The Effect of Organizational Justice Perceptions of Employees on Their Burnout Levels: A Research For the Nurses

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Purpose – The present study aims to demonstrate the effect of organizational justice perceptions of nurses on their burnout levels.

Design / Methodology/ Approach – For this purpose, face-to-face interviews were carried out with 200 nurses working at public hospitals in Tokat province. The data were evaluated through structural equation modelling.

Results – As a result of the study, it was found out that there was a negative significant relationship between organizational justice and burnout. It was also demonstrated that the level of procedural justice perception from the subdimensions of organizational justice were the highest whereas emotional exhaustion from the subdimensions of burnout was the most commonly observed among the participants.

Discussion – As a result of the study, a negative significant relationship has been found out between the organizational justice perceptions and the burnout levels of nurses. This result is in parallel to the literature in general terms.

Introduction

Organizations gradually have more difficult times with the increase of the importance of competition in today’s world. The success of organizations aspiring to draw ahead in competition depends considerably on the human factor. In other words, the high performance of employees in organizations is one of the most important factors that lead organizations to success. Thus, it is necessary that organizations carry out performance evaluations regularly. Thus, they can be aware of the factors that might affect employees’ performance and maximize it by providing necessary improvements.

One of the most significant organizational factors that affect the employees’ performance in an organization is their perceptions of justice. Having a perception about whether organizational operations are fair or unfair, employees adjust their attitude and behaviour in line with this perception.

Some problems are observed among employees who are supposed to cope with stress and work under high performance pressure in organizations. One of the most common of these problems is burnout. Burnout can be described as the termination of one’s energy in mental and physical terms. The factors affecting burnout can be divided into two: organizational and personal factors. Organizational justice and burnout are one of these organizational factors. In the literature, it is seen that the concept of burnout is not sufficiently investigated especially for the occupational group of nursing, compared to other organizational factors. Thus, the present study aims to contribute to the literature by investigating the relationship between these two factors.

Healthcare services carried out by nurses are of considerable importance in the provision of health services (Top et al., 2010: 21). For this reason, it is crucial to improve the working conditions and welfare of nurses.
and other personnel who might have a direct effect on their being a more attentive towards patients (Karsavuran, 2014: 141). Thus, there is a significant relationship between the job satisfaction of nurses and the services quality perceived by patients (Atkins et al., 1996: 20). The irregularity of the working hours of nurses, the occupational risks, intensive stress, pressure etc. can be count among the difficulties of the profession (Karakuş, 2011: 55). Taking these factors into account, it becomes essential to handle the concept of burnout for profession of nursing (Çatak and Bahçeçik, 2015; Baykan et al., 2014).

In the light of the aforementioned explanations, it is aimed to answer the question “Is there a relationship between the organizational justice perceptions and burnout levels of nurses?” In this regard, the concepts of burnout and the perception of organizational justice will be handled in the first place. Afterwards, the data and the results obtained in the study will be discussed and recommendations will be made. The findings and results obtained in the study are expected to contribute to healthcare and nursing management.

1. Theoretical Framework

In this part of the study, the concepts of burnout and organizational justice will be handled in the first place.

1.1. Burnout

The concept of burnout was first used in the literature by Herbert J. Freudenberger in 1974. Freudenberger defines burnout as the state of failure, wearout, decrease of one’s energy and power or the state of exhaustion of the internal resources of an individual resulting from unsatisfied needs (Ardiç and Polatç, 2008: 70). However, the definition that is most commonly used in the literature is the one made by Maslach and Jackson in 1981. Maslach and Jackson define burnout as a syndrome of emotional exhaustion, depersonalization, and reduced personal accomplishment that can occur among individuals who work with people in some capacity (Maslach and Jackson, 1981: 99). Maslach handles burnout in three subdimensions: exhaustion, depersonalization, and reduced personal accomplishment (Maslach et al., 2001: 402-403). The Maslach Burnout Inventory developed by Maslach is used as a basis in the academic studies carried out in this field (Helvacı and Turhan, 2013: 59).

Maslach created a model by conceptualizing burnout as a process (Cordes and Doughtery, 1993). According to this model, burnout is observed first in the form of emotional exhaustion among the employees of an organization. Emotional exhaustion describes a feeling of being emotionally overextended due to depleting one’s resources and energy in his /her job. It is associated with work stress and is considered as the most important indicator of burnout (Çalışkan, 2014: 369). The continuance of emotional exhaustion leads to depersonalization of employees. Depersonalization refers to showing a negative attitude towards other people. The individuals suffering from depersonalization treat the people they serve as an object rather than a human-being (Barutçu and Serinkan, 2008: 546). Using humiliating words while speaking with people whom he/she provides a service; never-ending chats with colleagues, the extension of break-times, the unnecessary use of professional jargon can be count among the symptoms of depersonalization. According to the model, employees end up with a feeling of reduced personal accomplishment which refers to a negative self-evaluation (Derin and Demirel, 2012: 512).

The studies carried out on burnout which is very significant especially for employees who are in direct interaction and communication with people focus naturally on the professions of nurses, doctors, teachers and lawyers who are supposed to build an intensive relationship with people. It has been confirmed in studies that healthcare workers suffer considerably from burnout due to the environment they work in healthcare organizations (Çimen, 2002; Derin and Demirel, 2012; Barutçu and Serinkan, 2008; Çalışkan, 2014; Güllüoğlu Işık, 2015; Helvacı and Turhan, 2013; Kaylu and Pnar, 2009; Kaya et al., 2007; Kulakçı et al., 2015; Metin and Özzer, 2007; Sarsılmaz et al., 2015; Şahin et al., 2008; Yakut et al., 2013; Yavuzylmaz et al., 2007; Tunçel et al., 2014).

In the literature, burnout is handled based on two main factors: organizational and personal factors. Personal factors include gender, marital status, income, length of service, education level, having or not having children, etc. (Garner et al. 2007; Metin and Özer, 2007; Yavuzylmaz et al., 2007; Ardiç and Polatç, 2008; Kavl and Pnar, 2009; Yakut et al., 2013; Tunçel et al. 2014; Kulakçı et al., 2015). Maslach and Leiter (1997) categorize the organizational factors associated with burnout as follows: workload, control, premium, sense of belonging, justice and values. It has been observed that organizational factors have been more effective.
than personal factors in causing burnout (Polatçı and Özyer, 2015: 32). In the present study, the effect of organizational justice - one of the organizational factors - on burnout is investigated.

1.2. Organizational Justice

The concept of organizational justice became known with Adams’ Equity Theory in 1996 and is mainly associated with the equity/justice perceived by employees in an organization (Yeniçeri et al., 2009: 84). In other words, the concept refers to the employees’ perception of justice (Uluköy, 2014: 213).

Representing the perception of individuals about being treated fairly in the workplace and the effect of this perception on their behaviour, the concept of organizational justice is handled in 3 subdimensions (Colquitt et al., 2001: 426-427);

- Distributive Justice,
- Procedural Justice
- Interactional Justice

Distributive justice refers to the fair distribution of resources given out by the organization, among the employees. Employees have an idea about whether the management treats them fairly or unfairly by comparing the gains such as their income, premium and social rights with those of other employees. The idea they have affects the attitude and behaviour of employees either positively or negatively (Özdevecioğlu, 2003: 78).

Procedural justice is about organizational processes (Özyer and Azizoğlu, 2014: 98). Employees’ perceptions of justice are not only limited to their gains or those of their colleagues because they question how these gains are determined. They try to learn which methods are used and as a result, have a perception about the final distribution (Karaeminoğluları, 2006: 16).

Interactional justice refers to whether managers explain the decisions they take about the distribution, honestly and respectfully (İçerli, 2010: 86). In other words, interactional justice is a type of justice that employees develop in line with the attitude shown by their seniors (Bies, 2001: 91).

There are several studies on the organizational justice perceptions of healthcare workers. These studies demonstrate the importance of the organizational justice perception in terms of healthcare workers (Erkuş et al., 2011; İyigün, 2012; Çalışkan, 2014; Bağcı, 2016; Cihangiroğlu et al., 2016; Arı et al., 2017; Karaca and Özmen, 2018). It has been found out that especially the studies handling the case of nurses are very limited. Thus, the present study will make a contribution to the literature by helping to understand the organizational justice perceptions of nurses.

1.3. Organizational Justice vs. Burnout

In the literature, there are many studies handling the relationship between organizational justice and burnout (Yeniçeri et al., 2009; Kılıç and Seymen, 2011; Şen, 2011; Uluköy, 2014; Pelit and Bozdoğan, 2014; Çalışkan, 2014; Güllüoğlu Işık, 2015, Şimşek et al., 2015; Balaban and Konyali, 2016).

The findings of these studies generally pointed to a negative relationship between the organizational justice perceptions of employees and their burnout levels. The policies and practices that are parallel to organizational justice expectations help employees relax psychologically and prevent their suffering from burnout (Balaban and Konyali, 2016: 194). Some of these studies were also carried out in healthcare sector (Kılıç and Seymen, 2011; Çalışkan, 2015; Güllüoğlu Işık, 2015).

Kılıç and Seymen (2011) concluded in the study aiming to find out the relationship between income injustice and burnout, that employees suffering from income injustice had higher levels of burnout. Çalışkan (2014) found a negative significant relationship between organizational justice and burnout. As for the study investigating the relationship between the emotional exhaustion and organizational justice perceptions of nurses working at a private hospital (Güllüoğlu Işık, 2015), it concluded that there was a negative relationship between distributive justice (one of the subdimensions of organizational justice) and emotional exhaustion.
2. Method

2.1. The Purpose and Hypothesis of the Study

The present study aims to find out the relationship between the organizational justice perceptions and burnout levels of nurses. For this purpose, the below model was created:

![Study Model](image)

Figure 1. Study Model

There are a number of studies pointing to a significant and strong relationship between the justice perceptions and burnout levels of employees. In this regard, it is expected that the burnout levels of nurses decline as their organizational justice perceptions increase. In order to test this expectation, the below hypothesis has been developed:

H1: The organizational justice perceptions of nurses affect their burnout levels negatively.

2.2. The Sample of the Study

The study group consists of nurses working at public hospitals in the province of Tokat. The survey form developed for data collection was administered to 200 randomly-selected nurses who volunteered to take part in the study. Ten of these survey forms were excluded from the evaluation for being incomplete or not being filled properly. As a result, the analyses were carried out with the data obtained from 190 nurses.

In Table 1, the distribution of the sample according to demographic characteristics is summarized. According to the table, 76.8% (146) of the sample are female; 28.4% (54) are aged 18-25; 65.8% (125) are married and 44.2% (84) have bachelor education.

<table>
<thead>
<tr>
<th>Demographic Characteristics</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>146</td>
<td>76.8</td>
</tr>
<tr>
<td>Male</td>
<td>44</td>
<td>23.2</td>
</tr>
<tr>
<td>Age Group</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18-25</td>
<td>54</td>
<td>28.4</td>
</tr>
<tr>
<td>26-30</td>
<td>32</td>
<td>16.8</td>
</tr>
<tr>
<td>31-35</td>
<td>26</td>
<td>13.7</td>
</tr>
<tr>
<td>35 and older</td>
<td>78</td>
<td>41.1</td>
</tr>
<tr>
<td>Marital Status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>125</td>
<td>65.8</td>
</tr>
<tr>
<td>Single</td>
<td>65</td>
<td>34.2</td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>High-School</td>
<td>54</td>
<td>28.4</td>
</tr>
<tr>
<td>Associate Degree</td>
<td>47</td>
<td>24.7</td>
</tr>
<tr>
<td>Bachelor's Degree</td>
<td>84</td>
<td>44.2</td>
</tr>
<tr>
<td>Postgraduate Degree</td>
<td>5</td>
<td>2.6</td>
</tr>
</tbody>
</table>

In Table 2, the distribution of the sample according to the mode and conditions of work is summarized. According to the table, 33.2% of the participants (63) have 0-5 years of experience; 76.8% (146) are department nurses; 31.1% work in internal clinics and 29.5% (56) always work in the night shift.
Table 2. Distribution of the Sample According to Mode and Conditions of Work

<table>
<thead>
<tr>
<th>Mode and Conditions of the Work</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Experience</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0-5</td>
<td>63</td>
<td>33.2</td>
</tr>
<tr>
<td>6-10</td>
<td>48</td>
<td>25.3</td>
</tr>
<tr>
<td>11-15</td>
<td>26</td>
<td>13.7</td>
</tr>
<tr>
<td>16 and more</td>
<td>53</td>
<td>27.9</td>
</tr>
<tr>
<td>Clinical Duty</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Department Nurse</td>
<td>146</td>
<td>76.8</td>
</tr>
<tr>
<td>Head Nurse</td>
<td>20</td>
<td>10.5</td>
</tr>
<tr>
<td>Other</td>
<td>24</td>
<td>12.6</td>
</tr>
<tr>
<td>Unit of Service</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Internal Clinic</td>
<td>59</td>
<td>31.1</td>
</tr>
<tr>
<td>Surgery Clinic</td>
<td>32</td>
<td>16.8</td>
</tr>
<tr>
<td>Emergency</td>
<td>18</td>
<td>9.5</td>
</tr>
<tr>
<td>Intensive Care Unit</td>
<td>44</td>
<td>23.2</td>
</tr>
<tr>
<td>Surgery Room</td>
<td>6</td>
<td>3.2</td>
</tr>
<tr>
<td>Other</td>
<td>31</td>
<td>16.3</td>
</tr>
<tr>
<td>Length of Service in the Unit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0-5</td>
<td>104</td>
<td>54.7</td>
</tr>
<tr>
<td>6-10</td>
<td>61</td>
<td>32.1</td>
</tr>
<tr>
<td>11-15</td>
<td>15</td>
<td>7.9</td>
</tr>
<tr>
<td>16-Above</td>
<td>10</td>
<td>5.3</td>
</tr>
<tr>
<td>Mode of Work</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Day-shift</td>
<td>56</td>
<td>29.5</td>
</tr>
<tr>
<td>Night-shift</td>
<td>35</td>
<td>18.4</td>
</tr>
<tr>
<td>Job Rotation</td>
<td>19</td>
<td>10.0</td>
</tr>
<tr>
<td>Guard duty</td>
<td>80</td>
<td>42.1</td>
</tr>
</tbody>
</table>

2.3. Scales Used in Data Collection

The scale used for data collection in the present study consists of 3 sections. In the first section, there are demographic statements developed in order to find out the characteristics of the sample group.

In the second section, the organizational justice scale is given place. Consisting of 20 items and 3 sub-dimensions, this scale was developed by Niehoff and Moorman (1993) and adapted to Turkish by Atalay (2007).

In the third and the last section of the survey form, the Maslach Burnout Scale is employed. The Maslach Burnout Scale consists of 22 items and 3 sub-dimensions which are depersonalization, emotional exhaustion and reduced personal accomplishment. In this scale developed by Maslach (1982) and adapted to Turkish by Ergin (1992), the items in the reduced personal accomplishment scale are positive statements compared to the subdimensions of depersonalization and emotional exhaustion. Low scores given to these items point to a high level of burnout (Ardıç and Polatçı, 2008: 79). For this reason, the items in the subdimension of reduced personal accomplishment are reverse-coded items. The survey questions were prepared using the five-point Likert-type Scale. The participants were asked to code the right option for themselves in a numeric scale from 1 to 5 (1: Never; 2: A few times a year; 3: A few times a month; 4: A few times a week; 5: Everyday)

The reliability and validity tests of the scales were carried out as they were developed before the study. In order to test the validity of the scales for the sample of the study, a confirmatory factor analysis was carried out. The fit values of the standard model according to the confirmatory factor analysis are given on Table 3 (Meydan and Şeşen, 2011: 37).
Table 3. Fit Values of the Standard Model

<table>
<thead>
<tr>
<th>Measure of Fit</th>
<th>Good Fit Values</th>
<th>Acceptable Fit Values</th>
</tr>
</thead>
<tbody>
<tr>
<td>RMSEA</td>
<td>0.00&lt;RMSEA&lt;0.05</td>
<td>0.05&lt;RMSEA&lt;0.08</td>
</tr>
<tr>
<td>GFI</td>
<td>0.90&lt;GFI&lt;1.00</td>
<td>0.85&lt;GFI&lt;0.90</td>
</tr>
<tr>
<td>AGFI</td>
<td>0.90&lt;AGFI&lt;1.00</td>
<td>0.85&lt;AGFI&lt;0.90</td>
</tr>
<tr>
<td>IFI</td>
<td>0.95&lt;IFI&lt;1.00</td>
<td>0.90&lt;IFI&lt;0.95</td>
</tr>
<tr>
<td>NFI</td>
<td>0.95&lt;NFI&lt;1.00</td>
<td>0.90&lt;NFI&lt;0.95</td>
</tr>
<tr>
<td>CFI</td>
<td>0.97&lt;CFI&lt;1.00</td>
<td>0.95&lt;CFI&lt;0.97</td>
</tr>
<tr>
<td>RFI</td>
<td>0.90&lt;RFI&lt;1.00</td>
<td>0.85&lt;RFI&lt;0.90</td>
</tr>
</tbody>
</table>

As a result of the analysis carried out using Amos, 2 items (Item 12 and Item 22) of the burnout scale were excluded from the survey form in line with the recommendation of the software. The results demonstrating the validity of the scale are summarized on Table 4.

Table 4. Fit Values of the Recommended Model and Standard Measures of Fit

<table>
<thead>
<tr>
<th>Scale</th>
<th>X2</th>
<th>Sd</th>
<th>X2/Sd</th>
<th>P</th>
<th>GFI</th>
<th>IFI</th>
<th>CFI</th>
<th>RMSEA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organizational Justice</td>
<td>217.261</td>
<td>143</td>
<td>1.519</td>
<td>0.0000</td>
<td>0.900</td>
<td>0.976</td>
<td>0.975</td>
<td>0.052</td>
</tr>
<tr>
<td>Burnout</td>
<td>204.650</td>
<td>140</td>
<td>1.462</td>
<td>0.0000</td>
<td>0.906</td>
<td>0.964</td>
<td>0.962</td>
<td>0.049</td>
</tr>
</tbody>
</table>

In order to test the reliability of the scales, Cronbach’s Alpha values were evaluated. These values are summarized below on Table 5:

Table 5. Cronbach’s Alpha Coefficient Values of the Scales

<table>
<thead>
<tr>
<th>Name of the Scale</th>
<th>Number of Item</th>
<th>Cronbach’s Alpha Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Organizational Justice</td>
<td>20</td>
<td>0.942</td>
</tr>
<tr>
<td></td>
<td>Total Perceived Organizational Justice</td>
<td>20</td>
</tr>
<tr>
<td></td>
<td>Distributive Justice</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>Procedural Justice</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Interactional Justice</td>
<td>9</td>
</tr>
<tr>
<td>Burnout Level</td>
<td>Total Burnout Level</td>
<td>20</td>
</tr>
<tr>
<td></td>
<td>Emotional exhaustion</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>Depersonalization</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>Reduced Personal Accomplishment</td>
<td>7</td>
</tr>
</tbody>
</table>

According to the results of the confirmatory factor analysis carried out to test the validity of the organizational justice and burnout scales, it is seen that the goodness of fit values of the scales are acceptable. It has been found out that the Cronbach’s Alpha Coefficients of all scales and subdimensions are higher than the threshold value of 0.6 which demonstrates that the scales are reliable, as well. In conclusion, both scales are verified, valid and reliable.

2.4. Findings
The fit indices obtained as a result of the structural equation modelling which was established to evaluate the relationship between the organizational justice perceptions and burnout levels of nurses are given on Table 6.

Table 6: Model

<table>
<thead>
<tr>
<th>Measure of fit</th>
<th>Value</th>
<th>Goodness of Fit</th>
</tr>
</thead>
<tbody>
<tr>
<td>X2 /sd</td>
<td>2.548</td>
<td>Acceptable Fit</td>
</tr>
<tr>
<td>RMSEA</td>
<td>0.061</td>
<td>Acceptable Fit</td>
</tr>
<tr>
<td>IFI</td>
<td>0.973</td>
<td>Good Fit</td>
</tr>
<tr>
<td>NFI</td>
<td>0.957</td>
<td>Good Fit</td>
</tr>
<tr>
<td>CFI</td>
<td>0.973</td>
<td>Good Fit</td>
</tr>
<tr>
<td>RFI</td>
<td>0.919</td>
<td>Good Fit</td>
</tr>
</tbody>
</table>
Table 6 shows that the model can be used. The test results concerning the established model are summarized in Figure 2:

Figure 2. Test Results of Structural Equation Model

According to the findings, there is a negative significant relationship between the organizational justice perceptions and the burnout levels of nurses. A positive increase in their organizational justice perceptions will bring along a decline of 0.36 points in their burnout levels.

On the other hand, it has been found out that the organizational justice perceptions of nurses are more effective on emotional exhaustion compared to other subdimensions of burnout. This finding demonstrates that nurses suffer mostly from emotional exhaustion. In other words, the findings of the study indicate that nurses generally do not experience depersonalization or reduced personal accomplishment but in fact, suffer from emotional exhaustion.

Besides, it has been demonstrated that the procedural justice from the subdimensions of organizational justice perception is more influencing compared to the other subdimensions.

2.5. Conclusion and Recommendations

Being of great importance for the society, hospitals are healthcare organizations that offer a labour-intensive service. Thus, their meeting the needs of the society depends considerably on the performance of healthcare workers. For this reason, hospital managements should provide an environment where the personnel can develop a positive attitude towards their job.

In the present study, the relationship between the organizational justice perceptions and burnout levels of nurses has been investigated. For this purpose, face-to-face interviews have been carried out with 190 nurses working in Tokat province.

As a result of the study, a negative significant relationship has been found out between the organizational justice perceptions and the burnout levels of nurses, in the first place. This result is in parallel to the literature in general terms. Many studies in the literature suggest that there is a negative relationship between organizational justice perceptions and burnout levels (Kılıç and Seğmen, 2011; Uluköy, 2014; Çalışkan, 2014; Güllüoğlu Işık, 2015). In conclusion, it can be said that practices aiming to increase the justice perceptions of nurses at hospitals will reduce their burnout levels.

Furthermore, it has been found out that the emotional exhaustion levels of nurses are much higher compared to the subdimensions of depersonalization and reduced personal accomplishment. This result is in parallel to the literature (Barutçu and Serinkan, 2008; Çalışkan, 2014). Based on this finding, healthcare managers are recommended to take measures in order to reduce the burnout perceptions of nurses. Otherwise, it is expected that the emotional exhaustion experienced by nurses will lead to depersonalization and then, reduced personal accomplishment. As a result, the increase of the burnout levels of nurses might result in negative effects on hospital performance.

Within the scope of the study, it has also been concluded that the levels of procedural justice perceptions of nurses are much lower compared to the other subdimensions which is in parallel to the literature. For example; Şahin and Taşkaya (2011) found out that the procedural and distributive justice perceptions of nurses were lower. However, Söyük (2007) found out that the distributive justice perceptions of nurses were lower compared to the levels of other subdimensions. The difference of these results might be explained...
with the sample of the study because Şahin and Taşkaya (2010) carried out their study at a public hospital whereas Söyük (2007) carried out his study at a private hospital. Due to the standard salary procedure applied in the public sector, the distributive justice perceptions of nurses working at public hospitals is not expected to be lower compared to the other subdimensions. As for procedural justice, it is about the decision-making process of employees concerning the obtained gains. So, the lack of a performance-based salary system in the case of nurses might have led to low procedural justice perceptions.

Based on the results of the present study, a study handling the case of nurses working in public and private sector where a performance evaluation system is carried out might contribute to the literature. Thus, it can be understood whether low procedural justice perception results in fact from the performance evaluation system.

REFERENCES


