

Communication Skills and Its Influence on Workplace Deviant Behavior among Staff Nurses

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Abstract

Background: Communication skills are of major importance in the nursing practice, with important positive impacts on patients' outcomes and reduce workplace deviance behaviors. **Aim:** This study aimed at assessing communication skills and its influence on workplace deviant behavior among staff nurses. **Research design:** A descriptive, correlational design was used. **Setting:** The study was conducted at non-critical units in Ain Shams University hospital. **Subjects:** 130 staff nurses were included in the study using convenience sampling technique. **Tools of data collection:** The data were collected by using two tools namely; communication skills observational checklist and nursing workplace deviance behavior questionnaire. **Results:** Majority (97.7 %) of the staff nurses had inadequate total practices of communication. Less than half (41.5%) of studied staff nurses had total workplace deviance behavior, and (58.5%) of studied staff nurses hadn't total workplace deviance behavior. **Conclusion:** There was a statistically significant correlation between staff nurses' practices of communication and workplace deviance behavior. **Recommendations:** communication skills training program should be applied to staff nurses. Develop and communicate clear policies regarding acceptable behavior and workplace standards.

Keywords: Communication skills, Staff nurses, Workplace deviance behavior.

Introduction:

Communication among nurses is a multifaceted process essential for effective healthcare delivery. Communication is defined as exchange of information, thoughts, and feelings through verbal and nonverbal means among healthcare professionals within and across teams. Effective communication in nursing is characterized by clarity, accuracy, timeliness, and relevance of information exchanged. It plays a critical role in coordinating care activities, facilitating decision-making, and promoting a collaborative environment where nurses can work together efficiently (Jones & Brown, 2024).

Communication among staff nurses categorized into several types; Verbal Communication includes face-to-face conversations, bedside handovers and team meetings. Verbal communication allows for immediate clarification and feedback, promoting real-time information exchange. Non-Verbal Communication includes gestures, facial expressions, and body language play a significant role in conveying emotions, empathy, and urgency among nurses. Non-verbal cues enhance understanding and can reinforce verbal messages (Brown, et al., 2024).

Therapeutic communication among staff nurses is essential for building trusting relationships with patients, enhancing patient outcomes, and fostering a supportive work environment. It involves using empathetic listening, open-ended questioning, and reflective responses to facilitate effective nurse-patient interactions (Brown & Smith, 2024).

Effective communication is often cited as a key factor in reducing deviant behaviors and fostering a positive work environment. Clear and open communication channels have been found to reduce misunderstandings and ambiguity that can contribute to deviant behaviors like gossiping or spreading misinformation (Lee, & Park, 2023). Nurses who perceive supportive communication from supervisors and peers are less likely to engage in deviant behaviors as they feel valued and respected within the team (Kim, et al., 2024).

Workplace deviance behavior among staff nurses refers to actions that violate organizational norms, policies, or ethical standards, and can have detrimental effects on the work environment and patient care. Examples include absenteeism, gossiping, sabotage of colleagues' work, and even more serious behaviors like theft or falsifying

records. Factors contributing to workplace deviance among nurses include high job stress, inadequate organizational support, interpersonal conflicts, and perceived unfair treatment (*Robinson, & Thomas, 2024*).

Workplace deviance behaviors not only impact the work culture negatively but also compromise patient safety and care quality (*Davis, & Garcia, 2024*). Workplace deviance behavior among staff nurses has significant negative effects on both the individuals and healthcare environment. Such behaviors undermine teamwork, erode trust among colleagues and disrupt communication channels (*Smith, & Johnson, 2023*).

Workplace deviance behavior classified into two main types: organizational deviance and interpersonal deviance. Organizational deviance involves behaviors that directly undermine the organization itself, such as sabotage or theft of company resources. On the other hand, interpersonal deviance refers to behaviors aimed at individuals within the organization, such as bullying, harassment, or spreading rumors (*Jones & Kavanagh, 2024*).

Communication training programs equip nurses with the necessary skills to express themselves clearly, listen actively, and handle conflicts constructively, thereby reducing the likelihood of engaging in deviant behaviors like gossiping or withholding information (*Brown, & White, 2023*). Programs that emphasize respectful communication have been found to decrease instances of deviant behaviors among healthcare professionals, contributing to a more harmonious work environment (*Johnson, et al., 2024*).

Significance of the study

During clinical training in public hospital, the researcher observed some of staff nurses do certain behaviors as leaving early, taking excessive breaks, intentionally working slow, wasting resources, gossiping about co-workers, blaming co-workers and verbal abuse and there is ineffective communication between staff which lead to serious errors that affect negatively on patient care.

Workplace deviance behaviors are a negative fact that damages people who working

within them and organizations without sound (*Ramzan, et al., 2018*). So, these serious phenomena should be addressed because it has a great impact on organizational efficiency as low performance of staff and decrease satisfaction of the patients and staff. So, this study was conducted to assess communication skills and its influence on workplace deviant behavior among staff nurses in order to maintain effective, safe and healthy working environment for patients and staff and to promote optimal level of patient care.

Aim of the study

The study aimed at assessing communication skills and its influence on workplace deviant behavior among staff nurses.

Research question:

Is there a relation between communication skills and workplace deviant behavior among staff nurses?

Subjects and Methods

Research design

A descriptive correlational research design was used in this study.

Research setting:

This study was conducted at non-critical units in Ain Shams University Hospital which affiliated to Ain Shams University Hospitals. It provides care for patients in different medical specialties. Its total bed capacity is 618 beds. It contains one main building consists of six floors. It consists of different departments such as; medical departments, cardiology departments, neurology departments, dermatology department, geriatric department and ophthalmology department.

Subjects

The subjects of this study consisted of all staff nurses who are working at the pre mentioned setting. Their total number is 130.

Data collection tools

Data of this study was collected through two tools namely: Communication skills observational checklist and nursing workplace deviance behavior questionnaire.

First tool: Communication skills observational checklist:

This questionnaire was used to assess staff nurses' practices of communication skills. It was developed by the researcher guided by review of relevant literatures **Abd Elfatah, (2020)**. It included the following parts:

The first part: Personal and job characteristics:

This part aimed to collect data related to personal and job characteristics of study subjects such as age, gender, marital status, nursing qualification, years of experience in nursing, years of experience in the current department and previous attendance of training courses in communication and workplace deviance behavior.

The second part: communication with health team members:

This part aims to assess staff nurses' communication with health team members. It was consisted of (32 items) divided into two dimensions as follows: General communication skills (7 items) and Personal communication skills (25 items).

The third part: communication with patients (therapeutic):

This part aimed to assess staff nurses' communication with patients (therapeutic). It was consisted of (35 items) divided into two dimensions as follows: General communication skills (10 items) and Personal communication skills (25 items).

Scoring system:

Each item or step of the observation checklists was checked as "Done", "not done" or "Not Applicable." Each item was observed to be "Done" was scored 1 and zero if "not done." The total score of each part and for the whole checklist

was calculated by summing-up the scores of the items and dividing the sum by the number of items. Then they were converted into percent scores. The staff nurse's practice was considered adequate if the percent score was 60% or higher and inadequate if less than 60%.

Second tool: Nursing workplace deviance behavior questionnaire:

This tool aimed at identifying nursing workplace deviance behavior among staff nurses. This questionnaire was adopted from **Aly and El Shanawany (2016)** and **Kazamel, (2020)**. It was consisted of 38 statements divided into five dimensions as follow: Nurses' behavior deviant (9 items), Nurses' attitude deviant (6 items), Nurses' ethics deviant (8 items), Nurse Manager Deviant (5 items) and Nurses' performance deviant (10 items).

Scoring system:

Responses were measured on a five points Likert scale ranging from strongly agree (5) to strongly disagree (1) to detect the extent to which the respondents are engaged in each of the behaviors. The scores of items were summed-up and the total divided by the number of the items. Then they were converted into percent scores. The staff nurses' workplace deviance behavior was considered present if the percent score was 60% or higher and not present if less than 60%.

Validity:

Face and content validity of proposed tools were judged by jury group consisting of seven experts in Nursing Administration Department from Faculties of Nursing at different universities, three professors and one assistant professor from Ain Shams University, one professor from Damanhur University, one professor from Benha University, one professor from Fayoum University for face and content validation. They assessed the tools for relevance, comprehensiveness, and applicability. The tools were revised and modified according to their comments.

Reliability:

The reliability of the data collection tools was assessed its internal consistency by using Cronbach's Alpha Coefficient test. Communication skills observation checklist was 0.848 and nursing

workplace deviance behavior questionnaire was 0.992.

II. Operational Design:

The operational design for this study included three phases namely: preparatory phase, pilot study and field work.

Preparatory phase:

This phase started from the beginning of June 2023 till the end of July 2023. During this phase, the researcher reviewed the national and international related literature concerning the topic of the study, this review was conducted through using available textbooks, articles, periodicals journals and internet search to be acquainted with study subject. The researcher also communicated with the researchers who developed the Egyptian questionnaire of nursing workplace deviance to take their approval for using their tool in the present study.

Pilot study:

The pilot study was carried out on 18 staff nurses who representing 10% of total study subjects. The aim of the pilot study was to examine the applicability of the tool, clarity of language, test the feasibility and suitability of tools. It also served to estimate the time needed to complete the forms by each study subject and identifying potential obstacles and problems that may be encountered during data collection. The time for filling the questionnaires took around 35-45 minutes. A pilot study was conducted in August 2023. No modifications were done so the study subjects included in the pilot were included in the main study sample.

Field work:

The field work of the study took three months started in the beginning of September 2023 and completed at the end of November 2023. The researcher met the head nurse of each unit for determining the suitable time to collect the data from the staff in each unit. The researcher introduced herself to staff nurses in the workplace, explains the aim and component of the questionnaires and distributed the sheets to staff nurses in their work settings at different times and attended during the filling of the questionnaires to clarify any ambiguity

and answer any questions. Also, the researcher observed the staff nurses practices of communication skills using observational checklists. Data was collected two days per week on Sunday and Tuesday at the morning and afternoon shifts. The researcher collected about 10 to 12 sheets every week. The researcher checked each filled questionnaire to ensure its completion.

Ethical consideration:

Prior to the actual work of research study, ethical approval was obtained from the Scientific Research Ethical Committee of the Faculty of Nursing at Ain Shams University. In addition, oral agreement was obtained from each participant in the study. The subjects were informed about the study aim and their rights to participate or refuse or withdraw from at any time without giving any reason and the collected data kept confidential and used for research only.

III. Administrative Design:

Before starting on the study, an official letter was submitted from the Dean of the Faculty of Nursing, at Ain Shams University to the medical and nursing directors of Ain Shams University Hospital to take their approval to conduct the study and collect data. The letter contained the aim of the study and forms of data collection tools. Then the researcher met the head nurse of each unit to explain the aim of the study, the expected benefits and results of the study and to obtain their approval and seek their support.

IV. Statistical Design:

Data collected from the studied sample was coded and entered into statistical package for social sciences (SPSS version 25.0). Data were presented using descriptive statistics in the form of frequencies and percentages for qualitative variables and means and standard deviation and median for quantitative variables. The Chi-Square test was commonly used for testing relationships between categorical variables. Statistical significance was considered at $p\text{-value} < 0.05$.

Ethical code :24.01.211

Results:

Table (1) shows that, Less than half (45.4 %) of staff nurses had age ranged from 30 to 40 years with mean \pm SD 34.78 ± 8.37 and median 34 years. Slightly more than two thirds (67.7 %) of staff nurses were females. (63.1 %) were married. Less than half (46.2 %) of them had Technical institute of nursing. (61.5 %) of them had total years of experience equal or more than 10 years with mean \pm SD 11.62 ± 8.01 while, (65.4 %) of them had years of experience in the current department equal or more than 10 years with mean \pm SD 6.39 ± 3.78 . Their medians of their total and current experience were 10.0 and 6.0 years respectively. Only (16.9%) of staff nurses reported having previously attended training courses in communication. None of them attended training courses in in workplace deviance behavior.

Table (2) illustrates that, the majority (97.7 %) of the staff nurses had inadequate total practices of communication; while (2.3 %) of staff nurses had adequate total practices of communication.

Table (3) shows that less than half (41.5%) of studied staff nurses had total workplace deviance

behavior, and (58.5%) of studied staff nurses hadn't total workplace deviance behavior.

Table (4) points to that there is a statistically significant relations between staff nurses' total practices of communication and their nursing qualifications and attendance courses in communication ($p=0.003$ and $p=0.004$ respectively).

Table (5) points to that there was no statistically significant relation between staff nurses' total workplace deviance behavior and their personal and job characteristics.

As illustrated in **Table (6)**, there was a statistically significant relation between total staff nurses nursing workplace deviance behavior and total staff nurses' practices of communication ($p=0.038$) with higher presence of nursing workplace deviance behavior associated with higher inadequate practices of communication.

Table (7) illustrates that, there was statistically significant negative correlation between total practices of communication and total workplace deviance behavior among studied staff nurses.

Table (1): Personal and job characteristics of staff nurses in the study sample (n = 130):

Personal and job characteristics	No.	%
Age (years)		
< 30	41	31.5
30 – < 40	59	45.4
≥ 40	30	23.1
Range	22.0 – 64.0	
Mean ± SD.	34.78 ± 8.37	
Median	34.0	
Gender		
Male	42	32.3
Female	88	67.7
Marital status		
Married	82	63.1
Unmarried	48	36.9
Nursing qualification		
Nursing Diploma	18	13.8
Technical Institute Diploma	60	46.2
Bachelor of Nursing	46	35.4
Others	6	4.6
Total years of experience		
<10	50	38.5
≥10	80	61.5
Range	0.0 – 39.0	
Mean ± SD.	11.62 ± 8.01	
Median	10.0	
Years of experience in current department		
<10	45	34.6
≥10	85	65.4
Range	0.0 – 18.0	
Mean ± SD.	6.39 ± 3.78	
Median	6.0	
Attend courses in communication		
No	108	83.1
Yes	22	16.9
Range	1.0 – 4.0	
Mean ± SD.	2.64 ± 0.90	
Median	3.0	
Attend courses in workplace deviance behavior		
No	130	100.0
Yes	0	0.0

Table (2): Staff nurses' total practices of communication in the study sample (n = 130):

Practices of communication (Adequacy 60%+)	Adequate		Inadequate	
	No.	%	No.	%
Communication with health team members				
I-General communication skills	16	12.3	114	87.7
II-Personal communication skills	3	2.3	127	97.7
Communication with patients				
I-General communication skills	33	25.4	97	74.6
II-Personal communication skills	8	6.2	122	93.8
Total	3	2.3	127	97.7

Table (3): Staff nurses' total workplace deviance behavior in the study sample (n = 130)

Nursing workplace deviance behavior (Present ≥ 60)	Present		Not present	
	No.	%	No.	%
Nurses' behavior deviant	48	36.9	82	63.1
Nurses' attitude deviant	50	38.5	80	61.5
Nurses' ethics deviant	55	42.3	75	57.7
Nurses' performance deviant	60	46.2	70	53.8
Nurse Manager Deviant	70	53.8	60	46.2
Total	54	41.5	76	58.5

Table (4): Relations between staff nurses' total practices of communication and their personal and job characteristics in the study sample (n = 130)

Personal and job characteristics	Practices of communication				χ^2 test	p- value
	Adequate (60%+)		Inadequate ($<60\%$)			
	No.	%	No.	%		
Age (years)						
< 30	0	0.0	41	32.3	Fisher	0.322
30 – < 40	3	100.0	56	44.1		
≥ 40	0	0.0	30	23.6		
Gender						
Male	1	33.3	41	32.3	0.001	1.000
Female	2	66.7	86	67.7		
Marital status						
Married	3	100.0	79	62.2	1.798	0.296
Unmarried	0	0.0	48	37.8		
Nursing qualification						
Nursing Diploma	0	0.0	18	14.2	Fisher	0.003*
Technical Institute Diploma	0	0.0	60	47.2		
Bachelor of Nursing	1	33.3	45	35.4		
Others	2	66.7	4	3.1		
Total years of experience						
<10	2	66.7	48	37.8	1.032	0.558
≥ 10	1	33.3	79	62.2		
Years of experience in current department						
<10	2	66.7	43	33.9	1.394	0.275
≥ 10	1	33.3	84	66.1		
Attend courses in communication						
No	0	0.0	108	85.0	15.075*	0.004*
Yes	3	100.0	19	15.0		
Attend courses in workplace deviance behavior						
No	3	2.3	127	97.7	-	-
Yes	0	0.0	0	0.0		

*: Statistically significant at $p \leq 0.05$

Table (5): Relations between staff nurses' total workplace deviance behavior and their personal and job characteristics in the study sample (n = 130)

Personal and job characteristics	Workplace deviance behavior				χ^2 test	p-value
	Present (60%+)		Not present (<60%)			
	No.	%	No.	%		
Age (years)						
< 30	19	35.2	22	28.9	1.238	0.538
30 – < 40	25	46.3	34	44.7		
≥ 40	10	18.5	20	26.3		
Gender						
Male	17	31.5	25	32.9	0.029	0.865
Female	37	68.5	51	67.1		
Marital status						
Married	32	59.3	50	65.8	0.578	0.447
Unmarried	22	40.7	26	34.2		
Nursing qualification						
Diploma	9	16.7	9	11.8	Fisher	0.789
Technical	23	42.6	37	48.7		
Bachelor	19	35.2	27	35.5		
Others	3	5.6	3	3.9		
Total years of experience						
<10	24	44.4	26	34.2	1.397	0.237
≥10	30	55.6	50	65.8		
Years of experience in current department						
<10	21	38.9	24	31.6	0.745	0.388
≥10	33	61.1	52	68.4		
Attend courses in communication						
No	41	75.9	67	88.2	3.360	0.067
Yes	13	24.1	9	11.8		
Attend courses in workplace deviance behavior						
No	54	41.5	76	58.5	-	-
Yes	0	00	0	00		

*: Statistically significant at $p \leq 0.05$ **Table (6):** Relations between staff nurses' total practices of communication and their nursing workplace deviance behavior in the study sample (n = 130):

	Nursing workplace deviance behavior				χ^2 test	p- value
	Present (60%+)		Not present (<60%)			
	No.	%	No.	%		
Total practices of communication						
Adequate (60%+)	3	5.6	11	8.4	4.322*	0.038*
Inadequate (<60%)	51	94.4	65	91.6		

*: Statistically significant at $p \leq 0.05$ **Table (7):** Correlation matrix of staff nurses' scores of Practices of communication and Nursing WDB:

Spearman's rank correlation coefficient	
r	P value
-0.178*	0.042*

rs: Spearman coefficient

*: Statistically significant at $p \leq 0.05$ **Discussion:**

Communication skills are of major importance in the nursing practice, with important positive impacts on patients' outcomes. Nurses with good communication skills are more competent and have more self-confidence and self-efficacious in dealing with their patients (*Leal-Costa et al., 2020*).

Thus, the present study aim was to assess communication skills and its influence on workplace deviant behavior among staff nurses.

Regarding the staff nurses' practices regarding total communication skills, this study showed that the majority of staff nurses

had inadequate total practices of communication. This might be due to lack of formal and continuous training about communication skills for nurses and high workload and stress. This is supported by a study of *Smith, & Johnson, (2021)* who found that staff nurses had inadequate level of communication practices.

Regarding the staff nurses' total workplace deviance behavior, this study demonstrated that less than half of studied staff nurses had total workplace deviance behavior. This result might be attributed to lack of fair practices, stress, job dissatisfaction, and low financially rewarding. This finding supported by *Kazamel, (2020)* who found that staff nurses had high level of workplace deviance behavior.

Regarding to the relation between staff nurses' total practices of communication and their personal and job characteristics, the present study findings indicated statistically significant relationships between staff nurses' total practices of communication and their nursing qualifications and attendance in communication courses. This confirmed that these factors are associated with variations in communication practices among nurses.

In alignment with the significant relationship between nursing qualifications and communication practices, *Alshammari et al. (2021)* which suggested that advanced training correlates with improved communication skills. Higher education levels in nursing typically include more in-depth coverage of communication techniques and strategies, which supports better practice. Advanced nursing education typically includes more comprehensive training in communication skills compared to basic programs. Also, according to *Zhao, et al. (2020)* nurses with advanced degrees are often better equipped to apply communication theories in practice.

Relating to the significant relationship between attendance in communication courses and communication practices underscored the effectiveness of specialized training. Nurses who have attended such courses are likely to have enhanced skills and knowledge in communication, which directly impacts their practice. This is supported by *Lee and Kim (2023)* who found that

targeted communication training leads to significant improvements in practice. Also, *Smith, et al. (2022)* emphasized that specialized training helps bridge gaps in communication skills and enhances practical application.

In contraindication with this, some studies argued that while advanced qualifications can enhance knowledge, they do not always translate into better communication practices in clinical settings such as a study by *Hegney et al. (2020)* suggested that theoretical knowledge gained through higher education might not always be effectively applied in practical settings without additional support and practice. This indicates that while qualifications are important, practical experience and ongoing professional development are also crucial.

Regarding to the relation between staff nurses' total workplace deviance behavior and their personal and job characteristics, the present study findings showed no statistically significant relations between staff nurses' total workplace deviance behavior and their personal and job characteristics. This suggested that factors such as age, gender, education level, experience, etc. do not appear to influence the extent of deviant behavior among staff nurses in this sample. Workplace deviance is influenced by various factors including organizational culture and management practices or feeling of injustice in the workplace.

In agreement with this, *Zhang et al. (2020)* who found that low job satisfaction and high stress levels were significantly related to higher levels of workplace deviance. Like the Study by *Robinson and Bennett (2021)* suggested that deviant behavior is often more related to situational factors and workplace environment than to individual characteristics alone.

Conversely, some studies suggested that individual characteristics can indeed influence workplace deviance behavior such as a study by *Lee, et al. (2022)* highlighted that personal characteristics are essential to uncover relationships between personal/job characteristics and workplace deviant behaviors.

Regarding to the relations between study variables, the current study findings revealed statistically significant relations between staff nurses' total practices of communication and total staff nurses nursing workplace deviance behavior with higher presence of nursing workplace deviance behavior associated with higher inadequate practices of communication. This is supported by **Zhang, et al. (2022)** suggested that effective communication is a key to managing workplace dynamics and reducing deviant behaviors. Nurses with better communication skills were more adept at identifying and addressing behaviors that lead to workplace deviance behaviors.

In disagreement with this, a study by **Nguyen et al. (2021)** found that while communication plays a role, broader organizational factors also significantly affect deviant behavior. Workplace deviance is influenced by a range of factors beyond communication skills, such as organizational culture and individual stress levels.

Conclusion:

In the light of the current study findings, it is concluded that, there was statistically significant relation between total staff nurses nursing workplace deviance behavior and total staff nurses' practices of communication with higher presence of nursing workplace deviance behavior associated with higher inadequate practices of communication.

Recommendations:

Based on the study finding, it was recommended to provide different kinds of bonuses and incentives for appreciating positive behaviors of employees. Regularly provide nurses with training programs focused on communication skills. These programs should include active listening, non-verbal communication, and patient interaction techniques. Training can be delivered through workshops, simulations, and role-playing exercises. Future researches can be suggested to investigate the relationship between communication skills and motivation and between workplace deviance behaviors and supervisor support.

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