Organizational Justice and it's influence on Organizational Citizenship Behavior among Staff Nurses

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Abstract

Background: In healthcare organization, nurses are considered as a backbone of its success as their performance and behaviors are key determinants for good performance. Justice and its implementation is a fundamental aspect to create citizenship behaviors among nurses and increase their loyalty and commitment to the organization. Aim: the study aimed to investigate the influence of organizational justice on organizational citizenship behavior among staff nurses at Dikirnis General Hospital. Method: a descriptive correlational design was utilized, included 252 staff nurses working at Dikirnis General Hospital. Data was collected using two tools, organizational justice questionnaire, and organizational citizenship behavior questionnaire. Results: There was a significant positive correlation between organizational justice and organizational citizenship behavior; staff nurses had moderate level of perception of organizational justice. More than half of the staff nurses had high perception of organizational citizenship behavior. Conclusion: There was statically significant positive correlation between organizational justice and organizational citizenship behavior. Recommendation: The hospital administrator and head nurses should be alert to the benefits behaving toward nurses in a manner perceived as fair. Organize periodically meeting with supervisors and their staff nurses to discuss their problems, needs and involve them in solving it.

Keywords: Organizational Citizenship Behavior, Organizational Justice, staff nurses

Introduction

Nurses are the largest group working in health care organizations. To motivate nurses to apply desirable attitudes toward their colleges, superiors, and the entire organization, a fair environment and equally treatment should be maintained in the workplace (Mohammad etal., 2016). Organization benefits, salaries and rewards should be distributed fairly on all nurses. Providing fair promotion affects nurses’ job satisfaction and commitment to the organization and decrease negative behaviors of nurses as absenteeism, being late for the work and leaving the job. Having satisfied nurses in the organization increase it's success and make them provide more effort to achieve it's objectives (Esen & Keskin, 2019).

Organizational Justice (OJ) perception refers to the degree to which nurses feel that the organization's decisions are fair and head nurses treat the staff nurses in a fair manner (Đorđević.,A, 2019).

Organizational justice has been defined on the basis of three dimensional model of distributive, procedural and interactional justice. Distributive justice is arising from the principle of equity. It is nurses’ subjective perception of the fairness of distribution and allocation of organizational resources and outcome to assist them to achieve organizational goals. Procedural justice is mentioned as “the fairness of the decision processes that lead to outcomes and involves whether the decision procedures, process control and dispute settlement mechanism is fair, open, consistent, and reasonable or not and whether the employees are provided any ways to participate in the decision making or not (Ledimo, 2015).
Interactional justice refers to the perceived quality of the interpersonal treatment received by employees when procedures are enacted. Further, interactional justice consists of two distinct types: interpersonal and informational justice. Interpersonal justice refers to the extent to which the individual believes that they have been treated with respect and dignity, while informational justice refers to the perceived fairness of the explanation surrounding the procedures and/or the distributions of the outcomes (Đorđević et al., 2019).

Ethical leadership and management is an important aspect of justice that implies managers' ability to deal morally and exert moral value in the organization such as honesty, integrity, equity, empowerment and recognition. Justice is important because it focuses on nurses perceptions of fairness which affect their performance, loyalty, satisfaction and create organizational citizenship behavior (OCB) (Bauer & Erdogan, 2012 & Ledimo, 2015). OCB defined 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 (Lu, 2014).

OCB appears when more efforts than prescribed are performed by nurses in order to accomplish for organization’s performance and assisting their colleagues to attain the work. Support should be provided by the head nurses to the nurses during work performance since there is longer time needed more essential work assignments. If the nurses are satisfied with their work conditions, the nurses will do their best and will give the favor to get better results and tend to fulfill OCB (Veličkovska, 2017).

Dimensions of OCB identified are five dimensions, including conscientiousness, altruism, civic virtue, sportsmanship, and courtesy. Conscientiousness shows that a specific person is organized, accountable, and hardworking. Conscientious includes behaviors allowing the person to perform his duties beyond the expectations. Altruism defined as voluntary behaviors whose goal is to assist other people in the organization considering their duties or organizational relationships. Civic Virtue refers to the accountability of coworkers to participate in work life; such participation can be like participating in meetings not mandated by the organization but preserve developments in the organization (Mohammad & Tahere, 2018).

Sportsmanship generally involves enduring inappropriate working conditions and situations causing troubles without showing any dissatisfaction. Courtesy reflects the quality of individuals' behavior with their colleagues, supervisors and audience.

In assessing organizational efficiency and contributing to organizational effectiveness OCB has an important role for organizations as well as for workers. Providing better services are provided by nurses as a result of OCB. OCB also reduce employee turnover, increase employee commitment to the organization, enhance job satisfaction and economized organizational resources (Organ, 2018).

Significance of study:

Organizational Justice and organizational citizenship behavior are important factors affecting the human resource in each organization. Organizational justice can help to improve work performance of employees. When employees perceive fair treatment from organization, they will feel a sense of obligation to give back to the organization in return (Ghosh, Sekiguchi & Gurunathan, 2017). The perception of justice for an employee promote the quality of relationships within the organizations. (Swalhi, Zgoulli & Hofaidhllaoui, 2017).

Whenever perception of organizational justice will be high, it will promote the employee’s positive attitude towards their own organizations and also lead positively to organizational citizenship behaviors (Ozbek, Yoldash & Tang, 2016). Lack of organizational justice can have a negative effect on the behavior of nurses towards each other and can even have a negative effect on patient-nurse interactions (Pekurinen et al., 2017). Good working relationships are essential to the smooth functioning of an organization (Swalhi, Zgoulli & Hofaidhllaoui, 2017). Presence of organizational justice has a great and positive correlation with positive organizational citizenship behavior. On the
other hand, employees that are treated with organizational injustice, might perform negatively and display negative behavior (Nastiezaie & Jenaabadi, 2016) So the aim of this study is to investigate the influence of organizational justice on organizational citizenship behavior among staff nurses.

**Aim of the study:**

The study aimed to:

Investigate the influence of organizational justice on organizational citizenship behavior among staff nurses through:

**Research questions:**

RQ1: what is the level of organizational justice perceived by staff nurses?

RQ2: what is the level of organizational citizenship behavior among staff nurses?

RQ3: Is there correlation between organizational justice and organizational citizenship behavior among staff nurses?

**Methods**

**Study design:**

A descriptive correlational research design was used in to accomplish the aim of the present study.

**Study setting:**

The study was conducted at Dikirnis General Hospital that provide health services to seven centers in Dakahlia governorate is located in the North Eastern region of Delta, Egypt. It consists of four building. It provides inpatient care to approximately 912 patient and Outpatient care to approximately 3000 patient monthly. Dikirnis General Hospital occupied with 227 beds. It consists of four building; first building consists of three floors which contain Emergency Unit, X-ray Unit, Second building consists of four floors which contain Dialysis Unit, Sterilization Unit, Operation Rooms, Neonatal Intensive Care Unit, Obstetric Unit, Orthopedic Department and Surgical Unit. Third building consists of three floors which contains Administrative Offices, pharmacy, Cardiac Care Unit, Pediatric Department, Pediatric Care Unit, Medical department, Medical Care Unit and Outpatient Clinics distributed in three floors

**Sample:**

The subjects of the present study included all available staff nurses who have experience at least one year and willing to participate in the study at time of data collection in the previously mentioned study setting. Their total numbers were (252) staff nurses.

**Tools of data collection:**

Two tools for data collection were used to collect data for this study namely: Organizational Justice Questionnaire & Organizational Citizenship Behavior Questionnaire.

**Tool(1): Organizational Justice Questionnaire.**

This tool developed by (Niehoff and Moorman, 1993) aimed to assess organizational justice as perceived by study subjects.

**Tool consists of two parts:**

**Part I:** This part aimed to collect socio-demographic characteristics of study subjects includes: age, gender, marital status, qualifications in nursing, years of experience.

**Part II:** It includes 19 items categorized into three subscales: Distributive (5 items), procedural (5 items) and interactional (9 items).

**Scoring system:**

Each statement response will be considered based on five-point Liker scale from 1 (Strongly Disagree), 2 (Disagree), 3 (Neutral), 4 (Agree), 5 (Strongly Agree). The total score was categorized as either low (<50% of the total score), moderate (50%-75% of the total score) and high (>75% of the total score).

**Second tool: Organizational Citizenship Behavior Questionnaire**

This tool was developed by Organ (1990) and modified by Abo Tayh (2012). It aims to assess organizational citizenship behavior among staff nurses. It comprises of 20 items categorized into Altruism (5 items), courtesy
(4 items), sportsmanship (3 items), civic (5 items) and conscientiousness (3 items).

**Scoring system:**

Each statement response will be considered based on a five-point Likert scale from 1 (Strongly Disagree), 2 (Disagree), 3 (Neutral), 4 (Agree), 5 (Strongly Agree). The total score was categorized as either low (<50% of the total score), moderate (50%-75% of the total score) and high (>75% of the total score).

**Validity and reliability:**

Data collection tools translated by researcher into Arabic and tested for its content validity and relevance via a panel of five experts from nursing administration department from Faculty of Nursing Mansoura University who reviewed the tools for clarity, relevancy, applicability, comprehensiveness, understanding and ease for implementation and according to their opinions simple modifications were applied. The reliability of the organizational justice Questionnaire was assessed in the current study showing high reliability with the value of cronbach's alpha .92. Additionally Organizational Citizenship Behavior Questionnaire measured by cronbach's alpha was good (.91) indicating high reliability.

**Pilot study:**

A pilot study for data collection tools was carried out on 10% (28) staff nurses that randomly selected and were excluded from the total sample to evaluate the clarity and applicability of the tools to appraise the clarity, feasibility and applicability of the tools and necessary modifications were done based on their responses. It helped in identifying potential obstacles and problems that may be encountered during the period of data collection. It has also served to estimate the time needed to fill the study tools. It took about 15-20 minutes to fill in the study tools.

**Ethical consideration:**

The researcher obtained ethical approval from the research ethics committee of the faculty of Nursing, Mansoura University. A formal permission was obtained from administrator of Dikirnis General Hospital to carry out the study. Explanation of the aim and the nature of the study were performed by the researcher to all staff nurses included in the study. Participation in research was voluntary, each staff nurse was informed about their rights to refuse or participate or withdraw from the study at any time without giving reasons. The study maneuvers not entail any harmful effect on participants. Confidentiality of the collected data was maintained, results were used as component of the necessary research as well as for future publication and education.

**Data collection**

The researcher met the subjects to explain the study purpose and ask for their participation. The researcher met the respondents either individually or groups during morning and afternoon shifts to distribute the data collection sheets to the respondents in their work units and present during filling to clarify any ambiguity and answer any questions. Data was collected two days per week. The researcher checked each filling questionnaire and ensuring its completeness. Data collection phase was carried out in the period from the beginning of June to the end of August 2020, and the time required to complete the sheets ranged from 20-25 minutes.

**Data analysis phase**

The collected data were organized, tabulated and statistically analyzed using SPSS software (Statistical Package for the Social Sciences, version 22, SPSS Inc. Chicago, IL, USA). Categorical variables were represented as frequency and percentage. Continuous variables were represented as mean, and standard deviation. Independent t-test was used to test the difference between two mean of continuous variables. ANOVA test used to test the difference between more than two mean of continuous variables. Chi-square test was conducted to test the association between two categorical variables. Pearson correlation coefficient test was conducted to test the association between two continuous variables. Statistically significant was considered as (p-value ≤ 0.01 & 0.05).
Results

Table (1): studied nurses’ Socio demographic characteristics (n=252)

<table>
<thead>
<tr>
<th>Variables</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age years:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20-30</td>
<td>65</td>
<td>25.8</td>
</tr>
<tr>
<td>31-40</td>
<td>159</td>
<td>63.1</td>
</tr>
<tr>
<td>&gt;40</td>
<td>28</td>
<td>11.1</td>
</tr>
<tr>
<td><strong>Gender:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>5</td>
<td>2.0</td>
</tr>
<tr>
<td>Female</td>
<td>247</td>
<td>98.0</td>
</tr>
<tr>
<td><strong>Marital status:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>18</td>
<td>7.1</td>
</tr>
<tr>
<td>Married</td>
<td>216</td>
<td>85.7</td>
</tr>
<tr>
<td>Divorced</td>
<td>12</td>
<td>4.8</td>
</tr>
<tr>
<td>Widowed</td>
<td>6</td>
<td>2.4</td>
</tr>
<tr>
<td><strong>Level of education</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diploma degree</td>
<td>81</td>
<td>32.1</td>
</tr>
<tr>
<td>Technical degree</td>
<td>82</td>
<td>32.5</td>
</tr>
<tr>
<td>bachelor degree</td>
<td>89</td>
<td>35.3</td>
</tr>
<tr>
<td><strong>Experience years:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt;10</td>
<td>79</td>
<td>31.3</td>
</tr>
<tr>
<td>10-20</td>
<td>143</td>
<td>56.7</td>
</tr>
<tr>
<td>&gt;20</td>
<td>30</td>
<td>11.9</td>
</tr>
</tbody>
</table>

Table (2): Mean scores of nurses’ perception of organizational justice (n=252)

<table>
<thead>
<tr>
<th>Organizational justice</th>
<th>No of items</th>
<th>Min - Max</th>
<th>Mean ±SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Distributive justice</td>
<td>5</td>
<td>5.0-25.0</td>
<td>14.24±3.97</td>
</tr>
<tr>
<td>2. Procedural justice</td>
<td>5</td>
<td>6.0-25.0</td>
<td>15.94±4.32</td>
</tr>
<tr>
<td>3. Interactional justice</td>
<td>9</td>
<td>16.0-45.0</td>
<td>30.21±7.08</td>
</tr>
<tr>
<td><strong>Total organizational justice</strong></td>
<td>19</td>
<td>30.0-95.0</td>
<td>60.39±13.10</td>
</tr>
</tbody>
</table>

Table (3): Levels of organizational justice of the studied nurses (n=252)

<table>
<thead>
<tr>
<th>Organizational justice levels</th>
<th>Score</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low (&lt;50%)</td>
<td>19-47</td>
<td>51</td>
<td>20.2</td>
</tr>
<tr>
<td>Moderate (50%-75%)</td>
<td>48-71</td>
<td>148</td>
<td>58.7</td>
</tr>
<tr>
<td>High (&gt;75%)</td>
<td>75-95</td>
<td>53</td>
<td>21.0</td>
</tr>
</tbody>
</table>

Table (4): Mean scores of nurses’ organizational citizenship behavior (n=252)

<table>
<thead>
<tr>
<th>Organizational citizenship behavior</th>
<th>No of items</th>
<th>Min - Max</th>
<th>Mean ±SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Altruism</td>
<td>5</td>
<td>9.0-25.0</td>
<td>20.25±2.51</td>
</tr>
<tr>
<td>Courtesy</td>
<td>4</td>
<td>8.0-20.0</td>
<td>16.08±1.89</td>
</tr>
<tr>
<td>Sportsmanship</td>
<td>3</td>
<td>5.0-15.0</td>
<td>11.17±2.12</td>
</tr>
<tr>
<td>Civic virtue</td>
<td>5</td>
<td>11.0-25.0</td>
<td>18.94±2.79</td>
</tr>
<tr>
<td>Conscientiousness</td>
<td>3</td>
<td>3.0-15.0</td>
<td>9.84±2.92</td>
</tr>
<tr>
<td><strong>Total organizational citizenship behavior</strong></td>
<td>20</td>
<td>51.0-99.0</td>
<td>76.31±9.16</td>
</tr>
</tbody>
</table>
Table (5): Levels of nurses’ organizational citizenship behavior (n=252)

<table>
<thead>
<tr>
<th>Organizational citizenship behavior levels</th>
<th>Score</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low (&lt;50%)</td>
<td>20-49</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>Moderate (50%-75%)</td>
<td>50-75</td>
<td>104</td>
<td>41.3</td>
</tr>
<tr>
<td>High (&gt;75%)</td>
<td>76-100</td>
<td>148</td>
<td>58.7</td>
</tr>
</tbody>
</table>

Figure (1): Relationship between organizational justice, and organizational citizenship behavior as perceived by the studied nurses (n=252)

Table (1): shows that more than half (63.1%) of staff nurses had age ranged between (30-40), more than (98%) were females, majority of the studied nurses(85.7) were married, more than one third (35.3%) had bachelor degree and more than one half (56.7%) had years of experiences ranged between (10-20)years.

Table (2): Demonstrates that the interactional justice (30.21±7.08) was the highest mean score was and the distributive justice was the lowest (14.24±3.97).

Table (3): shows more than half (58.7%) of the nurses surveyed had moderate level toward total organizational justice.

Table (4): shows that the highest mean score was altruism (20.25±2.51) and the lowest mean score were conscientiousness (9.84±2.92) and sportsmanship (11.17±2.12).

Table (5): demonstrate that (58.7%) of the studied nurses perceived organizational citizenship behavior at high level, (41.3%) had moderate level of organizational citizenship behavior.

Figure (1): shows a highly statistically significant positive correlation between organizational justice, and organizational citizenship behavior as perceived by the studied nurses.
Discussion

Today health care organizations are in challenge to retain nurses’ generation & to maintain justice that is predictor of nurses’ behaviors in their work environment (Abou Hashish, 2017). To increase positive attitudes, inspiration, individual/ group contributions and encouraging loyalty Organizational justice (OJ) should be preserved in hospitals and among nurses. If nurses believe that they are treated equally, self-confidence, self-efficacy and citizenship behavior can be achieved resulting in enhanced patient results and organizational success (Mahmoud & Ibrahim, 2016).

Understanding how justice or injustice influences the attitudes and behaviors of nurses is crucial (Abou Hashish, 2019). Hence, the current study aimed to investigate the influence of OJ on organizational citizenship behavior (OCB) among staff nurses through assessing the OJ as perceived by staff nurses, identifying the OCB among staff nurses and investigating the influence of OJ on OCB.

Regarding to the first variable investigated in the present study was OJ. The present study finding revealed that, the studied staff nurses had moderate perception level toward total OJ. This finding may be due to work load, salaries, incentives, respect and dignity from management. Staff nurses may agree with salary and incentives and others disagree. Some of them may feel that the head nurses treat them with respect and dignity and others not.

This finding in agree with research conducted at Ain Shams University hospitals by Mohamed (2019) who mentioned that, total organizational justice had a moderate level of perception as perceived by more than half of the studied nurses. Also, Research conducted at Jordan by Quraan & Kasawneh, (2017) concluded that organizational justice and its domains (distributive justice, procedural justice, and interactional justice) had a moderate levels of significance from the participants’ point of view. Additionally, another study conducted at Japan by Ito et al.,(2015) revealed that, staff nurses had moderate organizational justice level.

In contrary with the present study finding a study conducted at Turkey by Demirkiran et al., (2016) stated that, respondents perception of general justice was high and this may be related to colleagues, remind them on time about organizational operations, and provide them with reliable information about such actions. Also, research conducted by Alqhiwi Laith (2015) to assess OJ and its impact on performance efficiency in Jordan mentioned that, the employee's conception of the OJ concept and its domains was high.

In conclusion the present study finding revealed that, the highest mean score of OJ dimensions was the mean score of interactional justice as perceived by nurses. This results may be attributed to the fact that the head nurses treated staff nurses in a fair and compassionate way that could have a positive impact on the interactional justice. The present study findings are supported the study conducted at Alexandria University hospitals by Khalifa & Awad (2018) found that, the studied nurses were treated equally in terms of interactional justice (collaboration between collages in the same department and with other department, integrity and respect in the relationships between nurses).

Moreover, The finding in agree with research conducted at Port Said University hospitals by Mahmoud & Ibrahim (2016), who stated that the highest mean percent score related to dimensions of OJ among the studies nurses in Egyptian hospital was interactional justice. In addition, a study conducted at Argentina by Vamonde etal, (2018) who demonstrated that, the interactional justice had the highest mean score among OJ dimensions as participants perception.

In contrary with present study findings Ozscheih & Yurur (2019), who conducted a study at Yalova University to assess the impact of OJ on organizational dissent found that, a non-significant effect of interactional justice on OJ and stated that activities are guided through formal decision making process, rules and procedures rather than managers ’initiatives. Also, a study conducted at Iran by Tourani etal, (2016) who investigated the relationship between OJ and turnover intention of hospital nurses mentioned that, the lowest mean score
interpretation of the participants was for the interactional justice.

On the other hand the present study results showed that distributive justice was the lowest mean score of OJ dimensions. This may be due to that the staff nurses may feel that the allocation of benefits, discrimination between the effort they make and the wages they earn was unequal. Study findings were supported by Mohamed (2019) who found that, more than half of the nurses surveyed had low level of perception toward distributive justice dimension.

This result is parallel to Khalifa & Awad (2018) who stated that, the lowest mean percent score was recorded by distributive justice. The feeling of injustice may be due to unfair incentives, inequity between the effort they expend and the wages they gained, their superior personal prejudice and lack of their participation in decision making process.

In contrast to this findings, research conducted by Abo taeah, (2012) who found that, about more than half of the participants surveyed had a high level of perception toward distributive justice. And the other study conducted by Tourani etal, (2016) who stated that, the highest mean score from participant's point of view was for the distributive justice.

Regarding to the second variable investigated in the present study was OCB. The findings of the present study showed that, more than half of the studied nurses had a high degree of OCB perception. This may be due to presence of supporting nurses' actions nurses, sense of commitment and belonging, spirit of teamwork with their colleagues and nurses who expect to keep their jobs because they work for long times. The finding in agree with research conducted Mohamed (2019) who mentioned that, more than half of the nurses surveyed had positive OCB.

On contrast with the study findings were the study of Khalifa & Awad (2018) who found that the nurses viewed the mean score percentage of OCB was moderate. This may be due to the presence of behavioral support among the nurses. Another study conducted by Quraan & Kasawneh, (2017)stated that, actions of OCB and its dimensions (altruism, courtesy, sportsmanship, civic virtue and conscientiousness) had achieved low levels of significance from the point of view of respondents. Moreover, Demirkiran et. al.,(2016) mentioned that, OCB perception of the participants was moderate. Result showed that through certain systematic and cultural changes OCB should be. Similarly, OCB would also be improved by techniques such as in-service training and growing leader support.

In conclusion the present study finding revealed that, mean score of nurses' perception of altruism was the highest mean score of OCB while the lowest mean score were with the Conscientiousness and sportsmanship. This may be due to that nurses like to cooperate with their colleagues to carry out the tasks but in other times, the workload is increased, so nurses can’t endure additional work, and keep away from meetings and making suggestions and avoid volunteering in problem solving.

This finding in agreement with Mohamed (2019) who conducted a study about influence of OJ on OCB among staff nurses. He found that the highest percentage was with the domain of the altruism the lowest score were with the sportsmanship and conscientiousness domain.

Regarding to the correlation between OJ and OCB. The present study revealed that the statistically positive correlation between OJ and OCB was significant, this may be due to feeling justice and respect from the management of the hospital tend to make nurses do their best to achieve their jobs and attain patient satisfaction. It means that if nurses in distributional, procedural and interactional structures find their organization equitable and fair, they are more likely to display behaviors of organizational citizenship. Nurses feel more comfortable and participate more deeply in OCB Under a high degree of OJ.

This was in agreement with, Bostan, & kilic, (2017) a study conducted at Turkey on the effect of OJ on OCB among health care workers stated that, OJ and OCB had a significant positive relationship. Accordingly, with Demirkiran et al.(2016) who conducted a study about relationship between of OJ on OCB in hospitals in Turkey showed that a
significant positive relationship has been reported between OJ and OCB.

Consisted with Mahmoud & Ibrahim (2016) who found that, all fields of OJ (distributive, procedural, interactional and informational) have been positively correlated with altruism, courtesy, sportsmanship, civic virtue and conscientiousness. The findings is agreed with Janatiet al (2017) who stated that, their OCB attitudes are strongly related to the perceptions of OJ among nurses. The more effort for the performance of the organization given, the nurse perceives justice.

The findings were disagreed with Mohamed (2019) who claimed that no meaningful relationship existed between OJ and OCB and related that to treat with human being and carrying out voluntary work for the benefit of the work and patients and for their engagement to the hospital without waiting outcome from administration.

Conclusion

From the present study, it was concluded that:

The nurses' perception of organizational justice was at moderate level. While, the nurses' perception of organizational citizenship behavior was at high level for more than half of the studied staff nurses. In addition, there was statically significant positive correlation between organizational justice and organizational citizenship behavior. Therefore the first line manager should be alert to the benefits behaving toward nurses in a manner perceived as fair. Direct manager should focus on how they deal with their staff nurses because nurses' perception of that treatment would affect the presence of organizational citizenship behavior.

Recommendations

Based on the results of this study, it was recommended that:

For organization:

- Establish a committee that discuss nursing staff problems.

For Nurse Managers:

- Motivate staff nurses according to their needs.
- Make nurses close to decision making and help them to share in decisions.
- Distribute task, work rewards and promotions in fair manner.
- Encourage working in groups.
- Encourage staff nurses to suggestions for work development.

For Nurses:

- Involve themselves in continuous learning programs to increase their knowledge and achieve quality of work and patient satisfaction.
- Avoid conflict with their colleagues and avoid creation of problems.
- Encourage nurses to have a sense of creativity and involve themselves in problem solving by providing a good ideas to solve.

Further research

Effect of organizational justice training program on organizational citizenship behavior

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