

## THE EFFECT OF PSYCHOLOGICAL SAFETY ON HEALTHCARE WORKERS' PERCEPTIONS OF ORGANISATIONAL JUSTICE

### SAĞLIK ÇALIŞANLARINDA PSİKOLOJİK GÜVENLİĞİN ÖRGÜTSEL ADALET ALGISINA ETKİSİ

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#### Abstract

This study aims to determine the effect of health professionals' psychological safety on their perceptions of organisational justice. The study includes a sample of 271 healthcare professionals who participated voluntarily. Data were collected online. Psychological safety and organisational justice scales were used as data collection instruments. T-test and ANOVA test were used to determine differences in employees' perceptions of psychological safety and organisational justice based on demographic variables. In addition, regression analysis was used to examine the effect of psychological safety on perceptions of organisational justice. Data analysis was carried out using the SPSS 25 package. The study revealed that psychological safety perceptions of healthcare workers were above average and did not vary according to marital status, gender or age. It was also found that employees' perceptions of organisational justice were slightly below average and did not vary according to the type of institution. The study also showed that there was a significant relationship between healthcare workers' perceptions of psychological trust and organisational justice with its sub-dimensions. Healthcare managers and human resource professionals should develop strategies to support employees' psychological safety and improve their perceptions of justice.

**Keywords:** Healthcare Workers, Trust, Ethics, Justice.

**JEL Classification:** M12, J28, I10

#### Öz

Bu çalışma, sağlık çalışanlarının psikolojik güvenlik düzeylerinin örgütsel adalet algılarına olan etkisini belirlemeyi amaçlamaktadır. Çalışma, gönüllü olarak katılan 271 sağlık profesyonelinin oluşan bir örnekleme kapsamaktadır. Veriler online olarak toplanmıştır. Veri toplama aracı olarak, psikolojik güvenlik

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ve örgütsel adalet ölçekleri kullanılmıştır. Demografik değişkenlere dayalı olarak çalışanların psikolojik güvenlik ve örgütsel adalet algılarındaki farklılıkları belirlemek için t-testi ve ANOVA testi uygulanmıştır. Ayrıca, psikolojik güvenliğin örgütsel adalet algısı üzerindeki etkisini incelemek için regresyon analizi gerçekleştirilmiştir. Verilerin analizi, SPSS 25 paket programında gerçekleştirilmiştir. Çalışma, sağlık çalışanlarının psikolojik güvenlik algılarının ortalamasının üzerinde olduğunu ve medeni durum, cinsiyet veya yaşa bağlı olarak değişmediğini ortaya koymuştur. Ayrıca, çalışanların örgütsel adalet algıları ortalamasının biraz altında olup kurum türüne bağlı olarak değişmediği tespit edilmiştir. Çalışma aynı zamanda, sağlık çalışanlarının psikolojik güven algıları ile örgütsel adalet arasında, alt boyutlarıyla birlikte anlamlı bir ilişki olduğunu ortaya koymuştur. Sağlık yöneticileri ve insan kaynakları profesyonelleri, çalışanların psikolojik güvenliğini desteklemek ve adalet algılarını iyileştirmek için stratejiler geliştirmelidir.

**Anahtar Kelimeler:** Sağlık Çalışanları, Güven, Etik, Adalet.

**JEL Sınıflandırması:** M12, J28, I10

## 1. Introduction

Healthcare professionals play a crucial role in the quality of care provided to patients in healthcare institutions (Filiz, 2022). The outcomes of healthcare are significantly impacted by the personal characteristics, attitudes, and behaviours of healthcare professionals. Therefore, predicting their behaviours is crucial (Filiz, 2020). Employee evaluations of fair behaviour vary due to differences in personalities, world views, and work environments (Huseman et al., 1987).

In organisations, employees' perception of psychological safety is a crucial factor that affects their behaviour and performance (Morrison & Milliken, 2000). Psychological safety refers to the trust an individual feels towards their environment, which can enhance their sense of belonging and increase their willingness to take risks and be creative. This includes employees' ability to communicate openly, engage in innovative thinking, and take risks without fear of making mistakes (Edmondson, 1999). In the healthcare sector, the perception of psychological safety among healthcare workers can have a significant impact on critical elements such as patient safety and quality of care. It is important for managers in healthcare institutions to understand employees' perceptions of psychological safety and to develop strategies to improve these perceptions in order to increase organisational justice.

Since the perception of psychological security includes the individual's individual perception It is predicted that the concept may be closely related to the perception of organizational justice within the institution. As psychological security is linked to individual perception and organizational justice is linked to organizational perception, it was decided that determining the effect of individual perception of the employee on organizational perception would be more accurate. The study aimed to investigate the effect of psychological safety perceptions of healthcare workers on their levels of organisational justice, with psychological safety considered as an independent variable and organisational justice as a dependent variable. The study also aimed to reveal any differences according to various demographic characteristics. The study will investigate whether providing psychological safety in health services leads to positive outcomes by enhancing the organizational justice perceptions of healthcare workers.

## 2. Conceptual Framework

### 2.1. Psychological Safety

Kahn (1990) conducted detailed research on the concept of psychological safety and defined it as an individual's ability to work or express themselves without fear of negative consequences to their personal image, status, or career. Negative consequences may include criticism, exclusion, or sanctions (Li & Yan, 2009). According to Edmondson (2006), psychological safety refers to the perception of anticipating the consequences of taking risks in a business setting. When faced with a decision-making point, individuals may have concerns such as 'will I be criticised, humiliated or punished if I take this action?' Psychological safety encourages individuals to take the necessary action despite these concerns (Kahn, 1990).

Psychological safety is crucial in reducing administrative, medical, and financial errors and taking necessary actions by reporting errors made in healthcare institutions or factors with error potential to relevant authorities. However, health workers who believe they can report wrong practices without fear of retribution in areas where human relations are crucial, such as public relations in health services, can significantly contribute to improving patient satisfaction (Filiz, 2023).

The literature shows that good psychological safety among employees leads to many positive developments. For instance, it yields several benefits such as enhanced work commitment, role clarification (Brown & Leigh, 1996), improved employee cooperation, greater openness to change (Baer & Frese, 2003), heightened employee commitment (Kahn, 1990), freedom of self-expression, more proactive personal development (Carmeli et al., 2014), increased employee comfort in taking interpersonal risks, and more effective team learning behaviour (Edmondson, 1999).

### 2.2. Organisational Justice

It is a term that is related to religion, morality, equality and law (Colquitt et al. 2005). It refers to employees' perception of whether the principle of equality is respected in the distribution of organisational outputs, decision-making process and behaviours between employees and managers (Folger & Cropanzano, 1998). Organisational justice refers to employees' perceptions of the fairness of management's behaviours and attitudes towards them within the organisation (Schmiesing et al., 2003). The actions of an organisation can significantly impact the attitudes and behaviours of its employees. Employees' attitudes towards management's trustworthiness and impartiality are often influenced by their own perceptions of fairness, which can then impact their behaviour (Lee et al., 2013).

Organisational justice is typically described in three dimensions: distributive, procedural, and interactional (Allen & Meyer, 1990). Distributive justice refers to the perception of whether gains are distributed fairly throughout the organization, while procedural justice pertains to the perception that managers follow a controlled process when making decisions and make decisions fairly (Niehoff & Moorman, 1993). Interaction justice is the perception of employees that procedures or decisions are fair when managers provide complete and accurate information and justify their decisions (Lee et al., 2013).

According to Herrenkohl et al. (1999), employees' perceptions of fairness are the most important factor in determining empowerment levels between groups. According to Aggarwal et al. (2020), employees' perceptions of justice are influenced by differences in organisational hierarchy and power distribution. The authors state that organisational justice is an indicator of top management practices and policies and is related to both structural and psychological empowerment. The study found that organisational justice affects employees' attitudes towards work and may have social implications for the organisation. In summary, employees' perception of justice can significantly impact the performance of the organization on its employees.

### **2.3. Psychological Security and Organisational Justice**

The literature contains various studies on the potential effect of psychological safety on the perception of organisational justice. Organisational culture includes general assumptions about what is right and logical (Kilmann et al., 1988) and the way employees perceive and evaluate themselves and others (Lok et al., 2005). Organisational culture determines how decisions are made, implemented and reported within an organisation (Beugre, 2007). Therefore, employees' behaviour and perception of organisational justice are affected by their perception of the organisational culture (O'Leary-Kelly et al., 1996).

Zhang et al. (2010) found that a positive perception of psychological safety has a beneficial effect on the continuity of knowledge sharing. Hirak et al. (2012) conducted a study on healthcare workers and found a positive relationship between leader involvement and members' perception of psychological safety. This relationship was seen more strongly in low-performing units. Leroy et al. (2012) conducted a qualitative study of 54 healthcare workers and argued that leader behavioural integrity for trust helps to resolve the dichotomy between following safety protocols and talking about mistakes made against protocols. The study found a positive relationship between the behavioural integrity of health managers, who play a crucial role in building trust, and both team prioritisation and psychological safety (Leroy et al., 2012). These literature findings suggest that psychological safety indirectly impacts the perception of organisational justice. Therefore, it is predicted that the perception of psychological safety may directly affect organisational justice

Zhang et al. (2010) found that employees' positive perception of psychological safety positively affects the continuity of knowledge sharing. This suggests that when employees feel psychologically safe in their work environment, they are more likely to engage in knowledge sharing activities, which could contribute to a sense of fairness in the organization.

Hirak et al. (2012) conducted a study focusing on healthcare workers and discovered a positive relationship between leader involvement and members' perception of psychological safety. Particularly in low-performing units, leader involvement seemed to enhance the sense of psychological safety among employees. This indicates that leadership behavior plays a crucial role in fostering psychological safety, which in turn could influence perceptions of organizational justice.

Leroy et al. (2012) conducted a qualitative study involving healthcare workers and highlighted the importance of leader behavioral integrity in building trust within the team. They found that leader behavioral integrity, especially in adhering to safety protocols and addressing mistakes transparently, positively correlated with team prioritization and psychological safety. This suggests that trust-building behaviors by leaders can contribute to a climate of psychological safety, ultimately influencing perceptions of organizational justice.

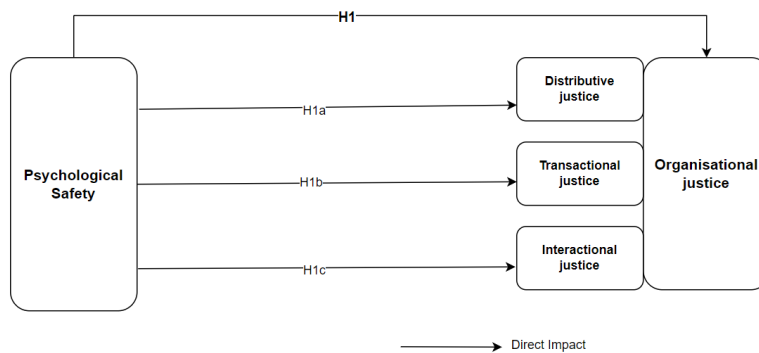
Overall, these studies suggest that psychological safety indirectly impacts employees' perceptions of organizational justice. Employees who feel psychologically safe in their work environment are more likely to perceive organizational procedures and decisions as fair and just. Therefore, it is essential for organizations to foster psychological safety among employees to promote a sense of fairness and justice in the workplace. Further research could explore additional factors that mediate or moderate the relationship between psychological safety and organizational justice.

### 3. Method

In this section, the research model is presented first. Then, information about the sample group participating in the research and the data collection instruments will be given. Finally, the data collection process and ethical permissions are explained in detail.

#### 3.1. Research Model

The following model has been developed within the scope of the above-mentioned literature (Figure 1).



**Figure 1.** Research Model

The following hypotheses were developed within the scope of the model presented in Figure 1.

**H1:** Healthcare workers' perceptions of psychological safety have an effect on their attitudes towards organisational justice.

**H1a:** Healthcare workers' perception of psychological safety has a significant effect on distributive justice, one of the sub-dimensions of organisational justice.

**H1b:** Healthcare workers' perception of psychological safety has a significant effect on procedural justice, one of the sub-dimensions of organisational justice.

**H1c:** Healthcare workers' perception of psychological safety has a significant effect on interactional justice, one of the sub-dimensions of organisational justice.

### 3.2. Participants

The sample of this study consists of 271 health professionals working in any health institution within the borders of Istanbul province. Istanbul province and who voluntarily participated in the study. According to the power analysis conducted to test the adequacy of the sample, the sample size was considered adequate. The analysis was based on linear multiple regression with fixed model and specifically the deviation of  $R^2$  from zero was of  $R^2$  from zero was examined.

- The following basic parameters were considered in the power analysis
- Effect size ( $f^2$ ): 0.15
- Significance level ( $\alpha$  err prob): 0.05
- Power ( $1-\beta$  error probability): 0.95
- Number of predictors: 2

The results of the power analysis show that the decentralisation parameter ( $\lambda$ ) is 16.0500000, the critical F-value is 3.0837059, the numerator degree of freedom is 2, the denominator degree of freedom is 104, the total sample size is 107 and the actual power obtained is approximately 0.9519.

These results show that the sample size of 271 is sufficient to detect the effect size with a power of of 0.95 at the 0.05 significance level. The actual power obtained is very close to the desired power level and strengthens the reliability of the study results.

The convenience sampling technique was used for data collection. It was preferred because it allows easier, cheaper and faster data collection compared to other sampling techniques (Gürbüz & Şahin, 2016).

### 3.3. Data Collection Instruments

The survey technique was employed to obtain research data. Two scales were utilized in the study, comprising a total of 31 questions divided into three sections.

#### *Demographic Information Form*

This section was created by the researchers and includes a total of six items. Participants provide information on age, gender, perceived income status, marital status, profession, and the type of healthcare institution where they work.

### ***Psychological Safety Scale***

This scale, developed by Liang et al. (2012), is unidimensional and consists of five items. In a study by Kılıç (2021), the reliability of the scale was found to be 0.90. The scale employs a 5-point Likert scale, ranging from 1 – Strongly Disagree, 2 – Disagree, 3 – Neutral, 4 – Agree, to 5 – Strongly Agree. In this study, the reliability coefficient of the scale was determined to be 0.920, indicating a high level of reliability.

### ***Organizational Justice Scale***

The scale developed by Niehoff and Moorman (1993) to measure employees' perceived organizational justice was used. This scale, adapted into Turkish by Gürbüz and Mert (2009), comprises three dimensions and 20 items. The scale has been deemed theoretically sound in relation to other organizational variables, and overall, it is considered to be valid and reliable. The reliability analysis of the organizational justice scale resulted in a Cronbach's Alpha coefficient of 0.95. The item correlation coefficients of the organizational justice scale range between 0.329 and 0.776, indicating adequate significance levels for both total item correlation values and reliability coefficients (Gürbüz & Mert 2009). The organizational justice scale consists of three sub-dimensions: distributive justice, procedural justice, and interactional justice. The first 5 questions of the scale measure distributive justice, questions 6-11 measure procedural justice, and questions 12-20 measure interactional justice. The scale is designed as a 5-point Likert scale.

In this study, the reliability coefficient of the scale was determined as 0.963 with SPSS 25 programme. Additionally, the reliability coefficients for the sub-dimensions were found to be 0.928 for distributive justice, 0.878 for procedural justice, and 0.955 for interactional justice, indicating a high level of reliability.

### **3.4. Data Collection and Analysis**

The obtained data were first subjected to a missing data examination, revealing no missing data. To decide on the method for analyzing the data, normality distribution was examined. Skewness and kurtosis coefficients were considered as indicators of normality. Accordingly, it was determined that the skewness and kurtosis values for both scales and their sub-dimensions were within the normal limits (+1.137/-2.015) (Tabachnick & Fidell, 2001). Therefore, parametric tests were used to determine differences by demographic variables. Initially, the reliability of the scales was assessed. T-tests were used to compare two groups for differences based on demographic variables, while ANOVA Tests were employed for comparisons involving three or more groups. Multiple regression analysis was conducted to determine the impact of psychological safety perception on organizational justice and its sub-dimensions. IBM SPSS 25 software was utilized for data analysis.

### **3.5. Ethical Compliance**

After determining the purpose and scope of the study, necessary forms were created to evaluate ethical appropriateness. An application was submitted to the X University Scientific Research and Publication Ethics Committee for ethical evaluation. Ethical approval was granted with the

committee’s decision dated 28.02.2023 and numbered E-18457941-050.99-83663. A brief paragraph explaining the purpose of the study was included at the beginning of the survey administered to healthcare workers, and their informed consent was obtained. The study data were collected through an online survey from 28.02.2023 to 10.12.2023.

#### 4. Findings

Table 1 shows the demographic information of the individuals who participated in the study.

**Table 1.** Demographic Characteristics of the Individuals Participating in the Study

Variables		n	%	Variables	n	%	
<b>Gender</b>	Female	191	70.5	<b>Marital Status</b>	Married	127	46.9
	Male	80	29.5		Single	144	53.1
<b>Income Status</b>	Bad	78	28.8	<b>Profession</b>	Doctor	41	15.1
	Medium	134	49.4		Nurse	80	29.5
	Good	59	21.8		Administrative Workers	78	28.8
<b>Age</b>	18-25	45	16.6		Other Health Workers	72	26.6
	26-35	105	38.7	<b>Employed</b>	Public	88	32.5
	36-45	84	31.0		Special	136	50.2
	46-55	31	11.4		University	47	17.3
	56 years and older	6	2.2				

Table 1 presents the demographic characteristics of the healthcare workers participating in the study. Accordingly, 70.5% of the participants are female, 49.4% describe their income level as moderate, 38.7% are in the 26-35 age range, 53.1% are single, 29.5% are nurses, and 50.2% are employed in private hospitals.

**Table 2.** Descriptive Statistics

Variable	n	Min.	Max.	Mean	Standard Deviation
Psychological Safety	271	1.00	5.00	3.99	.881
Distributive Justice	271	1.00	5.00	2.71	1.013
Transactional Justice	271	1.00	5.00	2.75	.999
Interactional Justice	271	1.00	5.00	2.98	1.032

According to Table 2, healthcare workers’ perceptions of psychological safety (3.99) are above the average, indicating a tendency toward “agree.” On the other hand, healthcare workers’ perceptions of distributive justice (2.71), procedural justice (2.75), and interactional justice (2.98) are slightly below the average, and there is a general tendency of indecision.

**Table 3.** T Test Results

Variables	Marital Status	Mean	Standard Deviation	t	p
<b>Psychological Safety</b>	Married	4.05	.817	.825	.410
	Single	3.96	.936		



<b>Organisational Justice</b>	Married	3.05	.974	3.127	<b>.002</b>
	Single	2.68	.928		
<b>Variables</b>	<b>Gender</b>	<b>Mean</b>	<b>Standard Deviation</b>	<b>t</b>	<b>p</b>
<b>Psychological Safety</b>	Woman	3.95	.878	-1.520	.130
	Male	4.12	.882		
<b>Organisational Justice</b>	Woman	2.72	.891	-3.598	<b>.000</b>
	Male	3.17	1.061		

Table 3 shows that healthcare workers' perceptions of psychological safety do not vary based on marital status and gender ( $p > 0.05$ ). In other words, perceptions of psychological safety do not differ based on marital status and gender. However, organizational justice perception has been found to significantly differ based on marital status and gender ( $p < 0.05$ ). Accordingly, the organizational justice perceptions of married individuals (3.05) are higher than those of single individuals (2.68) (Cohen's  $d$ : 0.28), and the organizational justice perceptions of males (3.17) are higher than those of females (2.72) (Cohen's  $d$ : 0.41).

Before performing the ANOVA test, it was checked whether the data were homogeneously distributed. Accordingly, the homogeneity of the variables was tested (Levene's test). As a result, it was found that all values were  $p > .05$  in the homogeneity of variances test. Therefore, it was decided that the variances were homogeneous and that the Anova test was appropriate to determine the differences.

**Table 4.** Anova Test Results-1

<b>Income Status</b>		<b>Sum of Squares</b>	<b>Degrees of Freedom</b>	<b>Mean Squares</b>	<b>F</b>	<b>p</b>	<b>Source of Difference</b>
Psychological Safety	Between Groups	10.471	2	5.236	7.038	<b>.001</b>	Bad (3.88)
	In-group	199.366	268	.744			Medium (3.90)
	Total	209.838	270				Good (4.37)
Organisational Justice	Between Groups	37.694	2	18.847	23.366	<b>.000</b>	Bad (2.49) Medium (2.77)
	In-group	213.696	268	.797			Good (3.52)
	Total	251.390	270				
<b>Profession</b>		<b>Sum of Squares</b>	<b>Degrees of Freedom</b>	<b>Mean Squares</b>	<b>F</b>	<b>P</b>	<b>Source of Difference</b>
Psychological Safety	Between Groups	4.280	3	1.427	1.853	.138	No Difference
	In-group	205.558	267	.770			
	Total	209.838	270				
Organisational Justice	Between Groups	19.567	3	6.522	7.512	<b>.000</b>	Doctor (3.34)
	In-group	231,823	267	,868			Nurse (2.61) Other Health Workers
	Total	251,390	270				(2.67)

In Table 4, it is observed that individuals' perceptions of psychological safety and organizational justice vary based on income level ( $p < 0.05$ ). To determine which groups the significant differences,

originate from, the LSD test was employed. According to the findings, healthcare workers who report a good income level (4.37) have a higher level of psychological safety perception compared to those who report poor (3.88) and moderate (3.90) income levels (Eta Squared: 0.050). Additionally, those who report a good income level (3.52) have a higher level of organizational justice perception compared to those who report poor (2.49) and moderate (2.77) income levels, and those who report moderate income levels have a higher organizational justice perception than those who report poor income levels (Eta Squared: 0.150).

In Table 4, it is observed that the perceptions of psychological safety among healthcare workers do not vary based on the type of profession ( $p > 0.05$ ). However, organizational justice perception differs based on the type of profession ( $p < 0.05$ ). According to the LSD test results, doctors (3.34) have a higher level of organizational justice perception compared to nurses (2.61) and other healthcare workers (2.67) (Eta Squared: 0.078).

**Table 5. Anova Test Results-2**

Employed Institution		Sum of Squares	Degrees of Freedom	Mean Squares	F	p	Source of Difference
Psychological Safety	Between Groups	1.479	2	.740	.951	.387	No
	In-group	208.358	268	.777			Difference
	Total	209.838	270				
Organisational Justice	Between Groups	2.733	2	1.367	1.473	.231	No
	In-group	248.657	268	.928			Difference
	Total	251.390	270				
Age		Sum of Squares	Degrees of Freedom	Mean Squares	F	P	Source of Difference
Psychological Safety	Between Groups	3.284	4	.821	1.057	.378	No
	In-group	206.553	266	.777			Difference
	Total	209.838	270				
Organisational Justice	Between Groups	12.953	4	3.238	3.612	<b>.007</b>	26-35 (2.65)
	In-group	238.437	266	.896			36-45 (2.88)
	Total	251.390	270				

According to Table 5, perceptions of psychological safety and organizational justice among healthcare workers do not vary based on the institution of employment ( $p > 0.05$ ). Additionally, it has been determined that perceptions of psychological safety do not change according to the variable of age ( $p > 0.05$ ). However, perceptions of organizational justice vary based on the age variable ( $p < 0.05$ ). According to the LSD test results aimed at identifying the source of the difference, healthcare workers in the 36-45 age group (2.88) were found to have a higher level of organizational justice perception compared to those in the 26-35 age group (2.65) (Eta Squared: 0.052).

**Table 6.** Regression Analysis Results

Independent Variable	Dependent Variable	B	R <sup>2</sup>	Standard. R <sup>2</sup>	t	F	p
Psychological Safety (Model-1)	Distributive Justice	.464	.180	.176	7.672	58.863	.000
	Transactional Justice	.441	.147	.144	6.805	46.308	.000
	Interactional Justice	.412	.132	.129	6.404	41.009	.000
Psychological Safety (Model-2)	Organisational Justice (All Scale)	.504	.185	.182	7.815	61.071	.000

In Table 6, regression analysis was conducted to determine the impact of the perception of psychological safety on organizational justice perception. Accordingly, it is observed that the relationships are significant ( $p < 0.05$ ). Psychological safety explains 18% of distributive justice (Standard  $R^2$ : 0.176), 14% of procedural justice (Standard  $R^2$ : 0.144), and 41% of interactional justice (Standard  $R^2$ : 0.129). It indicates that psychological safety explains 18% of organizational justice (Standard  $R^2$ : 0.182). Thus, hypotheses H1, H1a, H1b, and H1c are accepted.

## 5. Discussion

This study aimed to reveal the impact of healthcare workers' perceptions of psychological safety on their perceptions of organizational justice, and significant findings were obtained. These findings will be discussed in this section by comparing them with similar studies in the literature.

It was observed that the perception of psychological safety among healthcare workers was above average. The perception of psychological safety did not vary according to gender, occupation type, workplace, age, and marital status. It was found that healthcare workers who reported their income level as good had a higher level of psychological safety perception compared to those who evaluated their income as poor or moderate. Ingrid & Edmondson (2006), Yener (2014), and Ertuklu et al. (2019) found no significant relationship between employees' gender and psychological perceptions. Edmondson (2006) and Ertuklu et al. (2019) also found no significant difference in psychological safety between years of service in their studies. Carmeli et al. (2009) and Ertuklu et al. (2019) demonstrated that there was no significant relationship between the perception of psychological safety and age factor in their studies. Newman et al. (2017) examined 44 research articles in the scope of a study conducted on academic publications related to psychological safety. As a result, the research revealed that organizational factors such as supportive leadership actions, corporate support practices, relationship networks, and team characteristics play a crucial role in the formation of the perception of psychological safety. These factors reduce employees' concerns about facing criticism, being belittled, or being punished, contributing to the strengthening of the perception of psychological safety and the development of factors such as job satisfaction, job fulfillment, and workplace belongingness. The perception of psychological safety is generally the result of many factors and can also be the cause for many factors. For example, an employee with a high level of psychological safety perception in an organization is more comfortable expressing themselves, viewing events more positively, and easily engaging in many actions because they believe they will receive positive feedback. On the other hand, in an environment where layoffs are common, pressure is experienced, and trust and justice are lacking, a high level of psychological safety perception cannot be expected. In this regard, in practice, it is evident that a good level of psychological safety perception among healthcare workers will pave the way for many positive actions.

Healthcare workers' perceptions of organizational justice were found to be slightly below average. The study indicated that the perception of organizational justice among healthcare workers did not vary according to the workplace. It was observed that married individuals had a higher perception of organizational justice compared to singles, men had a higher perception than women, doctors had a higher perception compared to nurses and other healthcare workers, and those who reported a good income level had a higher perception compared to those who reported poor or moderate levels. Doğangün (2020), Akman (2017), Korkmazer & Pirol (2021), and Kelekçioğlu & Alper Ay (2022) found that organizational justice did not vary according to gender, years of service, age, and education level. The organizational justice perceptions of male healthcare workers were higher than those of females. Healthcare workers aged 46-55 had higher organizational justice perceptions compared to other age groups. It was found that healthcare workers who reported their income as very good had higher perceptions of organizational justice compared to those who reported poor income levels. In a study conducted by Kelekçioğlu & Alper Ay (2022), it was determined that healthcare workers earning "2500 TL or less" monthly had low perceptions of organizational justice. The highest justice perception group consisted of employees earning between "3501-4500 TL." Abbasoğlu (2015) found that higher income increased organizational justice. Additionally, Abbasoğlu (2015) observed that married employees had higher perceptions of organizational justice compared to single employees. Kelekçioğlu & Alper Ay (2022) found that organizational justice did not vary according to marital status. In the study, doctors were found to have higher perceptions of organizational justice compared to other employees. In a study by Kelekçioğlu & Alper Ay (2022), it was found that healthcare technicians had the highest, while administrative staff had the lowest level of organizational justice perception. Moreover, in the study by Abbasoğlu (2015), participants in the "other employees" occupation group had lower organizational justice levels compared to doctors, healthcare technicians, nurses, and administrative staff groups. The perception of organizational justice is influenced by various factors, but especially employees with higher income and better professional positions are generally expected to have a higher perception of organizational justice compared to other employees.

The perception of psychological safety among healthcare workers has been found to have a significant and crucial impact on all sub-dimensions of organizational justice. There are numerous studies in the literature that indirectly support this relationship. According to Edmondson (2006), psychological safety is the perception of what consequences an individual might face regarding potential risks in their work life. When employees make decisions, psychological safety comes into play when they worry about whether they will encounter any negative attitudes, behaviors, or reactions if they take a certain action, encouraging the individual to do what is necessary. On the other hand, the perception of psychological safety is a key source for employees when it comes to learning new things and taking new steps. The higher the psychological safety, the more comfortable the employee feels, leading to various positive developments (Schein, 1993). Recent research also indicates that psychological safety supports the integration of work (May et al., 2004).

Issues of justice or fair treatment are a significant concern for almost all individuals. In work environments, employees often evaluate whether the rewards they receive align with the contributions they make to the organization or with the rewards obtained by their colleagues (Adams, 1965). Therefore, in organizations where the perception of psychological safety is high, it is anticipated and expected that the perception of organizational justice will also be high, reflecting a direct and interactive relationship.

### **5.1. Limitations and Future Directions**

Like any study, this research also has various limitations. The limitations of this study can be summarized as follows:

The results cannot be generalized, the findings reflect the results of the sample. This situation carries the risk of not fully reflecting the perspective of healthcare workers in other regions of Turkey. The use of convenience sampling in selecting the sample may also limit the generalization of the results to a broader population.

Scales: The survey format used as the data collection tool has the potential to influence participants' responses based on their emotional states and the events, they experience at the time of completing the survey. Additionally, although the reliability levels of the scales are high, participants providing data based on their own perceptions and the subjective nature of this data may restrict the interpretation and generalization of the findings in the research.

These results suggest to managers and human resources professionals that strategies should be developed to support employees' psychological safety and enhance perceptions of justice. Managing organizational policies and practices in a fair and transparent manner can increase employees' psychological safety and positively impact workplace culture. Establishing a psychologically safe environment and emphasizing justice in healthcare institutions can contribute to employees experiencing a more satisfying and productive work life.

## **6. Conclusion**

As a result, it has been determined that as employees' perception of psychological safety increases, the variables of distributive justice, interactional justice, and procedural justice also increase. In other words, the elevation of psychological safety perception positively influences employees' perceptions of justice.

These findings highlight the significance of employees' psychological safety levels in organizations and emphasize the need to consider the impact of this level on perceptions of justice. Enhancing the psychological safety of employees in the workplace can improve their perceptions of justice, thereby positively affecting employee motivation, job satisfaction, and performance.

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