Addressing this problem from an economic point of view, a sector that is already struggling with resource scarcity, the financial burden of employee turnover adds additional strain to healthcare resources (Jian et al., 2022). Providing evidence on this, a report has revealed that in countries like the USA, hospitals suffer an annual average loss of over USD 4 million due to turnover. This pattern has also been witnessed in Australia with a loss of USD 48, 790 and Canada with USD 26,652 (Duffield et al., 2014).

In Portugal, the emphasis on retaining nurses is crucial, especially as it sustains ratios of nurses per capita significantly below the OECD average (OECD, 2021). Moreover, the 2007–2008 global economic and financial crisis prompted Portugal to implement cost control measures, such as salary reductions, pausing career progressions and promotions, and increased work hours. These measures directly impacted working conditions (Sakellarides et al., 2015). In addition, between the years 2011 and 2013, there was a 3.2% decrease in nursing staff within the National Health Service (NHS), coupled with a significant rise in the emigration of Portuguese nurses (Legido-Quigley et al., 2016), which also contributed to the staff shortage.

As healthcare turnover has been increasing lately, a recent study suggests that 75% of the reasons for employees leaving their jobs could be avoided. This document highlights that one of the top three most common causes of turnover is inadequate leadership behavior (Nick, 2017). This emphasizes how important effective leadership can be in reducing employees' desire to leave their healthcare jobs (Jian et al., 2022).

Certainly, leadership style and turnover intention within the nursing sector differ from one country to another, influenced by factors like household income and cultural considerations, which can affect nurses' intentions to leave their positions (Magbity et al., 2020). However, within the nursing sector, factors such as demanding work culture, high workloads, unfavorable nurse-physician leadership, and low job satisfaction can be seen as primary contributors to the increase in nurses' turnover intention (Majeed & Jamshed, 2021). With this data, it can be concluded that turnover poses a significant challenge that the healthcare sector encounters in nearly every corner of the world.

In the nursing field, nurse managers have the role of cultivating a healthcare environment that not only strengthens the dedication of the nursing staff but also enhances their morale. Moreover, these managers are accountable for retaining the newly recruited staff nurses (Alkarabsheh et al., 2022). Therefore, the style of leadership has an impact on determining whether nurses choose to stay, transfer to other healthcare institutions, or seek employment elsewhere (Abualrub & Alghamdi, 2012).

In the view of scholars, ethics has taken on a significant role in recent decades, contributing to the cultivation of strong moral character in individuals, which in turn promotes the success and well-being of both communities and their constituents (Nawaz et al., 2022). Organizations have often prioritized the development of outstanding employees and fostering a strong corporate culture, occasionally neglecting the development of their leaders (Nawaz et al., 2022). More recently, leadership has gotten increased attention, leading many authors to delve into the definition of leadership and explore its ethical dimensions (Nawaz et al., 2022).

Leaders have a great influence on various organizational factors such as work behavior, employees' performance, well-being, and the ability to inspire and guide their followers to embrace change (Avolio et al., 2009). According to previous studies, in the presence of an ethical leader, the organization's work unit tends to have lower turnover intention (Brown et al., 2005).

Healthcare organizations are social systems where people, particularly the workforce, play a vital role in delivering healthcare services. These organizations need strong leadership and a skilled workforce to achieve their goals (Alkarabsheh et al., 2022). This means that these organizations will struggle to achieve success unless every member dedicates effort and commitment to address this issue (Abualrub & Alghamdi, 2012). In this particular sector, where competition is on the rise and challenges are growing due to increasing workloads and limited resources, it is essential to establish a workplace that encourages favorable attitudes and actions among the staff (Gupta et al., 2016).

Odeneye et al. (2018), conducted research studying how followers perceive ethical leaders and their potential impact on organizational success. They suggested that forthcoming studies should prioritize involving followers as research participants to gain insights into the traits and qualities associated with ethical leadership for potential replication. Considering this, my intention is for this study to center its focus on gathering insights from the organization's followers, who in this case happen to be nurses who are actively working in the healthcare sector.

Building on the information presented earlier, it is clear that turnover is a critical issue due to its widespread prevalence and significant consequences. Leadership has been identified as a key factor in influencing turnover, and within the healthcare sector, its role becomes even more crucial given the heightened pressures that can exacerbate stress in the workplace. In such environments, having an ethical role model in leadership is especially important. However, this impact is not immediate and may occur through the activation of a

psychological state (work engagement) that fosters organizational citizenship behaviors, which in turn lead to a lower intention to leave. Therefore, this study aims to explain the process and impact of ethical leadership on turnover intention.

To address the proposed objective, this dissertation is structured as follows: starts with a literature review chapter that explores the relationships between variables in study, namely Ethical Leadership (EL), Turnover Intention, Work Engagement (WE), and Organizational Citizenship Behavior (OCB). This is followed by a methodology chapter, which details the research design, data collection, and analysis procedures. The subsequent chapter presents the data analysis and results, providing a comprehensive examination of the findings. This is followed by a discussion chapter that interprets the results, considering both theoretical and practical implications of the study. Finally, the dissertation concludes with a summary of key insights and contributions.

Chapter II: Literature Review

Ethical Leadership and Turnover Intention

Turnover intention, as defined by Meyer et al. (1993), is an individual's intention to leave their current job or organization. It can also be defined as the conclusion of both the formal and psychological agreement between an employee and an organization (Krausz, 2002). Consequently, numerous studies have been undertaken to enhance our comprehension of TI, aiming to tackle employee retention challenges and improve organizational effectiveness (Hom et al., 2012).

Employee turnover can be categorized into two primary types: involuntary and voluntary. Involuntary turnover is instigated by the organization to conclude the employment relationship with an employee, while voluntary turnover is mainly initiated by the employees themselves (Cao et al., 2013; Price, 1977).

According to Ngo-Henha (2017), turnover intention embodies the attitude an employee holds towards an organization. Consequently, attitudes are complicated, and to grasp them fully, it is essential to take into account various fundamental components (Robbins & Judge, 2015). According to Berndt (1981), as referenced by Staffelbach (2008), intentions are an expression regarding a behavior of interest. Moreover, intentions most of the time provide a precise indication of following behavior (Alam & Mohammad, 2010). Therefore Mobley (1977), as cited by Jha (2014), agrees that it is of great importance to study intentions since they can provide valuable clues concerning one's perceptions and judgments.

As indicated in the literature, turnover intention is frequently employed as a measure for predicting workplace turnover, as noted by Bigliardi et al. (2005). The terms "intent to leave," "intent to quit," "intention to leave," and "turnover intention" are frequently employed interchangeably (Memon et al., 2016). While turnover intention is not directly associated with actual employee turnover, it remains a vigorous predictor of turnover behavior, as verified by previous studies that have established the connection between employee turnover intention and actual turnover (Mobley, 1982). As an example, Lucas et al. (1993) demonstrated the effectiveness of a turnover intention model in accurately predicting 73% of actual turnover cases within the registered health staff. Another study found that 25% of employees with intentions to leave eventually followed through with the decision to leave their jobs permanently (Sausa-Poza, 2007).

The Social Exchange Theory (SET) proposed by Blau (1964) and Homans (1961), stands as one of the most influential and extensively employed theories for comprehending workplace behavior. This theory proposes that an individual's actions depend on the responses and reactions of others (Blau, 1964). Therefore, people tend to put in more effort when they believe their efforts will be met with rewarding responses. When these efforts result in mutual benefits, SET describes this as a series of exchanges (Emerson, 1976). Blau (1964) characterizes social exchanges as "voluntary actions" conducted by an organization for its employees, anticipating reciprocal actions in return. Essentially, individuals engage in and sustain exchange relationships with others, expecting such engagements to be rewarding (Blau, 1964; Homans, 1961; Miles, 2012).

Employees who eventually decide to leave their jobs often go through a period of reflection before making the final decision to resign (Sausa-Poza, 2007). The three key aspects that are involved in the withdrawal cognition process, regarding turnover intention, are: first, considering quitting the current job; next, thinking about looking for a new job; and ultimately, having the intention to resign (Mobley, 1977; Rahman & Nas, 2013). In line with the literature, numerous variables contribute to the occurrence of turnover intention behavior, leading to a higher rate of professionals leaving their careers. These variables include organizational factors, such as working hours, stress, depression, leadership style, empowerment, individual characteristics, career advancement opportunities, salaries, and benefits (Hayes, 2012).

In cases of elevated turnover within the healthcare sector, negative consequences can impact the organization. Firstly, it reduces effectiveness and productivity (Price & Mueller, 1981). Moreover, it leads to increased costs (Duffield et al., 2014; Waldman, 2004) and a decline in the quality of care provided (Al-Hussain & et al., 2014). This turnover trend also correlates with an increase in the occurrence of adverse events in nursing care (Castilho, 2014) and disrupts unit cohesion (Lu et al., 2005; Price & Mueller, 1981). Additionally, it results in a stressful climate due to staff shortages, even when new staff members are integrated (Lu et al., 2002, 2005;). The repercussions extend to reducing consensus, increasing conflicts, and diminishing the satisfaction of those who remain (Lu et al., 2005; Price & Mueller, 1981). The collective impact of these consequences underscores the significance of addressing and mitigating turnover within the healthcare sector, and the purpose of this study is to be part of the solution.

Several factors can indeed impact turnover, according to Coyle-Shapiro & Marrow's (2003) research, leaders play a crucial role in influencing employees' decisions regarding

turnover. Leaders are acknowledged as pivotal figures in influencing the turnover choices of individuals because of their proximity and their capacity to make decisions that serve the collective interests of the team (Gini, 1998). Considering that, ethical leadership and leader effectiveness have a mitigating effect on both work-related stress and turnover intention (Gini, 1998). This suggests that ethical leadership can effectively reduce both stress levels and the intention to leave a job (Elçi et al., 2012).

Ethical leadership is defined as the display of morally appropriate behavior through personal actions and interactions, while encouraging similar conduct in followers through open communication, positive reinforcement, and sound decision-making (Brown et al., 2005).

Treviño et al. (2000, 2003) carried out an exploratory study to find out what "ethical leadership" really meant to those who closely observe top-level managers. They conducted structured interviews with twenty senior executives and twenty ethics or compliance officers from different industries. The participants were asked to think about a leader they considered ethical and respond to general questions about that leader's traits, actions, and intentions.

The interviews revealed that ethical leaders were associated with certain personal qualities like honesty and trustworthiness, fair decision-makers, individuals who genuinely cared about people and society, and consistent ethical behavior in both their personal and professional lives. This was termed the "moral person" aspect of ethical leadership, focusing on a leader's characteristics, character, and selfless motivation.

Additionally, the study also uncovered another crucial aspect of ethical leadership referred to as the "moral manager dimension", where leaders actively shape their followers' ethical conduct. These leaders make ethics an integral part of their leadership by communicating strong ethical values, setting a clear example through their own ethical actions, and using rewards and discipline to hold followers accountable for behaving ethically. By being explicit about ethics, these leaders make it a prominent part of their message, which stands out in an organizational context that often lacks a strong ethical emphasis (Treviño et al., 2000, 2003).

The concept of ethical leadership paves the way for personal transformation, drives organizational success, improves interpersonal communication, and fosters the establishment of a common professional foundation (Frunză, 2017). Ethical leadership can be described as setting a positive example by consistently behaving in morally and socially acceptable ways, both in personal actions and interactions with others. It involves actively encouraging and fostering this type of behavior in one's followers through open

communication, support, and the decision-making process (Brown et al., 2005). Leaders of this kind not only serve as role models for their followers but also ensure their protection, fair treatment, and shared responsibility for achieving common objectives (Gini, 1997).

Ethical Leadership consists of three essential concepts: modeling normatively appropriate behavior, two-way communication, and making choices based on the ethical consequences of behavior (Brown et al., 2005). Modeling normatively appropriate behavior involves followers perceiving ethical leaders as role models within their specific cultural environment. Ethical leaders set examples by behaving honestly, reliably, and fairly, demonstrating good manners that others find worthy of imitation and adherence (Brown et al., 2005). Existing literature also supports the validation of this statement. Leaders who exhibit traits and behaviors aligned with their vision of ethical leadership generate greater influence over their followers (Dhar, 2016). Additionally, leaders are responsible for establishing ethical guidelines that guide their followers in addressing behaviors that could harm both society and the organization (Aronson, 2009). This highlights the indispensable role ethical leadership plays in shaping organizational culture and fostering responsible conduct among team members.

Regarding two-way communication, ethical leaders, as outlined by (Brown et al., 2005), ensure clarity in their decisions and create an open environment for followers to express their concerns and opinions. Ethical leadership advocates, as emphasized by Freeman (2016), prioritize open and reciprocal communication between leaders and their followers. They also stress the importance of effective communication with employees to inspire ethical behavior. When employees express their concerns, their teams not only become more effective, innovative, and better equipped to make well-informed decisions but also foster an environment where employees feel acknowledged and respected. This, in turn, enhances their ability to adapt to organizational changes with greater ease (Demirtas, 2015). Furthermore, a core principle of ethical leadership, according to Dhar (2016), is to provide employees with a genuine opportunity to have their say in leadership decisions that matter.

Making choices based on the ethical consequences of behavior is the third and last concept, that pertains to ethical leaders making decisions with a focus on transparency and considering the ethical outcomes of their actions (Brown et al., 2005). Leaders of this kind not only serve as role models for their followers but also ensure their protection, fair treatment, and shared responsibility for achieving common objectives (Gini, 1997).

One significant challenge faced within the healthcare sector is the high turnover intention among nurses (Daouda et al., 2021). Turnover intention, referring to the inclination of employees to leave their jobs (Chen et al., 2014), poses a substantial concern since it leads to losses on multiple fronts, including reduced productivity, loss of expertise, knowledge, and overall well-being of the organization (Duffield, 2011; Shields & Ward, 2001). Consequently, this has substantial effects on the motivation and job satisfaction of healthcare professionals, which, in turn, affect the quality of healthcare services delivered and the response to patients' requirements (Tai, 1998). In response to this issue, researchers and healthcare leaders have pursued to comprehend turnover intention as a mean to tackle employee retention and enhance the overall effectiveness of organizations (Hom et al., 2012).

To truly understand turnover intention, it is important to consider employee attitudes (Harter et al., 2002) and leadership behaviors as antecedents (Dupre, 2007). Ethical leadership has been posited as a potential driver of employee retention in various industries (Brown et al., 2005; Treviño et al., 2003). A study conducted by Demirtas & Akdogan (2015), explored how ethical leadership affects various aspects of an organization. It suggests that managers, by being role models of ethical behavior, can impact how employees perceive the organization's ethical climate. This, in turn, influences employees' intentions to leave the organization. The study's findings show that ethical leadership has a direct impact on employees' emotional attachment to the organization and their turnover intentions. Its relevance within the healthcare sector, particularly among nurses, is of great importance as it influences not only the workplace environment but also patient outcomes.

In line with Shafique's (2018) findings, when leaders exhibit ethical leadership, it leads to employees displaying positive attitudes and behaviors in their work, thereby reducing the likelihood of them leaving for another organization. Ethical leadership is essential not only for encouraging favorable employee conduct but also for averting and redirecting undesired attitudes and actions, including turnover intention (Lin & Liu, 2017).

Although certain studies have emphasized job satisfaction as a significant predictor (Holtom et al., 2008), research has increasingly shifted its focus to the impact of leaders on turnover intention (DeConinck, 2015). Moreover, there has been considerable research on turnover intention and various leadership styles, including transactional and ethical leadership, as proved by Hughes et al. (2010).

The Self-Concept Theory provides a framework for understanding the relationship between ethical leadership and turnover intention. It suggests that employees are less

inclined to contemplate leaving the organization when they find inspiration in the elevated ethical standards defended by their leaders (Lin & Liu, 2017). Conversely, when employees perceive their leader as unethical, self-centered, and dishonest, the inclination to leave the organization and seek new employment rises significantly (Brown & Mitchell, 2010).

Self-concept theory stands out as a key approach in understanding why employees, especially from an ethical standpoint, contemplate leaving their roles (Forstenlechner et al., 2014). As per Rosenberg (1979), self-concept is the entirety of an individual's emotions and thoughts concerning their perception of themselves. Shamir et al. (1993) were among the pioneers who expanded this concept within an organizational context. They contended that within an organizational setting, an employee's evaluations of others significantly impact their own self-assessment.

From a leadership point of view, this theory suggests that a successful corporate leader can shape employee behavior by establishing a connection with their self-concept and facilitating the alignment of an individual's self-concept with the organization's mission and goals (Mostafa & Abed El-Motalib, 2020). Therefore, this theory offers a theoretical foundation for how employees' turnover intentions are, to some extent, influenced by a corporate leader (Lin & Liu, 2017). In particular, earlier researchers have sought to investigate the association between ethical leadership and employee turnover using the framework of self-concept theory (Marquardt et al., 2022).

Hypothesis 1: Ethical leadership is negatively associated with turnover intention.

Ethical Leadership and Work Engagement

Building on the established link between ethical leadership and turnover intention, it is essential to explore potential mediating factors. One fundamental mediator is work engagement. Work engagement is described as a state marked by positive emotional and cognitive attributes, which encompass vigor, dedication, and absorption (Schaufeli & Bakker, 2004). Vigor stands for the capacity to display a great level of energy and mental strength during work, the eagerness to put in effort, and the determination to keep going forward even when obstacles come in the way (Schaufeli & Bakker, 2004). Work engagement reveals the personal energy that employees invest in their tasks. Engaged employees not only show energy but actively and enthusiastically channel that energy into their jobs and tasks. They do not withhold their energy in difficult moments; rather, they comprehend that the demands of their current tasks need their full commitment (Bakker &

Leiter, 2010). This characteristic of wholehearted energy allocation contributes to the overall effectiveness and dedication of engaged employees in the workplace (Bakker & Leiter, 2010)

Dedication involves being fully immersed in your work and finding a deep sense of meaning, excitement, inspiration, pride, and a sense of challenge (Schaufeli & Bakker, 2004). Work engagement, according to Bakker & Leiter (2010), is characterized as a motivational concept where employees, when engaged, are driven to pursue challenging goals with a strong desire for success. This engagement transcends mere reactions to immediate situations, as employees willingly make a personal commitment to achieve these goals.

Absorption is the ability to be totally focused and happily absorbed in working, in which time flies by, making it difficult to shift attention away from the tasks at hand (Schaufeli & Bakker, 2004). Work engagement is characterized as a profound commitment to one's tasks. Engaged employees display a heightened level of concentration and consider essential details while delving into the core of challenging problems. This increased involvement goes beyond simple participation; engaged employees become immersed in their work, experiencing a state of "flow" where employees lose track of time, and distractions seem to disappear (Bakker & Leiter, 2010). This immersive engagement characterizes a state where employees are deeply absorbed in their tasks, contributing to an increasing quality of work and sustained focus.

Research has shown that structural empowerment enhances work engagement (Laschinger et al., 2009), which, in turn, is correlated with higher job satisfaction and lower rates of burnout (Laschinger et al., 2006). In the 21st century, it is of great importance to have an engaged healthcare staff, for the following reasons: a growing demand for healthcare services as a consequence of a rapidly aging population, leads to an increased need for healthcare workers, who themselves are also getting older (Szilvassy & Širok, 2022). In this specific sector, the engagement provided by the employees can be explained by different factors at organizational and individual levels. And so, organizations can enhance employee's work engagement levels by addressing these factors (Szilvassy & Širok, 2022). According to the meta-analytic review conducted by Lesener et al. (2020), the factors that fuel work engagement are sorted into group level, leader level, and organizational level job resources. The study also confirmed that job resources positively impact work engagement.

Furthermore, Van Bogaert et al. (2014) enumerated various individualities of a nurse's work environment that directly impact work engagement, which are: high

responsibility, the span of control and workload, mental and physical workload, lack of job control, job complexity, difficult nurse–doctor collaboration, lack of opportunities for intellectual and professional growth, effort–reward imbalance, role ambiguity, deficient social support by supervisor and/or colleagues and inadequate leadership. Work engagement can also be impacted by fellow employees and job-related factors, including work experience (Bjarnadottir, 2011), colleague relationships and support, effective leadership, and communication (Jenaro et al., 2011).

In the context of WE, it is imperative to delve into the Job demands-resources Theory. The JD-R model (Bakker & Demerouti, 2007; Demerouti et al., 2001; Demerouti & Bakker, 2011) has been widely employed to offer theoretical support in various studies predicting job burnout, organizational commitment, work enjoyment, job performance, employee turnover, and work engagement (Bakker et al., 2005, 2007, 2008; Demerouti et al., 2001). The JD-R model has evolved into a recognized theory due to its adaptability and widespread acceptance in research literature (Bakker & Demerouti, 2014).

In any work setting, two categories of job attributes can be characterized: job demands and job resources (Bakker & Demerouti, 2017; Demerouti et al., 2001). Job demands cover the physical, psychological, social, or organizational aspects of a job that necessitate ongoing cognitive and emotional effort or skill (e.g., work pressure, cognitive demands), which can be measured through their psychological and physiological impacts (Bakker & Demerouti, 2007; Demerouti et al., 2001). Job resources, however, include the physical, social, or organizational aspects of the job that help employees reach their goals, ease job demands, and lower the physical and mental toll (e.g., social support, task significance, and opportunities for growth). Most importantly, these resources positively impact personal growth, learning, and development. Previous research highlights that these resources are not just needed to handle job demands but are valuable in their own way (Bakker et al., 2007; Demerouti et al., 2001; Demerouti & Bakker, 2011). Thus, individuals are better equipped and willing to actively engage in their roles when they can effectively manage various demands and possess the ability to employ coping strategies (Gruman & Saks, 2011).

Job demands basically consume energy as they require being addressed. On the other hand, job resources essentially generate motivation, involving the voluntary initiation of action to achieve goals, and they also mitigate the effects of job demands on employee well-being and performance (Bakker & Demerouti, 2017). These principles suggest that the absence of a job demand lacks motivating potential, while the absence of a job resource is

not inherently stressful; instead, it means that the voluntary initiation of action to achieve work-related goals is not facilitated (Demerouti & Bakker, 2023).

Leadership plays a vital role in shaping employee attitudes and behaviors, directly influencing engagement, motivation, and overall performance. Among the various leadership styles, ethical leadership stands out as particularly impactful, significantly enhancing employee work engagement (Sugianingrat, 2017). Research has also shown a strong relationship between ethical leadership and different dimensions of work engagement within corporate settings (Dhar, 2016).

Macey et al. (2009) suggest that work engagement occurs when employees possess the capacity, motivation, freedom, and knowledge to engage in their roles. Ethical leadership can foster work engagement by promoting these qualities in employees, aligning with the framework proposed by Macey et al. (2009).

Employees are able to engage effectively when organizations provide the necessary information, training, and supportive structures that enhance their performance (Macey et al., 2009). Ethical leaders promote this by offering essential job resources, such as effective performance feedback and relevant information, to help employees excel in their roles. Bakker & Demerouti (2008) state that these resources positively influence work engagement by providing employees with the support they need to succeed.

Furthermore, Macey et al. (2009) claims that employees are more likely to engage in their work when they understand the organization's strategic priorities and how their roles contribute to these goals. Ethical leaders encourage this by caring for their employees and maintaining open lines of communication (Brown & Treviño, 2006). By doing so, they ensure that employees are aware of the organization's objectives and their specific responsibilities.

Also, Ahmad & Gao (2018) confirmed that the integration of ethical leadership had a positive impact on employee engagement. They proposed that ethical leaders play a crucial role in fostering a positive workplace environment, which is essential for achieving organizational success, as these leaders nurture and motivate employees to actively participate in their tasks. These authors concluded that the inclusion of diverse samples from various cultural backgrounds and industries could strengthen the validity of their findings. Hence, this current research incorporated a sample from the healthcare sector and employed a quantitative approach to examine the impact of ethical leadership on work engagement.

Thus, it can be hypothesized that ethical leadership positively influences employees' work engagement.

Hypothesis 2: Ethical leadership is positively related to work engagement.

Work Engagement and Organizational Citizenship Behavior

It is also important to study possible mediating effect of OCB, as it can be described as actions taken by individuals within an organization that go beyond their formal job requirements, are not necessarily rewarded directly, and collectively contribute to the overall success and efficiency of the organization (Organ, 1988). This author also states that OCB emerges when employees display high levels of motivation and proactiveness in their jobs, which positively affects the organization's efficiency and performance (Organ, 1997). Another particular and important aspect about this behavior is its voluntary nature, it is not imposed by the organization as a formal requirement (Bester et al., 2015).

Organizational Citizenship Behavior, as defined by Podsakoff et al. (2000), encompasses voluntary actions that are not formally acknowledged by the reward system but play a crucial role in improving the overall functioning of the organization. These behaviors extend beyond the core job responsibilities, enhancing both the effectiveness and the social dynamics within the workplace.

Literature has described more than 40 different types of OCBs (LePine et al., 2002), however, it is imperative to add that the model that continues to serve as a reference in this field is the one suggested by Organ (1988). Its justification lies on two factors: it is the model that has been used in most of the studies conducted until now and it is the model that has proven to have the biggest amount of empirical evidence and backing for the validity of its constructs.

Organizational Citizenship Behavior can be broken down into five key components, which are: altruism, conscientiousness, sportsmanship, courtesy, and civic virtue (Smith et al., 1983). Altruism, as defined by Organ (1988), encompasses behaviors that show availability in helping co-workers achieve their tasks, such as providing support to new employees or assisting other employees who might be overwhelmed with their workload. Conscientiousness, also outlined by Organ (1988), involves behaviors that reveal that an employee shows a special focus and care while undergoing the tasks that are required, for instance strictly adhering to the organization's protocols and guidelines or being diligent in their attendance. Sportsmanship refers to the display of a positive attitude and commitment to the organization, often highlighting the company's strengths and qualities or overlooking less favorable aspects (Organ, 1988). Courtesy, within Organ's (1988) framework, involves fostering relationships founded upon kindness and collaboration, for example avoiding

disagreements and being able to always prioritize the well-being of others. As for civic virtue, it incorporates behaviors that reflect a great sense of responsibility towards the organization, such as providing guidance, and suggesting solutions to improve the organization's efficiency (Organ, 1988).

According to Jacobs & Roodt (2008), OCB can also be seen as a particular feature of organizational culture. Organizational culture encompasses a set of values, beliefs, and behavioral norms that not only define the fundamental identity of an organization but also play a significant role in influencing employee behavior. Employees may exhibit various examples of OCB behavior, including providing assistance to co-workers, working beyond scheduled hours, working during the weekend, surpassing expected performance standards, actively engaging in the organization's affairs, and demonstrating tolerance for inconveniences and demands (Jacobs & Roodt, 2008). Organizational goals can be effectively executed when employees demonstrate a willingness to go above and beyond their designated job responsibilities (Chattopadhyay, 2019). Organizations that possess employees who demonstrate high OCB gain a competitive edge and exhibit high levels of productivity (Morales-Sánchez & Pasamar, 2019). Nonetheless, a limited number of organizations own a well-defined strategy for organizational citizenship behavior. Therefore, organizations must synchronize their human resource management practices with their strategic goals (Tashtoush & Eyupoglu, 2020).

Research on leadership studies has highlighted the significant roles that leaders play in promoting OCB, underlining its importance (Jensen et al., 2019). Many employees look forward to positive leadership when starting a new job, as it nurtures organizational commitment and citizenship. However, the absence of appropriate leadership styles can block this expectation (Chang et al., 2019).

OCB can be defined as a unique aspect of work behavior, as it encompasses actions that benefit the organization, extending beyond formal reward systems (Obamiro et al., 2014). It is often linked to the unspoken understanding between individuals and the organization, where people anticipate being recognized or appreciated by their employer or the organization (Obamiro et al., 2014). OCBs have significant importance for front-line healthcare employees, since they are the ones who have more contact with patients, making their role pivotal in ensuring healthcare excellence (Kazemipour et al., 2012).

Empirical studies have established a connection between WE and OCB, as WE can be related to required job duties and voluntary organizational citizenship behaviors at work (Christian et al., 2011). When employees exhibit high levels of engagement, they tend to

invest themselves fully in their roles and demonstrate a heightened enthusiasm for exceeding their prescribed job responsibilities. This dedication often translates into voluntary behaviors that benefit the organization, characteristic of OCB (Lyu et al., 2016; Matta et al., 2015).

As a result, when an engaged staff member demonstrates positive behaviors that benefit colleagues or the organization, the recipients of these actions are likely to reciprocate with similar behaviors as a form of acknowledgment. Furthermore, previous research has suggested a positive correlation between WE and OCB (Ismael et al., 2021). In a study examining the potential link between OCB and WE, the findings yielded a strong association (Chernyak-Hai & Tziner, 2013).

Employees that are engaged in their job extend beyond personal interests when determining their work priorities and exhibit improved resilience in managing the daily demands of their jobs (Loehr & Schwartz, 2003). This commitment is particularly crucial in the healthcare sector, where engaged healthcare personnel contribute to the delivery of remarkable healthcare services. Engaged healthcare professionals provide high-quality, efficient, and affordable care and engage in tasks and responsibilities that go beyond what is asked of them in their job descriptions (Christian et al., 2011).

Hypothesis 3: Work engagement is positively related to OCB.

Organizational Citizenship Behavior and Turnover Intention

Organizational citizenship behavior is seen as a favorable work behavior among employees, which strengthens the social cohesion and environment of an organization (Borman & Motowidlo, 1993). When employees encounter such favorable behaviors, it makes them feel more motivated and choose to remain in their current jobs (Reijseger et al., 2012). Similarly, a study conducted by Cohen-Charash & Spector (2001), has stated that 5% to 10% of the employees decided to leave their positions due to a decrease in OCB. Companies that observe this type of behavior among their employees can achieve high levels of employee retention (Dash & Pradhan, 2014). Hospitals where healthcare professionals exhibit OCB cultivate an environment that encourages them to not leave their jobs, as commitment is a crucial mindset in any profession. When nurses demonstrate OCB, it demonstrates their commitment to both their hospital and the individuals they care for (Dargahi et al., 2012).

According to Chen (2005) and Chen et al. (1998), behavioral antecedents are key predictors of both turnover intention and actual turnover, suggesting that OCB can

effectively forecast turnover intention. Several studies (e.g., (Chen, 2005; Chen et al., 1998; Podsakoff et al., 2009) have examined the link between OCB and turnover intention, indicating that levels of OCB reflect an employee's desire to engage with the organization. In particular, (Chen et al., 1998) conducted a study involving 205 supervisor-subordinate pairs from 11 organizations in China. Their findings revealed that employees who exhibited lower levels of OCB, characterized by reduced altruism, sportsmanship, and conscientiousness, were more likely to consider leaving their jobs. In contrast, those who displayed higher levels of OCB were less likely to have turnover intentions. Thus, lower levels of OCB signal an employee's reluctance to remain with the organization, which corresponds with a higher likelihood of leaving.

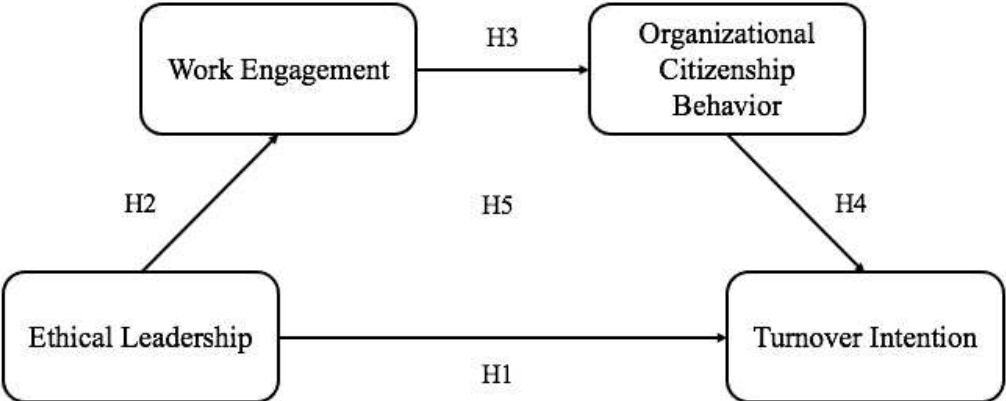
The relationship between an individual's level of OCB and turnover intention can be explained through Cognitive Consistency Theory. According to this theory, proposed by Festinger (1957), people strive to maintain harmony between their behaviors, beliefs, and attitudes. This means individuals naturally seek consistency among their thoughts and actions. Therefore, when someone demonstrates positive behaviors, such as a high level of OCB, this consistency should lead to attitudes and actions that align with those behaviors, such as showing a lower intention to leave their current job.

Hypothesis 4: OCB is negatively related to turnover intention.

In light of the preceding literature, we propose that Work Engagement and Organizational Citizenship Behavior play a significant mediating role in the relationship between Ethical Leadership and Turnover Intention. As the literature review suggests that ethical leaders, by fostering a positive and engaging work environment, not only enhance employees' engagement but also encourage organizational citizenship behaviors. These behaviors, in turn, are associated with a lower intention to leave the organization among employees. Thus, our hypothesis proposes the following mediating model:

Hypothesis 5: Ethical Leadership directly influences Work Engagement, which positively affects Organizational Citizenship Behavior, ultimately leading to reduced Turnover Intention.

Figure 1. Research Model



Chapter III: Method

Participants

A total of 115 participants were included in the study, all of whom were required to be currently employed as nurses, working in either the public or private healthcare sector. This allowed for a diverse sample representing nurses from both sectors. The sample consisted predominantly of female nurses, with 103 participants (89%) identifying as female and 12 participants (11%) identifying as male. The participants' ages ranged from 22 to 64 years, with an average age of 31 years and a standard deviation of 9 years. Regarding dyadic tenure, which refers to the duration of working under their current supervisor, the average length was 2.29 years, with a standard deviation of 2.15 years. This measure provides insight into the stability and duration of the professional relationship between the nurses and their current supervisors.

Participants reported working an average of 39 hours per week, with a standard deviation of 5.19 hours. This figure reflects the typical weekly workload of the sample and indicates variability in working hours among participants. Additionally, participants rated how often they worked with the same colleagues during their shifts, with an average rating of 3.76 on a scale from 0 to 5, and a standard deviation of 1.01. This implies that the majority of the participants work regularly with the same people as a team.

This demographic profile provides a comprehensive overview of the participants involved in the study.

Procedure

For this study we utilized an online survey developed on Qualtrics software to gather data from the participants. To recruit respondents, the link of the survey was disseminated through email and shared across various social media platforms (LinkedIn, Facebook and Instagram). Regarding data collection, a convenience sample strategy was utilized, which allowed easy access to participants who were readily available. Followed by a snowball procedure which further expanded the sample size, where participants were encouraged to forward the survey link to other potential respondents within their network. This data collection was conducted over an extended period, from February to June of 2024.

Throughout the process, participants were guaranteed anonymity in accordance with the mandatory ethical standards of scientific research. Before beginning the survey, they were informed about the voluntary nature of their participation and were advised that they could withdraw at any time during the process without any consequences. Additionally, we

ensured that all responses were collected and stored securely and confidentially. This approach aimed to create a comfortable environment that encouraged honest and unbiased participation.

Measures

Ethical leadership was measured using the Ethical Leadership Scale (ELS) developed by Brown et al. (2005). Specifically, EL was measured through the Portuguese version of the scale, the P-ELS, which was adapted by Silva and Duarte (2022). The scale consists of ten items, which includes: “My manager/leader listens to what employees have to say”; “My manager/leader disciplines employees who violate ethical standards”. The participants rated the items on a 5-point Likert scale (ranging from 1 - Strongly Disagree to 5 - Strongly Agree). The scale demonstrated excellent internal consistency, with a Cronbach’s alpha of 0.91.

Work engagement was measured with the Portuguese version of the 9-item Utrecht Work Engagement Scale (UWES) (Schaufeli & Bakker, 2004) validated by Sinval et al. (2018). This scale comprehends three dimensions of WE: vigor (3 items; e.g. “At my work, I feel bursting with energy”), dedication (3 items; e.g. “I am enthusiastic about my job”) and absorption (3 items; e.g. “I feel happy when I am working intensely”). The items were rated on a 5-point likert scale (1 – Never; 5 – Always). This abbreviated version of the UWES was selected based on Schaufeli & Bakker’s (2004) work and its demonstrated high reliability. Following previous research (e.g., Sinval et al., 2018), in this study, we chose to use the scale as unifactorial. This scale showed strong reliability, with a Cronbach’s Alpha of 0.84.

Organizational Citizenship Behaviors, the scale by Podsakoff et al. (1997) was used. This scale is composed by 13 items and comprehends three dimensions of OCB: helping (6 items; e.g. “Try to act like peacemakers when other crew members have disagreements”), civic virtue (3 items; e.g. “Provide constructive suggestions about how the crew can improve its effectiveness”) and sportsmanship (3 items; e.g. “Consume a lot of time complaining about trivial matters”). The results were given by applying a 5-point Likert scale (ranging from 1 – Strongly Disagree to 5 – Strongly Agree). Following previous research (e.g., Tremblay, 2019), in this study, we chose to use the scale as unifactorial. The scale demonstrated a Cronbach’s Alpha of 0.79.

Turnover intention was measured with the 4-item scale by Kelloway et al. (1999). The items were rated on a 5-point Likert scale (1 - Strongly Disagree to 5 - Strongly Agree), Items include: “I am thinking about leaving this organization”; I am planning to look for a

new job”; “I intend to ask people about new job opportunities”). The scale demonstrated excellent internal consistency, with a Cronbach’s alpha of 0.94.

The scales that measured OCB (13-item scale by Podsakoff et al. (1997)) and TI (4-item scale by Kelloway et al. (1999) were translated and adapted to Portuguese, using the translation-retroversion method conducted by two independent judges (Brislin, 1970).

Sociodemographic variables were collected to characterize the sample, and for control purposes. It was important to consider factors that would be relevant to the context of this study and would provide insights into potential variations in responses. Given that, in this particular scenario, it was pertinent to focus on the following aspects, as described below.

Participants were questioned about their age, since it could influence work attitudes, career aspirations, and perspectives on leadership. Research also reinforces that, younger and older nurses may have different expectations and levels of experience in the healthcare sector (Tourangeau et al., 2010). The respondents were also inquired about their gender, this factor might influence perceptions of leadership styles and workplace dynamics. Research suggests that gender differences can impact job satisfaction and turnover intention in healthcare settings (Hayes et al., 2010).

The weekly working hours of each respondent was included in this part of the survey, as the number of weekly working hours can influence work-life balance, job satisfaction, and overall well-being. Longer working hours might be associated with higher stress levels and, consequently, impact turnover intention (Sparks et al., 1997).

It was taken into consideration the number of years each participant had been working under their current leader, since the duration of time working under a specific leader can influence the quality of the leader-follower relationship, trust, and the impact of the leader's ethical behavior on the employee. Longer tenure may provide a more comprehensive understanding of the ethical leadership style and its effects on turnover intention (Brown et al., 2005). The frequency with which the participants collaborate with the same colleagues during work shifts was inquired, as the regularity of working shifts with the same colleagues may affect team cohesion, communication, and collaboration. High levels of interaction may impact perceptions of ethical leadership within the team and subsequently influence turnover intention (Felps et al., 2009).

Chapter IV: Data Analysis and Results

Descriptive Analysis and Bivariate Analysis

The descriptive statistical analysis and variable correlations are summarized in Table 1. The correlation coefficients are aligned with the expectations and provide preliminary support for the study's findings. There is a negative relationship between ethical leadership and turnover intention ($r = -0.42, p < .001$), and a positive relationship between ethical leadership and work engagement ($r = 0.23, p = 0.13$). Additionally, work engagement is positively correlated with OCB ($r = 0.43, p < .001$). However, organizational citizenship behavior appears to have a weak correlation with turnover intention ($r = -0.36, p < .001$). These significant correlations, which align with expectations, provide preliminary support for the proposed relationships.

Table 1. Mean, Standard deviation, and correlations.

Variable	Mean	SD	1	2	3	4	5	6	7	8
1. Age	31.12	9.01	1							
2. Gender	-	-	-0.37**	1						
3. Working Hours	39.11	5.19	-0.19*	-0.09	1					
4. Dyadic Tenure	2.29	2.15	0.43**	-0.22*	0.03	1				
5. Shifts	3.76	1.01	0.01	0.08	-0.09	-0.24**	1			
6. EL	3.41	0.79	0.30**	-0.05	0.08	0.11	0.01	1		
7. WE	3.45	0.57	0.20*	-0.02	0.08	0.15	0.08	0.23*	1	
8. OCB	3.87	0.43	0.22*	-0.10	0.12	0.08	0.15	0.28**	0.43**	1
9. TI	2.82	1.09	-0.30**	0.05	0.04	-0.09	-0.34**	-0.42**	-0.42**	-0.36**

Note. $N = 115$. EL, ethical leadership; WE, work engagement; OCB, organizational citizenship behavior; TI turnover intention. **Correlation is significant at the 0.01 level 2 (2-tailed). *Correlation is significant at the 0.05 level (2-tailed)

Hypothesis Testing

To further test the sequential mediation model and all the direct and indirect hypotheses, Hayes' Process macro (Hayes, 2012) was utilized, which Field (2013) describes as the most effective approach for addressing sequential mediation. In our hypothesized model, work engagement and OCB sequentially mediate the relationship between ethical leadership and turnover intention.

Hayes' Process Model 6 was employed to test our theory on a sample of 115 participants, using parameter estimates based on 5000 bootstrap samples. We then examined the bias-corrected and accelerated 95% confidence intervals. The results of the PROCESS analysis indicate that ethical leadership predicts turnover intention ($\beta = -0.3259$, 95% CI [-0.6625, -0.2263], $t = -4.0397$, $p < .001$) and work engagement ($\beta = 0.1953$, 95% CI [0.0040, 0.2800], $t = 2.0400$, $p = 0.04$), thereby supporting hypotheses 1 and 2, respectively (see Table 2). Additionally, the results indicate that work engagement significantly enhances OCB among employees ($\beta = 0.3402$, 95% CI [0.1213, 0.3804], $t = 3.8381$, $p < .001$), thus supporting hypothesis 3. However, the findings indicate that OCB does not significantly predict turnover intention ($\beta = -0.0470$, 95% CI [-0.5479, 0.3090], $t = -0.5527$, $p = 0.58$), which does not support hypothesis 4. Overall, our model explains 42% of the variance in turnover intention. The results of the hypothesis testing are illustrated in Figure 2.

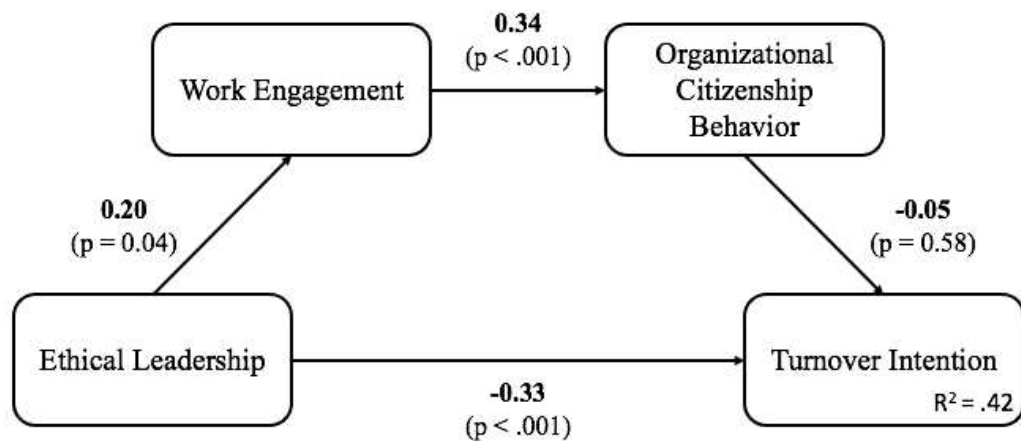
The analysis of the model's indirect effects did not produce statistically significant results. The sequential mediation effect of WE and OCB on the relationship between ethical leadership and turnover intention was found to be negligible, with an effect size of -0.0031 and a 95% confidence interval [-0.0224, 0.0090]. This result indicates that the sequential mediation effect is not statistically significant and, therefore, does not support hypothesis.

Table 2. Results of sequential mediation (direct and indirect effects).

Model Pathways	β	SE	t	p	LLCI	ULCI
Direct Effect						
H1: EL - TI	-0.33	0.11	-4.04	<.001	-0.663	-0.226
H2: EL - WE	0.20	0.07	2.04	0.04	0.004	0.280
H3: WE - OCB	0.34	0.07	3.84	<.001	0.121	0.380
H4: OCB - TI	-0.05	0.22	-0.55	0.58	-0.548	0.309
	Estimated	BootSE		BLLCI	BULCI	
Indirect Effect						
H5: EL - WE - OCB - TI	-0.003	0.008			-0.022	0.009

Note. BootSE, Bootstrapped standard error estimate; BLLCI, Bootstrapped lower limit confidence interval; BULCI, Bootstrapped upper limit confidence interval; 95% bootstrap, 5,000. The table presents only the results of the hypothesis tests; however, the full output is available in the appendix for consultation (see Appendix II).

Figure 2. Sequential mediation model linking ethical leadership and turnover intention.



Chapter V: Discussion

Nursing turnover remains a critical challenge for healthcare leaders and workforce researchers, presenting a problem that is both complex and multifaceted, impacting all areas of healthcare (LeVasseur et al., 2009). The high rate of employee turnover in healthcare not only disrupts organizational stability but also has detrimental effects on the quality of care, patient outcomes, and employee morale. Therefore, it is imperative for healthcare organizations to prioritize and implement effective strategies to mitigate excessive turnover (Al-Suraihi et al., 2021).

The phenomena of turnover and intention to leave are inherently complex, influenced by a multitude of determinants that have far-reaching implications for both the quality of care delivered and the long-term sustainability of healthcare systems (Falatah & Salem, 2018).

Given these complexities, the current study examined the relationships between ethical leadership, work engagement, organizational citizenship behavior, and turnover intention. Our analysis tested several hypotheses to determine if work engagement and OCB served as mediators in the relationship between ethical leadership and turnover intention, with the aim of providing insights that could inform more effective retention strategies in the healthcare sector.

This study suggests that leaders, by serving as role models within their healthcare organizations and demonstrating ethical leadership behavior, positively influence their employees. Furthermore, it is argued that ethical leadership has a ripple effect throughout the workplace, influencing employees through social interactions. In essence, when managers lead with honesty and integrity, it creates a positive cycle where ethical behavior boosts employee engagement and sense of loyalty, ultimately leading to lower turnover intention.

The findings of this study show that some hypotheses were supported, and although the sequential mediation was not substantiated, the results provide relevant insights that will be discussed further. Specifically, ethical leadership has a direct impact on work engagement, which in turn reduces turnover intention among employees. However, contrary to our expectations, OCB did not significantly mediate the relationship between ethical leadership and turnover intention, thus the proposed conceptual model did not work as anticipated. While ethical leadership and WE are crucial in decreasing turnover intention,

the role of OCB as a mediating variable in this context was neither statistically significant nor a strong predictor of employees' intention to stay or leave.

Even when the statistical results of a study are not significant, the study's value is not diminished. According to several sources, research significance is determined by factors like addressing important challenges, introducing original ideas, providing practical insights, and utilizing a sound research design (Bono & McNamara, 2011; Colquitt & George, 2011). Additionally, the study should be well-constructed, clearly demonstrate its relevance, and offer directions for future research (Geletkanycz & Tepper, 2012).

Moreover, a study conducted by Hill et al. (2020), explains that statistical non-findings should meet the same standards for contributing to research as other studies. While non-significant results are less common in journals, they can still provide valuable contributions if the topic, methodology, and presentation are strong and help expand knowledge. In line with this perspective, this study aligns with these standards, as it addresses key challenges within the field, employs a robust methodological approach, and offers valuable insights for future research despite the lack of statistically significant findings in one of the hypotheses proposed.

Ethical Leadership and Turnover Intention

The results support the hypothesis that ethical leadership significantly reduces turnover intention. These findings strongly align with and contribute to the growing body of research that emphasizes the importance of ethical leadership in reducing turnover intention. Numerous studies have demonstrated that ethical leadership positively influences employee attitudes and behaviors, leading to lower turnover rates. For instance, a systematic review highlights ethical leadership as a powerful predictor of reduced turnover intention in hospital settings, underscoring its critical role in nurse retention and organizational stability (Pattali et al., 2024). This is particularly significant in the healthcare sector, where high turnover rates among nurses have been consistently reported.

Moreover, the study conducted by Elçi et al. (2012) validates that ethical leadership has a mitigating effect on both work-related stress and turnover intention, suggesting that ethical leaders create a supportive and fair work environment while alleviating stressors that often lead to turnover. These findings, along with the implications of this study, align closely with the established body of literature, demonstrating that ethical leaders who prioritize transparency, fairness, and employee well-being contribute to an organizational culture that

values and retains its workforce, ultimately enhancing the overall stability of the organization.

Ethical Leadership and Work Engagement

The study found a positive relationship between ethical leadership and work engagement, supporting Hypothesis 2. This finding aligns with previous literature, which suggests that ethical leaders enhance employees' motivation and engagement by fostering a fair and supportive work environment (Brown & Treviño, 2006). Ethical leadership encourages transparent communication and respect for employee well-being, which in turn increases engagement levels.

Previous studies have also demonstrated the statistical significance of these findings. Den Hartog & Belschak (2012) found that ethical leadership is positively associated with work engagement. They argue that emphasizing shared moral values and the honesty, care, and fairness demonstrated by ethical leaders enhances employees' work engagement. Their study showed that employees report higher engagement when they perceive their leaders as ethical. Moreover, Macey et al. (2009) suggests that employees are motivated to engage in their work when they feel respected and valued by their organization. The results of both previous research and the current study show that when leaders demonstrate ethical behavior, they set a standard for transparency and fairness, which increases employees' willingness to invest themselves fully in their work, and become engaged in their daily tasks.

In fact, the positive relationship between ethical leadership and work engagement has significant implications for organizations. High levels of work engagement are associated with numerous beneficial outcomes, including improved job performance, reduced absenteeism, and lower turnover rates (Neuber et al., 2022). This study further contributes to the growing evidence that ethical leadership is not just a moral obligation but also a practical necessity for organizations that want to enhance employee engagement. In today's competitive environment, where employee engagement is closely tied to success, ethical leadership becomes essential for maintaining high levels of engagement.

Work Engagement and OCB

The findings support Hypothesis 3, showing that work engagement significantly enhances OCB among employees. The results suggest that employees who are more engaged with their work are more likely to engage in behaviors that benefit the organization beyond their formal job duties. This finding highlights the importance of fostering work engagement as a means to boost organizational citizenship behaviors.

When employees are highly engaged in their work, they are naturally inclined to demonstrate OCB. Kennedy and Daim (2010) suggest that when employees are engaged, they act in ways that further the organization's goals. Towers Perrin (2003) also reports that engaged employees often exert discretionary effort, putting in extra time, energy, and cognitive resources to excel in their roles. This effort stems from their strong emotional attachment to the organization, making them highly involved in their jobs and enthusiastic about contributing to the success of the organization (Markos & Sridevi, 2010). As a result, they often exceed formal expectations, working beyond their official duties to help their organization thrive.

A high level of work engagement naturally fosters proactive behaviors, encouraging employees to take initiative and actively contribute beyond their formal job responsibilities (Salanova & Schaufeli, 2008). Engaged employees are not only focused on meeting their role expectations, but also go the extra mile, participating in activities that extend beyond their formal duties. This heightened engagement stems from a deep sense of passion and commitment to the organization. When employees are truly engaged, they enjoy and believe in their work, feeling valued and motivated to contribute more. Their ability to efficiently accomplish tasks creates the capacity for them to pursue additional responsibilities, leading to increased Organizational Citizenship Behaviors (Ariani, 2012).

Engagement also fosters proactive behaviors, encouraging employees to take the initiative and contribute in ways that go beyond what is required (Salanova & Schaufeli, 2008). Engaged employees often display higher responsibility and a greater inclination to perform extra-role tasks (Ariani, 2013; Rich et al., 2010). They tend to complete their tasks efficiently, freeing up time and energy to take on additional duties (Sulea et al., 2012). Work engagement acts as a vital resource, especially when job resources are abundant, increasing employee motivation even in high-demand environments (Bakker & Demerouti, 2007; du Plooy & Roodt, 2010). As motivation rises, employees become more resourceful, enhancing both their performance and contribution to the organization's overall success (Shridhar & Thiruvankadam, 2014). The more engaged employees are, the more likely they are to pursue extra responsibilities, which in turn increases OCB (Ariani, 2012).

These findings highlight the vital role of work engagement in fostering OCB. When employees are engaged to both their work and the organization, they exceed expectations and contribute beyond their formal duties.

OCB and Turnover Intention

The results suggest that OCB does not have a significant impact on turnover intention among nurses. Contrary to the hypothesis that higher levels of OCB would be associated with lower turnover intention, the findings show that variations in OCB do not correspond to meaningful changes in the likelihood of nurses intending to leave their organization. With the sample of this study, it is evident that encouraging or promoting OCB may not directly influence whether nurses choose to stay with or leave their current employer.

One possible explanation for this outcome is that in the nursing profession, OCB may be an inherent part of the job. In other words, nurses may engage in OCB not as a voluntary, discretionary behavior that could signal their commitment to the organization, but rather as a necessary and expected part of their role. According to Van Dyne & Ellis (2004), in professions requiring high emotional labor, such as nursing, teaching, and caregiving roles, there is often a gradual shift where behaviors that should be voluntary, like OCB, become expected as a standard part of the job. This "creep" in expectations means that OCB, which is meant to be discretionary, is increasingly seen as part of regular duties.

In nursing, actions such as helping colleagues, staying late to ensure patient care, or going beyond job expectations are considered typical daily behavior (Chambliss, 1996). As a result, these behaviors could be viewed as part of the professional identity rather than voluntary actions. This may explain the findings in this study, where such expectations could dilute the potential for OCB, weakening its ability to predict turnover intention.

Moreover, it is important to consider that sometimes associations between variables may not appear significant in a study. However, this does not necessarily mean that no association exists; rather, it might indicate that the relationship between the variables is influenced by other contextual factors (i.e., moderators) that were not captured in this analysis. For example, factors such as team cohesion could play a crucial role in influencing turnover intention and might interact with OCB in complex ways. Since the literature recommends that future research on turnover incorporate the use of moderators, which influence the direction and strength of the relationship between turnover and its outcomes (Bae et al., 2010), we suggest that further research focus on team cohesion as a possible moderator.

According to Weir (2018), team cohesion describes the depth and quality of the relationships between team members, highlighting their collective commitment to achieving shared objectives, mutual trust, and a harmonious working dynamic. This cohesion is crucial for the success of teams across various sectors, including healthcare, military, and research

environments. Exploring how team cohesion influences various outcomes could offer valuable insights into its role within the relationship between ethical leadership and turnover intention.

Since the association between OCB and TI did not prove to be significant, it was not possible to support the hypothesis of a sequential mediation. This means that the study did not find enough evidence to show that the mediating variables explained the relationship between the independent and dependent variables.

Implications

The findings of this study contribute significantly to the existing literature on ethical leadership and its impact on turnover intention, particularly in the healthcare sector. While previous research has shown that ethical leadership can predict and reduce employee turnover intention (Shafique, 2018), its specific role in healthcare settings remains little explored. This study helps fill that gap by offering a deeper understanding of how ethical leadership influences work engagement and turnover intention.

Ultimately, the relationship between ethical leadership and turnover intention is both significant and complex. The findings from this study not only reinforce existing theories (Elçi et al., 2012), but also offer practical guidance for healthcare organizations aiming to reduce turnover rates. By fostering an ethical work environment, healthcare leaders can enhance employee retention, ultimately contributing to the long-term success of the organization.

This study also contributes to the existing theory by demonstrating that the hypothesis regarding OCB and TI did not hold with the sample used in this study. While the literature generally supports the relationship between OCB and TI (Chen, 2005; Chen et al., 1998; Cohen-Charash & Spector, 2001), my findings suggest otherwise. This indicates that under certain conditions or within specific populations, such as the sample used in this study, the expected relationship may not hold, thereby challenging established assumptions about OCB's role in mitigating turnover intention. This not only challenges existing theoretical assumptions but also calls for further exploration of how context-specific factors, such as the nursing profession, may alter established relationships between key organizational variables.

The findings of the current study present practical implications for hospital administrators, policymakers, and healthcare organizations. To enhance work engagement while reducing employee turnover, hospitals should promote ethical leadership at all

supervisory levels. This requires expanding the focus beyond merely achieving organizational goals to fostering a supportive, values-driven work environment.

This study highlights that organizations can greatly benefit when employees perceive a strong ethical leadership. These positive perceptions can be strengthened through various management practices, such as fostering two-way communication and encouraging interactions between staff and leaders (Brown et al., 2005). Recent studies (Heyler et al., 2016) have noted a growing trend in organizations to implement training programs aimed at developing ethical leadership skills. For example, healthcare centers may establish organizational procedures that prioritize ethical leadership by integrating ethical considerations into their core values and management decisions (Feng et al., 2018). Administrators can further promote ethical leadership by implementing leadership development programs, hosting ethical decision-making workshops, and establishing mentorship initiatives for supervisors to reinforce ethical behavior throughout the organization.

Ethical leadership not only delivers immediate benefits but also contributes to long-term positive outcomes for organizations, as it can assist organizations in establishing a solid ethical framework within their work environment (Odeneye et al., 2018). For instance, research has shown that ethical leadership is a powerful strategy for reducing turnover intention (Saleh et al., 2022). Additionally, Gillet et al. (2018) found that ethical leadership positively affects caregivers' psychological well-being, which in turn enhances patients' perceptions of care quality.

Over time, ethical leadership cultivates a robust organizational culture characterized by integrity and collaboration (Demirtas & Akdogan, 2015), which could be essential for sustaining high-quality care in healthcare settings. As ethical leadership gains prominence in organizational behavior, it helps build a solid ethical foundation within healthcare environments.

In summary, these findings highlight the importance of cultivating ethical leadership practices to enhance work engagement and reduce turnover rates. Leaders should prioritize clear communication, fairness, and support to maximize employee retention. By adopting these strategies with a focus on ethical leadership, organizations can achieve lasting benefits, including improved patient care, a stronger organizational culture, and higher retention rates.

Limitations of the study and Future Research

The current study's findings should be considered in light of some limitations, which offer opportunities for future research. Despite the valuable insights gained, this study has some limitations, including the limited sample size and cultural context, which may affect the generalizability of the results.

It is important to acknowledge that the small sample size in the study may limit the generalizability of the findings, representing a potential limitation that should be considered when interpreting the results. As previous research reviews have highlighted the importance of larger sample sizes, given the challenges of generalizing results from smaller samples (Baernholdt & Mark, 2009). Literature recommends using larger sample sizes that encompass nurses from diverse academic backgrounds and geographical regions (Lavoie-Tremblay et al., 2011). Additionally, low response rates in some studies (Lavoie-Tremblay et al., 2011; Rhéaume et al., 2011) have made it challenging to draw broad and reliable conclusions from the data.

The use of self-report questionnaires in this study raises the potential for common method bias, which can significantly threaten the validity of research findings (MacKenzie & Podsakoff, 2012). Addressing this issue requires a thoughtful and multi-faceted approach, as researchers must consider its effects and apply appropriate procedural and statistical techniques to minimize its impact (Podsakoff et al., 2024). To mitigate the effects of social desirability bias, participant anonymity was ensured. However, future research could address this issue by employing alternative measurement techniques, such as utilizing observational methods or experience sampling to capture employees' activities and behaviors throughout their shifts.

Additionally, since the surveys were administered exclusively to Portuguese nurses, the findings may not be applicable to other countries. Future research could focus on the healthcare environment while expanding the study to include other nations.

The literature recommends employing longitudinal research to investigate the values that influence both the decision to leave a position and the choice of a subsequent career (Leiter et al., 2010), as cross-sectional research designs provide only a snapshot of data at a single point in time and are limited in their ability to track trends (Leiter et al., 2009), establish causality between variables (Liou, 2009; Rondeau et al., 2009), or determine the direction of causal relationships (Castle & Engberg, 2006). Given the complexity of the data involved, examining relationships among variables within conceptual models should employ structural equation modeling (Beecroft et al., 2008). Furthermore, literature recommends

that future research on turnover incorporate the use of moderators, which influence the direction and strength of the relationship between turnover and its outcomes (Bae et al., 2010).

Conclusion

In conclusion, this study contributes to the understanding of how ethical leadership influences employee behavior and organizational outcomes, highlighting the complex interplay between leadership practices, employee engagement, and retention, specifically in the healthcare sector. The results show that ethical leadership plays a crucial role in reducing turnover intention, primarily by enhancing employee engagement. While ethical leadership's direct impact on work engagement was supported, the mediating role of OCB in the relationship between ethical leadership and turnover intention was not significant, contrary to initial hypotheses. This implies that promoting OCB may not directly influence employees' intentions to leave the organization. The lack of significance for OCB as a mediator could indicate that its role may vary across different sectors or populations, such as in professions where certain behaviors are expected as part of the job.

Furthermore, this study emphasizes the importance of ethical leadership as both a moral and practical necessity for healthcare organizations. Leaders who promote transparency, fairness, and employee well-being not only foster an ethical work environment but also improve employee retention and organizational stability.

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Appendices

Appendix I: Questionnaire

Q1 Caro(a) participante,

É com grande satisfação que o/a convido a contribuir para a minha tese de mestrado em Psicologia em Economia e Gestão na Universidade Católica Portuguesa. Esta investigação pretende aprofundar o conhecimento sobre o impacto da liderança praticada nas instituições de saúde.

Não existem respostas certas ou erradas, pelo que se pede a sua resposta sincera a todas as perguntas. Para tal, deverá focar-se na sua experiência pessoal na sua organização. Para os participantes que trabalham em mais de uma instituição, é pedido para se focarem na sua entidade empregadora principal.

A sua participação é anónima, voluntária e não demorará mais de 7 minutos. É garantida a confidencialidade dos dados, que serão usados apenas para fins académicos.

A sua participação não acarretará quaisquer consequências negativas ou danos. Se tiver mais questões, por favor, não hesite em contactar-me: s-mdourado@ucp.pt

Ao clicar na seta abaixo, reconhece que a sua participação é voluntária, que tem 18 anos ou mais anos de idade, e que está ciente de que pode optar por interromper a sua participação no estudo a qualquer momento e por qualquer motivo.

Agradeço antecipadamente a sua participação e contribuição valiosa para o avanço desta investigação.

Atenciosamente,
Luísa Viana Dourado

Q2 Clique na afirmação que corresponde à sua situação atual.

- Sou enfermeiro/a e estou atualmente empregado/a
- Sou enfermeiro/a e estou no desemprego/a
- Não sou enfermeiro/a

Q3 (EL) Em que medida concorda ou discorda com as afirmações que se seguem em relação à sua chefia.

	Discordo Fortemente (1)	Discordo (2)	Não concordo nem discordo (3)	Concordo (4)	Concordo Fortemente (5)
Ouve o que os colaboradores têm para dizer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Disciplina os colaboradores que violam princípios éticos	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Conduz a sua vida pessoal de uma forma ética	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tem em mente os melhores interesses da organização	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Toma decisões justas e equilibradas	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
É uma pessoa de confiança	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Discute valores éticos com os empregados	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dá o exemplo em como fazer as coisas de forma mais ética	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Define sucesso, não apenas pelos resultados em si, mas também pela forma como estes são obtidos	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Quando toma decisões questiona sobre "o que é mais correto fazer?"	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q4 (WE: V, D & A) Pensando no seu trabalho, com que frequência se identifica com as seguintes afirmações.

	Nunca/Quase Nunca (1)	Raramente (2)	Às vezes (3)	Regularmente (4)	Sempre/Quase Sempre (5)
No meu trabalho sinto-me cheio/a de energia	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
No meu trabalho sinto-me com força e energia	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Quando me levanto de manhã apetece-me ir trabalhar	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Estou entusiasmado/a com o meu trabalho	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
O meu trabalho inspira-me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Estou orgulhoso/a do que faço neste trabalho	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sinto-me feliz quando estou a trabalhar intensamente	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Estou imerso/a no meu trabalho	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
"Deixo-me ir" quando estou a trabalhar	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q5 (OCB) Pensando na sua organização e equipa de trabalho, de que maneira se identifica/concorda com os seguintes comportamentos?

	Discordo Fortemente (1)	Discordo (2)	Não concordo nem discordo (3)	Concordo (4)	Concordo Fortemente (5)
Existe entreajuda quando alguém se atrasa no seu trabalho	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Estou disposto/a a partilhar o meu conhecimento/experiência com a restante equipa	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tento agir como mediador(a) quando outros elementos da equipa têm desentendimentos	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tomo medidas para tentar evitar que haja problemas com outros elementos da equipa	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Disponho voluntariamente do meu tempo para ajudar os meus colegas que têm problemas relacionados com o trabalho	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Entro em contacto com os meus colegas de trabalho antes de iniciar uma ação que os possa afetar	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Encorajamo-nos mutuamente quando alguém está mais desanimado	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Apresento sugestões construtivas sobre como a equipa pode promover a sua eficácia	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Estou disposto/a a expressar as minhas convicções sobre o que é melhor para equipa mesmo que corra o risco de ser desaprovado	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Participo e contribuo ativamente nas reuniões de equipa	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Estou sempre focado/a na parte negativa das situações, em vez de ver o lado positivo	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Passo muito tempo a queixar-me de assuntos triviais	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Estou constantemente a encontrar falhas no trabalhos dos outros elementos da equipa	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q6 (TI) Pensando na sua organização em que medida concorda ou discorda com as seguintes afirmações.

	Discordo Fortemente (1)	Discordo (2)	Não concordo nem discordo (3)	Concordo (4)	Concordo Fortemente (5)
Estou a pensar sair da organização onde trabalho	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Estou a planear procurar outro trabalho	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Eu pretendo perguntar a outras pessoas sobre novas oportunidades de trabalho	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Não planeio ficar muito mais tempo nesta organização	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q7 Qual a sua idade?

Por favor escreva o número de anos no espaço abaixo.

Q8 Qual é o seu género?

- Masculino
- Feminino
- Outro

Q9 Qual é o seu nível máximo de educação?

- Bacharelato
- Licenciatura
- Mestrado / Especialidade
- Doutoramento
- Outro. Qual? _____

Q10 Quantas horas, em média, trabalha por semana?

Por favor escreva o número de horas no espaço abaixo. (**Nota:** Relembrar que deve considerar apenas as horas de trabalho na organização em estudo. Ex: 40)

Q11 Há quanto tempo trabalha na sua organização? Por favor escreva o número de anos no espaço abaixo

(Se trabalha há menos de 1 ano, por favor escreva X meses. Ex: 8 meses)

Q12 Há quanto tempo trabalha sob a sua atual chefia? Por favor escreva o número de anos no espaço abaixo

(Se trabalha há menos de 1 ano, por favor escreva X meses. Ex: 8 meses)

Q13 Qual é que é o seu tipo de contrato?

- Contrato sem termo
- Contrato a tempo incerto
- Contrato a termo certo
- Prestação de serviços
- Outro _____

Q14 A sua organização pertence a que Administração Regional de Saúde?

- Norte
- Centro
- Lisboa e Vale do Tejo
- Alentejo
- Algarve
- Madeira
- Açores

Q15 A que setor pertence a organização onde trabalha?

- Público
- Privado

Q16 No contexto do seu trabalho, com que frequência costuma trabalhar em turnos com o mesmo grupo de colegas ou membros da equipa?

- Nunca/Quase Nunca
- Raramente
- Às vezes
- Regularmente
- Sempre/Quase Sempre

Appendix II: Output PROCESS Procedure for SPSS

Run MATRIX procedure:

*** PROCESS Procedure for SPSS Version 4.2 beta ***

Written by Andrew F. Hayes, Ph.D. www.afhayes.com
 Documentation available in Hayes (2022). www.guilford.com/p/hayes3

Model : 6
 Y : TI
 X : EL
 M1 : WE
 M2 : OCB

Covariates:

Age Gender DTen WH Shift

Sample
 Size: 115

OUTCOME VARIABLE:

WE

Model Summary

	R	R-sq	MSE	F	df1	df2	p
	.3218	.1036	.3130	2.0800	6.0000	108.0000	.0614

Model

	coeff	se	t	p	LLCI	ULCI
constant	1.6505	.7250	2.2766	.0248	.2135	3.0875
EL	.1420	.0696	2.0400	.0438	.0040	.2800
Age	.0087	.0073	1.1883	.2373	-.0058	.0232
Gender	.1645	.1853	.8879	.3766	-.2028	.5318
DTen	.0300	.0280	1.0705	.2868	-.0255	.0855
WH	.0112	.0112	1.0007	.3192	-.0110	.0335
Shift	.0597	.0536	1.1143	.2676	-.0465	.1660

Standardized coefficients

	coeff
EL	.1953
Age	.1360
Gender	.0878
DTen	.1131
WH	.0940
Shift	.1062

OUTCOME VARIABLE:

OCB

Model Summary

	R	R-sq	MSE	F	df1	df2	p
	.4963	.2463	.1444	4.9943	7.0000	107.0000	.0001

Model

	coeff	se	t	p	LLCI	ULCI
constant	2.0612	.5041	4.0892	.0001	1.0620	3.0605
EL	.1034	.0482	2.1468	.0341	.0079	.1990
WE	.2508	.0654	3.8381	.0002	.1213	.3804
Age	.0050	.0050	.9968	.3211	-.0049	.0149
Gender	-.0129	.1263	-.1025	.9185	-.2633	.2374
DTen	-.0024	.0191	-.1239	.9016	-.0403	.0355
WH	.0067	.0077	.8739	.3841	-.0085	.0219
Shift	.0538	.0366	1.4697	.1446	-.0188	.1264

Standardized coefficients

```

coeff
EL      .1929
WE      .3402
Age     .1058
Gender  -.0094
DTen    -.0121
WH      .0760
Shift   .1297
    
```

OUTCOME VARIABLE:

TI

Model Summary

	R	R-sq	MSE	F	df1	df2	p
	.6504	.4230	.7216	9.7154	8.0000	106.0000	.0000

Model

	coeff	se	t	p	LLCI	ULCI
constant	8.3214	1.2116	6.8678	.0000	5.9191	10.7236
EL	-.4444	.1100	-4.0397	.0001	-.6625	-.2263
WE	-.4874	.1558	-3.1276	.0023	-.7963	-.1784
OCB	-.1195	.2161	-.5527	.5816	-.5479	.3090
Age	-.0144	.0112	-1.2867	.2010	-.0367	.0078
Gender	-.1508	.2824	-.5342	.5943	-.7107	.4090
DTen	-.0242	.0428	-.5666	.5722	-.1090	.0605
WH	.0060	.0172	.3502	.7269	-.0280	.0400
Shift	-.3421	.0827	-4.1387	.0001	-.5060	-.1782

Standardized coefficients

```

coeff
EL      -.3259
WE      -.2599
OCB     -.0470
Age     -.1206
Gender  -.0430
DTen    -.0487
WH      .0269
Shift   -.3244
    
```

***** TOTAL EFFECT MODEL *****

OUTCOME VARIABLE:

TI

Model Summary

	R	R-sq	MSE	F	df1	df2	p
	.5943	.3531	.7940	9.8265	6.0000	108.0000	.0000

Model

	coeff	se	t	p	LLCI	ULCI
constant	7.2213	1.1546	6.2542	.0000	4.9326	9.5100
EL	-.5302	.1109	-4.7821	.0000	-.7500	-.3105
Age	-.0195	.0116	-1.6774	.0964	-.0426	.0035
Gender	-.2344	.2951	-.7943	.4288	-.8194	.3506
DTen	-.0395	.0446	-.8844	.3785	-.1279	.0490
WH	-.0006	.0179	-.0332	.9736	-.0360	.0348
Shift	-.3794	.0854	-4.4450	.0000	-.5486	-.2102

Standardized coefficients

```

coeff
EL      -.3889
Age     -.1631
Gender  -.0667
DTen    -.0793
WH      -.0026
Shift   -.3598
    
```

***** TOTAL, DIRECT, AND INDIRECT EFFECTS OF X ON Y *****

Total effect of X on Y

Effect	se	t	p	LLCI	ULCI	c'_cs
-.5302	.1109	-4.7821	.0000	-.7500	-.3105	-.3889

Direct effect of X on Y

Effect	se	t	p	LLCI	ULCI	c'_cs
-.4444	.1100	-4.0397	.0001	-.6625	-.2263	-.3259

Indirect effect(s) of X on Y:

	Effect	BootSE	BootLLCI	BootULCI
TOTAL	-.0858	.0486	-.1897	.0019
Ind1	-.0692	.0379	-.1494	-.0032
Ind2	-.0124	.0256	-.0658	.0394
Ind3	-.0043	.0103	-.0307	.0121

Completely standardized indirect effect(s) of X on Y:

	Effect	BootSE	BootLLCI	BootULCI
TOTAL	-.0629	.0346	-.1349	.0013
Ind1	-.0508	.0273	-.1087	-.0025
Ind2	-.0091	.0185	-.0470	.0297
Ind3	-.0031	.0075	-.0224	.0090

Indirect effect key:

Ind1	EL	->	WE	->	TI		
Ind2	EL	->	OCB	->	TI		
Ind3	EL	->	WE	->	OCB	->	TI

***** ANALYSIS NOTES AND ERRORS *****

Level of confidence for all confidence intervals in output:
95.0000

Number of bootstrap samples for percentile bootstrap confidence intervals:
5000

----- END MATRIX -----