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Walden University 2022

Abstract

Moral Obligation and Social Influence Predictors of Compliance Behavior and Organizational Ethical Climate Among Healthcare Leaders

by

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 $MA, Columbia\ International\ University, 2014$

BA, Columbia International University, 2011

Dissertation Submitted in Partial Fulfillment
of the Requirements for the Degree of
Doctor of Philosophy
Industrial and Organizational Psychology

Walden University

August 2022

Abstract

The U.S. Congress has enacted many regulations managed by branches of government such as Medicare to ensure healthcare organizations comply. Organizational leaders who place value on building effective compliance programs seek ways to enhance compliance. Understanding what motivates individuals to behave in a compliant way may help leaders develop programs that enhance those motivations. This nonexperimental, correlational, quantitative research study tested the relationship between the predictor variables, moral obligation, and social influence, with the criterion variable compliance behaviors among healthcare organizational leaders and to determine the mediating effect of ethical climate on the relationship. A total of 186 managers working in U.S. healthcare organizations participated in the study. Data were collected through an online survey and analyzed using multiple linear regression analysis. The analysis showed that both moral obligation and social influence significant impacted compliance behavior, and that ethical climate mediated the interaction between each relationship. Ethical climate strengthened the relationship between the criterion variable and the predictor variables. Understanding the motivators toward compliance may be vital to developing more robust compliance programs and training, which should decrease compliance incidents, potential fraud, waste, and abuse within the healthcare organization. Healthcare organizations are one of the pillars of any community. A breakdown in compliance increases the risk of fraud. Fraud deteriorates trust in those that commit fraud and the organizations that allow it. Strengthening organizational compliance strengthens the trust within the organization and within the community, which may contribute to positive social change.

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Dedication

I dedicate this study to my family. Though he passed away when I was young, my father has always been an inspiration in my life. My mother has encouraged me through this process to stay on track and complete the work that I started through this study. When I struggled to stay on task, she urged me to continue the work and see it through to the end. To my brother, I am a huge fan. My brother is someone of significant moral fiber, and he dearly loves his family. My brother is strong, and he is a protector of those he loves. I admire his faithfulness and dedication to those he loves.

I also have a few close friends that encouraged me along the way. They are Brittany, Nicole, JoAnn, and Kevin. Each of them was key to my dedication and completion of this project. Each of them walked with me throughout this journey. I am thankful for the support and encouragement that each of you provided. To each of you, this is not just my accomplishment, but it is our accomplishment, and I love you all dearly.

Lastly, I would like to thank my work family. Those that supported me at work include Scott, Skip, Charlie, JoAnn, and Lynn. They are a great group to work with and feel like an extended family. Their encouragement and support through this journey have meant a great deal to me.

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I am where I am because of my Lord and Savior, Jesus Christ. To him, I owe it all. Scripture tells us that he is our strength, our rock, and our fortress (Psalm 18:2). The Lord has provided opportunities through this process for me to grow and expand my skills. I cannot thank him enough for his grace and for opening the door for me to step into this opportunity.

I want to thank the healthcare compliance community. It is incredible to work with a group of healthcare leaders who genuinely strive to do what is right. In this community, we can collaborate and discuss the interpretation of the complex regulations we present to the organizations we serve. The national leaders we collaborate with are very much like-minded in their objectives to do the right thing and lead the organization in the right direction. It is a privilege to work with these outstanding leaders.

I would also like to thank my dissertation committee for its direction and guidance through this process. My committee chair, Dr. Derek Rohde, has been there every step of the way to offer recommendations, provide direction, and give insight into the process as well as different aspects of this research study. I certainly could not have done this without your help. I would also like to thank my second committee member, Dr. Brian Cesario. You seem to have a vast understanding of research and provided instructions to preserve this study's institutional standards for appropriate research.

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Chapter 1: Introduction to the Study

Healthcare compliance is critical for the vitality of healthcare organizations (Blass, 2019; Celis, 2018; Kusserow, 2017). The basic concept of compliance has become relatively common in the healthcare industry (Broccolo et al., 2015; Cornett, 2006; Kusserow, 2017). Compliance represents the organization properly following the federal government's standard billing guidelines and controlling fraud, waste, and abuse throughout the company (Lorence & Richards, 2003; Snell, 2015). Compliance leaders want to know what motivates organizational leaders to follow these regulations (Chen et al., 2018; Cornett, 2006; Gorsira et al., 2018; Kusserow, 2017). From previous research, there are a number of antecedents identified as motivators toward compliant behavior such as moral obligation, social influence, values, ethical climate, culture, and awareness of consequences (Chen et al., 2018; Sia & Jose, 2019; Zhang et al., 2020).

Some of the research associated with compliance is explicitly analyzing the components of various theories such as socioeconomic theory, the theory of planned behavior, and protection and motivation theory as a means of explaining what motivates employees towards compliant behavior (Chen et al., 2018; Sia & Jose, 2019; Zhang et al., 2020). One of the goals related to the previous research was to use the identified information as a guide for building effective compliance programs in specific areas such as information security compliance programs (Bin-Nashwan et al., 2020; Chen et al., 2018). This study adds to the previous research by comparing intrinsic to extrinsic motivators to determine if the participants were more motivated by their internal moral compasses such as a moral obligation or external factors such as social influence.

An example of moral obligation can be seen through the story of *Antigone*. In the Greek tragedy *Antigone*, a young woman followed her personal beliefs over the societal norms, and the decision to follow her beliefs cost her life (Lantos, 2019). Antigone's brother, Polynices, betrayed his city, sided with the enemy in battle, and lost his life (Lantos, 2019). Creon did not allow Polynices a burial because of the betrayal, but Antigone's firm belief that this decision was not God's proclamation was a flawed decision (Lantos, 2019). She followed her deeply held personal beliefs, went against societal law, and buried her brother (Lantos, 2019). Creon eventually convinced himself that he was wrong, but the decision was too late because Antigone had committed suicide (Lantos, 2019). In a more commonly known true story, we see moral obligation through the stance of Rosa Parks refusing to surrender her seat on a public transportation bus though society's influence during that era said something completely different (Entin, 2017).

While their sense of morality greatly influences some individuals, others are motivated by those around them (Bhutta et al., 2019; Yang & Treadway, 2018). They fear being ostracized from their social connections and allow their social relationships to influence their decisions (Yang & Treadway, 2018). The theory of planned behavior presents the concept that subjective norms (i.e., peer pressure) may positively influence an individual's behavior (Sia & Jose, 2019). In contrast to fear of ostracization being a motivator, Yang and Treadway (2018) presented that fear of ostracism may negatively affect behavior. In this study, I examined an individual's personal belief (i.e., moral obligation) and social influence to determine if the study participants assess one as a

stronger motivator over the other as an influencer of their behavior toward compliance with policies.

Chapter 1 provides background on the subject, the elements evaluated, the gap in the research, and the purpose of this study. In this chapter, I also explain the study's nature, the research and hypotheses, pertinent definitions, assumptions, and this study's scope. The theoretical foundation and research model are described in this chapter. This chapter closes with the significance of this study and describe the positive social change related to this study.

Background

Human behavior is an area that has attracted attention on precisely how it relates to compliance behaviors (Chen et al., 2018). Researchers seem intrigued to know what leads individuals to comply with policies (Bin-Nashwan et al., 2020; Chen et al., 2018; Sia & Jose, 2019). Several theories examined the behaviors and motivators that lead individuals toward or away from compliance. Some of the more common theories studied are the theory of planned behavior (TPB), value-belief norm (VBN) theory, social cognitive theory, socioeconomic theory, compliance theory, and protection motivation theory (see Bin-Nashwan et al., 2020; Celis, 2018; Chen et al., 2018; Sutinen & Kuperan, 1999; Vance et al., 2012; Walker & Mercado, 2016; Zhang et al., 2020). This section presents background information on the above research and the relationship to this study, along with the key variables of moral obligation, social influence, compliance behavior, and ethical climate as well as background on compliance and requirements.

Moral Obligation

A person's sense of moral obligation is prevalent throughout society and can be evidence of compliance behavior (Bin-Nashwan et al., 2020; Lantos, 2019; Sutinen & Kuperan, 1999). Moral obligation describes an individual's desire to behave in a way that aligns with their personal sense of morality or the person's internal obligation to follow their sense of right and wrong (Bin-Nashwan et al., 2020; Sutinen & Kuperan, 1999). Several moral theories, such as norm activation theory and VBN theory suggest that behaviors direct an individual's feelings of moral obligation or their personal norms (Pradhananga & Davenport, 2019). The studies related to the interaction between organizational factors and an individual's motives for deterring corruption within the organization seem promising (Gorsira et al., 2018). Some individuals seem to have a strong sense of morality, and their adherence to morality drives the decision they make regardless of their surroundings.

Social Influence

One of the factors that may influence an individual's decision to comply with a given set of standards is how they are swayed by those around them (Bin-Nashwan et al., 2020; Sutinen & Kuperan, 1999). Sutinen and Kuperan (1999) drew from the works of social learning theory to consider how peer pressure may impact a person's decision of compliance in the workplace. Supporting evidence shows that when an individual is in an environment of noncompliance, the individual is influenced by their environment and is more likely to engage in noncompliant activities (Bhutta et al., 2019; Bin-Nashwan et al., 2020; Yang & Treadway, 2018). The sense of approval or disapproval may influence an

individual's subjective norms by significant others in following compliant behaviors or their evasion from compliance (Bhutta et al., 2019). For some, the strongest motivator maybe those around them rather than their own sense of moral obligation.

Compliance Behavior

Many researchers study the way an individual acts or their behavior and what motivates the individual to behave the way they do (e.g., Amankwa et al., 2018; D'Arcy & Lowry, 2019; Ifinedo, 2012; S. Kim et al., 2014; Pahnila et al., 2007; Yazdanmehr & Wang, 2016a). One of the reasons for studying behavior is to build an organizational culture around correct behavior (Yazdanmehr & Wang, 2016a). An employee's satisfactory behaviors should support the desired culture of the organization (Amankwa et al., 2018). Since social learning theories indicate that social norms are developed through modeling the behavior of others, those displaying compliant behaviors may socially influence others to behave in the same or similar manner (Amankwa et al., 2018; Fritz et al., 2013; Hallberg & Schaufeli, 2006; Thojampa & Sarnkhaowkhom, 2019).

Ethical Climate

From an organizational perspective, ethical climate was classically viewed as a shared perception among employees of the organizations policies and procedures which determined behavioral expectations (Barattucci et al., 2021). This approach seems to indicate that the ethical climate of the organization is static and behaviors result from the standards set by the organization (Barattucci et al., 2021; Yazdanmehr & Wang, 2016a). Other research is dedicated to the organizational leaders ethical behavior and how their behavior influences the ethical behavior of their followers (O'Keefe et al., 2019). This

approach indicates a trickledown effect in the ethical climate of the organization so that the ethical climate is not simply based on the interpretation of the organization's policies and procedures, but also based on the behavior of others within the organization (O'Keefe et al., 2019). The concept that the organization's ethical climate is bidirectionally aligns with the approach I took in this study.

Compliance and Requirements

Compliance in healthcare organizations is a United States federal requirement (Kusserow, 2017; Office of Inspector General, 2000, 2021). The risks of noncompliance may result in significant fines and exclusions that could be detrimental to the organizations (Kusserow, 2017; Office of Inspector General, 2021). The first healthcare compliance program was initiated as the results of a failed Physician at Teaching Hospital (PATH) audit by the federal government (Committee on Appropriations, 1998). The audit resulted in lengthy legal litigations, a settlement of \$30 million dollars, and a mandate for the health system to establish a compliance program with regular governmental oversight (Committee on Appropriations, 1998).

The federal government considers fraud, waste, and abuse a significant issue in the healthcare industry (Crawford, 2017; Kusserow, 2017; Speer et al., 2020).

Compliance programs outline the strategy for healthcare organizations to improve areas such as bringing awareness to ethical issues, decrease unethical conduct, and providing an avenue for employees to seek advice before developing initiatives (Mulreany & McCormick, 2000). Healthcare compliance programs were elective before the Affordable Care Act (Boener, 2010; Herrmann, 2016). Although compliance programs are

mandatory for healthcare organizations, leaders still must ensure the programs are effective and function well (Blass, 2019; Weber & Wasieleski, 2013).

The federal government also outlined the aspects needed to develop an effective compliance program in healthcare, and the road to compliance is not an easy one (Blass, 2019; Bussmann & Niemeczek, 2019; Cornett, 2006; Hauser, 2020; Mulreany & McCormick, 2000). Creating policies, providing education, and working with organizational leaders are a few of the essential aspects of creating a compliance culture (Bussmann & Niemeczek, 2019; Cornett, 2006; Sutinen & Kuperan, 1999). Although the field of compliance has made a great deal of progress, compliance leaders may still face resistance from operational leaders (Snell, 2015). Learning to communicate the regulations effectively could assist with the opposition that compliance leaders face.

Cornett (2006) explained the importance of communicating information to operational leaders, which is crucial in getting compliance into everyday operations.

Amankwa et al. (2018) found that leadership had the weakest compliance attitude, yet leadership is an integral part of building a compliant culture. Cornett interviewed compliance officers in various healthcare systems on the integration of healthcare into daily operations and provide advice on how to manage compliance programs.

Organizational leaders' support and involvement are essential to a compliance program's success and the organization's culture (Amankwa et al., 2018; Cornett, 2006).

Lorence and Richards (2003) sought to determine how governmental-mandated guidelines were being managed nationally and regionally in the healthcare environment.

The governmental requirements do not eliminate the concern that organizations do not

consider these risks a top priority (Blass, 2019). Lorence and Richards found that the organizations they surveyed showed 52.9% adopted compliance programs. There are detailed aspects that have to be covered individually to maintain compliance for various elements such as healthcare privacy, medical billing, and information security (Blass, 2019; Ifinedo, 2012; Lorence & Richards, 2003).

Stober et al. (2019) designed a study to investigate three aspects of a compliance program: the core elements of a compliance program, the design of the code of conduct, and compliance training, including whistleblowers channels of reporting. The layout of an organization's compliance program varies depending on what has influenced its implementation (Stober et al., 2019). The compliance program's goal affects the structure of compliance training and the code of conduct (Hauser, 2020; Stober et al., 2019).

Yazdanmehr and Wang (2016) performed a study that explored employee's norms toward information security (IS) compliance policies. The authors showed that norms toward IS policies lead to IS policy (ISP) compliance behavior, strengthened by an individual's sense of personal responsibility. Motivators toward compliance behaviors may be intrinsic or extrinsic (Bulgurcu et al., 2010; Herath & Rao, 2009). Attitude impacts employee's motivation toward IS (Amankwa et al., 2018).

Weber and Wasieleski (2013) performed a study on compliance programs to evaluate their effectiveness by using various organizations. They assessed the extent of their programs and found that some covered the necessary regulatory requirements. In contrast, others developed into more sophisticated programs covering various risk

assessments and employee profiles. This study helped show the importance of compliance and address compliance risk.

Problem Statement

Noncompliance creates risk for organizations that can result in fines and penalties, and exclusions from federal programs (Crawford, 2017; Office of Inspector General, 2021; Snell, 2018; Zall, 2016). Although the United States government mandates compliance within healthcare organizations, sanctions and exclusions still regularly occur (Kusserow, 2017; Office of Inspector General, 2021; Snell, 2018). Organizational leaders seeking to direct an organization toward compliance may be interested in knowing what motivates leaders to more compliant behaviors, resulting in employees becoming more compliant (Kusserow, 2017).

Previous research demonstrated an interest in trying to understand what motivates employees toward compliance behavior (e.g., Amankwa et al., 2018; Bulgurcu et al., 2010; D'Arcy & Lowry, 2019; Sutinen & Kuperan, 1999; Yazdanmehr & Wang, 2016a). By understanding employees motivations, leaders can know if employees may feel a sense of duty toward following the standards they have been taught or if employees feel driven to following the standards they are being taught because they are influenced by what others are doing (Amankwa et al., 2018; Bhutta et al., 2019; D'Arcy & Lowry, 2019; Yazdanmehr & Wang, 2016a). Intrinsic motivators such as moral obligation and extrinsic motivators such as social influence may be driving forces that lead employee toward behaviors that are compliant with organizational standards (Bin-Nashwan et al.,

2020; D'Arcy & Lowry, 2019; Pradhananga & Davenport, 2019; Sutinen & Kuperan, 1999; Yazdanmehr & Wang, 2016a).

The federal government requires compliance training to be done on an annual basis to influence behaviors and teach the rules related to federal regulations and legislation which should help establish strong compliance programs, organizational ethical standards, and safeguards (Broccolo et al., 2015; Brown, 2018; Kusserow, 2017; Lorence & Richards, 2003). Understanding motivation may not only strengthen training but the compliance program. The general problems statement is that noncompliance leads to financial and cultural risks for the organization. The specific problem statement is that if organizational leaders understand what motivates employees toward compliance, they can build their compliance training programs to enhance those motivations, leading to a more robust ethical culture. The organization's culture is to adhere to federal regulations.

Purpose of the Study

The purpose of this quantitative study was to test the relationship that moral obligation and social influence had on compliance behaviors among healthcare organizational leadership and determine if the leader's behaviors had a mediating effect on the relationship between moral obligation or social influence and the organizational ethical climate. Moral obligation and social influence were the criteria variables for my study. Compliance behavior was the predictor variable and ethical climate the mediating variable. This study can be used to better understand of the relationship that moral obligation and social influence have on compliance behavior and to determine if ethical climate mediates the relationship between the criterion variables and the predictor

variable. The population for this study was healthcare leaders in positions of manager and above. Since a compliance program is mandatory for healthcare organizations, a study on the motivators of compliance behaviors may help compliance leaders build more effective compliance programs.

Research Questions and Hypotheses

RQ1: Does social influence predict compliance behavior in healthcare organizational leaders?

 H_01 : Social influence is not a significant predictor of compliance behavior in healthcare organizational leaders.

 H_a 1: Social influence is a significant predictor of compliance behavior in healthcare organizational leaders.

RQ2: Does moral obligation lead to compliance behavior in healthcare organizational leaders?

 H_02 : Moral obligation is not a significant predictor of compliance behavior in healthcare organizational leaders.

 H_a2 : Moral obligation is a significant predictor of compliance behavior in healthcare organizational leaders.

RQ3: Does moral obligation predict leader compliance behavior above and beyond social influence?

 H_03 : Moral obligation does not have a more significant impact on compliance behavior than social influence.

 H_a 3: Moral obligation does have a more significant impact on compliance behavior than social influence.

RQ4: Does moral obligation and social influence predict ethical?

 H_04 : Moral obligation and social influence do not predict ethical climate.

 H_a 4: Moral obligation and social influence do predict ethical climate.

RQ5: Does organizational ethical climate predict leader compliance behavior?

 H_05 : Organizational ethical climate does not predict compliance behavior.

 H_a 5: Organizational ethical climate does predict compliance behavior.

RQ6: Does leader compliance behavior mediate the relationship between moral obligation and organizational ethical climate?

 H_0 6: Leadership compliance behavior does not mediate the relationship between moral obligation and organizational ethical climate.

 H_a 6: Leadership compliance behavior does mediate the relationship between moral obligation and organizational ethical climate.

RQ7: Does leader compliance behavior mediate the relationship between social influence and organizational ethical climate?

 H_0 7: Leadership compliance behavior does not mediate the relationship between social influence and organizational ethical climate.

 H_a 7: Leadership compliance behavior does mediate the relationship between social influence and organizational ethical climate.

Theoretical Framework

Socioeconomic theory by Sutinen and Kuperan (1999) provided the theoretical framework for this study of compliance. The researchers designed this theory to address the shortcomings of Becker's model on criminal activity (Celis, 2018; Sutinen & Kuperan, 1999). In the model, Becker postulated that an individual will commit a crime if the crime outcome is greater than the risk of engaging in the illegal activity (Bin-Nashwan et al., 2020; Skogh, 1973; Sutinen & Kuperan, 1999). Sutinen and Kuperan believed Becker overlooked that low levels of penalties do not always result in high crime levels and do not factor in greater enforcement's high cost. Therefore, Sutinen and Kuperan developed a socioeconomic theory to address the issues they identified in Becker's model by focusing on the intrinsic motivator of moral obligation and extrinsic motivator of social influence impacts behavior (Celis, 2018; Sutinen & Kuperan, 1999). In addition to these motivators, this theory factors in the conventional cost and revenues associated with illegal behavior (Sutinen & Kuperan, 1999).

The socioeconomic theory is a model that comprehensively explains behaviors driven by intrinsic and extrinsic motivators (Bin-Nashwan et al., 2020; Sutinen & Kuperan, 1999). These motivators influence an individual's decision to comply with a given set of regulations (Celis, 2018). Sutinen and Kuperan (1999) identified the intrinsic and extrinsic motivators in the development of socioeconomic theory as moral obligation and social influence. The intrinsic motivator of moral obligation presents a person's commitment to follow their own set of values (Lechner et al., 2002; Sutinen & Kuperan, 1999). In contrast, the extrinsic motivator identified as a social influence describes a

person's concern for their social reputation (Sutinen & Kuperan, 1999). Moral obligation is also known as personal norms, while social influence may also be known as social norms (Gorsira et al., 2018; Yazdanmehr & Wang, 2016a). Although both motivators may be powerful influencers of behavior, moral obligation may present a more substantial power in the drive to compliant behavior. Behaviors within the organization result in the organization's culture (Pinder, 2008). Culture is rooted in the organization's values, language, beliefs, and behaviors of those working throughout the corporation (Pinder, 2008).

Based on previous research, there is an understanding of what motivates impacts behavior toward compliance (Amankwa et al., 2018; Bulgurcu et al., 2010; Herath & Rao, 2009; Ming Kuo et al., 2018; Yazdanmehr & Wang, 2016a). Social influence and moral obligation influence behavior and are closely related to one another (Klockner & Blobaum, 2010; Yazdanmehr & Wang, 2016a). Research shows that various aspects, such as habits and intentions, may mediate the relationship between social norms and personal norms on behavior (Klockner & Blobaum, 2010). Moral obligation (which is closely related to personal norms), and social influence (an aspect of social norms) have not yet been looked at separately to determine the stronger predictor of compliance behavior and its impact on its ethical climate. Chapter 2 contains a detailed explanation of the techniques and studies that used this theory as well as other theories tied to this study.

Nature of the Study

The nature of this study was quantitative, and it entailed a nonexperimental, correlational study. This design allows a researcher to use correlation statistics to measure the relationship between two or more variables (Creswell & Creswell, 2018). These designs may also include data collections over time, identifying trends, developing ideas, and determining causal pathways (Creswell & Creswell, 2018). For this study, the data collection came through the online surveys listed in Chapter 2. The research questions and associated hypotheses were analyzed using multiple regression with path analysis with the predictor variables of moral obligation and social influence on the criterion variable of compliance behavior then determining if the organizations' ethical climate predicted compliance behavior. I also tested to determine if the organization's ethical climate mediated the relationship between either social influence or moral obligation and compliance behavior. Using path analysis allowed for various predictions on compliance behavior by coefficients. The target population for this study was corporate healthcare leaders. I used survey data to analyze the responses of healthcare organizational leaders. The moral obligation scale measured moral obligation in organizational leaders while the targets of influence measure gauged social influence (Gorsuch & Ortberg, 1983; Huimin & Ryan, 2011; Yazdanmehr & Wang, 2016a). The study participants were leaders in healthcare organization in positions of manager and above which included managers, directors, executive directors, vice presidents, senior vice presidents, executive senior vice presidents, and presidents.

First, I tested the relationship between moral obligation and social influence, and ethical climate against compliance behavior to determine the impact and determine which had more influence on compliance behavior. Next, moral obligation and social influence was tested to determine if they predict the ethical climate of the organization. Lastly, a path analysis was done to determine if compliance behavior mediated the relationship between the organizational ethical climate and moral obligation or social influence. The findings may help facilitate understanding of what influences healthcare leaders' compliance behaviors and help develop better compliance programs in healthcare organizations.

Definitions

The following are the operational definitions for the terms used in the study:

Compliance behavior: Intentions and attitude toward compliance and has internalized the set of standards as the set of values that should be followed or acted upon (Amankwa et al., 2018; Yazdanmehr & Wang, 2016a).

Compliance culture: The behavioral intentions and attitudes of employees become the way things are done within the organization (Amankwa et al., 2018).

Ethical climate: The employees' shared perception of the companies procedures, practices, and policies (Yazdanmehr & Wang, 2016a). The moral atmosphere of the workplace (Yazdanmehr & Wang, 2016a).

Moral obligation: An individual's desire to behave in a way that aligns with their personal sense of morality or the person's internal obligation to follow their sense of right and wrong which is an intrinsic motivator (Sutinen & Kuperan, 1999).

Social influence: An individual's concern for their social reputation and the moral principles that they use to base their behavior (Sutinen & Kuperan, 1999). It is an extrinsic motivator that directs behavior (Sutinen & Kuperan, 1999).

Socioeconomic Theory: A model that blends economic theory with theories from psychology and sociology to account for moral obligation and social influence, which may be associated with illegal behavior (Sutinen & Kuperan, 1999).

Assumptions

There are several assumptions associated with this study to be mentioned. One assumption I made is that the participants responded to survey questions openly and honestly. Another assumption was that those responding to the survey understand compliance and compliance regulations well enough to answer the questions accurately. The next assumption was that participants did not have a negative attitude towards compliance that would hinder their responses. I also assumed that some individuals perceive compliance as an impediment to progress rather than a protection to the organization. Although that was the case for some, I also assumed that others desire to comply with the organizations compliance policies and the desire was driven by the variables of moral obligation or social influence.

Scope, Delimitations, and Limitations

Scope

In this study, I analyzed the elements that impacted an employee's motivations for abiding by an organization's compliance rules and regulations in healthcare organizations. The participants for this study were limited to leaders in healthcare

organizations who live and work in the United States. The leader participant pool was specific to those in the position of managers and above since the focus of the study was on leaders and inclusive of only those who work in a healthcare system within the United States. The purpose of limiting the study to managers and above was to determine the greatest motivator among healthcare leaders on compliance behavior since leaders influence the organization's trajectory. Leaders impact the organizational decisions, impact the organization's ethical climate and the organization's culture. If their motivations lead to more compliance behaviors, they could lead to a higher ethical culture.

Delimitations

The theory used for this study was a socioeconomic theory because the theory developed the concept that people are motivated to compliant behaviors by factors such as moral obligation and social influence (see Bin-Nashwan et al., 2020; Sutinen & Kuperan, 1999). According to this theory, these specific motivators influence a person to comply with regulations and are intrinsic or extrinsic (Bin-Nashwan et al., 2020; Sutinen & Kuperan, 1999). One of the goals of this study was to determine which motivator would be more influential in directing behavior. Other researchers have used different theories, such as rational choice theory which stipulates that individuals reason and choose benefits and cost based on economic gain (S. Kim et al., 2014; Stober et al., 2019). Another consideration was norm activation theory, yet this theory only focuses on personal norms and the commitment to internalized values (Yazdanmehr & Wang, 2016a). While the factors of compliance behavior may involve elements of rational

thought and personal norms, this study focused on the relationship between moral obligation and social influence as influencers of compliance behavior which aligns with socio-economic theory rather than the other theories evaluated.

Limitations

I identified three limitations that were in conducting this study. The first involved data collection. The data collection process for this study was through a self-report survey and the results could be impacted by the bias of the common methods of using a self-report method (see Kock et al., 2021). One specific problem related to common methods bias is that it can impact the reliability and validity of the study if the researcher does not control for this (Kock et al., 2021). Offering participants an option to anonymously participate online may decrease anxiety and increase honesty in their responses. The survey for my study was both anonymous and online.

The second limitation was that a survey to collect data from the participants. The collection of survey data can slow down the process because the sample size needed can take longer to obtain (Moura, 2017; Stadtlander, 2018). Using power analysis to determine sample size, the estimated sample size needed for this study was approximately 196 participants. Using the online survey process did not hinder the timeliness of the results.

Another potential limitation was related to the changes needed in the ISP-related instrument. The instrument selected to obtain compliance behavior was limited to IS policies. IS is a division of healthcare compliance. This study was related to overall compliance, so the assessment needed to state CP for compliance policies rather than ISP

for IS policies. This change did not change the instrument's nature but needed to be approved by all committee members. Modifying an instrument can alter the trustworthiness of the tool (Pergert et al., 2018). Since there was a slight change to one of the instruments, those survey items needed to be evaluated through a pilot study. The authors of this scale also noted that the scales were not previously validated and their reliabilities vary (Tyler & Blader, 2005). It was validated in a former study using a group of university students (Yazdanmehr & Wang, 2016a).

Significance

The study provided an original contribution by being the first to assess the impact of moral obligation and social influence on compliance behaviors from organizational leaders. This research topic could help enhance healthcare compliance programs' effectiveness so that organizations can create a compliance culture. Throughout corporations, ethical issues are often found in various professions or at many organizational levels (Weber & Wasieleski, 2013). In 2004, the Federal Sentencing Guidelines for Organizations (FSGO) were amended to reduce the concept that ethics and compliance programs were a meaningless part of the organization (Bodenger & Steiner, 2017; Weber & Wasieleski, 2013). Along with high requirements from the federal government, organizations continually face increased emphasis to enhance their reputational status (Arikan et al., 2016; Weber & Wasieleski, 2013). These outside pressures stimulate organizational leaders to build ethics and compliance programs into the organizational structure. As compliance leaders develop and deploy their compliance programs, they need their programs to enhance their motivation to do the right thing.

Compliance leaders can build programs that engage employee motivation when they know what their strongest motivations are.

Summary and Transition

Chapter 1 introduced the study on motivations that may lead to compliance behavior among healthcare leaders. This chapter explained the intrinsic and extrinsic motivations studied and the most significant influence on compliance behavior. This chapter described the importance of compliance in healthcare organizations and the risks associated with noncompliance in healthcare. The purpose of the study and the research questions and hypotheses were also explained in this chapter as well as the nature of the research to be conducted and its significance.

Chapter 2 provides a detailed explanation of the techniques and studies examined for this research study. Chapter 3 explains the statistical methods used to analyze the data and the rationale for the study. Chapter 4 presents the results of the study and includes a few changes from the study plan. An analysis of the data collected with the tests performed and their related hypotheses. Lastly, Chapter 5 gives a summary of the study including an interpretation of the analysis of the information presented in this study. Also contained in Chapter 5 is the implications and conclusions of this research study.

Chapter 2: Literature Review

In this literature review, I investigated the relationship between moral obligation or social influence on the organization's ethical climate as mediated by the ethical behavior of the organization's leaders. The general problem is that noncompliance elevates the organization's risks, leading to financial loss and cultural deterioration. The specific problem is that organizational leaders need to understand what motivates employees toward compliance, so they can incorporate compliance training built to enhance motives which lead to a more robust ethical climate and an organizational culture that strives to adhere to federal regulations (see Amankwa et al., 2018; Bin-Nashwan et al., 2020; Kusserow, 2017; Sutinen & Kuperan, 1999). The purpose of this quantitative study was to test the relationship that moral obligation and social influence had on compliance behaviors among healthcare organizational leadership and determine if the leader's behaviors had a mediating effect on the relationship between moral obligation or social influence and the organizational ethical climate (see Bin-Nashwan et al., 2020; Sutinen & Kuperan, 1999).

Celis (2018) stated that compliance consists of several aspects which include concepts such as obedience, observance, deference, governability, amenability, passiveness, nonresistance, and submission to or a sense of duty to what should be done, moral obligation, accountability, propriety, good behavior, answerability, acting morally, and ethically. Stober et al. (2019) found that developing more specific compliance training enhances an organization's compliance program and ethical climate. In their study, Bin-Nashwan et al. (2020) noted the components that lead to compliance were

system fairness, morale, peer influence, and law enforcement. Morale and peer influence are closely related to the factors evaluated in this study. Yazdanmehr and Wang (2016) explored employee's norms toward IS compliance policies leading to compliance behavior. D'Arcy et al. (2014) found that sanctions effectively prevent rational justifications that lead to IS policy violations.

Chapter 2 obtains an overview of the related theories and variables of this study. This chapter describes the detailed literature search process to find all relevant articles for this study. This chapter describes the detailed literature search process to find all relevant articles for this study. This chapter discusses approaches to support this study's hypothesis, a review of theories used in similar studies, and a description of the variables appropriate for this study. Lastly, this chapter concludes with the methods used to analyze the data and justify this research study.

Literature Search Strategy

The literature search criteria were limited to peer-review articles with the last five years for general searches. The search engines included Thoreau Multi-Database Search for broad searches of all databases, govinfo (formerly FDsys), Federal Agency Participation, ERIC, Open Library, ProQuest Central, ProQuest Health & Medical Collection, SAGE Journals, APA PsycArticles (formerly PsycArticles), APA Psychinfo (formerly Psychinfo), and APA PsycTests (PsycTests). The literature review contains federal regulations, federal policies, federal articles, dissertations (peer-reviewed), and books, along with scholarly articles.

Initially, the literature search strategy focused on healthcare compliance programs and determining if the program was effective. There seemed to be a lack of information related to compliance programs during this search, so the focus shifted to what motivated employees toward compliance. The search terms used were *compliance*, *healthcare* compliance, compliance program, healthcare ethics, ethics and compliance, corporate ethics programs, information security, compliance theory, socioeconomic theory, compliance motivation, moral obligation, and social influence.

Theoretical Foundation

The socioeconomic theory formed the theoretical foundation for this study. This theory combines economic theory with theories from sociology and psychology to provide a complete explanation of tangible and intangible motives for influencing decisions to follow a defined set of regulations (Bin-Nashwan et al., 2020; Sumkoski, 2016; Sutinen & Kuperan, 1999). Compliance theory builds on socioeconomic theory by factoring in the threat of sanction to moral obligation and social influence (Celis, 2018). Behavioral theories such as planned behavior theory include the cognitive considerations used when developing intentions to comply with policies when facing sanctions (D'Arcy & Lowry, 2019).

Socioeconomic Theory

Sutinen and Kuperan (1999) hypothesized that individuals were motivated to comply with a set of standards either through intrinsic or extrinsic motivations. The researchers demonstrated evidence that deterrence from sanctions alone was not the only explanation of compliance behavior (Sutinen & Kuperan, 1999). They combined

economic theory with theories from sociology and psychology to identify the tangible and intangible motivators that led to compliance behavior with a certain standard or regulations (Bin-Nashwan et al., 2020; Celis, 2018; Sutinen & Kuperan, 1999). The motivators factored in by this theory are moral obligation (intrinsic) and social influence (extrinsic) motivators (Bin-Nashwan et al., 2020; Celis, 2018; Sutinen & Kuperan, 1999). The researchers found that their model's framework enabled them to create a more effective compliance program (Celis, 2018; Sutinen & Kuperan, 1999).

Sutinen and Kuperan (1999) and Celis (2018) found that previous research models indicated that compliance stemmed from sanctions as a deterrence from noncompliant behavior and the level of compliance may be determined by the severity of the sanction or the certainty that the sanction would occur. Researchers believed that what motivated an individual towards compliance predicated from more than sanctions (Celis, 2018; Sutinen & Kuperan, 1999). They believed the tangible and intangible factors that motivated individuals behaviors were greater influences towards compliance behavior than simply implying sanctions (Celis, 2018; Sutinen & Kuperan, 1999). The model developed by Sutinen and Kuperan incorporated the motivators of moral obligation and social influence along with the conventional costs and revenues associated with illegal behavior to account for behaviors toward compliance regulations.

Engaging the compliance department is one of the challenges that compliance department leaders face when organizational leaders have operational decisions (Cornett, 2006; Jaeger, 2012; Popa, 2018). One way compliance leaders attempt to engage organizational leaders and their subordinates is through annual compliance training

(Blass, 2019; Brown, 2016; Cornett, 2006; Popa, 2018). Annual compliance training is one of the federal requirements of an effective compliance program (Blass, 2019; Brown, 2016; Popa, 2018). Creating compliance training that connects with employee's motivations is a way to develop more engagement with compliance leaders (Cornett, 2006; Mulreany & McCormick, 2000). The federal government developed the strategy for creating an effective compliance program (Health Care Fraud Prevention and Enforcement Action Team Office of Inspector General, 2000; Kusserow, 2017; Popa, 2018). The strategy developed by the Office of Inspector General (OIG) outlined seven foundational elements the government believes will create an effective compliance program which includes (Health Care Fraud Prevention and Enforcement Action Team Office of Inspector General, 2000):

- 1. Implementing written policies, procedures, and standards of conduct
- 2. Designing a compliance officer and compliance committee
- 3. Conducting effective training and education
- 4. Developing effective lines of communication
- 5. Conducting internal monitoring and auditing
- 6. Enforcing standards through well-publicized disciplinary guidelines
- 7. Responding promptly to detected offenses and undertaking corrective action.

The OIG stipulated that the purpose of providing open lines of communication is to prevent problems from occurring OIG, 2000). This process was developed to keep compliance engaged in preventing and rectifying issues as they arrive (Kusserow, 2017; OIG, 2000). This component of the program is an aspect of keeping compliance

connected with the organization's operations aspect (Bodenger & Steiner, 2017; Jaeger, 2012; Kusserow, 2017; Popa, 2018). Compliance leaders need to be approachable and believe they participate in an organization motivated towards compliant behaviors (Bodenger & Steiner, 2017; Jaeger, 2012; Kusserow, 2017; Popa, 2018).

Compliance Theory

Compliance theory is a model based on socioeconomic theory (Celis, 2018).

According to Celis (2018), the only aspect that could improve upon the determinants of compliance developed by Sutinen and Kuperan (1999) is that the threat of sanctions could also help improve compliance with regulations. One of the hypotheses Celis proposed found that the organization's commitment to compliance positively impacts the level of regulatory compliance. He also found that, as it relates to information technology, the organization's maturity level moderates the influence of organizational commitment on its level of compliance (Celis, 2018).

Bussmann and Niemeczek (2019) presented the factors preventing corporate crime from management as trustworthiness and consistency. The study by Bussmann and Niemeczek showed several factors in preventing organizational crime from leaders are trustworthiness and consistency. Open communication and transparency also play significant roles in promoting integrity in organizations (Bussmann & Niemeczek, 2019). Failing to speak up about noncompliant behavior was a breeding group for economic crime and corruption (Bussmann & Niemeczek, 2019).

Psychological and Behavioral Theories related to Compliance Behavior

Along with the theories previously listed, other theories explain compliance using psychological or behavioral theories. Those used in other studies include, but are not limited to, social cognitive theory, theory of planned behavior, and protection motivation theory (see D'Arcy & Lowry, 2019; Fritz et al., 2013; Gundu, 2019; Vance et al., 2012). These are some of the most frequently examined theories in information security compliance, a specific subset of compliance (Lebek et al., 2014).

Social Cognitive Theory

Social cognitive theory (SCT) was developed from social learning theory and indicated a reciprocal interaction between individuals, their behavior, and the environment (Fritz et al., 2013; Thojampa & Sarnkhaowkhom, 2019). An individual's behaviors are affected by external factors, and the consequences of their behavior are based on actual or perceived outcomes (Thojampa & Sarnkhaowkhom, 2019). The individual's level of self-efficacy may determine their confidence to perform certain behaviors and can influence the person's real or perceived outcome (Thojampa & Sarnkhaowkhom, 2019). SCT is a behaviorally focused theory. Element of belief (i.e., moral obligation) and social influence are not critical elements of this theory.

SCT is a theory used to explain why individuals adhere to an organization's code of ethics by describing how communication and modeling impact the individual's conduct (Fritz et al., 2013; Otaye-Ebede et al., 2020). The proponents of SCT proposed that an individual's behaviors are affected by factors such as a third party, outcome expectations, or expectations based on actual or perceived internal and external

parameters (see Fritz et al., 2013; Otaye-Ebede et al., 2020). Initially, the individual may decide a course of action, and their thought may serve as a guide to action (Fritz et al., 2013). SCT also recognizes imprinting as a powerful force in behaviors learned in social situations by observing the actions and hearing the conversations of others (Fritz et al., 2013; Garcia et al., 2019). Supervisors and peers model the organization's expected behaviors and appropriate conduct (Fritz et al., 2013; Garcia et al., 2019). Individuals may develop behaviors that comply with standards and policies by observing how their leaders and others they work with follow the rules set forth by the organization (Fritz et al., 2013; Garcia et al., 2019; Otaye-Ebede et al., 2020).

Theory of Planned Behavior

The theory of planned behavior (TPB) indicates that there are three main influences on human behavior: (a) a person's normative beliefs that create their perceived social pressure, (b) a person's behavioral beliefs that result in their attitude toward behavior, and (c) control beliefs that create an individual's sense of ease or difficulty toward performing a behavior (Chen et al., 2018). The direct effect of perceived behavioral control on an individual's intentions to behave a certain way and their actual behavior is postulated by TPB (Pradhananga & Davenport, 2019). The theoretical constructs of TPB are attitudes, subjective norms, and behavioral intentions (Pradhananga & Davenport, 2019; Zhang et al., 2020). TPB does recognize that personal values and moral norms impact behavior (Zhang et al., 2020). One of the critical elements missing is the aspect of social influence.

According to D'Arcy and Lowry (2017), TPB suggests that an individual's behavioral intentions predict their attitude toward behavior (Chang, 1998; Cooper, 2017; D'Arcy & Lowry, 2019). TPB theorists assert that the individual methodically considers any consequences of their behavior before taking action (Cooper, 2017). The individuals' intentions are a direct indicator of their actions or behavior (Cooper, 2017; D'Arcy & Lowry, 2019). The research shows strong evidence of the relationship between behavior and intention (D'Arcy & Lowry, 2019). Some of the critical constructs of TPB in relation are attitude, behavior, self-efficacy, intentions, social norms, and subjective norms (Cooper, 2017; D'Arcy & Lowry, 2019).

Protection Motivation Theory

Protection motivation theory (PMT) indicates that the person's thoughts impact their positive and negative responses when faced with a threat (Vance et al., 2012). The factors that play into an individual's motivation to protect themselves include the severity of the threat, the likelihood of the threat actually occurring, one's ability to produce the recommended preventive behavior, and their level of self-efficacy (Chen et al., 2018; Menard et al., 2017). Responses to the threat are either adaptive (i.e., compliant) or maladaptive (i.e., noncompliant; Menard et al., 2017; Vance et al., 2012). The individual may be motivated to perform maladaptive behaviors by either intrinsic or extrinsic rewards (Menard et al., 2017; Vance et al., 2012). Intrinsic rewards are related to the pleasure of performing the maladaptive behavior, and extrinsic rewards are related to obtaining something that results from performing a maladaptive behavior (Menard et al.,

2017). Outcome and consequences seem to be the driving force behind this theory. There is little attention given to the critical factors of this study.

Theorists of PMT postulated that an individual's thoughts mediate their response, either positive or negative, when information about a threat arises (Chen et al., 2018; Menard et al., 2017; Vance et al., 2012). Their responses are maladaptive when they are noncompliant and adaptive when compliant (Menard et al., 2017; Vance et al., 2012). According to Vance et al. (2012), three threat appraisals are rewards (or benefits), vulnerability, and perceived severity. Rewards may result in either intrinsic or extrinsic motivation to sustain or escalate a behavior (Menard et al., 2017; Vance et al., 2012). A person's vulnerability may decrease their maladaptive behavior, yet their desire for rewards (either intrinsic or extrinsic) may increase their maladaptive behavior (Chen et al., 2018; Menard et al., 2017; Vance et al., 2012). Rewards may include peer acceptance or physical or psychological satisfaction (Vance et al., 2012). A vulnerability may result in the likeliness of an unwanted result if the individual fails to take action to prevent the result from occurring (Menard et al., 2017; Vance et al., 2012). Perceived severity may lead the individual to take action to receive a reward or resist the reward depending on the harshness associated with taking action (Chen et al., 2018; Menard et al., 2017; Vance et al., 2012). Add summary and synthesis to connect back to your study. Develop a strong conclusion for the section.

Value Based Norms Theory

The value based norms (VBN) theory is a widely used moral theory that postulates that feelings of moral obligation drive the individual towards positive social

behaviors such as volunteering and positive environmental behaviors such as land conservation (Sia & Jose, 2019; Zhang et al., 2020). In VBN, the aspect that directs an individual's behavior is their personal norms or their sense of moral obligation (Pradhananga & Davenport, 2019). VBN derived from the norm activation model and shifted the theory's focus from personal values to an environmental paradigm while also considering aspects such as awareness of consequences, an ascription of responsibility, pro-environmental personal norms, and pro-environmental behaviors (Zhang et al., 2020). The inclusion of the environmental aspect and lack of social influence seems to hinder the consideration of the model for this study.

Key Study Variables and Concepts

Information security (IS) compliance seems to be the most common area studied regarding compliance (Amankwa et al., 2018; Chen et al., 2018; D'Arcy & Lowry, 2019; S. Kim et al., 2014; Moody et al., n.d.; Yazdanmehr & Wang, 2016a). There seems to be little research regarding a healthcare compliance program. Since IS compliance is a subset of a compliance program in the healthcare setting, researchers can learn from previous studies compared to other studies on compliance. Researchers have varied in the theories used to study motives toward compliance behavior which results in a variety of variables to consider (Bin-Nashwan et al., 2020; Celis, 2018; Cooper, 2017; D'Arcy & Lowry, 2019; Sia & Jose, 2019; Yazdanmehr & Wang, 2016a). This study focused on moral obligation, social influence, compliance behavior, and ethical climate.

In previous studies on motivations toward regulatory compliance, there are a variety of variables studied such as self-efficacy, moral obligation, personal norms, social

influence, social norms, appraisal of consequences, knowledge of compliance, and attitude towards compliance (Celis, 2018; Cooper, 2017; D'Arcy & Lowry, 2019; Gundu, 2019; Sutinen & Kuperan, 1999; Vance et al., 2012). This study looked specifically at the influence of moral obligation, social influence on compliance behavior, and the intervening impact of the organization's ethical climate has on the employee's compliance behavior. This section of the literature review provides more explanation of the variables for this.

Moral Obligation

In previous studies, researchers describe moral obligation as a responsibility because it is a person's thoughts or values about what is right versus what is wrong and leads to a sense of duty on actions (Bhutta et al., 2019; Celis, 2018). Bin-Nashwan et al. (2020) draws from Sutinen and Kuperan (1999) for their theoretical foundation of the socio-economic theory, which focuses on moral obligation and social influence that leads to compliance behavior. Their use of moral obligation developed from psychology based on moral development and an individual's sense of fairness (Bin-Nashwan et al., 2020; Sutinen & Kuperan, 1999). Bin-Nashwan et al. (2020) conceptualize that it combines an individual's beliefs towards fairness and law appropriateness, leading to a high degree of compliant behavior from people.

Bin-Nashwan et al. (2020) recognizes that some individuals' inclinations toward compliant behaviors are based on intrinsic motivators and their sense of moral obligation while others do not. Those lead by an intrinsic motivation have a sense of responsibility toward a specified duty or set of values to contribute to society (Bin-Nashwan et al.,

2020; Sutinen & Kuperan, 1999). Research seems to focus on income tax compliance through their study of morality and compliance behavior while overlooking the impact of moral consideration toward their compliance decisions (Bin-Nashwan et al., 2020). Some researchers say that moral consideration or moral obligation has received enough attention to compliance behavior and leaves aspects of regulatory compliance policy under-researched (Alm & McClellan, 2012; Bin-Nashwan et al., 2020).

Researchers use different terms to describe a person's sense of moral obligation, such as personal norms and moral beliefs (Bhutta et al., 2019; Gorsira et al., 2018; Jeon et al., 2021; Yazdanmehr & Wang, 2016a). Commonly, norm activation theory (NAT) describes personal norms as a commitment to an individual's internal values or a sense of moral obligation to a specific behavior (Yazdanmehr & Wang, 2016a). The understanding based on the theory is that moral obligation is the driving force that leads to one's behavior (Klockner & Blobaum, 2010; Schwartz, 1977). Yazdanmehr and Wang (2016) extract from norm activation theory that moral obligation is an appropriate means for measuring personal norms because obligation precedes actions. Some studies related to IS compliance found strong evidence that an individual's level of moral commitment or moral obligation is a strong intrinsic motivator toward compliance behaviors (D'Arcy et al., 2009; Jeon et al., 2021). Yazdanmehr and Wang (2016) further state that moral obligation encompasses all aspects of personal norms.

Yazdenmehr and Wang (2016) explain that personal norms include internalized values, self-sanctions, and the tendency to act according to NAT. Klockner and Blobaum (2010) assume that one's personal norms influence their awareness of need, awareness of

consequences, and perceived behavioral control, which activates the individual's sense of moral obligation (Hunecke et al., 2001; Klockner & Blobaum, 2010). Individuals' norm through experiencing certain aspects like principles and ethics comes from moral obligation (Ratnaki & Putra, 2019). There are clear links to moral obligation and personal norms. It seems that personal norms simulate moral obligation, and a focus of this study is moral obligation.

Social Influence

There are several descriptions used in the research to describe social influence, such as normative beliefs, peer influence, descriptive norms, and social determinates (Bin-Nashwan et al., 2020; Bulgurcu et al., 2010; Herath & Rao, 2009; Lebek et al., 2014; Limayem & Hirt, 2003; Pahnila et al., 2007). At least one researcher defines social influence as perceptions developed by the value of personal activities by members of their social group that influence a person's behavior (Herath & Rao, 2009; Loh & Ren, 2020). The messages they receive from others and what they observe from others in their social sphere shape what the individual determines as acceptable or unacceptable behaviors (Gorsira et al., 2018; Herath & Rao, 2009). Individuals may observe the behavior or others and use that information to determine their social reality, which results in their descriptive norms, while subjective norm, which is the influence of the expectations from others, pressure the individual to behave in specific ways (Gorsira et al., 2018; Herath & Rao, 2009).

There are various ways people respond to commands, such as obedience from authority figures, complying with a straightforward or subtle request from a peer or

friend, and conforming to norms (Loh & Ren, 2020). Social influence may occur in any social setting or with any network (Loh & Ren, 2020; Yang & Treadway, 2018). It may be seen as pervasive and persistent because it impacts many areas of life, such as family settings, educational settings, and occupational settings (Campopiano & Massis, 2015; Hansen et al., 2011; Loh & Ren, 2020; Yang & Treadway, 2018).

In the workplace, the organization's social environment shapes both the work climate and the ethical climate of an organization since the employees perform the work performed within the organization (Angonga & Florah, 2019; Fritz et al., 2013). The social environment of the organization reflects the normative (practices related to an employee's career specialization) and descriptive (employee's behaviors and moral standards) ethics of the organization (Angonga & Florah, 2019). Some researchers found that in organizational social environments with high levels of informal social control, there was a relationship between severity and compliance among those offenders deterred by the environment (Bussmann & Niemeczek, 2019; Worrall et al., 2014). Those potentially discouraged through informal social sanctions or social disapproval would conform to their environment and not break the law (Bussmann & Niemeczek, 2019; Worrall et al., 2014).

This information is consistent with what we understand from social learning theory (SLT) (Bin-Nashwan et al., 2020; O'Keefe et al., 2019; Sutinen & Kuperan, 1999). O'Keefe (2019) states the previous research used SLT to explain that role modeling from organizational leaders influences the behavior of their followers and that the leader's ethical conduct and their expectations of their followers influence the ethical

conduct of those that follow that leader. Much research has shown that the impact of ethical leaders conducts influences employee's level of misconduct, behavioral compliance intentions, workplace, deviance, job satisfaction, employee engagement, internal whistleblowing, and organizational citizenship (Bin-Nashwan et al., 2020; Fritz et al., 2013; Herath & Rao, 2009; O'Keefe et al., 2019; Thojampa & Sarnkhaowkhom, 2019). Some of the work on ethical leadership is directly associated with SLT (Bandura, 1969) and suggests that people determine appropriate behaviors in social settings by observing the behavior of others (Bin-Nashwan et al., 2020; Fritz et al., 2013; O'Keefe et al., 2019; Thojampa & Sarnkhaowkhom, 2019). Thus, leaders significantly impact those around them in social situations (Bin-Nashwan et al., 2020; Fritz et al., 2013; O'Keefe et al., 2019; Thojampa & Sarnkhaowkhom, 2019).

Yazdanmehr and Wang (2016) draw on both the norm activation and social norm theories for their research. Their concepts around social influence are drawn from social norm theory and conclude that social norms constructs an individual's normative beliefs, social pressure, social influence, and subjective norms (Yazdanmehr & Wang, 2016a). Some individuals engage in socially acceptable behavior to avoid social sanctions or ostracism within the workplace (Yang & Treadway, 2018; Yazdanmehr & Wang, 2016a). A group of individuals, such as in the workplace, learn the implicit and explicit rules of the environment through socialization or their interaction and communication with others (Yazdanmehr & Wang, 2016a). Those with a significant need to belong closely monitor their environment (Yang & Treadway, 2018). They may close attention to how others act or behave, following the acceptable social norms (Yazdanmehr & Wang, 2016a). They

allow their impression of the acceptable social norms to shape their compliance behavior (Yazdanmehr & Wang, 2016a).

Compliance Behavior

Organizational leaders seek to understand employee behaviors better because organizations are increasingly responsible for their employee's behaviors when they act in a manner that is illegal or unethical (Gorsira et al., 2018). For healthcare organizations, the federal government can fine the organization for acts of fraud done by employees (Kusserow, 2017; Office of Inspector General, 2000). Since an employee's behavior can have a direct impact on the organization, the organizational leaders and compliance leaders need a better understanding of what motivates compliance behavior and what creates an ethical climate within the organization (Celis, 2018; Cooper, 2017; Fritz et al., 2013; Kusserow, 2017).

Previous studies that focused on compliant behavior used behavioral theories such as the Theory of Planned Behavior, Theory of Reasoned Action, Experiential Learning Theory, Deterrence Theory, Rational Choice Theory, Involvement Theory, and the Theory of Organizational Theory (Amankwa et al., 2018; Bhutta et al., 2019; Cooper, 2017; D'Arcy & Lowry, 2019; Gundu, 2019; Hauser, 2020). An individual's behavior may be influenced by either internal and external factors (Ratnaki & Putra, 2019). The theories listed above explain behavior from an extrinsic perspective or a social perspective.

Theory of Planned Behavior (TPB) postulates that the primary predictor of actual behavior is an individual's behavioral intentions (Ajzen, 1991; Bhutta et al., 2019). TPB

is commonly used to explain behavior and suggests that intention is the primary motivator of behavior (Bhutta et al., 2019; Cooper, 2017; D'Arcy & Lowry, 2019; Elliott et al., 2005). Researchers use TPB to analyze information security compliance because the intention to comply with IS policies depends on the individuals' beliefs towards compliance-related behaviors in this particular area (Lebek et al., 2014). Intentions and the person's subjective norms and their perception toward their behavioral control impact their attitude, which results in behavioral outcomes (Bulgurcu et al., 2010; Cooper, 2017; D'Arcy & Lowry, 2019). Gundu (2019) sought to develop a model related to compliance motivation and reinforcement using the TPB and Deterrence Theory. He found that behavioral intentions resulted in 64% of desired and that cybersecurity compliance is a behavioral issue since actual behavior results from behavioral intentions based on TPB (Gundu, 2019). Yazdanmehr and Wang (2016) stipulate that behavior is motivated by external factors such as social influences, yet we find that TPB suggests that behavior is motivated by internal factors such as an individual's intentions (Bhutta et al., 2019; Cooper, 2017; D'Arcy & Lowry, 2019; Elliott et al., 2005; Gundu, 2019).

Another theory that evaluates behavioral intentions is the Rational Choice Theory (RCT) used in research related to compliance behavior (D'Arcy & Lowry, 2019; H. Kim & Han, 2019). RTC asserts that individuals draw their conclusions to participate in behavior based on their cost and benefit analysis (D'Arcy & Lowry, 2019; H. Kim & Han, 2019). As the individual contemplates the decision to act compliantly, they evaluate the perceived cost of compliance with the perceived benefit of compliance versus the perceived cost of noncompliance; their conclusion leads to their decision on how to

behave (Chang, 1998; D'Arcy & Lowry, 2019; H. Kim & Han, 2019). The cognitive process of their analysis factors their attitude and intentions, which results in their behavior responses (D'Arcy & Lowry, 2019; H. Kim & Han, 2019). There are some similarities between RCT and Protection motivation theory (PMT) which states that individuals assess the level of perceived danger involved in particular action and the severity of the consequences to determine how they will behave (Hina et al., 2019; Ifinedo, 2012).

Although TPB postulates behavior stems from intentions which is an intrinsic motivator, other researchers such as Yazdanmehr and Wang (2016) suggest that behavior directly influences external factors such as social norms, awareness of consequences, and ascription of personal responsibility. These researchers suggest that behavior is only affected by personal norms when individuals think their values are endangered (Yazdanmehr & Wang, 2016a). Their study explains that social norms or social influence shapes an individual's personal norms, which ultimately leads to their behavior, and the presence of personal norms diminish the impact of social norms on the person's behavior because they have already ingested the norm as a personal norm (Yazdanmehr & Wang, 2016a). This concept is similar to experiential learning theory, which promulgates that learning is the process of an individual taking concrete, practical activities that are routinely acted upon and reflecting on those experiences so they may become internally digested (Hauser, 2020). Once the person integrates the behaviors into automatic responses to specific situations, they are considered habits, and very little thought goes into the behavioral responses (Klockner & Blobaum, 2010; Nord et al., 2020; Vance et

al., 2012). These researchers believe that developing positive behavior responses or habits toward compliance in information security reduces information security risks for the organization (Klockner & Blobaum, 2010; Nord et al., 2020; Vance et al., 2012). In the realm of compliance studies, there are mixed results on intrinsic and extrinsic motivators, which warrant additional research in this area.

Ethical Climate

From the literature, the definition of ethical work climate is the perceptions of what the organization determines is ethically correct behavior and how organizational leaders should manage ethical issues (Angonga & Florah, 2019; Baskin et al., 2015; O'Keefe et al., 2019). One can state that ethical climate is the perceived attitudes towards behavioral expectations such as safety or ethical issues (O'Keefe et al., 2019). The ethical climate is a pervasive characteristic used to decide by and may be the basis of right and wrong decision-making by employees (O'Keefe et al., 2019). Organizational ethical climate sets the tone for employee's expected behaviors throughout the organization (Angonga & Florah, 2019; O'Keefe et al., 2019). With scandals such as Enron, WorldCom, and Comroad impacting the business world, organizational leaders find it increasingly necessary to focus on compliance and the organization's ethical behaviors (Stober et al., 2019).

The belief is that specific groups develop the organizational climate within the organization (Angonga & Florah, 2019; O'Keefe et al., 2019). These standards create the basis for making decisions in a prescribed ethical manner (Angonga & Florah, 2019; O'Keefe et al., 2019). An organization with clear ethical standards reports having fewer

serious ethical issues since they tend to deal with ethical matters as they arise rather than allowing those issues to become significant ethical concerns (O'Keefe et al., 2019). Some studies found a significant correlation between the organization's ethical climate and inappropriate behaviors in the workplace (O'Keefe et al., 2019). The correlations between the global ethical climate and ethical leadership were significant in at least one study (Bouiloud et al., 2019; Gorsira et al., 2018; O'Keefe et al., 2019). In the study, the outcome determined that ethical climate mediated the relationship between ethical leadership and employee misconduct (O'Keefe et al., 2019). From this study, we may conclude that strong ethical leaders help the organization result in a higher ethical climate, resulting in fewer misconduct actions by employees (O'Keefe et al., 2019).

According to Schneider (1975), there seem to be five-dimensional constructs of ethical climate types: caring, law and regulation, rules, instrumental, and independence (O'Keefe et al., 2019; Schneider, 1975). There are similarities between law and code, which is compliance with the law and professional standards, and rule, which is compliance with the organization's rules (O'Keefe et al., 2019; Schneider, 1975). Caring is related to the welfare of others within the organization, while instrumental is an internal code, and independence is one's personal ethical code (O'Keefe et al., 2019; Schneider, 1975). At least one researcher noted that some of these dimensions might be somewhat like a continuum since it is unlikely that the organizational climate established focusing on maximizing both self-interest and the interest of others at the same time (Gorsira et al., 2018). What Schneider calls instrumental, Martin and Cullen (Martin & Cullen, 2006) call an egotistical climate since the individual intends to promote their self-

interest (Gorsira et al., 2018). The more recent research presents a simpler model of ethical climate by Gorsira et al. (2018), which states that, rather than a linear dimensional approach, the impact of perceived the individual's motives weakens ethical climate on corruption propensity.

Intrinsic Versus Extrinsic Motivation

In previous studies, researchers examined intrinsic and extrinsic motivators as influencers of compliance behavior. Motivation towards compliance is aspect researchers analyzed from social psychology literature on human behavior as a means of better understanding an individual's propensity to follow the rules (Celis, 2018; Jeon et al., 2021; Sutinen & Kuperan, 1999). Primarily two models are used to explain motivations toward behavior: the extrinsic and intrinsic motivational models (Jeon et al., 2021). Each motivator may impact behavior toward compliance; therefore, understanding the influence of each on compliance behavior is essential for compliance leaders to understand.

Intrinsic motivation is a model of thought related to the concept that individuals adhere to rules or regulations based on their innate desires to obey rules (Bin-Nashwan et al., 2020; Jeon et al., 2021). The individual's willingness to comply with a given set of standards or regulations drives the person's internal or moral beliefs, moral obligations, or personal norms (D'Arcy & Lowry, 2019; Jeon et al., 2021; Sutinen & Kuperan, 1999). When compared to external motivators, intrinsic motivation is more self-regulated because the individuals internal believes or moral obligations towards a higher level of authority are foundational towards their sense of doing what is right or wrong towards a

set of standards (Celis, 2018; D'Arcy & Lowry, 2019; Jeon et al., 2021; Sutinen & Kuperan, 1999). Since internal motivations regulate the individual's desire to comply, an organization may present compliance with their regulations as their set of values which may raise the intrinsic benefit for the employee (D'Arcy & Lowry, 2019).

While internal factors such as moral obligation or a moral beliefs drive internal factors, extrinsic motivators may influence behavior based on external motivators such as social influence, rewards, or perceived consequences (D'Arcy et al., 2009; Jeon et al., 2021; Sutinen & Kuperan, 1999). The extrinsic motivation model dictates that individuals determine to follow the rules are a set of standards-based on aspects such as the perceived consequences that individuals may receive, which may come in the form of punishment or rewards depending on whether the individual broke or followed the rules (Jeon et al., 2021; Sutinen & Kuperan, 1999). Researchers found that organizational leaders use extrinsic motivations to command and control individuals to follow the rules by instructing employees to follow a given set of rules or standards to avoid disciplinary actions, including termination if necessary (Jeon et al., 2021). While some believe this is an effective means of explaining compliance, Sutinen and Kuperan (1999) found that in areas where these standards were not implemented, external motivation failed to explain why individuals adhered to those rules; thus, theorized intrinsic motivations could only explain those cases. This research study seeks to determine if the intrinsic motivator of moral obligation or the extrinsic motivator of social influence in healthcare leaders toward compliance behavior.

Instruments

In evaluating the research studies related to this project, the researchers used various instruments to collect the data. These research studies focused on different variables and collected data on these variables using the instruments described in this section. The analysis provided through this section shows the wide variety of variables used and the various instruments selected to collect the information, yet some consistency in the use of Likert scales as a common theme of data collection. Chapter 3 describes the instruments chosen for this study. One of the primary instruments used for this study was scales from Yazdanmehr and Wang (2016), who evaluate aspects of information security compliance policy adherence. The instrument used by Beugre (2012) allows for data collection related to moral obligation, while the instrument by Flynn and Ames (2006) provides the scale for social influence.

Compliance Focused Approach Instruments

In the studies assessed for this research study, there are several instruments used to perform a survey. Yazdanmehr and Wang (2016) performed extensive research on the instrument used for their study, which the researchers restructured from previous research studies. To incorporate information security compliance as needed, Yazdanmehr and Wang (2016) adapted an instrument from Tyler and Blade (2005). The researchers pretested the instrument on MBA students and refined it based on the pretest (Yazdanmehr & Wang, 2016a). The items adapted for this study were ISP-related personal norms, awareness of consequences, and ascription of personal responsibility (Yazdanmehr & Wang, 2016a). The other constructs evaluated through this instrument

are principle ethical climate, descriptive norms, injunctive norms, subjective norms, ISP compliance behavior, deterrence, and ISP knowledge (Yazdanmehr & Wang, 2016a). The researchers measured all 35-items on a 7-point Likert scale (Yazdanmehr & Wang, 2016a). The results indicated the instrument maintained item reliability, convergent validity, and discriminate validity, as well as composite reliability (Yazdanmehr & Wang, 2016a). The average variance extracted values for all constructs were less than 0.5, and correlations were minimal (Yazdanmehr & Wang, 2016a). The survey was performed online and recruited through Amazon Mechanical Turk (MTurk) (Yazdanmehr & Wang, 2016a).

Two different research studies evaluate compliance using socio-economic theory. From previous research, Sutinen and Kuperan (1999) used Kohlberg's scale of moral development to represent moral development and legitimacy from Tyler's process to represent legitimacy of regulation by an individual (Sutinen & Kuperan, 1999). They assessed their study based on a formula developed to test their hypotheses based on the number of violators, the amount of non-compliance by individuals, and the total amount of non-compliance when policies or other factors changed (Sutinen & Kuperan, 1999). Bin-Nashwan, Abdul-Jabbar, Abdul Aziz, and Viswanathan (2019) divided their survey into two parts: demographic characteristics and observable variables. The observable variables consisted of 29 measurable items, and demographic characteristics used categorical scales to rank the information (Bin-Nashwan et al., 2020). The researchers adapted measurement items from previous research and consist of five constructs: Zakah systems fairness, Zakah morale, peer influence, law enforcement, and Zakah compliance

(Bin-Nashwan et al., 2020). The 29 measurement questions were sent to respondents and rated on a five-point Likert scale ranging from 1 = strongly disagree to 5 = strongly agree (Bin-Nashwan et al., 2020).

Celis (2018) used compliance theory in a study to evaluate his research using a survey questionnaire with 15 variables. The questionnaire variables assessed through this study are as follows: level of regulatory compliance, leadership, good governance, goal orientation, compliance training, audits, sanctions, IT organization, IT governance, knowledge of management, project risk management, change management, IT user acceptance, IT skills development, and systems audits (Celis, 2018). The responses were rated using a five-point Likert scale that ranges from 1 = strongly disagree to 5 = strongly agree (Celis, 2018). The researcher assessed this study using both a cross-case qualitative and a multivariate quantitative methodology (Celis, 2018).

To study the gap in employee cybersecurity compliance, the researchers conducted a web-based survey composed of 35 questions designed to obtain information regarding behavioral intentions (Gundu, 2019). The researchers used secondary data from published articles, white papers, and the internet to provide insights into related works performed globally by other researchers (Gundu, 2019). To gain a detailed understanding of the levels of cybersecurity awareness, the researchers used both observational data and documentary surveys which allowed them to become more acquainted with real-life behaviors (Gundu, 2019). The online surveys consisted of questions to understand the participant's knowledge, behavioral beliefs, normative beliefs, control beliefs, deterrence beliefs, and behavioral intentions (Gundu, 2019). The survey questions were true-false

questions with answers consisting of True, False, and Do not know (Gundu, 2019). The use of online surveys and observations with document surveys allowed the researcher to determine the knowledge and doing gap of the participants (Gundu, 2019).

In a study on information security policy compliance, Amankwa et al. (2018) determined that the best means of data collection was through a field survey. The researchers took two approaches to collect the data. The first approach was to manually distribute the questionnaires and have the participants return them within seven days (Amankwa et al., 2018). The second approach was to distribute an electronic copy of the questionnaires through the University's email distribution list over two-month (Amankwa et al., 2018). The instrument contained 25 questions rated on a 5-point Likert scale, with one representing strongly disagree to 5 representing strongly agree (Amankwa et al., 2018). The questionnaire contained six questions designed to capture the respondent's demographic information and 19 questions designed to capture information about the constructs (Amankwa et al., 2018). The items, which included end-user involvement, ISP compliance leadership, supportive organizational culture, attitude towards compliance with ISP, ISP compliance behavioral intentions, and ISP compliance culture (Amankwa et al., 2018). The researchers used several items such as attitude toward compliance, ISP compliance behavioral intentions, and ISP compliance culture were used from studies previously performed by other researchers (Amankwa et al., 2018). The researchers conducted a pretest on 20 participants to evaluate the face validity of the instrument and found it was sufficient to proceed (Amankwa et al., 2018).

Hina et al. (2019) performed a study of compliance behavior using the protection motivation theory. The researcher performed this quantitative study using a questionnaire to collect data and scored on a 5-point Likert scale which ranged from "strongly agree" to" strongly disagree" (Hina et al., 2019). Hina et al. (2019) validated the survey through a pilot test constructed of university employees, which confirmed reliability and validity. The constructs of the survey were a provision of the policy, security education, training and awareness programs (SETA), negative experience, perceived severity, perceived vulnerability, self-efficacy, response-efficacy, attitude, subjective norms, and information security policy compliance (ISPP) (Hina et al., 2019). All of the constructs were adapted from previous research studies on information security (Hina et al., 2019). The online questionnaire consisted of 44 items distributed to employees of private and public universities in Malaysia (Hina et al., 2019). Although the study was quantitative, the pretest was performed from a qualitative approach on a group of 68 participants so the researchers could gain a better understanding of the problems that exist (Hina et al., 2019).

In a study to understand the employee's habits regarding information security policy compliance (ISPC), Nord et al. (2020) used an instrument used in previous research. The instrument consisted of an independent variable: the impact of employee's habits of ISPC and the independent variables, including ISP awareness, gender, age, and information technology knowledge (Nord et al., 2020). The 8 items included in the instrument covered areas such as defining habits, understanding normal tendencies, or the practice of complying with ISP without the individual's awareness (Nord et al., 2020).

The instrument's establishment contains a statement that is "complying with information security is something," followed by eight statements that the participant rates on a 7-point Likert scale. The eight statements are:

- 1. I do frequently
- 2. I do automatically
- 3. I do without having to consciously remember
- 4. I do without thinking
- 5. That belongs to my (daily, weekly, monthly) routine
- 6. I start doing before I realize I'm doing it
- 7. That's typically "me"
- 8. I have been doing for a long time

The data for this study was collected through SurveyMonkey and collected from a medium-sized university in the Southeast region of the USA (Nord et al., 2020).

Jeon et al. (2021) sought to understand how intrinsic motivators impact employee compliance concerning information security. The researcher used instrument measures previous research studies such as Bulgurcu et al. (2010) and Herath and Rao (2009), who developed the scales for "intention to comply with ISSP" and one new scale that factored in an individual's perceived responsibility (Jeon et al., 2021). The other constructs assessed with this instrument are autonomy, perceived responsibility, work impediment based on the performance of security-related tasks, and self-efficacy (Jeon et al., 2021). The instrument measured each construct on a 7-point Likert scale, with one meaning strongly disagree and seven meaning strongly agree (Jeon et al., 2021).

Psychologically Focused Instruments

Cooper (2019) provides us with an understanding of what drives compliance behavior using the theory of planned behavior to explain compliance. The instrument used is called the psychographic scale, divided into two parts (Cooper, 2017). The respondents rate their response of agreement toward attitude statement on a five-point Likert scale (Cooper, 2017). The first part contained constructs that included the extent of perceived behavioral control (PBC), the degree of influence from significant others, the individual's intention to comply, and general attitudes toward compliance with water restrictions (Cooper, 2017). The survey process also included interrogating six focus groups conducted in six different areas and survey pretesting (Cooper, 2017). The focus group questions included both positive and negatively worded items to provoke thoughtful and honest answers (Cooper, 2017).

In a study on tax compliance, the researchers assessed the psychological factors of attitude toward tax compliance, subjective norms, perceived behavioral control, moral obligation, behavior for tax compliance, and intentions to engage in tax compliance through a survey (Bhutta et al., 2019). The instrument included 38 items within the survey rated on a 5-point Likert scale, with the undecided options being neither agree nor disagree (Bhutta et al., 2019).

D'Arcy and Lowry (2019) performed a study to determine the cognitive-affective drivers of information security policies by using a one-time online survey to begin data collection. The second data collection stage was completing daily online surveys over two weeks (D'Arcy & Lowry, 2019). As a means of developing patterns, the items within

the daily surveys represented variables randomly presented from the level 1 variables which consisted of positive affect, negative affect, work impediment, compliance attitude, organizational citizenship behavior, organizational deviance, compliance behavior, and co-worker compliance behavior (D'Arcy & Lowry, 2019). The one-time survey (level 2) consisted of items including benefits of compliance, computer monitoring, moral beliefs, subjective norms, and self-efficacy to comply (D'Arcy & Lowry, 2019).

Loh and Ren (2020) performed an experimental study to understand better social influence among middle school students in social networks. The students participated in activities as part of this observational study in which the students had to form groups and were assigned roles within the groups (Loh & Ren, 2020). The groups were assigned conditions (either inclusion or exclusion) and roles as either a target or a source (Loh & Ren, 2020). The researchers noted the observations of the participants based on the categories of target, source, inclusion, exclusion, age, and gender (Loh & Ren, 2020).

In another study on social influence, Yang and Treadway (2018) evaluated workers on the front line of a manufacturing company. The researchers collected two waves of data for this study in the form of questionnaires used to obtain information on coworkers' ostracizing behaviors, the need to belong, perceive workplace ostracism, political skill, and the control variables which were age, sex, network size, and position tenure (Yang & Treadway, 2018). For this study, the independent variable was coworkers' ostracizing behaviors with the need to belong and political skills acting as moderators and perceived workplace ostracism acting as mediators (Yang & Treadway,

2018). The employees rated their responses for perceived workplace ostracism, political skill, coworkers' ostracizing behaviors, and need to belong on a 6-point Likert scale ranging from 1 meaning never to 6 meaning daily (Yang & Treadway, 2018). In comparison, counterproductive work behavior counted on a 5-point Likert scale that ranged from 1 meaning never to 5 meaning every day (Yang & Treadway, 2018).

Ethically Focused Instruments

Gorsira et al. (2018) studied organizational ethical climate and individual motives using a questionnaire survey. There were two versions of the questionnaire; one was for the private sector while the other was for the public sector (Gorsira et al., 2018). The responses for each sector were reported separately, with 234 responses from the public sector and 289 responses from the private sector (Gorsira et al., 2018). The researchers scored the responses on a 7-point Likert scale, with one representing strongly disagree and seven representing strongly agree (Gorsira et al., 2018). The variables evaluated using this questionnaire were corruption-proneness, perceived ethical climate, personal norms on corruption, social norms on corruption, the possibility of engaging in corruption, the possibility of refraining from corruption, the cost of corruption, the benefits of corruption, and social desirability (Gorsira et al., 2018). A complete version of the questionnaire is only available via request to the first author of this study (Gorsira et al., 2018).

O'Keefe et al. (2019) also used a survey to collect data during their study. The survey used the Defense Ethics Survey, which measures personnel attitude toward ethical climate and ethical decision making (O'Keefe et al., 2019). For this study, the

researcher's used the internal mail systems to invite participants to participate by accessing the electronic version of the survey(O'Keefe et al., 2019). The participants had to rate their direct supervisor using a Likert scale that ranged from 1 meaning strongly disagree to 5 meaning strongly agree regarding their ethical leadership and rate the organization's ethical climate and organizational justice (O'Keefe et al., 2019). Those who participated in the study also had to identify their subordinates so those individuals could also rate their ethical leadership (O'Keefe et al., 2019). The variables assess during this study were lower-level ethical leadership, higher-level ethical leadership, ethical climate as it relates to caring, ethical climate as it relates to rules, procedural justice, and distributive justice (O'Keefe et al., 2019).

Just as those listed before, Bussmann and Niemeczek (2019) used a web-based survey to collect information on ethics and corruption within 15 major German companies. Through the survey, the researchers sought to obtain information from managers about their perceptions of attitudes towards and experiences with the values conveyed by their company and compliance-relevant situations (Bussmann & Niemeczek, 2019). The dependent variables were informal social control, positive whistleblower culture, and corruption risk within the company (Bussmann & Niemeczek, 2019). The independent variables were integrity-promoting culture and perceived high-quality of company training (Bussmann & Niemeczek, 2019). The moderating variables for this study include good knowledge of norms, rejection of corruption, and acceptance of anti-corruption programmed (Bussmann & Niemeczek, 2019).

Hauser (2020) collected data to study ethics and compliance training in the workplace through interviews, focus groups, observations, and company data. Participants participated in interviews with in-house senior leadership responsible for training employees in the area of ethics and compliance and the managers that participated in these trainings (Hauser, 2020). The researcher also conducted interviews with for-profit and not-for-profit service providers external to organizations that offered ethics and compliance training, such as law firms, non-governmental organizations, and universities (Hauser, 2020). Using semistructured and conversational interviews, the researcher conducted 39 interviews and transcribed them verbatim (Hauser, 2020). Questions asked during the interview process were open-ended related to the topic of ethics and compliance training and educational techniques used to train the participants (Hauser, 2020). Those that participated in the interview process had to share the organization's training documents, with the company's permission, as a means of enriching the interview process (Hauser, 2020). In addition to the interviews and documents, the researcher conducted a focus group workshop consisting of 30 senior ethics and compliance experts from both the public and private sector (Hauser, 2020). The workshop based in Switzerland was a half-day face-to-face event with round table discussions with five breakout sessions (Hauser, 2020). The focus group participants were provided preliminary results and asked to disclose their thoughts on the findings (Hauser, 2020).

Research Methods and Approaches

Compliance Focused Methods

Yazdanmehr and Wang (2016) tested their hypotheses using a t-test with bootstrapping. The study results also supported second and fourth hypotheses in that ISP-related awareness of consequences (β = 0.36; p < 0.001), which supports their first hypotheses (Yazdanmehr & Wang, 2016a). The second and fourth hypotheses were also supported by the study results in that ISP-related awareness of consequences (β = 0.28; p < 0.001) and ascription of personal responsibility (β = 0.27; p < 0.001) both reflected a positive impact on ISP-related personal norms (Yazdanmehr & Wang, 2016a). Lastly, the researchers found that the results did not support hypothesis three, which indicated that ISP-related awareness of consequences (β = 0.05; t-statistics = 0.8; Δ R² = 0.00) did not moderate the relationship personal norms and IPS compliance, yet ISP-related ascription of personal responsibility (β = 0.29; p = 0.5; Δ R² = 0.05) positively moderates the relationship between personal norms and ISP compliance (Yazdanmehr & Wang, 2016a).

The researchers analyzing Zakah compliance performed their analysis using a software program called SmartPLS version 3.0, which analyzed the information by variance-based structural modeling equation-partial least squares (PLS-SEM) version (Bin-Nashwan et al., 2020). The researcher selected PLS-SEM over covariance-based SEM (CB-SEM) because PLS-SEM this method provides a more appropriate prediction-oriented approach and handles non-normal data distribution (Bin-Nashwan et al., 2020). The results supported the first three hypotheses, while the fourth was not (Bin-Nashwan et al., 2020). This means that Zakah morale had a positive impact on Zakah payers'

decision to comply (β = 0.176; p < 0.001), Zakah system of fairness had a positive relationship with Zakah payers' compliance (β = 0.260; p < 0.000), and peer influence negatively impacted Zakah compliance (β = 0.385; p < 0.000) (Bin-Nashwan et al., 2020). The results did not support the fourth hypothesis, which meant that the influence of law enforcement did not impact Zakah payers' compliance decisions (β = 0.110; p < 0.061) (Bin-Nashwan et al., 2020).

Celis (2018) analyzed the results of the compliance study using *t*-test, correlation, and regression analyses. The research used the level of compliance as the dependent variable and organizational commitment, which covers areas such as leadership, government governance, goal orientation, compliance training, audits, and sanctions as the independent variable (Celis, 2018). As the moderating variables, the researcher used organizational maturity on IT organization, IT organization, IT organization, knowledge management system, project risk management, change management, IT user acceptance, IT skills development, and systems audits (Celis, 2018). The test results show that hypotheses one and two are true, which means that the organizational commitment positively influences the level of regulatory compliance and that the organization's maturity using IT positively moderates the influence of organizational commitment on the level of compliance (Celis, 2018). Overall, this indicates that a high level of commitment accompanied by a high level of maturity results in a high level of compliance (Celis, 2018).

Gundu (2019) analyzed the study results using a rule which specifies it is better to process the collected data less developed by ENISA. The researchers collected the data in

two iterations cycles that were five months apart and compared them to one another (Gundu, 2019). The results show that after the organization provided awareness and training the level of behavioral intention was satisfactory (85%), yet the results of actual behavior were low (54%) (Gundu, 2019). This information reflected a gap in what the employee knows and actual behavior in relation to cybersecurity (Gundu, 2019). The second iteration was modified to include deterrence beliefs to reduce the gap (Gundu, 2019). The deterrence modification had penalties and rewards to the employees' yearly appraisal (Gundu, 2019). The researchers saw a considerable decrease in incidents logged (78%) and saw a slight increase in behavioral intentions (4%) (Gundu, 2019). There was a 24% increase in actual behavior with some bad habits eliminated, such as passwords posted under keyboards, computers left logged while unattended, use of weak passwords, and responses to phishing emails (Gundu, 2019).

Amankwa, Loock, and Kritzinger (2018) evaluated the results using structural equation modeling (SEM), a second-generation multivariate data analysis method. Several variations of SEM, yet the one used for this study analysis was a partial least squares (PLS) analyzed through SmartPLS version 3.2.6 (Amankwa et al., 2018). The researchers found that the variables for security policy compliance, security policy compliance behavioral intentions, and security policy compliance culture significantly represent 54.8% of the variance in attitude toward compliance with ISP (Amankwa et al., 2018). The variance in security policy compliance behavioral intentions is explained 64.6% by attitude toward compliance with ISP (Amankwa et al., 2018). The combination of security policy compliance behavioral intentions and attitude toward compliance

significantly represent 72.7% of the variance in ISP compliance culture (Amankwa et al., 2018). The results mean the hypotheses related to the relationship between user involvement and attitude toward compliance and the relationship between supportive organizational culture and attitude toward compliance were statistically significant(Amankwa et al., 2018). In contrast, the relationship between leadership and attitude toward compliance was not statistically significant (Amankwa et al., 2018).

In the study on information security compliance behaviors in higher education settings, Hina, Selvam, and Lowry (2019) analyzed their results using structural equation modeling (SEM) techniques through the IMB SPSS v23 software program. The study results indicated that all of the hypotheses were significant except those related to the subjective norms toward information security compliance policy and response efficacy toward information security compliance policy (Hina et al., 2019). The results suggest that a person's intention to behave in a certain way may not be influenced by peer behavior which is also consistent with other research studies (Hina et al., 2019). The study results support the research model presented by the researchers, which indicates that an individual's intention to comply with the organization's information security policies is influenced either positively or negatively by the employee's attitude toward the availability and understanding of the policies (Hina et al., 2019).

Nord, Koohang, Floyd, and Palszkiewicz (2020) performed a quantitative study on information security policy compliance habits. Univariate Analysis of Variances (ANOVA) procedure to analyze the study results (Nord et al., 2020). The researcher used 8 statement items to determine the habits of the participants. The results indicated the

area with the highest mean score was in the area of those aware of ISP within the workplace, while the second-highest was primarily aware of ISP (Nord et al., 2020). The results suggest that reinforcing habits related to ISP compliance in the workplace may be strengthened by becoming more aware of ISP (Nord et al., 2020). The factors that strengthen awareness for employees are recognition, understanding, and identification of possible threats to information security, which means that awareness is imperative to creating a more secure system (Nord et al., 2020). In the various sections of the independent variables, the researchers found that females had better ISP habits than males and those with the highest mean scores were older participants (Nord et al., 2020). In contrast, those with the lowest mean score were younger participants (Nord et al., 2020). They also discovered that participants with a very high knowledge of IT were among those that rated the highest mean score, which supports their hypothesis that training has a significant impact on the level of compliance in the area of information security (Nord et al., 2020).

Jeon, Son, and Han (2021) performed the study using exploratory factor analysis with partial least squares structural equation modeling (PLS-SEM). All values resulted in statistical significance for each path coefficient, just as the researchers predicted (Jeon et al., 2021). The results of the study performed by Jeon, Son, and Han (2021) show that factors such as work impediments, perceived responsibility, and self-efficacy significantly impact an individual's intent to comply with the organization's information system security policies. The researchers also found that self-efficacy and perceived responsibility affect individuals' sense of autonomy (Jeon et al., 2021).

Psychologically Focused Methods

Cooper (2017) used a software program call Analysis of Moment Structures (AMOS) to evaluate the data. Each construct was analyzed using squared multiple correlations, and the researcher added standardized multiple regression weights to strengthen the correlations (Cooper, 2017). The researchers examined the data using structural equation modeling (SEM), which is a process that is useful when complex behavioral relationships of interest are involved (Cooper, 2017). This analysis process may be described as the combination of factor analysis and path analysis (which may include multiple or multivariant regression) and usually implemented as a confirmatory technique yet may be used for exploration (Cooper, 2017). This technique provides a straightforward means of addressing multiple relationships simultaneously and offering statistical efficiency (Cooper, 2017). In this study, the results support the hypotheses derived from TPB, which means that three of the constructs (attitudes, social norms, and perceived behavioral control) positively and statistically impact a person's intention to comply (Cooper, 2017). One construct (intention) showed a significant positive impact on actual compliance and was the strongest of the predictor constructs toward compliance (Cooper, 2017). The constructs impacting intention were perceived behavioral control as the strongest, with attitude as the second and social norms as the third (Cooper, 2017).

The psychological factors affecting tax compliance were studied, and found that perceived behavioral control, subjective norms, attitude towards behavior, and moral obligation impact tax compliance behaviors (Bhutta et al., 2019). The results revealed that all hypotheses were statistically significant, which means that attitude toward

behavior, subjective norms, perceived behavioral control, moral obligation, fairness perception, tax knowledge, and religiosity, as well as the mediating variable of intention to comply, impacted tax compliance behavior (Bhutta et al., 2019). In the study, the researchers evaluated the indirect effect on tax compliance behavior through the use of a mediator, which was intention to comply (Bhutta et al., 2019). The researchers found that the results were statistically significant with or without the mediator, so intention to comply (mediator) impacted each variable (attitude toward compliance, subjective norms, perceived behavioral control, and moral obligation) (Bhutta et al., 2019).

D'Arcy and Lowry (2019) analyzed the results of their study using multilevel analysis since their initial results revealed that there were within- and between-individual variances in the dependent variables. The researchers found that compliance attitude explains approximately 21% of the variance within-individuals and 34% of the variance between-individuals (D'Arcy & Lowry, 2019). In contrast, compliance behavior explains 32% of the variance within-individuals and 33% of the variance between-individuals (D'Arcy & Lowry, 2019). The study supported both hypotheses 1 and 3, which means significant relationships with compliance attitude exist at the within-individual level for positive effect, negative effect, and work impediment (D'Arcy & Lowry, 2019). Likewise, hypotheses 4 and 5 were supported which means cross-level relationships determine between benefits of compliance and compliance attitude as well as computer monitoring and compliance attitude (D'Arcy & Lowry, 2019). The results also supported hypotheses 2, 6, 9, and 11, which means within-individual antecedents of compliance behavior, organizational deviance, and coworker compliance (D'Arcy & Lowry, 2019).

For the cross-level relationships, the results supported hypotheses 7 and 12, meaning that moral beliefs and compliance behavior, as well as self-efficacy to comply and compliance behavior, were supported (D'Arcy & Lowry, 2019). In their analysis, hypotheses 8 and 10 were not supported, meaning subjective norms were not positively associated with daily ISP compliance behavior (D'Arcy & Lowry, 2019).

In Loh and Ren's (2020) experimental study, the researchers used middle school students from 56 different public middle schools to understand social influence better. The researchers randomly assigned middle schools into either the treatment or control groups (Loh & Ren, 2020). Those assigned to the treatment group received anticonflict intervention as the treatment for the study (Loh & Ren, 2020). The researchers performed two simulation studies within the schools with the students considered eligible and thus randomly assigned to the curriculum for anticonflict (Loh & Ren, 2020). The first simulation performed a social exclusion experiment, which meant the students did not interact across groups (Loh & Ren, 2020). The second simulation allowed the students to connect in a single network to groups that were not predefined (Loh & Ren, 2020). They compared data from the study using a linear regression model (Loh & Ren, 2020). The results indicate that anticonflict intervention was statistically significant in impacting perceived conflict norms for the students (Loh & Ren, 2020). The results showed the most considerable effect in two areas: social influence and the individual effect, which indicates that people are incredibly susceptible to the influence of others (Loh & Ren, 2020).

In Yang and Treadway's (2018) quantitative study related to social influence, they calculated results using hierarchical multiple regression analysis. To test the indirect relationship of hypothesis 6, the researchers analyzed the information using Hayes's Process with bootstrapping being used as a resampling strategy to obtain a pseudopopulation from the real dataset (Yang & Treadway, 2018). The new model of ostracism in the workplaces proposed by the researchers centers around the difference between the individual's perception and the behaviors of coworkers' objective of ostracizing them than how their response impacts the perception (Yang & Treadway, 2018). The researchers found that their theory supported the research in which the behaviors of others at work influence the behaviors and perception of the employee being ostracized (Yang & Treadway, 2018).

Ethically Focused Methods

Gorsira, Steg, Denkers, and Huisman (2018) analyzed the study results using an independent-samples-*t-test* for each sector. From the analysis, the researchers found that the sectors were not significantly different regarding their mean scores in the areas of corruption-proneness, perceived ethical climate, personal norms, the perceived cost of corruption, perceived benefits of corruption, and social desirability (Gorsira et al., 2018). The public sector respondents were weaker than the public sector respondents in the area of social norms, leading the researchers to conclude that perceived corrupt behavior was somewhat more acceptable and more common in the public sector than in the private sector (Gorsira et al., 2018). The results also indicate that public sector respondents believed they had more opportunities to engage in corruption than those of the private

sector (Gorsira et al., 2018). Yet, the private sector respondents believed they had less opportunity to refrain from corruption than their public sector counterparts (Gorsira et al., 2018).

The ethical study by O'Keefe, Howell, and Squires (2019) sought to understand better the role of the perceived ethicality of leaders and how the perception of organizational climate shaped ethical leadership. The researchers evaluated the study results using confirmatory factor analysis to determine the validity of the scales for ethical leadership, ethical climate, and organizational justice during the preliminary analysis phase (O'Keefe et al., 2019). They used hierarchical linear modeling with five different models to evaluate the principle analysis (O'Keefe et al., 2019). In the baseline model, the intercepts for outcomes were compared against the empty random intercepts model to determine the significance of ethical leadership across participants (O'Keefe et al., 2019). In another level of the model, higher levels of ethical leadership created a fixed effect, then each situational predictor was added as another fixed effect to the second level and used to explain the variability in lower-level ethical leadership (O'Keefe et al., 2019). The final level added an interaction between the situational predictor of level 2 and the ratings for the higher-level of ethical leadership to test for the moderation of the situational predictors (O'Keefe et al., 2019). Overall, the most significant finding was that an interactive effect exists between higher level ethical leadership and perceptions of ethical climate and organizational justice for predicting lower levels of ethical leadership (O'Keefe et al., 2019). The results found were not as expected in that the nature of the interaction was the opposite of the desired results (O'Keefe et al., 2019).

When the ethical climate and organizational justice were negative, the higher and lower level of ethical leadership was stronger (O'Keefe et al., 2019).

In Bussmann and Niemeczek's (2019) study related to ethical leadership, the researcher created a causal model with a satisfactory model fit. The model reflects that the first three hypotheses are accurate in that an organizational culture that promotes integrity impacts areas such as positive whistleblower culture, informal social control, and corruption risk with the organization (Bussmann & Niemeczek, 2019). Using multivariate analysis, the researcher found significance in an organization that promotes integrity towards preventing crime (Bussmann & Niemeczek, 2019). The results of the multivariant analysis revealed that the areas that promote an ethical company culture include also training regarding cultural norms and ethical leadership, specifically including direct supervisors (Bussmann & Niemeczek, 2019).

In the study on ethics and compliance training, Hauser (2020) performed a qualitative study that grouped the training objectives into four approaches in regards to the ethics and compliance decision-making process, which included raising ethics and compliance awareness and knowledge; fostering ethics and compliance judgment; developing ethics and compliance intentions; and provoking ethics and compliance behavior (Hauser, 2020). The analysis of this qualitative study indicates that a primary focus of ethics and compliance training is on ensuring that employees, including executives, possess knowledge of the internal and external rules and regulations related to ethics and compliance (Hauser, 2020). During the interview process, participants expressed various shortcomings regarding the ethics and compliance training despite the

use of content-oriented and instructor-centered training (Hauser, 2020). Based on the interviews, the researcher discovered that executives and employees pretend that they will behave they learn during training (Hauser, 2020). Yet, employees experience conflicting messages outside training and face unrealistic pressures that make it nearly impossible for them to act as they are taught during ethics and compliance training (Hauser, 2020).

Summary and Transition

In this chapter, the elements covered are the variables used in this study, a description of the various research methods used in the literature review search, and the theories and models used in previous research studies. The theories related to this study were explained and described as a means of supporting this study. The methods, variables, and data analyzed through this chapter justify this research project.

The research studies used to support this research project are categories into three main categories which are compliance research studies, psychology research studies, and ethics research studies. Many of the studies evaluated for this research project use either the theory of planned behavior, protection motivation theory, or determination theory as a theoretical foundation for their study. Another common theory used was the protection motivation theory. Several studies used some of these theories together.

Information security compliance is researched more often than a general compliance program. IS compliance being a specific subset of compliance. Researchers seeking to determine the motivating factors of IS compliance programs explore such factors as personal norms, subjective norms, compliance behavior, peer influence,

sanctions, training, beliefs, and culture (Bin-Nashwan et al., 2020; Celis, 2018; Gundu, 2019; Hina et al., 2019; Yazdanmehr & Wang, 2016a). More research is needed to explore compliance programs in other areas and further investigate motivating factors such as moral obligation, compliance behavior, and the organization's ethical climate (Bin-Nashwan et al., 2020; D'Arcy & Lowry, 2019; Yazdanmehr & Wang, 2016a).

Chapter 3 describes in detail the statistical methods used in this study and the rationale for this study. The next chapter explains the sampling process and a justification of the plan for data analysis. The conclusion of Chapter 3 provides an explanation of the steps used for screening the data, discussions of the threat to internal and external validity, and a description of the ethical treatment of participants.

Chapter 4 discusses the data results with a description of the research questions and hypotheses. An analysis of the data collected, and tests performed related to the hypotheses are also contained in that chapter. Chapter 4 concludes with a summary of the analysis. Chapter 5 provides an interpretation of the analysis related to this study. In Chapter 5, information related to the limitations of the study and recommendations for further research are discussed. Chapter 5 also includes implications and conclusions of this research study.

Chapter 3: Research Method

The purpose of this quantitative study was to test the relationship between the predictor variables, moral obligation and social influence, and the criterion variable, compliance behaviors among healthcare organizational leadership and determine if leader's behaviors had a mediating effect on the relationship between moral obligation or social influence and organizational ethical climate. Chapter 3 contains the research design and rationale, the population, recruitment process, participation, sampling, sampling procedures, and ethical factors. In addition, this chapter includes a detailed outline of the instrument and constructs. This chapter also covers the data analysis plan with a description of the procedures for data screening. Also included are the research questions, hypotheses, and threats to validity.

Research Design and Rationale

This research study was a nonexperimental quantitative research study designed to analyze the relationship that moral obligation and social influence had on compliance leaders in healthcare organization leaders and determine if there was a mediating effect on the relationship between moral obligation or social influence and organizational ethical climate. The variables in this study included the predictor variables of moral obligation and social influence. The criterion variable was compliance behavior and the mediating variable was ethical climate.

As a means of better understanding the relationship between moral obligation, social influence, compliance behavior, and ethical climate, the data related to the research study was analyzed using multiple regression analysis and explicitly analyzing the path

analysis of the variables. The research questions are designed to determine the relationship between moral obligation and compliance behavior or the relationship between social influence and compliance behavior. Along with trying to determine which predictor variable has a strong relationship with the criterion variable, a goal of this study was to determine the impact of the mediating variable, ethical climate, on the relationship between the criterion variable and the predictor variables.

The quantitative research design is consistent with similar studies on motivations toward various aspects of compliance. Two of the most used procedures of statistics in studies are simple and multiple regression (Morrissey & Ruxton, 2018). Cooper (2017) and Celis (2018) both used regression analysis to conduct their investigations. Cooper used the AMOS software program to conduct a squared multiple correlation test and a standard multiple regression analysis to assess the correlations collected. Through the quantitative study by Cooper, I found that aspects such as attitude, social norms, and perceived behavioral control positively and significantly influenced an individual's intention to comply. Celis performed a quantitative study that analyzed the data of his compliance study using *t* test, correlation, and regression analysis. The design of Celis' study was to determine the impact on the level of compliance within the organizations through the organization's commitment toward compliance. Both researchers used a survey to obtain their data, and responses were answered on the surveys using the Likert scale method.

In addition to those studies, researchers also studied compliance toward information security using a quantitative approach. To better understand of the habits that

impact compliance with information security, Nord et al. (2020) evaluated factors such as compliance policy awareness, gender, age, and IT knowledge. The researchers analyzed the data by univariate analysis of variances (ANOVA). Through their quantitative study, researchers Kim and Han (2017) found that the organization's moral corporate social responsibility impacts an employees' intention to comply with the organization's ISP for compliance. Lastly, a quantitative study on information system security policy reveals that work impediments, perceived responsibility, and self-efficacy (Jeon et al., 2021).

Research Methodology

This section on research methodology contains details related to the process for sampling participants, the population used in this study, and the recruitment process for participants. Detailed in this section includes an explanation of the instrument used, justification for the instrument, and operationalization of this instrument. This section contains the data analysis process and justification of the data, then covers any threats to validity and how the threats may be mitigated. Lastly, this section includes information on how the data related to this study was protected so that the study information was ethically protected.

Population

For this study, the target population was organizational leaders in the United States working in healthcare organizations. The participant's targets for this study were organizational leaders, or adults over the age of 18 years old, in positions of manager and above. Those outside the list of leadership roles did not meet the qualifications related to this study. The participant's selection was made through convenience sampling.

According to the U.S. Bureau of Labor Statistics (2021), there are approximately 429,800 jobs in healthcare management. Compared to corporate America, women are better represented in leadership and entry-level positions (Berlin et al., 2019). In healthcare, women represent 58% of managers, 50% of senior managers/directors, 42% of vice presidents, 31% of senior vice presidents, and 30% of C-suite (Berlin et al., 2019). In corporate America, women represent 38% of managers, 34% of senior managers/directors, 29% of vice president, 23% of senior vice president, and 22% of C-suite (Berlin et al., 2019). Women of color represent approximately 11% of these same groups, and white women represent 34% (Berlin et al., 2019). Among the male population, white men make up approximately 43% of the people, and men of color make up the remaining 11% (Berlin et al., 2019). This healthcare population should correlate to the participants used by MTurk.

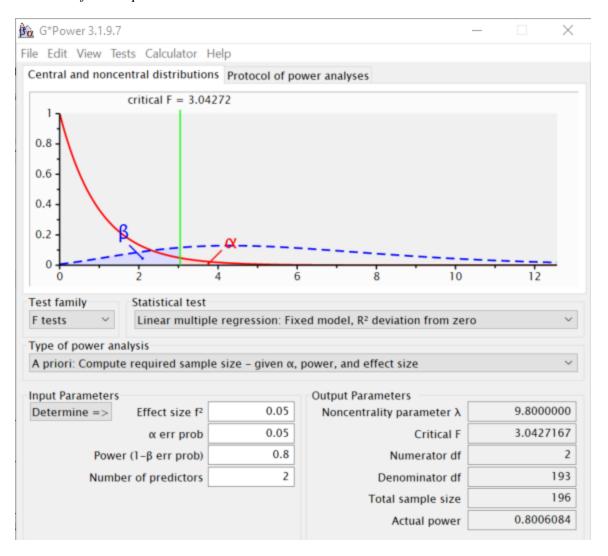
Sampling and Sampling Procedures

The sampling strategy I used for this study was a form of nonprobability sampling called convenience sampling through an online crowdsourcing website by MTurk (see Gerlich et al., 2018). The data collection design included a link to a survey form developed in Qualtrics. The survey link from Qualtrics was uploaded to MTurk and was used to generate a human intelligence task) for workers to select (MTurk, 2018a). MTurk (2018b) allowed me to assign qualification types using the qualification operation, including age, employment industry, gender, job function, language, and degree. The qualifications selected for this study included job function – management, employment

industry – healthcare, and age -18 and older. Participants were able to select the survey questions through their worker account.

A free power analysis program called G*Power is used for various statistical tests in the social, behavioral, and biomedical sciences (Faul et al., 2009). For this study, G*Power was used to calculate the sample size. The inputs for this analysis included an alpha value of 0.05 so that the possibility of a Type I error was not greater than 5%, a power (β) of .80, two predictor variables (see Faul et al., 2009). The effect size was set at 0.05, which is classified as small effect size (Faul et al., 2009). The results of the calculation are 196 participants, as seen in Figure 1. Type II errors may occur when the power level is lower than .80 (Cohen, 1992), so the power level for this study was set at .80. Several researchers performing similar research used MTurk for their data collection (e.g., D'Arcy & Lowry, 2019; Menard et al., 2017; Yazdanmehr & Wang, 2016a).

Figure 1G*Power Results for Sample Size



Procedures for Recruitment, Participation, and Data Collection

For the recruitment process for this study I went through MTurk to collect eligible participants in the United States who work within healthcare organizations in positions of manager and above which may include managers, directors, executive directors, vice presidents, senior vice presidents, executive senior vice presidents, or presidents. The

participant pool was able to select the survey through MTurk. MTurk is an online crowdsourcing website where a requester pays individuals for work performed such as writing a review, identifying a photo, or answering survey questions (AWS, 2021). I selected MTurk selected because it seemed to be the best source of participants for this study. The MTurk process provided participants that work or have worked at various healthcare entities. Once the participant selected the survey, they were asked qualifying questions such as type industry, age, gender, years of service, and position the participant holds. Participants that qualified obtained a description of the research study, which included the purpose for the study, the study process, advantages and disadvantages of the study, all confidentiality associated information with the option to withdraw, and opportunities for obtaining additional information or posing questions about the study. The survey participants remained anonymous since the only needed identifiers were the participant's type of position (e.g., manager, director), industry, age, gender, and years of service.

The survey for participants included information about the study, such as the purpose, use of information, directions on how to take the survey, access to the survey, the inclusion protocol, and deadlines for the survey. Access to the survey also contained an introduction that explains the purpose, conventions, and potential use of the information related to this study. In the introduction to this survey, participants were presented with an informed consent to allow them to opt-out of taking the survey. Those who failed to complete the informed consent were eliminated from the participant pool.

Those who meet the informed consent were included as a participant in the participant pool. Each participant was thanked for their time and consideration.

Instrumentation and Operationalization of Constructs

Three different sources provided the survey questions used for this study. The survey questions included general or demographic type questions used to determine if the individual qualified as a member of the target population. Before the participants were approved for the survey, they had to answer five qualifying questions related to the participant demographics. Participants had to identify the industry they worked in, their age, gender, years of service, and their position. The participants answered eight of the survey questions on a 5-point Likert scale and 28 survey questions on a 7-point Likert scale. Once they completed the 36-question survey, they could close out of the survey link. Participants could stop answering the survey at any time had they decided not to participate. The three different sources covered the predictor variables, moral obligation and social influence, the criterion variable, compliance behavior, and the mediating variable, ethical climate.

Moral Obligation Scale

The questions regarding moral obligation, one of the predictor variables for this study, were obtained from a study performed by Beugre (2012b). The moral obligation scale consists of 18 items on three different dimensions, which are moral obligation (eight items), moral accountability (six items), and moral outrage (four items) scored on a 5-point Likert scale that ranged from 1 meaning strongly disagree to 5 meaning strongly agree (Beugre, 2012b). For this study, only the moral obligation subscale containing eight

questions were used. Beugre (2012b) developed and validated the deontic justice scale with 124 participants. The researchers provided the participants a copy of the questionnaire with instructions to complete it then dropped the survey in a box designated for the responders (Beugre, 2012b). The participants questioned consisted of 150 employees from the mid-Atlantic region of workers from an electronics retail chain (Beugre, 2012b). Out of 150 questionnaires sent, a total 134 questionnaires were returned (Beugre, 2012b). Ten of those participating in this study returned the questionnaires as incomplete, so 124 of them were actually analyzed (Beugre, 2012b).

Beugre (2012) performed a second study to show evidence of the scale's construct validity. The second study included 101 participants from a university in the mid-Atlantic region (Beugre, 2012b). Beugre (2012b) found that the result regarding scale internal consistency reliability was relatively high from each subscale with moral obligation (α = .89), moral accountability (α = .89), and moral outrage (α = .85). The item analysis for each scale was also relatively high for each item which measured moral obligation (M = 4.36, SD = 4.10) with scores that ranged from 4.15 to 4.50, moral outrage (M = 4.04, SD = 0.84) with scores that ranged from 3.94 to 4.10, and moral accountability (M = 3.96, SD = 0.84) with scores that ranged from 3.88 to 4.13 (Beugre, 2012b). The interitem correlations ranged from .29 to .69 for moral obligation, .36 to .66 for moral accountability, and .52 to .64 for moral outrage (Beugre, 2012b). Written permission to use this assessment is in the description of the test published in the PsychTEST database. The permission statement says the test may be reproduced and used for noncommercial research and educational purposes without seeking written permission (Beugre, 2012a).

Social Influence Scale

The scale for social influence, the other predictor variable for this study, came from a study performed by Flynn and Ames (2006a). These researchers evaluated women's ability to overcome negative gender stereotyping by self-monitoring (Flynn & Ames, 2006b). The participants selected for this study were students enrolled in a master's of business administration program at a university within the United States (Flynn & Ames, 2006b). The students enrolled in a 2-year program, and the participant pool consisted of 96 individuals (Flynn & Ames, 2006b). The project for this study was a semester-long group project with strategic assignments throughout the study, with the final assignment consisting of multiple questionnaires administered at different times (Flynn & Ames, 2006b). One of the questionnaires was a self-assessment of their self-monitoring, another was their perceptions of their team member's social influence, and the third was their contribution to the group project (Flynn & Ames, 2006b).

The social influence scale consisted of four statements scored on a 7-point scale that ranged from 1 meaning never to 7 meaning always (Flynn & Ames, 2006b). The researchers averaged the responses to the four questions to determine the overall perception measure for each respondent (Flynn & Ames, 2006b). Overall, the researchers found the reliability coefficient rated at 0.82 for this four-item scale (Flynn & Ames, 2006b). The responses provided by the participants provided the perceptions developed toward their team member's social influence during this study (M = 4.69, SD = 0.57) (Flynn & Ames, 2006b). Flynn and Ames (2006) reported that the predictive power of the social influence measure as $\beta = .31$, t(95) = 3.00, p < .01. Written permission to use this

assessment is in the description of the test published in the PsychTEST database. The permission statement says the test may be reproduced and used for noncommercial research and educational purposes without seeking written permission (Flynn & Ames, 2006a).

Information Security Policy Questionnaire

Lastly, the study by Yazdanmehr and Wang (2016a) provided the questions for principle ethical climate (the mediating variable of this study), an ascription of personal responsibility, personal norms, descriptive norms, subjective norms, ISP compliance behavior (associated with the dependent variable of this study), and ISP knowledge. The 24-items used in this assessment are answered using a 7-point Likert scale which ranged from 1 meaning strongly disagree to 7 meaning strongly agree (Yazdanmehr & Wang, 2016a). In their study, Yazdanmehr and Wang provided an online survey to 201 participants of organizational ISP-related workers in the United States. To pretest the survey instrument, the researchers performed a pilot study on a group of masters of business administration students at a southwest American university (Yazdanmehr & Wang, 2016a).

Yazdanmehr and Wang (2016) validated the instrument by examining the questionnaire's reliability, composite reliability, convergent validity, and factor and cross-loadings. These researcher reports that the cross-correlations are smaller than the square root of the average variance extracted (Yazdanmehr & Wang, 2016a). The average variance extracted from all constructs' was higher than 0.5, indicating that the constructs' variance was higher than the error variance (Yazdanmehr & Wang, 2016a). The

researchers also found that all constructs are distinct with minimal correlations among all constructs, and all items were found highest on their intended construct (Yazdanmehr & Wang, 2016a). They also found that all factor loadings maintained higher than 0.70 with the same or more than 50% of the variance shared for each item construct (Yazdanmehr & Wang, 2016a). Using Harman's one-factor test to determine any impact of common method bias on the data set, they found that no single factor explains the majority of the variance (Yazdanmehr & Wang, 2016a). The researchers evaluated for social desirability bias using Marlowe-Crowne social desirability scale and found no significant influence with $\beta = 0.01$, and p = 0.1 (Yazdanmehr & Wang, 2016a). Written permission to use this assessment is in the description of the test published in the PsychTEST database. The permission statement says the test may be reproduced and used for noncommercial research and educational purposes without seeking written permission (Yazdanmehr & Wang, 2016b).

In seventeen (17) of the questions from the Information Security Policy (ISP) Questionnaire, the question contains the abbreviation ISP, and one (1) question contains the words "information security" (Yazdanmehr & Wang, 2016b). To be consistent with the needs of this study, a change from the ISP abbreviation to CP occurred, which meant compliance policies and information security needs to be changed to compliance to represent the compliance department. The questions that needed to be changed are listed below. A pilot test performed to determine the validity of the change. A G*Power test determined the sample size. The inputs for this analysis included an alpha value of 0.05 so that the possibility of a Type I error is not greater than 5%, a power (β) of .90, two

predictor variables (Faul et al., 2009). The effect size is set at 0.6, which is classified as a medium effect size (Faul et al., 2009). The results of the calculation determined that 21 participants were needed. The pilot participants were obtained through MTurk just as the study participants. A test for the Pearson correlation coefficient was run to determine the reliability and validity.

- 1. I believe that I am co-responsible for the protection of the organization's ISP.
- 2. I feel responsible to do something against violation of the organization's ISP.
- 3. I feel responsible to help my colleagues comply with the organization's ISP.
- 4. I feel guilty if I do not comply with the organization's ISP.
- 5. I feel morally obligated to comply with the organization's ISP.
- 6. I am willing to put extra effort into complying with the organization's ISP on a regular basis.
- 7. I believe other employees comply with the organization's ISP.
- 8. I think most employees in my organization follow the organization's ISP
- I am convinced other employees in my organization comply with the organization's ISP.
- 10. It is likely that the majority of other employees in my organization comply with the organization's ISP.
- 11. My boss thinks that I should follow the organization's ISP.
- 12. Computer technical specialists in my organization think that I should follow the organization's ISP.

- Top management in my organization thinks I should follow organization's
 ISP.
- 14. The information security department in my organization thinks that I should follow organization.
- 15. How often do you comply with the organization's ISP?
- 16. How often do you use the organization's ISP to guide what you do on the job?
- 17. How often do you seek information about the organization's ISP before acting?
- 18. How often do you follow the Organization's ISP about how you should use information systems related resources?

Data Analysis Plan

This quantitative research study examined if moral obligation and social influence were predictors of compliance behavior among healthcare leaders when mediated by ethical climate. In cases where there are two or more independent variables, Creswell and Creswell (2018) recommend analyzing the data using multiple regression with path analysis so the researcher may learn about the relationship between the variables.

Researchers describe the method of structural equation modeling (SEM) as a combination of factor analysis and path analysis, a form of multiple regression analysis or multivariant analysis (Cooper, 2017). The research analysis process multiple regression analysis with path analysis was appropriate since the ethical climate was the mediating variable between two predictor variables of moral obligation and social influence and the criterion variable of compliance behavior.

An online survey was used to gather the data for this study which was then analyzed using multiple regression analysis through the IBM SPSS version 27 with PROCESS, which provided the statistical information needed to assess the data for this study appropriately. The use of IMB SPSS version 27 provide the descriptive statistics necessary to understand aspects of the study, such as the means, standard deviations, and range of scores (Creswell & Creswell, 2018). Other elements included in the data analysis are Pearson's correlation coefficient to better understand the relationship between the variables (Creswell & Creswell, 2018).

Researchers must go through a process of cleaning and screening the data to identify potential issues through the data entry process (O'Rourke, 2000).

Implementation of this process may occur in several ways, including examining the information manually to identify incorrect responses or in SPSS using the technique of list cases through the software program (O'Rourke, 2000). A significant impediment to the data analysis process can be missing data identified through the screening process (Desimone et al., 2015). Running a frequency analysis is another means of identifying data entry or coding issues (O'Rourke, 2000). The frequency process helps identify responses that need to be eliminated because of missing information. The Durbin-Watson coefficient determines if errors occurred due to autocorrelation and is a quick way to calculate the sample size critical values (Creswell & Creswell, 2018; Turner, 2020). Each of these processes were implemented as a means of evaluating the data for this study.

A primary role of the research questions and hypotheses is to shape the focus the purpose of the study (Creswell & Creswell, 2018). Questions one and two primarily focus

on the relationship of the predictor variables for this study. Question three focuses on the relationship of the criterion variable, while questions four through six focus on the mediating variable's relationship. The research questions and hypotheses are as follows:

RQ1: Does social influence (measured by the Targets of Influence Measurement) lead to compliance behavior (measured by ISP Measurement – ISP Compliance Behaviors) in healthcare organizational leaders?

H₀: Social influence is not a significant predictor of compliance behavior in healthcare organizational leaders.

 H_a : Social influence is a significant predictor of compliance behavior in healthcare organizational leaders.

RQ2: Does moral obligation (as measured by Moral Obligation Scale) lead to compliance behavior (measured by ISP Measurement – ISP Compliance Behaviors) in healthcare organizational leaders?

H₀: Moral obligation is not a significant predictor of compliance behavior in healthcare organizational leaders.

H_a: Moral obligation is a significant predictor of compliance behavior in healthcare organizational leaders.

RQ3: Does moral obligation (as measured by Moral Obligation Scale) predict leader compliance behavior (measured by ISP Measurement – ISP Compliance Behaviors) above and beyond social influence (measured by the Targets of Influence Measurement)?

H₀: Moral obligation does not have a more significant impact on compliance behavior than social influence.

H_a: Moral obligation does have a more significant impact on compliance behavior than social influence.

RQ4: Does moral obligation (as measured by Moral Obligation Scale) and social influence (measured by the Targets of Influence Measurement) predictor ethical climate (each measured by the ISP Measurement)?

H₀: Moral obligation and social influence do not predict ethical climate.

H_a: Moral obligation and social influence do predict ethical climate.

RQ5: Does organizational ethical climate (measured by ISP Measurement – Principle Ethical Climate) predict leader compliance behavior (measured by ISP Measurement – ISP Compliance Behaviors)?

H₀: Organizational ethical climate does not predict compliance behavior.

H_a: Organizational ethical climate does predict compliance behavior.

RQ6: Does leader compliance behavior (measured by ISP Measurement – ISP Compliance Behaviors) mediate the relationship between moral obligation (as measured by Moral Obligation Scale) and organizational ethical climate (each measured by the ISP Measurement)?

H₀: Leadership compliance behavior does not mediate the relationship between moral obligation and organizational ethical climate.

H_a: Leadership compliance behavior does mediate the relationship between moral obligation and organizational ethical climate.

RQ7: Does leader compliance behavior (measured by ISP Measurement – ISP Compliance Behaviors) mediate the relationship between social influence (measured by the Targets of Influence Measurement) and organizational ethical climate (each measured by the ISP Measurement)?

H₀: Leadership compliance behavior does not mediate the relationship between social influence and organizational ethical climate.

H_a: Leadership compliance behavior does mediate the relationship between social influence and organizational ethical climate.

Threats to Validity

Researchers need to understand the factors that may create threats to validity to manage and minimize the threats (Creswell & Creswell, 2018). Internal validity refers to the extent to which alternative explanations for the findings in a study can be confidently ruled out (Creswell & Creswell, 2018). External validity refers to the extent to which a finding from a study can be generalized or extrapolated across time, people, or settings (Creswell & Creswell, 2018).

External Validity

The target population for this study was healthcare leaders in the United States who work as a manager or higher. External validity is the ability to generalize the study's findings performed to larger populations of interest depending on factors such as the setting, the representative population, validity, reliability, and potential treatments (Findley et al., 2017). The external validity for this study was limited because they only

apply to western cultures, which are like the United States. Additionally, the finding of this study was to be only applicable to the healthcare industry.

Internal Validity

There are potential concerns with internal validity in experimental studies specifically related to the experimental procedures or treatments related to the study (Creswell & Creswell, 2018). This research study was a non-experimental quantitative research study. Because this was a non-experimental study, there were no groups or treatments to manipulate as with a traditional experimental research study. Although cause and effect were not an issue that impacts this study, there were other considerations.

The instrumentation used for this study could threaten internal validity. One of the measurement tools being used in this study needed to be modified. It was identified in the limitations that the researcher did not validate the instrument and the reliability varies, but it was validated in a former study. This had the potential to impact the internal validity of this study. The instrument has been used in several studies, and this was taken into consideration for each of them. In this study, a pilot study was used to evaluate the instrument. The results of reliability and validity for each item are presented in Chapter 4.

Ethical Procedures

A critical aspect of this research study was developing and following the ethical procedures for this study. The research design for this study included steps to protect the confidentiality of the study participants. The plan for confidentiality was submitted to the institutional review board (IRB) for approval, and approval confirmation was saved. The

IRB approval number was included in all forms and communications related to this study.

The study participants needed to consent to participate in the study and were financially incentivized to participate.

To maintain the anonymity of the participants, the identifying factors associated with the participants were limited to the type of position they held within their organization, age, gender, and tenure. It was clear to the participants that their responses will not be shared, so they understand that they should not endure negative consequences for participating in the survey. MTurk was found to make it easier for responders to maintain anonymity while allowing researchers to obtain private information that participants may not otherwise share (Stritch et al., 2017).

The questions asked in this survey were related to the ethical climate of the organization, the participant's knowledge of compliance, questions related to the participant's compliance behavior, their moral obligation, and their social influence. The survey questions did not include participants' education, finances, medical, mental, sexual, or demographic information. The survey questions did also not include information about the participant's family history, illegal activities, or substance abuse. The data files were downloaded and maintained on a computer with an encryption code and password protected. The files will be destroyed after five years of completion of this study. The researcher, dissertation committee, and survey company are the only ones with access to the data.

Participants were over the age of 18. Contributors were not recruited based on identifiers such as vulnerable population, emotionally disabled, in crisis, residents of a

facility, or mentally disabled. Participants worked in healthcare organizations which included some of the age of 64 or older as allowed by the IRB. Participants were expected to live within the United States and were not coerced in any way.

Summary and Transition

Chapter 3 provided information related to this quantitative, non-experimental study which compared the relationship between the predictor variables moral obligation and social influence with the criterion variable compliance behavior and the mediating variable ethical climate. As explained in the chapter, the data collection method used in this study was an online survey. The data were analyzed through multiple regression methodology to determine the significance of the data obtained and classify the relationship's strengths between the predictor, criterion, and mediating variables.

In addition, this chapter contained detail information regarding the research design with the research rationale for this study. The research methodology, sampling population description, and procedures were also contained in this chapter. There was information related to the survey instrument, including the justification for the plan for screening and data analysis and the research questions contained in this chapter. This chapter closed with a description of the threat to validity and the procedures to ensure ethical practices are followed.

Chapter 4 discusses the data results with a description of the research questions and hypotheses. An analysis of the data collected, and tests performed related to the hypotheses are also contained in that chapter. Chapter 4 concludes with a summary of the analysis. Chapter 5 provides an interpretation of the analysis related to this study. In

Chapter 5, information related to the limitations of the study and recommendations for further research are discussed. Chapter 5 also includes implications and conclusions of this research study.

Chapter 4: Results

The purpose of this quantitative study was to examine the relationship that the predictor variables, moral obligation, and social influence, had on the criterion variable, compliance behavior, among healthcare organizational leaders. The purpose included determining if the leader's behaviors had a mediating effect on the relationship between moral obligation or social influence and the organizational ethical climate. Multiple regression analysis was used to determine the strength of the relation of the variables. The use of path analysis helped to determine a directional path between the variables. Determining the strength and directional path of the relationships was helpful in better understanding the factors that influence compliance within a healthcare organization and informing compliance leaders how to develop more effective compliance programs with policies and training that are more impactful to the organization and lead to an ethical culture of high quality.

This chapter presents the research questions and hypotheses and contains the data analysis results from the pilot study and the data collection study. This chapter also presents the results from the multiple regression analysis and the path analysis studies, which helped test the hypotheses.

Research Questions and Hypotheses

RQ1: Does social influence (measured by the Targets of Influence Measurement) lead to compliance behavior (measured by ISP – ISP Compliance Behaviors) in healthcare organizational leaders?

 H_01 : Social influence is not a significant predictor of compliance behavior in healthcare organizational leaders.

 H_a 1: Social influence is a significant predictor of compliance behavior in healthcare organizational leaders.

RQ2: Does moral obligation (as measured by Moral Obligation Scale) lead to compliance behavior (measured by ISP Measurement – ISP Compliance Behaviors) in healthcare organizational leaders?

 H_02 : Moral obligation is not a significant predictor of compliance behavior in healthcare organizational leaders.

 H_a 2: Moral obligation is a significant predictor of compliance behavior in healthcare organizational leaders.

RQ3: Does moral obligation (as measured by Moral Obligation Scale) predict leader compliance behavior (measured by ISP Measurement – ISP Compliance Behaviors) above and beyond social influence (measured by the Targets of Influence Measurement)?

 H_03 : Moral obligation does not have a more significant impact on compliance behavior than social influence.

 H_a 3: Moral obligation does have a more significant impact on compliance behavior than social influence.

RQ4: Does moral obligation (as measured by Moral Obligation Scale) and social influence (measured by the Targets of Influence Measurement) predictor ethical climate (each measured by the ISP Measurement)?

 H_04 : Moral obligation and social influence do not predict ethical climate.

 H_a 4: Moral obligation and social influence do predict ethical climate.

RQ5: Does organizational ethical climate (measured by ISP Measurement – Principle Ethical Climate) predict leader compliance behavior (measured by ISP Measurement – ISP Compliance Behaviors)?

 H_05 : Organizational ethical climate does not predict compliance behavior.

 H_a 5: Organizational ethical climate does predict compliance behavior.

RQ6: Does leader compliance behavior (measured by ISP Measurement – ISP Compliance Behaviors) mediate the relationship between moral obligation (as measured by Moral Obligation Scale) and organizational ethical climate (each measured by the ISP Measurement)?

 H_0 6: Leadership compliance behavior does not mediate the relationship between moral obligation and organizational ethical climate.

 H_a 6: Leadership compliance behavior does mediate the relationship between moral obligation and organizational ethical climate.

RQ7: Does leader compliance behavior (measured by ISP Measurement – ISP Compliance Behaviors) mediate the relationship between social influence (measured by the Targets of Influence Measurement) and organizational ethical climate (each measured by the ISP Measurement)?

 H_07 : Leadership compliance behavior does not mediate the relationship between social influence and organizational ethical climate.

 H_a 7: Leadership compliance behavior does mediate the relationship between social influence and organizational ethical climate.

Pilot Study

This study required a pilot study because some of the instrument questions were altered. The ISP instrument used for this study specifically asked participants to respond based on their thoughts related to information security policies. The instrument was appropriate for this study, but the language specific to ISP was not aligned with this study and needed to be changed. A change occurred with the abbreviations and words in the ISP instrument to align with this study, so information security or ISP changed to compliance policies or CP. A pilot study was performed to the impact the changes had on the reliability and validity of the instrument.

A G*Power test determined that the sample size appropriate for the pilot study should be 21 participants. The study committee and I discussed the sample size and decided it would be better to increase it to at least 30 participants and potentially up to 50 participants if that was obtainable. The plan was to conduct the pilot study through MTurk. A total of 49 participants accessed and completed the study questions. Through the data cleaning process in IBM SPSS Statistics Version 27.0, three participants failed to complete any of the questions. Those participants were eliminated from the results, which left 46 responses. The SPSS frequency test reveals a total of either 45 or 46 valid responses for each question. Each question is missing either three or four answers.

I built the survey questions into Qualtrics Software Company and established it as the pilot study. After this step, I obtained the anonymous link to attach the questionnaire to a survey link in MTurk. I created a survey in MTurk and added the Qualtrics link to the survey build so the participant could access and answer the survey questions. The total cost for the pilot study was \$25.10. Publishing the survey activated it for the participants, which took place in MTurk on January 15, and participants began completing the survey. Participants were requested to be from the healthcare industry and be in management or above positions. The Walden University consent form approved by the IRB was the first item participants encountered. This information informed them of the study, the IRB study approval number (01-14-22-0722477), requested their consent and notified them that they could leave the study at any time if they no longer wanted to participate.

Data collection for the pilot study began on January 15, 2022, at 9:23 pm and was finalized on January 23, 2022, at 3:31 pm. The number of participants determined for the pilot study was 21 in the proposal. During the oral presentation of the proposal, the committee recommended collecting between 30 to 50 participants. The participant request number in MTurk was set at 40 participants. On January 23, 49 participants had taken the survey, and MTurk marked the survey as complete. Once all needed data was obtained, analyzing the data began.

Pilot Study Procedure

Descriptive statistics (means, standard deviation, and variance) for each scale were also run to analyze the differences per scale (see Table 1). The Moral Obligation scale has the most questions (N = 8), while the scale for CP Knowledge has the fewest questions (N = 2). These numbers are consistent with the mean for each scale showing

that Moral Obligation has the highest mean score (M = 33.28), and CP Knowledge has the lowest mean score (M = 10.62). The scale with the most significant standard deviation is CP Compliance Behavior (SD = 5.355), and the scale with the lowest standard deviation is CP Knowledge (SD = 2.682). The CP Compliance Behavior scale reflects the highest variance in the pilot study.

Table 1Descriptive Statistics

	# Items	Mean	Variance	Std. Dev
Moral Obligation (MO)	8	33.28	23.968	4.896
Social Influence (SI)	4	18.43	25.673	5.067
Principle Ethical Climate (PEC)	3	14.61	19.666	4.435
Ascription of Personal Norms (APN)	3	13.80	25.583	5.058
Personal Norms (PN)	3	14.52	22.788	4.774
Descriptive Norms (DN)	4	20.47	26.255	5.124
Subjective Norms (SN)	4	21.46	26.207	5.119
Compliance Behavior (CPCB)	4	20.45	28.672	5.355
Compliance Knowledge (CPN)	2	10.62	7.195	2.682

Additional tests were run through IBM SPSS Statistics Version 27.0 to determine the instrument's reliability and validity: Cronbach's Alpha and Pearson Correlation Coefficient. Running the pilot study, I discovered that one of the questions was inadvertently written twice and needed to be deleted. Omitting the question meant that the survey had 35 rather than 36 questions. The IRB was notified of this discrepancy and approved the change.

Pilot Internal Validity

To test validity for the pilot study, the test Pearson's Correlation Coefficient was performed (see Table 2). The questions from each scale were analyzed, consisting of 35 questions on nine scales. The scales are moral obligation (MO), social influence (SI),

principle ethical climate (PEC), an ascription of personal norms (APN), personal norms (PN), descriptive norms (DN), subjective norms (SN), compliance policy compliance behavior (CPCB), and compliance policy knowledge (CPK). The result of the analysis reveals positive relationships on all scales. One of the relationships shows a weak, positive correlation and is not statistically significant: social influence and ascription of personal norms (r = .277, p < .05). The relationship between social influence and ascription of personal norms was the only relationship not statistically significant in this analysis. From this, it appears that there was no relationship between social influence and the ascription of personal norms.

There were 10 positively medium relationship between social influence and moral obligation (r = .314, p < .05), principle ethical climate and moral obligation (r = .488, p < .01), ascription of personal norms and moral obligation (r = .392, p < .01), descriptive norms and moral obligation (r = .493, p < .01), social influence and principle ethical climate (r = .391, p < .01), social influence and personal norms (r = .402, p < .01), social influence and descriptive norms (r = .361, p < .05), social influence and social norms (r = .423, p < .01), social norms and compliance policy compliance behavior (r = .391, p < .01), and ascription of personal norms and social norms (r = .423, p < .01). From the results, it appears that increases in social influence, principle ethical climate, ascription of personal norms, and descriptive norms increase moral obligation. The results also revealed that principle ethical climate, personal norms, descriptive norms, and social norms increase social influence. Also, the ascription of personal norms and compliance policy compliance behavior are correlated with an increase in social norms.

Most of the relationships were positive and highly significant. On the moral obligation scale, there were positive and highly significant relationships with personal norms (r = .574, p < .01), social norms (r = .564, p < .01), compliance policy compliance behavior (r = .531, p < .01), and compliance policy knowledge (r = .666, p < .01). Regarding the scale of moral obligation, it appears that increases in personal norms, social norms, and compliance policies compliance behavior are strong positive correlations with moral obligation. On the scale of principle ethical climate, there were several highly significant relationships ascription of personal norms (r = .663, p < .01), personal norms (r = .729, p < .015), descriptive norms (r = .672, p < .01), social norms (r = .520, p < .01), compliance policy compliance behavior (r = .746, p < .01), and compliance police knowledge (r = .678, p < .01). The increase of personal ethical climate is correlated with increases in ascription of personal norms, personal norms, descriptive norms, social norms, compliance policy compliance behavior, and compliance policy knowledge.

On the scale of ascription of personal norms, there were highly significant correlations with personal norms (r = 679, p < .01), descriptive norms (r = .666, p < .01), compliance policy compliance behavior (r = .702, p < .01), and compliance policy knowledge (r = .575, p < .01). The increase of ascription of personal norms is correlated with increases in personal norms, descriptive norms, compliance policy compliance behavior, and compliance policy knowledge. Regarding the scale of personal norms, there are four positive and highly significant relationships with personal norms which are descriptive norms (r = .744, p < .01), subjective norms (r = .575, p < .01), compliance

policy compliance behavior (r = .820, p < .01), and compliance policy knowledge (r = .684, p < .01). It appeared that an increase of descriptive norms, subjective norms, compliance policy compliance behavior and compliance knowledge increase personal norms.

Specific to descriptive norms, there were three positive and highly significant relationships which are social norms (r = .562, p < .01), compliance policy compliance behavior (r = .733, p < .01), and compliance policy knowledge (r = .623, p < .01). On the scale of social norms, there were only two highly significant correlations which are with compliance policy compliance behavior and compliance policy knowledge, SN and CPCB (r = .611, p < .01), SN and CPK (r = .694, p < .01). Lastly, there was a highly significant relationship between compliance policy compliance behavior and knowledge, which may mean that when employees know the compliance policies, they will behave compliantly, CPCB and CPK (r = .703, p < .01). Of these correlations, the strongest relationship was between personal norms and compliance policy compliance behavior (r = .820, p < .01).

Table 2Pilot Pearson Correlation Coefficient

	MO	SI	PEC	APN	PN	DN	SN	CPCB	CPK
MO	1								
SI	.314*	1							
PEC	.488**	.391**	1						
APN	.392**	.277	.663**	1					
PN	.574**	.402**	.729**	.679**	1				
DN	.493**	.361*	.672**	.666**	.744**	1			
SN	.564**	.423**	.520**	.423**	.575**	.562**	1		
CPCB	.531**	.391**	.746**	.702**	.820**	.733**	.611**	1	
СРК	.666**	.595**	.678**	.575**	.684**	.623**	.694**	.703**	1

Note. * Correlations is significant at the 0.05 level (2-tailed). ** Correlation is significant at the 0.01 level (2-tailed).

Pilot Study Reliability

During the oral presentation process, a committee member recommended performing Cronbach's Alpha to test reliability. As a result of the request, I performed Cronbach's Alpha during the data analysis process for the pilot study and analyzed each question was separately according to the appropriate scale (see Table 3). There were 49 respondents to the survey. Three were eliminated because they failed to complete any answers, so the total number of respondents was 46. There were 35 questions on the survey, which were on nine scales, as previously mentioned. The Cronbach's Alpha results for each scale reflected reliability. The moral obligation scale consisted of eight items, and the Cronbach's Alpha for this scale was $\alpha = .855$. The social influence scale consisted of four items, and the Cronbach's Alpha for this scale was $\alpha = .864$. The

scale was α = .891. The ascription of the personal norms scale consisted of three items, and the Cronbach's Alpha for this scale was α = .864. The personal norms scale consisted of three items, and the Cronbach's Alpha for this scale was α = .882. The descriptive norms scale consisted of four items, and the Cronbach's Alpha for this scale was α = .842. The social norms scale consisted of four items, and the Cronbach's Alpha for this scale was α = .806. The scale for compliance policy compliance behavior consisted of four items, and the Cronbach's Alpha for this scale was α = .836. The compliance policy knowledge scale consisted of two items, and the Cronbach's Alpha for this scale was α = .811. Each scale in Table 3 reflects a value that was acceptable.

Table 3Pilot Cronbach's Alpha

	N	Mean	Std. Dev	Cronbach's Alpha
MO	8	33.28	4.896	.855
SI	4	18.43	5.067	.864
PEC	3	14.61	4.435	.891
APN	3	13.80	5.058	.864
PN	3	14.52	4.774	.882
DN	4	20.47	5.124	.842
SN	4	21.46	5.119	.806
CPCB	4	20.45	5.355	.836
CPN	2	10.62	2.682	.811

Study Data Collection

The research committee members vetted the data collection process and then submitted it to Walden University IRB for review. After approval by the research committee members, the Walden University IRB approved the data collection plan and assigned this study number 01-14-22-0722477 on January 14, 2022, which expires in one year. Upon approval, the data collection process began.

Study Collection Process

The data collection process for the study information was much like the data collection process for the pilot study. The survey questions were built into Qualtrics, just as the pilot study questions were built into Qualtrics. As mentioned earlier, it was identified that one question was a duplicate question, so for the study, 35 questions were built into Qualtrics as the questionnaire for this survey. The anonymous link was obtained from Qualtrics and MTurk to access the survey.

In MTurk, another survey was created for the study. The survey link was pasted in from Qualtrics. A description of the survey was included in the header with keywords such as moral obligation, compliance, and social influence. The parameters of healthcare workers and location as the United States were selected to limit participation. To be consistent with the proposal, the number of participants assigned to this study was set at 196. The participants were rewarded \$5.00 for completing the survey, so the total cost in MTurk was \$1,450.40. The survey was published for participant participation on January 29 and concluded on February 1. Just as with the pilot study, the Walden University consent form approved by the IRB was the first item participants encountered, which informed them of the study. The IRB study approval number (01-14-22-0722477) requested their consent and notified them that they could leave the study at any time if they no longer wanted to participate. After the data collection, the data analysis process began.

Data Cleaning Process

There were 271 responses received in Qualtrics. Thirteen were eliminated because they were entry-level positions, and 72 were eliminated because they were the intermediate-level staff. The study sought responses from leaders in management or above positions, so 85 responses were eliminated. This left 186 participants. The initial screening examination reviewed the data for missing information and values that were not consistent with the range listed in the Likert scales. Once the inappropriate responses were identified, an examination of the responses was done to determine if the answers were inconsistent with the Likert scale. All the responses seemed to be accurately reported.

One of the first analyses run in SPSS was a frequency test to evaluate inappropriate data. This analysis did not appear to be missing data in the dataset. There were a few items of randomly missing data, but it was less than 5%, so the missing data should not have created errors in data calculation. To correct the missing data, replacing missing values were run through SPSS. A complete dataset was created.

Another part of the screening process included running a Durbin-Watson test to determine the autocorrelation of random errors toward the hypothesis (see Kabaila et al., 2021). When the value is close to 2, this indicates nonautocorrelation, while values near 0 reflect positive autocorrelation and near 4 reflect negative autocorrelation (Turner, 2020). The results of this Durbin-Watson test are near 2 (DW = 2.226). This means it is not likely that autocorrelation occurred.

Sample Demographics

The respondents were also asked to describe their gender, age, and years of experience (see Table 4). The results reflected that a higher number of females (n = 110) responded to the survey than males (n = 72), and a few declined to answer (n = 4). The participant's ages ranged from 18 to 65 or older. Those in the range of 25-34 years old represented the greatest number of respondents (n = 71). The other age ranges included 18-24 years old (n = 23), 35-44 years old (n = 45), 45-54 years old (n = 32), 56-64 years (n = 11), 65 or older (n = 2), and a few declined to answer (n = 2). The question of tenure only offered four categories. For their years in their current position, the respondents stated that those with years of service 5-9 years were the highest category (n = 91), 10-19 years were the second highest (n = 45), 1-4 years was the third highest (n = 44), and 20-49 years was the lowest category (n = 6).

Table 4Sample Demographics (n=186)

		Frequency	Percent	
Gender				
	Male	72	38.7	
	Female	110	59.1	
Age				
	18-24	23	12.4	
	25-34	71	38.2	
	34-44	45	24.2	
	45-54	32	17.2	
	55-64	11	5.9	
	65+	2	1.1	
Tenure				
	1-4	44	23.7	
	5-9	91	48.9	
	10-19	45	24.9	
	20-49	6	3.2	
Positions				
	First-level	67	36.0	
	Management			
	Middle	83	44.6	
	Management			
	Senior	36	19.4	
	Management			

One of the most pertinent descriptive statistics is related to the participant's current management level (see Table 5). Most of the participants were in a middle management position (n = 83). This made up approximately 45% of the participants. Those in a first-level management position made up the second-highest management level (n = 67). This reflected about 36% of the participants. Those in the senior or executive management level made up the lowest level of management (n = 36). This is about 19% of the participant pool.

Descriptive Statistics

That study data was analyzed using IBM SPSS version 27.0. The test performed on the data was multiple regression used to determine the strength of the relationships between the predictor variable, criterion variables, and the mediating variable. Table 6 reflects the descriptive values for the variables, which includes the mean, standard deviation, median, and range of values for each scale. Table 5 provides additional information on the demographics. The additional information details the mean, standard deviation, skewness, and kurtosis for each of the demographics which are industry, gender, age, tenure, and position. The demographic results indicate that the responses for industry and gender were high on the Likert scale for healthcare for industry and female for gender. The expectation for industry was met because this was the target population. The participants indicated that the average response on the responses for age, tenure, and position. The responses for those reflected a normal bell curve since the skewness for these were much smaller.

Table 5
Study Demographic Mean, Standard Deviation, Skewness, and Kurtosis

	N	Mean	Std. Dev.	Skewness	Kurtosis
Industry	186	3.65	1.72	2.70	6.13
Gender	183	1.62	0.55	0.90	5.86
Age	185	3.67	1.17	0.38	0.06
Tenure	186	2.07	0.78	0.30	-0.39
Position	186	3.86	0.73	0.27	-1.07

Table 6Mean, Standard Deviation, Median, and Range by Variable (N=186)

	N. Scale	Mean	Std. Dev.	Scale Range
MO	8	34	5.22	8-40
SI	4	20	3.29	6-28
PEC	3	17	3.22	5-21
CPCB	4	22	3.75	7-28

Test of the Assumptions

The testing of assumptions included a test for normality and homogeneity. For the test of normality, the results of Shapiro-Wilk equal P < .001, so we can reject the null hypotheses and safely say that the criterion variables do indeed impact compliance behavior (see Table 7). The Levene's Test of Equality of Error tests the group variances' hypothesis. For this test, F = 1.035 for Levene's Test, which is not statistically significant (p = 0.475). This means the null hypothesis is acceptable and that homogeneity does exist.

Table 7Test of Normality for Compliance Behavior, Moral Obligation, Social Influence, and Ethical Climate

	Kolmogorov-Smirnov	Sig.	Shapiro-Wilk	Sig.
CPCB	0.118	0.000	0.931	0.000
MO	0.140	0.000	0.849	0.00
SI	0.126	0.000	0.954	0.000
PEC	0.127	0.000	0.908	0.000

In research related to information security, researchers often found displays of skewed distributes because of the sensitivity related to potentially admitting guilt or violation of the rules (Barlow et al., 2013). This is seen in the distributes of this study

analysis. For Figures 2 to 5 the positive skewness of the responses reflects affirmative answers. Moral obligation has a skewness of -1.617. Principle ethical climate and compliance policy compliance behavior have a closer skewness which is -1.007 for PEC and -1.068 for CPCB. The skewness for social influence is the most relative to normal, with skewness of -0.785. Multiple regression analysis can still provide accurate data even though skewness exists in the data (Barlow et al., 2013).

Figure 2. Histogram of the Values for the Predictor Variable Moral Obligation

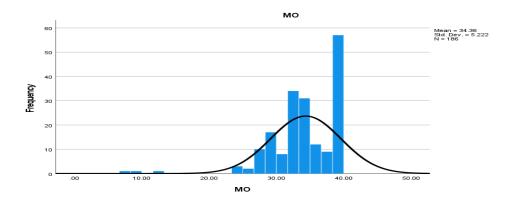
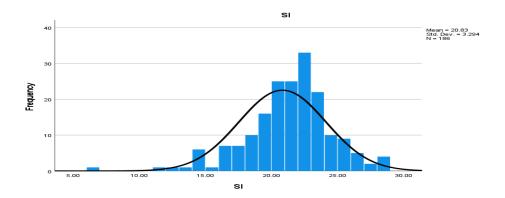


Figure 3. Histogram of the Values for the Predictor Variable Social Influence





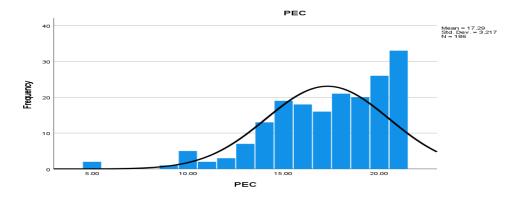
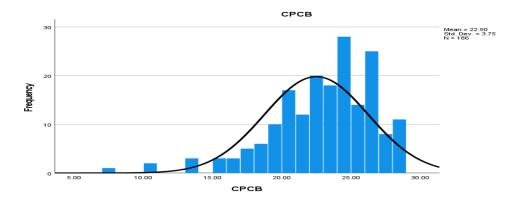


Figure 5. Histogram of the Values for the Criterion Variable Compliance Behavior



Data Analysis

To test internal consistency of the items in the scales, Cronbach's Alpha was run for reliability (see Table 8), it was also run for each scale for the pilot study. There is a slight difference between some results for the study and pilot. Some researchers account for lower alpha's due to the number of items on the scale being lower (Taber, 2018). The moral obligation scale consisted of eight items, and the Cronbach's Alpha for this scale for the study was $\alpha = .928$ while the results for the pilot was $\alpha = .855$. The social influence scale consisted of four items, and the Cronbach's Alpha for this scale for the study was $\alpha = .689$ while the results for the pilot was $\alpha = .864$. While some consider $\alpha = .864$. While some consider $\alpha = .864$.

.689 slightly low, other would say it is satisfactory considering the scale only has four items on the scale (Taber, 2018). Looking further into the analysis of social influence, the inter-item correlation mean is .356. Deleting an item from the scale would not increase the Cronbach's Alpha for this scale for the study data. The principle ethical climate scale consisted of three items, and the Cronbach's Alpha for this scale was $\alpha = .810$ while the results for the pilot was $\alpha = .891$. The compliance behavior scale consisted of four items, and the Cronbach's Alpha for this scale was $\alpha = .761$ while the results for the pilot was $\alpha = .836$.

Table 8Cronbach's Alpha of Each Scale (n=186)

	N.	Mean	Std. Dev.	Cronbach's Alpha
	Scale			
MO	8	27.27	5.222	.928
SI	4	20.83	3.294	.689
PEC	3	17.29	3.217	.810
CPCB	4	22.50	3.750	.761

Hypothesis Testing

The goal of RQ1 *Does social influence lead to compliance behavior in healthcare organizational leaders?* was to determine if a relationship existed between the criterion variable and the predictor variable. The answers to these questions were determined by running a regression analysis on the variables. As mentioned previously, IBM SPSS version 27.0 was used to perform this analysis. Table 12 summarizes the linear regression summary of the two predictor variables and the criterion variable. Table 9 summarizes the correlation of all variables. According to the Pearson Correlations, each have a strong

positive correlation. Ethical climate and moral obligation have the lowest positive correlation while ethical climate and compliance behavior has the highest positive correlation. This potentially means that as ethical climate increases compliance behavior increases.

Alternative hypothesis for RQ1 specifically sought to determine if there is a relationship between social influence and compliance behavior in that social influence impacts a participant's willingness to produce compliance behavior. The Pearson r for the relationship between compliance behavior and social influence was found to be slightly highly positive, with the value reflecting .53. The R^2 result was .28, which means that 28% of the variance of the criterion variable may be explained by the predictor variable. The F-test results for social influence were significant, F(1, 184) = 69.85, p < .001. For RQ1, the null hypothesis is also rejected, which means that the alternative hypothesis favorably explains that social influence impacts compliance behavior. To answer RQ1, social influence has a significant influence on compliance behavior.

Table 9Summary of Simple Linear Regression for Social Influence

	R	\mathbb{R}^2	Std. Error	β	F	df1	df2	Sig
SI	.53	.28	.07	.59	69.85	1	184	.000

Table 10Study Pearson Correlation Coefficient for Moral Obligation, Social Influence, Ethical Climate, and Compliance Behavior

	MO	SI	PEC	CPCB
MO	1			
SI	.525*	1		
PEC	.453**	.420**	1	
CPCB	.665**	.494**	.453**	1

Like RQ1, the goal of RQ2 Does moral obligation lead to compliance behavior in healthcare organizational leaders? was to determine if a relationship existed between the criterion variable and the predictor variable. The hypothesis for RQ2 was a relationship between moral obligation and compliance behavior, meaning that moral obligation impacts the participant's intention to produce compliance behaviors. The Pearson r for the relationship between moral obligation and compliance behavior (see Table 11) was .46, which indicates a moderately positive relationship. The R^2 is .22, meaning that moral obligation explains 22% of the variance in the criterion variable compliance behavior. The results of the F-test for moral obligation indicates the relationship was significant, F(1,184) = 50.25, p < .001. The null hypothesis for RQ2 was rejected in favor of the alternative hypothesis that moral obligation significantly impacts compliance behavior.

Table 11Summary of Simple Linear Regressions for Moral Obligation

	R	\mathbb{R}^2	Std. Error	β	F	df1	df2	Sig
MO	.46	.22	.05	.33	50.25	1	184	.000

Like RQ1 and RQ2, the purpose of RQ3 Does moral obligation predict leader compliance behavior above and beyond social influence? was to determine which predictor variable had the strongest relationship with the criterion variable. The alternative hypothesis for RQ3 is an evaluation to determine if the moral obligation greatly influences compliance behavior than social influence. In comparing the Pearson r for moral obligation and social influence, the predictor variable of social influence was slightly higher on compliance behavior than the predictor variable of moral obligation (see Table 12). Both predictor variables reflect a significant F-test result which is F(1, 184) = 69.85, p < .001 for social influence while the result for moral obligation is F(1, 184) = 50.25, p < .001. The null hypothesis for RQ3 is accepted, and the alternative hypothesis is rejected. To answer the question for RQ3, the moral obligation does not have a higher influence on compliance behavior than social influence.

Table 12Summary of Two Simple Linear Regressions for Moral Obligation and Social Influence

	R	\mathbb{R}^2	Std. Error	β	F	df1	df2	Sig
MO	.46	.22	.05	.33	50.25	1	184	.000
SI	.53	.28	.07	.59	69.85	1	184	.000

RQs 4 and 5 were also analyzed using regression analysis through IBM SPSS version 27.0. The data for these analyses is moved into different positions to answer the questions. Table 13 summarizes the linear regression summary for RQ4, and Table 14 summarizes the linear regression summary for RQ5. For RQ4, the predictor variables are moral obligation and social influence while the criterion variable is ethical climate. For RQ5, the predictor variable was ethical climate, and the criterion variable was

compliance behavior. The results of the analyses for RQ4 identified a positive statistically relationship between the variables. These analyses establish the relationships between the variable and is necessary to determine path analysis.

The alternative hypothesis for RQ4 *Does moral obligation and social influence predictor ethical climate?* is the relationship between moral obligation and social influence on ethical climate. The value of the Pearson r for moral obligation and social influence on ethical climate (see Table 13) is .56, which is highly positive. The R^2 value is .32, which indicates that 32% of the variance of the criterion value is influenced by the predictor variables moral obligation and social influence. The F-test results are significant, F(2, 183) = 42.55, p < .001. This means the null hypothesis for RQ4 may be rejected in favor of the alternative hypothesis. The answer to question four is that moral obligation and social influence predict ethical climate.

Table 13Summary of Linear Regressions for Moral Obligation, Social Influence, and Ethical Climate

	R	\mathbb{R}^2	Std. Error	β	F	df1	df2	Sig
PEC	.56	.32	1.51	3.48	42.55	2	183	.000

The alternative hypothesis for RQ5 *Does organizational ethical climate predict leader compliance behavior?* is the relationship between compliance behavior and ethical climate. The value of the Pearson r for ethical climate on compliance behavior (see Table 14) is .67, which is highly positive. The R^2 value is .44, which indicates that 44% of the variance of the criterion value is influenced by the mediating variable ethical climate. The F-test results are significant, F(2, 184) = 145.81, p < .001. This means the null hypothesis

for RQ5 may be rejected in favor of the alternative hypothesis. The answer to question five is that ethical climate does predict compliance behavior.

 Table 14

 Summary of Linear Regressions for Compliance Behavior and Ethical Climate

	R	\mathbb{R}^2	Std. Error	β	F	df1	df2	Sig
PEC	.67	.44	0.06	0.76	145.81	1	184	.000

Path Analysis

To determine the mediating effect of ethical climate on compliance behavior and moral obligation, the mediating effect on compliance behavior and social influence, IBM SPSS version 27.0 with PROCESS version 4.0 was used to analyze the mediating relationship. This analysis was performed to answer the questions associated with RQ6 and RQ7. The initial analysis was to evaluate the relationships between ethical climate, compliance behavior, and moral obligation.

Analyzing the mediation relationship involves several steps. The initial step included determining the bivariate regression analysis between the criterion variable (Y) and the predictor variable (X). The next step included evaluating the direct effect of the criterion variable (Y) and the mediating variable (M) via bivariate regression. The third step involved evaluating all the variables through multiple regression to obtain a direct effect between X and Y then obtain the direct effect between M and Y. In SPSS, the variables were entered into the Process application with the appropriate variable and set to use Model 4 for Mediation. The same process was used for moral obligation then for social influence as the predictor variables.

As previously mentioned, a simple mediation analysis was performed using PROCESS to investigate RQ6 *Does leader compliance behavior mediate the relationship between moral obligation and organizational ethical climate?* (see Table 15). The outcome variable for analysis was compliance behavior. The predictor variable for the analysis was a moral obligation. The mediator variable for the analysis was the ethical climate. The indirect effect of moral obligation on compliance behavior was found to be statistically significant [Effect = .1862, 95% C.I. (.0966, .2886)]. In this case, the null hypothesis can be rejected because there is a mediated effect on compliance behavior.

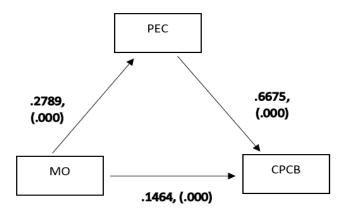
Table 15

Indirect Effect for Moral Obligation

	Effect	BootSE	BootLLCI	BootULCI	Sig
PEC	.1862	.0490	.0966	.2886	.000

Figure 6 illustrates the relationship between moral obligation, ethical climate, and compliance behavior. The diagram shows the coefficients for each relationship and the level of significance for each relationship.

Figure 6. Mediating relationship for Moral Obligation



The last analysis performed was to address RQ7 Does leader compliance behavior mediate the relationship between social influence and organizational ethical climate? Since this question also involved mediation, the same process used for RQ6 was used to address RQ7. The variables were entered in for the PROCESS analysis and calculations were computed (see Table 16). The outcome variable for analysis was compliance behavior. The predictor variable for the analysis was social influence. The mediator variable for the analysis was ethical climate. The indirect effect of social influence on compliance behavior was found to be statistically significant [Effect = .3021, 95% C.I. (.1701, .4573)]. In this case, the null hypothesis can be rejected because there is a mediated effect on compliance behavior.

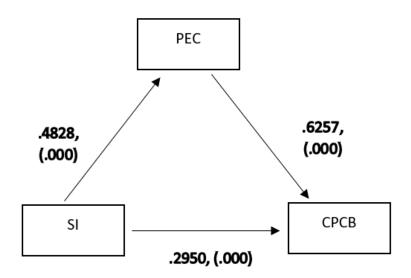
Table 16

Indirect Effect for Social Influence

	Effect	BootSE	BootLLCI	BootULCI	Sig
PEC	.3021	.0734	.1701	.4573	.000

Figure 7 illustrates the relationship between social influence, ethical climate, and compliance behavior. The diagram shows the coefficients for each relationship and the level of significance for each relationship.

Figure 7. Mediating relationship for Social Influence



Summary and Transition

The purpose of Chapter 4 was to examine the relationship between moral obligation and social influence on compliance behavior and the potential mediating effect ethical climate could have on these relationships. This chapter explained the data collection process and the participant recruitment process. As planned, the examination of the data was performed using multiple regression analysis in IBM SPSS version 27.0 and with PROCESS 4.0 for the mediating analysis. The results indicated statistical significance in the relationships for RQ1, RQ2, RQ4, RQ5, RQ6, and RQ7. RQ3

anticipated a stronger relationship with moral obligation than with social influence, yet the results indicated that the null hypothesis was correct.

The information contained in this chapter included the research questions with their appropriate hypotheses, information about pilot study conducted, changes made in the process with approval from the IRB, and the data collection process. This chapter also contained an evaluation of the statistical assumptions and concluded with the interpretation of the data.

Chapter 5 provides an interpretation of the analysis related to this study. In Chapter 5, information related to the limitations of the study and recommendations for further research are discussed. Chapter 5 also includes implications and conclusions of this research study.

Chapter 5: Discussion, Conclusions, and Recommendations

The purpose of this study was to examine the relationship that moral obligation and social influence have on compliance behavior among healthcare organizational leaders. The purpose included attempting to determine if the leader's behaviors have a mediating effect on the relationship between moral obligation or social influence and the organizational ethical climate. The criterion variable for this study was compliance behavior and the predictor variables were moral obligation and social influence. The mediating variable was the ethical climate. I analyzed the data from this study using multiple regression. The data analysis revealed the strengths and weaknesses of the relationship between these variables. Understanding the relationship between these variables could help compliance officers build effective training programs and help build a more robust ethical climate for the organization.

The study results indicated significant relationships between each of the variables. The results also indicatef a mediating relationship when factoring in the mediating variable, ethical climate. The study results identified that social influence has a stronger relationship with the criterion variable, compliance behavior, than the relationship with moral obligation. This finding means that the null hypothesis for RQ3 was accepted, and the alternative hypothesis was rejected. I rejected each of the other null hypotheses and accepted the alternative hypotheses since the relationships were statistically significant. In addition to this introduction, the information in this chapter will present the interpretations of the findings, the limitations of the study, and recommendations from the study findings.

Interpretation of the Findings

For this study, I surveyed 186 participants through MTurk. The participants lived in the United States and were in positions of managers or above in healthcare organizations. The participants were surveyed to obtain their perceptions of compliance within their organization. They were specifically asked to answer questions about the organization's ethical climate, the participant's compliance behavior, moral obligation, and social influence.

Research Question 1

RQ1 was asked if social influence predicts compliance behavior in healthcare organizational leaders. Social influence was measured using the Targets of Influence measurement. The research by Yazdanmehr and Wang (2016a) found similar results in that they also reported that social influence impacted compliance behavior in relation to information security. The result confirmed the significance of social influence impacting compliance behavior among healthcare leaders and found that 28% of the variance of the criterion variable may be explained by the predictor variable. I accepted the alternative hypotheses and rejected the null hypotheses for this research question.

In a study on information security compliance, Yazdanmehr and Wang (2016a) looked at social influence in the context of social norms. The researchers found that social norms were one of the elements that strengthened a person's personal norms, leading to compliance with information security policies. Furthermore, their investigation found that social norms positively impacted information security compliance and are a product of the organization's principle ethical climate (Yazdanmehr & Wang, 2016a).

This study did not analyze social norms but evaluated social influence specifically, so my research neither confirms nor contradicts their research findings. However, I found a positive statistically significant relationship between social influence and compliance behavior.

Research Question 2

Like RQ1, RQ2 asked if moral obligation predicts compliance behavior in healthcare organizational leaders. Moral obligation was measured using the Moral Obligation Scale. Bin-Nashwan et al. (2020) sought to better understand the impact of moral obligation on compliance behavior in relation to tax regulations. Just as the results of Bin-Nashwan et al. identified, the results of this study confirmed the significance of moral obligation impacts compliance behavior among healthcare leaders and found that 22% of the variance of the criterion variable may be explained by the predictor variable. I accepted the alternative hypotheses and rejected the null hypotheses for this research question.

Bin-Nashwan et al. (2020) also recognized that moral obligation was an intrinsic motivator of compliance behavior. While I focused on healthcare compliance, Bin-Nashwan et al. focused their area of compliance on income tax compliance. They concentrated on the impact of moral obligation in relation to their decision toward compliance (Bin-Nashwan et al., 2020). The researchers found a positive statistically significant relationship between moral obligation and the participant's decision to comply with the tax regulations. Similarly, I found a moderately positive relationship between

moral obligation and compliance behavior. The results of the F test for moral obligation indicates the relationship was significant.

Research Question 3

This study compared social influence on compliance behavior to the influence of moral obligation on compliance behavior to see which relationship had the more significant influence. The results indicated that social influence has a more substantial influence on compliance behavior than social norms. With these results, the null for RQ3 was accepted, and the alternative hypothesis was rejected. In the studies evaluated for this research, I could not find a study that made this same comparison between moral obligation and social influence. Yet, in the research performed by Yazdanmehr and Wang (2016a), the researchers noted that social norms enhanced an individual's level of personal norms. Their study supported the concept that the organization's social environment can influence a higher level of compliance towards information security compliance policies and enhance the awareness of consequences, ultimately strengthening the employee's feelings of moral obligation toward compliance (Yazdanmehr & Wang, 2016a).

Research Question 4

RQ4 asked how the predictor variables influence ethical climate and if moral obligation and social influence impact ethical climate. The findings indicated a positive statistically significant relationship between moral obligation and social influence on the organization's ethical climate. For this question, the null hypothesis was rejected.

As a result of the previous research question, the information found social influence or social norms enhances moral obligation or personal norms (see Yazdanmehr & Wang, 2016a). Other research shows that organizational leaders develop the general values of the organization and that employees can be encouraged to behave through training programs (see Bussmann & Niemeczek, 2019). Training teaches employees what ethical standards are and what is acceptable concerning compliance with the company's rules which helps determined that promoting an ethical climate increases the social influences of the organization (Bussmann & Niemeczek, 2019). This information is similar to my findings.

Research Question 5

RQ5 asked if there is a relationship between compliance behavior and ethical climate. For this question, the study data findings indicated there is also a positive statistically significant relationship between compliance behavior and ethical climate. For this question, the null hypothesis was also rejected. In the research by O'Keefe et al. (2019), the researchers notated that an organization's ethical climate determines the expectations of what behaviors are acceptable for the company. The standards established by the company help shape the decisions made by organizational leaders (Angonga & Florah, 2019).

In another research study, the researchers evaluated the organization's ethical climate as influenced by the organization's leaders (O'Keefe et al., 2019). They sought to determine if the ethical leadership styles of the organization's leaders created higher levels of ethical climate throughout the organization. They indicated that the ethical

behavior of leaders does impact the ethical climate of the organization. In essence, the researchers found that higher ethical behavior levels among organizational leaders lead to a higher ethical climate (O'Keefe et al., 2019). My study neither confirms nor confounds their study results but does bring value in showing that moral obligations and social influence impact the organization's ethical climate.

Path Analysis for Research Questions 6 and 7

RQ6 and 7 transitioned into determining the path analysis between the variables. Mediation analysis was used to determine if there was an impact of the mediating variable on the relationship of the predictor variable and criterion variable. For RQ6, the predictor variable was moral obligation. I rejected the null hypothesis for RQ6 was rejected and accepted the alternative hypothesis. The mediating variable, ethical climate, was used to determine the path relationship of the criterion variable, compliance behavior, and the predictor variables, moral obligation (RQ2). The mediating relationships were found for RQ6.

I performed the same analysis was performed for RQ7 as for RQ6. A mediation analysis was performed for this question to determine if there was an impact of the mediating variable on the relationship between the predictor and criterion variable. The difference between RQ7 and RQ6 was the predictor variable which as changed to social influence. For RQ7, I rejected the null hypothesis and accepted the alternative hypothesis. The results of this analysis indicated that ethical climate mediated the relationship between social influence and compliance behavior.

In this study, I evaluated ethical climate as the mediating variable. In a research study of information security compliance, Chen et al. (2018) evaluated security visibility as a mediating variable influencing employees' intentions to comply with information security policies. The researchers found that awareness of the importance of information security impacted the employee's motivation towards compliance which affected compliance intention (Chen et al., 2018). The variables for my study do not align with the variables used in the Chen et al. (2018) study but do show the importance of considering the mediating impact of the variables.

Vance et al. (2012) evaluated how habits may explain motivations toward compliance. The researchers believed that creating information security habits reinforces cognitive processes and creates intentions towards compliance in future behaviors. The mediating factors that positively impacted intention towards compliance were vulnerability, perceived severity of threats, self-efficacy, and response efficacy. The mediating factors that negatively impacted intention towards compliance were rewards and response cost (Vance et al., 2012). Again, these variables are not consistent with the variables I used in my study but show the importance of considering mediating variables.

There are some similarities and differences between my study and the study performed by Yazdanmehr and Wang (2016). One of the instruments used for this study was the instrument used by Yazdanmehr and Wang (2016) called the ISP-related instrument. This study only used two scales from that instrument: perceived ethical climate and compliance policy compliance behavior (Yazdanmehr & Wang, 2016a). The mediator used in their study was personal norms, and the mediator used in my study was

perceived ethical climate or ethical climate (see Yazdanmehr & Wang, 2016a). Yazdenmehr and Wang found that ethical climate had a statistically significant effect on the descriptive, injunctive, and subjective, while the injunctive and subjective norms had a positive statistically significant effect on personal norms, which positively lead to compliance behavior. I found that ethical climate had an indirect effect on compliance behavior for both social influence and moral obligation. So, ethical climate may be both a predictor and a mediating variable and may need more study to understand further the impact it can have on compliance behavior.

Limitations of the Study

This study examined compliance behavior, moral obligation, and social influence. The purpose also included determining if the ethical climate had a mediating effect on compliance behavior and moral obligation or social influence among healthcare leaders. The data collection process was a survey through Amazon Mechanical Turk. The participants were required to be a leader with a position of manager or above in a healthcare organization within the United States. This study did not examine one organization or all employees. Using the survey process through MTurk encouraged participants to provide truthful answers and remain anonymous.

The study participants responded to one survey and provided a snapshot of insight into their perception of their organization. Each participant could have represented a different organization with a different culture. Based on the information obtained, it would not be possible to generalize the data to all healthcare organizations in the United States. The population does not include all employees but only a sample of healthcare

leaders, so the external validity could only be compared to a similar sample. This study included a small sample size of 186 participants. It may be possible to create some generalizations with larger sample size.

The study included a self-report of behaviors rather than observed behaviors, potentially creating a more significant opportunity for the participants to fake good in their responses. The analysis method was through multiple regression, which can detect correlations between variables but not able to determine causality. Reasonable assumptions may be made in interpreting the data. The assumptions are limited to interpretation.

Recommendations

Based on this analysis, there are several recommendations for future research. The methodology used for this study was quantitative, and the data collection process was via an online survey. A qualitative study would allow the researcher to obtain more in-depth information from participants and participate in discussions that could lead to a better understanding of participants' intentions. The sample population could include all levels of healthcare works rather than organizational leaders, which could offer information related to the impact of the ethical standards established by the organizational leadership.

Other areas to research concerning compliance and an individual's intention to comply with the organization's compliance policies involve the individual's self-efficacy level. Other researchers have examined self-efficacy as a behavioral motivator (Chen et al., 2018; Menard et al., 2017). Those who perceive they can comply with organizational policies are more likely to develop the intention to comply with organizational policies

(Cooper, 2017). Researchers should examine an employee's perception of self-efficacy and how that impacts their compliance behavior with organizational policies.

Some researchers have studied ethical climate, but not how that relates to an organization's compliance program (Gorsira et al., 2018). Using social cognitive theory, they analyzed variables such as proneness toward corruption, personal norms, and social norms (Gorsira et al., 2018). These variables are slightly broader than the variables used in this policy. Further study specific to compliance behavior and ethical climate concerning proneness to corruption, personal norms, and social norms could be used in comparison to this study and created additional information on how to improve the organizational culture.

Implications

This study has implications for the field of healthcare compliance. Compliance is with federal and state regulations is critical for many organizations. In healthcare, the laws that govern the industry are extensive and include regulations for areas such as fraud, waste, and abuse (Lorence & Richards, 2003; Snell, 2015). When appropriately followed, these laws protect the organization from sanctions, protect beneficiaries' inappropriate medical billing practices, and protect the payments from federal programs such as Medicare (Cornett, 2006; Kusserow, 2017; Lorence & Richards, 2003; Snell, 2015). Building strong healthcare compliance programs enhances the methods of protection that can be put into place. This study may help compliance leaders understand what motivated employees to comply with regulations and build compliance training and communications that engage employees' motivations.

Many studies evaluate and analyze motivation toward compliance in specific areas such as tax compliance, HIPAA privacy compliance, and information security compliance (Bin-Nashwan et al., 2020; Blass, 2019; Ifinedo, 2012; Lorence & Richards, 2003). This study is specifically related to healthcare compliance programs and is designed to help compliance leaders understand the motivators that impact compliance behavior. In the study, an analysis of motivators such as moral obligation and social influence shows a statistically significant impact on compliance behavior among healthcare organizational leaders. Organizational leaders help set the tone for the organizational climate and culture (Angonga & Florah, 2019; O'Keefe et al., 2019). Further analysis from this study shows that the organization's ethical climate is a mediating factor that impacts the relationships of moral obligation, social influence, and compliance behavior.

I hope that by understanding that employees feel a sense of duty through a moral obligation to comply with the organization's compliance policies and that knowing people are positively encouraged to comply through their social engagements with others, these factors can be engaged to enhance compliance behaviors compliance training programs. Encouraging compliance behavior through these motivators can strengthen the organization's ethical climate. As we have seen through other studies, the ethical climate can enhance personal norms, strengthening compliance behavior (Yazdanmehr & Wang, 2016a).

Lastly, encouraging compliance strengthens the organization. Healthcare organizations are a vital part of the community. Members of the community rely on

healthcare entities for jobs and healthcare needs. Employees desire to work for organizations they trust and reducing corruption or corporate crime enhances trust for employees (Bussmann & Niemeczek, 2019). As employee trust grows, community trust grows. So, strengthening organizational compliance can lead to strengthening the community.

Conclusions

This study evaluated healthcare compliance using study data obtained through Amazon Mechanical Turk. The vitality of compliance programs within healthcare organizations is critical. Healthcare organizations or healthcare practices are an integral part of most communities. Organizations are often held responsible for their employees' illegal or unethical behavior (Gorsira et al., 2018). When organizational leaders are exposed to unethical behaviors, it impacts the perspectives of those within the community toward the employee and potentially toward the organization (Worrall et al., 2014). Building a strong ethical climate within the organization can also strengthen the community.

Healthcare compliance leaders desire a better understanding of how to build strong compliance programs and enhance the ethical climate of the organization (Chen et al., 2018; Cornett, 2006; Gorsira et al., 2018; Kusserow, 2017). Through studies such as this, leaders can learn ways to enhance their compliance programs and the organization's culture. This study indicates that individuals are motivated toward compliance behaviors through moral obligation and social influence. As an individual, employees since a moral obligation to follow the compliance rules established for the corporation. It was also

determined that employees are influenced toward compliance by others in the organization.

By studying and analyzing motivation factors such as those in this study, leaders can increase their understanding of how to build stronger organizations, healthier ethical climates, and improve the organization's culture. Creating organizations with these dynamics improves the lives of those within the organization and improve the community. The ripple effect of what an organization can do is endless. Thus, building a compliant ethical climate within an organization has the potential to be the mechanism for elevating the standings of the community.

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About this survey and your data:

What data do we collect and process?

- You are invited to participate in this research study designed to understand the motivating factors of complying with a health care organization's compliance policies.
- The researcher is inviting those in healthcare leadership positions to understand healthcare leaders' motivation toward compliance. This information is provided so you will understand the purpose of the study so you may make an informed decision about your participation.
- A doctoral candidate is conducting this study at Walden University named Tara Farmer.
- The information you provide will help understand what motivates leaders toward compliance behavior and factors that may influence compliance behavior.
- The purpose of this non-experimental correlation, the quantitative research study is to test the relationship that moral obligation and social influence have on compliance behavior among healthcare organizational leaders and determine if the leader's behaviors have a mediating effect on the relationship between moral obligation or social influence and the organizational ethical climate.

To whom is the data shared, and for what reason?

- This data is shared with the student researcher and the researcher's committee.
- The information collected through this survey is only used for academic study purposes. Your timely and complete participation is essential.
- The answers provided will only be used for statistical analysis and will not be disclosed or used for other purposes.

Survey Structure

- This survey should take approximately 40 minutes.
- Participants will have seven (7) days to complete the study.
- There are 36 survey questions. The answers are on a scale.
- The first eight (8) questions range from one (1) meaning strongly disagree to five (5) indicating strongly agree. The remaining twenty-eight (28) questions range from one (1) meaning never to seven (7) meaning always.

Survey Consent

- Participation in this survey is completely voluntary.
- You are free to refuse to complete the survey questions.
- You may also, at any time throughout this survey, opt-out and not complete the survey questions.