

## Original Research Article

# CLINICAL NURSES' MORAL COURAGE IN TENURE OF NURSES: AN ANALYTIC SURVEY

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### Abstract

**Background:** The complexity of services that nurses must provide nowadays encourages nurses to develop their moral courage. A review of the literature reveals that no studies have been conducted to evaluate the association between clinical nurse tenure and their level of moral courage.

**Objectives:** this study is to assess correlation between the tenure of nurses and the level of moral courage.

**Methods:** analytic survey research at 5 hospitals in Makassar, including private and government hospitals with a total sample of 405 nurses. The sampling technique used multistage random sampling. The variables measured were tenure of nurses and the level of moral courage of nurses. The Professional Moral Courage Questionnaire is used for the variable moral courage (Cronbach 'alpha: 0.756). Data analysis using Mann Whitney test.

**Results:** The majority of nurses with long and new tenure had moderate moral courage (new tenure 79 nurses; length tenure 238 nurses), and there was no significant difference in the moral courage level of nurses with long and new tenure ( $p=0.294$ ).

**Conclusion:** Considering the findings that nurse tenure has no effect on moral courage, nursing managers can consistently boost nurses' moral courage through external stimuli. A nurse who cannot face various ethical dilemmas in providing daily nursing care can result in moral distress.

### Keywords:

Moral courage, Nurses tenure,; Nurses

## INTRODUCTION

To date, empirical research, where the main focus is on moral courage, is scarce (Restika, Saleh, et al., 2021) especially in the field of nursing practice. A review of the literature reveals that no studies have been conducted to evaluate the association between clinical nurse tenure and their level of moral courage. Moreover, Strengthening moral courage is one effective way to overcome moral pressure that causes a lot of physical and emotional disturbances in a person, which affects his satisfaction with the profession (Restika, Haskas, et al., 2021).

Furthermore, nurses' experiences and suffering as a result of moral anguish encouraged them to seek effective approaches to mitigate the impact of moral distress. The problem of moral distress experienced by nurses should be an important concern for all nursing managers and policy makers, this is because moral distress has many negative impacts on nurses, clients and the quality of nursing care (Restika et al., 2020). Structural empowerment and psychological empowerment were the key factors affecting the promotion of moral courage (Hu et al., 2022).

There are several situations that require moral courage, including violations of human rights, injustice, humiliation of a person's dignity, people being treated unfairly, discrimination against foreigners or minority groups, violence against individuals and harassment (Numminen & Katajisto, 2018).

The nurses' tenure can be interpreted as the amount of time an employee has to work for a company or agency (Hala M Elsabagh<sup>1</sup>, Fatma E Soliman<sup>2</sup>, 2016). This is in line with the statement that an employee's tenure can be seen from how long the employee has worked in a certain position where the factors that influence this tenure include the level of job satisfaction, stress caused by work as well as career development programs and received compensation (Martin, 2020).

**Objective(s):** this study is to assess correlation between the tenure of nurses and the level of moral courage.

## METHODS

### Study Design

The research design used was survey analytic.

### Setting

This research conducted during the July to September, 2019. At Makassar City, South Sulawesi, Indonesia. This research was conducted in 5 hospitals in Makassar City including private and government hospitals.

### Research Subject

In the study, researchers used multistage random sampling. The first stage was selecting hospitals using simple cluster sampling so that several hospitals were selected. The second stage, determining the number of samples for each location using proportional random sampling and for sampling (nurses) in each hospital is done using side simple random for each room. The number of samples in this study were 405 nurses.

Percentage of samples proportion for each hospital were adjusted to the total population of each hospital so that the larger the population of nurses in the hospital, the larger the percentage of samples proportion.

The inclusion criteria are Nurses who are willing to be respondents and Exclusion Criteria are Nurses who drop out during the research process, Nurse on duty studying, Nurse on leave.

### Instruments

The instrument used in this study was the Professional Moral Courage Questionnaire (Connor, 2017). The validity test results obtained a value of 0.414-0.895 ( $r_{table} = 0.3494$ ). It is concluded that all question items are valid. The value of Cronbach 'alpha'  $> 0.60$  is 0.756.

### Data Analysis

Data analysis was performed with SPSS. The Mann-Whitney test were used to test the hypotheses.

### Ethical Consideration

This research has been submitted for permission to the research ethics committee of the Ethics Committee of the Hasanuddin University through Act No. 1205/UN4.6.4.5.31/PP36.

## RESULTS

**Table 1.** Characteristic Respondent in Makassar City on July to September, 2019

Characteristic	Category	n	%
Age	26-45	166	39.7
	46-60	252	60.3
	>60	0	
Sex	Male	67	16.1
	Female	351	83.9
Level of education	Diploma	113	27
	3 of Nursing		
	Bachelor of Nursing	77	18.4
	Nurse Profession	225	53.8
Occupation	Master of Nursing	3	0.7
	Charge Nurse	41	9.8
	Leader nurse	36	8.6
Nurses' Tenure	Nurse	341	81.6
	New	103	24.6
	Long	315	75.4

Source: Primary Data, 2019

Table 1 showed respondent characteristics, the majority of respondents were adult category as many as 252 people (60.3%). For gender characteristics, the majority of respondents were women, as many as 351 people or 84.4% of the total respondents.

Based on the characteristics of the level of education, the majority of respondents have level nursing profession as many as 225 people (53.8%). Based on the characteristic's length of employment, the majority of respondents were length of employment before as many as 315 people (75.4%).

**Table 2.** Level of Nurse Moral Courage based on nurses' tenure at Makassar City Hospital on July to September, 2019

Variable	Category	Moral Courage			Total
		High	Moderate	Low	
Nurses' tenure	New	24	79	0	103
	Long	71	238	6	315
Total		95	317	6	418

Source: Primary Data, 2019

Based on table 2, the majority of nurses, both new tenure and long tenure, have moral courage at a moderate level (*new tenure 79 nurses; length tenure 238 nurses*).

**Table 3.** Comparison of The Average Moral Courage Based on Nurses' tenure in Makassar City Hospital on July to September, 2019

Variable	Category	Mean	SD	p
		Moral Courage		
Nurses' tenure	New	87.55	±	0.294 ( $p > 0.05$ )
	Long	85.15	13.5 ± 14.8	

Probability using Mann Whitney Test

Based on table 3, the average moral courage value of nurses with the new tenure is 87.55 and the average moral courage value of nurses with the length tenure before is 85.15 so that there is no significant difference in the moral courage value of nurses with the New and Length tenure of nurses (0.294) ( $p > 0.05$ ).

## DISCUSSION

The findings of this study indicate that there is no correlation between the tenure of a nurse and the level of moral courage, this is because hospitals as dynamic social institutions have different forms of ethical climate (Taraz et al., 2019). Today, health care providers are just

dealing with a lot of complexity, various sophisticated equipment and the large number of people present in the organization that has an impact on the ethical climate of the organization (Taraz et al., 2019).

Moral courage is one of the most fundamental virtues in the nursing profession, however, little attention has been paid to it (Sadooghiasl et al., 2018). The essence of nursing is care and requires nurses who are decorated with ethical values accompanied by technical aspects for quality care. Moral courage includes model orientation, model acceptance, rationalism, individual excellence, obtaining academic and professional qualifications, spiritual beliefs, organizational support, organizational repression, and internal and external personal barriers (Sadooghiasl et al., 2018). Professional excellence resulting from moral courage can be manifested in the form of providing professional care, creating peace of mind, and making nurse decisions and functioning well (Sadooghiasl et al., 2018).

The tenure of a nurse is an important element that must be considered. This is in line with the finding that in order to increase job satisfaction and organizational commitment among nurses, different approaches should be considered based on the nurse's tenure (Baek et al., 2019). Nurse tenure served as a moderating force on the relationship between authentic leadership and job satisfaction, as well as between authentic leadership and organizational commitment. This means that different strategies based on tenure are needed to make nurses satisfied with their jobs and committed to their organizations (Baek et al., 2019).

Organizations and nursing managers are obliged to provide several strategies such as changing the managerial style in clinical wards, contributing nurses to decision making, and expanding the appropriate organizational culture to move towards increasing the mental strength of nurses and its various aspects. In addition, providing the necessary prerequisites to promote the psychological empowerment of nurses can lead to an increase in moral courage behaviour, which in turn leads to an increase in the quality of nursing care.

In educating nurses, it is necessary to strengthen the morale of nurses (Bahrieni et al., 2017). A nurse's moral courage can be influenced by internal and external factors including a repressive environment that ignores

morality, an unethical organizational climate, and a hindering organizational culture coupled with power laddering that suppresses the formation of moral courage in an environment. External factors include rejection, shame, job insecurity, subjective fear of being understood by nurses can create a kind of inner barrier to concept formation. Young nurses' professional expectations, time constraints, and fatigue caused by constant fear and anxiety are perceived as external barriers (Sadooghiasl et al., 2018).

To increase the moral courage of nurses, it is necessary to have the role of nurse managers as leaders in the implementation of nursing service activities. This is because people tend to be influenced by examples with high status and position (Mokhtari-Nouri, 2019). Nursing managers, apart from providing an environment for other nurses' moral courage through value-based behaviour, play a role model for them by showing courage as well.

Based on this, it is known that although moral courage is not influenced by a nurse's tenure, there are many other factors that also influence it. Findings in another study suggest that nurses lack the ability to make ethical decisions and lack the power to overcome organizational constraints and insistence on moral principles (Taraz et al., 2019). Previous study also found that nurses would experience moral distress when they feel disempowered or impeded in taking the ethically right course of action (DiGangi Condon et al., 2021).

## CONCLUSION

There are many factors that influence the moral courage of a nurse including internal factors and external factors. A nurse who cannot face various ethical dilemmas in the provision of daily nursing services can result in the emergence of moral distress in the nurse.

## SUGGESTIONS

Furthermore, it is recommended to investigate other factors that also affect the moral courage of nurses.

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## DECLARATION OF CONFLICTING INTEREST

We declare that we have no conflict of interest.

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## AUTHOR CONTRIBUTION

**Indah Restika:** Made the method, data analysis, and result, compile article

**Suarnianti:** Made Discussion

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