

## The Relationship Between Organizational Justice And Citizenship Behavior As Perceived By Medical-Surgical Care Nurses

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**Abstract:** In healthcare organization, nurses are considered as a backbone of its success as their performance and behaviors are key determinants for good performance. Since their extra role behaviors significantly affect overall performance of healthcare organizations, managers should understand why and how nurses adopt them. This study contributes towards this end as it attempts to examine the relationship between organizational justice as perceived by nurses (OJ) and their organizational citizenship behavior (OCB). The study sample included 350 nurses working in medical and surgical care units at Egyptian university teaching hospital. The authors used two tools for data collection included (1) Organizational Justice Measuring Instrument (OJMI). It was developed by Ledimo (2015). It consists of 59 items divided into nine domains namely: strategic direction, distributive justice, procedural justice, interactional justice, informational justice, service diversity management; customer relations, service delivery innovation as well as ethical leadership. (2) Organizational Citizenship Behaviors tool was developed by Organ et al. (1990). It consists of 20 items, divided into five dimensions namely; altruism, sportsmanship, conscientiousness, courtesy, and civic virtue. The results revealed that a highly positive significant correlation between nurses perception of organization justice and their organizational citizenship behavior.

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### I. Introduction

In today's competitive world, health care organizations are constantly trying to retain the best talent nurses<sup>1</sup>. Thus, organizational justice (OJ) has become a prime aspect for organizations as it directly influence nurses' attitude and behaviors and enhance the nurses' perception of organizational fairness<sup>2</sup>. In this respect OJ is used to describe the role of fairness in the organization<sup>2</sup>. It is one of the key pillars for the organizational success as it is a main contributor in achieving job satisfaction among Nurses<sup>3</sup>. In other words, OJ is important as a significant motivational tool for organizational behaviors<sup>4</sup>. Specifically, OJ is concerned with the ways in which nurses determine if they have been treated fairly within their organization and the ways in which those determinations influence other work-related variables<sup>2</sup>. Hence, OJ is a subjective and descriptive concept because it captures what the nurses believe to be right, rather than an objective reality<sup>5</sup>.

Burns and Dipoala (2013) asserted that OJ is a term used to describe nurses' perceptions about organizational fairness and whether their managers treat them fair, with respect and equal<sup>6</sup>. It refers to "the extent to which nurses perceive workplace procedures, interactions and outcomes to be fair in nature. These perceptions can influence attitudes and behaviors for good or bad, in turn having a positive or negative impact on their performance and organizational success<sup>7</sup>. OJ is essential as it leads to high performance, diversity management and talent retention<sup>2-4</sup>. Most studies recently conducted on the organizational justice indicate that it has an impact on organizational outcomes such as nurses' motivation, commitment, satisfaction, talent attraction and retention, employee and organizational performance, leadership, diversity management and ethical behavior<sup>2-5</sup>. Shibaoka M et al (2010) also highlighted that organizational justice has recently attracted attention as a predictor of nurses' mental and physical health<sup>8</sup>.

OJ is a concept entailing nine dimensions of justice namely; strategic direction, distributive, procedural, interactional, informational, diversity management; customer relations; service delivery innovation as well as ethical leadership and management<sup>9</sup>. Strategic direction justice refers to perceptions of fairness in terms of the formulation, communication and execution of the organization's vision and mission statement; goals and objectives; values and operational plans<sup>9</sup>. Strategic direction is described as the underlying purpose of the organization, based on its vision and mission, business goals and objectives, operational plans as well as its organizational values<sup>10-11</sup>. Fair development of the strategic direction focuses on consultation with the relevant stakeholders during the decision-making process, which includes nurses, managers, clients and organization<sup>12</sup>.

Distributive justice is based on the principle of equity<sup>9</sup>. It is nurses' subjective perception of the fairness of distribution and allocation of organizational resources and outcome to enable them to achieve organizational goals<sup>13</sup>. Procedural justice is perceptions of fairness regarding the development and application of human resource policies, intervention. In other words, it refers to the means by which outcomes are allocated, but not specifically to the outcomes<sup>14</sup>. Interactional justice is a perceived fairness regarding interpersonal treatment within organization to determining outcomes and nurses' feelings of how fair they are treated by their supervisors<sup>9,15</sup>. It focuses on teamwork and interdepartmental relations<sup>9</sup>.

Informational justice is the explanation, justification or information provided by decision-makers as to why outcomes have been distributed in a certain way<sup>13</sup>. Ledimo 2015 defined informational justice as the fairness in management and dissemination of information. This type of justice requires the information should be comprehensive, reasonable, truthful, timely and candid in nature<sup>9</sup>. Concerning, diversity management justice focused on employees' perceptions of fairness of the nature of development, planning and implementation of change<sup>9</sup>. On other hand, it means the organization fairly evaluate, promote, and compensate its staff based upon performance and ability rather than on criteria such as gender, race, nationality, or age<sup>16-17</sup>. It is a complete organizational cultural change designed to foster appreciation of demographic, ethnic and individual differences, and to accomplish a cultural change designed to value diversity involving modification of existing procedures and practices<sup>11</sup>.

Ethical leadership and management is an aspect of justice implies managers' ability to act morally and exert moral value in the organization such as honesty, integrity, equity, empowerment and recognition<sup>18</sup>. Also, it refers to the conduct of leaders and managers that is fair, protects the rights of others and is beneficial to all stakeholders in the organization<sup>9</sup>. Service diversity and innovation as a dimension of OJ highlights the responsibility of employees and managers to create a just and fair image of the organization regarding the development and delivery of services<sup>19</sup>. A delivered service should function seamlessly in order for customers to perceive it correctly as fair and just<sup>20</sup>. Any organization exists to provide services to their clients<sup>12</sup>. Justice is crucial because it focuses on nurses' perceptions of fairness which affect their performance, loyalty, satisfaction and create OCB<sup>21-22</sup> that is not directly or explicitly recognized by the formal reward system, and in the aggregate promotes the efficient and effective functioning of the organization<sup>23</sup>.

Lu, 2014 defined OCB as the sum of all formal and informal behaviors nurses illustrates as long as they are in the organization and those behaviors reflect their sense of belonging<sup>24</sup>. Also, Organ et al, (2006) identified organizational citizenship behavior as one of the most influential factors that affect organizational effectiveness and success<sup>23</sup>. Cohen and Vigoda (2010) have determined the vital of organizational citizenship behavior for all nature of organizations, and elaborate the view that it improves the organizations' overall performance in a variety of ways. If nurses are happy with their work, environment and responsibilities, then they naturally feel constructive for the organization and give optimistic response<sup>25</sup>.

Podsakoff et al, (1990) identifies five OCB dimensions, including conscientiousness, altruism, civic virtue, sportsmanship, and courtesy<sup>26</sup>. Conscientiousness involves discretionary behavior that goes well beyond minimum role requirements. Altruism is helping other organizational members with organizationally relevant tasks or problems. Civic virtue is behavior indicating a willingness to participate responsibly in the life of the organization while sportsmanship is defined as any behavior demonstrating tolerance of less than ideal circumstances without complaining. Finally, courtesy includes efforts to prevent work-related problems with others<sup>26</sup>.

## **II. Material And Methods**

The study was conducted to identify the perceived level of OJ among medical-surgical care nurses. Moreover, identify the perceived level of OCB among medical-surgical care nurses. Determine the relationship between the perceived organizational justice and organizational citizenship behavior among medical-surgical care nurses.

**Study Design:** A descriptive correlational research design was used in this study.

**Study Location:** This was medical and surgical care units at Egyptian university teaching hospital.

**Study Duration:** January 2018 to March 2018.

**Sample size:** 350 nurses.

**Sample size calculation:** The sample size was estimated on the basis of a single proportion design. The target population from which the sample was selected was 2500 nurse. We assumed that the confidence level of 95% and confidence limits 5%.

### **Procedure methodology**

After written informed consent was obtained, two tools were used to collect the data from the nurses. First tool is organizational justice measuring instrument (OJMI). It was developed by Ledimo (2015)<sup>(9)</sup>. It consists of 59 items divided into nine domains namely: strategic direction (5 items); distributive justice (12 items),

procedural justice (5items), interactional justice (5items), informational justice (7items), service diversity management (4items); customer relations (4items); service delivery innovation (6items) as well as ethical leadership (11items). The responses measured through five point likert scale ranging from (1) strongly disagree to (5) strongly agree. The scores of each group of items were summed-up and the total divided by the number of the items in this group, giving a mean score for each domain of the organizational Justice (9). These scores were converted into a mean percent score. The Cronbach's alpha for tool items was 0. 0.939.

Tool two is Organizational Citizenship Behaviors was developed by Organ et al. (1990)<sup>(27)</sup> and used in many studies<sup>28-30</sup>. It consists of 20 items, divided into five dimensions namely; altruism (4items), sportsmanship (4items), conscientiousness (4items), courtesy (4items), and civic virtue (4items). The responses measured through five point likert scale ranging from (1) strongly disagree to (5) strongly agree. The overall scoring system ranging from 20 to 100; the higher score indicating higher OCB. The estimated Cronbach's alpha for this instrument is 0.738. In addition, a socio-demographic data questionnaire was added and developed by the researchers to gather related to age, educational level, years of experience, working shift, and number of working hours /week.

The tools translated into Arabic. The validity of the tools was assessed by two professors and one assistant professor of nursing administration, and two assistant professor psychiatric nursing professors. A pilot study was conducted to assess the clarity, feasibility and applicability of questionnaires with 10% from the total sample of staff nurses. The pilot also served in estimating the time required for filling the questionnaires, and it was found that each participant would need about 30 to 40 minutes to complete them. Nurses included in the pilot study were excluded from the main study sample. After identification of obstacles and limitations from the pilot study, and making necessary modifications to ensure the clarity of the tools, data collection was conducted, through self-administered questionnaire. Data collection took place over two months from January to March, 2018.

**Ethical consideration**

Official approval was obtained from the administrative to conduct the study. An informed consent was obtained from all participant nurses in the study who were informed of the study purposes that their participation was voluntary and anonymous, and would not affect their statutory rights; and that they could withdraw from the study at any time.

**Statistical analysis**

Data were fed to the computer and analyzed using IBM SPSS software package version 20.0<sup>31</sup>. (Armonk, NY: IBM Corp) (2). Qualitative data were described using number and percent Quantitative data were described using mean, standard deviation. Significance of the obtained results was judged at the 5% level. The used tests were Pearson coefficient to correlate between two normally distributed quantitative variables and Multivariate linear regression to detect the most independent/ affecting factor Organizational citizenship behavior tool.

**III. Result**

Table no 1 Shows that all nurses were female. About one third of them (32.6%) were in the age group between 30 and 40 years old, while 24.5% were above 50 years old. 51.7 % of nurses are working in medical care units, while 48.3% of them are working in surgical care units. The majority of nurses (77.7%) had diploma of secondary nursing school, 11.7% had diploma of technical health institute, while 10.6% of them had bachelor degree of nursing science. Moreover, the majority of nurses (76%) had more than 10 years of experience, while 11.4. % of them had less than 5 years of experience. Slightly above one third of nurses (39.4%) working in different and rotating shifts, and about 29.7% of them working in morning shift only.

**Table no 1:** Distribution of nurses according to demographic and work related data (n = 350)

Socio-demographic characteristics	No.	%
<b>Gender</b>		
Female	350	100.0
<b>Age (years)</b>		
Less than 30	94	26.9
30 – 40	113	32.3
41 – 50	58	16.76
More than 50	85	24.4
<b>Unit</b>		
Medical	181	51.7
Surgical	169	48.3
<b>Educational level</b>		
Bachelor degree	37	10.6

Diploma of Technical institute of nursing	41	11.7
Diploma of Secondary nursing school	272	77.7
<b>Years of experience</b>		
Less than 5 years	40	11.4
From 5 to 10 years	44	12.6
More than 10 years	266	76
<b>Working shift</b>		
Morning	104	29.7
Evening	17	4.9
All the day(long shift)	56	16
Night	35	10
Rotating /varied	138	39.4

Table no 2:Records low mean percent score of nurses' perception of overall organizational justice (48.54 ± 13.82). The highest mean percent score was related to interactional justice (59.26 ± 29.72), followed by customer relation justice (59.23 ± 20.99). While distributive justice (DJ) represented the lowest mean percent score (40.35 ± 20.22) followed by procedural justice (PJ) (41.04 ± 14.67).

**Table no2:**Mean percent score of nurses perception of organizational justice (n = 350)

Organizational justice	Min. – Max.	Mean ± SD.
Distributive justice	0.0 – 77.08	40.35 ± 20.22
Ethical leadership and management	0.0 – 84.09	46.31 ± 19.86
Service delivery innovation	8.33 – 95.83	46.50 ± 19.71
Strategic direction justice	15.0 – 95.0	47.56 ± 21.0
Interactional justice	0.0 – 100.0	59.26 ± 29.72
Informational justice	7.14 – 100.0	54.21 ± 22.59
Procedural justice	10.0 – 65.0	41.04 ± 14.67
Diversity management justice	12.50 – 100.0	58.82 ± 22.17
Customer relations justice	12.50 – 100.0	59.23 ± 20.99
Overall OJ	19.49 – 87.29	48.54 ± 13.82

**Table no3:** Shows moderate total mean percent score of nurse's perception of organizational citizenship behavior (63.59 ± 13.86). Altruism dimension constitutes the highest mean percent score (74.89 ± 15.29), followed by courtesy (70.41 ± 24.77). On the other hand sportsmanship represents the lowest mean percent score (44.63 ± 20.53).

**Table no3:**Mean percent score of nurses' perception of organizational citizenship behavior (n = 350)

OCB	Min. – Max.	Mean ± SD.
Altruism	25.0 – 100.0	74.89 ± 15.29
Sportsmanship	0.0 – 100.0	44.63 ± 20.53
Conscientiousness	12.50 – 100.0	60.50 ± 24.71
Courtesy	0.0 – 100.0	70.41 ± 24.77
Civic virtue	37.50 – 100.0	67.52 ± 17.22
Overall OCB	28.75 – 100.0	63.59 ± 13.86

Table no4 Shows a highly positive significant correlation between nurses perception of organization justice and their organizational citizenship behavior (p= <0.001, r=0.720). Also, there was a highly positive significant correlation between all organizational justice dimensions and organizational citizenship behavior dimensions.

**Table no 4:**Correlation betweenNurses Perception of Organizational Justice and Their Organizational CitizenshipBehavior

Organizational justice tool dimensions/INDT		Organizational citizenship behavior tool dimensions/DEP					
		Altruism	Sportsmanship	Conscientiousness	Courtesy	Civic virtue	Overall
Distributive justice (DJ)	R	0.179*	0.148*	0.249*	0.418*	0.330*	0.404*
	P	0.001*	0.006*	<0.001*	<0.001*	<0.001*	<0.001*
Ethical leadership and management	R	0.297*	0.257*	0.427*	0.479*	0.420*	0.569*
	P	<0.001*	<0.001*	<0.001*	<0.001*	<0.001*	<0.001*
Service delivery	R	0.357*	0.284*	0.406*	0.405*	0.355*	0.541*

innovation	P	<0.001*	<0.001*	<0.001*	<0.001*	<0.001*	<0.001*
Strategic direction justice	R	0.544*	0.465*	0.461*	0.425*	0.348*	0.660*
	P	<0.001*	<0.001*	<0.001*	<0.001*	<0.001*	<0.001*
Interactional justice	R	0.420*	0.018	0.488*	0.425*	0.324*	0.494*
	P	<0.001*	0.739	<0.001*	<0.001*	<0.001*	<0.001*
Informational justice	R	0.207*	0.148*	0.171*	0.350*	0.313*	0.353*
	P	<0.001*	0.006*	0.001*	<0.001*	<0.001*	<0.001*
Procedural justice (PJ)	R	0.154*	0.207*	0.209*	0.265*	0.275*	0.333*
	P	0.004*	<0.001*	<0.001*	<0.001*	<0.001*	<0.001*
Diversity management justice (DMJ)	R	0.222*	0.430*	0.304*	0.154*	0.120*	0.370*
	P	<0.001*	<0.001*	<0.001*	0.004*	0.024*	<0.001*
Customer relations justice (CRJ)	R	0.398*	0.420*	0.426*	0.258*	0.318*	0.535*
	P	<0.001*	<0.001*	<0.001*	<0.001*	<0.001*	<0.001*
Overall OJ	R	0.450*	0.348*	0.525*	0.579*	0.498*	0.720*
	P	<0.001*	<0.001*	<0.001*	<0.001*	<0.001*	<0.001*

r: Pearson coefficient\*: Statistically significant at  $p \leq 0.05$

Table no 5 Shows multivariate linear regression analysis was carried out to evaluate the predictive value of organizational justice associated with organizational citizenship behavior. Table 5 reveals regression coefficient value between organizational justice as an independent variable and organizational citizenship behavior as a dependent variable where ( $R^2 = 0.975$ ). This means that approximately 97.5% of the explained variance of organizational citizenship behavior is accounted by organizational justice which independently contribute a significant predictive power of organizational citizenship behaviors where, the model is significant ( $f = 1524.9, p < 0.001$ ).

**Table no 5:** Multivariate linear regression for factor affecting Organizational citizenship behavior tool

	B	SE	Beta	t	p
Distributive justice	0.031	0.044	0.021	0.691	0.490
Ethical leadership and management	0.163	0.042	0.126	3.861*	<0.001*
Service delivery innovation	0.039	0.046	0.030	0.859	0.391
Strategic direction justice	0.250	0.034	0.199	7.293*	<0.001*
Interactional justice	0.115	0.023	0.118	5.079*	<0.001*
Informational justice	0.014	0.031	0.012	0.433	0.665
Procedural justice (PJ)	0.221	0.042	0.148	5.260*	<0.001*
Diversity management justice (DMJ)	0.117	0.030	0.113	3.956*	<0.001*
Customer relations justice (CRJ)	0.273	0.031	0.264	8.804*	<0.001*
R <sup>2</sup> = 0.976, adjusted R <sup>2</sup> = 0.975, SE = 10.27, F = 1524.9*, $p < 0.001$ *					

R: coefficient of regression

B: Unstandardized Coefficients

SE: Estimates Standard error

Beta: Standardized Coefficients

t: t-test of significance

F,p: F and p values for ANOVA test

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

#### IV. Discussion

The organization cannot achieve its objectives unless heavily depending on human resources who are the key players in translating these objectives in field in the form of performances, behaviors and interactions<sup>32</sup>. Nurses' perception of fairness within the organization and their sense of that the organization value their performance translated into positive citizenship behavior and improve organizational performance and patients' outcome<sup>33-34</sup>.

OJ and fairness is important factor for motivating positive behavior of nurses toward the organization<sup>33</sup>. It is defined as nurses' perception of fairness in the development and execution of strategic direction, consistency in the application of employees' policies, distribution of organizational recourses, the nature of relationship, the ethical conduct of leader and manager, information management within the organization, the nature of customer relation as well as service delivery innovation<sup>9,29-30</sup>.

This research found that, the studied nurses are treated fairly in term of interactional justice (collaboration between collages in the same department and with other department, dignity and respect within nurses' relationship). This result is consistent with Mahmoud and Ibrahim (2016)<sup>28</sup> and Ahmed A et al (2014) and Abu Elanain M (2010) who founded that the interactional justice as a one dimension of OJ constituted the highest mean percent score of the studies nurses in Egyptian hospital<sup>35-36</sup>. Also, the studied nurses perceived adequate customer relation justice in term of fairness toward patients' relationship, satisfaction and handling patients' complains<sup>36</sup>. Determining patients' needs and preferences help the hospital to provide the appropriate services to them and gain greater insight into patient behavior and preferences. So the hospital will be able to improve the effectiveness and efficiency of customer relation processes in order to gain and retain customers. This is the first research measure the customer relation justice as a one dimension of OJ.

The studied nurses as regard to distributive justice reported the lowest mean percent score. Nurses' feelings of injustice may be due to unequal incentives, inequity between the effort they exert and the salaries they received, personal bias of their superior, and lack of their involvement in decision making process related to their work. This finding is consistent with Mahmoud and Ibrahim (2016)<sup>28</sup>, Sogand et al (2016)<sup>37</sup>, Soon M, lee, and Koh (2017)<sup>29</sup>.

OCB is defined as the willingness of employees to go beyond prescribed role and do more than job description. According to the result, the mean score percent of OCB was moderately perceived by nurse<sup>30</sup>. According to the result, the mean score percent of OCB was moderately perceived by nurse. This may be due to the presence of helping behavior between the nurses.

Our research found a highly positive significant correlation between OJ and OCB and support the nature of the causal relationship between these two variables as OJ leads to higher levels of OCB among nurses and approximately 97.5% of the explained variance of organizational citizenship behavior is accounted by organizational justice. This result is consistent Fiazet al (2018)<sup>38</sup>, Lim and Loosemore (2017)<sup>39</sup>, Saifi and Shahzad (2017)<sup>40</sup>, Lilly (2015)<sup>41</sup>, Change (2014)<sup>42</sup>, and Hassani and Jodatkordlar (2012)<sup>43</sup> who found a positive relationship between OJ and OCB. Mahmoud and Ibrahim (2016)<sup>28</sup> and Janatiet al (2017)<sup>44</sup> indicated that the perceptions of OJ among nurses in strongly related to their OCB attitudes. The nurse contributes in the success of the organization, dedicate more time and effort and help the co-worker complete their assigned duties as they recognize that the organization is treating them fairly and positively<sup>45-46</sup>.

## V. Conclusion

This study aimed to provide insight about the relationship between nurses' perception of OJ and their OCB. The purpose of this study was achieved because the results show that nurses' perception of OJ positively related to their OCB and OJ as an independent variable contribute a significant predictive power of OCB. Therefore, first line nurse manager should be aware of the benefits of behaving toward nurses in a manner perceived as fair. First line nurse manager should be concerned with how they treat their employees because nurses' perceptions of that treatment could affect the occurrence of citizenship behaviors.

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