



Ethical Leadership and Feedback Seeking: A Mediation Model of Leader-Member Exchange and Psychological Empowerment among Nurses

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Abstract: Background: Globalization and development of communication technologies resulted in ethical problems in health care settings as well. Consequently, in all areas of life, such as politics, media and education, administrators make ethical decisions and behave in an ethical manner while resolving disputes and enhancing the sense of trust between subordinates and interaction, so as to receive feedback. **Aim:** Assess the relationship among ethical leadership (EL) and nurses' feedback-seeking behavior from supervisors and coworkers, leader-member exchange (LMX) and psychological empowerment, in addition, testing a new mediation model that examines LMX and psychological empowerment as the mediators in the relationships between Ethical Leadership and nurses' feedback-seeking behavior from supervisors and coworkers. **Design:** A descriptive correlational study design was used. **Sample:** A stratified, random sample was chosen of 400 nurses. **Tools:** A questionnaire sheet was used to gather data for this research, containing six parts: Personal characteristics of the studied nurses, EL scale, feedback seeking from supervisor scale, feedback seeking from coworkers scale, leader-member exchange scale, and psychological empowerment scale. **Results:** Findings revealed that Ethical Leadership was significantly and positively correlated to feedback seeking from supervisors, feedback seeking from coworkers, leader-member exchange, and psychological empowerment. **Conclusion:** The LMX and psychological empowerment are mediated of relationship between ethical leadership and feedback seeking from both nurse supervisors and coworkers. **Recommendations:** Increase training program about ethical leadership and encouraging it. Integrating relationship building training into Ethical Leadership development programs and giving opportunities for supervisors to develop their EL to motivate nurses to seek feedback.

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Key words: Ethical Leadership, Feedback seeking, Leader-member exchange, Psychological empowerment

1. Introduction:

Feedback is one of the most accepted and applied interventions aimed at stimulating learning, motivation and performance among nurses (1). Before more than three decades, feedback research focused mainly on the feedback received through structured organizational channels, such as reviews and performance assessments. Studies have begun to investigate the impact of various sources (e.g., managers, subordinates, supervisors, coworkers, and peers) from which nurses may receive feedback concerning their creative performance. By proactively seeking feedback, nurses can receive crucial information when they need it for their creative ideas, making feedback-seeking behavior a valuable resource for nurses to manage their own creative performance (2). A number of recent feedback studies have identified the effects of various types of positive leadership on feedback seeking, such as transformation leadership (1) and authentic leadership (3).

In this paper the researchers focus on one of the most effective positive leadership styles, named ethical leadership. Ethical leadership is traditionally defined as the demonstration of normatively acceptable behavior by personal actions and interpersonal relationships, and the promotion to followers of such conduct (4). Ethical leaders interact genuinely with subordinates on a daily basis and are able to build and maintain a high quality, and credible two-way feedback channel.

The researchers use a social exchange model to explain the positive association between ethical leadership and seeking feedback when explaining the effects of ethical leadership on nurses' feedback. The principle of social exchange is commonly used to describe ethical leaders' effect on the actions of their subordinates (5). When subordinates under ethical leadership receive ethical treatment and feel confidence in them by their leaders, they are more

likely to believe in a high-quality social exchange relationship with their leaders⁽⁴⁾.

Subordinates tend to reciprocate by performing better (6). The exchange of leadership members is seen as an indicator of the quality of the social exchange relationship between supervisors and subordinates and has been examined as a mechanism to explain the effect of ethical leadership on the performance of nurses^(6,7). As such, we draw on the theory of social exchange to suggest that LMX serves as a mediator by means of which ethical leadership has a positive impact on seeking feedback. Nurses of such leaders are likely to feel emotionally safe and take the opportunity to seek feedback at work without any anxiety or stress. Thus, nurses are more willing to seek feedback from their ethical leadership. Ethical leaders, as moral managers, strive to exert managerial efforts and act as ethical role models to establish ethical behaviors for followers⁽⁵⁾.

They focus on both the outcome and the process, care for the people and encourage ethical development and growth of nurses. As such, ethical leaders form an ethical climate and have the potential to create a work environment that supports learning and development while stressing the importance of being honest, fair and credible^(8,9). In this background, subordinates are more likely to view peers as a vital source of feedback and proactively seek feedback from them to achieve the learning and development objectives^(10,11).

Psychological empowerment is a process of increasing the self-efficacy of nurses by identifying conditions that promote helplessness and by removing them through both formal organizational practices and informal techniques to provide information on efficacy. Empowerment includes the principle of the decision-making authority for decentralization, which gives decision-making roles to lower-level nurses and guarantees that they have the resources to take decisions by themselves⁽¹²⁾. Ethical leaders consider the developmental needs and abilities of each nurse in order to put them in roles where strategic alignment is possible. Such leaders treat their nurses with respect, rather than simply as a means to an end, especially in terms of organizational outputs and productivity.

Ethical leaders are adjusted to increase the self-respect and confidence of nurses, the degree of ownership; the development and growth of team members; and harmony between the aspirations of the nurses and the goals of the organization. In short, ethical leadership safeguards and promotes the rights, dignity and autonomy that can lead to psychological empowerment. When nurses perceive their leaders' fair treatments and considerations, they are more likely to build emotional links and mutual support with their leaders and engage in high-quality social exchange relationships with their leaders⁽⁶⁾.

This in effect could motivate nurses to exercise their feedback-seeking behavior with managers as a way to reciprocate the LMX and ethical leadership of their supervisors. Furthermore, workers under ethical leadership should come to a consensus that supervisor feedback finding is useful and beneficial. As a result, they may be more willing to engage in a system of reciprocating high-quality member exchange with each other's feedback promoting a healthy coworker feedback atmosphere.

Theoretical framework:

The theoretical framework of the current study based on social exchange theory of Blau⁽¹³⁾, who found nurses of ethical leaders are more perceive themselves to be more social exchange with leaders related to ethical treatments which received and more trust feeling. Leader member exchange (LMX) is indicator of qualities' social exchanging relationship between nurses and supervisors.

Significance of the study:

Improving organization and nurses performances are very big challenges⁽¹⁴⁾. Feedback seeking could widely get many impacts to nurses, begin from how doing" to survive and fit in? A few information explained feedback seeking and leaders' impact on nurses^(1, 3, 10).

Ethical leadership is among the styles found to be effective on the job performance of individuals and the tasks and duties assigned to them. In order to help understand the role of ethical leadership in nursing feedback, this study will examine how and when ethical leadership can have a positive impact on feedback.

Aim of the study:

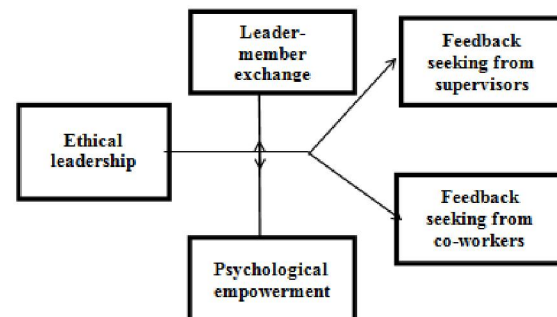


Figure 1. Theoretical framework of the study

Assess the relationship among ethical leadership (EL) and nurses' feedback-seeking behavior from supervisors and coworkers, leader-member exchange (LMX) and psychological empowerment. In addition testing a new model of mediation that examines leader-member exchange (LMX) and psychological empowerment as the mediators in the relationship between ethical leadership and the feedback-seeking

actions of leaders and subordinates at Zagazig University Hospitals.

Research hypotheses:

1. Ethical leadership is positively related to feedback seeking from both nurse supervisors and nurse coworkers.

2. There is a relationship between leader-member exchange and feedback seeking from both nurse supervisors and nurse coworkers.

3. Leader-member exchange mediates the relationship between ethical leadership and feedback seeking from both supervisors and coworkers.

4. There is a relationship between psychological empowerment and seeking feedback from both nurse supervisors and nurse coworkers.

5. Psychological empowerment mediates the relationship between ethical leadership and feedback seeking from both nurse supervisors and nurse coworkers.

2. Subjects and Methods:

Research design:

Using a descriptive study design.

Study setting:

The study was performed at all inpatient units at Zagazig University Hospitals, Egypt, which includes two sectors. The Emergency sector and El-Salam sector with total bed 1954 and 2446 staff nurses.

Subjects:

A random stratified sample has been used. Scientific formula was used to calculate the required number of nurses from each hospital (number of nurses in each hospital \times required sample size / total number of nurses in all hospitals).

Sample size:

2446 nurses were used, and by using the following formula $[X^2 NP (1 - P) / d^2 (N - 1) + X^2 P (1 - P)]$ Krejcie & Morgan ⁽¹⁴⁾. Sample size was 400 nurses having at least 1 year of experience.

Tools of data collection:

A questionnaire sheet included six parts:

Part (1): Socio demographic data of nurses as (age, experience years, and qualification).

Part (2): Ethical leadership (EL) Scale: Developed by Brown et al. ⁽¹⁵⁾, it was used to measure nurse supervisors' ethical leadership from nurse's opinion. The scale included 10 items. Nurses' responses were calculated on a Likert scale of five measures, ranging from strongly agreed (5) to strongly disagree (1). The tool's reliability was calculated by alpha-coefficient Cronbach and was 0.93.

Part (3): Feedback Seeking from Nurse Supervisor Scale: Developed by Vande Walle et al. ⁽¹⁶⁾, it was used to assess nurses' Feedback seeking from supervisor's opinion. Nurses' responses were measured with a five-item scale. Response options

ranged from 1, "never" to 7, "always." The scale's reliability was 0.71.

Part (4): Feedback Seeking from Nurse Coworker Scale: It was created by Vande Walle et al. (16) to measure nurses' feedback seeking from Coworkers Measured on a five-item scale. For each of the five types of feedback each nurse gave their own ratings of how often they questioned their peers. Options for response ranged from 1, "strongly disagree" to 7, "strongly agree". The alpha reliability for the scale was 0.74.

Part (5): Leader- Member Exchange (LMX) scale: This seven-item LMX- scale was developed by Scandura and Graen ⁽¹⁷⁾. Response options ranged from 1, "strongly disagree" to 7, "strongly agree". The tool's reliability was measured by assessing its internal consistency using the alpha coefficient Cronbach and was 0.96.

Part (6): psychological empowerment scale: This scale included twelve-items. Developed by Spreitzers ⁽¹⁸⁾, to measure psychological empowerment levels of nurses. This scale is composed of four dimensions of psychological empowerment: meaning, competence, self-determination, and impact. Each dimension was indicated by three-items. Nurses' responses were measured on a five-point Likert scale ranging from being strongly agreed (5) to strongly disagreeing (1). The reliability of the tool was measured by Cronbach alpha coefficient and it was 0.78.

Validity of tools:

Data using a self-administered questionnaire, after translated to Arabic. Contents were done by jury of experts of Faculty of Nursing Zagazig and Ain-Shams Universities.

Pilot study:

Carried on 40 nurses to clarify the tools and assessment time which needed to complete the sheets.

Data collection:

The questionnaire was distributed to nurses with the help of the head nurses after explain what are goals. The answered sheets were collected in a large folder from the participants at their units by hand in the morning, and afternoon shifts. The time consumed in answering the questionnaire sheet was about 20 to 35minutes over a period of 4 month. started at 11/ 2018 till 2/ 2019.

Administrative and ethical considerations:

Approval to conduct the study was obtained from Scientific Research Ethics Committee at Nursing Faculty, Zagazig Uni., and Medical and Nursing directors of hospitals. Participants informed the participation in the study is voluntary and without any harm if they choose not to participate and no individual information is shared outside of the

research. The anonymity and confidentiality of the data were assured.

Statistical design:

Statistical Package for Social Science (SPSS), version 17.0 used to analyze the data and descriptive statistics was used. Correlation analysis used to evaluate inter-relationships between total scale scores.

3. Results:

Table (1): Distribution of Personal and Job Characteristics of the Studied Nurses (n=400)

Items	No	%
Age (in years)		
▪ 25< years	88	22.0
▪ 25-30 years	187	46.8
▪ > 30 years	125	31.3
Education qualification		
▪ Nursing diploma	167	41.8
▪ technical diploma in nursing	71	17.8
▪ Bachelor of nursing	162	40.5
Experience (in years)		
▪ 1-5	115	28.8
▪ 6-10	169	42.3
▪ > 10	116	29.0

Table 1: Reveals that 46.8% of nurses' age from 25 to 30 years, the highest percentages of nurses had

nursing diploma, and had work experience ranged from 6 to 10 years (41.8%, & 42.3, respectively).

Table 2: Displays that ethical leadership was significantly and positively correlated to Feedback seeking from supervisors, Feedback seeking from coworkers, Leader-member exchange, and Psychological empowerment ($r=0.548$, $P=0.000$, $r=0.589$, $P=0.000$, $r=0.344$, $P=0.000$, $r=0.229$, $P=0.000$, respectively).

Mediator explanation:

To establish a mediator, four conditions must be met. *First*, there must be a significant relationship between the independent variable (ethical leadership) and dependent variables (Feedback seeking from supervisors and Feedback seeking from coworkers). *Second*, there must be a significant relationship between the independent variable (ethical leadership) and the mediators (Leader-member exchange and Psychological empowerment). *Third*, there must be a significant relationship between the mediators (Leader-member exchange & Psychological empowerment) and the dependent variables (Feedback seeking from supervisors and Feedback seeking from coworkers) in the presence of the independent variable (ethical leadership) (partial mediation). *Fourth*, Partial mediation happens when the mediating variables are only responsible as part of the relationship among independent and dependent variables. When mediator is taken away, the relationship would disappear^[19].

Table (2): Mean Scores and Correlation between E L, Feedback Seeking from Supervisors, Feedback Seeking from Coworkers, Leader-Member Exchange, and Psychological Empowerment as reported by Studied Nurses (n=400).

Study variables	mean±SD	E L	Feedback seeking from supervisors	Feedback seeking from coworkers	Leader-member exchange
		r	r	r	r
E L	36.6±12.8				
Feedback seeking from supervisors	12.8±5.5	.548**			
Feedback seeking from coworkers	14.15±6.5	.589**	.334**		
Leader-member exchange	62.8±14.5	.344**	.167**	.207**	
Psychological empowerment	60.3±10	.229**	.223**	.108**	0.535**

*Statistically significant at $P < 0.05$ ** highly statistically significant at $P < 0.001$.

Table 3: The regression coefficient of ethical leadership (EL) was reduced from $\beta=0.237$, $P=0.001$ to $\beta=0.234$, $P=0.001$ (significant) when the leader-member interaction was included in the ethical leadership –Feedback seeking from the supervisors interaction model. In addition, ethical leadership

contributed for 30% of the variance in nursing feedback seeking from supervisors ($R^2=0.300$) in the direct model and this impact increased to 32% ($R^2=0.320$) in the mediated model. Accordingly, this suggested that the exchange of leader-member is a partial mediator in the relationship between ethical

leadership-feedback finding mediated model from supervisors.

Table 4: Reveals that the regression coefficient of EL was reduced from $\beta=0.301$, $P=0.001$ to $\beta=0.288$, $P=0.001$ (significant) when the Leader-Member exchange was included in the ethical leadership –feedback seeking from the coworkers interaction model. Moreover, in the direct model, ethical leadership responsible for 34.7% of the variation in nurse feedback seeking from coworkers ($R^2=0.347$), and this effect increased to 35.5% ($R^2=0.355$) in the mediated model. This therefore indicated that the exchange of leader-member is a partial mediator in the relationship between ethical leadership and the subordinates seeking feedback.

Table 5: Presents that when Psychological empowerment was included in the ethical leadership – Feedback seeking from supervisors interaction model, the regression coefficient of ethical leadership (EL) was reduced from $\beta=0.234$, $P=0.001$ to $\beta=0.224$, $P=0.001$ (significant). Additionally, ethical leadership

responsible for 30% of the variation in nurses' Feedback seeking from supervisors ($R^2=0.300$) in the direct model and this effect increased to 35% ($R^2=0.350$) in the mediated model. Accordingly, this confirmed that psychological empowerment is a partial mediator in the relationship between ethical leadership – feedback seeking from coworkers.

Table 6: Demonstrates that when Psychological empowerment was included in the EL – Feedback interaction model, the Ethical Leadership regression coefficient was decreased from $\beta=0.304$, $P=0.001$ to $\beta=0.294$, $P=0.001$ (significant). Moreover, ethical leadership (EL) was responsible for 34.7% of the variance in nurses' Feedback seeking from subordinates ($R^2=0.347$) in the direct model and this impact was demonstrated and increased to 36.8% ($R^2=0.368$) in the mediated model. Accordingly, this indicated that psychological empowerment is a partial mediator in the ethical leadership -relationship – feedback from subordinates.

Table (3): Regression Analysis to Study the Mediating Effect of Leader-Member Exchange on the Relationship Between EL and Feedback Seeking from Supervisors (n=400).

Items	R	R ²	B	Std. Error	t	sig
Ethical Leadership score	.589	.300	.237	.021	14.54	0.001
EL	.589	.320	.234	.019	12.42	0.001
Lead-member exchange			0.071	.017	2.53	0.01

*Statistically significant at $P < 0.05$ ** highly statistically significant at $P < 0.001$.

Table (4): Regression Analysis to Study the Mediating Effect of Leader-Member Exchange on the Relationship between EL and Feedback Seeking from Coworkers (n=400).

Items	R	R ²	B	Std. Error	t	sig
Ethical Leadership score	.589	.347	.301	.021	14.54	.001
EL	.589	.355	.288	.022	13.6	.001
Lead-member exchange			.046	.019	2.01	0.038

Statistically significant at $P < 0.05$ ** highly statistically significant at $P < 0.001$

Table (5): Regression Analysis to Study the Mediating Effect of Psychological Empowerment on the Relationship between Ethical Leadership and Feedback Seeking from Coworkers (n=400).

Items	R	R ²	B	Std. Error	t	sig
Ethical Leadership	.548	.300	0.234	.018	13.054	.001
EL	.557	.350	.224	.018	12.234	.001
Psychological empowerment			.056	.023	2.395	.017

Statistically significant at $P < 0.05$ ** highly statistically significant at $P < 0.01$

Table 7: Ascertain that there was a significant relationship between nurses' age and all study variables except of leader member exchange where no significant relation was detected. Also, there was a significant relationship between nurses' level of

education and all study variables except of leader member exchange where no significant relation was found. While there was a significant relationship between nurses' years of experience and all study variables, where P -value < 0.001 .

Table (6): Regression Analysis to Study the Mediating Effect of Psychological Empowerment on the Relationship between Ethical Leadership and Feedback Seeking from Supervisors (n=400).

Items	R	R ²	B	Std. Error	t	sig
Ethical Leadership score	.589	.347	.301	.021	14.54	0.001
E L Psychological empowerment	.59	.368	.294	.021	14.3	0.001
			0.051	.027	2.1	0.033

Statistically significant at $P < 0.05$ ** highly statistically significant at $P < 0.01$.

Table (7): Relation between Personal and Job Characteristics of The Studied Nurses and Different Study Variables (n=400)

Age	Age<25	25-30	>30	f -test	P value
Ethical Leadership Mean ±SD	38.9±11	38.22±11.2	32.4±15.2	10.059	<0.001
Feedback seeking supervisors Mean ±SD	13.27±4.9	12.7±4.9	12.55±6.5	*4.7	0.092
Feedback seeking coworkers Mean ±SD	15.8±5.55	14.55±6.5	12.37±6.86	*15.47	<0.001
Leader member exchange Mean ±SD	65.47±14.45	62.32±14.57	61.73±14.5	1.940	0.145
Psychological empowerment Mean ±SD	60.5±10.27	61.73±10.3	57.97±9.3	5.306	0.005
Education qualification	Nursing diploma	Technical diploma in nursing	Bachelor of nursing		
Ethical Leadership Mean ±SD	29.7±15.8	41.3±6.35	41.5±6.9	51.277	<0.001
Feedback seeking supervisors Mean ±SD	11.5±6.3	13.76±3.8	13.6±5	*18.13	<0.001
Feedback seeking coworkers Mean ±SD	12.6±6.65	15.83±5.78	15±6.5	*19.3	<0.001
Leader member exchange Mean ±SD	64.2±6.2	63.7±17.08	61±18.7	2.201	0.112
Psychological empowerment Mean ±SD	57.34±8.2	62.69±10.2	62.27±11.1	12.938	<0.001
Experience years	<5	5-10	>10		
Ethical Leadership Mean ±SD	43.35±3.35	35.4±12.8	31.5±15.7	29.364	<0.001
Feedback seeking supervisors Mean ±SD	13.86±2.7	12.8±6.4	11.7±5.9	*23.76	<0.001
Feedback seeking coworkers Mean ±SD	15.9±5.5	13.86±6.7	12.8±6.9	*12.3	<0.001
Leader member exchange Mean ±SD	69.2±11.25	57.2±17.9	64.75±7	28.400	<0.001
Psychological empowerment Mean ±SD	61.34±9.4	61.63±11	57.29±8.6	7.420	0.001

*Statistically significant at $P < 0.05$ ** highly statistically significant at $P < 0.001$.

4. Discussion:

Professionals had searching for innovative methods for support the demand for feedback from workers. Many of these studies concentrated on the role of leaders in the process of searching for

feedback. This is because leaders have a significant influence on the working lives of workers and are often seen as important sources of feedback⁽¹⁾. Padash and Golparvar⁽²⁰⁾ highlighted that ethical leadership is the most successful forms on individual performance

jobs and their managers to encourage a positive feedback climate.

Regarding the correlation between ethical leadership, feedback seeking from supervisors, feedback seeking from coworkers, and Leader-member exchange, EL was significantly effect and positively correlated to feedback seeking from supervisors, feedback seeking from coworkers, and leader-member exchange. In addition, leader-member exchange was a partial mediator in the relationship between ethical leadership, and feedback seeking from both supervisors and coworkers. This might be due to that, when staff nurses' perceive fair treatments, trust, respect and considerations from their leaders, They are more likely to develop emotional relations and shared support with their leaders and participate in high-quality social interaction with their leaders. This in turn could encourage employees to practice their feedback-seeking behavior with supervisors. Additionally, subordinates under ethical leadership should come to a conclusion that feedback-seeking is a useful and valuable tool for sharing high-quality LMX with their supervisors. As a result, they may be more willing to engage in feedback-seeking from each other, fostering a strong coworker feedback environment. This is in agreement with Walumbwa et al, ⁽⁶⁾ who examined the Linking ethical leadership to employee feedback: the roles of leader-member exchange, self-efficacy, and organizational identification in China, and found that employees who handle their leaders' fair treatments and considerations are more likely to build emotional connections and mutual support with their leaders and engage in high-quality social exchange relationships with their leaders, besides LMX and self-efficacy mediate the positive relationship between ethical leadership and nurses feedback.

As well, Ashford et al ⁽¹¹⁾ who declared that, EL is likely to associate with nurses' feedback seeking behavior. In the same line, Qian et al ⁽²¹⁾ who conducted a study in China to test the role of EL in nurses feedback seeking and ethical leadership was significantly and positively related with leader-member exchange and with feedback seeking behaviors from supervisors. Additionally, leader-member exchange mediated the constructive interaction between ethical leadership (EL) and feedback from ethical leaders and subordinates.

This finding goes in same line with that of De Stobbeleir et al ⁽²⁾ who found that, there was a positive association between LMX and nurses' feedback seeking behavior from supervisors and coworkers. Moreover, Ng and Feldman, ⁽²²⁾ revealed that not only do ethical leaders function as ethical role models of dignity, trust and justice, but they also make

transactional efforts to influence the environment as a whole.

All these previous findings are in agreement with Walumbwa et al ⁽⁷⁾, Gu et al ⁽²³⁾, Shin ⁽⁸⁾, and Lu and Lin ⁽⁹⁾ who emphasized the importance of being honest, fair, and trustworthy, subordinates are more likely to regard coworkers as a critical feedback source and proactively seek feedback from them to obtain the goals of learning and development.

In agreement with the previously mentioned findings Nae et al ⁽²⁴⁾ found that nurses' feedback seeking was positively related to leader member exchange, also LMX mediating the relationship between feedback seeking and ethical leaders. In addition, Lam et al ⁽²⁵⁾ found that there were strong relationships between LMX, feedback seeking from both subordinates and their leaders, also, LMX mediate the relationship between feedback-seeking behavior and performance in the presence of ethical leaders. As well, Esmaelzadeh et al. ⁽²⁶⁾ findings showed that EL correlated positively in the development of trust in leaders which in turn lead to high quality of LMX between leader and subordinates and proper feedback seeking behavior.

EL in our study has significant and positive correlation between feedback seeking from supervisors, feedback seeking from coworkers, and psychological empowerment. In addition, psychological empowerment is a partial mediator.

This could result in psychological empowerment if the ethical leader protects and promotes the rights, dignity and autonomy of staff nurses. Empowered nurses in the workplace are more creative, happy and efficient. Empowered staff nurses are actively looking for feedback to improve their performance. Empowered nurses are also inspired and actively focused towards their position in the workplace. Nurses believe their actions make a difference and are in control of tasks. These findings are in agreement with Javed et al ⁽²⁷⁾ who conducted a study in Pakistan to examine the impact of ethical leadership (EL) on nurses creativity with mediating role of psychological empowerment and mentioned that, EL was significantly correlated with psychological empowerment and leaders should act as ethical role models for their nurses and organizations should follow proper human resource policies regarding ethical and moral standards, especially in respect to psychological empowerment.

In the same line, Qian et al. ⁽²⁸⁾ proposed that authentic leadership enhance the seeking of feedback by nurses' perceptions about the importance of feedback and the expense of obtaining feedback. Authentic leadership also allows workers to have positive emotions and thus encourages them to receive feedback from managers. In addition, Zhang et al ⁽²⁹⁾

who conducted a study in China to examine the relationship among delegation, psychological empowerment, and feedback-seeking behavior and revealed that, psychological empowerment was positively associated with seeking of feedback. As well, Huang ⁽³⁰⁾ suggested psychological empowerment is positively related to feedback-seeking behavior.

In consistence with Rantika and Yustina ⁽³¹⁾ conducted a study in Jakarta to examine psychological empowerment as the intervening variable that connects ethical leadership to employees' well-being, work engagement, and emotional exhaustion, they found that ethical leadership has a positive effect on psychological empowerment. Ethical leaders who show concern for their subordinates and protect each ones' rights (respect, dignity, & autonomy) are likely to place their subordinates in positions where they can experience a sense of meaning at work, the feeling of competence in their jobs, a feeling of self-determination, and make them understand their impacts on their organization, thus, fostering the feeling of empowerment in the employees.

Concerning the relationship between studied nurses personal and job characteristics as regards the different study variables; this research findings indicated that, there were significant relationships between nurses' age, level of education and all study variables except for leader member exchange no significant relation was detected. This might be due to that there were other factors that could affect LMX such as; the individual differences, organizational rules, policies, regulations, nurse supervisors'. As well, there were personality, work requirements, job commitment, satisfaction and quality of communication among nurses and their supervisors. These results are supported by those of Sijbom et al. ⁽³²⁾ who found that participants' age was significantly associated with all study variables except of LMX. Regarding nurses' years of experience, there was a significant relationship between nurses' years of experience and all study variables. These results are in disagreement with those of Qian et al. ⁽²²⁾ who indicated that participants' age, years of tenure, and educational levels were not significantly associated with any study variables.

Conclusion:

The present study proposed that leaders can set up the ethical tone of an organization, which has significant influence on nurses feedback-seeking through LMX. As well, LMX, and psychological empowerment partially mediated the relationship between ethical leadership and feedback seeking from both supervisors and their coworkers.

Recommendations:

Based on the results of the main study findings, the following recommendations are suggested:

- Providing training programs for the nurse managers about ethical leadership style and encourage them to apply it.
- Encouraging nurse managers to use a free flow of information, trust to nurses, open and two ways communication to improve LMX, which in turn will improve feedback seeking from both supervisors and coworkers.
- Integrating relationship building training into ethical leadership development programs.
- Giving opportunities for supervisors to develop their ethical leadership to motivate nurses to seek feedback.

Further research: is needed to investigate the effect of ethical leadership and ethical climate on nurse's creative performance: mediating the role of feedback seeking behavior at the academic sectors in Egypt.

References

1. Anseel, F., Beatty, A. S., Shen, W., Lievens, F., & Sackett, P. R. (2015). How are we doing after 30 years? A meta-analytic review of the antecedents and outcomes of feedback-seeking behavior. *J. Manage;* 41, 318–348. doi: 10.1177/0149206313484521.
2. De Stobbeleir, K. E. M., Ashford, S. J., & Buyens, D. (2011). Self-regulation of creativity at work: The role of feedback-seeking behavior in creative performance. *Academy of Management Journal;* 54, 811–831.
3. Qian, J., Lin, X., & Chen, G. Z. X. (2012). Authentic leadership and feedback seeking behavior: An examination of the cultural context of mediating processes in China. *J. Manag. Organ;* 18, 286–299. doi: 10.5172/jmo.2012.18.3.286.
4. Brown, M. E., Treviño, L. K., & Harrison, D. A. (2005). E L: A social learning perspective for construct development and testing. *Organ. Behav. Hum. Decis. Process;* 97, 117–134. doi: 10.1016/j.obhdp.2005.03.002.
5. Brown, M. E., & Treviño, L. K. (2006). E L: A review and future directions. *Leadersh. Q;* 17, 595–616. doi: 10.1016/j.leaqua.2006.10.004.
6. Walumbwa, F. O., Mayer, D. M., Wang, P., Wang, H., Workman, K., & Christensen, A. L. (2011b). Linking E L to nurses performance: the roles of leader-member exchange, self-efficacy, and organizational identification. *Organ. Behav. Hum. Decis. Process;* 115, 204–213. doi: 10.1016/j.obhdp.2010.11.002.

7. Walumbwa, F. O., Cropanzano, R., & Goldman, B. M. (2011a). How leader member exchange influences effective work behaviors: social exchange and internal-external efficacy perspectives. *Pers. Psychol*; 64, 739–770. doi: 10.1111/j.1744-6570.2011.01224.x.
8. Shin, Y. (2012). CEO E L, ethical climate, climate strength, and collective organizational citizenship behavior. *J. Bus. Ethics*; 108, 299–312. doi: 10.1007/s10551-011-1091-7.
9. Lu, S., & Lin, C. (2014). The effects of E L and ethical climate on nurses ethical behavior in the international port context. *J. Bus. Ethics*; 124, 209–223. doi: 10.1007/s10551-013-1868-y.
10. Qian, J., Yang, F., & Han, Z. R. (2016). The influencing mechanisms of authentic leadership on feedback-seeking behavior: a cognitive/emotive model. *Curr. Psychol*; 35, 478–485. doi: 10.1007/s12144-015-9316-z.
11. Ashford, S. J., De Stobbeleir, K., & Nujella, M. (2016). To seek or not to seek: is that the only question? Recent developments in feedback-seeking literature. *Annu. Rev. Organ. Psychol. Organ. Behav*; 3, 213–239. doi: 10.1146/annurevorgpsych-041015-062314.
12. Barton, H., & Barton, L. C. (2011). Trust and psychological empowerment in the Russian work context. *Human Resource Management Review*; 21(3), 201–208.
13. Blau, P. M. (1964). *Exchange and Power in Social Life*. Piscataway, NJ; Transaction Publishers.
14. Krejcie, R.V. & Morgan, D.W. (1970). Determining sample size for research activities. *Educational and Psychological Measurements*; 30: 607-610.
15. Brown, M. E., Treviño, L. K., and Harrison, D. A. (2005). E L: a social learning perspective for construct development and testing. *Organ. Behav. Hum. Decis. Process*. 97, 117–134. doi: 10.1016/j.obhdp.2005.03.002
16. Vande Walle, D., Ganesan, S., Challagalla, G. N., and Brown, S. P. (2000). An integrated model of feedback-seeking behavior: disposition, context, and cognition. *J. Appl. Psychol.* 85, 996–1003. doi: 10.1037/0021-9010.85.6.996.
17. Scandura, T. A., and Graen, G. B. (1984). Moderating effects of initial leader member exchange status on the effects of a leadership intervention. *J. Appl. Psychol.* 69, 428–436. doi: 10.1037/0021-9010.69.3.428.
18. Spreitzer G M. (1995). Psychological empowerment in the workplace: Dimensions, Measurement, and validation. *The academy of Management Journal*, 38(5), 1442-1465. doi:10.2307/256865.
19. Baron, R. M., & Kenny, D. A. (1986). The moderator-mediator variable distinction in social psychological research: Conceptual, strategic, and statistical considerations. *Journal of Personality and Social Psychology*, 51, 1173-1182.
20. Padash, F., & Golparvar, M. (2010). The relationship between ethics-oriented leadership with an internal motivation of the staff's innovation and creativity. *The seasonal journal of ethics in sciences and technology*, 5(1, 2), 103-110.
21. Qian, J., Wang, B., Han, Z., & Song, B. (2017). E L, leader- member exchange, and feedback seeking: A double moderators mediation model of emotional intelligence and work-unit structure. *Front. Psychol*;8:1174. doi:10.3389/fpsyg.2017.01174.
22. Ng, T. W. H., & Feldman, D. C. (2014). The moderating effects of age in the relationships of job autonomy to work outcomes. *Work Aging Retire*; 1, 64–78. doi: 10.1093/workar/wau003.
23. Gu, Q., Tang, T. L. P., & Jiang, W. (2015). Does moral leadership enhance nurses creativity? Nurses identification with leader and leader-member exchange (LMX) in the Chinese context. *J. Bus. Ethics*; 126, 513–529. doi: 10.1007/s10551-013-1967-9.
24. Nae E, Moon H, & Choi B. (2015). Seeking feedback but unable to improve work performance? Qualified feedback from trusted supervisors matters. *J Career Development International*; Vol. 20 No. 1, pp. 81-100/ 1362-0436. DOI 10.1108/CDI-08-2014-0107.
25. Lam L, Peng K, Wong C, & Lau D. (2018). Is More Feedback Seeking Always Better? Leader-Member Exchange Moderates the Relationship Between Feedback-Seeking Behavior and Performance. *Journal of Management*; Vol. 2 No. 1, PP 1–23- DOI: 10.1177/0149206315581661.
26. Esmaelzadeh F, s Abbaszadeh A, Borhani F, & Peyrovi, H. (2017). E L and Organizational Climate: The Experience of Iranian Nurses. *Iranian Red Crescent Medical Journal*; Vol; 19(4): e43554; doi: 10.5812/ircmj.43554.
27. Javeda B, Khana A, & Bashira SA. (2016). Impact of E L on creativity: the role of psychological empowerment. *Current Issues in Tourism*.<http://dx.doi.org/10.1080/13683500.2016.1188894>.
28. Qian, J., Yang, F., Han, Z. R., Wang, H., & Wang, J. (2017). The presence of a feedback-seeking role model in promoting nurses feedback seeking: a moderated mediation model. *Int. J.*

- Hum. Resour. Manag; doi:10.1080/09585192.2016.1255902.
29. Zhang X, Qian J, Wang B, Jin Z, & Wang Y. (2017). Leaders' Behaviors Matter: The Role of Delegation in Promoting Nurses' Feedback-Seeking Behavior. *Frontiers in Psychology*;| Volume 8 | Article 920. www.frontiersin.org.
 30. Huang J.-T. (2012). Be proactive as empowered? the role of trust in one's supervisor in psychological empowerment, feedback seeking, and job performance. *J. Appl. Soc. Psychol*; 42, E103–E127. doi: 10.1111/j.1559-1816.2012.01019.x.
 31. Rantika S D & Yustina A I. (2017). Effects of e l on nurses well-being: the mediating role of psychological empowerment. *Journal of Indonesian Economy and Business*; Volume 32, Number 2, 121 – 137.
 32. Sijbom R., Anseel F, Crommelinck M, De Beuckelaer A, & De Stobbeleir K,. (2018). Why seeking feedback from diverse sources may not be sufficient for stimulating creativity: The role of performance dynamism and creative time pressure. *Journal of organizational behavior*; vol.39, issue 3, pages 355-368.

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