Influence of Organizational Justice on Organizational Citizenship Behavior among Nurses

Reham Mohamed Mohamed, Rabab. M. Hassan; Nema. F. Saad
Nursing Administration Department – Faculty of Nursing, Ain Shams University.

Abstract

Background: Justice and its implementation are one of the fundamental and innate needs of the human. Employees’ exhibit higher levels of performance, loyalty, act more than their job descriptions and have high level of organizational citizenship behavior when they believe they are treated fairly at workplace. Aims: This study aimed to investigate the relationship between organizational justice and organizational citizenship behavior among nurses. Setting: El Demerdash university Hospital. Design: a descriptive, correlational design was used. The study subject included 179 nurses. Data collection tools: Data were collected by using organizational justice questionnaire sheet, and organizational citizenship behavior scale. Results: More than half of the studied nurses had moderate perception level toward organizational justice, more than half of the studied nurses had positive organizational citizenship behavior. Conclusion: There is a highly statistically significant positive correlation between altruism and distributive justice. However; there was no statistically significant correlation between organizational justice and organizational citizenship behavior. Recommendations: Nursing Managers have to respectful to rights and duties of nurses in making decisions and conducted periodically meeting with their staff nurses to discuss and solve their work problems.

Key words: Nurses, Organizational Citizenship Behavior, Organizational Justice.

Introduction

Nurses are the largest group working in health care organizations and have a key role in the performance & success of health care organizations. Nursing is a job that has a close relationship with people and is responsible for human lives (Jafari and Biclarian, 2012). Nurses perform better and exert a high level of effort when they perceive that they are supported by organizations which care about their well-being and value their contributions, which encourages them to engage in organizational citizenship behavior. Organizational justice emerged as an important concept in the prediction of organizational citizenship behavior (Kwak, 2010).

All organizations are seeking for high performance, innovations, and flexibility to boost up the economy of the entire world. It can only be possible when organizations provide their employees with a satisfied workplace, fair treatment, remuneration and appraisal for their effective work. These factors help in developing the organizations and another such kind of workplaces (Hafiz, Umair, and Anam, 2012).

The employees of the organization are influenced by the perceptions of fair
treatment in many ways. Firstly, perceptions of fairness are illustrative the fact of organizational authorities. Secondly, a perception of fair treatment enhances employees’ predictability and controllability for future events, thereby reducing the uncertainties of day to day working life. Lastly, perceptions of fair treatments indicate devotion to moral and ethical standards of the organization on the part of higher authorities (Srivastava, 2015).

Organization success is judged through the ability of top management to achieve the requirements of organizational justice, its ability to induce workers to show the desired behaviors and to embody their organizational citizenship towards their organizations. Because any organization at present time face challenges associated with its external and internal environments, the organizations seek to make its employees in line with its culture and mission and their behaviors focused to achieve its objectives, since individuals who sense justice within their organizations reshape their own concepts so that their behavior is synchronized with their organization's vision and mission (Yassine, 2014).

The importance of studying organizational justice in the workplace has been underscored by findings that caused a sense of working for justice or lack of fairness in the workplace, which can lead to a decline in levels of organizational performance. Employees who perceive unfairness in the workplace may exhibit varying degrees of negative behavior. It can influence the employees’ commitment to the organization and their performance (Alslenty, 2010).

There are three dimensions of organizational justice which are distributive, procedural and interactional justice. Distributive justice is described as the fairness of distribution of resources (e.g., performance ratings, pay, promotions) or about results orientations (Alvi & Abbasi, 2012). Procedural justice refers to the perceived fairness and the transparency in the decision-making procedures followed in resource allocation or disputes resolution. Interactional justice reflects employees’ feelings of how they are treated by their supervisors (Khan & Habib, 2011).

Organizational citizenship behavior is one of the most influential factors that affect organizational effectiveness and success (Spector & Che, 2014). Organizational citizenship behavior (OCB) refer to behaviors that are intended to help co-workers, the supervisor or the organization and include acts such as assisting co-workers, trying to improve workplace morale, volunteering for work that is not part of the job description, produce suggestion to improve the functioning of the organization (Arbabisarjou et al., 2011).

Organizational citizenship behavior generally conceptualizes in terms of five subscales: altruism, conscientiousness, courtesy, sportsmanship and civic virtue. Altruism involves voluntarily helping others with work-related problems, such as helping a co-worker with a heavy workload. Conscientiousness means exceeding the required levels of attendance, punctuality or conserving resources by not taking extra breaks and obeying company rules when no one is watching (Ibrahim, Abd Ghani & Salleh, 2013).

Courtesies refer to gestures that help others prevent a problem, such as providing advance notifications of meetings or of one’s inability to attend them. Sportsmanship involves sacrificing one’s personal interest and maintaining a positive attitude, even when inconvenienced by others or when one’s ideas are rejected. Civic virtue involves the constructive participation in the political process of the organization, such as making suggestions
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In meetings (Ehtiyar, Aktaş & Ömüriş, 2010).

Perceptions about fairness can change their organizational citizenship behavior if they feel and perceive anything unfair happening in place of work, this is due to its safe side than altering the behavior of their job officially what they require (Iqbal, Aziz and Tasawar, 2012).

There is a positive effect of procedural justice on individual contributions to organizational development and taking care of the organizational jobs. The positive emotions of individuals toward procedural justice bring about higher performance and an increase in organizational citizenship behavior (Abu Elanain, 2010).

Significance of the study

Justice in organizations can include issues related to perceptions of fair pay and equal opportunities for promotion. The researcher noted that nurses complain about lack of consideration for their personal issues and concerns in the distribution of workload and that they do additional work and do not find a suitable compensation from their supervisors, and suffering from unfairness of managers decision-making towards them, which leads some of them to think about turn over the hospital and lack of commitment to their workplace.

The importance of the study through its attempt to fill the gap in the national researches about the concept of organizational justice and organizational citizenship behavior.

Aim of the study

This study aims to investigate the influence of organizational justice on organizational citizenship behavior among nurses through:

1. Assessing organizational justice as perceived by nurses.
2. Identifying organizational citizenship behavior among nurses.
3. Finding out the relationship between organizational justice and organizational citizenship behavior among nurses.

Research Hypothesis

There is an influence of organizational justice on organizational citizenship behavior among nurses.

Subject and Methods

Research design and setting:

A descriptive, correlational design was used in carrying out this study. This study was conducted at inpatient units in El-Demerdash Hospital which affiliated to Ain Shams University Hospitals. It provides care for surgical patients in different Specialties.

Subjects:

The total study subject were (179) nurses distributed into (29) nurse managers who working in above mentioned setting. 150 staff nurses out from 225 were eligible to participate in the study, who had an experiences not less than one year. Study subject selected by using simple random sample technique.

Tools of data collection:

Two tools were used to collect data for this study namely: organizational justice questionnaire sheet & organizational citizenship behavior scale.

First tool: Organizational Justice questionnaire sheet, it’s adopted from Abu Tayh (2012).

It is consisted of two parts:
Part I: This part aimed to collect data related to the demographic characteristics of study subjects such as, age, gender, years of experience, position, work unit and qualification.

Part II: This part aimed to assess organizational justice as perceived by study subjects. It was developed by Niehoff and Moorman (1993), and adopted from Abu Tayh (2012). It included 19 items divided three domains.

❖ Scoring system

Responses were measured on five-point Likert scale and polarized in (Strongly agree = 5, Agree = 4, Neutral = 3, Disagree =2, strongly disagree = 1). The scores of the statement of each component were summed-up, converted into percent score, and the total divided by the number of the items, giving a mean score for each component. The respondent perception of organizational justice was considered low if the total percent score was less than 60% and moderate if total score ranged between (60-75%) and high if the scores were 75% or more.

Second tool: Organizational citizenship behavior scale, it’s adopted from Abu Tayh (2012).

It aimed to assess organizational citizenship behavior among nurses, it developed by Organ (1990), and adopted from Abo Tayh (2012). It contains 20 items classified into five dimensions.

❖ Scoring system

Responses were measured on a (5) point Likert scale ranging from strongly agree (5) to strongly disagree (1). The scores of items were summed – up and the total score was divided by the number of the items, giving the mean score for each component. These scores were converted into percent score. Organizational citizenship behavior was considered negative if the total percent score was less than 60% and neutral if total score ranged between from (60-75%) and positive if the scores were 75% or more.

Operational Design:

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

Preparatory phase:

The researcher reviewed literature included textbooks, scientific journals and magazine to be acquainted with the study subject.

Tools reliability:

The reliability of the data collection tools was assessed using an internal consistency using Cronbach Alpha. Organizational justice questionnaire was 0.927, and citizenship behavior scale was (0.983).

A. Pilot study:

A pilot study included 10% was carried out on (3 nurse manager and 15 staff nurses) who represents 10% of total study subjects to test the feasibility, practicability of the tool and clarity of the language. It helped in identifying potential obstacles and problems that may be encountered during the period of data collection. The subjects of the pilot study were included in 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.

B. Fieldwork:

Data collection phase was carried out in the period from the beginning of August to the end of November 2016. The researcher was distributed 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, at morning and afternoon shifts. The researcher collects about 10 to 12 sheets every week. The researcher checked each filling questionnaire and ensuring its completeness.

**Ethical Considerations:**

The study proposal was approved by the ethical committee of the faculty of nursing, Ain Shams University, and approval was taken from the ethics committee of scientific research. In addition, agreement was obtained from each participant. They were informed about the study aim and 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.

**Statistical Design:**

The collected data were coded and entered into statistical package for the social science (SPSS version 20). Statistical presentation and analysis of the present study was done using the frequencies and percentages for non-numerical data, Means and standard deviation (SD) and range for parametric numerical dat. Chi square test was used to examine the relationship between two qualitative variables but when the expected count is less than 5 in more than 20% of the cells; Fisher’s Exact Test was used. Pearson’s correlation coefficient test (r) was used to conducted correlation matrix. Statistical significance was considered at p-value <0.05 and high statistical significance was considered at p-value <0.01.

**Result**

**Table (1):** Distribution of demographic characteristics among the studied nurses (n=179).

<table>
<thead>
<tr>
<th>Characteristics of the studied nurses</th>
<th>No.</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt;30 years</td>
<td>55</td>
<td>30.7%</td>
</tr>
<tr>
<td>30-40 years</td>
<td>77</td>
<td>43.0%</td>
</tr>
<tr>
<td>&gt;40 years</td>
<td>47</td>
<td>26.3%</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>39</td>
<td>21.8%</td>
</tr>
<tr>
<td>Female</td>
<td>140</td>
<td>78.2%</td>
</tr>
<tr>
<td><strong>Qualification in Nursing</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nursing Diploma</td>
<td>101</td>
<td>56.4%</td>
</tr>
<tr>
<td>high average diploma</td>
<td>53</td>
<td>29.6%</td>
</tr>
<tr>
<td>Bachelor of nursing</td>
<td>25</td>
<td>14.0%</td>
</tr>
<tr>
<td><strong>Years of Experience</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt;10 years</td>
<td>59</td>
<td>33.0%</td>
</tr>
<tr>
<td>10-20 years</td>
<td>66</td>
<td>36.9%</td>
</tr>
<tr>
<td>&gt;20 years</td>
<td>54</td>
<td>30.2%</td>
</tr>
<tr>
<td><strong>Position</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nursing manager</td>
<td>29</td>
<td>16.2%</td>
</tr>
<tr>
<td>Staff Nurses</td>
<td>150</td>
<td>83.8%</td>
</tr>
</tbody>
</table>

**Table (1):** shows that less than half (43.0%) of nurses had age ranged between 30–40 years, more than three quarters of the studied nurses (78.2%) were females, more than one third (36.9%) had years of experience ranged between 10-20 years, more than one half (56.4%) had nursing diploma. Majority of study subjects (83.8%) were staff nurses.
**Figure (1):** Total nurses’ perception towards Dimensions of Organizational Justice (n=179).

**Figure (1):** shows more than half (55.31%) of the studied nurses had moderate perception toward total organizational justice.

**Figure (2):** Total organizational citizenship behavior among studied nurses (n=179).

**Figure (2):** demonstrate that more than half of the studied nurses (54.7%) had positive organizational citizenship behavior. Minority of studied nurses (1.68%) had negative organizational citizenship behavior.

**Table (2):** Correlation between organizational justice dimensions and organizational citizenship behavior dimensions among studied nurses (n=179)

<table>
<thead>
<tr>
<th>Organizational justice dimensions</th>
<th>Organizational citizenship behavior dimensions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Altruism</td>
</tr>
<tr>
<td>Distributive justice</td>
<td>r</td>
</tr>
<tr>
<td>P-value</td>
<td>.009**</td>
</tr>
<tr>
<td>Procedural justice</td>
<td>r</td>
</tr>
<tr>
<td>P-value</td>
<td>.641</td>
</tr>
<tr>
<td>Interactional Justice</td>
<td>r</td>
</tr>
<tr>
<td>P-value</td>
<td>.098</td>
</tr>
<tr>
<td>Organizational justice</td>
<td>r</td>
</tr>
<tr>
<td>P-value</td>
<td>.053</td>
</tr>
</tbody>
</table>

(***Highly statistically significant at P<0.01)
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Table (2): shows that there is only a highly statistically significant positive correlation between altruism and distributive justice.

Table (3): Correlation between Organizational justice and Organizational citizenship behavior.

<table>
<thead>
<tr>
<th>Correlation between organizational justice and organizational citizenship behavior</th>
<th>R</th>
<th>Sig. (2-tailed)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>.046</td>
<td>.538</td>
</tr>
</tbody>
</table>

Table (3): shows that there is no statistically significant correlation between organizational justice and organizational citizenship behavior among studied nurses.

Discussion

Justice is an important and venerable subject in human civilization. Organizational justice refers to the extent to which nurses perceive workplace procedures, interactions and outcomes to be fair in nature. The promotion and maintenance of justice behaviors in hospitals and among nurses is really necessary for increasing positive attitudes, inspiring loyalty, motivation and individual/group efforts accordingly. If nurses perceive that they are treated with fairness, this translates into improved self-confidence, self-efficacy and citizenship behavior, reflected in improved patient outcomes and organizational performance (Mahmoud & Ibrahim, 2016).

Regarding studied nurses perception toward distributive justice dimension, the finding of the present study showed that half of the studied nurses had low perception level toward distributive justice dimension. This may be due to that the salary and incentives are not corresponding with the workload and effort; nurses perceived that they have not taken appropriate rewards. This finding is in disagreement with Abu Taih (2012) who found that more than half of the studied participants have high perception toward distributive justice.

According to the present study finding concerning procedural justice, nearly half of the studied nurses had low perception toward the item “Nurses are allowed to reject or oppose the decisions issued by the Director”. This may be due to the director needs to be assertive, doesn’t have the ability to link decision-making and consideration of feelings staff affected by decisions.

In addition to that more than half of the studied nurses had low perception level toward total procedural justice. This may be attributed to nurses do not have voice empower in decision making; decisions are made at upper level and move downward as orders. This finding is in disagreement with Alfaraj (2014) who found that, moderate score in procedural justice dimension among study subjects which reflects the situation of perceived fairness of decision making outcomes and processes and the treatment received by employees from supervisors.

Regarding studied nurses’ perception toward interactional justice: The current study findings showed that two thirds of the studied nurses had high perception level toward the item “When my direct manager makes decisions concerning my job, he/she treats me with all respect and dignity”. This is may be attributed to the respectful relationship between managers and their subordinates and the friendship atmosphere in the hospital.

In addition to that more than two fifth of the studied nurses had moderate
perception level toward total interactional Justice, while the majority of the studied nurses had moderate perception level toward interactional justice (personal relationships) dimension. This result may be attributed to perceive of nurses to present communication and interaction with their managers in a friendly manner in the case of taking decision concerning their job. This finding is approximate with Althaynne et al. (2014) who found that interactional justice was the most perceived organizational justice dimension.

Regarding Organizational justice, the findings of the present study also revealed that among total studied nurses, more than half of the studied nurses had moderate perception level toward total organizational justice. This may be due to the different perception of the studied nurses about organizational justice in salary, decisions, and personal relationships from their managers. This finding is in agreement with Yassine (2014) who argued that the perception level of the individuals of the sample was moderate for the level of the organizational justice in all its dimensions.

The organizational citizenship behavior is defined as “the voluntary individual action which is not defined clearly in the formal reward and punishment system of the organization but supporting the effectiveness and efficiency of the organization as a whole”. These behaviors are mostly not obligatory by job descriptions, do not need to be punished in case of violation and not rewarded directly and formally and are mostly based on choices of the individuals increasing the efficiency and effectiveness of an organization as a whole (Ince, 2011).

The current study finding revealed that majority of studied nurses had positive behavior towards the item “I help new nurses and bring my experiences to them”, “I help and guides patients to receive the excellent service” respectively. This was related to the old nurses having responsibility toward their patients and their newly nurses, and responsible about the induction of newly staff in the system.

In addition to that, the majority of the studied nurses had positive behavior toward Altruism dimension. This may be due to cumulative years of working in this hospital and they have autonomy in their job and work closely together with colleagues. Cooperative behavior of new nurses is important, because they feel they are the base of the hospital. This finding is in agreement with Arbabisarjou et al. (2011) who found that there is a high average among the study subject in his study.

Regarding studied nurses behavior toward courtesy, more than half of the studied nurses had positive behavior toward total courtesy dimension. This may be because studied nurses keep their job, maintain stability in their work environment, and they will be able to help their colleagues in preventing problems from occurring. This finding is different with that found by Tsai, Wang Wu (2010) who argued the weakest two items focused on putting up with extra work and seeing hospital-wide problems as being the responsibility of individual employees.

According to studied nurses behavior toward Sportsmanship, the present study finding revealed that more than two fifth of the studied nurses had neutral behavior towards the item “Carry out additional tasks delegated to me without grumbling”. This may be due to that nurses have overload work which sometimes makes them accept additional work and sometimes refuse. And majority had positive behavior toward the item “I utilize my time to do work”. The cause of this result is that the nurse has works needed to be achieved and the care of patient shouldn’t be delayed.

According to studied nurses behavior toward sportsmanship behavior,
the study showed that more than third of the studied nurses had neutral behavior toward total sportsmanship dimension. This may be due to that the studied nurses consider the hospital is their special place like their home and have their interest in it. These findings are similar to those found in the study conducted by Altuntas, Baykal (2010) who studied relationship between nurses’ organizational trust levels and their organizational citizenship behaviors, and stated the fact that nurses got moderate scores from the “sportsmanship” sub-scales.

Regarding studied nurses behavior toward civic virtue (civilized behavior), the results of this study showed that majority of studied nurses had positive behavior towards the item “I maintain reputation of the hospital where I work.” Because the nurses consider the hospital reputation sign to their reputation, and they are part of this hospital.

Regarding studied nurses behavior toward Civic virtue, the results of this study showed that more than half of the studied nurses had high perception level toward the total Civic virtue dimension. This may be related to that nurses feel commitment by engaging in behaviors that support organizational goals; they share meetings and work-related committees, and respect policies and follow instruction. This finding is in similarity with that found by Dargahi et al. (2012) who found that the majority of Iranian nurses conscientiously followed regulations and procedures, met their tasks earlier than was required.

With Regard to studied nurses behavior toward Conscientiousness (Awareness of conscience), results of the present study showed that more than two fifth of the studied nurses had neutral behavior towards the item “I usually provide suggestions for work development and improvement”. This may be because the administration does not ask them to participate in providing suggestions in the majority of the time.

Regarding studied nurses behavior toward conscientiousness, the study showed that less than half of the studied nurses had negative behavior toward total conscientiousness dimension total of Conscientiousness (Awareness of conscience) dimension. This may be due to that the minority of studied nurses have high sense of responsibility toward their hospital, and they like the volunteer activities to improve their hospital to develop themselves. This finding is in disagreement with those found in the study conducted by Altuntas, Baykal (2014) who found that that studied subject had frequently participation and responsibility toward their organization.

Regarding studied nurses behavior toward total of means score regarding Organizational citizenship behavior among studied nurses, the current study showed that the highest percentage was with the domain of the altruism followed by courtesy, while the lowest score was with the sportsmanship and conscientiousness domain. 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. This finding is in agreement with Khaled (2012) who classified conscience as coming first, followed by friendliness, altruism, while sportsmanship and civilized conduct came last. All these dimensions were high.

Regarding studied nurses behavior toward total Organizational citizenship behavior, more than half had had positive organizational citizenship behavior. This is related to high belonging and loyalty of the studied nurses to work, spirit of cooperative with their colleagues, and nurses hope to maintain their jobs because they have been working for long times.
This finding is in agreement with Yaghuobi et al. (2016) who found that total score of organizational citizenship behavior had the high behavior.

The present study finding found that, there is no statistically significant relationship between total organizational justice perception among studied nurses’ regarding their demographic characteristic as their gender, qualification in nursing, and position. This is because the nurses are not different in perceiving organizational justice out of their gender or qualification or position.

The present results found that, there is a statistically significant relationship between organizational justice perception among studied nurses and their demographic characteristics: Age and years of experience in hospital. This is because they are satisfied with what the hospital offers them, the more their age and experience in the hospital, the more they perceived organizational justice from the administration toward them. This finding is in agreement with Mohamed (2014) who showed highly statistically significant differences between mean scores of the organizational justice and the demographic characteristics of healthcare workers.

Concerning the relationship between total organizational citizenship of studied nurses and their demographic characteristics, the present study indicated that there is no statistically significant relationship between Organizational citizenship behavior of the studied nurses and their demographic characteristics. This may be due to religious dimension and conscience towards patients and cooperation with colleagues regardless of the age or qualification or years of experience they have.

This finding is disagreement with Saadoldin et al. (2014), who found that there was a statistically significant direct relationship between organizational citizenship behavior and years of experience. Also this finding is consistent with Mahjoub et al. (2012) who assessed the behavior of organizational citizenship of female experience in Tehran University and demonstrated that there was significant direct relationship between OCB and educational level only.

According to the relation between organizational justice dimension and organizational citizenship behavior dimension among studied nurses, the present study showed that there was a highly statistically significant positive correlation only between altruism and distributive justice. This may be related to the organizational outcomes equally among nurses, the pressures and job duties are appropriate, the nurses feel with responsibility toward their patient and helping colleagues on a task.

This finding is in agreement with Azizollah et al. (2014) who stated that the dimensions of organizational citizenship behavior (altruism, civic virtue, conscientiousness, sportsmanship, loyalty, obedience, and self-development) and distributional justice are correlated.

Concerning correlation between organizational justice and organizational citizenship behavior among studied nurses, the present study showed that there was no statistically significant correlation between organizational justice and organizational citizenship behavior, this may be due to treat with human being and carry out voluntary work for the benefit of work and patients, and for their engagement to the hospital without waiting outcome from administration. This finding is in agreement with Dikmetas (2014) who found that there didn't determine any relationships between altruism and courtesy behaviors and the procedural perceptions.

This finding is disagreement with Mahmoud & Ibrahim (2016) who showed
that there are positive significant correlations between all domains of Organizational justice (distributive, procedural, interactional and informational) and altruism, courtesy, sportsmanship, civic virtue and conscientiousness (dimensions of Organizational citizenship behaviors). While this finding is in similarity with Rezaiean (2010) who showed the organizational justice has no significant direct effects on OCB.

Conclusion

In the light of the current study findings, it is concluded that, there was a highly statistically significant positive correlation between distributive justice and altruism. There was no statistically significant correlation between organizational justice and organizational citizenship behavior, which rejected the research hypothesis that there was influence of organizational justice on organizational citizenship behavior among nurses.

Recommendations

Based on the study finding, the following recommendations are proposed:

- Nurse Managers have to make fair and equitable decisions among their staff to ensure equal distribution of workload among nurses.

- Conduct periodically meeting with supervisors and their staff nurses to discuss and solve their work problems and share nurses in creating solutions of these problems.

- Nurse Managers have to consider the staff interests and their concerns.

- Nurse Managers encourage their staff nurses to provide suggestions for work development and improvement.

Further researches are need to:

- Study the relationship between organizational justice and job satisfaction, productivity.

- Study the influence of citizenship behavior on intent to quit, and absenteeism.

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